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Transcript

November 19, 2025, 9:31PM

□ **Claudia P. Alarcon** started transcription

R1 **Room 140** 0:12

Thank you, Claudia.

I welcome everyone to the children, Family Services, Lester Meeta of November 19th. We're gonna do things a little bit different.

We had a request to.

To hold the consent item, so we will be doing that.

But first I wanna thank everyone.

This should be my last in person cluster next week unless we have a board motion that will be virtual.

And so I'm glad to be here.

I brought some little goodies for everyone to celebrate this wonderful time in my life over chairmanship to Supervisor Solis's office, and I also want to thank Anthony for being a great Vice chair and.

Bumping in when I've been with the supervisor for some events over the years.

Here we look forward to your leadership, starting us off in December.

So thank you everybody.

Glad to be here.

Hey crew.

We'll now go to item 2.

Yes, any any other remarks?

Anthony's late? Oh, I scheduled agenda item.

So, since this is being transcribed for the record, Monica did ask me to prepare 45 minutes of remarks today.

Recognizing all of her achievements.

I had a hard time condensing it into that time, so I will just say thank you.

It's been aastic serving as your vice chair for this last year.

You've been very welcoming as I transition into this space and.

Really can't speak highly enough to have working. How the experience working with you this last year.

Yeah, that fast enough, or did you want more?

I mean, we could go a little longer, right?

So flowers, I would.

But then I saw the consent agenda.

The item got pulled, so I ran out of time because everyone knows on this call that comes to these meetings often.

Nothing. If not you know.

Hurt and tightened, ready to get going.

So with that, we'll move on to item 2A, aging and Disabilities Department.

This was a consent item that was pulled at the request of SD2.

We have aging on.

I believe moral is joining us virtually, and this is request authorization.

To award and execute fiscal year 2526 sub award for transitional legal program services moral.

MK **Maral Karaccusian** 2:36

Hi everyone.

Can I say I've been there for a majority of the years, so congratulations, Monica, for finishing your chairship.

But I just wanted to.

I have the team on here too.

It's a pretty cut and dry.

We open the solicitation.

This funding comes from the older Americans act through the California Department of Aging, specifically for our department to solicit, we had one person.

R1 **Room 140** 2:47

Select.

MK **Maral Karaccusian** 2:55

And which is bets edek.

And they have been granted this award.

So SD 2.

I know you wanted to discuss this and pulled it out of consent, so happy to.
Answer any questions that you have or any other department housing.

R1 **Room 140** 3:10
I.

CT **Caroline Torosis** 3:10
Hey, Maral, it's Karen.
Oh, sorry, Monica.

R1 **Room 140** 3:13
I was gonna say excellent.

CT **Caroline Torosis** 3:13
Go ahead.

R1 **Room 140** 3:13
We'll now open up to deputy questions and it looks like Carolyn go for it.

MK **Maral Karaccusian** 3:15
Great.

CT **Caroline Torosis** 3:18
Yeah, I think you and I have previously talked about our county wide access to justice strategy.

MK **Maral Karaccusian** 3:25
Mm-h.

CT **Caroline Torosis** 3:26
Obviously, you know that Zedek and public counsel, and I think neighborhood legal services and others get funded through various other departments.
I think that the work that Bezedic does is extremely valuable and important.
I just wanted to know sounds like this is like a federal contract, you know, it is what it

is, but what exactly legal services are these folks providing and is there any coordination with the other county departments who are also providing?

MK **Maral Karaccusian** 3:54

Like limited scope, legal representation to folks we focus on our AAA, our area agency on aging providers.

CT **Caroline Torosis** 4:01

OK.

MK **Maral Karaccusian** 4:02

So we, you know, we serve clients through there.

CT **Caroline Torosis** 4:03

Start over.

MK **Maral Karaccusian** 4:03

So the referral's gonna come through our AAA network that serves LA County.

So city of LA Will do their own thing because they're their own AAA.

So I think this is what we're primarily focusing on.

I mean, if you look at it and Caroline, yes, you and I have talked about this. It's not a lot of funding.

So I can't say they're doing everything, but they're serving the needs for our our older adults around estate planning, you know, identity theft, you know, financial fraud, etcetera, etcetera.

So I think there's we're narrowly focusing on and a lot of the referrals do come from adult Protective Services as well.

So I think the next is between who we know in our population and our in our department.

Getting access to these legal services.

CT **Caroline Torosis** 4:44

And let's say that someone was like the victim of, like, elder abuse.

Some sort of consumer protection issues as well.

I know that DCBA does a lot of work with you all and older adults.

Is that is this legal contract going to be used to help? Like, let's say that there's some sort of like foreclosure fad and someone takes title to someone's house because they've been taken advantage of.

We've seen that happen to seniors often.

Is this contract will be helping them with that kind of thing or is it literally like dependency?

MK **Maral Karaccusian** 5:09

Yeah.

CT **Caroline Torosis** 5:14

You know, minor issues, etc.

MK **Maral Karaccusian** 5:16

I mean, I think Victoria on the call here too, but Victoria, if I'm ever stepping out out of line, you can just please phone a friend.

I'll chime in.

So primarily like we, we refer to state housed 'cause.

I think that's been better funded and all that stuff around the eviction defense. This is more of the individual needs of people that are being presented.

CT **Caroline Torosis** 5:28

Ah, OK.

MK **Maral Karaccusian** 5:36

In the.

In the long run right now.

So I think the beauty of you know, working with organizations like public Council and public Services that said it because that they're connected to the larger fabric of.

Work that's happening within the county. So it's not just like, well, we provide these legal services, they're plugged in and they all work so collaboratively together. So it's not.

It's not an.

It's not a definitive yes, but it's like it's a yes.

And you know what I mean? Yep.

R1 Room 140 6:01
Additional questions.

CT Caroline Torosis 6:01
I don't have any.

R1 Room 140 6:03
Additional questions from deputies in person or online.

MK Maral Karaccusian 6:03
Oh.

R1 Room 140 6:08
Yeah, we.
'Re eligibility for this.
Is there any kind of come or it's just around?

MK Maral Karaccusian 6:16
60 and over is the criteria right now.
Victoria Miguel. Miguel.
I saw I go off Miguel for it.

MR Miguel Robleto 6:22
No. Yeah, correct.
It's, you know, it's funded by other Americans act primarily target population's gonna be older adults in their care and caregivers as well, so.

MK Maral Karaccusian 6:32
So that's.

MR Miguel Robleto 6:32
So 16 over as morals.

R1 Room 140 6:37

Excellent. Thank you, marl for joining us.

MN Mireille Nseir 6:39

Thank you for all the.

MK Maral Karaccusian 6:40

Thank you.

R1 Room 140 6:42

And allowing us to do a little bit out of order so we can accommodate you at the last minute. Appreciate that.

MK Maral Karaccusian 6:46

I will.

I appreciate you.

R1 Room 140 6:47

We'll now we'll now move to item 3 and that is motions and that is STP.

MN Mireille Nseir 6:47

Appreciate that. That makes sense.

R1 Room 140 6:58

Who introduced a motion expansion of care portal services to address the needs of families in crisis?

Surveillance.

I mean clearly the 2nd if Lizzie can start, I can do it if not.

Go to a board letter.

Do that, if that's OK.

Yeah. OK, everyone.

We're gonna. We're gonna put the little pin in that.

We'll move to the next item, item 4A, DCFS request to approve sole source contracts for community treatment facility services.

Yes.

OK.

Good afternoon.

My name's Leticia Torres. I'm aara.

I'm with the Department of Child and Family Services, a contact information division, and I'll let Lisa introduce yourself.

Hello, my name is Marie Kay and I'm the Children's Services administrator.

And I'm over at the CTF contracts.

And we are here to refuse delegated authority to execute sole source contracts with Vista Del Mar.

And child and Family Services and Starbuck child and Family Services for the provision of community treatment facility services, the contract would be effective January 1st, 2026 through December 31st, 2028 with an option to extend for two additional years.

For 31st 2030.

Maximum contract amount would be 5,189,400 and this would be used.

 +15*****75 8:40

Yeah.

 **Room 140** 8:46

Befinance used.

Seeing 21% state DMH funds 9% eleven state realignment funding and 60% net county cost.

The maximum contract amount or and that was for Vista Lamar.

My apologies, and this amount would be next amount would be 4.

6,750,000 and it would be financed with the same.

DMH state funds state realignment and that county cost.

Vista, Del Mar and Star View are the only facilities licensed by California Department of Social Services to provide community treatment facilities in LA County for these contracts will allow the contractors to continue providing 10s of millions services to children and youth in a setting with the capacity to.

Provide secure containment of these services for the placement of children and youth who require higher levels of need.

And these are services that are provided.

And I gotta go write classification level 14.

Term short term residential therapeutic. Now the only here are residential groups that is available for children outside of a psychiatric hospital.

TF residential facilities provide intensive mental health treatment services to children and youth in a setting with the capacity to provide secure containment.

The CT.

The CTS provide safe, most structured setting highest ratios for children and youth, with the most severe psychiatric and behavioral.

Problems.

Who are often deemed dangerous to themselves and others, children and youth who volunteer or under conservatorship may be placed in a CTF. Each child or youth has a designated treatment team that collaborates with the child and family team to address trauma and underlying needs of children and youth.

Treatment Team discusses and formulates a behavioral management and intervention plans to which each child youth best response.

Children place NTTF have previously experienced psychiatric hospitalization.

As a result of behaviours that have been deemed dangerous to themselves and others.

Due to CTS being the highest level care, the state has indicated that the CTF rate is the same as the FDR rate.

Are there any questions regarding this contracts these contracts?

Any questions from the deputies on this board letter?

The same providers.

They're the only two.

You know what?

The number or what?

I guess the review that we've served in each facility over the last year.

I have the current.

The current right now for Vista is for DCFS youth and for starview.

You have an annual number.

But it's 2023, so.

Not all's up to date on it. If DC of us could, how do I identify that number and provide it to us deputies after that would be just out of interest, you know.

I know it's their small so they don't have hundreds and hundreds and that's really good.

Need for these so I appreciate it.

No further comments from any deputies in person or online. Not seeing any hands.

Thank you, ladies.

We'll now move back to item.

Three, the action of care portal services to address the families in crisis.

Stepped out. Water is sick, so I just had to get that call.

I don't know if you wanna.

Sure.

So.

This motion is for the meeting on the second, but we we're doing it today because we no meeting next week.

This motion focuses on care portal, which?

That works with DCFS.

To.

Young people, families and social workers.

They connect with.

Faced organizations and then the social worker can upload.

And request a need on to care portal and then one of the faith-based organizations can like choose to so things like changeable goods but then things like and and Dominique can speak about it more but like money.

To his car broke down.

They they were really helpful during the fires and are like taking an active role now with.

The food.

Snap disaster we find ourselves in, and so this motion wrecks DCFS to execute a funding agreement with SCG Southern California grant makers to provide about 1.7 million for a two year agreement with care portal.

So that we can expand the program into all 8 spas.

It's not just to the faith-based liaisons, and it's a two year agreement with the idea that after two years.

Portal could look for funding.

They're pursuing public private funding to support the continued operation of care portal, and I also believe we're issuing an RFP for these services in the future.

But I'm gonna turn it over to my colleague from DCFS.

Dominique, hi there.

Yes, we have a currently a non financial partnership agreement with care portal.

Lizzie stated it correctly.

We do have care portal in all 19 regional offices and so all social workers in the regional offices have the ability to input needs into care portal for the youth and family served by the regional offices. The expansion is connected to expanding care portal into our specialized program.

And increasing access to those programs to care portal.

Currently on a non financial at no cost scale care portal is unable to expand.

Why we are doing a state block grant?

Questions.

Then just to flag that the state did approve them as a sole source was that last board letter we have on care portal? I thought we had already granted them five.

Remember anything on your portal now?

There's no.

I'll take a look.

I thought we had allocated them some money that we got last last minute from the state and we had to give it to them.

Was looking at me weirdly random things.

No, they're giving them any money.

Haven't given them any money services so far have been great philanthropically funded.

And good partners free.

I don't recall asking.

You any of some misremember?

It might have been like some fade fade stuff that you're.

Radio's the SCG.

Sorry, my brain is not working very well today, but we are doing an solicitation to do these services after this two year agreement.

Correct the plan if care pulled it does not identify funding to continue.

Our recollection is that we did an RFI for this particular contract and no one was interested but care portal, OK.

OK, give me a little.

I'm I wrong?

Right, yeah.

I think that's right.

OK.

I mean it's.

That's the motion, not I'm.

I'm wondering 'cause. I'm reading through this and appreciate you saying open this up for an in two years, but I don't actually see that language.

Would that be something you'd be comfortable just to kind of show the intent?

Of course, if you have language, please send it to me.

We're happy to can can do.

Additional questions from our deputies.

Deputies online.

Seeing none.

Thank you, jomique. Thank you.

I'll move to the third item, Monica.

Thank you.

Sorry about that.

I stay there for a second. Dominique mistake. 'cause. We took things out of order and I got mixed up.

We will now open this up for public comment if you have questions on this particular motion, please raise your hand in person or online and you will have one minute by dear remarks.

Or any I do not see any online.

I mean in person. Claudia, do you see any hands online?

I don't, but I see some people called in with their phone numbers, so if they have public comment, if they could just announce themselves, anyone that has called in.

That's something you wanna do for this particular moment.

We're not hearing from anybody and we are not seeing any hands online or in person, OK.

Thank you, Paul.

No, sorry. Can I ask you one more question? Never mind.

And you might not know the answer to this in that show.

We're here.

Know how quickly once this is executed, care portal can like get to work surveying the kids and families across and like the expanded manner pretty quick. It'll be quick.

Curious because I.

Hate perfectly with food.

We're gonna see a continued need and wanna make sure that if we're able to bring them on board that we're able to like.

Activate them as soon as we can, right?

We've already started utilizing curable security.

Not great, but I'm glad we have a resource to help. That's it.

Any last final statements or questions on this item?

No. OK.

Sorry, my brain is kind of mushed because we have 3 hour meeting before this.

It's OK for me.

Yes, thank you all.

We'll now move to item 4C, DCFS sole source request to extend aftercare contracts, DCFS.

I ask a cab.

Which cabin is the cabin?

Yeah. What? Claudia, before we start? So there was a on cabin that was attached in this agenda, but it's not listed in the agenda.

For the December 9th.

This is not B.

It is online.

Oh, it is.

That's the one we just did.

No, we didn't do it, sorry.

Sick, but I hope, Leticia, you can say apologies all online.

Item 4B E FS recommendation for 10 contracts for the Capt. Child Abuse Prevention. Apologies. OK.

Thank you.

Hi, it's Leticia Torres, Ibarra again from DCFS contracts administration division. I'll let Marcella.

Marcella pizarro.

Versus administrator three with DCFS.

Hey, this board letter is to request.

Go to award 10 new contracts that were preferred to provide child abuse prevention intervention services.

The contract would be effective till February.

1st 2026 through June 30th 2026, with the option to extend for up to four additional

years, the CAPIT program is an integrated, comprehensive approach to strengthening families who are at risk of already experiencing problems and family functioning with the goal of ensuring that child.

Are maintained in a safe and nurturing environment.

Some of these services include, but are not limited to, counseling, parenting support. Parenting, Education, referral assistance and case management.

Services. The purpose of the recommended action is to prevent and treat children.

Prevent and treat child abuse and neglect. The CAPIT program will provide a range of child abuse and neglect and services.

So last year in April, we released a request for proposal to solicit 10 contracts to the our county wide and then the other ones are from SPA one through SPA 8.

We did post this in various websites, including Internal services department and NTCFS has its own website.

We also advertise in a local newspapers.

We did have a proposals conference where we did have 56 individuals attended and they represented 19 different facilities and.

We also had 36 proposal submissions from 20 different agencies and seven of the seven of the current CAPIT contractors submitted proposals.

We did have evaluation orientation.

And we did evaluate.

With the proposals based on the following areas, which is background and experience approach quality assurance, there was a cost component. We did have informed average meetings with the evaluators to go over their scores and comments.

There would be 8 agencies that would be recommended for 10 of the contract awards.

We did send out the non selection and selection letters back in July.

We did have debriefing meetings with the agencies that did.

Not get recommended for a contract award.

We did not have any agencies that pursued the next levels of appeals, which is the proposed contractor selection process, and then the independent review.

These contracts, the maximum annual contract amount would be for 3,102,000 and it's finance with state funds.

Any.

Questions from the deputies aside.

Many of the contractors.

The contract again, the current contractor is, is it four? I think it's 4.

There was.

There was three that did not get recommended and they did not file for the next level.

And then there was one did not apply.

Or if they're trained for 1/2 hour, correct yes.

Who, like, did we look at the metrics that they are meeting now or their outcomes now and if they were current provider?

Did we look at like, are they doing a good job?

Is that?

Yeah. So there's there's a process that we do rating sheets right before we move forward with any contract action and that's handled by the lead Bureau program Officer, Bender Marcella.

So they did the agencies performing, we do that as part of our extension process. For awarding new contracts.

Why are these?

These are not sole sourced, are they?

No, it's a it's we did the SNP the RNP.

Leticia, can you explain to me?

It says.

Evaluator orientation was in October of 2024.

Then, in July of 2025, we finally had a tentative selection.

What's going on?

So that that allows for the whole debriefing process. OK, so you have 3 evaluators that evaluate each spa and that alone that takes time to give them those proposals to review.

And then there's informed average meetings.

So they come back and they go over all the proposals we have to reconcile.

So it takes time to get everything finalized.

I mean, you know, you have to be very meticulous and careful with everything that you do with RP, that there's no errors because all these documents do become public documents.

So there's there is a whole quality assurance process into built into this as well.

Feels like that's really long though, right?

Like they're evaluating 10.

Well, keep in mind that my staff don't only have this contract.

Category we have where we have 25 solicitation going on at any given time and we're pretty busy.

I mean, we have three more letters today and that's pretty good for like I mean for social services, I think we are one of those busy departments that have a lot of high demands and and we do do a lot of solicitations.

It's not just one. You know, there's a lot of work behind the scenes.

Your evaluators were reviewing 36 proposals.

Right.

It was, let me see. Yes, 3336 proposes came in and then that's what your evaluators are evaluating, correct. Between October and July, yes.

Our evaluators. Evaluators are there.

Like normally you're on this contract we had.

Let me see. It's 8 spas 24. We did have about close to 30 evaluators.

Because each spa has three evaluators, 3 different people looking at it and that's how you come up with the informed average.

You average up the scores from the three persons, so 3 three people per spot.

That means $24 * 8$.

Yeah. For the 8th pass.

The two county whites.

Seems like a lot of evaluators for 36.

Well, it does take about eight. I mean, I know that's a very lengthy keep in mind also.

Yeah, exactly.

People want a thing and not everyone.

Everybody wants to sign up for. It's a lot of work, great, and I always try to sell it as like, OK when you retire.

From the county, you can become a consultant. 'cause you have insight, knowledge as to how this gets prepared and it's valuable experience. If my team would be able to do it, we would love to do it.

So I try to sell it like that, but it has been hard getting evaluators and sometimes when there is, like solicitations that involve other departments like mental health or probation, we ask them like, hey, help us out too, because it's just not us running ourselves so.

Yeah, it takes time.

And usually it's about 8 hours, 6 to 8 hours per proposal.

So that's where like, you know, when we do family preservation, there's a hundred and something proposals.

That's when it's that's a big.

Story because that's gonna take a lot of time.

And we have to give.

Elevators up to 10 proposals.

You know, nobody wants to do that.

The reason why the contract's only for like 4-5 months and then it's extended because it took so long to get it on the longer than four to five months.

This the initial one was like 5 months long and then Oh no, that's probably enough.

This is enough for five months, so this contract.

With with Capit like the very first through June 30th and that's because of the fiscal year.

The fiscal year and then from that for additional I want your extensions.

That's why seems short.

Is it gonna start off on February 1st, June 30th?

That's the initial part, right?

Yeah. That's like the fiscal year. We have to kind of get off, OK.

You answered.

My question goes to fiscal year.

It's a fiscal year.

Thank you.

It helps them too, when they submit their invoices as well.

Additional questions on this or letter.

Yeah, go for it.

So I was wondering know we have like a 0 tolerance policy for human trafficking the contractors, but this work tie into like our child trafficking efforts or is it more so just focused on abuse and neglect?

It over to you and seek does it involve syssec?

It doesn't take it out right.

I think whatever families show up with.

Mean is what they're going to.

Is this connect to Icam?

Dean, so I guess the Leigh been connected to, I can not hear.

ES **Edie Shulman** 29:42

Hi I'm here virtually.

R1 **Room 140** 29:43

You then I think maybe. Oh.

ES **Edie Shulman** 29:46

Hi Edie Shulman with I can.

I'm here virtually.

R1 **Room 140** 29:48

Hey, Edie.

ES **Edie Shulman** 29:49

Yes, it does connect to. I can.

It's from AB 1733, which again calls for child abuse counsel in the county to make the funding recommendations.

And so I can as that Council.

We.

Quite awhile ago.

Move this over to the RFP process.

Didn't used to be handled that way, but it has been for quite a while now so I can participate in all of the activities that take place in developing the statement of work.

And participating in the proposers conference and any of those activities where DCFS programs is involved, I can is also involved.

Out.

R1 **Room 140** 30:46

That's my question. How can I zoom out?

But like, how are you involved with? Like are I Cam people?

The evaluators like how is I can't involve.

ES **Edie Shulman** 30:59

We're not involved in terms of that because we we would not be considered neutral

evaluators and we don't specifically go to our partners.

So we rely on the contracts division to identify the appropriate evaluators for the contract.

R1 Room 140 31:21

3.

I can't just your team is involved with like reviewing a statement of work and so forth and providing feedback, right, Edie?

ES Edie Shulman 31:32

Yes, yes, we we are very involved in development of what the services should be or what services we want making recommendations for services based on identified needs.

Also, looking at what services have been provided before.

I know in the contract before this one, we moved to provide more intensive counseling services because we didn't see that a lot of that was happening in the county.

So that was part of an ICAN recommendation.

So yes, we are involved with that process.

R1 Room 140 32:16

Additional questions from deputies online or a person on this particular board letter. Being none, we'll move to public comment on any of the letters that were before us today. So please raise your hand.

Do you have one minute in person or online?

Seeing no hands raised in person.

And none online either.

Excellent. With that, we will adjourn this meeting and.

This one.

Yeah, the card prevention and aftercare contracts.

My God, that's not what we just did.

OK.

I'm losing it every I apologize.

She's ready to be done.

Once we change the order, it threw everything off.

I'm sorry. I apologize, sorry.

Like I'm I'm now I crossed off one thing and then it was the wrong thing.

So my apologies, I will now move to item 4 CD.

CCFS sole source, extend current prevention and aftercare contacts Leticia Leticia again.

Says contact division.

This board letter is to seek delegative authority to extend 10 current preventative.

Trapped beyond the original term affected during 2026 through June 30th, 2027.

The additional extension will allow DCFS time necessary to release and complete IP.

Statement of work has been drafted.

It's in finalization stages.

There were also working out with we're working with Casey and Family Services. They reached out to the department.

They want to be able to have hosting listening sessions with parents and caregivers to kind of provide input as to services that are being delivered.

We are targeting January as our release date for the RFP of January of 2026.

But based on this feedback, it might cause a little bit more delays.

Because we don't know if it's gonna cause a lot of changes to the statement of work.

And would be looking to award.

Till 2027.

If everything goes well, but there's always little hiccups here and there, the contract amount for the 18 month extension is for 18,198,000.

Finance using 616% federal funds, 41% state funds and 43% net county costs.

I mentioned NAFTA CARE is designed to prevent child abuse and neglect by engaging in a greater number of families and supports available in their communities without having to bring these families into the local system.

PNA builds on three teams decreasing social isolation, enhancing economic well-being and self-sufficiency and increasing access to existing supports and activities.

There was also reductions in the amount of money that's going to go into these.

PNA contracts we no longer have the mental Health Service Act prevention, early intervention funding so that, you know, there's a lot of things to kinda also consider when releasing the RFP and finding finalizing that amount for the new RFP.

Any questions?

Yes. Why do we need so long?

The RFP. This feels like a really long extension.

It feels like a long extension, but if we're able to award early, we can award early just like the CAPIT. If you look at the capit, the start date on that is February, but we actually have like the like authority to continue with it longer. So it's all.

It's give us give us a little wiggle room so that we, if any hiccups happen we have that that time.

But if we can go earlier and finish.

Definitely we can award earlier and if you look at the Cape boiler, you can see how that one is starting February 1st, we had extra room if we needed to use the delegated authority to extend.

I just feel like in general and maybe it feels like DCFS contracting takes so much longer than other department contracting and that and and I don't, it just feels like it takes so long to do it. And like by the time this is executed, who knows if these.

Are even gonna be the right rates and if we're paying them the right amount of money in June 2027?

So this this amount is for this four letter for this extension. This is not for the new rip. Where is the new RFP?

Is that already drafted?

Yes, that's what I was saying, that the statement of work is already drafted and that we're having listening sessions with KC Family Services and we're hoping to release January of 2026.

But it's all depending on what feedback we get.

OK.

This this to me like, OK, release the solicitation January of 2026.

Hopefully yes.

And then seven months later.

Hope will be ready even though the contract we talked about was over 12 months.

No, no, no, no.

All the different contracts and have the evaluators.

Know and so basically this is for an extension. We do need like up to 8 months of the therapy.

But you said the release was.

Releasing the RFP January of 2026.

Yes, that whole process takes a long time because you have to have a proposals conference and then once you release CRFP question and answer and then propose in time you need to like give them three to four weeks to submit their proposals and

after that, you know we.

Have the evaluation process the appeals process, the board letter cluster, so all that kind of takes.

You told me, Leticia, when was the?

Original RP for this existing contract.

20/20/2019.

Might have been Maria. Are you on the started it in 20 February 2021.

My team, they might have that readily available.

MB **Maria Baldwin** 38:29

Yes, I'm here.

I'm sorry, what?

R1 **Room 140** 38:32

One from UCFS online.

MB **Maria Baldwin** 38:33

I'm sorry, what is the question?

What? When did they start the current contracts or?

R1 **Room 140** 38:35

And when did this RFP get released?

For the current contractors are.

MB **Maria Baldwin** 38:41

For.

Let me look it up really quick.

R1 **Room 140** 38:46

Current board letter.

OK. The clinical contracts were awarded effective January 1st through 2020 through June 30th.

So we did the RFP either 2018-2019.

That's I think that's where my issue is.

CFS and Leticia is that that RFP was written in 2018 and now we're going into.

2027 hoping we can finally write another RFP.

But as long we knew that this contract was ending in 2025. Yeah. So I didn't start writing it till now.

So we need an extension.

Yeah, just to clarify, this is a contract whose funding was at issue.

So OCP pulled \$1,000,000 out.

DMH pulled almost 5 or \$6 million out.

We didn't know if the program was gonna end and so we had to kind of wait to see if we were gonna be able to afford it going forward.

Particularly with the curtailment.

So like recently we've made a decision.

Yes, we're gonna. We've found some DCFS money. We're gonna inject money from a different funding stream to keep the program going. 'cause. We think it's really important, but up until just a few months ago, we were wondering if this would continue because significant funds from other departments were.

Bowled. That's really like the main driver of why a solicitation was an issue 12 months ago.

To be ready to go when this contract expired.

You didn't know about the curtailments till discount?

Yeah, sounds like to write the RFP takes too.

Money was getting pulled out with this year.

We've known that's coming for a little bit.

It's cutting.

It was the state. OCP had \$1,000,000 that they paid for this last round that they pulled or weren't able to recommit.

Yeah. And D MH, I wanna say it was five or six and I don't wanna get the number wrong, but it was like somewhere in the range of five or \$6 million that they had paid.

Into this contract in the past that they told us they couldn't continue paying.

You're correct, Brandon.

So originally it was like \$12 million for like existing contracts.

Now we're going down to like, so it's been. It's like, been hard to know what our ongoing commitment and it should be in this last year because the funding's getting pulled out. So like I said, we have found the county funding was getting pulled the whole package.

Pull that right.

So then the question was, can DCFS fill in the hole?

Yeah. And if so, to what extent?

And that's been a little bit of a puzzle and while we were figuring out that puzzle, that's when we start undergoing curtailments as well, which complicates it a little.

This is an important program where like I wanted to keep going if we can.

Yeah, it's not that.

It's just kind of, I think so. It's a little bit of frustration.

I feel like we approve a lot of DCFS extensions at the last minute.

Because we just heard from the state and I know you, Brandon, you've explained it to me or oh, about this, but I think it's all wrong.

Well, it is a lot.

It's just like there's some higher level conversation to be had and not here. But like even outside this room, how much money as a county do we want to invest in proposers, proposers, conferences? 3 people reviewing each one challenges lawyers. Like how we have built whole structures.

Around being really careful and taking a long time, and then we're all frustrated when it costs us a lot of money and it takes a long time.

Like that's true.

I've I mean and then when we try to sole source.

And that's not good either.

So, like, we're really in a pickle here.

Yeah, there's got to be some happy medium between whatever and sole source.

Don't know what that is and hopefully my colleagues can.

Figure out this or contracting. Yeah, because you're. You're right, Brandon.

It's not just DCFS.

I just feel like I see it here more.

But you may have more contract.

Yeah, I think we're missing.

You probably have.

Myself on the back, we're a little more present.

Yeah, I appreciate that.

Appreciate you being here today.

I want shortcuts.

Believe me, I I want shortcuts because.

I expedite everything and my staff won't be so overwhelmed with managing multiple solicitations at one time.

But also the county procurement guidelines provided don't recognize those shortcuts that other departments are taking.

It's interesting how they also have to be in consultation with their County Council as well, so you just when you hear about somebody, did a abbreviated RFP or they call it.

Request for statements of no.

You have that one.

That one's recognized a request for service.

Request for service from other departments that's not recognizing the ISD county performing guidelines that's outside of that.

I want shortcuts too.

I don't know if you want me to do a board letter to expedite and have a breather away with the timelines. I would love to do that.

I feel like we're particularly scrutinized.

Maybe it's the scale of our contracts. We're doing 10s of millions rather than 500,000 or maybe the, yeah, the community we work with is particularly vocal and that causes extra scrutiny.

We've also, I think, at least historically undergone an extra level of audits.

Thank you.

That seems to have tapered a little bit, but all those audits say you got to do this.

You got to do this. You got to do this.

So now we do it.

Yes. And I don't know that other departments have enjoyed A level of scrutiny.

I have to say.

Thank you. And as most state and county?

That we have to face it. And it's because of the funding that we get federal levels and so forth and I worked for other departments and I don't recall getting audited by auditor controller's office when I worked in contracting. And we do that, get that every five.

To seven years and it's because the department has a lot of money, right?

You go after the larger departments versus the smaller departments because they can reimburse the auditor to control this office and so forth.

That and I was actually gonna say someone who attended health cluster for like 3

years maybe I'm not chiming 'cause. I don't find this that unusual because those giant departments also went through similar things by the time. So I'm not saying it's a good practice. I think there.

A larger discussion to be had here.

That maybe not isn't. So DCFS focused. But yeah, county wide focus because these things came up in that space as well.

So I notice in this cluster, yes, it's you, all you all experience it more than maybe the other ones in this cluster, but.

The other ones, it seems pretty regular.

Yeah, I think that's where the board has passed multiple motions on trying to streamline that auditing.

We know for a contractors when they get 5 different auditors showing up, it's time for them and it's costly for their staff.

That's something we wanted to change, especially also with that, said, the document that everyone has to follow auditing guidelines.

Can you see how the contracting guidelines?

That we know a lot of factors and profits have said are particularly onerous and almost in the extreme.

And different from any other California county that they work with who also has DCFS offices.

So, but not just DCFS.

But they've kind of said across the board they're different when they work with other neighboring counties to us on a DCFS issue.

It's it's harder here, it's more expensive.

And then we get less people.

Buying, which we don't want to see. We want people to apply if they think they're qualified and we can look and see believe that's true or not, that if you don't mind from the audience.

Yeah, the pic.

And I also believe that makes it harder for smaller community based agencies.

Exactly. We, we, the rules we have set up tend to favor, yes, larger groups with their own accountants, their own lawyers.

That, you know, know how to write our RFP.

'Cause they have, you know, multiple programs across multiple departments. And if you're a church like reflecting back a care portal, just trying to, you know, organize a,

a loose group of.

Furs you may not have that level of sophistication, and you may have a harder time competing in the competitive process. Not not to say we shouldn't have competitive process, but there's like there's some disincentive there to smaller groups, yeah.

And that we've that is concerning too as well as you know overarching county wide contracts versus.

Is maybe spa based or regional based where you can kind of maybe start out a little bit smaller in your own region where you know you could probably do that, but maybe you can't do something county wide.

I mean, for example, we had like a coffee provider.

Or like a little coffee provider in Antelope Valley.

But they're going up against a Starbucks.

They don't. Their social enterprise and it's like that's a really hard thing. And they also were like, look, we can't provide coffee to Long Beach or something, but.

Like, hey, we're up in Antelope Valley.

Can't we provide it to like some of the county departments and we've been able to kind of get that started breaking up the contracts to say why does it have to be one for the whole county?

What if I want to buy my pens in Antelope Valley from OfficeMax and in Long Beach I want to buy it from staples like So what?

Or whatever.

You know Monica's office supplies.

I don't.

But yeah, I think we're all trying to get at that same issue.

It's not you Lucy's.

Yeah, but just our, our our like my frustration is more that it's like.

We want to see these things out.

We know it's super extra timely.

Then there's this and that and this and that. And in the meantime, we're just constantly extending current contracts for a very, very long period of time.

You know, maybe people have been on the sole sources for too long.

We want to kind of get away from as well, so I'm trying to get at this piece from multiple areas, so I appreciate the conversation today. OK with that, colleagues.

Do I have any other board letters that I have moved?

At this point I do have one follow up question on this one.

Brandon, you alluded to and I think you said earlier too, that 5 million from DMH was no longer made available.

Was that, did you say that was PEI those prop 1?

Mention.

The Pi.

But they might have a new name, right?

Something like that, yes.

So I have lost track a little bit of what happened to the PEI money when I went to the state and went to CD PH that the state ever ended up issuing funding opportunity for what the Pi funding used to be.

There is.

Is there any way that you can then augment if that opportunity then comes?

Back but via the status through DMH augment the capacity here instead of it being a \$5,000,000 reduction.

Speaking somewhat out of turn here without knowing all the details, but I think the image would have to apply for the funding and then agree to yeah, so share it over to us as part of the contract.

Not for the PEI, though. That would moved out of EMH and then CDH, and then put in CD medical. Biller could apply.

I think so.

I think it was moved to CDPH as opposed to now getting lost again in the states alphabet soup, but this was then moved into the public health program. If I remember correctly, and I don't remember then where the grants came out through the public health thing, but I.

Did not think it was going through mental health anymore, OK?

Hello, that's my last question, Mark.

Thank you.

Just to follow up.

Earlier Carb portal discussion, it does look like we allocated \$858,000 in the 2526 budget.

New IT for care portal new IT.

State funding.

Yeah, it's a pass through to DCFS.

Have gone.

Oh yeah, separately.

Otherwise it wouldn't be in our budget.

So just FYI for my colleagues.

Function really through you, Monica.

It really did solidify.

Came back like airport just strictly to correct the record. There were seven or eight applicants, but they were not qualified, so that one qualified it.

Although, could you share that list with me?

Thank you.

Excellent. We'll go back to public comment.

Any public comment on any of these board letters that we have discussed?

Seeing none online or in person, and my colleagues tell me that I finally have finished this agenda and read all of the board letters appropriately.

My apologies everyone for getting mixed up today, but as a reward I have to search for everyone.

So thank you.

Great. Yay. So wonder back.

Let me give me give me a SEC to hang up here. Hang up.

□ **Mike Tsao** stopped transcription