



DEPARTMENT OF MENTAL HEALTH
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LISA H. WONG, Psy.D.
Director

Curley L. Bonds, M.D.
Chief Medical Officer

Connie D. Draxler, M.P.A.
Acting Chief Deputy Director

April 09, 2024

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

Dear Supervisors:

ADOPTED

BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

50 April 9, 2024


JEFF LEVINSON
INTERIM EXECUTIVE OFFICER

**APPROVAL TO EXTEND THE EXISTING MENTAL HEALTH COMMUNITY- BASED INCUBATION
ACADEMY CONTRACT WITH COMMUNITY PARTNERS AND INCREASE FUNDING ON A SOLE
SOURCE BASIS
(ALL SUPERVISORIAL DISTRICTS)
(3 VOTES)**

SUBJECT

Request approval to amend the existing Mental Health Community-Based Incubation Academy contract with Community Partners to increase funding for Fiscal Year 2023-24 and extend the term through Fiscal Year 2025-26 on a sole source basis.

IT IS RECOMMENDED THAT THE BOARD:

1. Approve and authorize the Director of Mental Health (Director), or designee, to prepare, sign, and execute a sole source amendment (Attachment I) to the existing contract with Community Partners to increase the Total Contract Sum (TCS) for Fiscal Year (FY) 2023-24, and to extend the contract term through FY 2025-26. For FY 2023-24, the increase is \$1,559,206, for a revised TCS of \$7,375,616; and the TCS for FYs 2024-25 and 2025-26 are \$8,985,661 and \$6,680,639, respectively. The revised TCS is \$34,696,695. This contract is fully funded by State Mental Health Services Act (MHSA) revenue.
2. Delegate authority to the Director, or designee, to prepare, sign, and execute future amendments to the Contract in Recommendation 1 to revise the boilerplate language; revise the annual TCS; roll over unspent funds; add, delete, modify, or replace the Statement of Work; and/or reflect federal, State, and County regulatory and/or policy changes provided that: 1) the increase will not exceed 10 percent of the Board-approved TCS in Recommendation 1; and 2) sufficient funds are available. Any amendments will be subject to prior review and approval as to form by County Counsel, with written

notice to the Board and Chief Executive Office (CEO).

3. Delegate authority to the Director, or designee, to terminate the Contract described in Recommendation 1 in accordance with the termination provisions, including Termination for Convenience. The Director, or designee, will provide written notification to your Board and CEO of such termination action.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

The purpose of this action is to expand the program and extend the term of the Contract with Community Partners so that additional Community Based Organizations (CBO) can be trained and gain a firm understanding of County contracting process so they will be able to apply for and compete in solicitations countywide.

Board approval of Recommendation 1 will allow Department of Mental Health (DMH) to amend the existing Contract with Community Partners to continue performing as the fiscal intermediary for the Incubation Academy. The additional funds for FY 2023-24 will be utilized for onboarding new CBOs over the course of the contract term.

Board approval of Recommendation 2 will allow DMH to amend the Contract to revise the boilerplate language; revise the annual TCS; rollover unspent funds; add, delete, modify, or replace the Statements of Work; and/or reflect federal, State, and County regulatory and/or policy changes for the continued provision of the Incubation Academy without interruption to these services.

Board approval of Recommendation 3 will allow DMH to terminate the Contract in accordance with the Contract's termination provisions, including Termination for Convenience, in a timely manner, as necessary.

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 I.1 – Increase Our Focus on Prevention Initiatives; Strategic Plan Goal II, Foster Vibrant and Resilient Communities via Strategy II.1 – Drive Economic and Workforce Development in the County and Strategy 11.2 – Support the Wellness of our Communities.

FISCAL IMPACT/FINANCING

The TCS increase of \$1,559,206 for FY 2023-24 is fully funded by State MHPA revenue and is included in DMH's FY 2023-24 Supplemental Budget.

Funding for future fiscal years will be requested through DMH's annual budget process.

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

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The addition of funds for FY 2023-24 will allow Community Partners to continue to provide targeted

trainings and technical assistance to the 28 existing CBOs participating in the Incubation Academy, as well as onboarding an additional 5 CBOs during this period. It is anticipated that by June 30, 2024, the original 28 CBOs will complete the Incubation Academy and further develop ongoing relationships with DMH. The five additional CBOs are projected to complete the Incubation Academy process by June 30, 2026.

The contract with Community Partners is set to expire on June 30, 2024. The requested extension through June 30, 2026, will allow Community Partners to expand the number of CBOs trained and prepared to compete in future countywide solicitations as they will have a firm understanding of the County solicitation and contracting process.

It is projected that during FY 2024-25, up to 10 additional CBOs are scheduled to be admitted to the Incubation Academy to participate in a new 2-year cohort that has a completion date of June 30, 2026. In FY 2025-26, an additional 10 new CBOs will participate in the new one-year cohort training with the expectation that all 25 CBOs will complete the Incubation Academy by June 30, 2026.

It is expected that Community Partners will continue to provide training and technical support to all CBOs including in their role as DMH's fiscal intermediary in providing funding through this contract.

On August 4, 2023, DMH provided your Board the most recent semi-annual progress report with an update on the implementation progress of the Incubation Academy. The attached amendment format (Attachment I) has been approved as to form by County Counsel.

On September 13, 2023, DMH notified your Board of its intent to request a Sole Source Contract extension with Community Partners for the continued provision of the Incubation Academy (Attachment II). DMH considers this request approved, as no objections were received from the Board offices. The required Sole Source Checklist (Attachment III) was also approved by CEO.

As mandated by your Board, the performance of all contractors is evaluated by DMH on an annual basis to ensure the contractor's compliance with all contract terms and performance standards.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Board approval of the recommended actions will allow Community Partners to continue serving as the fiscal intermediary to the CBOs to provide prevention-related mental health services with their communities.

The Honorable Board of Supervisors

4/9/2024

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Respectfully submitted,

A handwritten signature in black ink that reads "Lisa H. Wong, Psy.D." in a cursive style.

LISA H. WONG, Psy.D.

Director

LHW:CDD:KNSK:RLR:DO:atm

Enclosures

c: Executive Office, Board of Supervisors
Chief Executive Office
County Counsel

ATTACHMENT I

CONTRACT NO. MH280001

AMENDMENT NO. 7

THIS AMENDMENT is made and entered into this __ day of ____, 2024, by and between the COUNTY OF LOS ANGELES (hereafter "County") and Community Partners (hereafter "Contractor").

WHEREAS reference is made to that certain document entitled "Department of Mental Health Community Based Incubation Academy Implementation Contract" dated October 23, 2019, and further identified as County Contract No. MH280001, and any amendments thereto (hereafter collectively "Contract"); and

WHEREAS, on April 9, 2024, the County Board of Supervisors approved the Director of Mental Health, or designee, to increase funding for FY 2023-24 and extend the term of the Contract for two additional FYs through FY 2025-26; and

WHEREAS, said Contract provides that changes may be made in the form of a written amendment which is formally approved and executed by the parties; and

WHEREAS, County and Contractor intend to amend the Contract to extend the term of the contract through June 30, 2026, modify the Statement of Work (SOW), revise the Total Contract Sum (TCS) and Funding Summary; and make other hereinafter designated changes; and

WHEREAS, Contractor warrants that it continues to possess the competence, expertise, and personnel necessary to provide services consistent with the requirements of the Contract, and consistent with the professional standard of care for these services.

NOW, THEREFORE, County and Contractor agree as follows:

1. This amendment is hereby incorporated into the original Contract, and all its terms and conditions, including capitalized terms defined therein, shall be given full force and effect as if fully set forth herein.
2. This amendment is effective upon execution.
3. The term of the Contract is extended through June 30, 2026.
4. For FY 2023-24, the TCS is increased by \$1,559,206 from \$5,816,410 to \$7,375,616.
5. For FY 2024-25 the TCS is \$8,985,661.
6. For FY 2025-26 the TCS is \$6,680,639.
7. The total revised TCS is \$34,696,695.
8. Exhibit A (SOW) - 7, attached hereto and incorporated herein by reference, is added to the Contract.
9. Exhibit B (Funding Summary) - 6 shall be deleted in its entirety and replaced with Exhibit B (Funding Summary) – 7, attached hereto and incorporated by reference. All references in the Contract to Exhibit B (Funding Summary) - 6, shall be deemed amended to state “Exhibit B (Funding Summary) - 7.”
10. Except as provided in this amendment, all other terms and conditions of the Contract shall remain in full force and effect.

/

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 designee, and Contractor has caused this amendment to be subscribed on its behalf by its duly authorized officer, on the day, month, and year first above written.

COUNTY OF LOS ANGELES

By _____
LISA H. WONG, Psy.D.
Director
County of Los Angeles
Department of Mental Health

Community Partners
CONTRACTOR

By _____

Name Alicia Lara

Title President and CEO

(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM:
OFFICE OF THE COUNTY COUNSEL

By: Rachel Kleinberg
Senior Deputy County Counsel

MENTAL HEALTH INCUBATION ACADEMY EXTENSION

STATEMENT OF WORK

1.0 INTRODUCTION

The County of Los Angeles Prevention and Early Intervention (PEI) plan articulates the value of providing individuals and communities with mental health education and outreach and facilitating early identification of mental illness as a strategy for mitigating costly negative long-term outcomes for mental health consumers and their families. Prevention programs intend to 1) engage individuals before the development of serious mental illness or serious emotional disturbance, and/or 2) alleviate the need for additional or extended mental health treatment by facilitating access to services and supports at the earliest signs of mental health struggles.

On October 23, 2019, the Los Angeles County Department of Mental Health (LACMH) entered into an agreement with Community Partners for the implementation of Community-Based Mental Health Incubation Academy Services. Community Partners provided oversight of the implementation of the Mental Health Incubation Academy (MHIA) pilot project providing mentoring, training, technical support, and financial resources to grass roots community-based organizations (CBOs) participating in the MHIA.

Participating CBOs are expected to implement a short-term project focused on providing prevention-related mental health activities and programs within their communities, rather than provide mental health services.

1.1 Community Partners will continue to provide implementation oversight of the MHIA with the following 28 CBOs participating during Fiscal Year (FY) 2023-2024:

Mental Health Incubation Academy CBOs

African Coalition	Peace4Kids
Alliance for Community Empowerment	Program for Torture Victims
Champion Counseling	Project Joy
Drumming for Your Like	Right Way Foundation
Foster All	Ronnie's House
Gente Organizada	San Gabriel Valley Conservation Corps
Hands of Hope	Straightening Reins Foundation
Lancaster Street Company	Street Poets
Legacy	The Way Center of Truth
Long Beach Blast	Tia Chucha
Meals on Wheels	Westmont Counseling Center
Ohana Center	Westside Coalition

Mental Health Incubation Academy CBOs

Parents Anonymous	Whole Systems Learning
Pathways to Independence	Wolf Connection

2.0 ACTIVITIES TO BE PROVIDED

- 2.1 During each fiscal year, CBOs will implement a Prevention project. Participating CBOs were surveyed to determine the projects to be implemented.
- 2.2 Under the State MHSA PEI Plan, Prevention Programs means a set of related activities to reduce Risk Factors for developing a potentially serious mental illness and build Protective Factors. Prevention promotes positive cognitive, social, and emotional development and encourages a state of wellbeing that allows the individual to function well in the face of changing and sometimes challenging circumstances.

2.2.1 Tier Approach to Prevention

CBOs will provide Universal and/or Selective Prevention activities as described below.

2.2.1.1 *Universal Prevention* targets the public or a whole population group without focusing on specific risks of individuals/persons. Universal Prevention activities focus on promotion/awareness, education and training of individuals, families, and community members about mental health facts and statistics, identifying mental health symptoms, how to respond, what steps to take to get assistance, and developing coping skills. It also supports increased access to care through coordination and linkage to community resources. The emphasis at this level is on broad, community-wide efforts to promote positive mental health.

2.2.1.2 *Selective Prevention* targets some individuals or a subgroup whose risk of developing mental illness is higher than average. Selective Prevention includes activities, resources, and supports intended to address the needs of at-risk and trauma-exposed groups of individuals in an effort to prevent serious mental illness.

- 2.3 Each CBO must understand and utilize the strengths of culture in all project activities and incorporate the languages and cultures of their clients to provide the most effective outcomes.
- 2.3.1 Project activities shall align with the Los Angeles County Anti-Racism, Diversity, and Inclusion (ARDI) Initiative and address issues of disparity impacting family stability, health and wellbeing, education, employment, economic development, public safety, criminal justice, and housing. (Please see link: [The L.A. County Anti-Racism, Diversity, and Inclusion Initiative – Los Angeles County \(lacounty.gov\)](https://lacounty.gov/anti-racism-diversity-and-inclusion-initiative))
- 2.4 Prevention activities rendered by the CBOs shall:
- 2.4.1 Be designed, implemented and promoted in ways that improve timely access to mental health services for individuals and/or families from underserved populations (as defined in Title 9 California Code of Regulations Section 3200.300).
- 2.4.2 Increase access and linkage to medically necessary care and treatment for individuals as early in the onset of mental illness as practicable including, but not limited to, care provided by County mental health programs.
- 2.4.3 Be promoted, designed and implemented in ways that reduce and circumvent stigma, including self-stigma and discrimination related to being diagnosed with a mental illness, having a mental illness or seeking mental health services.
- 2.4.4 Engage, encourage, educate and/or train individuals on ways to recognize and respond effectively to early signs of potentially severe and disabling mental illness. This includes reaching out to individuals with signs and symptoms of a mental illness, which can assist the individual with recognizing and responding to their own symptoms.
- 2.4.5 Enhance and/or expand agencies' or organizations' knowledge and skills in the mental health field for the benefit of special population groups.
- 2.4.6 Provide education and/or information to individuals and communities regarding mental health service programs in an effort to prevent the onset of mental health-related problems.

2.4.7 Emphasize strategies to reduce the following negative outcomes that may result from an untreated mental illness:

- 2.4.7.1 Suicide;
- 2.4.7.2 Incarcerations;
- 2.4.7.3 School failure or dropout;
- 2.4.7.4 Unemployment;
- 2.4.7.5 Prolonged suffering;
- 2.4.7.6 Homelessness; and
- 2.4.7.7 Removal of children.

3.0 PERSONS TO BE SERVED

3.1 Prevention Target Population

Prevention activities shall target individuals, members of groups or large groups who may be at-risk and/or part of the general population to promote prevention of mental health illness. Prevention priority populations include the following:

- 3.1.1 Trauma-exposed individuals
- 3.1.2 Individuals at risk of experiencing onset of serious psychiatric illness
- 3.1.3 Individuals experiencing extreme stressors
- 3.1.4 Underserved cultural populations

Each CBO's respective MOU will describe the specific population that will be served.

3.2 Numbers Reached

The numbers for individuals, families, and/or groups reached through the project will depend on the program scale and activities based on the program tier of prevention.

4.0 SERVICE GOALS

As a result of the prevention activities conducted, there should be measurable improvement in Protective Factors and reduction of Risk Factors, thereby preventing a mental health problem from getting worse and/or avoiding the need for mental health treatment or services.

5.0 DATA COLLECTION AND OUTCOMES

CBOs shall submit data to Community Partners on a quarterly basis. The following data shall be collected and submitted:

- 5.1 Total numbers reached (sign-in sheets);
- 5.2 Numbers attending each training, event, class, and/or group;
- 5.3 Number of trainings, events, classes, and/or groups convened;
- 5.4 Number of referrals and successful linkages to mental health;
- 5.5 Completed DMH-approved evaluation tool to measure client's reduction in Risk Factors and improvement in Protective Factors;
- 5.6 Completed evaluation tool for trainings;
- 5.7 Completed outcome measure to assess overall effectiveness of prevention activities; and
- 5.8 Socio-demographic information in accordance with the reporting guidelines identified in the MHSAs PEI Regulations. Please see link: https://mhsoac.ca.gov/wp-content/uploads/PEI-Regulations_As_Of_July-2018.pdf.
This data shall be collected for all individuals participating in program activities. Data shall include, but is not limited to the following:

- 5.8.1 Age;
- 5.8.2 Race;
- 5.8.3 Ethnicity;
- 5.8.4 Primary language;
- 5.8.5 Sexual orientation;
- 5.8.6 Disability;
- 5.8.7 Veteran status;
- 5.8.8 Gender assigned at birth; and
- 5.8.9 Current gender identity.

6.0 LACDMH RESPONSIBILITIES

LACDMH shall:

- 6.1 Identify a lead to serve on the MHIA planning team to assist with curriculum development; identify and coordinate LACDMH experts to facilitate trainings specific to LACDMH, County, Federal and State requirements; support Community Partners; and provide any additional support identified to aid in MHIA implementation. The individual will serve as a point of contact for Community Partners to address questions received from the CBOs pertaining to their area of expertise. A lead will be identified from the following divisions. This is not an exhaustive list; other Department Divisions will be included as needed.
 - 6.1.1 Budget Financial and Reporting Division (BFRD);
 - 6.1.2 Contract Development and Administration Division (CDAD);
 - 6.1.3 Contract Management and Monitoring Division (CMMD);
 - 6.1.4 Quality Assurance (QA);
 - 6.1.5 Chief Information Office Bureau (CIOB);

- 6.1.6 Prevention and Outcomes Division; and
- 6.1.7 Prevention Services Division.

- 6.2 Host meeting with Community Partners prior to each training session to review and discuss curriculum and training content.
- 6.3 Provide written materials for each training to be disseminated to the CBOs.
- 6.4 Create an evaluation tool to be administered to CBOs pre- and post- each training and booster session questionnaires.
- 6.5 LACDMH will provide targeted trainings by LACDMH subject matter experts to develop the CBOs service delivery efforts and provide additional technical assistance on required terms and conditions for the County's contracting process to prepare them to compete for future solicitations. Trainings will include, but are not limited to:

- 6.5.1 Budget and Finance;
- 6.5.2 Contracting and Subcontracting;
- 6.5.3 Documenting, Claiming and Invoicing; and
- 6.5.4 Data Collection and Outcomes.

6.6 Training Delivery

- 6.6.1 Provide a minimum of 5 trainings on core topics, followed by quarterly booster sessions for contracting and successful on-boarding in the County system, over the course of the FY.
- 6.6.2 Trainings will be provided bi-monthly with follow-up booster sessions conducted quarterly to provide an opportunity for cohort participants to ask questions and gather any additional information needed.
- 6.7 Prepare semi-annual implementation progress reports for the Board of Supervisors to provide an update on the CBOs projects and program progress.
- 6.8 Host quarterly meetings in partnership with Community Partners for CBOs addressing project implementation; apply training curriculum successes, challenges and concerns; and identify additional training and technical assistance needs.
- 6.9 Plan and coordinate logistics for in-person information sessions, inviting current CBOs to meet with other County departments and learn about

various contract opportunities. Logistics include, but are not limited to, securing venue, food, and County leads.

7 COMMUNITY PARTNERS RESPONSIBILITIES

Community Partners shall:

7.1 Serve as fiscal intermediary

7.1.1 Provide fiscal monitoring of CBOs and approval of invoices.

7.2 Convene two 1:1 meetings with CBOs to discuss compliance with performance-based criteria, organizational strengths, areas of improvement and contracting readiness (including, but not limited to, infrastructure, communication and responsiveness, fiscal management, reporting, and program compliance). These meetings are separate from the coaching hours indicated in Section 7.4.

7.2.1 Meetings shall be convened at the beginning and end of the extension year.

7.3 Coordinate and schedule trainings and convenings including, but not limited to, sending calendar invites, tracking CBOs participation/attendance in trainings, disseminating training materials prior to training sessions, monitoring the chat box and filtering questions during training sessions, administering and collecting training evaluation tools (developed by DMH), compiling evaluation responses, providing tech support to disseminate post- training materials.

7.4 Source expert(s) to provide in-depth presentation on identifying and securing diversified funding to support programs and operations. Community Partners reviews/co-designs presentation to ensure it is relevant to cohort and conducts technical run-through meetings with presenter(s) prior to presentation. Facilitates meeting and coordinates all logistics.

7.5 Provide up to 5 hours of coaching and technical assistance to each CBO.

- 7.5.1 Coaching sessions related to scope of work implementation, fiscal management, and organizational capacity building goals will be provided throughout the year upon CBOs request.
- 7.6 Serve as the primary point of contact for the CBOs, consulting with the DMH division leads as necessary to support and address a CBO's need.
- 7.7 Utilize a performance-based criteria to measure CBOs performance related to program deliverables, operational processes, and participation in the MHIA.
- 7.8 Participate in pre-meet with LACDMH prior to each training session to review and discuss training content.
- 7.9 Host quarterly meetings in partnership with LACDMH for CBOs addressing project implementation; application of training curriculum successes, challenges and concerns; and identification of additional training and technical assistance needs.
- 7.10 Quarterly and annual reporting on implementation, including data collection for numbers served and outcomes tools.
- 7.10 Up to 5 additional CBOs, selected by DMH, will onboard the MHIA on a rolling basis throughout FY 2023-24. New CBOs will participate in the program for up to two years. FY 2023-24 will be prorated according to each start date.
- 7.11 For FYs 2024-25 and 2025-26, up to 20 new CBOs (10 per FY), selected by DMH, will be scheduled to onboard and remain in the MHIA for up to two years, depending on their start date, ending June 30, 2026.
- 7.13 Support event logistics related to in-person "meet-and-greet" event, including distributing and managing RSVPs.

8 COMMUNITY BASED ORGANIZATION RESPONSIBILITIES

CBOs shall:

- 8.1 Comply with all requirements of their contract terms with Community Partners, including but not limited to the following:
 - 8.1.2 Code of Conduct: CBOs must communicate and engage with Community Partners, DMH staff, cohort members, and individuals and communities they serve, with professionalism and in a respectful manner.

- 8.1.3 Submit monthly invoices to Community Partners for expenses incurred during the month no later than 15 days following the last day of that month.
 - 8.1.4 Submit monthly data and outcomes information as outlined in section 5.0 Data Collection and Outcomes of this SOW no later than 15 days following the last day of that month.
 - 8.1.5 Maintain, and provide upon request of Community Partners and/or LACDMH, supportive documentation for all invoices submitted for reimbursement (e.g. receipts, payroll records, etc.).
- 8.2 Participate in 1:1 meeting convened by Community Partners addressing compliance with performance-based criteria, organizational strengths, areas of improvement and contracting readiness (including, but not limited to, infrastructure, communication and responsiveness, fiscal management, reporting, and program compliance).
- 8.2.1 Meetings shall be convened at the beginning and end of the extension year.
- 8.3 Participate in applicable trainings and boosters included in the MHIA training curriculum, complete post training evaluations for each training and booster session attended, indicating how knowledge/skills acquired from training sessions may be implemented and any additional support needed.
- 8.3.2 CBO must identify appropriate staff to participate in trainings, specifically the individual(s) who would most benefit from and be able to apply the training content. The CBO may have a maximum of 3 staff participate in a training session.
 - 8.3.3 New CBOs must attend all training sessions in Year 1 of the cohort. Booster sessions are optional.
 - 8.3.4 Returning CBOs have the option of attending repeat training and booster sessions in the final year of the cohort.
- 8.2 Participate in the quarterly meetings facilitated by LACDMH and Community Partners which will address project implementation; application of training curriculum successes, challenges, and concerns; and identification of additional training and technical assistance needs.

9 DEFINITIONS

9.1 Protective Factors – strengths of individuals, families and communities that act to mitigate risks and promote positive wellbeing and healthy development. The five most common Protective Factors include:

- 9.1.1 *Family Functioning/Resilience*: Having adaptive skills and strategies to persevere in time of crisis. Family's ability to openly share positive and negative experiences and mobilize to accept, solve, and manage problems.
- 9.1.2 *Social Supports*: Perceived informal care (from family, friends, and neighbors) that help support emotional needs.
- 9.1.3 *Concrete supports*: Perceived access to tangible goods and services to help families cope with stress, particularly in times of crisis or intensified need.
- 9.1.4 *Nurturing and Attachment*: The emotional tie along with a pattern of positive interaction between the parent and child that develops over time.
- 9.1.5 *Caregiver/Practitioner Relationship*: The supportive, understanding relationship between caregivers and practitioners that positively affects caregivers' success in participating in services.

9.2 Risk Factors for mental illness - conditions or experiences that are associated with a greater than average risk of developing a potentially serious mental illness. Risk Factors include, but are not limited to, biological factors including family history and neurological, behavioral, social/economic stressors, trauma, and environmental factors. Risk Factors may include, but are not limited to the following:

- 9.2.1 A serious chronic medical condition;
- 9.2.2 Adverse childhood experiences;
- 9.2.3 Experience of severe trauma;
- 9.2.4 Ongoing stress;
- 9.2.5 Exposure to drugs or toxins, including while in utero;;
- 9.2.6 Poverty;
- 9.2.7 Family conflict or domestic violence;
- 9.2.8 Experiences of racism and social inequality;
- 9.2.9 Prolonged isolation;
- 9.2.10 Traumatic loss (e.g. complicated, multiple, prolonged, severe);
- 9.2.11 Having a previous mental illness;
- 9.2.12 A previous suicide attempt; and
- 9.2.13 Having a family member with a serious mental illness.

County of Los Angeles - Department of Mental Health
Community Partners Contract Funding Summary for Incubation Academy (Transforming LA)
Exhibit B-7

Expenditures	Fiscal Year							Total
	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24	FY 2024-25	FY 2025-26	
Planning Development and Implementation of Training Content and Resources	\$147,718	\$287,244	\$288,614	\$0	\$719,778	\$448,269	\$370,593	\$2,262,216
Coaching, Training Logistics, Performance-Based Evaluation	\$0	\$0	\$0	\$719,130	\$781,222	\$932,732	\$1,070,408	\$3,503,492
Supervisory District 1	\$0	\$494,714	\$505,286	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$5,000,000
Supervisory District 2	\$0	\$468,795	\$531,205	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$5,000,000
Supervisory District 3	\$0	\$441,643	\$558,357	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$5,000,000
Supervisory District 4	\$0	\$297,724	\$702,276	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$5,000,000
Supervisory District 5	\$0	\$327,459	\$672,541	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$5,000,000
Onboarding new CBOs *					\$625,000	\$2,375,000		\$3,000,000
Administrative OH (15%)	\$17,823	\$43,087	\$43,292	\$107,870				\$212,072
Administrative OH (16.63%)					\$249,616	\$229,660	\$239,638	\$718,915
Total	\$165,541	\$2,360,666	\$3,301,571	\$5,827,000	\$7,375,616	\$8,985,661	\$6,680,639	\$34,696,695

*Onboarding new CBOs was allocated at \$1.5M/year for FYs 2023-24, 24-25.
FY 2023-24 allocation pro-rated for 5 months at \$625,000
FY 2024-25 allocation = \$1.5M + remaining \$875,000 allocation from FY 2023-24



DEPARTMENT OF MENTAL HEALTH

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LISA H. WONG, Psy.D.
Director

Curley L. Bonds, M.D.
Chief Medical Officer

Connie D. Draxler, M.P.A.
Acting Chief Deputy Director

September 13, 2023

TO: Supervisor Janice Hahn, Chair
Supervisor Hilda L. Solis
Supervisor Holly J. Mitchell
Supervisor Lindsey P. Horvath
Supervisor Kathryn Barger

FROM: Lisa H. Wong, Psy.D.
Director

Connie D. Draxler

SUBJECT: NOTICE OF INTENT TO EXTEND THE EXISTING CONTRACT WITH COMMUNITY PARTNERS ON A SOLE SOURCE BASIS AND TO INCREASE THE TOTAL CONTRACT SUM FOR FISCAL YEAR 2023-24 FOR THE CONTINUED PROVISION OF THE MENTAL HEALTH COMMUNITY-BASED INCUBATION ACADEMY

In accordance with the Los Angeles County Board of Supervisors' (Board) Policy No. 5.100 (Sole Source Contracts), the Department of Mental Health (DMH) intends to extend the current contract with Community Partners (CP) to continue the provision of the Mental Health Community-Based Incubation Academy (Incubation Academy).

DMH will request that your Board approve an amendment to increase the Total Contract Sum (TCS) by \$2,434,206 for Fiscal Year (FY) 2023-24, and to extend the term of the contract with CP on a sole source basis for two fiscal years, effective July 1, 2024, through June 30, 2026. The revised TCS for FYs 2024-25 and 2025-26 are \$8,110,661 and \$6,680,639; respectively, funded by State Mental Health Services Act revenue.

JUSTIFICATION

On May 29, 2018, your Board approved a motion directing the Chief Executive Office (CEO) and DMH, in consultation with the Auditor-Controller and the Director of Center for Strategic Public-Private Partnerships, and the stakeholders, to make recommendations on establishing an Incubation Academy. The Incubation Academy provides technical

support and financial resources to participating agencies to build capacity and competencies in providing mental health prevention and support services within at-risk communities. In the report back to the Board dated September 14, 2018, CEO requested delegated authority to procure and select a contractor, with input from stakeholders. CP was the agency identified to provide the training to the interested agencies and served as the fiscal intermediary in providing funds through this contract.

On October 23, 2019, DMH entered into a contract with CP for the implementation of Incubation Academy. CP has been providing oversight of the implementation of the Incubation Academy pilot project as well as mentoring, training, technical support, and financial resources to 29 grass roots community-based organizations (CBOs) representing all five supervisorial districts. Out of the 29 CBOs, one met all the contracting requirements to become a DMH legal entity provider.

In June 2024, 28 of the original 29 CBOs will complete the Incubation Academy and further develop ongoing relationships with DMH. Five additional CBOs, selected by DMH, will join the Incubation Academy throughout the current fiscal year. In FY 2024-25, up to 10 new CBOs are scheduled to participate in a new 2-year cohort ending June 30, 2026. In FY 2025-26, an additional 10 new CBOs will participate in the new 1-year cohort, with the expectation that all 25 CBOs will complete the Incubation Academy by June 30, 2026.

CP has developed deep relationships with grass roots CBOs and has proven to be a valuable partner in the success of the Los Angeles County DMH's Mental Health Community-Based Incubation Academy. The contract with CP is set to expire on June 30, 2024, DMH will request approval to extend the contract term as it is more cost-effective to continue its partnership with CP on a sole source basis than to look for a new partner.

NOTIFICATION TIMELINE

Pursuant to Board Policy No. 5.100, DMH is required to provide advance written notice and justification to the Board at least six months prior to the expiration of an existing contract to amend the contracts when departments do not have delegated authority to execute such amendments. If requested by a Board Office or the CEO, DMH will place this item on the Health and Mental Services Cluster Agenda. Unless otherwise instructed by your Board Office within four weeks of this notice, DMH will present your Board a letter for approval to execute a sole source contract extension amendment with CP.

Each Supervisor
September 13, 2023
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If you have any questions, or require additional information, please contact me by email at LWong@dmh.lacounty.gov or (213) 947-6670, or your staff may contact Stella Krikorian, Division Manager, Contracts Development and Administration Division, at SKrikorian@dmh.lacounty.gov or (213) 943-9146.

LHW:CDD:KN
SK:DO:atm

c: Executive Office, Board of Supervisors
Chief Executive Office
County Counsel

SOLE SOURCE CHECKLIST

Department Name: _____

- New Sole Source Contract
 - Sole Source Amendment to Existing Contract
- Date Existing Contract First Approved: _____

Check (✓)	JUSTIFICATION FOR SOLE SOURCE CONTRACTS AND AMENDMENTS Identify applicable justification and provide documentation for each checked item.
	➤ Only one bona fide source (monopoly) for the service exists; performance and price competition are not available. A monopoly is an <i>“Exclusive control of the supply of any service in a given market. If more than one source in a given market exists, a monopoly does not exist.”</i>
	➤ Compliance with applicable statutory and/or regulatory provisions.
	➤ Compliance with State and/or federal programmatic requirements.
	➤ Services provided by other public or County-related entities.
	➤ Services are needed to address an emergent or related time-sensitive need.
	➤ The service provider(s) is required under the provisions of a grant or regulatory requirement.
	➤ Services are needed during the time period required to complete a solicitation for replacement services; provided services are needed for no more than 12 months from the expiration of an existing contract which has no available option periods.
	➤ Maintenance and support services are needed for an existing solution/system during the time to complete a solicitation for a new replacement solution/system; provided the services are needed for no more than 24 months from the expiration of an existing maintenance and support contract which has no available option periods.
	➤ Maintenance service agreements exist on equipment which must be serviced by the original equipment manufacturer or an authorized service representative.
	➤ It is more cost-effective to obtain services by exercising an option under an existing contract.
	➤ It is in the best economic interest of the County (e.g., significant costs and time to replace an existing system or infrastructure, administrative cost and time savings and excessive learning curve for a new service provider, etc.). In such cases, departments must demonstrate due diligence in qualifying the cost-savings or cost-avoidance associated with the best economic interest of the County.

Erika Bonilla
Chief Executive Office

Date