

# **Board Agenda Item 39**

DATE: May 17, 2022

TO: Board of Supervisors

SUBMITTED BY: Susan Holt, Director, Department of Behavioral Health

SUBJECT: Agreement with Centro La Familia Advocacy Services, Inc. for Consumer & Family

**Advocacy Services** 

## **RECOMMENDED ACTION(S):**

Approve and authorize the Chairman to execute an Agreement with Centro La Familia Advocacy Services, Inc., for consumer/family advocacy services, effective July 1, 2022, not to exceed five consecutive years, which includes a one-year base contract and four optional one-year extensions, total not to exceed \$567,840.

Approval of the recommended action will allow the Department of Behavioral Health to provide culturally sensitive consumer/family advocacy services through Centro La Familia Advocacy Services (CLFAS) for persons experiencing first break of mental illness or early onset of a crisis due to serious mental illness or serious emotional disturbance. CFLAS was selected following a Request for Proposals (RFP) for consumer/family advocacy services. The recommended agreement will be financed with Mental Health Services Act - Consumer Services and Support (MHSA-CSS) funds, with no increase in Net County Cost. This item is countywide.

## ALTERNATIVE ACTION(S):

There is no viable alternative action. Non-approval would leave underserved and unserved target individuals without advocacy, outreach and education services needed to empower them, improve their well-being, and help them navigate the mental health system of care. These individuals have been documented in mental health studies and through United States Census analysis to have low levels of access and/or use of mental health services. Many individuals will not seek mental health services through traditional methods and need education, guidance, and service linkages provided by consumer/family advocacy services to decrease escalation of a consumer's mental illness symptoms and referrals to hospital emergency departments.

## FISCAL IMPACT:

There is no increase in Net County Cost associated with the recommended action. The annual maximum cost is \$113,568; \$567,840 for the term. Services are funded by MHSA - CSS funds. Sufficient appropriations and estimated revenues are included in the Department's Org 5630 FY 2022-23 Recommended Budget and in future budget requests for the duration of the term. Total expenditures will be determined by actual services provided.

## **DISCUSSION:**

Under the provisions of MHSA, county mental health departments receive funding to provide services to underserved and unserved individuals who may be experiencing a first break of mental illness or early onset

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of a crisis due to serious mental illness or serious emotional disturbance onset. These populations include, but are not limited to, rural and urban communities and individuals of all ages and ethnicities including Latinos, African Americans, and Southeast Asians. Consumer/family advocacy services were initiated through the consumer/stakeholder process and approved by the State Department of Health Care Services (DHCS) as part of the MHSA Three-Year Plan. Funding provides services that include community based:

- outreach;
- · suicide prevention, mental wellness, and anti-stigma education; and,
- · system navigation services; and linkages to services.

Services are delivered in the community the consumer and their family frequent, such as at home, in places of worship, in a community center and/or schools. Services embody:

- community collaboration;
- · cultural and linguistic competency;
- · individual/family driven values;
- a wellness/recovery focus;
- integrated services; and,
- · performance outcomes based.

The consumer/family advocacy services are instrumental in helping consumers and their families navigate mental health systems of care to access services they may not be aware of, are unable to access, and/or are reluctant to seek out. Through these services, the consumer learns to depend less on costlier crisis services such as emergency departments and minimize or avoid more severe interventions such as substance abuse, hospitalization, or incarcerations.

Consumer/family advocacy services are available for consumers and their families experiencing a first break of mental illness or early onset of a crisis due to serious mental illness or serious emotional disturbance. Advocates:

- · provide mental illness and recovery education to the family and community;
- assist the family and consumer in navigating the mental health systems of care available in the community;
- help build resiliency and de-escalation techniques in the family in an effort to prevent future mental health crisis that requires involuntary psychiatric assessment; and,
- coordinate and collaborate with other community providers, including the County, to ensure staff/providers and community members are aware of, and able to access appropriate and available services.

On December 1, 2021, RFP No. 22-027 was released by the Department and the Internal Services Department - Purchasing Division for Consumer/Family Advocacy Services, effective July 1, 2022. The RFP closed on January 5, 2022, and resulted in one response. The bid was reviewed by an evaluation committee comprised of three members: a Department of Behavioral Health Principal Staff Analyst; a Department of Behavioral Health Fiscal Analyst, and an Internal Services Department Staff Analyst. The evaluation committee determined the response met the requirements for services sought and unanimously recommended the agreement to be awarded to CLFAS. CLFAS will perform activities to reach, identify, and engage unserved individuals and communities in the mental health system and reduce disparities.

CLFAS has provided consumer/family advocacy services under contract with the County since July 1, 2011, with satisfactory performance outcomes. Outcomes reported for FY 2020-21 include 8,077 services rendered at a cost of \$12 per consumer/family member. Services were provided in urban and rural areas of the County, including, but not limited to, Mendota, Riverdale, Sanger and Kerman.

Upon approval by your Board, the agreement would be effective July 1, 2022, through June 30, 2023, with an

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option for four additional one-year terms dependent upon satisfactory performance outcomes and available funding. The base contact is one year due to the Department of Health Care Services (DHCS) development of a framework that encompasses broad-based delivery system, program and payment reform across the Medi-Cal program. The California Advancing and Innovating Medi-Cal (CalAIM) proposal recognizes the opportunity to provide non-clinical interventions focused on a whole-person care approach that targets social determinants of health and reduces health disparities and inequities. CalAIM includes system, program and payment reforms that take a population health, person-centered approach with a goal of improving outcomes. DHCS is seeking to integrate delivery systems and align funding, data reporting, quality and infrastructure to mobilize and incentivize toward common goals. CalAIM implementation will begin as early as January 1, 2022, with a gradual phased-in approach. Because of CalAIM implementation, this agreement may be subject to amendments to incorporate necessary changes.

### OTHER REVIEWING AGENCIES:

The Behavioral Health Board was made aware of the recommended Agreement during the May 2022 meeting.

## REFERENCE MATERIAL:

BAI# 41, June 22, 2021 BAI# 26, December 13, 2016 BAI# 39, May 24, 2016 BAI# 42, May 24, 2011

### ATTACHMENTS INCLUDED AND/OR ON FILE:

On file with Clerk - Agreement with CLFAS

#### CAO ANALYST:

Sonia M. De La Rosa