



FESIA A. DAVENPORT  
Chief Executive Officer

## County of Los Angeles Health and Mental Health Services

**DATE:** Wednesday, January 26, 2022  
**TIME:** 10:30 a.m.

**THIS MEETING WILL CONTINUE TO BE CONDUCTED VIRTUALLY TO ENSURE THE SAFETY OF MEMBERS OF THE PUBLIC AND EMPLOYEES AS PERMITTED UNDER STATE LAW.**

**TO PARTICIPATE IN THE MEETING, PLEASE CALL AS FOLLOWS:**

**DIAL-IN NUMBER: 1 (323) 776-6996**

**CONFERENCE ID: 322130288#**

**[MS Teams link](#) (Ctrl+Click to Follow Link)**

### **AGENDA**

Members of the Public may address the Health and Mental Health Services Meeting on any agenda item. Two (2) minutes are allowed for each item.

**THIS TELECONFERENCE WILL BE MUTED FOR ALL CALLERS. PLEASE DIAL \*6 TO UNMUTE YOUR PHONE WHEN IT IS YOUR TIME TO SPEAK.**

- I. Call to order
- II. **Discussion Item(s):**
  - a. **CEO Alternatives to Incarceration (ATI)/Homeless Initiative (HI), Department of Mental Health, Department of Public Health, Department of Health Services, and Alliance for Health Integration (AHI):** Overview of Countywide Bed Inventory
- III. **Information Item(s)** (Any Information Item is subject to discussion and/or presentation at the request of two or more Board offices):
  - a. **DHS:** Authorize the Acquisition of a Zeiss Tivato 700 Microscope for Harbor-UCLA Medical Center

IV. **Presentation Item(s):**

- a. **DMH:** Approval to Enter into a Grant Agreement with The State of California, Mental Health Services Oversight and Accountability Commission for the Mental Health Student Services Act of 2019 Grant; Authority to Execute a New Memorandum of Agreement and Amend Two Agreements to Support the Community School Initiative

V. Items Continued from a Previous Meeting of the Board of Supervisors or from the Previous Agenda Review Meeting

VI. Items not on the posted agenda for matters requiring immediate action because of an emergency situation, or where the need to take immediate action came to the attention of the Department subsequent to the posting of the agenda

VII. Public Comment

VIII. Adjournment



**Health Services**  
LOS ANGELES COUNTY

# DHS Beds

Inpatient Psychiatric, ODR, and Housing for Health

January 26, 2022

# County Hospital Psychiatry Beds

## LA COUNTY DEPARTMENT OF HEALTH SERVICES - GENERAL ACUTE CARE HOSPITALS

FACILITY NAME	SUPERVISORIAL DISTRICT	BED CAPACITY	AVERAGE LENGTH OF STAY (DAYS) ON 1/24/22
<b>PSYCHIATRY EMERGENCY SERVICES (PES)</b>			
LAC+USC MEDICAL CENTER	1	16	2
OLIVE VIEW - UCLA MEDICAL CENTER	3	22	4
HARBOR- UCLA MEDICAL CENTER	2	35	2
<b>TOTAL</b>		<b>73</b>	<b>3</b>

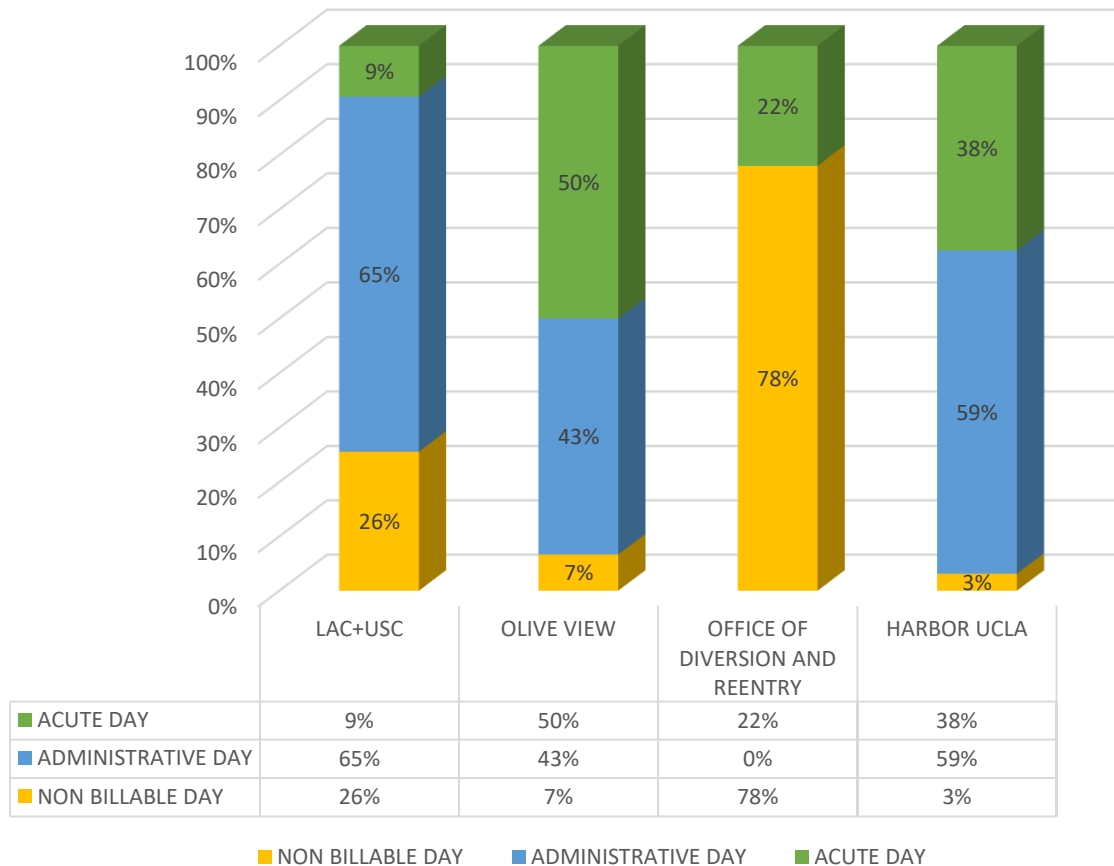
FACILITY NAME	SUPERVISORIAL DISTRICT	LICENSED BEDS	OPERATING BEDS AGES 13-17	OPERATING BEDS AGES 18+	OPERATING BEDS TOTAL	AVERAGE LENGTH OF STAY (DAYS) ON 1/24/22
<b>PSYCHIATRY INPATIENT SERVICES</b>						
LAC+USC MEDICAL CENTER	1	58	10	48	58	118
OLIVE VIEW - UCLA MEDICAL CENTER	3	32	0	32	32	45
OLIVE VIEW MEDICAL CENTER: OFFICE OF DIVERSION REENTRY (ODR)	3	18	0	18	18	22
HARBOR - UCLA MEDICAL CENTER	2	38	0	38	38	61
<b>TOTAL</b>		<b>146</b>	<b>10</b>	<b>136</b>	<b>146</b>	<b>75*</b>

\* Does not include ODR average length of stay as ODR placements are not included in the DMH system of care

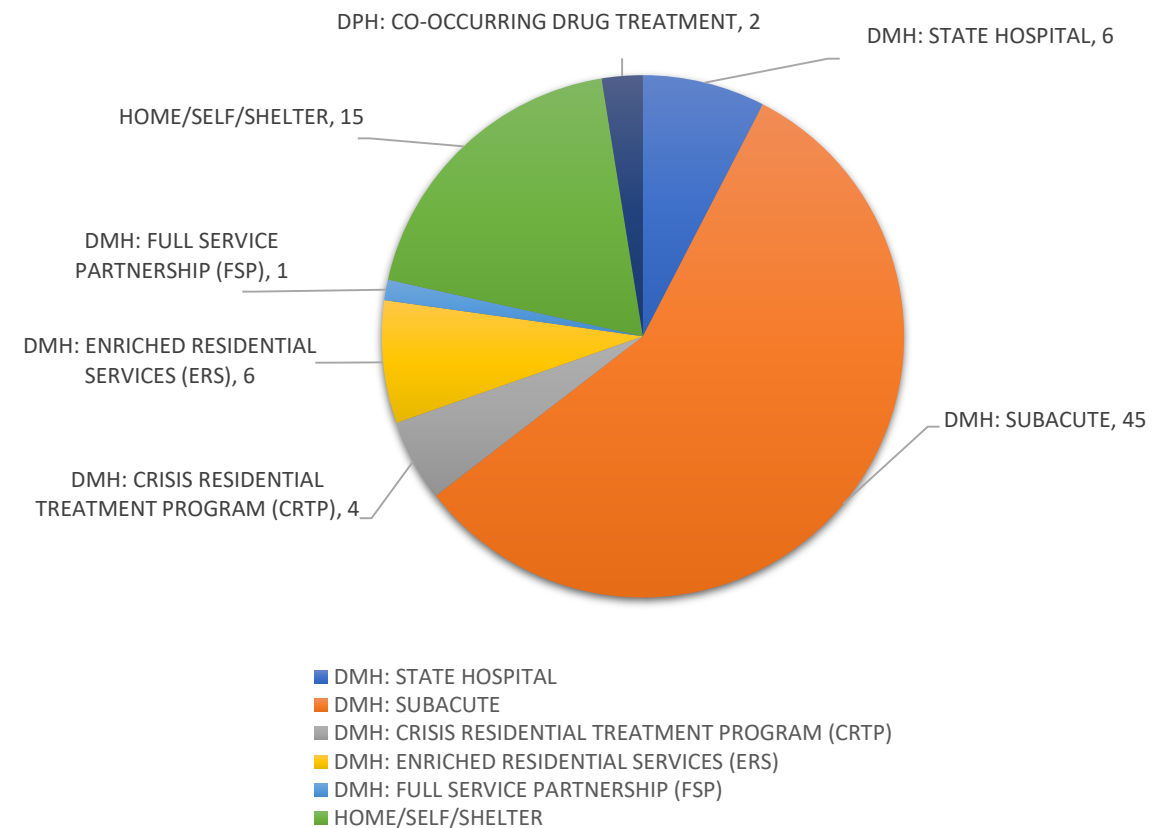


# Acute Psychiatry Inpatient Services

**PSYCHIATRY INPATIENT SERVICES  
BED DAY STATUS BY HOSPITALS**



**TOTAL PATIENT AWAITING DISCHARGE TO VARIOUS  
LEVELS OF CARE:  
N= 79**



# Jail Based/Clinical Diversion



## ODR Housing

- Began August 2016
- Permanent supportive housing, intensive case management, formal probation

Persons currently active: 2,109  
Persons in permanent supportive housing: 903

Total  
Released:  
**3,679**



## MIST-CBR

- Began October 2015
- Misdemeanor Incompetent to Stand Trial Community-Based Restoration

Persons being restored in community on active court order: 140

Total  
Released:  
**2,006**



## FIST-CBR & Off-Ramp

- Began July 2018
- Felony Incompetent to Stand Trial Community-Based Restoration
- Off-Ramp, competency findings & services under PC 1370 (a)(1)(g)

Persons being restored in community on active court order: 457  
Persons found competent while in jail, avoiding State Hospital: 392

Total  
Released:  
**891**



## Maternal Health

- Began March 2018
- Diversion of pregnant women from custody

Persons currently active: 115

Total  
Released:  
**202**



## DSH Diversion

- Began March 2019
- Specialized use of PC 1001.36

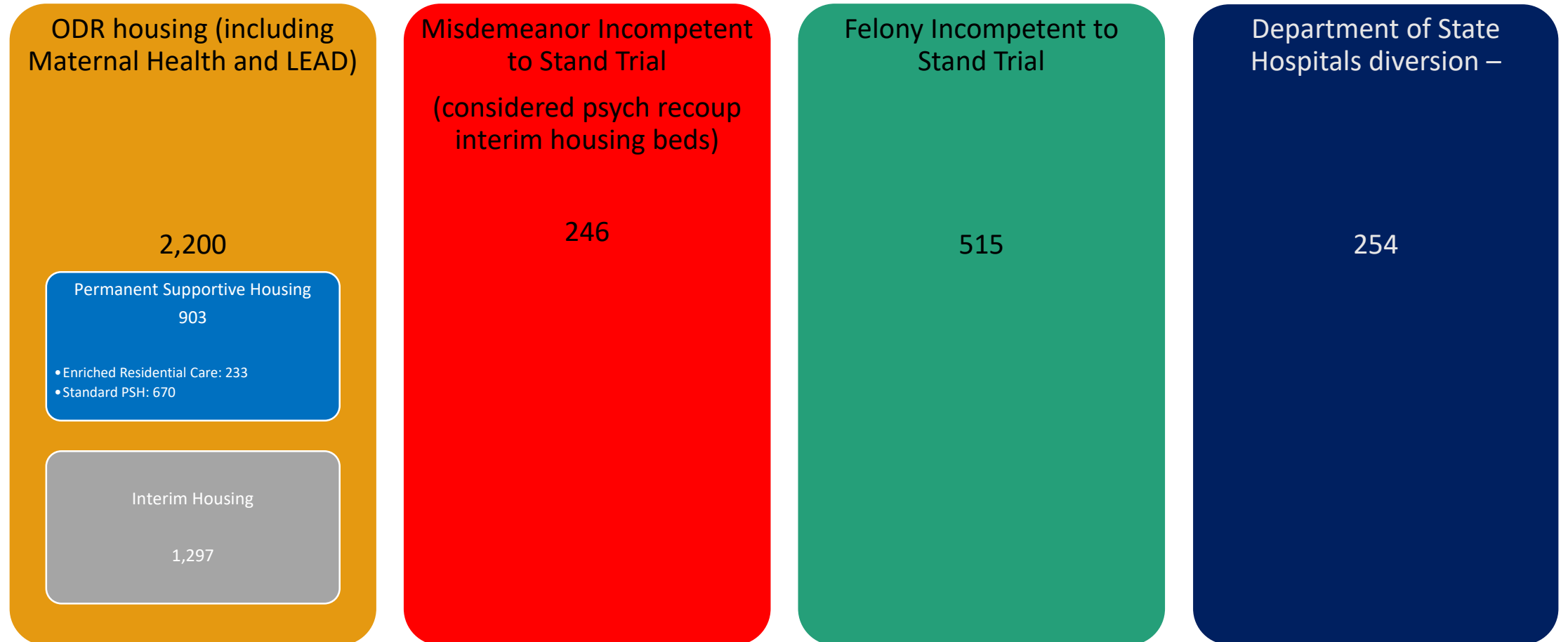
Total people diverted: 303

Total  
Released:  
**303**

Grand Total  
Released from Jail  
into Community  
Services:  
**7,081**

December, 2021

# Jail Based/Clinical Diversion



# Housing for Health

- HFH provides housing and services to homeless individuals with physical and/or behavioral health conditions, high utilizers of public services, and other vulnerable populations.
- HFH administers various funding streams including Measure H and investments from County departments for their prioritized populations.

HFH Bed Type	# of Beds/Units
Interim Housing beds	
Psychiatric Recuperative Care	159
Medical Recuperative Care	687
Stabilization Housing	1750
Permanent Supportive Housing slots	
Tenant-based	9100
Project-based	7000
Enriched Residential Care (ARF/RCFE) placements	770
Sobering Center beds	50



# Los Angeles County's Specialty Substance Use Disorder (SUD) Treatment System – Capacity & Needs

**Gary Tsai, M.D.** (*he/him/his*)

Division Director

Substance Abuse Prevention and Control

County of Los Angeles Department of Public Health

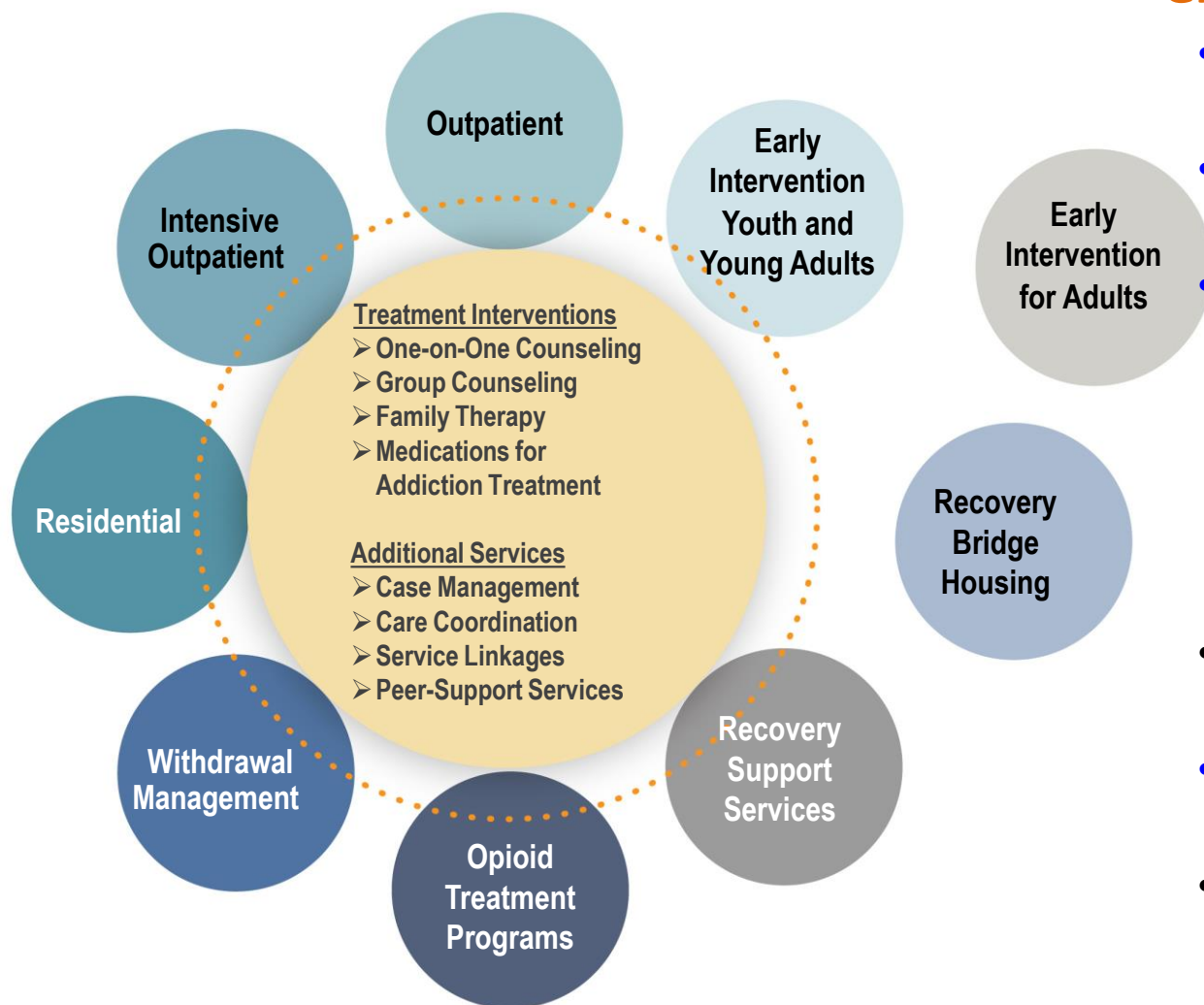


## Substance Abuse Prevention & Control

**Prevention First, Treatment Works,  
& Recovery is Possible!**

- SAPC is a division within the Los Angeles County Department of Public Health that serves as the **specialty SUD managed care plan** for the County and oversees a spectrum of **substance use prevention, harm reduction, and treatment** services across the County.
- **SAPC contracts out the entirety of its SUD treatment services.**
- Over 80 contracted SUD treatment providers in over 350 sites throughout the County.

# Los Angeles County's Available SUD Benefits



- **Growth After DMC-ODS**
  - **180% increase in residential beds**
  - **1000% increase in residential services**
  - **Over 550% increase in Recovery Bridge Housing beds and **over 4000% increase** in expenses related to RBH (compared to AFDLC beds pre-ODS)**
  - **Significant expansion in Room & Board expenses**
  - **50% increase in outpatient services**
  - **Significant expansion of investments in Prevention services**



# No Wrong Door Pathways To Access Alcohol/Drug Treatment

1

## **SASH**

{ Substance Abuse Service Helpline }  
**1-844-804-7500**

A 24/7 toll-free helpline where a team of professionals is available to provide screening, resources and referral directly to alcohol/drug treatment provider.

2

## **CORE Centers**

{ Connecting to Opportunities for Recovery and Engagement }

Community spaces throughout LAC where staff provide alcohol/drug education, resources and in-person screening and linkage to treatment.

3

## **CENS**

{ Client Engagement and Navigation Services }

LAC County staffed sites serving as liaisons between state, County, city agencies and alcohol/drug treatment providers, conducting in-person alcohol/drug education, screening and referrals to treatment.

4

## **SUD Providers**

{ Self-referrals }

Any person (or their representative) can contact alcohol/drug treatment providers directly or by using the Online Provider Directory to link into or find out more about treatment options.



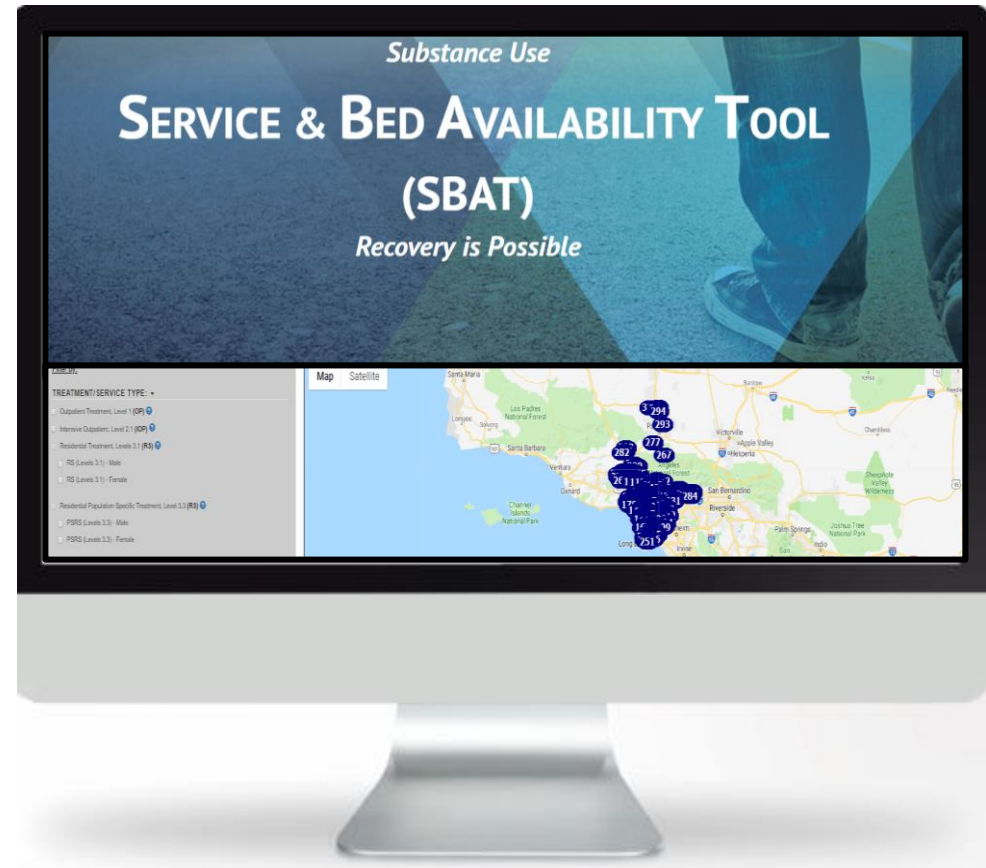


# Service & Bed Availability Tool (SBAT)

The SBAT website allows anyone with internet to find specialty SUD treatment services and site contact information.

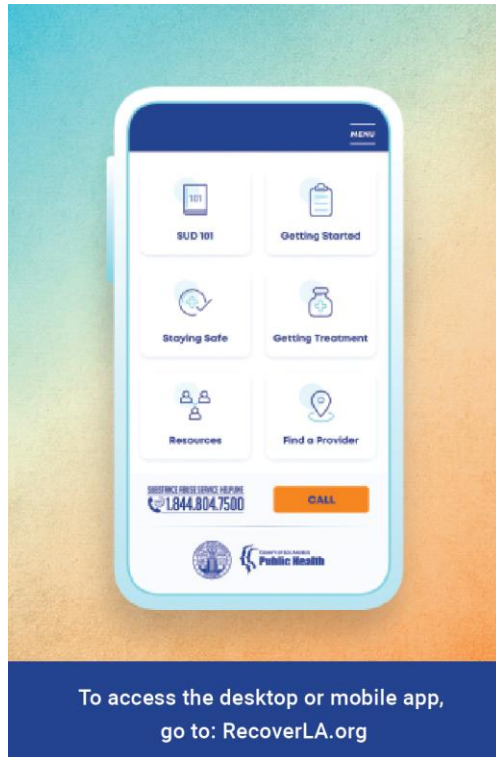
The SBAT includes filters to help users identify the specific services they need based on:

- Distance
- Treatment/Service Type
- Languages Spoken
- Clients Served (e.g., youth, perinatal, disabled, LGBTQIA, homeless, re-entry, etc.)
- Night/Weekend availability
- Bed Available Now



<https://sapccis.ph.lacounty.gov/sbat/>


# Recover LA Mobile App and Resource Guide



- Mobile service locator & resource guide
- Helps residents learn about SUD and how to access prevention, harm reduction, and treatment resources:
  - Information about substance use and misuse
  - Medications for addiction treatment (MAT)
  - Self-screening guide
  - Harm reduction options
  - SUD treatment options
  - Patient rights and confidentiality
- Available in 13 languages

QR code for app



Install this webapp on your phone:  
Tap  and then Add to Homescreen



# Bed Capacity in the Specialty SUD System in LA County

	Bed Type			
	Residential	Withdrawal Management	Recovery Bridge Housing	Total
<b>Contracted SUD Beds</b>	2,334	130	973	<b>3,437</b>
<b># of Sites / # of Agencies</b>	85 / 36	40 / 19	107 / 19	<b>192 / 37</b>
<b>Average % Daily Utilization of Contracted SUD Beds</b>	61%	67%	65%	<b>62%</b>

- **Reasons for under-utilization of contracted beds**
  - Siloed vs. Network approach to bed utilization
  - Entities contracting with multiple payers for the same beds
- **Strategies to address this under-utilization of contracted beds**
  - Pilot a bed management system in LA City to explore potential scaling of bed management countywide
  - Contract compliance
  - Contracting for more beds

# Gaps and Growth Opportunities Related to SUD Treatment

- **Treatment**

- Withdrawal Management (WM) – both residential and inpatient beds and outpatient WM
- Residential beds – especially for co-occurring populations (level 3.3) and youth
- Recovery Bridge Housing beds

- **Services**

- Medication for Addiction Treatment (MAT) – at all sites
- Harm Reduction (aka: Engagement and Overdose Prevention [EOP] Hubs)
- Contingency Management



# Discussion



**“The opposite of addiction is not sobriety; the opposite of addiction is **social connection**.”**

*- Johann Hari*



# Los Angeles County Department of Mental Health: ▶▶ Current Capacity & Needs

Amanda Ruiz, MD

Deputy Director, Intensive Care Division



LOS ANGELES COUNTY  
**DEPARTMENT OF  
MENTAL HEALTH**  
hope. recovery. wellbeing.

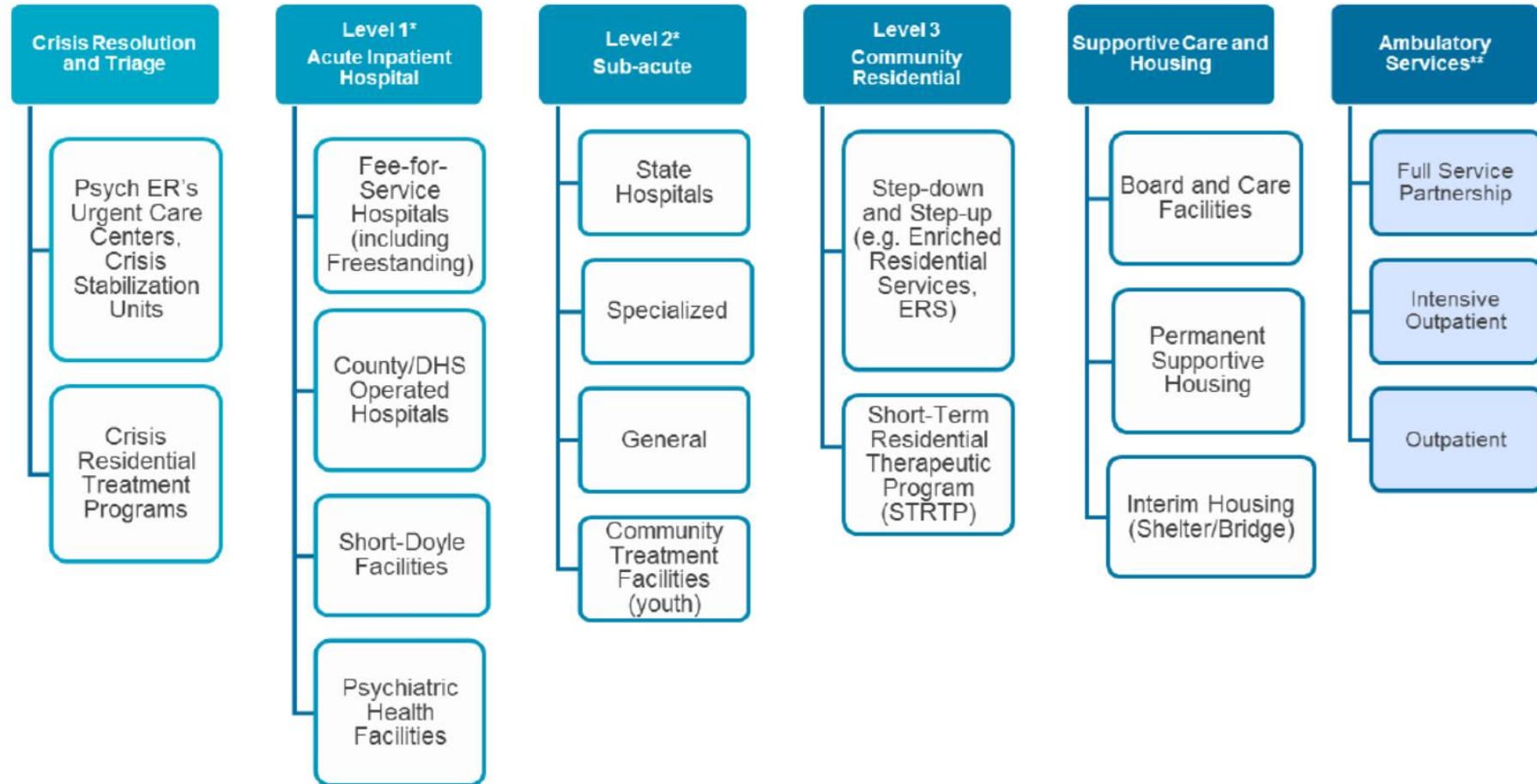




## ►► Intensive Care Division

- ❑ Responsible for overall administrative, clinical, and fiscal aspects of 24-HR residential programs, including contracted FFS 1 acute inpatient psychiatry.
- ❑ Coordinates functions to maximize flow of over 25,000 admissions annually between various levels of care and community-based mental health services and supports.
- ❑ Oversees programs with a total annual budget of over 550 million dollars.

## County DMH Levels of Care





## ►► Current Capacity

Level of Care	Number of Providers	Number of Beds / Slots	ALOS	Waitlist (days)	Pipeline
Acute Inpatient (FFS1)	29 contracted hospitals *10 APH *19 GACH	2000	7-10 days	Varies	TBD
Subacute IMD	16	1200	22 mos	190 days	48 BHC 70 Kedren
Enriched Residential Services (ERS)	8	397	9 mos	140 days	TBD
Crisis Residential Treatment Program	6	81	16 days	11 days	240 RCV
Urgent Care (UCC)	9	122 adult 30 adol	23 hours	Walk-in	TBD



# ▶▶ Restorative Care Villages

- **LAC-USC:**

- 64 CRTP
- 96 Recuperative Care Beds (DHS)

- **MLK BHC:**

- |           |                               |
|-----------|-------------------------------|
| • 32 PHF  | Peer Resource Center          |
| • 48 MHRC | Outpatient SUD (DPH)          |
| • 16 CRTP | Residential SUD (99 beds DPH) |
| • MHUCC   | Primary & UCC Clinics (DHS)   |

- **Olive View Campus**

- 80 CRTP
- UCC
- Mental Health Wellness Center
- 48 Recuperative Care (DHS)

- **Rancho Los Amigos**

- 80 CRTP
- 50 Recuperative Care (DHS)



## ►► 500-Bed Pilot : 2020

Level of Care	Number Contracted Beds
Acute Inpatient and Psychiatric Health Facility (PHF)	22
Subacute	124
Subacute-SHA	10
Total	156



## ►► 500-Bed Pilot: 2021

Level of Care	Contracted Beds
Acute Inpatient	26
Skilled Nursing Facility	35
State Hospital Alternative	22
Total	83
Grand Total	239



## ▶▶ System Opportunities

- Address siloes and under-utilization where they occur
- Tie bed management systems so that they communicate to one another (MHRLN and SBAT)
- Continue to encourage site development of multiple levels of care on one campus, including substance use treatment for SMI
- Address rehospitalization, discharge treatment planning, and contract compliance

# ►► Opportunities

Supervisory District	Project Site	BHCIP Funding Round	Type of Project	Construction Partner	Program(s)	New or Existing	Operational Funding Source Identified
1	LAC+USC	3	New Build	TBD	Psych UCC	Existing	Yes
2	BHC on MLK Campus	3	Renovation	PW	Adult Mental Health Outpatient Program, Psych UCC	Existing	Yes
2	BHC on MLK Campus	3	Renovation	PW	Respite and Recovery Center (DPH), SUD Outpatient Program, SUD Residential Treatment Program, Psychiatric Health Facilities and Mental Health Rehabilitation Center	New	Yes
2	MLK CFWC	3	Tenant Improvement	ISD	Children's Outpatient Program	Existing	Yes
2	Harbor CII	3	Tenant Improvement	ISD	Children's Outpatient Program and TIES for Families	Existing	Yes
2	Harbor Replacement Hospital	5	New Build	PW	Acute Psychiatric Inpatient Beds (Expansion)	Existing	Yes
3	Olive View UCC	3	Tenant Improvement	ISD	Mental Health Hub	Existing	-
5	High Desert	4	New	TBD	Adult Outpatient Program	Existing	-
5	High Desert	4	New	TBD	Mental Health Hub	Existing	-

# ►► Opportunities

Supervisory District	Project Site	BHCIP Funding Round	Type of Project	Construction Partner	Program(s)	New or Existing	Operational Funding Source Identified
1	LAC+USC	5 or 6	New Build	TBD	200 bed subacute	New	No
1	LAC+USC	5 or 6	New Build	TBD	Subacute Facility, SUD Respite and Recovery Center (RRC)	New	No
2	Wellpath	5 or 6	Tenant Improvement	TBD	Locked subacute	New	No
4	Long Beach Community Hospital	5 or 6	Tenant Improvement	TBD	PHF	New	No
4	Rancho Los Amigos	5 or 6	New	TBD	Psych UCC	New	No
5	Lake View Terrace Phoenix House	5 or 6	Tenant Improvement	TBD	Locked subacute	New	No
5	High Desert	5 or 6	New	TBD	C RTP	New	No

# Discussion

[amaruiz@dmh.lacounty.gov](mailto:amaruiz@dmh.lacounty.gov) | [@lacdmh](https://twitter.com/lacdmh)



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**DEPARTMENT OF  
MENTAL HEALTH**  
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JANUARY 26, 2022



# Los Angeles County HOMELESS INITIATIVE

## Overview of Countywide Bed Inventory





# LOS ANGELES COUNTY HOMELESS INITIATIVE

The **Homeless Initiative** oversees Los Angeles County's ongoing effort to expand and enhance services for people experiencing homelessness or at risk of losing their homes, largely funded through **Measure H**.

It directs **strategies** and allocates **funding** to scale up:

- **Homeless Prevention** for people at risk of eviction or exiting foster care, hospitals, jails, other institutions
- **Outreach** to connect people in encampments and vehicles to housing and supportive services
- **Interim Housing**, such as shelters, recuperative care facilities, and recovery bridge housing
- **Permanent Housing** with subsidized rent and, if necessary supportive services for those with acute needs
- **Supportive Services**, such as case management; linkages to health and mental health care and substance use disorder treatments; criminal record clearing; benefits enrollment; job training and employment; and other services to help people achieve stability and potentially self-sufficiency

# Homeless Initiative Funding for Interim Housing Strategies

DEPTS	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22
<b>B7</b> Interim/Bridge Housing for Those Exiting Institutions	<b>\$3.3M</b> in HPI* <b>\$4.6M</b> in one-time AB 109 funding <b>\$3.4M</b> in one-time SB 678 funding	<b>\$13.1M</b>	<b>\$26.2M</b>	<b>\$33.4M</b>	<b>\$36M</b>	<b>\$36.8M</b>
<b>E8</b> Enhance the Emergency Shelter System	<b>\$1.5M</b> in HPI	<b>\$55.9M</b>	<b>\$99.7M</b>	<b>\$106.1M</b>	<b>\$102.1M</b>	<b>\$112.8M</b>
<b>E14</b> Enhanced Services for Transition Age Youth (TAY)	<b>\$5.0M**</b>	<b>\$3.0M</b>	<b>\$14.2M</b>	<b>\$15.4M</b>	<b>\$22.1M***</b>	<b>\$16.8M***</b>
<b>TOTAL</b>	<b>\$17.8M</b>	<b>\$72M</b>	<b>\$140.1M</b>	<b>\$153.9M</b>	<b>\$160.2M</b>	<b>\$166.4M</b>

\* Board approved one-time \$100M Homeless Prevention Initiative (**HPI**) funding for Interim Housing strategies pre-Measure H

\*\* Total amount allocated for FY2016-17 E14. Includes non-interim housing

\*\*\* Includes State Homeless, Housing and Assistance Program Funding

# Measure H Funding for Strategies B7 and E8

DEPTS	FY 2017-18		FY 2018-19		FY 2019-20		FY 2020-21		FY 2021-22	
	B7	E8	B7	E8	B7	E8	B7	E8	B7	E8
LAHSA	\$1.8M	\$50.9M	\$5.0M	\$61.6M	\$4.7M	\$63.5M	\$4.6M	\$76.1M	\$4.6M	\$75.9M
DHS	\$9.6M	\$4.9M	\$16.7M	\$37.4M	\$21.9M	\$41.9M	\$21.9M	\$23.2M	\$22.7M	\$36.2M
DMH	\$65,000	\$66,000	\$65,000	\$65,000	\$72,000	\$72,000	\$72,000	\$72,000	\$82,000	\$81,000
DPH-SAPC	\$1.6M	-	\$4.4M	\$618,000	\$6.7M	\$668,000	\$9.4M	\$668,000	\$9.4M	\$668,000
TOTAL	\$13.1M	\$55.9M	\$26.2M	\$99.7M	\$33.4M	\$106.1M	\$36M	\$100.1M	\$36.8M	\$112.8M

# Homeless Initiative-Funded Interim Housing Beds

DEPT/ AGENCY	HOUSING PROGRAM	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22
DHS	<ul style="list-style-type: none"> <li>• Recuperative Care</li> <li>• Stabilization Housing</li> </ul>	1,017	1,190	1,106	1,203	1,288
DPH-SAPC	<ul style="list-style-type: none"> <li>• Recovery Bridge Housing</li> </ul>	500	500	500	500	500
LAHSA	<ul style="list-style-type: none"> <li>• Crisis Housing</li> <li>• Bridge Housing</li> <li>• Transitional Housing</li> <li>• Winter Shelter</li> <li>• Tiny Homes</li> <li>• Safe Parking</li> </ul>	2,963	4,544*	4,051**	4,128	3,991***
<b>TOTAL</b>		<b>4,480</b>	<b>6,234</b>	<b>5,567</b>	<b>5,651</b>	<b>5,779</b>

\*Variance between FY2017-18 and FY2018-19 is due to unexpected growth in the family crisis housing system.

\*\*Variance between FY2018-19 and FY2019-20 is due to replacing motel vouchers with family crisis housing units.

\*\*\*Reduction due to select LA City's *A Bridge Home* (ABH) projects reaching the 3-year mark. County committed to funding 600 ABH beds for 3 years.

# Number of People Placed in Interim Housing

## Strategies B7, E8 and E14

AGENCY	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22 1 <sup>st</sup> Quarter
B7 Interim Housing	2,179	3,257	4,438	2,684	1,785
E8 Emergency Shelter	15,790	22,362	18,229	13,975	5,817
E14 TAY Housing	287	872	960	959	585
<b>TOTAL</b>	<b>18,265</b>	<b>26,491</b>	<b>23,627</b>	<b>17,618</b>	<b>8,187</b>



# OTHER INTERIM HOUSING INVESTMENTS

## CAPITAL AND OPERATING

- Cities & COGs Interim Housing Services Fund (**\$10M**)\*
- Interim Housing Capital Fund Pool (**\$50M**)
- American Rescue Plan Act Tranche 1 (**\$100M**)\*\*
- Emergency Solutions Grants Program - CARES Act\*
- Project Homekey One (will convert to PSH in FY2022-23)
- Project Homekey Two (application underway)
- Various Board discretionary funds

\*Funds operating costs

\*\*Includes capital funding for interim and permanent supportive housing





THANK  
YOU



# TYPES OF INTERIM HOUSING BEDS

## DHS:

**Stabilization Housing:** provides placement options for individuals with complex health and or/behavioral health conditions who lack a place to live and need a higher level of support services than is available in most shelters.

**Recuperative Care:** provides placement options for individuals being discharged from an inpatient hospital setting who lack a place to live and would benefit from short-term care and medical oversight. Recuperative care settings provide semi-private or congregate living that include on-site medical and supportive services geared towards promoting recovery and stabilization.



## DMH:

**Interim Housing Program:** temporary shelter for homeless adults with mental illness – and their minor children – while they work to transition into permanent housing. Clients must be willing to receive services from a DMH-operated clinic or DMH contract provider.

**Enhanced Emergency Shelter Program for Transition Age Youth:** a supportive housing environment for up to 36 nights before transitioning to permanent housing.

**Enriched Residential Care:** clients with mental illness who require 24/7 care and supervision are placed into licensed residential facilities, such as Adult Residential Facilities and Residential Care Facilities for the Elderly (commonly known as Board and Care facilities)

## DPH-SAPC:

**Recovery Bridge Housing:** abstinence-focused, peer-supported transitional housing for young adults and adults receiving substance use disorder treatment services



# LAHSA

**Crisis Housing:** emergency shelter intended to help people quickly exit to permanent housing; includes beds for various sub-populations including individuals, families, and TAY; includes non-congregate interim housing such as **Tiny Homes**

**Bridge Housing:** emergency shelter with enhanced services to help people quickly exit to permanent housing; includes beds for various sub-populations including individuals, families, women, TAY, older adults, and people exiting institutions; includes non-congregate interim housing such as **Tiny Homes**

**Transitional Housing for Victims of Domestic Violence/Intimate Partner Violence** - Temporary housing for up to 24 months for individuals or families (with or without children)

**Winter Shelter Program:** site-based, 14- to 24-hour program between November 1 – March 31 annually

**Safe Parking:** provides vehicle dwellers with a safe and legal place to park and sleep at night. Referrals and linkages to community resources.

LOS ANGELES COUNTY  
**ATI OFFICE**



Alternatives to Incarceration

*"Care First, Jails Last"*

## **ALTERNATIVES TO INCARCERATION OFFICE**

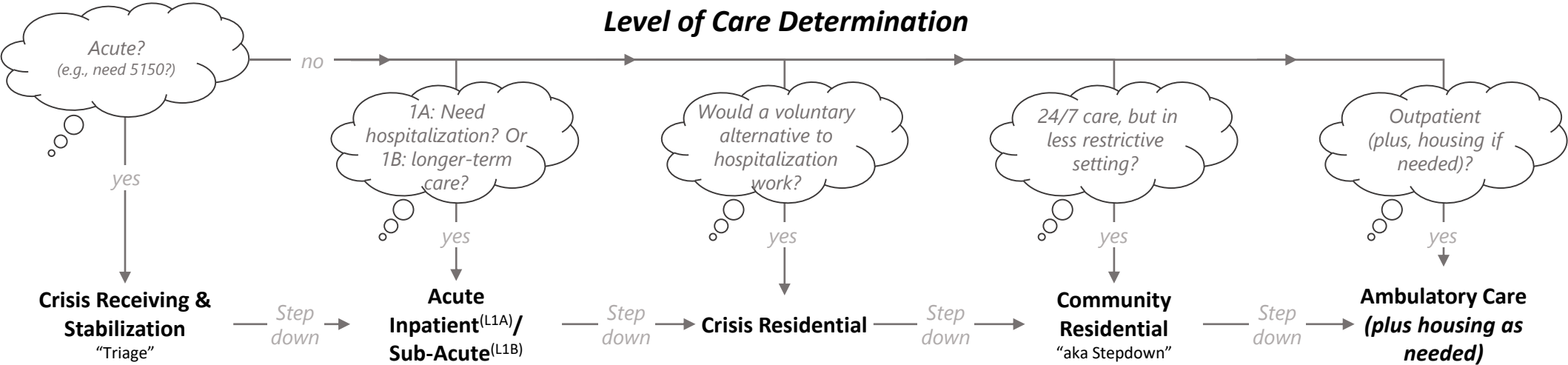
*Judge Songhai Armstead (Ret.) | Executive Director*

# LA County Behavioral Health "Continuum of Care"



# LA County Behavioral Health “Continuum of Care”

Introduced a common vocabulary for talking about Mental Health & SUD levels of care

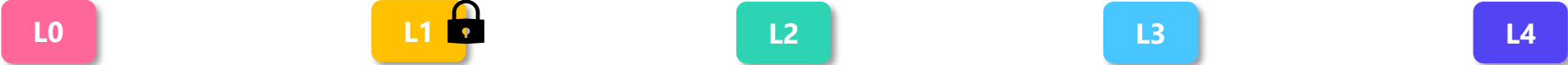


**KEY**

- Locked facility
- Clickable thumbnail, link to more detail



**Mental Health**  
InterQual® LOCs



**Substance Use**  
ASAM LOCs  
(all unlocked)

Sobering Centers



Inpatient Withdrawal Mgmt

Residential Withdrawal Mgmt

High/Low Intensity Residential

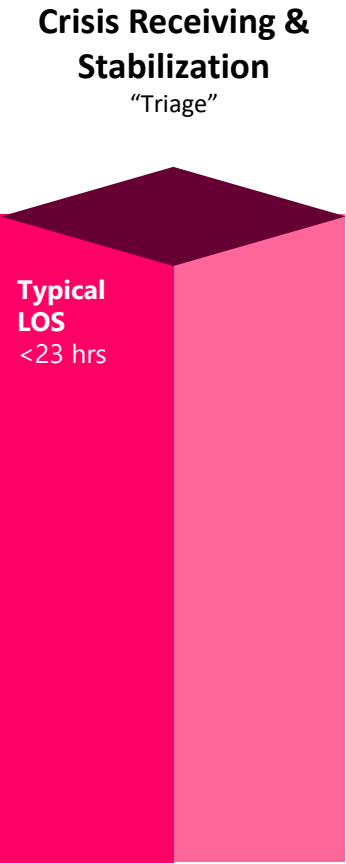
plus, Recovery Bridge Housing





# Bed Taxonomy: L0 Crisis Receiving & Stabilization

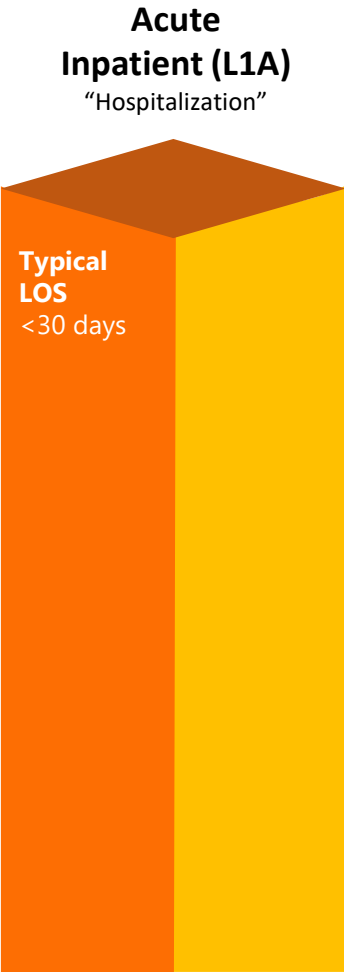
Typical entry point into system of care, with goal to prevent hospitalization



	Type	Avg LOS (Length of Stay)	Examples
Mental Health	Crisis Call Centers	n/a	<ul style="list-style-type: none"><li>DMH ACCESS Center</li><li>Didi Hirsch</li><li>211LA</li></ul>
	Mobile Response Teams <i>(including Law Enforcement Co-Response Teams)</i>	n/a	<ul style="list-style-type: none"><li>DMH Psychiatric Mobile Response Team (PMRT)</li><li>Private hospital Psychiatric Engagemetn Team (PET)</li><li>LAPD SMART</li><li>LASD MET</li></ul>
	Behavioral Health Urgent Care Centers (UCC)	<23 hours	<ul style="list-style-type: none"><li>Mental Health Urgent Care at MLK by Exodus</li><li>Providence Little Company of Mary Urgent Care Center</li></ul>
	Psychiatric Emergency Room (ER)	15-40 hours	<ul style="list-style-type: none"><li>Olive View Psych ER</li><li>LAC+USC Psych ER</li><li>Harbor/UCLA Psych ER</li></ul>
SUD	Sobering Centers	<23 hours	<ul style="list-style-type: none"><li>David L. Murphy Sobering Center (Exodus)</li></ul>

# Bed Taxonomy: L1 Acute/Sub-Acute Inpatient (1/2)

L1A is the most acute level of service (usually inpatient), with typical LOS <30 days



		Type	Avg LOS (Length of Stay)	Examples
L1A: Acute Inpatient (aka "Hospitalization")				
Mental Health	General Acute Care Hospitals (GACH) (locked)	Fee for Service (FFS) Hospitals	6.8 days	• USC Verdugo Hills • Kaiser Permanent Mental Health Center
		County DHS Hospitals <i>(public hospital, must take everyone)</i>	13.9 days	• Olive View • USC Augustus Hawkins (USC+LAC) • Harbor-UCLA
	Acute Psychiatric Hospitals (APH) (locked) <div>* IMDs *</div>	Fee for Service (FFS) Hospitals	6.8 days	• Resnick Neuropsych Hospital At UCLA • Tarzana Treatment Center
		Short Doyle Facilities <i>(indigent population focus)</i>	16.8 days	• Gateways Hospital • Kedren Acute Psychiatric Hospital
	Other (locked)	Psychiatric Health Facilities (PHF)	27.4 days	• Exodus Recovery Inc • La Casa PHF
SUD	Inpatient Withdrawal Management (unlocked) <sup>1</sup>	ASAM 4.0: Medically Managed	n/a	• Tarzana Treatment Centers • Behavioral Health Services
		ASAM 3.7: Medically Monitored	6.4 days	• Same as ASAM 4.0

<sup>1</sup> SUD facilities are voluntary and therefore unlocked facilities  
Source: [Department of Mental Health Bed Shortage Report \(Oct 2019\)](#), Other DMH data, CEO "Fact Sheet-Psych and IMD Beds Level of Care," [DHS-SAPC's SBAT Tool](#)





# Bed Taxonomy: L1 Acute Inpatient/Sub-Acute (2/2)

L1B treats those needing intensive 24/7 care but on longer-term basis than L1A

**Sub-Acute (L1B)**  
aka "IMDs"

Typical LOS  
>1 year

Type	Avg LOS (Length of Stay)	Examples
L1B Sub-Acute (aka "IMDs")		
Mental Health	<b>State Hospitals</b>  (locked)	5.5 yrs <ul style="list-style-type: none"><li>USC Verdugo Hills</li><li>Kaiser Permanent Mental Health Center</li></ul>
	<b>Extended/Sub-Acute Facilities:</b>  (locked)  <i>Licensed either as</i> <ul style="list-style-type: none"><li>SNF-STP<sup>2</sup></li><li>MHRC<sup>3</sup></li></ul>	1.8 yrs <ul style="list-style-type: none"><li><u>SNF-STPs</u><ul style="list-style-type: none"><li>Gateways Hospital</li><li>Kedren Acute Psychiatric Hospital</li></ul></li><li><u>MHRCs</u><ul style="list-style-type: none"><li>Exodus Recovery Inc</li><li>La Casa PHF</li><li>Star View Adolescent Center</li></ul></li></ul>

*For populations placed by courts & CDCR (LPS, IST, NGRI)<sup>1</sup>*

*For those with more complex needs, including criminal background*

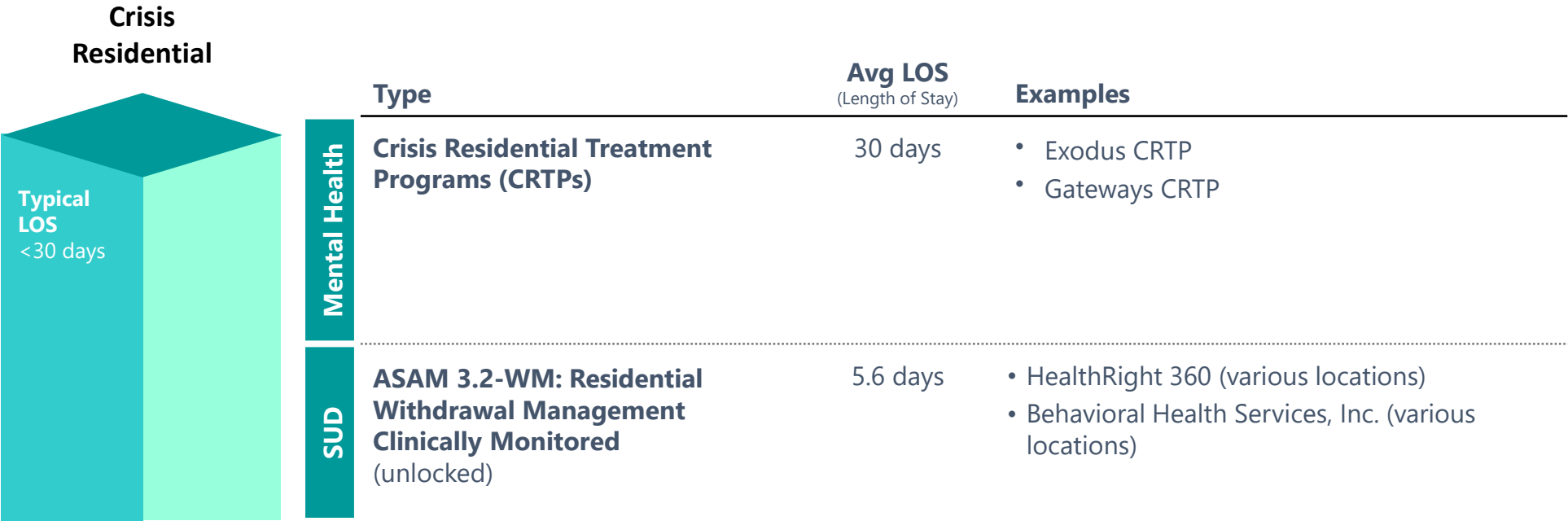
**Note that all Mental Health Sub-Acute Facilities are IMDs**

<sup>1</sup> LPS = patients treated under LPS (Lanterman-Petris-Short Act) conservatorship; IST = Incompetent to Stand Trial; NGRI = Not Guilt by Reason of Insanity  
<sup>2</sup> SNF-STP = Skilled Nursing Facility with Special Treatment Programs  
<sup>3</sup> MHRC = Managed Health Rehabilitation Centers

Source: [Department of Mental Health Bed Shortage Report \(Oct 2019\)](#), Other DMH data, CEO "Fact Sheet-Psych and IMD Beds Level of Care"

# Bed Taxonomy: L2 Crisis Residential

Voluntary alternative to hospitalization



# Bed Taxonomy: L3 Community Residential

24/7 care but in open residential setting with community reintegration as focus

**Community Residential**  
“aka Stepdown”

**Typical LOS**  
Usually <6 months, not more than 1 year

		Type	Avg LOS (Length of Stay)	Examples
Mental Health	Residential Treatment	<b>Enriched Residential Service (ERS)</b> <i>Board &amp; Care + Intensive Enriched Mental Health Services</i>	10 months	<ul style="list-style-type: none"> <li>Bridges - Casitas Esperanza (licensed ARF<sup>1</sup>)</li> <li>SSG - Westside Manor (licensed ARF)</li> </ul>
		<b>DHS ERS</b>	n/a	<ul style="list-style-type: none"> <li>TBD</li> </ul>
		<b>ODR Interim Housing</b> <i>FIST-CBR, MIST-CBR Housing</i>	n/a	<ul style="list-style-type: none"> <li>TBD</li> </ul>
SUD	High Intensity Residential	<b>ASAM 3.5: Non-Population Specific</b>	1.3 months	<ul style="list-style-type: none"> <li>Didi Hirsch Psychiatric Service</li> <li>LACADA</li> </ul>
		<b>ASAM 3.3: Population Specific</b>	1.2 months	<ul style="list-style-type: none"> <li>HealthRight360</li> <li>Fred Brown’s Recovery Services</li> </ul>
	Low Intensity Residential	<b>ASAM 3.1: Low Intensity Residential</b> <i>(+ Perinatal)</i>	1.4 months	<ul style="list-style-type: none"> <li>Alcoholism Center for Women, Inc.</li> <li>People Coordinated Services of SoCal</li> </ul>

Reliant on County’s shrinking Board & Care network

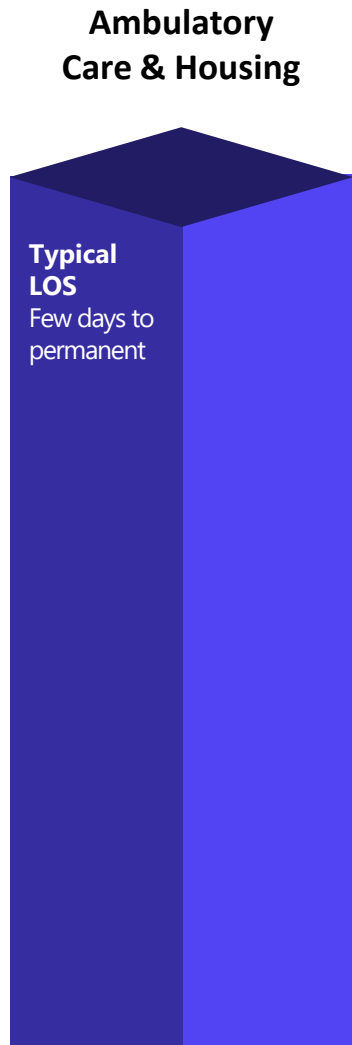
<sup>1</sup> ARF = Adult Residential Facility  
Source: [Department of Mental Health Bed Shortage Report \(Oct 2019\)](#), Other DMH data, CEO “Fact Sheet-Psych and IMD Beds Level of Care,” DMH Finance Services “Summary of Bed Facilities by Funding Source” (Aug 2021)



# Bed Taxonomy: L4 Ambulatory Care & Housing

Ensure sustained recovery after clients no longer need higher levels of care

NOT EXHAUSTIVE



		Type	Avg LOS (Length of Stay)	Example Programs & Locations
Mental Health	Outpatient	Full Service Partnerships (FSP)	n/a	• n/a
	DMH	<b>Board &amp; Care (Mental Health Focused)</b> <i>Licensed ARFs</i>	n/a	• <u>Location Examples:</u> Casa Colina Transitional Living Center, Burtree Residential Facility
		<b>Enriched Residential Care (ERC)</b> <i>Board &amp; Care + FSP</i>	n/a	• TBD
		<b>Interim Supportive Housing (Unlicensed)</b>	n/a	• Interim Housing Program (IHP) • <u>Location Examples:</u> Union Station Adult Center, Salvation Army Nancy Painter House
		<b>Permanent Supportive Housing (Unlicensed)</b> <i>Can Include FSP</i>	Permanent	• <u>Location Examples:</u> 28th Street YMCA Residences, Gateways Housing SRO
SUD	Outpatient	<b>ASAM 1.0: Outpatient</b>	Services provided in community setting, 2-3/week	• n/a
		<b>ASAM 2.1: Intensive Outpatient</b>	Community setting 4-5/week	• n/a
		<b>Recovery Support Services</b>	Support services after treatment completed	• n/a
	Residential	<b>Recovery Bridge Housing (RBH)</b>	56.4 days	• <u>Location Examples:</u> LACADA ART, START Houses
General	DHS	<b>DHS Housing Programs</b>	n/a	• Recuperative Care • Specialized Housing Program (SHP)
	LAHSA	<b>Various Programs</b>	n/a	• Crisis Housing • Bridge Housing • Winter Shelter Housing • Augmented Winter Shelter Housing • Project Roomkey (winding down)

# BOARD LETTER/MEMO CLUSTER FACT SHEET

☒ Board Letter

☐ Board Memo

☐ Other

<b>CLUSTER AGENDA REVIEW DATE</b>	1/26/2022		
<b>BOARD MEETING DATE</b>	2/8/2022		
<b>SUPERVISORIAL DISTRICT AFFECTED</b>	<input type="checkbox"/> All <input type="checkbox"/> 1 <sup>st</sup> <input checked="" type="checkbox"/> 2 <sup>nd</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup> <input type="checkbox"/> 5 <sup>th</sup>		
<b>DEPARTMENT(S)</b>	Health Services		
<b>SUBJECT</b>	Authorize the Acquisition of a Zeiss Tivato 700 Microscope for Harbor-UCLA Medical Center		
<b>PROGRAM</b>	N/A		
<b>AUTHORIZES DELEGATED AUTHORITY TO DEPT</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>SOLE SOURCE CONTRACT</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, please explain why:		
<b>DEADLINES/ TIME CONSTRAINTS</b>	N/A		
<b>COST &amp; FUNDING</b>	Total cost: \$336,000	Funding source: DHS Fiscal Year 2021-22 Final Budget	
	TERMS (if applicable): N/A		
	Explanation:		
<b>PURPOSE OF REQUEST</b>	Authorize the Director of ISD, as the County's Purchasing Agent, to proceed with the sole source acquisition of a Zeiss Tivato 700 Microscope from Carl Zeiss Meditec Inc. for DHS' H-UCLA MC.		
<b>BACKGROUND (include internal/external issues that may exist including any related motions)</b>	The acquisition of the Zeiss Tivato 700 Microscope will be used for surgeries performed by the surgical specialties of Otolaryngology, Plastic/Reconstructive Surgery, and Neurosurgery. This is a new purchase to increase the ability of the hospital to perform critical reconstructive surgery. The surgical microscope presently used in the operating room does not have the magnification capacity necessary to perform all of the specialized procedures offered by the hospital, such as lymphatic reconstruction procedures. The purchase of this equipment will allow the hospital to meet patient care needs. This will allow Surgeon to expand the spectrum, complexity, safety, and feasibility of the surgeries beyond the technology of the current systems available.		
<b>EQUITY INDEX OR LENS WAS UTILIZED</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, please explain how:		
<b>SUPPORTS ONE OF THE NINE BOARD PRIORITIES</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please state which one(s) and explain how: Supports Board priority #2, to implement strategies that identify, prioritize and effectively support the most disadvantaged geographies and populations by increasing access to certain types of microscopic surgical procedures, such as lymphatic reconstruction, that are community standard of care.		

<b>DEPARTMENTAL CONTACTS</b>	Name, Title, Phone # & Email: DHS - Jason Ginsberg, Chief, Supply Chain Operations, (323) 914-7926 jginsberg@dhs.lacounty.gov DHS – Azar Kattan, Chief Operations Officer, akattan@dhs.lacounty.gov, (424) 306-6312 County Counsel, Kelly Hassel, khassel@counsel.lacounty.gov, (213) 974-1803
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February 8, 2022

**DRAFT**  
**DHS Letterhead**

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

Dear Supervisors:

**AUTHORIZE THE ACQUISITION OF A ZEISS TIVATO 700 MICROSCOPE FOR  
HARBOR-UCLA MEDICAL CENTER  
(SUPERVISORIAL DISTRICT 2)  
(3 VOTES)**

**SUBJECT**

Authorize the Director of the Internal Services Department, as the County Purchasing Agent, to proceed with the sole source acquisition of a Zeiss Tivato 700 Microscope from Carl Zeiss Meditec, Inc. for the Department of Health Services' Harbor-UCLA Medical Center.

**IT IS RECOMMENDED THAT THE BOARD:**

Authorize the Director of the Internal Services Department (ISD), as the County's Purchasing Agent, to proceed with the sole source acquisition of a Zeiss Tivato 700 microscope from Carl Zeiss Meditec, Inc. for Department of Health Services' (DHS) Harbor-UCLA Medical Center (H-UCLA MC), with an estimated cost of approximately \$336,000.

**PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION**

Approval of the recommended action will allow ISD, to acquire the Zeiss Tivato 700 microscope to be used for surgeries performed by the surgical specialties of Otolaryngology, Plastic/Reconstructive Surgery, and Neurosurgery. This is a new purchase to increase the ability of the hospital to perform critical reconstructive surgery. The surgical microscope presently used in the operating room does not have the magnification capacity necessary to perform all the specialized procedures offered by the hospital, such as lymphatic reconstruction procedures. The purchase of this equipment will allow the hospital to meet patient care needs.

This will allow Surgeon to expand the spectrum, complexity, safety, and feasibility of the surgeries beyond the technology of the current systems available. In addition to microsurgery being performed, H-UCLA MC now have the available surgical skills to



perform lymphatic surgeries needed by patients. Existing microscope does not have the magnification necessary for lymphatic reconstruction procedures and use a light that tends to desiccate and dry out tissues. Updated scopes have improved upon this problem with gentler lighting. Also, the current video screens are broken and show up as black. These are needed so the Attending Surgeon and the Scrub can see what the Surgeons under the microscope are doing to either assist with instrumentation or to assess the work done by the residents.

DHS is requesting that the Microscope be acquired from a sole source vendor, Carl Zeiss Meditec Inc., because Zeiss microscope is the standard for H-UCLA MC and DHS. Zeiss Tivato 700 microscope has intra-operative fluorescence which allows assessment of patency of vessels joined by anastomosis and visualization of fluorescence-stained structures. It also provides greater reach and flexibility, used in a wide set of procedures which require different set-ups and workflows to accommodate viewing by multiply people due to teaching environment. This microscope has the necessary overhead clearance to work under the arm of the visualization system in all set-ups needed. Zeiss Tivato 700 microscope has active vibration damping and all digital remote service platform.

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

This recommendation support Goal II.2 “Support the Wellness of Our Communities” and III.3, “Pursue Operational Effectiveness, Fiscal Responsibility and Accountability” of the County Strategic Plan.

### **FISCAL IMPACT/FINANCING**

The estimated cost for the Microscope for DHS’ H-UCLA MC is approximately \$336,000. The estimated cost includes the Microscope, a one-year manufacturer’s warranty, freight, and tax. Funding is included in the DHS Fiscal Year 2021-22 Final Budget and there is no impact to net County cost.

### **FACTS AND PROVISIONS/LEGAL REQUIREMENTS**

On October 16, 2001, the Board approved the classification categories for fixed assets and new requirements for major fixed asset (now referred to as capital asset) acquisitions requiring County departments to obtain Board approval to acquire or finance equipment with a unit cost of \$250,000 or greater prior to submitting their requisition to ISD.

### **CONTRACTING PROCESS**

The acquisition of equipment falls under the statutory authority of the County Purchasing Agent and will be accomplished in accordance with the County’s purchasing policies and procedures for sole source purchases.

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

Approval of the recommendation will ensure allow the hospital to provide increased patient access to microsurgery, which allows surgeons to provide services in a less invasive manner.

Respectfully submitted,

Christina R. Ghaly, M.D.  
Director

CRG:jc

c: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors  
Internal Services Department

# BOARD LETTER/MEMO CLUSTER FACT SHEET

**DRAFT**

☒ Board Letter

☐ Board Memo

☐ Other

<b>CLUSTER AGENDA REVIEW DATE</b>	1/26/2022
<b>BOARD MEETING DATE</b>	2/8/2022
<b>SUPERVISORIAL DISTRICT AFFECTED</b>	<input checked="" type="checkbox"/> All <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 2 <sup>nd</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup> <input type="checkbox"/> 5 <sup>th</sup>
<b>DEPARTMENT(S)</b>	Mental Health
<b>SUBJECT</b>	Approval to enter into a grant agreement with the State of California, Mental Health Services Oversight and Accountability Commission (MHSOAC) for the Mental Health Student Services Act (MHSSA) of 2019 Grant award and execute a new Memorandum of Agreement (MOA) with Los Angeles County Office of Education (LACOE). Request authority to amend the current Memorandum of Agreement with LACOE and the current Contract with Los Angeles Unified School District (LAUSD).
<b>PROGRAM</b>	Prevention
<b>AUTHORIZES DELEGATED AUTHORITY TO DEPT</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>SOLE SOURCE CONTRACT</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	If Yes, please explain why:
<b>DEADLINES/ TIME CONSTRAINTS</b>	2/08/2022
<b>COST &amp; FUNDING</b>	<div> <div> <b>\$6 million</b> (LACOE MOA)  <b>\$3,574,290</b> (LAUSD)  <b>\$6,445,711</b> (LACOE)  <small>*Amendments for existing agreements</small> </div> <div> <b>Funding source:</b> <ul style="list-style-type: none"> <li>State MHSOAC MHSSA of 2019 Grant award</li> <li>American Rescue Plan Act (MHBG ARPA) and/or Mental Health Services Act (MHSA)</li> </ul> </div> </div>
	TERMS (if applicable): March 1, 2022 - February 28, 2026
	Explanation:
<b>PURPOSE OF REQUEST</b>	<p>(1) To amend two existing agreements with LACOE and LAUSD to continue to deliver direct intervention and prevention services; and</p> <p>(2) To enter into an agreement with the State of California, MHSOAC to receive the MHSSA of 2019 Grant award and to execute the corresponding MOA with LACOE.</p>
<b>BACKGROUND (include internal/external issues that may exist including any related motions)</b>	<p>On January 15, 2019, the Board approved Motion No.19-0403 instructing DMH to partner and fund an expansion of mental health and wellbeing services for families, staff and students. In response to this Board Motion, DMH partnered with LACOE and LAUSD and executed agreements with both educational entities to initiate the Community School Initiative (CSI) program which are due to expire on June 30, 2022. Board approval will allow DMH to amend the two existing agreements with LACOE and LAUSD and ensures the continuous delivery of school-based mental health services particularly since students have returned to in-person classes and may need the extra supports and resources to cope with the transition and stress of the COVID-19 pandemic and school closures.</p> <p>In an effort to address the need for students returning to in-person classes, DMH applied for the MHSSA Grant to provide additional support to existing school based initiatives within the County. DMH was awarded the MHSSA Grant and in conjunction with LACOE, DMH is able to provide funding to help LACOE expand their current CSI program by adding clinical staff at six CSI sites with the highest needs.</p>
<b>EQUITY INDEX OR LENS WAS UTILIZED</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, please explain how:
<b>SUPPORTS ONE OF THE NINE BOARD PRIORITIES</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, please state which one(s) and explain how:
<b>DEPARTMENTAL CONTACTS</b>	<p>Name, Title, Phone # &amp; Email:</p> <p>Robert Byrd, Acting Deputy Director, (424) 369-4018, <a href="mailto:rbyrd@dmh.lacounty.gov">rbyrd@dmh.lacounty.gov</a></p> <p>Emily Issa, Deputy County Counsel, (213) 974-1827, <a href="mailto:eissa@counsel.lacounty.gov">eissa@counsel.lacounty.gov</a></p>



## DEPARTMENT OF MENTAL HEALTH

hope. recovery. wellbeing.

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

Gregory C. Polk, M.P.A.  
Chief Deputy Director

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

Lisa H. Wong, Psy.D.  
Senior Deputy Director

February 8, 2022

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 A GRANT AGREEMENT WITH  
THE STATE OF CALIFORNIA,  
MENTAL HEALTH SERVICES OVERSIGHT AND ACCOUNTABILITY COMMISSION  
FOR THE MENTAL HEALTH STUDENT SERVICES ACT OF 2019 GRANT;  
AUTHORITY TO EXECUTE A NEW MEMORANDUM OF AGREEMENT AND AMEND  
TWO AGREEMENTS TO SUPPORT THE COMMUNITY SCHOOL INITIATIVE  
(ALL SUPERVISORIAL DISTRICTS)  
(3 VOTES)**

**SUBJECT**

Approval to enter into a grant agreement with the State of California, Mental Health Services Oversight and Accountability Commission for the Mental Health Student Services Act of 2019 Grant award and execute a new Memorandum of Agreement with Los Angeles County Office of Education. Request authority to amend the current Memorandum of Agreement with the Los Angeles County Office of Education and the current Contract with Los Angeles Unified School District.

**IT IS RECOMMENDED THAT THE BOARD:**

1. Approve and authorize the Director of Mental Health (Director), or his designee, to sign and execute a Grant Agreement, substantially similar to Attachment I, with the State of California, Mental Health Services Oversight and Accountability Commission (MHSOAC) for the Mental Health Student Service Act of 2019 Grant

award (MHSSA Grant), Agreement No. 21MHSSOAC024, in the amount of \$6 million. The term of the Agreement is March 1, 2022 through February 28, 2026.

2. Delegate authority to the Director, or his designee, to prepare, sign, and execute future amendments to the MHSSA Grant Agreement as applicable to: 1) extend the term; 2) add, delete, modify, or replace terms, including the Statement of Work; 3) allow for the rollover of unspent funds; and 4) reflect regulatory and/or policy changes, subject to prior review and approval as to form by County Counsel and notification to your Board and the Chief Executive Office (CEO).
3. Approve and authorize the Director, or his designee, to prepare, sign, and execute a new Memorandum of Agreement (MOA), substantially similar to Attachment II, with the Los Angeles County Office of Education (LACOE), to expand the current Community School Initiative (CSI) model by hiring Master's level clinicians to provide direct intervention and prevention services in six of their current CSI sites listed in Attachment III, in the amount of \$6 million, fully funded by the MHSSA Grant. The term of this MOA will be March 1, 2022 through February 28, 2026 with an option to extend the term, if necessary, to correspond the MHSSA Grant Agreement in Recommendation 1.
4. Delegate authority to the Director, or his designee, to prepare, sign, and execute future amendments to the MOA in Recommendation 3 to: 1) revise the language; 2) allow for the rollover of unspent funds within the MOA up to 20 percent of the amount of the specified grant year with prior written approval from the MHSSOAC; and 3) reflect regulatory and/or policy changes, subject to prior review and approval as to form by County Counsel and notification to your Board and the CEO.
5. Authorize the Director, or his designee, to prepare, sign, and execute extension amendments, substantially similar to Attachments IV and V, to an existing MOA with LACOE and Contract with Los Angeles Unified School District (LAUSD), respectively, executed under the January 15, 2019 Board Motion. These amendments will extend the terms of these agreements for one year, effective July 1, 2022 through June 30, 2023 with an optional one-year extension through June 30, 2024. The total cost of this action for LACOE and LAUSD is \$6,445,711 and \$3,574,290, respectively, fully funded by Community Mental Health Services Block Grant (MHBG) American Rescue Plan Act (ARPA) and/or Mental Health Services Act (MHSA) revenue.
6. Delegate authority to the Director, or his designee, to prepare, sign, and execute future amendments to the existing MOA with LACOE and Contract with LAUSD to: 1) revise the language; 2) increase the funding, provided that the County's total payments will not exceed an increase of 10 percent from the applicable MOA and Contract amounts and sufficient funds are available; and 3) reflect federal, State, and County regulatory and/or policy changes, subject to prior review and approval

as to form by County Counsel and provide two week prior notification to your Board and the CEO.

7. Delegate authority to the Director, or his designee, to terminate the Agreements in Recommendations 3 and 5 in accordance with their termination provisions, including Termination for Convenience, upon written notification to our Board and CEO.

### **PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION**

The MHSSA Grant was created to establish additional mental health partnerships between county mental health and local educational entities for the delivery of school-based programs. Due to the COVID-19 pandemic, there has been an overwhelming increase in mental health needs among students. In an effort to address this need, DMH will expand its partnership with LACOE by using the grant award to fund six LACOE sites (Attachment III) with the highest needs by providing direct intervention and prevention services.

Through authority granted in a January 15, 2019 Board Motion, DMH executed agreements with LACOE and LAUSD that detail the school based mental health services to be provided by DMH, including but not limited to, prevention services, education, support, and outreach. These agreements are due to expire June 30, 2022. The extension of these services are vital as they have been essential to students and staff returning to campus after the pandemic school closures. These services have ensured that students' and staff's mental health needs are met through the transition from pandemic school closures to returning to campus and into the future.

Board approval of Recommendation 1 will allow DMH to enter into a Grant Agreement with the State MHSOAC and to accept the \$6 million for the MHSSA Grant.

Board approval of Recommendation 2 will allow DMH to amend the Grant Agreement in Recommendation 1, to reflect federal, State, and County regulatory and/or policy changes, roll over of unspent funds, and extend the term.

Board approval of Recommendation 3 will allow DMH to enter into a new MOA with LACOE to expand their current CSI model at six sites, fully funded by the MHSSA Grant award.

Board approval of Recommendation 4 will allow DMH to amend the Agreement in Recommendation 3, to reflect federal, State, and County regulatory and/or policy changes, roll over of unspent funds in accordance with the terms of the grant, and extend the term.

Board approval of Recommendation 5 will allow DMH to extend the term of an existing LACOE MOA and an existing LAUSD Contract, fully funded by MHBG ARPA and/or

MHSA Revenue. DMH will prioritize the use of MHBG ARPA funds for these services. DMH applied for supplemental MHBG funds that were awarded to California through ARPA. The allowable activities and recommended uses of the MHBG ARPA funds are specifically earmarked for crisis and school-based services that promote access to care for children/youth, which are consistent with the services provided by LACOE and LAUSD. These MHBG ARPA funds are unrelated to the ARPA funds allocated to DMH. If awarded, DMH will be subject to the applicable requirements that govern federal monies associated with the MHBG.

Board approval of Recommendation 6 will allow DMH to amend the agreements in Recommendation 5, to revise the language, increase the funding amounts, and reflect federal, State, and County regulatory and/or policy changes.

Board approval of Recommendation 7 will enable DMH to terminate the agreements in Recommendations 3 and 5 in accordance with the 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 1.2 Enhance Our Delivery of Comprehensive Interventions.

#### **FISCAL IMPACT/FINANCING**

The total MHSA/MHSSA Grant award is \$6 million over four years with funds being allocated annually at the beginning of each grant year. The distribution of funds per grant year can be found in Exhibit B of Attachment I.

The total aggregate cost for the amendments to extend the LACOE and LAUSD agreements for FY 2022-23 is \$10,020,001, fully funded by MHBG ARPA and/or MHSA revenue. The MHBG ARPA funds are pending approval by the State. If awarded, the amendment with LACOE will be funded by both MHBG ARPA and MHSA revenue. If MHBG ARPA funding is not awarded, the amendment with LACOE will be fully funded with MHSA revenue. The appropriation will be adjusted in the FY 2022-23 annual budget process to reflect these amendments.

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

#### **FACTS AND PROVISIONS/LEGAL REQUIREMENTS**

DMH identified and applied for the MHSSA Grant Request for Applications as a means of providing additional support to existing school based initiatives within the County. The Grant application stipulated that the county mental health department must partner with an educational entity or develop a new partnership. As DMH has an existing partnership



with LACOE for implementation of the CSI model, this grant opportunity allows DMH to provide additional support for the CSI model and allocate 100 percent of the grant funding to this project. DMH received notification from the MHSOAC of the MHSSA Grant award in the amount of \$6 million, effective March 1, 2022 through February 28, 2026.

The MHSSA Grant agreement allows for LACOE to expand the current CSI model by assigning Master's level clinicians to provide services such as: mental health triage; assessments; short-term treatment; evidence-based services and trainings; and referral and linkage to six of the current CSI sites (Attachment III). Clinicians will provide universal prevention services to the feeder elementary and/or middle schools in the selected districts as well. These prevention services may include, but are not limited to: tailored parent and/or caregiver workshops; peer-support projects; and educator trainings. Through the partnerships formed with these school sites, this Grant will fund key clinical personnel to further increase access to preventative services and the continuum of mental health care for students and their families.

The current MOA with LACOE and Contract with LAUSD were executed under authority granted in a January 15, 2019 Board Motion, to implement and expand access to prevention, mental health, and well-being services in schools across Los Angeles County. Both agreements are due to expire June 30, 2022. Moreover, on September 15, 2021 Board Motion No. 21-3507 directed DMH to further expand LACOE and LAUSD's current CSI programs under the aforementioned agreements to continue to enhance school mental health supports. This Board letter is requesting the authority to meet the requirements of that Board Motion.

As mandated by your Board, the performance of all contractors is evaluated by DMH on an annual basis to ensure LACOE and LAUSDs compliance with all agreement terms and performance standards.

Attachment I, MHSOAC Agreement No. 21MHSOAC024 for the MHSSA Grant award, has been approved as to form by County Counsel. The Grant Agreement contains both standard and special State terms and conditions. However, there is no mutual indemnification provision. The County is responsible for indemnifying and defending the State, its officers, agents, and employees from any and all claims and losses resulting from the performance of the Grant Agreement.

Attachment II, the corresponding MOA between DMH and LACOE, has been approved as to form by County Counsel.

Attachment III lists the six participating LACOE CSI sites.

Attachments IV and V, the amendments to the existing MOA with LACOE and existing Contract with LAUSD, have been approved as to form by County Counsel.

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

Board approval of the recommended actions will enable DMH to continue to work collaboratively with the State, LACOE, and LAUSD to expand the current CSI model and deliver direct intervention and prevention services and to ensure the continued support of mental health wellness for students and their families.

Respectfully submitted,

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

JES:GP:SK  
RLR:ZW:atm

Attachments (5)

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

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES

**STANDARD AGREEMENT**

STD 213 (Rev. 04/2020)

AGREEMENT NUMBER

21MHSOAC024

PURCHASING AUTHORITY NUMBER (If Applicable)

1. This Agreement is entered into between the Contracting Agency and the Contractor named below:

CONTRACTING AGENCY NAME

Mental Health Services Oversight and Accountability Commission

CONTRACTOR NAME

Los Angeles County Department of Mental Health

2. The term of this Agreement is:

START DATE

March 1, 2022

THROUGH END DATE

February 28, 2026

3. The maximum amount of this Agreement is:

\$6,000,000.00 Six million dollars and no cents

4. The parties agree to comply with the terms and conditions of the following exhibits, which are by this reference made a part of the Agreement.

Exhibits	Title	Pages
Exhibit A	Scope of Work	5
Exhibit B	Budget Detail and Payment Provisions	2
Attachment B-1	Grant Award Claim Form	1
+ - Attachment B-2	Budget Worksheet	2
+ - Exhibit C	General Terms and Conditions	5
+ - Exhibit D	Special Terms and Conditions	9

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 <https://www.dgs.ca.gov/OLS/Resources>

IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.

**CONTRACTOR**

CONTRACTOR NAME (if other than an individual, state whether a corporation, partnership, etc.)

Los Angeles County Department of Mental Health

CONTRACTOR BUSINESS ADDRESS

510 South Vermont Avenue, 22nd Floor

CITY

Los Angeles

STATE

CA

ZIP

90020

PRINTED NAME OF PERSON SIGNING

TITLE

CONTRACTOR AUTHORIZED SIGNATURE

DATE SIGNED

[Reset Form](#)[Print Form](#)**SCOID:**

ATTACHMENT I

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES

**STANDARD AGREEMENT**

STD 213 (Rev. 04/2020)

AGREEMENT NUMBER

21MHSOAC024

PURCHASING AUTHORITY NUMBER (If Applicable)

**STATE OF CALIFORNIA**

CONTRACTING AGENCY NAME

Mental Health Services Oversight and Accountability Commission

CONTRACTING AGENCY ADDRESS

1325 J Street, Suite 1700

CITY

Sacramento

STATE

CA

ZIP

95814

PRINTED NAME OF PERSON SIGNING

Toby Ewing

TITLE

Executive Director

CONTRACTING AGENCY AUTHORIZED SIGNATURE

DATE SIGNED

CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL

EXEMPTION (If Applicable)

WIC 5897(f)

WIC 5886(m)

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

Los Angeles County Department of Mental Health  
Agreement #21MHSOAC024  
Exhibit A Scope of Work

## **EXHIBIT A SCOPE OF WORK**

### **1. Abstract/Summary**

- A. This grant is awarded pursuant to the Mental Health Student Services Act of 2019. Los Angeles County Department of Mental Health, hereafter referred to as “Grantee,” agrees to hire personnel or peer support to enhance an existing county partnership with school-based programs, to expand access to mental health services for children and youth, including campus-based mental health services, and to facilitate linkage and access to ongoing and sustained services.
  
- B. The Mental Health Student Services Act of 2019 (MHSSA) grants are to be used to provide support services that address the following goals:
  - 1) Preventing mental illnesses from becoming severe and disabling
  - 2) Improving timely access to services for underserved populations
  - 3) Providing outreach to families, employers, primary care health care providers, and others to recognize the early signs of potentially severe and disabling mental illnesses
  - 4) Reducing the stigma associated with the diagnosis of a mental illness or seeking mental health services
  - 5) Reducing discrimination against people with mental illness
  - 6) Preventing negative outcomes in the targeted population, including, but not limited to:
    - a) Suicide and attempted suicide
    - b) Incarceration
    - c) School failure or dropout
    - d) Unemployment
    - e) Prolonged suffering
    - f) Homelessness
    - g) Removal of children from their homes
    - h) Involuntary mental health detentions

### **2. Detailed Scope of Work**

- A. The scope of work for this Agreement is based on the revised Grant Application dated August 25, 2021, and submitted by the Grantee (Grantee’s Application) in response to the Mental Health Services Oversight and Accountability Commission’s (Commission) Request for Applications, MHSSA\_001 Addendum 2 (hereinafter, “RFA”). Grantee’s Application is incorporated by reference and made part of this Agreement as if attached hereto.

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

Los Angeles County Department of Mental Health  
Agreement #21MHSOAC024  
Exhibit A Scope of Work

### 3. **Contacts**

- A. Direct all inquiries regarding this Agreement to the representatives listed in the charts below. Representatives may be changed by written notice to the other party. Such notice shall be given within 30 days of the change.

State Agency: Mental Health Services Oversight and Accountability Commission	Grantee: Los Angeles County Department of Mental Health
Name/Title: Cheryl Ward Health Program Specialist I	Name/Title: Kanchana Tate Mental Health Program Manager
Phone: (916) 445-8727	Phone: (213) 739-5483
Fax: (916) 445-4927	Fax: (213) 252-0238
Email: <a href="mailto:Cheryl.Ward@mhsoac.ca.gov">Cheryl.Ward@mhsoac.ca.gov</a>	Email: <a href="mailto:ktate@dmh.lacounty.gov">ktate@dmh.lacounty.gov</a>

Direct all administrative inquiries to:

State Agency: Mental Health Services Oversight and Accountability Commission	Grantee: Los Angeles County Department of Mental Health
Section/Unit: Administrative Services	Section/Unit: Office of Administrative Operations-Special Programs
Attention: Chelsea Yuen	Attention: Angel Baker Division Chief, PD
Address: 1325 J Street, Suite 1700 Sacramento, CA 95814	Address: 510 S. Vermont Ave., 22 <sup>nd</sup> Floor Los Angeles, CA 90020
Phone: (916) 445-8696	Phone: (213) 351-1918
Fax: (916) 445-4927	Fax:
Email: <a href="mailto:accounting@mhsoac.ca.gov">accounting@mhsoac.ca.gov</a>	Email: <a href="mailto:abaker@dmh.lacounty.gov">abaker@dmh.lacounty.gov</a>

### 4. **Grant Cycle** (see *RFA, Section V.C.*)

- A. This Agreement is for a four-year grant cycle, with funds allocated in quarterly installments.
- B. Funding is based on the Grantee's compliance with the RFA requirements as submitted through Grantee's Application.



- C. Grantee shall participate in monthly check-in meetings with Commission staff either in-person, by phone or some other agreed upon arrangement. The intent is for the Grantee to provide a status on their program including, but not limited to, reporting requirements, hiring, spending, schedule, and any other relevant issues.
- D. 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. Allowable Costs** (See *RFA, Section V.E.*)

- A. Grant funds must be used as proposed in the Grantee's Application and approved by the Commission as follows:
  - 1) Allowable costs include:
    - a) Personnel and/or peer support
    - b) At least 90 percent of the personnel costs must be for personnel who are dedicated to delivering services.
    - c) The amount budgeted for administration costs shall not exceed 15 percent of the total budget grant amount, annually, and includes any administrative costs associated with contracted personnel.
    - d) Program costs include, but are not limited to training, technology (e.g., telehealth), facilities improvements, and transportation.
    - e) Funds may also be used to facilitate linkages and access to ongoing and sustained services, including:
      - i. Services provided on school campuses
      - ii. Suicide prevention services
      - iii. Drop-out prevention services
      - iv. Outreach to high-risk youth and young adults, including, but not limited to, foster youth, youth who identify as lesbian, gay, bisexual, transgender, or queer, and youth who have been expelled or suspended from school
      - v. Placement assistance and development of a service plan that can be sustained over time for students in need of ongoing services

- f) Funds may also be used to provide other prevention, early intervention, and direct services, including, but not limited to, hiring qualified mental health personnel, professional development for school staff on trauma-informed and evidence-based mental health practices, and other strategies that respond to the mental health needs of children and youth, as determined by the Commission.
- 2) Grant funds may be used to supplement, but not supplant existing financial and resource commitments of the county, city, or multi-county mental health or behavioral health departments, or a consortium of those entities, or educational entities that receive a grant.
- 3) Grant funds cannot be transferred to any other program account for specific purposes other than the stated purpose of this grant.

**6. Evaluation** (See RFA, *Section VIII.*)

- A. Grantee shall employ staff through the grant for MHSSA data gathering, submission of relevant data, and submission of program implementation and summary program evaluations to the Commission. Grantee shall evaluate its MHSSA funded program.
- B. Evaluation activities are intended to provide counties and the Commission with data related to program impact and individual experience, and to demonstrate program effectiveness throughout the grant cycle. It is intended that the results from the local evaluations by the grantees will yield best practices for school-based mental health partnerships, number of students served, demographics, data on linkage to ongoing mental health services, and comparison data on negative outcomes of untreated mental health conditions e.g. suicide, school failure, and out of home placement.
- C. Grantee shall collect relevant person identified-level data. If requested, Grantee shall provide access to the Commission to all relevant person identified-level data collected and maintained by the Grantee. Grantee shall ensure that county partners grant access to the Commission to all relevant person identified-level data.

**7. Reporting** (See RFA, *Section IX.*)

- A. Grantee shall provide information to the Commission on a quarterly basis within 30 days after the end of each reporting period. The Commission may modify the reporting date to better fit in with the Grantee's normal month-end financial cycle. The Grantee shall submit the following reports:

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

Los Angeles County Department of Mental Health  
Agreement #21MHSOAC024  
Exhibit A Scope of Work

1) Hiring Report

The Hiring Report shall include the following:

- a) List each type of personnel hired by the county and/or hired as a contractor (e.g., peers, social workers, nurses, clinicians, mental health workers, etc.). Identify which staff are county staff and which are contract.
- b) List of personnel at service locations/points of access (e.g., school sites). Access point location and addresses must be identified. If an address is not possible, clearly identify the area in which the access point(s) will be (i.e., provide detailed description).

2) Evaluation Data

Grantee shall provide to the Commission data based on the specifications and timelines defined by the Commission.

3) Expenditure Information

Grantee shall report all Grant expenditure information in the Annual Fiscal Report within 30 days of the end of the grant year. Grantee shall remit to the Commission all unexpended grant funds at the end of the contract term.

8. **Program Communications** (See RFA, Section VII.E.v.)

Grantee shall increase awareness of and access and linkage to mental health services for students and their families and provide related information on the partnership website(s).

9. **Amendments**

This Agreement 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)

Los Angeles County Department of Mental Health  
Agreement #21MHSOAC024  
Exhibit B Budget Detail and Payment Provisions

**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 4, 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.
- c) 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

**2. 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 be of no further 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 Congress 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.

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

Los Angeles County Department of Mental Health  
Agreement #21MHSOAC024  
Exhibit B Budget Detail and Payment Provisions

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

**3. Budget Detail**

The total amount of this Agreement shall not exceed \$6,000,000.00. Payment shall be made in accordance with the payment schedule below.

**4. Payment Schedule**

Grantee was approved for a grant cycle that covers four grant years (see Attachment B-2 – Budget Worksheet for approved funding amounts), with funds allocated annually at the beginning of each grant year. Payment will be made quarterly, and the total amount of payments made in any grant year is to not exceed the amount stated in the chart below, unless Grantee, with prior written approval from the Commission, moves unspent funds forward to one or more subsequent grant years. The maximum amount allowed to be moved forward to one or more subsequent grant years is 20% of the amount listed in the chart below for the specified grant year.

<b>Grant Year Distribution</b>		<b>Grant Funding</b>
Grant Year 1		\$1,446,118.00
Grant Year 2		\$1,481,552.00
Grant Year 3		\$1,517,599.00
Grant year 4		\$1,554,731.00
<b>Grant Total</b>		<b>\$6,000,000.00</b>

The Commission may withhold quarterly payments until the Grantee has fully expended unspent funds.

**ATTACHMENT B-1**  
**Mental Health Student Services Act of 2019 (MHSSA)**  
**GRANT AWARD CLAIM FORM**

**To:** Mental Health Services  
Oversight and Accountability Commission  
1325 J Street, Suite 1700  
Sacramento, CA 95814  
Attn: Accounting Office

<b>Check One</b>	<b>Check One</b>
Year 1 <input type="checkbox"/>	Quarter 1 <input type="checkbox"/>
Year 2 <input type="checkbox"/>	Quarter 2 <input type="checkbox"/>
Year 3 <input type="checkbox"/>	Quarter 3 <input type="checkbox"/>
Year 4 <input type="checkbox"/>	Quarter 4 <input type="checkbox"/>

From:

Contract No.

Mailing Address:

Costs	A	B	C	D	
	Budget Amount	Beginning Balance	Adjustments	Current Expense	Ending Balance
Personnel					
Administration					

Total Allowable Costs \$

**MHSOAC USE ONLY**

I hereby certify that all services and required reports have been received pursuant to the contract/grant.

X

Signature Program Coordinator

DATE

Name of Signatory

**FOR GRANTEE'S USE –Use blue ink**

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.

X

Signature of Mental Health/Behavioral  
Health Director or designee/Grant Lead

DATE

Name of Signatory

Title

**FOR MHSOAC ACCOUNTING USE ONLY****GRANTEE'S CONTACT INFORMATION**

SFY: \_\_\_\_\_

Grant Title: MHSOAC MHSSA Grant  
MHSA Grant

Award: \_\_\_\_\_

PCA: 30118 INDEX: 5500

OBJECT CODE: 5432000

FY 2019-20 ☐  
FY 2020-21 ☐  
FY 2021-22 ☐  
FY 2022-23 ☐

Contact Person (Print)

Phone



## **EXHIBIT D – SPECIAL TERMS AND CONDITIONS**

### **1. SUBCONTRACTS**

Except for subcontracts identified in the Proposal in accordance with the Request for Proposal, Contractor shall submit any subcontracts which are proposed to be entered into in connection with this Contract to the State Agency (State) for its prior written approval before entering into the same. No work shall be subcontracted without the prior written approval of the State. Upon the termination of any subcontract, State shall be notified immediately. Any subcontract shall include all the terms and conditions of this Contract and its attachments.

### **2. PUBLICATIONS AND REPORTS**

- A. The State reserves the right to use and reproduce all publications, reports, and data produced and delivered pursuant to this Contract. State further reserves the right to authorize others to use or reproduce such materials, provided the author of the report is acknowledged in any such use or reproduction.
- B. If the publication and/or report are prepared by non-employees of the State, and the total cost for such preparation exceeds \$5,000, the publication and/or report shall contain the numbers and dollar amounts of all contracts and subcontracts relating to the preparation of the publication and report in a separate section of the report (Government Code Section 7550).

### **3. PROGRESS REPORTS**

Unless otherwise specified in Exhibit A, if progress reports are required by the Contract, Contractor shall provide a progress report in writing, or orally if approved by the State Contract Manager, at least once a month to the State Contract Manager. This progress report shall include, but not limited to, a statement that the Contractor is or is not on schedule, any pertinent reports, or interim findings. Contractor shall cooperate with and shall be available to meet with the State to discuss any difficulties, or special problems, so that solutions or remedies can be developed as soon as possible.

### **4. PRESENTATION**

Upon request, Contractor shall meet with the State to present any findings, conclusions, and recommendations required by the Contract for approval. If set forth in the Contract, Contractor shall submit a comprehensive final report for approval. Both the final meeting and the final report shall be completed on or before the date indicated in the Contract.

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

Los Angeles County Department of Mental Health  
Agreement #21MHSOAC024  
Attachment B-2: Budget Worksheet

**Attachment B-2  
Budget Worksheet  
(Whole Dollars)**

**Applicant: County of Los Angeles**

(1) Hire Staff (list individual role/classification) (add rows as needed)	(2) Hiring Month	(3) GY 1	(4) GY 2	(5) GY 3	(6) GY 4	(7) Total All GYs
Coordinator II	2	\$135,396	\$139,458	\$143,642	\$147,951	\$566,447
School Social Worker	2	\$110,040	\$113,341	\$116,741	\$120,244	\$460,366
School Social Worker	2	\$110,040	\$113,341	\$116,741	\$120,244	\$460,366
School Social Worker	2	\$110,040	\$113,341	\$116,741	\$120,244	\$460,366
School Social Worker	2	\$110,040	\$113,341	\$116,741	\$120,244	\$460,366
School Social Worker	2	\$110,040	\$113,341	\$116,741	\$120,244	\$460,366
School Social Worker	2	\$110,040	\$113,341	\$116,741	\$120,244	\$460,366
Data Processing Assistant	3	\$61,776	\$63,629	\$65,538	\$67,504	\$258,447
Subtotal - (8) Personnel Services Salaries		\$857,412	\$883,133	\$909,626	\$936,919	\$3,587,090
Add: (9) Personnel Services Benefits		\$383,450	\$389,800	\$396,341	\$403,079	\$1,572,670
(10) Total Personnel Services		\$1,240,862	\$1,272,933	\$1,305,967	\$1,339,998	\$5,159,760
(11) Hire Contractors or other non-staff (If applicable, list individual role/classification) (Add rows as needed)	(12) Hiring Month	(13) GY 1	(14) GY 2	(15) GY 3	(16) GY 4	(17) Total All GYs
None		0	0	0	0	0

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

Los Angeles County Department of Mental Health  
Agreement #21MHSOAC024  
Attachment B-2: Budget Worksheet

(18) Total Contracted Services	0	0	0	0	0	
(19) Total Personnel/Contracted Services	\$1,240,862	\$1,272,933	\$1,305,967	\$1,340,298	\$5,160,060	
(20) Other Costs (non-staff and non-contracted services)	(21) Exp Month	(22) GY 1	(23) GY 2	(24) GY 3	(25) GY 4	(26) Total All GYs
Student Stipends	4	\$48,000	\$48,000	\$48,000	\$48,000	\$192,000
Workshop/Training	2	\$11,093	\$11,094	\$11,094	\$11,094	\$44,375
Mileage	2	\$8,400	\$8,400	\$8,400	\$8,400	\$33,600
Supplies	2	\$5,000	\$5,400	\$5,400	\$5,400	\$21,200
Office Equipment (computer/laptop)	2	\$8,400	\$8,400	\$8,400	\$8,400	\$33,600
Cell Phone Stipend	2	\$3,500	\$3,500	\$3,500	\$3,500	\$14,000
(27) Total Other Costs		\$84,393	\$84,794	\$84,794	\$84,794	\$338,775
(28) Total Program Costs before Administration		\$1,325,255	\$1,357,727	\$1,390,761	\$1,424,792	\$5,498,535
(29) Administration (includes indirect costs and overhead, limited to 15%) *		\$120,863	\$123,825	\$126,838	\$129,939	\$501,467
(30) Total Proposed Program Costs		\$1,446,118	\$1,481,552	\$1,517,599	\$1,554,731	\$6,000,000

\* Total Administration costs cannot exceed the following for the total term (4 years) of the contract:

Small population designation:	\$375,000	(\$2,500,000 grant x 15%)
Medium population designation:	\$600,000	(\$4,000,000 grant x 15%)
Large population designation:	\$900,000	(\$6,000,000 grant x 15%)

**GTC 04/2017****EXHIBIT C****GENERAL TERMS AND CONDITIONS**

1. **APPROVAL**: This Contract 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. **AMENDMENT**: No amendment or variation of the terms of this Contract shall be valid unless made in writing, signed by the parties and approved as required. No oral understanding or Contract not incorporated in the Agreement is binding on any of the parties.
3. **ASSIGNMENT**: This Contract 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. **AUDIT**: 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 Contract. 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 Contract. (Gov. Code §8546.7, Pub. Contract Code §10115 et seq., CCR Title 2, Section 1896).
5. **INDEMNIFICATION**: 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 Contract, 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 Contract.
6. **DISPUTES**: Contractor shall continue with the responsibilities under this Contract during any dispute.
7. **TERMINATION FOR CAUSE**: The State may terminate this Contract and be relieved of any payments should the Contractor fail to perform the requirements of this Contract 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 Contract and the balance, if any, shall be paid to the Contractor upon demand.

8. INDEPENDENT CONTRACTOR: Contractor, and the agents and employees of Contractor, in the performance of this Contract, shall act in an independent capacity and not as officers or employees or agents of the State.

9. RECYCLING CERTIFICATION: 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 Contract, 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 contract. (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 Contract.

11. **CERTIFICATION CLAUSES:** The CONTRACTOR CERTIFICATION CLAUSES contained in the document CCC 04/2017 are hereby incorporated by reference and made a part of this Contract by this reference as if attached hereto.

12. **TIMELINESS:** Time is of the essence in this Contract.

13. **COMPENSATION:** 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. **GOVERNING LAW:** This contract is governed by and shall be interpreted in accordance with the laws of the State of California.

15. **ANTITRUST CLAIMS:** The Contractor by signing this contract 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:

1) "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. CHILD SUPPORT COMPLIANCE ACT:** For any Contract 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. UNENFORCEABLE PROVISION:** In the event that any provision of this Contract is unenforceable or held to be unenforceable, then the parties agree that all other provisions of this Contract have force and effect and shall not be affected thereby.

**18. 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. SMALL BUSINESS PARTICIPATION AND DVBE PARTICIPATION REPORTING REQUIREMENTS:**

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

State of California  
Mental Health Services Oversight  
and Accountability Commission

Los Angeles County Department of Mental Health  
Agreement #21MHSOAC024  
Exhibit C General Terms and Conditions

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knowingly provides false information shall be subject to a civil penalty for each violation.  
(Mil. & Vets. Code § 999.5(d); Govt. Code § 14841.)

20. LOSS LEADER: 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).)

## **5. MENTAL HEALTH SERVICES OVERSIGHT AND ACCOUNTABILITY COMMISSION STAFF**

Mental Health Services Oversight and Accountability Commission staff shall be permitted to work side by side with Contractor's staff to the extent and under conditions as directed by the State Contract Manager. In this connection, Mental Health Services Oversight and Accountability Commission staff shall be given access to all data, working papers, etc., which Contractor seeks to utilize.

## **6. CONFIDENTIALITY OF DATA AND DOCUMENTS**

- A. Contractor shall not disclose data or documents or disseminate the contents of the final or any preliminary report without written permission of the State Contract Manager. However, all public entities shall comply with California Public Records Act (Government Code Sections 6250 et seq.) and the Freedom of Information Act (Title 5 of the United States Code Section 552), as applicable.
- B. Permission to disclose information or documents on one occasion shall not authorize Contractor to further disclose such information or documents on any other occasions except as otherwise provided in the Contract or required by law.
- C. Contractor shall not comment publicly to the press or any other media regarding the data or documents generated, collected, or produced in connection with this contract, or the State's actions on the same, except to the Mental Health Services Oversight and Accountability Commission staff, Contractor's own personnel involved in the performance of this Contract, or as required by law.
- D. If requested by State, Contractor shall require each of its employees or officers who will be involved in the performance of this Contract to agree to the above terms in a form to be approved by State and shall supply State with evidence thereof.
- E. Each subcontract shall contain the foregoing provisions related to the confidentiality of data and nondisclosure.
- F. After any data or documents submitted has become a part of the public records of the State, Contractor may at its own expense and upon written approval by the State Contract Manager, publish or utilize the same data or documents but shall include the following Notice:

### **LEGAL NOTICE**

This report was prepared as an account of work sponsored by the Mental Health Services Oversight and Accountability Commission (MHSOAC), but does not necessarily represent the views of the MHSOAC or any of its employees except to the extent, if any, that it has formally been approved by the MHSOAC. For information regarding any such action, communicate directly with the MHSOAC at 1325 J Street, Suite 1700, Sacramento, CA 95814. Neither the MHSOAC nor the

State of California, nor any officer or employee thereof, or any of its contractors or subcontractors makes any warranty, express or implied, or assumes any legal liability whatsoever for the contents of this document. Nor does any party represent that use of the data contained herein, would not infringe upon privately owned rights without obtaining permission or authorization from any party who has any rights in connection with the data.

## **7. PROVISIONS RELATING TO DATA**

- A. "Data" as used in this Contract means recorded information, regardless of form or characteristics, of a scientific or technical nature. It may, for example, document research, experimental, developmental or engineering work; or be usable or be used to define a design or process; or support a premise or conclusion asserted in any deliverable document called for by this Contract. The data may be graphic or pictorial delineations in media, such as drawings or photographs, charts, tables, mathematical modes, collections or extrapolations of data or information, etc. It may be in machine form, as punched cards, magnetic tape, computer printouts, or may be retained in computer memory.
- B. "Generated data" is that data, which a Contractor has collected, collated, recorded, deduced, read out or postulated for utilization in the performance of this Contract. Any electronic data processing program, model or software system developed or substantially modified by the Contractor in the performance of this Contract at State expense, together with complete documentation thereof, shall be treated in the same manner as generated data.
- C. "Deliverable data" is that data which under terms of this Contract is required to be delivered to the State. Such data shall be property of the State.
- D. Prior to the expiration of any legally required retention period and before destroying any data, Contractor shall notify the State of any such contemplated action; and State may within 30 days of said notification determine whether or not this data shall be further preserved. The State shall pay the expense of further preserving this data. State shall have unrestricted reasonable access to the data that is preserved in accordance with this Contract.
- E. Contractor shall use best efforts to furnish competent witnesses or to identify such competent witnesses to testify in any court of law regarding data used in or generated under the performance of this Contract.

**8. APPROVAL OF PRODUCT**

Unless otherwise specified in Exhibit A, each product to be approved under this Contract shall be approved by the Contract Manager. The State's determination as to satisfactory work shall be final absent fraud or mistake.

**9. SUBSTITUTIONS**

Contractor's key personnel as indicated in its Proposal may not be substituted without Contract Manager's prior written approval.

**10. NOTICE**

Notice to either party shall be given by first class mail properly addressed, postage fully prepaid, to the address listed in Exhibit A for each respective party. Such notice shall be effective when received as indicated by post office records or if deemed undeliverable by post office, such notice shall be effective nevertheless 15 days after mailing. Alternatively, notice may be given by personal delivery by any means whatsoever to the party, and such notice shall be deemed effective when delivered.

**11. WAIVER**

No waiver of any breach of this Contract shall be held to be a waiver of any other or subsequent breach. All remedies afforded in this Contract shall be taken and construed as cumulative; that is, in addition to every other remedy provided therein or by law. The failure of State to enforce at any time the provisions of this Contract, or to require at any time performance by the Contractor of any of the provisions, shall in no way be construed to be a waiver of such provisions not to affect the validity of this Contract or the right of State to enforce said provisions.

**12. GRATUITIES AND CONTINGENCY FEES**

The State, by written notice to the Contractor, may terminate the right of Contractor to proceed under this Contract if it is found, after notice and hearing by the State, that gratuities were offered or given by the Contractor or any agent or representative of the Contractor to any officer or employee of the State with a view toward securing a contract or securing favorable treatment with respect to the awarding, amending, or performing of such contract.

In the event this Contract is terminated as provided in the paragraph above, State shall be entitled (a) to pursue the same remedies against Contractor as it could pursue in the event of the breach of the Contract by the Contractor, and (b) as a predetermined amount of liquidated damages, to exemplary damages in an amount which shall not be less than three times the cost incurred by the Contractor in providing any such gratuities to any such officer or employee.

The rights and remedies of the State provided in this clause shall not be exclusive and are in addition to any other rights and remedies provided by law or under this Contract.

The Contractor warrants by execution of this Contract that no person or selling agency has been employed or retained to solicit or secure this Contract for a commission, percentage, brokerage or contingent fee, excepting bona fide employees of Contractor, for the purpose of securing business. For breach or violation of this warranty, the State shall have the right to annul this Contract without liability, paying only for the values of the work actually returned, or in its discretion to deduct from the contract price or consideration, or otherwise recover, the full amount of such commission, percentage, brokerage, or contingent fee.

### **13. WORKERS' COMPENSATION**

Contractor hereby warrants that it carries and shall maintain in full force and effect during the full term of this contract and any extensions to said term, sufficient and adequate Worker's Compensation Insurance for all of its employees who shall be engaged in the performance of this Contract and agrees to furnish to State satisfactory evidence thereof at any time the State may request the same.

### **14. CONTRACT IS COMPLETE**

Other than as specified herein, no document or communication passing between the parties hereto shall be deemed a part of this Contract.

### **15. CAPTIONS**

The clause headings appearing in this Contract have been inserted for the purpose of convenience and ready reference. They do not purport to and shall not be deemed to define, limit or extend the scope or intent of the clauses to which they pertain.



**16. PUBLIC HEARINGS**

If public hearings on the subject matter dealt with in this Contract are held within one year from the contract expiration date, Contractor shall make available to testify the personnel assigned to this Contract at the hourly rates specified in the Contractor's proposed budget. State shall reimburse Contractor for travel of said personnel at the contract rates for such testimony as may be requested by State.

**17. FORCE MAJEURE**

Neither the State nor the Contractor shall be deemed to be in default in the performance of the terms of this Contract if either party is prevented from performing the terms of this Contract by causes beyond its control, including without being limited to: acts of God; interference, rulings or decision by municipal, Federal, State or other governmental agencies, boards or commissions; any laws and/or regulations of such municipal, State, Federal, or other governmental bodies; or any catastrophe resulting from flood, fire, explosion, or other causes beyond the control of the defaulting party. If any of the stated contingencies occur, the party delayed by force majeure shall immediately give the other party written notice of the cause of delay. The party delayed by force majeure shall use reasonable diligence to correct the cause of the delay, if correctable.

**18. PERMITS AND LICENSES**

The Contractor shall procure and keep in full force and effect during the term of this Contract all permits, registrations and licenses necessary to accomplish the work specified in this Contract, and give all notices necessary and incident to the lawful prosecution of the work.

The Contractor shall keep informed of, observe, comply with, and cause all of its agents and employees to observe and to comply with all prevailing Federal, State, and local laws, and rules and regulations made pursuant to said Federal, State, and local laws, which in any way affect the conduct of the work of this Contract. If any conflict arises between provisions of the plans and specifications of this Contract and any such law above referred to, then the Contractor shall immediately notify the State in writing.

**19. LITIGATION**

The State, promptly after receiving notice thereof, shall notify the Contractor in writing of the commencement of any claim, suit, or action against the State or its officers or employees for which the Contractor must provide indemnification under this Contract.

The failure of the State to give such notice, information, authorization or assistance shall not relieve the Contractor of its indemnification obligations. The Contractor shall immediately notify the State of any claim or action against it which affects, or may affect, this Contract, the terms and conditions hereunder, or the State, and shall take such action with respect to said claim or action which is consistent with the terms of this Contract and the interest of the State.

## **20. DISPUTES**

Contractor shall first discuss and attempt to resolve any dispute arising under or relating to the performance of this Contract, which is not disposed of by the Contract, informally with the State Contract Manager. If the dispute cannot be disposed of at this level, then the dispute shall be decided by the MHSOAC's Executive Director. All issues pertaining to this dispute shall be submitted in written statements and addressed to the Executive Director, MHSOAC, 1325 J Street, Suite 1700, Sacramento, California 95814. Such written notice must contain the Contract Number. The decision of the Executive Director of the MHSOAC shall be final and binding to all parties. Within ten days of receipt of the written grievance report from the Contractor, the Executive Director, or his/her designee, shall meet with the Contractor and Project Manager for the purposes of resolving the dispute. The decision of the Executive Director shall be final. During the dispute process the Contractor shall proceed diligently with the performance of the Contract. Neither the pendency of a dispute, nor its consideration by the Executive Director, shall excuse the Contractor from full and timely performance of the services required in accordance with the terms of the contract.

Notwithstanding any other provisions of this Contract, after recourse to the procedure set forth in the paragraph above, any controversy or claim arising out of or relating to this Contract or breach thereof shall be settled by arbitration at the election of either party in accordance with California Public Contract Code Section 10240 et. seq. and judgment upon the award rendered by the arbitration may be entered in any court having jurisdiction thereof.

**21. EVALUATION OF CONTRACTOR'S PERFORMANCE**

The Contractor's performance under this Contract shall be evaluated by the State after completion of the contract. A copy of the written evaluation shall be maintained in the contract file and may be submitted to the Office of Legal Services, Department of General Services.

**22. CONFIDENTIALITY AND INFORMATION SECURITY PROVISIONS**

- A. The Contractor shall comply with applicable laws and regulations, including but not limited to Sections 14100.2 and 5328 et seq. of the Welfare and Institutions Code, Section 431.300 et seq. of Title 42, Code of Federal Regulations, and the Health Insurance Portability and Accountability Act (HIPAA), and its implementing regulations (including but not limited to Title 45, CFR, Parts 160, 162 and 164) regarding the confidentiality and security of individually identifiable health information (IIHI).
- B. Nondisclosure. Contractor shall not use or disclose confidential, individually identifiable, or sensitive information other than as permitted or required by the Contract and as permitted or required by law.

**23. INSPECTION AND ENFORCEMENT**

- A. From time to time, the State may inspect the facilities, systems, books and records of Contractor to monitor compliance with the Contract.
- B. Contractor shall promptly remedy any violation of any provision of the Contract and shall certify the same to the MHSOAC in writing.
- C. The fact that the State inspects, or fails to inspect, or has the right to inspect Contractor's facilities, systems, and procedures does not relieve Contractor of its responsibility to comply with the Contract.
- D. The State's failure to detect or the State's detection of any unsatisfactory practices, but failure to notify Contractor or require Contractor's remediation of the unsatisfactory practices does not constitute acceptance of such practice or a waiver of the State's enforcement rights under the Contract.

**24. USE OF STATE FUNDS**

Contractor, including its officers and members, shall not use funds received from the MHSOAC pursuant to this contract to support or pay for costs or expenses related to the following:

- A. Campaigning or other partisan activities to advocate for either the election or defeat of any candidate for elective office, or for or against the passage of any proposition or ballot measure; or,
- B. Lobbying for either the passage or defeat of any legislation.

This provision is not intended and shall not be construed to limit any activities specified in this Contract that are intended to inform, educate, and support advocacy before local and state administrative and legislative bodies regarding policies and issue-based legislation consistent with the Mental Health Services Act.

This provision is not intended and shall not be construed to limit any expression of a view, opinion, or position of any member of Contractor as an individual or private citizens, as long as state funds are not used; nor does this provision limit Contractor from merely reporting the results of a poll or survey of its membership.

MEMORANDUM OF AGREEMENT BETWEEN  
THE LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH  
AND THE LOS ANGELES COUNTY OFFICE OF EDUCATION  
FOR THE MENTAL HEALTH STUDENT SERVICES ACT GRANT

## I. OVERVIEW

On January 15, 2019, the Los Angeles County Board of Supervisors (Board) approved Motion No. 19-0403 instructing the Department of Mental Health (DMH) to partner and fund an expansion of mental health and wellbeing services for families, staff and students with the Los Angeles County Office of Education (LACOE). The vision of this partnership is to create trauma-informed schools and implement the Community School project throughout Los Angeles County to improve students' academic, emotional and physical wellbeing. The Community School Model is an evidence-based school improvement framework that recognizes the role of family and community as key stakeholders who can collaborate with educators to address external factors influencing student achievement, such as family circumstances, traumatic events (i.e. adverse childhood experiences), poverty, and health concerns, while incorporating cultural differences, and student engagement. Additionally, Community Schools represent a site-based strategy for schools partnering with community agencies and allocating resources on campus to provide an accessible and integrated focus on academics, health and social services, youth and community development, and community engagement and development.

DMH applied for and was awarded the Mental Health Student Services Act (MHSSA) grant through the Mental Health Oversight and Accountability Commission (MHSOAC). The MHSSA grant was created to establish additional mental health partnerships between county mental health or behavioral health departments and local education entities. The MHSSA grant is intended to provide support services that address the following goals:

1. Preventing mental illness from becoming severe and disabling;
2. Improving timely access to services for underserved populations;
3. Providing outreach to families, employers, primary health care providers, and other community partners to recognize the early signs of potentially severe and disabling mental illness;
4. Reducing the stigma associated with the diagnosis of a mental illness or seeking mental health services;
5. Reducing discrimination against people with mental illness;
6. Preventing negative outcomes in the targeted population, including, but not limited to:
  - a) Suicide and attempted suicide;
  - b) Incarceration;
  - c) School failure or dropout;
  - d) Unemployment;
  - e) Prolonged suffering;

- f) Homelessness;
- g) Removal of children from their home; and
- h) Involuntary mental health detentions.

## **II. OBJECTIVE**

DMH and LACOE plan to expand the current CSI model by assigning a Master's level clinician to provide direct intervention and prevention services to six of the current CSI sites. Each clinician will be dedicated to one of the six CSI sites/school districts. Through the partnership formed with these school sites, this grant will fund key personnel to further increase access to preventative services and a continuum of mental health care for students and their families. The grant funds will further support mental health trainings for educators, parents, and community partners so they can better understand student's behaviors by utilizing a trauma-informed lens.

## **III. LACOE BACKGROUND**

LACOE is a State-funded public agency that promotes academic excellence and financial stability in Los Angeles County's 80 K-12 public school districts. As the nation's largest regional education agency, LACOE, provides equitable support of education and student well-being to the nearly 2 million children throughout Los Angeles County.

## **IV. SERVICES TO BE PROVIDED**

The overall goal of the CSI is to improve academic, emotional, and physical wellbeing of participating students to improve their educational outcomes. Services will be provided in-person and/or virtually (based on the school's need) and will include, but are not limited to the following:

1. Comprehensive mental health screening, triage and assessment for students;
2. Crisis intervention;
3. Short-term mental health treatment;
4. Student psychoeducation workshops;
5. Suicide prevention awareness activities and training;
6. Trauma- and resilience informed trainings and workshops for school personnel and parents/caregivers, including Youth Mental Health First Aid;
7. Stigma and discrimination reduction;
8. School needs assessments;
9. Peer leadership;
10. Referral and linkage to long term or intensive mental health programs, community resources, and ancillary supports;
11. Development of a comprehensive resource guide identifying existing resources and services available for each community served; and
12. Support groups for students and parents.



## V. TARGET POPULATION

The Measure of America's Portrait of Los Angeles County and Los Angeles County Department of Public Health (DPH) Education and Health in Los Angeles County Report were utilized to identify schools. Schools in the initial CSI were selected based on rates of chronic absenteeism, suspension, violent crimes, homelessness, poverty, and mental health needs. Factors considered for the schools to be served under the MHSSA grant also included impact of the COVID-19 pandemic on the community, educational index, and number of homeless students. The school districts identified below were those with the highest needs according to the aforementioned criteria.

Prevention and direct intervention services will be provided to children, youth and their families at the six current CSI sites. Additionally, universal prevention services will be provided to children, youth and their families attending the feeder elementary and/or middle schools within these districts identified below.

Selected Community School Sites	
District	School
Antelope Valley Union High School District	Little Rock High School
Bassett Unified School District	Bassett High School
Baldwin Park Unified School District	Baldwin Park High School
Inglewood Unified School District	Morningside High School
Montebello Unified School District	Montebello High School
Pomona Unified School District	Ganesha High School

## VI. TRAININGS

Educating school staff and administrators on the impact of trauma and how to apply a trauma-informed lens in schools is essential to providing comprehensive school-based services. To achieve this goal, DMH has partnered with the University of California Los Angeles (UCLA) Center of Excellence (COE) to develop a trauma-based curriculum to provide trauma- and resilience informed trainings. Through the partnership with UCLA, clinicians hired under the grant will have access to an array of trainings to enhance their ability to screen and assess any student for risk factors related to trauma and other mental health conditions.

The training plan for the clinicians will be consistent with the trainings provided to LACOE CSI staff under the current CSI rollout. The plan will consist of trainings offered by DMH and UCLA COE. Trainings will include, but are not limited to, the following topics:

1. Engaging School Community;

2. Overview of the Community School Model;
3. Navigating School Support Systems;
4. Implementation, Monitoring and Evaluation;
5. Resilience and trauma-informed care;
6. Secondary trauma and burnout prevention;
7. Implicit bias;
8. Suicide prevention (i.e. Safe Talk, Applied Suicide Intervention Skills Trainings, Youth Mental Health First Aid);
9. Reflective practice;
10. Engagement; and
11. Data collection practices and procedures.

## **VII. OUTCOME MEASURES**

The intention of Community Schools is to reduce risk factors and increase protective factors. Community Schools offer a range of support and opportunities to achieve improvement from baseline in the following five goals:

1. Students attending school consistently;
2. Students succeeding academically;
3. Students engaging in learning and actively participating in their communities;
4. Families engaging with their children's education; and
5. Students practicing healthy habits: physically, socially, and emotionally.

### **A. Deliverables**

The Master's level clinicians will work closely with the CSI Program Specialist and Educational Community Worker currently assigned to the selected CSI sites. The clinician will engage school administration and community partners, assess the needs of the school community, provide direct clinical and case management services, and leverage the mental health provider network currently serving the school district. The clinician will be available to assess the needs and service gaps of the school and work with school personnel to identify resources/partnerships within the community to meet identified needs. Additional services may be provided including, but not limited to, professional development and training for school personnel, community outreach service groups, and parent and youth workshops. If warranted, services will also be available virtually via a Health Insurance Portability and Accountability Act (HIPAA) compliant platform that meets the California State and Los Angeles County standards for best practice and confidentiality.

### **B. Outcome Measure Tools**

Ongoing assessment and monitoring of the Community Schools project is essential to determine impact of its services in reducing risk factors and increasing protective factors with participating children and families.

LACOE will partner with DMH to develop a process for systematically collecting required service delivery evaluation data, to identify data elements and develop data collection methods to evaluate wellbeing and educational outcomes. The Brief Universal Prevention Program Survey (BUPPS) will be administered to each student served to measure the reduction in risk factors and increase in protective factors.

## **VIII. DATA COLLECTION**

LACOE will cooperate with DMH in the regularly scheduled monitoring of the Community Schools, including the review of the agency and program records, site visits, telephonic conferences, correspondence, and attendance at any meetings where LACOE adherence to the performance-based criteria will be assessed or evaluated as part of LACOE's performance of this Memorandum of Agreement (MOA).

Community School staff will administer surveys to evaluate the program. Schools will provide data to LACOE twice annually. The Data Processing Assistant hired under this grant will collect, compile and analyze data. The analyst will summarize, present findings and provide recommendations as appropriate.

### **A. Development of Data Tracking Processes**

LACOE will share data with DMH to monitor and evaluate the required data elements, as well as evaluate the quality and performance indicators and outcomes at the program level. Should there be a change in federal, State, and/or County policies/regulations, DMH at its sole discretion, may amend the performance-based criteria via an amendment to this MOA.

### **B. Socio-Demographic Data**

LACOE will gather and report student socio-demographic information in accordance with the DMH reporting guidelines identified in the Mental Health Services Act (MHSA) regulations for prevention programs. Socio-demographic data collected shall include the following:

1. Race;
2. Ethnicity;
3. Primary language;
4. Age;
5. Gender/gender identity;
6. Gender assigned at birth\*;
7. Sexual orientation\*, and
8. Disability.

(Note: An asterisk denotes data that does not have to be collected for children under the age of 12 years old.)

### C. Data Report and Schedule

Data will be gathered and reflected in the quarterly and annual reports and submitted to DMH.

<b>Data Required</b>	<b>Report Form</b>	<b>Submission Dates</b>
Number of students referred	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Number of students screened/triaged	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Number of opened cases	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Number of student workshops convened	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Number of parent/caregiver workshops convened	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Number of school personnel workshops and/or trainings convened	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Number of student support groups facilitated	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Number of parent/caregiver support groups facilitated	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Number of students and/families linked to concrete supports and community resources	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Number of students linked to mental health services	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>

<b>Data Required</b>	<b>Report Form</b>	<b>Submission Dates</b>
Number of Youth Mental Health First Aid trainings facilitated	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Demographic data	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Outcome Measure Data	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Negative outcomes of untreated mental health conditions (e.g. suicide, school failure, out of home placement)	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>
Number of elementary and/or middle school students served under the universal level of Prevention	Non-identified Raw Data and Aggregate Summary	May 5 <sup>th</sup> August 5 <sup>th</sup> November 5 <sup>th</sup> February 5 <sup>th</sup>

#### **D. Data Sharing**

Data shall be collected with individual identifiers by LACOE. LACOE will link data elements and share de-identified linked data (i.e. such as individual student universal screening outcomes, academic outcomes and service participating) with DMH. Linking student level participation and outcome data will be central to the evaluation. LACOE will share non-identified raw and aggregate data with DMH. LACOE will provide data requested under Section IX. Performance Based Criteria.

LACOE shall collect relevant individually identified-level data. LACOE shall provide DMH and MHSOAC access to all relevant individually identified-level data collected and maintained, upon request.

### **IX. PERFORMANCE BASED CRITERIA**

The following performance based criteria will be utilized to measure LACOE's fulfillment of the grant deliverables.

<b>Performance Based Criteria</b>	<b>Methods of Data Collection</b>	<b>Performance Targets</b>
Referral and Linkage	LACOE Reports Educational Passport System (EPS) Report by Service Type	Students and families served be successfully linked and have access families to ongoing and sustained services, including concrete supports, suicide prevention services, drop-out prevention services, outreach to high-risk youth (including foster youth who identify as LGBTQ students and who have been expelled or suspended from school).
Decrease Absenteeism	LACOE Reports School Site Attendance Reports California Longitudinal Pupil Achievement Data System (CALPADS)	Demonstrate a decrease in absenteeism at the school site and for students who participate in CS services.
Reduce suspensions and expulsions	LACOE Reports State Reports CALPADS EPS	Demonstrate a reduction in suspension and expulsions at the school site and with students who participate in CS services.
Increase graduation rates	LACOE Reports State Reports EPS	Show an increase in graduation rates at the school site and with students who participate in CS services.
Establish partnerships with elementary and/or middle schools in selected districts	Data reports of numbers served, outreach and engagement activities and services rendered.	Establish a relationship/partnership with at least one elementary and/or middle school each year for a minimum of 24 school sites through the grant cycle.
Hiring Report	Documentation listing type of personnel hired and assigned CSI site	Submission of LACOE's quarterly hiring status.
Program Evaluation	Submission of program implementation and summary program evaluations	Students and families served will report an increase in positive program impact and effectiveness through the grant cycle.



## **X. BUDGET**

The MHSSA grant totaling \$6 million will be allocated over four years beginning March 1, 2022. The budget is outlined in Addendum A. At least 90% of the personnel costs must be for personnel who are dedicated to delivering Community School services.

### **A. Staffing**

LACOE will hire six School Social Workers, one Coordinator II and one Data Processing Assistant under the MHSSA grant funding.

#### **1. School Social Worker (SSW)**

The School Social Worker will provide direct services to the students and families enrolled in the school districts at the identified CSI school sites and universal prevention services to students enrolled in the feeder elementary and/or middle schools in the district.

##### *Duties:*

- a. Conduct mental health screening and assessments, including crisis intervention as needed.
- b. Provide outreach and engagement.
- c. Provide individual and family therapy.
- d. Provide evidence-based and promising practice strategies to identify, assess, and address social, emotional, and environmental issues to reduce and overcome barriers to educational success.
- e. Collaborate with school staff in multidisciplinary teams to improve coordination and access to services.
- f. Provide collateral support to parents and/or caregivers of students enrolled in the identified districts.
- g. Provide case management, referral and linkage services to ongoing mental health services and community resources to address students' identified needs.
- h. Provide mental health promotion services including psychoeducation and stigma reduction to students and parents. Topics may include: mental health, trauma awareness, social skills, conflict mediation, grief, drug prevention, and other social emotional issues impacting learning.
- i. Collaborate with teachers and school staff to provide mental health consultation by developing strategies for classroom management, designing and monitoring behavioral contracts, and positive behavior support planning and implementation.
- j. Plan, coordinate and participate in multidisciplinary teams, including, but not limited to: Coordination of Services Team (COST), Student Success Team (SST), Resources Coordinating Council, and School Wide Positive Behavior Support (SWPBS).

- k. Promote parent engagement in the educational process.
- l. Participate in the school Crisis and Threat Assessment Teams.

## 2. Coordinator II

The Coordinator II will be dedicated to coordinating and supporting the implementation of the mental health services component of the program expansion. The Coordinator II will additionally oversee the clinicians and Data Processing Assistant.

### *Duties:*

- a. Coordinate mental health activities provided by school social workers.
- b. Direct coordinate, and maintain the Medi-Cal Reimbursement services provided by the school social worker.
- c. Plan and direct staff development and in-service activities for school social workers regarding the maintenance of mental health charts and records, service delivery, and other related services.
- d. Coordinate and collaborate with DMH, Department of Children and Family Services, and other nonprofit mental health agencies to assist student's families in obtaining additional assistance outside of their school district; and prepares reports for the agencies as required.
- e. Provide mental health consultation and expertise to school districts and site administrators on strategies that facilitate student's development and their ability to successfully deal with social emotional barriers, crises, or traumatic experiences.
- f. Provide direct supervision and evaluate performance and instruction to school social workers.
- g. Provide consultation and technical support to school's multidisciplinary teams to help assess student's and family's needs and address appropriate resources.
- h. Provide clinical supervision to school social workers.
- i. Support with the data requirements and evaluation practices of the initiative.
- j. Collaborate and coordinate services with community based programs and other district stakeholders and other outside partnerships.

## 3. Data Processing Assistant

The Data Processing Assistant to provide administrative support, collecting and analyzing data.

### *Duties:*

- a. Analyze and prepare reports from local, State, and national assessment data as it relates to individual student performance including academic, attendance and behavior.
- b. Analyze and prepare reports from electronic data collection system as it relates to services provided by school social workers
- c. Develop and maintain historical student and school data files to monitor and track performance.
- d. Compile data from multiple assessments to develop student, subject, grade-level, or school achievement profiles.
- e. Ensure the validity of all data collected from clinicians and data collection systems, prior to submission to DMH (i.e. analyze assessments, surveys and evaluation tools to ensure that they measure what is intended, analyze data and explore external factors to provide explanation for causality of outcomes).

## **XI. FUNDING & PAYMENT PROVISIONS**

- A. DMH will establish an annual funding amount to provide MHSSA Grant funding for the LACOE CSI project as indicated in Addendum A – LACOE Budget.
- B. Funding in the second, third and fourth year of this Agreement is contingent upon: (a) changes in the availability of funds; (b) an acceptable level of performance as evidenced by DMH monitoring of Performance Based Criteria listed in Section IX of this MOA; (c) receipt of quarterly outcomes; (d) receipt of quarterly financial reports; and (e) receipt of annual report (please refer to Section XII Term of MOA).
- C. DMH shall reimburse LACOE the costs for services provided to the LACOE CSI Project students under this MOA from funds DMH has allocated for services to the LACOE CSI based on funding availability.
- D. Reimbursement claims must be submitted using Addendum B – Invoice, each quarter on the following dates: May 1<sup>st</sup>, August 1<sup>st</sup>, November 1<sup>st</sup>, and February 1<sup>st</sup>.
- E. Reimbursement to LACOE will be based on review and approval of invoices. Reimbursement will be provided on a quarterly basis from July through May within 30 days of the approved invoice. Reimbursement to LACOE for services provided in June will be billed in accordance with the Audit-Controller Fiscal Year Closing Instruction deadline, and paid within 30 days of the approved invoice. Invoices submitted to DMH from LACOE must reflect or be accompanied by documentation that proves the following:
  1. Actual number of students/families/staff served.
  2. Itemized indirect costs.

3. Payroll data to determine staff salaries and employee benefits and expenditures data to validate services and supplies relating to program services and supports expenses (i.e. workshops, personal development skills and training, equipment, etc.).
  4. Submission of outcomes measures that adhere to MHSSA grant requirements.
- F. In the event of MHSOAC audit exceptions that result in fiscal sanction or claim disallowance that arise out of this MOA, LACOE shall be liable for any sanctions or disallowed costs.
- G. Decreases in workload that result in any decrease in funding may be made upon mutual agreement of the parties memorialized through a formal amendment as provided in Section XII (C), below.
- H. Invoices for services rendered under this MOA shall be electronically submitted to DMH's Project Manager:

Kanchana Tate, LCSW  
Mental Health Clinical Program Manager II  
[ktate@dmh.lacounty.gov](mailto:ktate@dmh.lacounty.gov)

- I. All invoices submitted by LACOE for payment must have the written approval of DMH's Project Manager prior to any payment thereof. In no event shall DMH be liable or responsible for any payment prior to such written approval. Approval for payment will not be unreasonably withheld.

## **XII. TERM OF MOA**

- A. Subject to the availability of funds, this MOA is effective beginning March 1, 2022 through February 28, 2026, unless sooner terminated, in whole or in part, as provided in this MOA.
- B. DMH shall notify LACOE in writing of the funding available for the second, third and fourth years by, November 1<sup>st</sup> of the preceding year.
- C. Either Party may request changes to this MOA. Any changes, modification, revisions or amendments to this MOA are mutually agreed upon and between the Parties shall be incorporated in a written amendment, and effective when executed and signed by the Parties.

## **XIII. TERMINATION**

Both Parties involved in this MOA may terminate the MOA at any time without cause provided that a written notice was given at least 30 days in advance to the other Party.

#### **XIV. CONFIDENTIALITY**

- A. LACOE will ensure that adequate provisions for disposing and keeping DMH participant records confidential are included in contracts and agreements entered into with third parties and other outside agents or agencies. Documents for record and retention purposes in accordance with this MOA are to be maintained for a period of five years after the final payment.
- B. LACOE will maintain the confidentiality of all records and information, including but not limited to, claims, County records, patient/client records and information, in accordance with Welfare and Institutions Code (WIC) sections 5326 through 5330, inclusive, and all other applicable County, State, and federal laws, ordinances, rules, regulations, manuals, guidelines, and directives related to confidentiality and privacy. Additionally, LACOE will ensure that all data received from students is appropriately used only for the purpose set forth in this document and/or any subsequent agreements between LACOE and DMH. This will be in accordance with WIC sections 17006 and 10850, and CDSS Manual of Policies and Procedures Chapter 19-000.
- C. LACOE will not publish, disclose, or permit or cause to be published or disclosed, or include in any way the name, address, or personal-identifying information concerning the condition or circumstances of any student, or family member if applicable, from whom, or about whom, information is obtained. Should a report be published using data provided by LACOE, DMH retains the right to review, comment on, and edit all such reports prior to distribution.
- D. DMH agrees that it may create, receive from or on behalf of LACOE, or have access to, records or record systems that are subject to the Family Educational Rights and Privacy Act ("FERPA"), 10 U.S.C. Section 1232g (collectively, the "FERPA Records"). DMH represents, warrants, and agrees that it will: (1) hold the FERPA Records in strict confidence and will not use or disclose the FERPA records except as (a) permitted or required by this MOA, (b) required by law or (c) otherwise authorized by LACOE in writing; (2) safeguard the FERPA Records according to commercially reasonable administrative, physical and technical standards that are no less rigorous than the standards by which DMH protects its own confidential information; and (3) continually monitor its operations and take any action necessary to assure that the FERPA Records are safeguarded.

- E. After data or documents submitted by LACOE have become part of the public records for the State, upon written approval by the State Contract Manager, publishing or utilizing the same data or documents shall include the following legal notice: This report was prepared as an account of work sponsored by the Mental Health Services Oversight and Accountability Commission (MHSOAC), but does not necessarily represent views of the MHSOAC or any of its employees except to the extent if any, that it has been formally approved by MHSOAC. For information regarding such action, communicate directly with MHSOAC at 1325 J Street, Suite 1700, Sacramento, CA 95814. Neither the MHSOAC nor the State of California, nor any officer or employee thereof, or any of its contractors or subcontractors makes any warranty, express or implied, or assumes any legal liability whatsoever for the contents of this document. Nor does any party represent that use of the data contained herein would not infringe upon privately owned rights without obtaining permission or authorization from any party who has any rights in connection with the data.
- F. MHSOAC, the Bureau of State Audits, and the Department of General Services shall have the right to review and copy any of LACOE's records and supporting documents pertaining to the performance of this grant award. LACOE shall agree to allow the auditor(s) access to such records during normal business hours and allow interviews of any employees who might reasonably have information related to such records. (Gov. Code §8546.7, Pub. Contract Code §10115 et seq., CCR Title 2, Section 1896).

## **XV. DMH RESPONSIBILITIES**

- A. Designate a DMH Project Manager responsible for the oversight of this program.
- B. Ensure all applicable policies and guidelines from MHSOAC are provided to the LACOE CSI Program Manager.
- C. Monitor and evaluate LACOE's performance under this MOA utilizing data submitted by LACOE through (1) quarterly reports (submitted on May 5<sup>th</sup>, August 5<sup>th</sup>, November 5<sup>th</sup>, and February 5<sup>th</sup>) and (2) annual reports (submitted on February 5<sup>th</sup>).
- D. Identify deficiencies that may place the performance of this MOA in jeopardy and require that LACOE initiate corrective action measures.
- E. Retain on file, copies of all notices sent to LACOE that pertain to this MOA.
- F. Coordinate collaborative meetings and identify additional resources to increase access to services and resources for CSI participants.
- G. Reimburse LACOE for services based on DMH approved quarterly invoices.



## **XVI. LACOE RESPONSIBILITIES**

- A. Designate a LACOE CSI Project Program Manager responsible for oversight of this program.
- B. Designate a staff person to serve as the LACOE CSI liaison between DMH and LACOE for the CSI Program.
- C. Provide DMH a program description outlining individualized services and goals per site before implementation.
- D. Coordinate quarterly telephone conferences between DMH and LACOE CSI Project Manager and/or liaison(s) to discuss implementation issues.
- E. Deliver the services of the LACOE CSI Project as outlined in this MOA to the target population.
- F. Ensure services provided support the outcome and goals established in this document.
- G. Develop MOU(s) with any community-based organization and/or department that can partner with the school site to provide additional support to CSI participants.
- H. Ensure outreach protocols are established to maintain consistent level of student, family and community participation.
- I. Utilize a referral tracking system to report referrals made and linkage outcomes.
- J. Require and ensure potential LACOE CSI Project referral agencies and providers receive education and/or training to support CSI services provide under the MHSSA Grant.
- K. Gather and report student socio-demographics for CSI participants in accordance with the reporting guidelines identified by MHSSOAC. Data shall be reported to DMH as outlined in Section VIII (B) of this MOA.
- L. Keep record of services that were provided, dates, agendas and sign-in sheets, for all LACOE CSI Project components for five years after the final payment.
- M. Invoice DMH for LACOE CSI MHSSA Project expenditures with appropriate back up documentation (i.e. itemized expenditures, receipts for staff training with an accompanying training bulletin and etc.) for all Community School services.

- N. Comply with MHSOAC requirements for claiming, invoicing and reporting of data and outcomes for the MHSSA funded services and activities.
- O. Ensure that all data collected is entered into the LACOE identified or developed database templates.
- P. Collect, manage, and submit specific demographic and outcome data on a quarterly and annual basis to DMH to demonstrate client outcomes inclusive of guidelines set forth by DMH and MHSOAC. This includes collecting outcomes data to assess the LACOE CSI Project and make mid-course corrections, as necessary, to ensure the achievement of positive client and Community School program outcomes.
- Q. Provide data related to program impact and effectiveness through the grant cycle to the DMH Project Manager or designee electronically.
- R. Collect relevant person identified-level data. Provide DMH and MHSOAC access to all relevant person identified-level data collected and maintained, upon request.
- S. Submit quarterly reports to the DMH Project Manager or designee electronically (due on May 5<sup>th</sup>, August 5<sup>th</sup>, November 5<sup>th</sup>, and February 5<sup>th</sup>) and annual reports (due on February 5<sup>th</sup>).
- T. Provide DMH Project Manager all correspondence with inquiries regarding this MOA to:

Kanchana Tate, LCSW  
Mental Health Clinical Program Manager II  
Department of Mental Health  
510 S. Vermont Ave, 22<sup>nd</sup> Floor  
Los Angeles, CA 90020  
Email address: [ktate@dmh.lacounty.gov](mailto:ktate@dmh.lacounty.gov)

This Memorandum of Agreement shall remain in effective from the signature date below. Modification shall be added by mutual agreement of the Parties.

\_\_\_\_\_  
Patricia Smith  
Chief Financial Officer  
Los Angeles County Office of Education

\_\_\_\_\_  
Date

\_\_\_\_\_  
Jonathan E. Sherin, M.D., Ph.D.  
Director  
Los Angeles County Department of Mental Health

\_\_\_\_\_  
Date

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH  
MENTAL HEALTH STUDENT SERVICES ACT GRANT  
ADDENDUM A – LACOE BUDGET**

	<u>Year 1</u>	<u>Year 2</u>	<u>Year 3</u>	<u>Year 4</u>	<u>Total</u>
<b>Personnel</b>					
<b><u>School Social Worker (Certificated)</u></b>					
Salary (@ 3% COLA)	\$110,040	\$113,341	\$116,741	\$120,244	460,366
Benefits	\$46,975	\$47,740	\$48,528	\$49,340	192,583
Total S & B per position	\$157,015	\$161,081	\$165,269	\$169,584	652,949
<b>6 School Social Worker</b>	<b>\$942,090</b>	<b>966,486</b>	<b>991,614</b>	<b>1,017,504</b>	<b>3,917,694</b>
<b><u>Coordinator II (Certificated)</u></b>					
Salary (@ 3% COLA)	\$135,396	\$139,458	\$143,642	\$147,951	566,447
Benefits	\$52,852	\$53,794	\$54,764	\$55,762	217,172
Total S & B per position	\$188,248	\$193,252	\$198,406	\$203,713	783,619
<b>1 Coordinator II</b>	<b>\$188,248</b>	<b>193,252</b>	<b>198,406</b>	<b>203,713</b>	<b>783,619</b>
<b><u>Data Processing Assistant (Classified)</u></b>					
Salary (@ 3% COLA)	\$61,776	\$63,629	\$65,538	\$67,504	\$258,447
Benefits	\$48,748	\$49,566	\$50,409	\$51,277	\$200,000
Total S & B per position	\$110,524	\$113,195	\$115,947	\$118,781	\$458,447
<b>1 Data Processing Assistant</b>	<b>\$110,524</b>	<b>113,195</b>	<b>115,947</b>	<b>118,781</b>	<b>458,447</b>
<b>Student Stipends</b>	<b>\$48,000</b>	<b>\$48,000</b>	<b>\$48,000</b>	<b>\$48,000</b>	<b>192,000</b>
<b>Other expenses</b>					
Mileage	\$8,400	\$8,400	\$8,400	\$8,400	33,600
Workshop/Training	\$11,093	\$11,094	\$11,094	\$11,094	44,375
Supplies	\$5,000	\$5,400	\$5,400	\$5,400	21,200
Office Equipment/Computer/Laptop	\$8,400	\$8,400	\$8,400	\$8,400	33,600
Cell Phone Stipend	\$3,500	\$3,500	\$3,500	\$3,500	14,000
<b>Total Other expenses</b>	<b>36,393</b>	<b>36,794</b>	<b>36,794</b>	<b>36,794</b>	<b>146,775</b>
<b>Total Operational Cost</b>	<b>\$1,325,255</b>	<b>1,357,727</b>	<b>1,390,761</b>	<b>1,424,792</b>	<b>5,498,535</b>
Indirect	9.12% \$120,863	9.12% 123,825	9.12% 126,838	9.12% 129,939	501,465
<b>Total Proposal</b>	<b>\$1,446,118</b>	<b>1,481,552</b>	<b>1,517,599</b>	<b>1,554,731</b>	<b>6,000,000</b>

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH  
PREVENTION SERVICES ADMINISTRATION  
MENTAL HEALTH STUDENT SERVICES ACT GRANT AWARD  
ADDENDUM B - INVOICE**

Date Submitted: \_\_\_\_\_

Invoice Number: \_\_\_\_\_

To: Kanchana Tate, LCSW Department of Mental Health 510 S Vermont Ave, 22 <sup>nd</sup> FL Los Angeles, CA 90020 <a href="mailto:ktate@dmh.lacounty.gov">ktate@dmh.lacounty.gov</a>	<b>Check One</b> Feb 2022 – Jan 2023 <input type="checkbox"/> Feb 2023 – Jan 2024 <input type="checkbox"/> Feb 2024 – Jan 2025 <input type="checkbox"/> Feb 2025 – Jan 2026 <input type="checkbox"/>	<b>Check One</b> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4 <input type="checkbox"/>
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	Costs	Beginning Balance	Remaining Balance
<b>Personnel</b>			
School Social Worker (6 FTE)			
Coordinator II (1 FTE)			
Data Processing Assistant (1 FTE)			
<b>Other Expenses</b>			
Student stipends			
Workshops/Training			
Mileage			
Supplies			
Office Equipment			
Cell Phone Stipend			
<b>Administration</b>			
Indirect Costs			
<b>Total</b>			

<b>Please address any questions to:</b> Jose Gonzalez, Director CS Development Los Angeles County Office of Education 12830 Columbia Way, Downey, CA 90242 <a href="mailto:Gonzalez_Jose@lacoedu">Gonzalez_Jose@lacoedu</a>	<b>Please send payment to:</b> Samantha Ruan Los Angeles County Office of Education 12830 Columbia Way, ECW-114, Downey, CA 90242
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DMH Approver: \_\_\_\_\_  
 \_\_\_\_\_  
 Signature

\_\_\_\_\_  
 \_\_\_\_\_  
 Date

COUNTY OF LOS ANGELES  
DEPARTMENT OF MENTAL  
COMMUNITY SCHOOL INITIATIVE SITES

Selected Community School Sites	
District	School
Antelope Valley Union High School District	Little Rock High School
Bassett Unified School District	Bassett High School
Baldwin Park Unified School District	Baldwin Park High School
Inglewood Unified School District	Morningside High School
Montebello Unified School District	Montebello High School
Pomona Unified School District	Ganesha High School

The Measure of America's Portrait of LA County and Los Angeles County Department of Public Health (DPH) Education and Health in LA County Report were utilized to identify schools. Schools in the initial CS Initiative were selected based on rates of chronic absenteeism, suspension, violent crimes, homelessness, poverty, and mental health needs. Factors considered for the expansion also included impact of the COVID-19 pandemic on the community, educational index, and number of homeless students. The school districts in the expansion scored as those with the highest needs.

CONTRACT NO. MHMOA208

AMENDMENT NO. 1

THIS AMENDMENT is made and entered into this \_\_\_\_ day of February, 2022, by and between the COUNTY OF LOS ANGELES (hereafter "County") and the Los Angeles County Office of Education (LACOE) (hereafter "Provider").

WHEREAS, reference is made to that certain document entitled "Memorandum of Agreement for Community School Initiative (CSI) services", dated September 17, 2019, and further identified as County MOA No. MHMOA208 (hereafter "MOA"); and

WHEREAS, in accordance with a September 15, 2021 Board Motion, the County Board of Supervisors instructed the Department of Mental Health to continue the current CSI program with LACOE and to expand the CSI program to provide additional mental health support to students transitioning back to school after the COVID-19 school closures; and

WHEREAS, said MOA 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 Provider intend to amend the MOA to extend the term of the MOA, add funding, revise language, and replace Addendums B (Budget) and C (Invoice); and

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

NOW, THEREFORE, County and Provider agree as follows:

1. This Amendment is effective July 1, 2022.



2. For FY 2022-23, the MOA will be funded by Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) revenue, in the amount of \$ \_\_\_\_\_.

Or

For FY 2022-23, the MOA will be funded by the Mental Health Services Block Grant (MHBG) American Rescue Plan Act (APRA) revenue, in the amount of \$\_\_\_\_\_.

2. For FY 2022-23, the MOA will be funded by Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI ) revenue, in the amount of \$ \_\_\_\_\_ and the Mental Health Services Block Grant (MHBG) American Rescue Plan Act (APRA) revenue, in the amount of \$\_\_\_\_\_ .
3. Addendum B (LACOE BUDGET) is deleted in its entirety and replaced with Addendum B-1 (LACOE BUDGET), attached hereto and incorporated herein by reference. All references in the MOA to Addendum B (LACOE BUDGET) shall be deemed amended to state “Addendum B-1 (LACOE BUDGET)”.
4. Addendum C (INVOICE) is deleted in its entirety and replaced with Exhibit C-1 (INVOICE), attached hereto and incorporated herein by reference. All references in the MOA to Addendum C (INVOICE) shall be deemed amended to state “Addendum C-1 (INVOICE)”.
5. Paragraph X (BUDGET) is deleted in its entirety and replaced with the following:

“The total amount of funding committed for CSI implementation at LACOE pilot sites is **\$6,445,711** for FY 2022-23. The budget is outlined in Addendum B-1- LACOE Budget”.

6. Paragraph XI (FUNDING & PAYMENT PROVISIONS) subsection J is deleted in its entirety and replaced with the following:

“J. Invoices for services rendered under this MOA shall be electronically submitted to the County’s Project Manager: Kanchana Tate, LCSW, [KTate@dmh.lacounty.gov](mailto:KTate@dmh.lacounty.gov)”.

7. Paragraph XII (TERM OF MOA) subsections A and C shall be deleted and replaced as follows:

“A. The term of this MOA shall be extended through June 30, 2023, unless sooner terminated or extended, in whole or in part as provided in this MOA.”

"C. Renewal of this MOA and continuation of the LACOE CSI Project beyond the agreed upon term will be subject to each Party signing a renewal MOA in whole or in part at least 15 days before the end of the FY 2022-23.”

8. Paragraph XVI (LACOE Responsibilities) Subsection S is deleted in its entirety and replace with the following:

“S. Provide DMH all correspondence with inquiries regarding this MOA to: Kanchana Tate, LCSW, 510 S. Vermont, 22<sup>nd</sup> Floor, Los Angeles, CA 90020.”

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

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IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by the County's Director of Mental Health or designee, and Provider 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 JONATHAN E. SHERIN, M.D., Ph.D.

Los Angeles County Office of Education  
CONTRACTOR

By \_\_\_\_\_

Name Patricia Smith

Title Chief Financial Officer  
(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM:  
OFFICE OF THE COUNTY COUNSEL

By: Emily D. Issa  
Deputy County Counsel

CONTRACT NO. MH300001

AMENDMENT NO. 3

THIS AMENDMENT is made and entered into this \_\_\_\_ day of February, 2022, by and between the COUNTY OF LOS ANGELES (hereafter "County") and the Los Angeles Unified School District (LAUSD) (hereafter "Contractor").

WHEREAS, reference is made to that certain document entitled "Department of Mental Health Contract for the provision of Mental Health Rehabilitation Center services", dated September 25, 2019, and further identified as County Contract No. MH300001, and any amendments thereto (hereafter collectively "Contract"); and

WHEREAS, in accordance with a September 15, 2021 Board Motion, the County Board of Supervisors instructed the Department of Mental Health to continue the current Community School Initiatives (CSI) at LAUSD, to expand the CSI program to provide additional mental health support to students transitioning back to school after the COVID-19 school closures, and to rename the LAUSD CSI program as the Trauma- and Resilience- Informed Early Enrichment (TRiEE) program; 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 Contract term, add funding, and replace the Statement of Work (Exhibit A), and Invoice (Exhibit B); and

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

NOW, THEREFORE, County and Contractor agree as follows:

1. This Amendment is effective July 1, 2022.
2. Paragraph 4.0 (TERM) subsection 4.1.1 is deleted in its entirety and replaced as follows:

“4.1.1 The initial period of this Contract shall commence on September 25, 2019, and shall continue in full force and effect through June 30, 2023.”
3. For FY 2022-23, the Contract will be fully funded by Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) revenue, in the amount of **\$3,574,290**.
4. Statement of Work (Exhibit A), is deleted in its entirety, and replaced with Statement of Work (Exhibit A-3) attached hereto and incorporated herein by reference. All references in the Contract to Statement of Work (Exhibit A), shall be deemed amended to state “Statement of Work (Exhibit A-3)”.
5. Invoice (Exhibit B), is deleted in its entirety, and replaced with Invoice (Exhibit B-3) attached hereto and incorporated herein by reference. All references in the Contract to Invoice (Exhibit B), shall be deemed amended to state “Invoice (Exhibit B-3)”.
6. Except as provided in this Amendment, all other terms and conditions of the Contract shall remain in full force and effect.

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IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by the 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 JONATHAN E. SHERIN, M.D., Ph.D.

Los Angeles Unified School District  
CONTRACTOR

By \_\_\_\_\_

Name Pia Escudero

Title Executive Director Student Health  
(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM:  
OFFICE OF THE COUNTY COUNSEL

By: Emily D. Issa  
Deputy County Counsel



**STATEMENT OF WORK (EXHIBIT A)**

**DEPARTMENT OF MENTAL HEALTH - PREVENTION SERVICES  
LOS ANGELES COUNTY**

**AND**

**LOS ANGELES UNIFIED SCHOOL DISTRICT PARTNERSHIP:  
BUILDING RESILIENT SCHOOL COMMUNITIES**



**STATEMENT OF WORK (SOW)  
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## 1. OVERVIEW

- 1.1 On January 15, 2019, the Los Angeles County Board of Supervisors approved Motion 19-0403, instructing the Department of Mental Health (DMH) to provide funding to the Los Angeles Unified School District (LAUSD) to enhance mental health and wellbeing services to prevent mental illness among school students, families, and staff. The Board approved a subsequent amendment to this motion instructing the Director of DMH, in coordination with the Los Angeles County Office of Education (LACOE), the Los Angeles County Chief Executive Office (CEO), and the Auditor-Controller (A-C), to develop a countywide plan for providing school-based mental health services, including but not limited to, prevention services, education, support, and outreach.
- 1.2 In partnership with LACOE, the CEO, and the A-C, DMH will enhance school-based mental health services countywide by providing supportive services, training, and coordination at selected school sites. The framework focuses on three key initiatives:
  - A. Developing trauma-informed schools;
  - B. Implementing a Community Schools Initiative approach focused on developing community partnerships that reinforce mental health supports; and
  - C. Infusing School Based Services Coordination Teams.

These initiatives will ensure optimal coordination of services and leveraging of available resources.

## 2. OBJECTIVE

- 2.1 DMH will use the Coalition of Community Schools' and the Institute for Educational Leadership's Community Schools<sup>1</sup> Framework to incorporate the development of trauma-informed schools as a way to enhance mental health and wellbeing:
  - A. Developing Trauma-Informed Schools

Educating school staff and administrators on the impact of trauma and how to apply trauma-informed practices in schools is essential to providing comprehensive school-based services. The goal of these trainings is to facilitate a discussion to help staff understand the impact of trauma on students and learn strategies to support mental wellbeing and resilience.
  - B. Implementing the Community Schools Framework

LAUSD implemented the Trauma- and Resilience- informed Early Enrichment (TRIEE) program utilizing the Community Schools Framework. The Community Schools Framework is an evidence-based school improvement framework that recognizes the role of

family and community as key stakeholders who can collaborate with educators to address external factors influencing student achievement, such as family circumstances, traumatic events (including adverse childhood experiences), poverty, and health concerns, while incorporating cultural differences, and student engagement. Additionally, it represents a site-based strategy of schools partnering with community agencies and allocating resources to provide an integrated focus on academics, health and social services, and community engagement and development. The resources allocated will be made available to students, families, and the community available at the identified school hub.

2.2 Most community schools operate under the premise of the following four pillars:

- A. Integrated student supports: address out-of-school barriers to learning through partnerships with social and health service agencies and providers.
- B. Expanded learning time and opportunities: thoughtfully selected additional enrichment supports and partnerships during and beyond the school day for students and their families; they are associated with positive academic and non-academic outcomes, including improvements in student attendance, behavior, and academic enrichment.
- C. Family and community engagement: bring parents and other community members into the school as partners with shared decision-making power in their children's education.
- D. Collaborative leadership and practice: build a culture of professional learning, collective trust, and shared responsibility.

Overall, trauma-informed community schools are dedicated to building school capacity to increase protective factors and reduce risk factors for children, youth, and families.

### 3. LAUSD BACKGROUND

- 3.1 The LAUSD is the second largest school district in the country. It is comprised of an ethnically and economically diverse population of students, with 90% being children of color, and 84% qualifying for free or reduced-price meals. Many LAUSD students have experienced significant stressors in their lives. During the 2016-17 school year, the School Mental Health (SMH) Department conducted a Resilience Check-In (RCI) with approximately 3000 students. The findings were alarming; close to half (48%) of all students were found to be at a moderate or high risk for post-traumatic stress disorder. In addition to the RCI, SMH administered the Wellness Check-Up with approximately 2500 students. The findings were consistent; close to 80% of students reported experiencing three or more traumatic events in their lifetime.

- 3.2 LAUSD recognizes that providing education, intervention, and supports early in a child's life can result in long lasting changes for a family. To this end, LAUSD's TRiEE program will target Early Education Centers (EEC). These centers will become neighborhood hubs "uniting educators, community partners, and families to provide all students with top-quality academics, enrichment, health and social services, and opportunities to learn and thrive."

#### 4. SERVICES TO BE PROVIDED

- 4.1 LAUSD, in collaboration with DMH, will provide comprehensive, culturally-sensitive, strengths-based prevention services to increase protective factors and promote social-emotional wellbeing. Services will be tailored to meet the need of each of the ECC hubs. Services and interventions will target the universal and selective prevention tiers.
- 4.1.1 *Universal prevention addresses an entire population (i.e. local community, school, or neighborhood) with supports and programs aimed at preventing mental health problems. For the TRiEE program, this could be teaching the students coping skills and educating the school staff about trauma- and resilience- informed care.*
- 4.1.2 *Selective interventions target those at higher-than-average risk for mental health; for the TRiEE program, these are the students that may need more specific interventions such as Early Childhood Mental Health Consultation (ECMHC) services in school and at home.*
- 4.2 The TRiEE project will focus on three priority improvement areas including:
- 4.2.1 Developing trauma-informed schools;
- 4.2.2 Developing community partnerships; and
- 4.2.3 Supporting strong student performance outcomes.
- 4.3 The overall goal of TRiEE is to improve the academic, emotional, and physical wellbeing of participating students. TRiEE services will include culturally appropriate, school-based services for students and their families by providing:
- 4.3.1 Increased school, family, and community engagement and collaboration;
- 4.3.2 Increased ongoing engagement and partnerships with community based organizations, providers and stakeholders;

- 4.3.3 Integration of education, early mental health consultation, counseling and referrals to appropriate services when needs are identified;
  - 4.3.4 Expanded wellness activities for the school community that target the social emotional and health needs of children/youth and their families along a wellbeing continuum;
  - 4.3.5 Expanded learning time and opportunities including after school and summer learning opportunities that augment traditional learning; and
  - 4.3.6 Sustainability – utilizing collaboration and data collection to actively seek multiple partnerships within the community and search for additional funding streams to support the continuation of TRiEE activities.
- 4.4 The intention of TRiEE is to reduce risk factors and increase protective factors, which aligns with the Mental Health Services Act (MHSA) Prevention & Early Intervention (PEI) regulations. TRiEE will offer a range of supports and opportunities to achieve the following five goals:
- 4.4.1 Create a trauma- and resilience- classroom;
  - 4.4.2 Increase consistent school attendance;
  - 4.4.3 Increase kindergarten readiness;
  - 4.4.4 Increase family and community engagement; and
  - 4.4.5 Increase social connectedness through referral and linkage.
- 4.5 Deliverables
- 4.5.1 LAUSD will maintain a dedicated team of Psychiatric Social Workers (PSW) at each of the identified TRiEE EEC sites. A Mental Health Coordinator (MHC) will support the implementation of the TRiEE program at each EEC and selected Elementary School overseen by LAUSD.
  - 4.5.2 These school-based positions will liaise with multiple Los Angeles County offices and agencies to: assist the school community in understanding the TRiEE framework; navigate the process of developing a trauma- and resilience informed school; identify resources; strengthen existing relationships; and foster partnerships with County agencies and community-based organizations.
  - 4.5.3 The TRiEE program will continue to staff a dedicated Early Childhood Mental Health Consultation (ECMHC) Line available to all LAUSD families and staff members. The ECMHC Line will operate Monday through Friday from 8:00 AM to 5:00 PM.

#### 4.6 Family and Community Engagement

Services and interventions will revolve around Family and Community Engagement which promotes strong student performance outcomes. The goal of the TRiEE program, utilizing a Community Schools model, is to engage and strengthen families and communities so that they can contribute more effectively to student learning and development. The intent is that through deep engagement and collaboration, students, families, communities and schools will become partners with mutually agreed upon strategies to help create a more nurturing, safe, and respectful school climate.

To promote family and community engagement and collaborative practices, LAUSD TRiEE staff plan to conduct ongoing needs assessments with students, families, and community members to identify services needed. In addition, TRiEE will provide leadership, integrated health, social supports and opportunities for families to build their capacity to support themselves and their children/youth. Effective engagement will increase family and community participation in school activities and decision making which in turn will build parent leadership in the school community.

### 5. **TARGET POPULATION**

5.1 To identify its 25 EECs, LAUSD will use the COVID-19 Statewide Vulnerability and Recovery Index from 2021 and the Student Equity Needs Index (SENI) 2.0 data from 2021 for neighboring elementary schools. In addition, LAUSD identified the schools with the highest number of risk indicators such as foster youth, homeless youth, and low-income families. 19 out of 20 of the current EECs participating in the TRiEE program fall into the High or Highest categories on the COVID-19 Statewide Vulnerability and Recovery Index while more than half of the selected sites have neighboring elementary schools that fall in the category of High or Highest Needs SENI.

5.2 The TRiEE program PSWs will also continue to offer ECMHC, staff professional development, and parent workshops to the 10 designated elementary schools. The TRiEE program will also leverage LAUSD funding targeted for Early Education to hire eight to 10 supplemental PSWs to provide TRiEE services to additional EECs. To further expand the reach of the TRiEE Program, TRiEE Lead PSWs will begin meeting regularly with the six LAUSD Local District Early Education Instructional Directors for ongoing assessment and collaboration. This will ensure the EECs are meeting the needs of the community, regardless of whether or not the EEC is a designated TRiEE site. Additionally, through this more intensive collaboration with the LAUSD leadership, TRiEE staff will have increases presence with the various LAUSD Community of Schools networks in their area.

5.3 This TRiEE program will target the following:

- 5.3.1 Children/youth enrolled in an EEC;
- 5.3.2 Parents/caregivers of the children/youth enrolled in an EEC; and
- 5.3.3 Primarily LAUSD staff/teachers at the EECs. However, TRiEE PSWs will also provide minimal support to LAUSD staff/teachers at 10 of the original elementary schools, focusing on grades K-2.

## **6. TRIEE TRAININGS**

Under this initiative, LAUSD will provide trainings for parents/caregivers and teachers to support the implementation of trauma-informed schools. DMH, in partnership with University of California, Los Angeles (UCLA) Center of Excellence (CoE), will provide LAUSD TRiEE staff with trauma-informed, resilience-informed and professional development trainings.

### **6.1 SEEDS Program**

The SEEDS Program is a Train the Trainer model that provides trauma-informed professional development for early childhood educators and childcare providers. It includes a parallel set of skill-building workshops for parents and caregivers. SEEDS equips early childhood professionals and parents with the knowledge and skills needed to build supportive, nurturing relationships with young children, which in turn allow children to develop emotional regulation, behavioral regulation, and executive functioning skills. SEEDS also focuses on enhancing workforce wellbeing and strengthening home-school connections through enhanced relationships between educators and parents/families.

6.2 UCLA CoE will continue to train the LAUSD TRiEE staff to deliver the curriculum in the classroom when feasible and safe to do so in-person. UCLA CoE will provide on-going consultation, coaching, and technical assistance to ensure fidelity to the model.

6.3 LAUSD will assess and evaluate each EEC to determine any additional workforce development trainings needed to ensure that school communities are trauma-informed and deliver culturally appropriate services. LAUSD, as part of their continued community developments, shall leverage their resources to continue to train staff in trauma- and resilience-informed practices. On-going educational engagement will be delivered to parents/caregivers and others within the school community to cultivate a deeper understanding of trauma and factors that shape young children's social emotional development.

## **7. OUTCOME MEASURES**

7.1 Ongoing assessment and monitoring of the TRiEE program is essential to determine the impact of its services in reducing risk factors and increasing protective factors with participating children/youth and families. TRiEE staff will review the outcome measures collected from teachers and



parent/caregivers, as well as LAUSD reports to evaluate and track program outcomes.

- 7.2 DMH and LAUSD will collaborate on identifying data elements and developing data collection methods to evaluate wellbeing and educational outcomes that are consistent with MHSA Prevention and Early Intervention (PEI) regulations and demonstrate an increase in protective factors and decrease in risk factors for program participants.

7.3 EEC Climate Survey:

LAUSD TRiEE will utilize the approved EEC Climate Survey, also known as the TRiEE Survey. This survey was created in conjunction with DMH+UCLA Public Partnership for Wellbeing (PPfW) and focuses on measuring the added value of having the PSWs provide services on the EEC campuses. This survey allows the school district to document, track, and advance their quality and sustainability improvement goals, and assess trauma responsiveness. The survey will be completed bi-annually by EEC educators, administrators, TRiEE PSWs, and parents and will be distributed through the DMH+UCLA PPfW to all the participating EECs.

## **8. DATA COLLECTION**

- 8.1 LAUSD will cooperate with DMH in the regularly scheduled monitoring of the TRiEE Program, including review of program records, site visits, telephonic conferences, correspondences, and attendance at any meeting where LAUSD adherence to the performance-based criteria will be assessed or evaluated as part of LAUSD's performance of the services described in the Contract. LAUSD will partner with UCLA CoE to collect and analyze raw data on an ongoing basis. Data will be analyzed by LAUSD no less than every six months to complete the required semi-annual and annual reporting requirements of this funding.

8.2 Development of Data Tracking Processes

LAUSD will collaborate with UCLA CoE to develop a process for systematically collecting and reporting required data elements. This data will be emailed to DMH Program Manager to monitor and evaluate the quality of services and program implementation. Should there be a change in federal, State, and/or County policies/regulations, DMH at its sole discretion, may amend these performance-based criteria via an amendment to the Contract.

8.3 Socio-Demographic Data

LAUSD will gather and report client socio-demographic information in accordance with the reporting guidelines identified in the MHSA Regulations. Data will be reported to DMH Program Manager as outlined in the regulations.



#### 8.4 Data Report and Schedule

Data will be gathered and reflected in the required semi-annual and annual reports submitted to DMH:

Data Required	Report Form	Submission Dates
Numbers Served: Students Parents/Families Staff	Non-Identified Raw Data & Aggregate Summary	October 15 <sup>th</sup> January 15 <sup>th</sup> April 15 <sup>th</sup> July 15 <sup>th</sup>
Numbers Linked to: Concrete supports Community resources	Non-Identified Raw Data & Aggregate Summary	October 15 <sup>th</sup> January 15 <sup>th</sup> April 15 <sup>th</sup> July 15 <sup>th</sup>
Demographics	Non-Identified Raw Data & Aggregate Summary	October 15 <sup>th</sup> January 15 <sup>th</sup> April 15 <sup>th</sup> July 15 <sup>th</sup>
Outcome Measures Data	Non-Identified Raw Data & Aggregate Summary	October 15 <sup>th</sup> January 15 <sup>th</sup> April 15 <sup>th</sup> July 15 <sup>th</sup>

#### 8.5 Data Sharing

Data will be collected with individual identifiers by LAUSD. LAUSD will share non-identified raw and aggregate data with DMH. LAUSD will provide data requested under section Performance-Based Criteria.

### 9. **PERFORMANCE REQUIREMENTS SUMMARY**

- 9.1 The TRiEE program will allow the selected EECs to act as hubs for community services that will support and provide opportunities to students and their families. Utilizing PSWs and a MHC as a vehicle to provide trauma-informed trainings to educators, parents, and community partners will also support an understanding of children and youth's behaviors utilizing a trauma-informed lens.

PERFORMANCE REQUIREMENTS SUMMARY CHART		
PERFORMANCE BASED CRITERIA	METHOD OF DATA COLLECTION	PERFORMANCE TARGETS
1. Professional Development	SEEDS Surveys Classroom Observations Workshop Evaluations	Program and school staff will report increased knowledge about trauma-informed practices.

PERFORMANCE REQUIREMENTS SUMMARY CHART		
PERFORMANCE BASED CRITERIA	METHOD OF DATA COLLECTION	PERFORMANCE TARGETS
2. Class Climate Change	Bi-Annual TRiEE Survey	Increase the capacity of EEC teachers to handle classrooms behaviors that result in the reduction of challenging behaviors in the classroom.
3. Increase Attendance	LAUSD Reports	Show a decrease absenteeism for participating students.
4. Increase Kindergarten Readiness	Desired Results Developmental Profile (DRDP)	Increase Kindergarten Readiness for EEC students participating.
5. Community Collaborative Development	LAUSD Reports	Increase number of MOUs / formalized agreements with community partners.
6. Increase social connectedness through referral and linkage	Number Referred/Linked per Type of Service	Parents/caregivers will report increased knowledge about trauma-informed care.  Successful linkages of students and families to concrete supports and community resources (e.g. mental health, health, housing, legal) in the community.
7. Increase in Family Engagement	Number of meetings Sign-in sheets LAUSD Reports	Increase parent / caregiver / family engagement and participation in quarterly school / community activities and/or events.

## 10. BUDGET

10.1 The total amount of funding for the TRiEE implementation in FY 2022-2023 shall be allocated in the amount of **\$3,572,931** as referenced in this SOW Addendum C (Budget).

### 10.2 Staffing

LAUSD will hire staff to meet the needs of the TRiEE program in all the EEC and school sites (Addendum D) participating in this program including a unit to oversee the administration of services and meet the responsibilities of LAUSD as outlined in this SOW. In general, the staff will employ strategies from the classroom to community level to improve the overall child-adult relationship as well as reduce teacher turnover and burn out. They will deliver training sessions, provide classroom observations, and consult with teachers and families to promote a trauma- and resilience-informed environment that will support LAUSD students. The aim of these prevention strategies is not limited to reducing challenging behaviors and improving social skills, but also increasing knowledge of mental health and trauma.

The unit shall be comprised of the staff items listed below:

1. Psychiatric Social Worker (PSW): Trained in Early Childhood Mental Health Consultation (ECMHC) (utilizing The Georgetown Model of ECMHC for School-Based Settings), SEEDS, and/or FOCUS. PSWs will participate in Staff Professional Development and Team meetings and will provide Trauma and Resilience Informed Care Trainings for school personnel. PSWs will be colocated at an EEC or an elementary school, when possible. Description of duties at each location are listed below:

a. Early Education Center: Utilizing the tools from ECMHC and SEEDS, PSWs will educate, train, and coach teachers and parents/caregivers to develop the skills and confidence to address the students' social and emotional needs. PSWs will support the implementation of Sanford Harmony Social Emotional Learning Curriculum in the classroom. They will coordinate wellbeing activities to reduce staff stress and target social and health needs of children and families (i.e. health/wellness fairs). PSWs will also facilitate Articulation Meetings for children transitioning to elementary schools when possible. Articulation Meetings are held between the school staff who are sending the students and the school staff who are receiving the students. These meetings discuss the anticipated needs of students as they move-up from pre-k to kindergarten and are usually for students that will require some type of special accommodation.

Clinically, PSWs will conduct the following: home visits if/when it is safe to do so; in class student observation; and complete behavioral/mental health screening, as needed. PSWs will also provide case management services for children/families that need referral and linkage to additional supports.

b. Elementary Schools (ETK, TK, K, 1<sup>st</sup> and 2<sup>nd</sup> grade): Although EEC sites are the primary focus, TRiEE PSWs will coordinate services with existing mental health professionals on at least ten (10) elementary school campuses (Addendum D), or with another staff

designated by the principal, to offer assessment and support to lower grade elementary classroom teachers and families. PSWs will invite elementary school staff and/or caregivers to participate in scheduled Professional Development and Parent Workshops when feasible.

2. Mental Health Coordinator (MHC): The MHC will oversee TRiEE programming, liaise with District, LACDMH and UCLA partners, supervise TRiEE staff, supervise data collection, and actively seek out partnerships and braided funding streams to sustain continued TRiEE activities.
3. Psychiatric Social Worker (PSW) Program Lead: Designated PSWs will support the other PSWs and the MHC to implement the program in all the EEC sites.
4. Psychiatric Social Worker (PSW) Data Lead: Designated PSW will collect and analyze data, liaise with ULCA CoE Evaluation partners, and support PSWs with data collection.
5. Senior Office Secretary: Will provide staff and technical support, EMHC line staffing, and support with time reporting, budget and purchasing.

## **11. FUNDING & PAYMENT PROVISIONS**

- 11.1 DMH will provide MHSA funding for the TRiEE Program with LAUSD as indicated in this SOW Addendum C (LAUSD Budget). Up to 10% of the Program Budget may be reallocated within services.
- 11.2 Funding is contingent upon an analysis of (a) availability of funds; (b) an acceptable level of performance as evidenced by DMH monitoring of this program; (c) receipt of semi-annual outcome and demographic data collection progress; (d) receipt of quarterly financial reports, including numbers served and socio-demographic data; and (e) receipt of annual TRiEE report (as described in sub-section 8.4).
- 11.3 The LAUSD budget and the Contract may be adjusted according to any change in State funding allocation and the performance of LAUSD.
- 11.4 DMH will reimburse LAUSD the costs for services provided to TRiEE Program participants under the Contract from funds DMH has allocated for TRiEE Program services, contingent upon DMH receipt of MHSA PEI funding from the State of California.
- 11.5 Reimbursement claims must be submitted quarterly on the following dates and submitted to the DMH Program Manager via email on:

**October 15, January 15, April 15, and July 15**

- 11.6 Reimbursement to LAUSD will be on a quarterly basis upon DMH's receipt of the following information from LAUSD:
1. Actual number of students/families/staff served under Universal and Selective Prevention;
  2. Itemized indirect costs; and
  3. Submission of outcome measures that adhere to MHSA regulation requirements. Reimbursement to LAUSD for services provided in the month of June will be billed in accordance with the Auditor-Controller Fiscal Year Closing Instruction deadline with sufficient time for DMH to review and approve the invoice.
- 11.7 In the event of federal, State, and/or County audit exceptions that result in fiscal sanction or claim disallowance, LAUSD and its contractors/subcontractors shall be liable for any sanctions or disallowed costs.
- 11.8 Increases or decreases in workload that result in any increase or decrease in funding may be made upon mutual agreement of the Parties and such changed encumbrance is incorporated herein by reference.

## **12. QUALITY CONTROL**

LAUSD will establish and utilize a comprehensive Quality Control Plan (Plan) to maintain a consistently high level of service throughout the term of the Contract. The Plan shall be submitted to the DMH Program Manager. The plan shall include, but may not be limited to the following:

- 12.1 Method of monitoring to ensure that Contract requirements are being met;
- 12.2 Any record of all inspections conducted by LAUSD;
  - 12.2.1 Any corrective action taken, the time a problem was first identified, a clear description of the problem, and the time elapsed between identification and completed corrective action, shall be provided to the County upon request.

## **13. CONFIDENTIALITY**

- 13.1 LAUSD will ensure that adequate provisions for disposing and keeping DMH participant records confidential are included in contracts and agreements entered into with third parties and other outside agents or agencies. Documents for record and retention purposes in accordance with the Contract are to be maintained for at least a period of five years.
- 13.2 LAUSD will maintain the confidentiality of all records and information, including but not limited to, claims, County records, patient/client records

and information, in accordance with Welfare and Institutions Code (WIC) sections 5328 through 5330, inclusive, and all other applicable County, State, and federal laws, ordinances, rules, regulations, manuals, guidelines, and directives related to confidentiality and privacy. Additionally, LAUSD shall ensure that all data received from participants is appropriately used only for the purpose set forth in this document and/or any subsequent contracts between LAUSD and DMH. This shall be in accordance with WIC sections 17006 and 10850, and California Department of Social Services (CDSS) Manual of Policies and Procedures Chapter 19-000.

- 13.3 LAUSD will not publish, disclose, or permit or cause to be published or disclosed, or include in any way the name, address, or any personal-identifying information concerning the condition or circumstances of any employee, client, applicant, or participant from whom, or about whom, information is obtained. Should a report be published using data provided by LAUSD, DMH retains the right to review, comment on, and edit all such reports prior to distribution.

#### **14. DMH RESPONSIBILITIES**

- 14.1 Designate a DMH Project Manager responsible for the oversight of this program.
- 14.2 Ensure all applicable policies and guidelines for the County's MHSA PEI Plan are provided to LAUSD TRiEE Project Manager.
- 14.3 Monitor LAUSD performance under the Contract utilizing data submitted by LAUSD through semi-annual reports. Reports submitted by LAUSD ensure that services provided and associated costs are valid. Monitoring activities shall address utilization and results of outcome measures, as well as fiscal, administrative, and service delivery reviews.
- 14.4 Evaluate LAUSD performance under the Contract to ensure compliance with the terms and performance standards on no less than a semi-annual basis. Such evaluation will include outcome measures, fiscal, administrative, and service delivery.
- 14.5 Identify deficiencies that may place the performance of the Contract in jeopardy and require that LAUSD initiate corrective action measures.
- 14.6 Retain on file, copies of all notices sent to TRiEE Program that pertain to the Contract.
- 14.7 Develop collaborative meetings and resources to increase service and resource access for program participants.

## **15. LAUSD RESPONSIBILITIES**

- 15.1 Designate a TRiEE Program Manager responsible for oversight of this program.
- 15.2 Designate staff person to serve as the LAUSD TRiEE liaison between DMH and LAUSD for the TRiEE Program.
- 15.3 Coordinate quarterly telephone conferences between DMH and LAUSD TRiEE Project Manager and/or liaison(s) to discuss implementation issues.
- 15.4 Deliver the services of the TRiEE Program as outlined in this SOW to the target population Countywide.
- 15.5 LAUSD will ensure services provided support the outcome and goals established in this SOW.
- 15.6 LAUSD will develop an MOU with any community-based organization that can partner with the school site to provide supports to students and their families.
- 15.7 LAUSD shall ensure sufficient, culturally appropriate outreach and engagement protocols are established to maintain a consistent level of student, family, and community participation.
- 15.8 LAUSD will maintain a referral tracking system to report referrals made and linkage outcomes.
- 15.9 Provide the clients and families with a climate survey instrument (as described in sub-section 7.3) to evaluate the services being delivered. LAUSD shall make this information available to DMH by July 15<sup>th</sup> for the previous fiscal year. LAUSD shall ensure the tool addresses the evaluation of LAUSD's performance.
- 15.10 Gather and report client socio-demographic for TRiEE Program participants in accordance with the reporting guidelines identified in MHSA Regulations. Data shall be reported to DMH as outlined in the regulations.
- 15.11 Keep a record of services that were provided, dates, agendas and sign-in sheets, for all TRiEE program components for at least five years.
- 15.12 Provide claims for expenditures with appropriate back up documentation to DMH for all services.
- 15.13 Comply with State and County MHSA policies and procedures for claiming, invoicing and reporting of data and outcomes for MHSA funded programs.
- 15.14 Ensure that all data collected is entered into the LAUSD identified or developed database templates.



15.15 Be responsible for collecting, managing, and submitting specific demographic, and outcome data semi-annually to DMH to demonstrate client outcomes inclusive of guidelines set forth by DMH and the State. This includes collecting outcome data to assess the LAUSD TRiEE program and make mid-course corrections, as necessary, to ensure the achievement of positive client and program outcomes.

15.16 Submit semi-annual reports, as required by this SOW.

15.17 Provide DMH all correspondence with inquiries regarding the Contract to:

Kanchana Tate, MH Program Manager II  
Department of Mental Health  
510 S. Vermont Avenue, 22<sup>nd</sup> Floor  
Los Angeles, California 90020  
Email address: [KTate@dmh.lacounty.gov](mailto:KTate@dmh.lacounty.gov)

## **16 GREEN INITIATIVES**

16.1 Contractor shall use reasonable efforts to initiate “green” practices for environmental and energy conservation benefits.

16.2 Contractor shall notify DMH Program Manager of Contractor’s new green initiatives prior to Contract commencement.



# LAUSD PARTNERSHIP: BUILDING RESILIENT SCHOOL COMMUNITIES SOW ADDENDUM A

## SEEDS Professional Development Pre-Training Check-In

Please make an ID number with your first initial, last initial, and 4-digit birthday (mmdd).

Your ID:

First Initial Last Initial 4 digit Birthday: mmdd

Please rate how much you agree with the following statements.

	Not at All	A little	Somewhat	A lot
I understand how trauma can affect young children's behaviors, feelings, and thinking.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can recognize when a young child might be affected by trauma.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel prepared to support young children who have been affected by trauma.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If a child in my care pushes or hits tomorrow, I feel confident I could help that child effectively.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If a child in my care has a meltdown or tantrum tomorrow, I feel confident I could help that child effectively.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If a child in my care has a hard time following instructions tomorrow, I feel confident I could help that child effectively.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have a good understanding of how to build relationships with the parents/caregivers of the children in my care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I need new ideas to engage parents/caregivers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working with young children is very rewarding.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I feel prepared to...	Not at All Prepared	A little	Somewhat	Very Prepared
Help children use positive behaviors.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Help children manage their emotions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Help children organize and plan.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Build positive relationships with children's families.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please continue to the next page.



**SEEDS for Family School Readiness**  
Cultivating School-Ready Families and Family-Ready Schools

SEEDS Professional Development  
Pre-Training Check-In

Most professional development trainings I've attended:	Not at All	A little	Somewhat	A lot
Are hands-on	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Are engaging and fun	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Are useful right away (I take the skills I learn and use them in my setting right away.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strengthen my relationships with parents/caregivers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strengthen my relationships with my co-workers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fit the needs of the children and families in this community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Focus on taking better care of myself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

[illegible]

- ☐ Less than 2 years
- ☐ 2 – 5 years
- ☐ 6 – 10 years
- ☐ 11 – 20 years
- ☐ More than 20 years

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**SEEDS for Family School Readiness**  
Cultivating School-Ready Families and Family-Ready Schools

# LAUSD PARTNERSHIP: BUILDING RESILIENT SCHOOL COMMUNITIES SOW ADDENDUM A

## SEEDS Professional Development Post-Training Check-In

Please make an ID number with your first initial, last initial, and 4-digit birthday (mmdd).

Your ID:

                             
First Initial Last Initial 4 digit Birthday: mmdd

Please think about what you have learned during SEEDS. Rate how much you agree with the statements.

Because of SEEDS,	Not at All	A little	Somewhat	A lot
I have a better understanding of how trauma can affect young children's behaviors, feelings, and thinking (executive functioning).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am better at recognizing when a young child might be affected by trauma.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel more prepared to support young children who have been affected by trauma.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If a child in my care pushes or hits, I feel more confident I could help that child effectively.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If a child in my care has a meltdown or tantrum, I feel more confident I could help that child effectively.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If a child in my care has a hard time following instructions, I feel more confident I could help that child effectively.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have a better understanding of how to build relationships with the parents/caregivers of the children in my care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have new ideas on how to engage parents/caregivers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working with young children is more rewarding.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Because of SEEDS, I feel more prepared to...	Not at All	A little	Somewhat	A lot
Help children use positive behaviors.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Help children manage their emotions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Help children organize and plan.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Build positive relationships with children's families.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please continue to the next page.



**SEEDS for Family School Readiness**  
Cultivating School-Ready Families and Family-Ready Schools



# LAUSD PARTNERSHIP: BUILDING RESILIENT SCHOOL COMMUNITIES SOW ADDENDUM A

## SEEDS Professional Development Post-Training Check-In

Please rate how often you have used SEEDS trauma-informed skills in your work since participating in SEEDS.

	Not at All	A little	Somewhat	A lot	I haven't had a chance.
Intentional Observation and Narration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Praise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Redirection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Redo	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotion Coaching in Hot Moments "The 3 Cs"	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Observation and Narration to Promote EF	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Facilitating Parent-Child Play	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What will make it challenging to use what you learned and practiced in SEEDS?

What were your favorite SEEDS activities? (Circle up to five.)



Nature Clay Sculptures to practice Observation and Narration



Listening Walk to practice Praise



Mondrian Art to practice Redirection/Redo



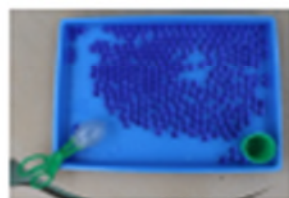
Choose Your Own Adventure to practice Co-Regulating with the 3 Cs



Find the Feelings Clues to practice Emotion Coaching in Cool Moments



Cardboard Ramps to practice Observation and Narration



Water Bead Play to practice Facilitating Parent-Child Play



Seed Starter Art and Stick Starter Art



**SEEDS for Family School Readiness**  
Cultivating School-Ready Families and Family-Ready Schools

# LAUSD PARTNERSHIP: BUILDING RESILIENT SCHOOL COMMUNITIES SOW ADDENDUM A

## SEEDS Professional Development Post-Training Check-In

Please rate how much you agree with the following statements about SEEDS.

SEEDS Sessions:	Not at All	A little	Somewhat	A lot
Were hands-on	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Were engaging and fun	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Were useful right away (I took the skills I learned and used them in my setting right away.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Taught me how to strengthen my relationships with parents/caregivers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strengthened my relationships with my co-workers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fit the needs of the children and families in this community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Focused on taking better care of myself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Taught me about how trauma affects young children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Helped me practice trauma-informed skills for my work with young children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What did you like best about SEEDS?

How satisfied are you with SEEDS?

☐ 1
 ☐ 2
 ☐ 3
 ☐ 4
 ☐ 5
 ☐ 6
 ☐ 7
 ☐ 8
 ☐ 9
 ☐ 10

Extremely Unsatisfied
 Extremely Satisfied

How much did you feel represented and included in SEEDS training materials (like handouts and examples)?

☐ 1
 ☐ 2
 ☐ 3
 ☐ 4
 ☐ 5
 ☐ 6
 ☐ 7
 ☐ 8
 ☐ 9
 ☐ 10

Not at All
 A lot

Please continue to the next page.



LAUSD PARTNERSHIP: BUILDING RESILIENT SCHOOL COMMUNITIES  
SOW ADDENDUM A

SEEDS Professional Development  
Post-Training Check-In

What could be improved about SEEDS?

What is one strength you have built by participating in SEEDS?

*Thank you for taking the time to share your responses.*





LAUSD PARTNERSHIP: BUILDING RESILIENT SCHOOL COMMUNITIES  
SOW ADDENDUM A

SEEDS Professional Development  
Follow-Up

How much did SEEDS improve your relationships with the children in your care?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10  
Not at All A lot

How much did SEEDS improve your relationships with the parents/caregivers of the children in your care?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10  
Not at All A lot

How much did SEEDS improve your relationships with your co-workers?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10  
Not at All A lot

Looking back on SEEDS activities, which ones helped you take better care of yourself?

What have you done at work or at home to take better care of yourself since participating in SEEDS?

Looking back on your own professional growth over the last few months, what do you see as one of your strengths in working with young children?

*Thank you for taking the time to share your responses.*





# DRDP (2015)

A Developmental Continuum from Early Infancy to Kindergarten Entry



**Preschool Comprehensive View**  
for use with preschool-age children



California Department of Education  
Sacramento, 2016



**LAUSD PARTNERSHIP: BUILDING RESILIENT SCHOOL COMMUNITIES  
SOW ADDENDUM C - LAUSD BUDGET**

	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-23	TOTAL
<b>FTE POSITIONS</b>					
<b>Social Service Aides</b>					
Salary	\$29,382	\$29,382	\$29,382		\$88,146
Benefits	\$28,008	\$28,008	\$28,008		\$84,024
<b>Total 1 FTE</b>	<b>\$57,390</b>	<b>\$57,390</b>	<b>\$57,390</b>		<b>\$172,170</b>
<b>Student/Family Navigators</b>					
Salary	\$48,990	\$48,990	\$48,990		\$146,970
Benefits	\$34,125	\$34,125	\$34,125		\$102,375
Total S&B	\$83,115	\$83,115	\$83,115		\$249,245
<b>Total 4 FTE</b>	<b>\$332,460</b>	<b>\$332,460</b>	<b>\$332,460</b>		<b>\$997,380</b>
<b>MH Consultant</b>					
Salary	\$105,834	\$105,834	\$105,834		\$317,502
Benefits	\$41,713	\$41,713	\$41,713		\$125,139
<b>Total 1 FTE</b>	<b>\$147,547</b>	<b>\$147,547</b>	<b>\$147,547</b>		<b>\$442,641</b>
<b>MH Coordinator</b>					
Salary	\$130,043	\$130,043	\$130,043	\$136,545	
Benefits	\$46,102	\$46,102	\$46,102	\$48,672	
<b>Total 1 FTE</b>	<b>\$176,145</b>	<b>\$176,145</b>	<b>\$176,145</b>	<b>\$185,217</b>	<b>\$713,652</b>
<b>PSW</b>					
Salary	\$92,265	\$92,265	\$92,265	\$101,896	
Benefits	\$38,781	\$38,781	\$38,781	\$42,020	
Total S&B	\$131,046	\$131,046	\$131,046	\$143,916	
<b>Total 15 FTE</b>	<b>\$1,965,690</b>	<b>\$1,965,690</b>	<b>\$1,965,690</b>		<b>\$5,897,070</b>
<b>Total 17 FTE</b>				<b>\$2,446,572</b>	<b>\$2,446,572</b>
<b>PSW (Lead)</b>					
Salary	\$99,955	\$99,955	\$99,955	\$107,890	
Benefits	\$40,440	\$40,440	\$40,440	\$42,554	
Total S&B	\$140,395	\$140,395	\$140,395	\$150,444	
<b>Total 2 FTE</b>	<b>\$280,790</b>	<b>\$280,790</b>	<b>\$280,790</b>	<b>\$300,888</b>	<b>\$1,143,258</b>
<b>PSW (Data Lead-E)</b>					
Salary				\$107,890	
Benefits				\$42,554	
<b>Total 1 FTE</b>				<b>\$150,444</b>	<b>\$150,444</b>
<b>Senior Secretary</b>					
Salary				\$56,301	
Benefits				\$37,480	
<b>Total 1 FTE</b>				<b>\$93,781</b>	<b>\$93,781</b>
<b>TOTAL PROGRAM EXPENSES</b>	<b>\$2,960,022</b>	<b>\$2,960,022</b>	<b>\$2,960,022</b>	<b>\$3,178,261</b>	<b>\$12,058,327</b>
<b>OTHER EXPENSES</b>					
Summer Pay: Training, Engagement, and Outreach	\$140,000	\$140,000	\$140,000	\$62,000	\$482,000
Mileage @ 100 p/mo p/FTE	\$2,400	\$2,400	\$2,400	\$3,000	\$10,200
Cell Phone @ \$100 p/FTE	\$4,200	\$4,200	\$4,200	\$14,000	\$26,600
Computer @ \$1800 p/FTE	\$43,200	\$43,200	\$43,200	\$40,000	\$169,600
General Supplies @ \$500 p/FTE	\$12,000	\$12,000	\$12,000	\$24,000	\$60,000
Program Expenses @ \$500 p/FTE	\$12,000	\$12,000	\$12,000	\$24,000	\$60,000
EBP – SEEDS Materials	\$4,800	\$4,800	\$4,800	\$4,800	\$19,200
Training @ \$2000 p/FTE	\$48,000	\$48,000	\$48,000	\$48,000	\$192,000
Evaluation	\$30,000	\$30,000	\$30,000		\$90,000
Welligent @ \$100 p/FTE	\$2,400	\$2,400	\$2,400		\$7,200
Office Supplies	\$2,500	\$2,500	\$2,500	\$11,000	\$18,500
<b>Total Other Expenses</b>	<b>\$301,500</b>	<b>\$301,500</b>	<b>\$301,500</b>	<b>\$230,800</b>	<b>\$1,135,300</b>
<b>Total Operational Cost</b>	<b>\$3,261,522</b>	<b>\$3,261,522</b>	<b>\$3,261,522</b>	<b>\$3,407,702</b>	<b>\$13,192,268</b>
<b>Indirect Costs/Admin Support</b>	<b>\$69,711</b>	<b>\$69,711</b>	<b>\$69,711</b>	<b>\$165,229</b>	<b>\$374,362</b>
<b>TOTAL PROPOSAL</b>	<b>\$3,331,233</b>	<b>\$3,331,233</b>	<b>\$3,331,233</b>	<b>\$3,572,931</b>	<b>\$13,566,630</b>

**LAUSD PARTNERSHIP: BUILDING RESILIENT SCHOOL COMMUNITIES**  
**SOW ADDENDUM D**  
**LAUSD EEC & ELEMENTARY SITES**

Supervisory Districts	Service Area	Name of EEC	Zip Code	Address	City
1	4	Dacotah EEC	90023	3142 Lydia Dr.	Los Angeles
1	7	Jaime Escalante EEC	90201	7221 S. Atlantic Ave.	Cudahy
2	6	28th St. EEC	90011	747 E. 28th St.	Los Angeles
2	4	Alexandria EEC	90004	4304 Rosewood Ave.	Los Angeles
2	4	Hobart EEC	90006	982 S. Serrano Ave.	Los Angeles
2	5	Marina EEC	90066	4908 Westlawn Ave.	Los Angeles
2	4	Wilton Place EEC	90005	4030 w. Leeward Ave.	Los Angeles
2	6	112th St EEC	90059	1319 E 112th St.	Los Angeles
2	6	75th St. EEC	90003	242 W 75th St.	Los Angeles
2	6	Normandie Ave. EEC90037	90037	4407 Raymond Ave.	Los Angeles
2	6	Hooper Ave. EEC	90011	1224 E. 52nd St.	Los Angeles
2	6	Holmes Ave. EEC	90058	1810 E 52nd St.	Los Angeles
2	6	Locke EEC	90061	320 E. 111th St.	Los Angeles
3	2	Fair Ave. EEC	91606	11300 Kittridge St.	North Hollywood
3	2	Telfair Ave. EEC	91331	10915 Telfair Ave.	Pacoima
3	2	Lemay St. EEC	91406	17553 Lemay St.	Lake Balboa
3	2	Gledhill St. EEC	91343	16058 Gledhill St.	North Hills
3	2	Vanalden EEC	91335	6212 Vanalden Ave.	Reseda
4	8	Cabrillo EEC	90731	741 W Eighth St.	San Pedro
5	2	Pinewood EEC	91042	7051 Valmont St.	Tujunga
Supervisory Districts	Service Area	Name of Elementary School	Zip Code	Address	City
1	7	Ellen Ochoa Learning Center	90201	5027 Live Oak St.	Cudahy
1	7	Elizabeth Learning Center	90201	4811 Elizabeth St.	Cudahy
2	6	109th St. ES	90059	10915 S Mc Kinley Ave.	Los Angeles
2	6	112th St. ES	90059	1265 E 112th St.	Los Angeles
3	2	Newcastle ES	91335	6520 Newcastle Ave.	Reseda
3	2	Shirley Ave ES	91335	19452 Hart St.	Reseda
4	8	Bandini ES	90731	425 N Bandini St.	San Pedro
4	8	Cabrillo ES	90731	732 S Cabrillo Ave.	San Pedro
5	2	Pinewood ES	91042	10111 Silverton Ave.	Tujunga
5	2	Sunland ES	901040	8350 Hillrose St.	Sunland