



LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
 550 S. VERMONT AVE., LOS ANGELES, CA 90020 HTTP://DMH.LACOUNTY.GOV



MARVIN J. SOUTHARD, D.S.W.
 Director
 ROBIN KAY, Ph.D.,
 Chief Deputy Director
 RODERICK SHANER, M.D.
 Medical Director

ADOPTED

BOARD OF SUPERVISORS
 COUNTY OF LOS ANGELES

28 May 5, 2015

May 05, 2015

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

Patrick Ogawa
 PATRICK OGAWA
 ACTING EXECUTIVE OFFICER

Dear Supervisors:

APPROVAL TO AMEND AN EXISTING DEPARTMENT OF MENTAL HEALTH LEGAL ENTITY AGREEMENT WITH UNITED AMERICAN INDIAN INVOLVEMENT, INC., FOR THE PROVISION OF PREVENTION AND EARLY INTERVENTION SERVICES TO THE AMERICAN INDIAN POPULATION FOR FISCAL YEAR 2014-15 (ALL SUPERVISORIAL DISTRICTS) (3 VOTES)

SUBJECT

Request approval to amend an existing Department of Mental Health Legal Entity Agreement with United American Indian Involvement, Inc., to add funding for the provision of Prevention and Early Intervention services to the American Indian community through a prevention-focused Promising Practice.

IT IS RECOMMENDED THAT THE BOARD:

1. Approve and authorize the Director of Mental Health (Director), or his designee, to prepare, sign, and execute an amendment, substantially similar to Attachment I (Amendment), to the existing Department of Mental Health (DMH) Legal Entity Agreement MH121231 (Agreement) with United American Indian Involvement, Inc. (UAI), to provide life skills and increase suicide prevention skills for American Indian children, Transition Age Youth (TAY) high school students, and their families. The Amendment will be effective upon your Board's approval and will add \$7,800 for Fiscal Year (FY) 2014-15, increasing the Maximum Contract Amount (MCA) to \$2,967,700.
2. Delegate authority to the Director, or his designee, to prepare, sign, and execute future amendments to this Agreement and establish as a new MCA, the aggregate of the original Agreement and all amendments, and to further amend this LE Agreement as necessary provided

that: 1) the County's total payments to this Contractor do not exceed an increase of 20 percent from the last Board-approved MCA; 2) any such increase will be used to provide additional services or to reflect program and/or policy changes; 3) your Board has appropriated sufficient funds for all changes; 4) approval of County Counsel is obtained prior to such amendment; 5) County and Contractor may, by written amendment, reduce programs or services and revise the MCA, provided that any amendment which reduces programs or services will be consistent with the principles agreed to in DMH's stakeholders' process; and 6) the Director notifies your Board and the Interim Chief Executive Officer of Agreement changes in writing within 30 days after execution of each amendment.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Approval of the recommended actions will allow DMH to amend its Agreement with UAll, a current mental health service provider, to enable UAll to provide life skills and increase suicide prevention skills for American Indian children (ages 12-15) and TAY (ages 16-19) high school students. These services will be provided countywide. This Amendment will add a new service exhibit to UAll's existing Agreement in order for UAll to implement the American Indian Life Skills Prevention Program, which is a Promising Practice.

DMH used a Statement of Eligibility and Interest (SEI) process to identify contractors on its the Mental Health Services Act (MHSA) Master Agreement list interested in providing Prevention and Early Intervention (PEI) services to the American Indian community through a prevention-focused Promising Practice. UAll was the only agency to respond favorably, expressing an interest in the program and meeting all eligibility requirements for the American Indian Life Skills Prevention Program that DMH is implementing.

Implementation of Strategic Plan Goals

The recommended actions support the County's Strategic Plan Goal 3, Integrated Services Delivery.

FISCAL IMPACT/FINANCING

The total cost for this Amendment is fully funded by State MHSA revenue in the amount of \$7,800, increasing the MCA to \$2,967,700 for FY 2014-15. Funding for this Amendment is included in DMH's FY 2014-15 Adopted Budget. Funding for future years will be incorporated into the budget through DMH's annual budget request process.

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

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

On August 27, 2009, the Mental Health Services Oversight and Accountability Commission approved the County of Los Angeles DMH's MHSA PEI Plan for Los Angeles County. The PEI Plan included services to underserved populations, including the deaf/hearing impaired and American Indian population.

The PEI stakeholders selected American Indian Life Skills, a Promising Practice designed to build life skills and increase suicide prevention skills for American Indian high school students, as a program to be implemented for American Indians countywide. Research shows that the rate of completed suicides among American Indians in this age group is three times that of overall U.S. youth in the

same age range (37.4 vs. 11.4 per 100,000). The American Indian Life Skills curriculum is tailored to American Indian norms, values, beliefs, and attitudes. It is designed to build self-esteem, identify emotions and stress, increase communication and problem solving skills, and recognize and eliminate self-destructive behavior (including substance use). Using a group therapy approach, this curriculum is delivered universally to American Indian children and TAY, typically in a school or community-based setting, over approximately 30 weeks. The curriculum provides American Indian children and TAY information on suicide and suicide intervention training and helps them set personal and community goals. Each lesson in the curriculum contains standard skills training and techniques about the helpful or harmful effects of certain behaviors. Target skills are modeled and rehearsed for skills acquisition and feedback is offered for skills refinement.

Founded in 1974, UAI is a private not-for-profit agency with its headquarters office located at 1125 West Sixth Street, Suite 103, Los Angeles, CA 90017, First Supervisorial District, that provides a wide array of services ranging from public health case management, mental health services, traditional medicine, domestic violence, alcohol and substance abuse services, social services, youth programs, workforce development services, and research and training. Over the 36 years of service to the community, UAI has grown from a small community-based organization providing social services to the American Indians/Alaska Natives living in the Skid Row area to a multidisciplinary comprehensive service center addressing the multiple needs of American Indians/Alaska Natives countywide, providing UAI with intimate knowledge of the community and their needs, which is essential to the program support and success of the American Indian Life Skills Program.

The Amendment format (Attachment I) has been approved as to form by County Counsel. DMH clinical and administrative staff will administer and monitor the Agreement to evaluate the program to ensure that quality services are being provided to clients and ensure that Agreement provisions and Departmental policies are followed.

In accordance with your Board Policy Manual, Section 5.120, Authority to Approve Increases to Board Approved Contract amounts requirements, DMH notified your Board on September 25, 2014 (Attachment II), identifying and justifying the need for requested percentage increase exceeding 10 percent.

CONTRACTING PROCESS

On May 9, 2013, DMH issued a MHA PEI SEI #DMH050913B1-Phase I to identify agencies on its MHA Master Agreement list interested in implementing the American Indian Life Skills Program throughout Los Angeles County. A total of 12 agencies responded. Of the 12 agencies, two agencies met DMH's established eligibility criteria to provide the American Indian Life Skills services. On June 4, 2013, DMH issued SEI #DMH050913B1-Phase II to confirm and verify the two agencies' eligibility. UAI was the only agency DMH could verify that they met all of DMH's specified eligibility requirements to provide the American Indian Life Skills services. The DMH Executive Management Team reviewed the outcomes of the selection process and recommended funding UAI.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

The recommended actions will allow UAI to provide the prevention services through the implementation of the American Indian Life Skills Program to the American Indian community throughout Los Angeles County that is expected to enhance and strengthen DMH's mental health services to the American Indian children, TAY, and their families being served.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Mg Southard". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

MARVIN J. SOUTHARD, D.S.W.

Director of Mental Health

MJS:DM:LB:jn

Enclosures

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

CONTRACT NO. MH121231

AMENDMENT NO. 2

THIS AMENDMENT is made and entered into this ___ day of _____, 2015, by and between the COUNTY OF LOS ANGELES (hereafter "County") and United American Indian Involvement, Inc. (hereafter "Contractor").

WHEREAS, County and Contractor have entered into a written Agreement, dated July 1, 2014, identified as County Agreement No. MH121231, as subsequently amended (hereafter collectively "Agreement"); and

WHEREAS, for Fiscal Year (FY) 2014-15, County and Contractor intend to amend Agreement only as described hereunder; and

WHEREAS, County intends to award to Contractor funding for the provision of Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) services to provide life skills and increase suicide prevention skills for American Indian children (ages 12-15), transition-age youth (TAY) (ages 16-19) high school students and their families. These services will be provided countywide; and

WHEREAS, County and Contractor intend to amend Agreement to **increase** MHSA PEI (Non Medi-Cal) Funded Program funds in the amount of \$7,800; and

WHEREAS, for FY 2014-15, the Maximum Contract Amount (MCA) is **increased** by \$7,800 and the revised MCA is \$2,967,700.

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

1. For FY 2014-15, MHSA PEI (Non Medi-Cal) Funded Program funds are increased by \$7,800. For FY 2014-15, the MCA is increased by \$7,800; the revised MCA is \$2,967,700.
2. Financial Exhibit A (FINANCIAL PROVISIONS), Attachment II, Paragraph C (Reimbursement for Initial Period) shall be deleted in its entirety and the following substituted therefor:

“C. REIMBURSEMENT FOR INITIAL PERIOD

(1) The MCA for the Initial Period of this Agreement as described in Paragraph 1 (TERM) of the Legal Entity Agreement shall not exceed TWO MILLION NINE HUNDRED SIXTY-SEVEN THOUSAND SEVEN HUNDRED DOLLARS (\$2,967,700) and shall consist of Funded Programs as shown on the Financial Summary.”
3. Attachment III, Financial Summary – 1 for FY 2014-15, shall be deleted in its entirety and replaced with Attachment III, Financial Summary - 2 for FY 2014-15 attached hereto and incorporated herein by reference. All references in Agreement to Attachment III, Financial Summary – 1 for FY 2014-15, shall be deemed amended to state “Attachment III, Financial Summary - 2 for FY 2014-15.”
4. Attachment IV, Service Delivery Site Exhibit, shall be deleted in its entirety and replaced with revised Attachment IV, Service Delivery Exhibit - 2 attached hereto and incorporated herein by reference. All references in Agreement to Attachment IV, Service Delivery Site Exhibit, shall be deemed amended to state “Attachment IV, Service Delivery Site Exhibit - 2.”

5. Attachment V, Service Exhibits (Listing), shall be deleted in its entirety and replaced with revised Attachment V, Service Exhibits (Listing) - 2, attached hereto and incorporated herein by reference. All references in Agreement to Attachment V, Service Exhibits (Listing), shall be deemed amended to state "Attachment V, Service Exhibits - 2."
6. Service Exhibit No. 503-A – AMERICAN INDIAN LIFE SKILLS shall be added to Agreement attached hereto and incorporated herein by reference.
7. Contractor shall provide services in accordance with Contractor's FY 2012-13 Negotiation Package for this Agreement and any addenda thereto approved in writing by the County's Director of Mental Health or his designee.
8. Except as provided in this Amendment, all other terms and conditions of the Agreement shall remain in full force and effect.

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

COUNTY OF LOS ANGELES

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

United American Indian Involvement, Inc.
CONTRACTOR

By _____

Name David L. Rambeau

Title Executive Director
(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM:
OFFICE OF THE COUNTY COUNSEL

APPROVED AS TO CONTRACT
ADMINISTRATION:

DEPARTMENT OF MENTAL HEALTH

By _____
Chief, Contracts Development
and Administration Division

SERVICE EXHIBIT _____

AMERICAN INDIAN LIFE SKILLS

Provided under the
Mental Health Services Act
Prevention and Early Intervention Plan

United American Indian Involvement, Inc.

MODE OF SERVICE 45

1. OVERVIEW

The Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) Plan differs from traditional mental health approaches because of the focus on prevention and mental health promotion as well as the target populations. Prevention approaches in mental health involve reducing risk factors or stressors, building protective factors and skills, and increasing support. Mental health promotion approaches increase positive cognitive, social, and emotional development and encourage a state of well-being that allow individuals, families, or communities to function well in the face of changing and sometimes challenging circumstances. Prevention approaches may target the general public or a whole population group that has not been identified on the basis of individual risks; this is defined as universal prevention. Alternatively, selective prevention approaches target individuals, families, or a subgroup of the population whose risk of developing mental health symptoms is significantly higher than average.

In addition to changing the approaches to mental health, another goal of the Los Angeles County MHSA PEI Plan is to reach underserved populations. For these reasons, American Indian Life Skills (AILS) is an important evidence-based program. AILS is a Promising Practice (PP) designed to build life skills and increase suicide prevention skills for American Indian youth. Research shows that the rate of completed suicides among American Indians in this age group is three times that of overall U.S. youth in the same age range (37.4 vs. 11.4 per 100,000). The AILS curriculum is tailored to American Indian norms, values, beliefs, and attitudes. It is designed to build self-esteem, identify emotions and stress, increase communication and problem solving skills, and recognize and eliminate self-destructive behavior (including substance use).

2. PERSONS TO BE SERVED

Contractor shall target its AILS services towards American Indian children (12 to 15 years) and transition-age youth (TAY) (16 to 19 years) populations at risk of suicide and school failure. This program is intended as an early prevention for

these American Indian adolescents who are exposed to ecological factors such as historical trauma, the stress to acculturate within mainstream U.S. society and pervasive poverty; social factors such as family dysfunction and violence in the community; interpersonal problems such as poor coping abilities and individual factors such as depression, anxiety, substance abuse and psychiatric disorders act as moderators of suicidal ideation and behavior.

3. SERVICE DELIVERY SITE

Services may be delivered in a school or community-based setting.

4. DELIVERABLES

4.1 Educational Workshops: Contractor shall conduct 5 groups with 56 sessions of AILS per group throughout the year (12 months). The length of the session will be 2 hours that will be held two times per week at the rate of \$60 per hour (Life skills 56 sessions x 2 hours per session = 112 total hours per group x 5 groups per year = 560 total hours at the rate of \$60/hour = \$33,600). The educational workshops will be for American Indian youth ages 12-18, with 5 to 10 participants per group. Contractor will partner with other agencies who serve the American Indian youth, during the school year or as an afterschool program. Group workshops include presenting information on the effects of stress, recognizing different behaviors, modeling targeted skills, guiding participants through skill-building exercises, and providing feedback to promote skill acquisition.

The AILS curriculum consists of psycho-education, coping skills enhancement, and lifestyle changing activities. It focuses upon key classes of stressful episodes including risk-taking behaviors associated with substance abuse, sexual activity, bullying, and suicide attempts. This intervention incorporates experiences relevant to Native American adolescent life into seven major units that focus upon life skills as follows: (1) building self-esteem; (2) identifying emotions and stress; (3) increasing communication and problem-solving skills; (4) recognizing and eliminating self-destructive behavior; (5) advancing knowledge about the variability in rates of suicide across tribes and risk factors for Native adolescent suicidal behavior; (6) practicing how to ask for help for themselves or for their friends when suicide becomes an issue; and (7) engaging in individual and collectivistic goal-setting. AILS emphasizes approach coping and strives to enhance youth awareness of their personal power to make a difference in other's lives. The AILS intervention employs a social skills training approach whereby interventionists follow the format of information giving, modeling, behavior rehearsal, and feedback for skills development. The AILS training manual contains 56 lessons which can be delivered over a 30-week period of time. Services are to be provided Countywide.

- 4.2 **Outreach:** Contractor shall provide information about AILS services in its outreach efforts to potential participants. Contractor will outreach 4 hours/week = 208 hours x \$60 = \$12,480.

Contractor shall contact American Indian schools, Indian Boys and Girls Clubs, church camps, tribal juvenile services, etc., to introduce AILS. Contractor shall apprise the residents of Los Angeles County, through various public media, of the Contractor's capability to provide the AILS program.

- 4.3 **Service Documentation:** Contractor shall maintain appropriate documentation of the participant sign-in-sheet(s) (SIS) must contain at a minimum the date and time, location, facilitator, discussion topic, names and signatures of the participants.

5. STAFF TRAINING

Contractor staff must be sufficiently trained in the AILS prior to providing services to the American Indian adolescents.

6. PERFORMANCE-BASED CRITERIA

- 6.1 DMH shall evaluate Contractor on five (5) Performance-based Criteria that shall measure the Contractor's performance related to operational measures that are indicative of quality program administration. These criteria are consistent with the MHSA and the PEI Plan. These measures assess the agency's ability to provide the required services and to monitor the quality of the services.
- 6.2 Contractor shall collaborate with DMH to provide processes for systematically evaluating 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 these Performance-based Criteria via a Contract Amendment.
- 6.3 Contractor shall cooperate with DMH in the regularly scheduled monitoring of the program, including review of agency and program records, site visits, telephonic conferences, correspondence, and attendance at contractor meetings where the Contractor's adherence to the performance-based criteria will be evaluated.
- 6.4 The Performance-based Criteria for AILS are as follows:

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PERFORMANCE-BASED CRITERIA	METHOD OF DATA COLLECTION	PERFORMANCE TARGETS
1. Agency has required multidisciplinary and multi-lingual team staffing.	Negotiation package, staff roster, List of Treatment Staff Language Capability	Agency hires staff as stipulated annually resulting in an increase of culturally and linguistically appropriate staff
2. Complete and accurate records are maintained that track referrals, enrollment, attendance, staff hours, usage, expenditure, as well as specific demographic, diagnostic, and outcome data for program participants	Review of monthly utilization reports for accuracy and completeness	Agency maintains an accurate and complete database for AILS, including all relevant back-up documentation, (e.g., referral forms, SIS, curriculum outlines, handouts) and required reports are submitted to DMH on a monthly basis.
3. Workshop topics are in line with the AILS list of educational and social skills training.	Review of sign-in sheets, curriculum outlines, and handouts.	Agency conducts weekly educational workshops on a majority of the 56 AILS topics.
4. Workshop education protocols used are consistent with the AILS Program requirements.	Verification of staff training and utilization of training and treatment manuals.	100% of the youth receive educational training consistent with the AILS Program.
5. Agency has completed appropriate outcome surveys, as determined by DMH.	Agency completes appropriate outcome surveys in formats and schedules designated by DMH.	Outcome surveys are given at intake (prior to first session) and upon discharge.
6. Agency conducts 5 groups of 2-hour AILS educational workshops throughout the year for a total of 56 sessions for each group and 5-15 participants in each session.	SIS, claiming on IS/IBHIS or other electronic billing system.	A total of 280 educational workshops are conducted with American Indian youth through Los Angeles County.
7. Agency has conducted outreach on an average of 4 hours per week during the year.	Agency bills outreach services on the IS/IBHIS or other electronic billing system.	Agency conducts 208 hours of outreach on an annual basis.



LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
550 S. VERMONT AVE., LOS ANGELES, CA 90020 HTTP://DMH.LACOUNTY.GOV



Attachment II

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

ROBIN KAY, Ph.D.
Chief Deputy Director

RODERICK SHANER, M.D.
Medical Director

September 25, 2014

TO: Each Supervisor
FROM: *Robin Kay for*
Marvin J. Southard, D.S.W.
Director

SUBJECT: **REQUEST TO INCREASE DELEGATED AUTHORITY PERCENTAGE
IN THE BOARD LETTER TO AMEND LEGAL ENTITY AGREEMENT
WITH UNITED AMERICAN INDIAN INVOLVEMENT, INC.**

This memorandum is to comply with Board Policy Manual, Section 5.120, Authority to Approve Increases to Board Approved Contract Amounts. The Policy mandates that any department requesting a percentage increase in delegated authority exceeding ten percent of the total contract amount must provide a detailed justification and advance written notice to your Board, with a copy to the Chief Executive Officer, at least two weeks prior to the Board Meeting at which the proposed contract is to be presented.

The Department of Mental Health (DMH) requests an additional ten percent for a total of twenty percent delegated authority to increase the Maximum Contract Amount of the Legal Entity Agreement with United American Indian Involvement, Inc. (UAI), which is being amended to implement the American Indian Life Skills (AILS) Prevention Program to American Indian children (ages 13 to 15) and Transition Age Youth (ages 16 to 19) throughout the Los Angeles County. The DMH determined that UAI was the only agency that exhibited capacity and met all components of the AILS Prevention Program after the completion of a Statement of Eligibility Interest process.

AILS is a Promising Practice with a curriculum-based group therapy program designed to build life skills and increase suicide prevention skills for American Indian youth. The curriculum is tailored to American Indian norms, values, beliefs, and attitudes. Using a group therapy approach, the AILS curriculum is delivered universally to American Indian youth, typically in a school or community-based setting. It provides American Indian youth information on suicide and suicide prevention training and helps them set personal and community goals.

This authority will allow the DMH greater capacity to amend this Agreement for new funding streams and programs/services and implement such programs/services in a timely and expeditious manner. Therefore, in most instances, where speed and response time are of key importance, the objectives to maximize, prioritize, and

Each Supervisor
September 25, 2014
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increase access to services will more effectively meet the County's mission "To Enrich Lives Through Effective and Caring Service."

Should there be a need to exceed the twenty percent delegated authority, DMH will return to your Board with a request for authority to amend the Legal Entity Agreement accordingly.

If you have any questions or concerns, please contact me, or your staff may contact Richard Kushi, Chief, Contracts Development and Administration Division, at (213) 738-4684.

MJS:DM:LB:mn

c: Health Deputies
Executive Officer, Board of Supervisors
Chief Executive Officer
County Counsel
Robin Kay, Ph.D.
Deputy Directors
District Chiefs
Kimberly Nall
Richard Kushi