COUNTY OF LOS ANGELES

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

SUSAN KERR
Chief Deputy Director

RODERICK SHANER, M.D.
Medical Director

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

BOARD OF SUPERVISORS
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DEPARTMENT OF MENTAL HEALTH

http://dmh.lacounty.info

Reply To: (213) 738-4601
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ADOPTED
BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

29 FEB 15 2005

Violet Varona-Lukens
VIOLET VARONA-LUKENS
EXECUTIVE OFFICER

February 3, 2005

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:

AUTHORIZATION TO IMPLEMENT THE HOUSING INITIATIVES PLAN, APPROVAL OF AMENDMENTS TO DEPARTMENT OF MENTAL HEALTH LEGAL ENTITY AGREEMENTS, APPROVAL OF A CONSULTANT SERVICES AGREEMENT AMENDMENT AND APPROVAL OF REQUEST FOR APPROPRIATION ADJUSTMENT FOR FISCAL YEAR 2004-2005 (ALL SUPERVISORIAL DISTRICTS) (4 VOTES)

IT IS RECOMMENDEDED THAT YOUR BOARD:

1. Authorize the Director of Mental Health or his designee to implement a Housing Initiatives Plan to accelerate movement away from long-term institutional care and facilitate expeditious and safe assistance to individuals to live in appropriately less restrictive and more supportive community-based settings, as described in Attachment I, effective upon Board approval.

2. Authorize the Department of Mental Health (DMH) to utilize one-time funding from the Sales Tax Realignment Trust Account, in the amount of $2,300,000, as described in Attachment II, to fund the cost of the Housing Initiatives Plan.

3. Authorize DMH to fill 2.0 Full Time Equivalent (FTE) positions, as detailed on Attachment III, in excess of what is provided for in DMH's staffing ordinance, pursuant to Section 6.06.020 of the County Code, subject to allocation by the Department of Human Resources (DHR).

4. Delegate authority to the Director of Mental Health or his designee to prepare, sign, and execute amendments, substantially similar to Attachment IV, with four (4) DMH Legal Entity (LE) Agreements listed in Attachment V, for the

provision of supportive services and operating costs for supported permanent housing projects and to administer rental assistance funds, effective upon Board approval.

5. Delegate authority to the Director of Mental Health to prepare, sign, and execute an Amendment, substantially similar to Attachment VI to the California Institute of Mental Health (CIMH) Consultant Services Agreement to increase the Total Compensation Amount (TCA) by $20,000, from $410,000 to $430,000, for Fiscal Year (FY) 2004-2005. The Amendment will be effective upon Board approval. The Amendment increase, fully funded by one-time only Sales Tax Realignment Trust Account, will be used to provide for the services of a housing specialist.

6. Delegate authority to the Director of Mental Health or his designee to prepare, sign, and execute future amendments to the Agreements and establish as a new Maximum Contract Amount (MCA) the aggregate of the original Agreement and all amendments through and including these amendments, provided that: 1) the County's total payments to Contractor under each Agreement for each fiscal year shall not exceed an increase of 20 percent from the applicable revised MCA; 2) any such increase shall be used to provide additional services or to reflect program and/or policy changes; 3) the Board of Supervisors has appropriated sufficient funds for all changes; 4) approval of County Counsel and the CAO or their designee is obtained prior to any such Amendment; 5) the parties may, by written Amendment, mutually agree to reduce programs or services without reference to the 20 percent limitation; and 6) the Director of Mental Health shall notify the Board of Supervisors of Agreement changes in writing within 30 days after execution of each Amendment.

7. Approve an Appropriation Adjustment (Attachment VII) in the amount of $758,000 for FY 2004-2005, fully funded by one-time Sales Tax Realignment funds, to fund Salaries and Employee Benefits (S&EB), Services and Supplies (S&S), and Other Charges necessary to implement the Housing Initiatives Plan.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTIONS

The purpose of the requested actions is to implement the Housing Initiatives Plan in accordance with the DMH Stakeholders Recommendations provided to your Board on October 19, 2004. This Plan addresses the increasing emphasis in recent years on the importance of reducing the utilization of long-term institutional care, and promoting and building recovery-focused services that support people in community living, as evidenced by the passage of the federal Olmstead Act, the enactment of the Statewide

Assembly Bill 34/2034/334, and, more recently, the passage of the Mental Health Services Act. The Housing Initiatives Plan consists of three (3) components: Augmentation of the Interim Funding (IF) Program, Countywide Rental Assistance, and Supported Permanent Housing.

Augmentation of the IF Program will provide increased capacity for residential placement of clients currently in State Hospitals and Institutions for Mental Disease (IMD) who are discharge ready but pending the receipt of income such as Social Security Income benefits.

The Countywide Rental Assistance will address the needs of clients with sufficient income to live in independent or supported housing that are unable to do so due to the lack of funds for move-in costs and the difficulty of locating low-income housing units. Many of these clients have been homeless or have unnecessarily remained for years in Adult Residential Facilities, i.e., licensed board and care facilities, due to the lack of this type of assistance.

The Supported Permanent Housing funds will address a major impediment to the development of supported permanent housing: the lack of funding for the associated operating and supportive services costs. The Supported Permanent Housing funds will be utilized for this purpose for projects coming on-line within the next 12 months and to leverage funding for the development of additional supported housing in FY 2005-2006. The intent is to increase the stock of supported housing, serve the most difficult to house, and leverage other funding resources.

Implementation of Strategic Plan Goals

The recommended Board actions are consistent with the principles of the Countywide Strategic Plan Organizational Goal No. 1, "Service Excellence," Goal No. 3, "Organizational Effectiveness," and Programmatic Goal No. 7, "Health and Mental Health." These actions will promote the accessibility of essential services to clients and enhance workforce and service delivery excellence.

FISCAL IMPACT/FINANCING

There is no impact on net County cost.

For FY 2004-2005, the cost of the Housing Initiatives Plan is $758,000. This amount includes the pro-rated cost of two (2) FTE positions and funding for supported permanent housing operating and supportive services costs, Countywide Rental

Assistance, and an increase in DMH's IF Program. The Housing Initiatives Plan will be fully financed by $758,000 of one-time Sales Tax Realignment funds, which is included in the Sales Tax Realignment Trust Account. Budget details are provided in Attachment II and position details are provided in Attachment III.

For FY 2004-2005, the Request for Appropriation Adjustment in the amount of $758,000 provides DMH with the spending authority required for implementation of the Housing Initiatives Plan. The adjustment provides spending authority to fund the necessary increases of $40,000 in S&EB, $518,000 in S&S, and $200,000 in Other Charges.

DMH will carry forward the remaining $1,542,000 of the $2,300,000 one-time Sales Tax Realignment funds into FY 2005-2006 towards the cost of the housing specialists, the rental assistance program, the supported housing projects, and the increase in DMH's IF Program. For FY 2005-2006, the two (2) Medical Case Worker positions will be partially funded by $67,000 of these one-time funds. The remaining $40,000 will be requested during the FY 2005-2006 annual budget process. The Housing Initiative Plan, with the exception of the housing specialists, will not continue beyond FY 2005-2006 unless additional funding becomes available for rental assistance and the Interim Funding components of the plan.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Interim Funding Program

Los Angeles County has operated the IF Program since 1985 to facilitate the placement of clients from hospitals and long-term institutional settings into the community when financial resources were not readily available. Over the past several years, innovative programs, such as Assertive Community Treatment and Assembly Bill 2034, have increased the Department's ability to assist clients to move from long-term institutional care into community residential settings. Not only is the quality of clients' lives improved through placement into the community - the Department also realizes tremendous cost savings by placing clients on the IF Program, rather than maintaining them in more costly institutional settings, when they no longer require that level of care.

As of July 1, 2004, 164 clients were being supported by the IF Program. However, the $1.6 million currently available for FY 2004-2005 will support only 138 clients at any one time. This plan will increase the IF Program by $200,000 in FY 2004-2005 and $700,000 in FY 2005-2006 in order to fund an average of 151 clients for FY 2004-2005 and an average of 193 clients for FY 2005-2006, which will accommodate additional persons ready for transfer from long-term institutional settings and County hospitals.

Countywide Rental Assistance

Both the AB 2034 Program and a Supportive Housing Initiative Act (SHIA) Grant, the Housing Options Made Easy (HOME) Program, have demonstrated that designating funds for rental deposits and basic furnishings, as well as for staff to develop a pool of landlords with available low-income housing, enhances clients' ability to overcome these obstacles to obtaining permanent housing and living independently. The SHIA grant, which ended on June 30, 2004, provided DMH housing specialists and rental assistance funds in Service Areas 4, 5, and 8. The Housing Initiatives Plan builds upon the success of that grant program, by funding DMH housing specialists in two (2) additional Service Areas, 2 and 6, and Countywide assistance with move-in costs. These rental assistance funds will be administered by two (2) contractors, National Mental Health Association of Greater Los Angeles and Portals, Inc., that have had previous experience administering the SHIA grant rental assistance funds.

Supported Housing

Under the Housing Initiatives Plan, $1 million dollars will be used to provide supportive services and operating costs for two (2) supported permanent housing projects currently under development, and to leverage available development funds for housing projects coming on-line within the next 12 months. Of this amount, $450,000 will provide bridge funding for Ocean Park Community Center's (OPCC) Safe Haven project. In 2001, OPCC was selected by The California Endowment to implement the Safe Haven Model. However, development of the OPCC Safe Haven project was delayed pending the identification and purchase of a suitable site. In order to utilize the California Endowment grant funds, which are available only through February 15, 2005, OPCC has operated a temporary Safe Haven program since July 2004. Through this program, the agency provides outreach to chronically and visibly homeless individuals and overnight residence and assistance with accessing mental health, medica, and substance abuse services. Bridge funding is required to continue this program through December 2005, at which time it is anticipated construction of the full Safe Haven program will be completed and HUD McKinney-Vento funding will be available for the supportive services and operational costs of the program.

An additional $195,000 of the Supported Permanent Housing funds will be placed into an Escrow Account for the Gateways Hospital and Mental Health Center's Single Room Occupancy (SRO) project, due to come on-line in March 2005. These monies will fund supportive services for three (3) years and fulfill the required match for the project's Shelter Plus Care Certificates. These funds, which equate to $65,000 per year for

supportive services, will leverage $364,600 annually in HUD McKinney-Vento funding for rental subsidies, operations, and services for the SRO project.

Of the remaining $355,000, $20,000 will fund consultation services through the California Institute for Mental Health (CIMH) Services and $335,000 will be allocated to new supported permanent housing development projects in FY 2005-2006.

The proposed actions have been reviewed and approved by County Counsel, the CAO, DHR, and DMH's Fiscal and Program Administrations.

CONTRACTING PROCESS

One of the requested actions is to augment the amount of Sales Tax Realignment funding in two (2) DMH LE Agreements to administer rental assistance funds. In order to use these one-time funds, expeditious approval is requested to contract with the only two (2) DMH providers, National Mental Health Association of Greater Los Angeles and Portals, Inc., which have previous experience and an existing infrastructure to administer these funds. Another requested action is to augment the amount of Sales Tax Realignment funding in the CIMH Consultant Services Agreement for consultation on housing development. These actions can be accomplished through delegated authority amendments to the existing contracts.

As part of the process of allocating the supported permanent housing funding, DMH, in consultation with representatives of the Corporation for Supportive Housing and Shelter Partnership (consultant to the Special Needs Housing Alliance), ascertained that there are only two (2) permanent supported permanent housing projects currently under development that require funding within this fiscal year. Accordingly, both the OPCC Safe Haven and the Gateways SRO projects are proposed for sole source contracts. DMH has met the County's requirement for advance notification of intent to negotiate a sole source contract of $250,000 or greater in its notification letter to your Board dated January 12, 2005.

IMPACT ON CURRENT SERVICES

The proposed actions will reduce the utilization of costly long-term institutional care for clients that no longer require that level of care and facilitate the transition of those clients into community living. The actions will also increase access to permanent housing and the availability of supported housing, thus fostering clients' integration into the community and recovery from mental illness.

CONCLUSION

The Department of Mental Health will need one (1) copy of the adopted Board's action. It is requested that the Executive Officer of the Board notifies the Department of Mental Health's Contract Development and Administration Division at (213) 738-4684 when these documents are available.

Respectfully submitted,

Marvin J. Southard, D.S.W.
Director of Mental Health

MJS:JA:TB:egr

Attachments (7)

c: Chief Administrative Officer
County Counsel
Auditor-Controller
Chairperson, Mental Health Commission

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ATTACHMENT I

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
HOUSING INITIATIVES PLAN
PROPOSED USE OF ONE-TIME SALES TAX REALIGNMENT TRUST ACCOUNT

DESCRIPTION	FY 2004-05	FY 2005-06	TOTAL ALLOCATION
Interim Funding Program	$ 200,000	$ 700,000	$ 900,000
Countywide Rental Assistance			
Deposits and Furnishings	$ 110,000	$ 183,000	$ 293,000
Housing Specialists	40,000	67,000	107,000
Total Residential Assistance	$ 150,000	$ 250,000	$ 400,000
Supported Permanent Housing	$ 408,000	$ 592,000	$ 1,000,000
Total Countywide Residential Assistance	**$ 758,000**	**$ 1,542,000**	**$ 2,300,000**
TOTAL PROPOSED BUDGET	**$ 758,000**	**$ 1,542,000**	**$ 2,300,000**

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
HOUSING INITIATIVES PLAN
FISCAL YEAR 2004-2005

DESCRIPTION	FISCAL YEAR 2004-2005							
	COUNTYWIDE RENTAL ASSISTANCE		SUPPORTED HOUSING		INTERIM FUNDING		TOTAL	
	FTE	Budget	FTE	Budget	FTE	Budget	FTE	Budget
PROGRAM COST								
SALARIES & EMPLOYEE BENEFITS [1]								
Regular Pay	2.0	$ 40,306	0.0	$ -	0.0	$ -	2.0	$ 40,306
Rounding		(306)		-		-		(306)
Total Salaries and Employee Benefits		$ 40,000		$ -		$ -		$ 40,000
SERVICES AND SUPPLIES								
Contract Services								
Ocean Park Community Center - Safe Haven Project [1]		$ -		$ 192,857		$ -		$ 192,857
Gateways Single Room Occupancy Project [2]		-		195,000		-		195,000
California Institute for Mental Health Services - Housing Consultant [2]		-		20,000		-		20,000
National Mental Health of Greater Los Angeles [1]		54,938		-		-		54,938
Portals, Inc. [1]		54,938		-		-		54,938
Unallocated Reserve for FY 05-06		-		-		-		-
Rounding		124		143		-		267
Total Services and Supplies		$ 110,000		$ 408,000		$ -		$ 518,000
OTHER CHARGES								
Interim Funding Program		$ -		$ -		$ 200,000		$ 200,000
Rounding		-		-		-		-
Total Other Charges		$ -		$ -		$ 200,000		$ 200,000
TOTAL PROGRAM COST		**$ 150,000**		**$ 408,000**		**$ 200,000**		**$ 758,000**
AVAILABLE FUNDS AND REVENUES								
One-Time Realignment Funds		$ 150,000		$ 408,000		$ 200,000		$ 758,000
TOTAL AVAILABLE FUNDS/REVENUE		**$ 150,000**		**$ 408,000**		**$ 200,000**		**$ 758,000**
NET COUNTY COST		$ -		$ -		$ -		$ -

[1] Allocations based on a February 15, 2005 start date.

[2] Entire 12 month allocation will be distributed during FY 2004-2005.

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
HOUSING INITIATIVES PLANS
FISCAL YEAR 2005-06

DESCRIPTION	FISCAL YEAR 2005-06							
	COUNTYWIDE RENTAL ASSISTANCE		SUPPORTED HOUSING		INTERIM FUNDING		TOTAL	
	FTE	Budget	FTE	Budget	FTE	Budget	FTE	Budget
PROGRAM COST								
SALARIES & EMPLOYEE BENEFITS								
Regular Pay	2.0	$ 107,483	0.0	$ -	0.0	$ -	2.0	$ 107,483
Rounding		(483)		-		-		(483)
Total Salaries and Employee Benefits		$ 107,000		$ -		$ -		$ 107,000
SERVICES AND SUPPLIES								
Contract Services								
Ocean Park Community Center - Safe Haven Project		$ -		$ 257,143		$ -		$ 257,143
Gateways Single Room Occupancy Project		-		-		-		-
California Institute for Mental Health Services - Housing Consultant		-		-		-		-
National Mental Health of Greater Los Angeles		91,563		-		-		91,563
Portals, Inc.		91,563		-		-		91,563
Unallocated Reserve for FY 05-06		-		335,000		-		335,000
Rounding		(126)		(143)				(269)
Total Services and Supplies		$ 183,000		$ 592,000		$ -		$ 775,000
OTHER CHARGES								
Interim Funding Program		$ -		$ -		$ 700,000		$ 700,000
Rounding		-		-		-		-
Total Other Charges		$ -		$ -		$ 700,000		$ 700,000
TOTAL PROGRAM COST		**$ 290,000**		**$ 592,000**		**$ 700,000**		**$ 1,582,000**
AVAILABLE FUNDS AND REVENUES								
One-Time Realignment Funds		$ 250,000		$ 592,000		$ 700,000		$ 1,542,000
TOTAL AVAILABLE FUNDS/REVENUE		**$ 250,000**		**$ 592,000**		**$ 700,000**		**$ 1,542,000**
FUNDING TO BE INDENTIFIED DURING THE FY 05-06 PROCESS		**$ 40,000***		**$ -**		**$ -**		**$ 40,000**

* This on-going cost for two housing specialists will be funded by Realignment funds included in the FY 2005-06 Budget Request.

COUNTY OF LOS ANGLES - DEPARTMENT OF MENTAL HEALTH
HOUSING INITIATIVES PLAN
STAFFING DETAIL

Item No.	Item Sub	Position	Ordinance	Months	FTE
COUNTYWIDE RENTAL ASSISTANCE - Housing Specialist					
09002	A	MEDICAL CASE WORKER II	2.0	24	2.0
		TOTALS	**2.0**	**24**	**2.0**

ATTACHMENT IV

CONTRACT NO. DMH-_____

AMENDMENT NO. _____

THIS AMENDMENT is made and entered into this ___ day of _____, 2005, by and between the COUNTY OF LOS ANGELES (hereafter "County") and _____ _____ (hereafter "Contractor").

WHEREAS, County and Contractor have entered into a written Agreement, dated, identified as County Agreement No. DMH-_____, and any subsequent amendments (hereafter collectively "Agreement"); and

WHEREAS, for Fiscal Years 2004-2005 and 2005-2006 only, County and Contractor intend to amend Agreement only as described hereunder; and

WHEREAS, for Fiscal Year 2004-2005, County and Contractor intend to amend Agreement to add one-time only Sales Tax Realignment funds in the amount of $_____ to the Maximum Contract Amount (MCA) to provide services for the life support needs of older adult mental health clients; and

WHEREAS, for Fiscal Year 2005-2006, County and Contractor intend to amend Agreement to add one-time only Sales Tax Realignment funds in the amount of $_____ to the Maximum Contract Amount (MCA) to provide services for the life support needs of older adult mental health clients; and

WHEREAS, County and Contractor intend to amend Agreement to add the Service Exhibit (CLIENT SUPPORTIVE SERVICES); and

WHEREAS, for Fiscal Year 2004-2005 only, the revised Maximum Contract Amount will be $_____; and

WHEREAS, for Fiscal Year 2005-2006 only, the revised Maximum Contract Amount will be $_____.

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

1. Paragraph 4 (FINANCIAL PROVISIONS), Subparagraphs B (Reimbursement For Initial Period) and C (Reimbursement If Agreement Is Automatically Renewed) shall be deleted in their entirety and the following substituted therefor:

"B. Reimbursement For Initial Period: The Maximum Contract Amount for the Initial Period of this Agreement as described in Paragraph 1 (TERM) shall not exceed _____ DOLLARS ($_____) and shall consist of County, State, and/or Federal funds as shown on the Financial Summary. This Maximum Contract Amount includes Cash Flow Advance which is repayable through cash and/or appropriate SFC units and/or actual and allowable costs as authorized by other provisions of this Agreement. Notwithstanding any other provision of this Agreement, in no event shall County pay Contractor more than this Maximum Contract Amount for Contractor's performance hereunder during the Initial Period. Furthermore, Contractor shall inform County when up to 75 percent (75%) of the Maximum Contract Amount has been incurred. Contractor shall send such notice to those persons and addresses which are set forth in Paragraph 58 (NOTICES).

C. Reimbursement If Agreement Is Automatically Renewed:

(1) Reimbursement For First Automatic Renewal Period: The Maximum Contract Amount for the First Automatic Renewal Period of this Agreement as

described in Paragraph 1 (TERM) shall not exceed _____

_____

DOLLARS ($_____) and shall consist of County, State, and/or Federal funds as shown on the Financial Summary. This Maximum Contract Amount includes the Cash Flow Advance which is repayable through cash and/or appropriate SFC units and/or actual and allowable costs as authorized by other provisions of this Agreement. Notwithstanding any other provision of this Agreement, in no event shall County pay Contractor more than this Maximum Contract Amount for Contractor's performance hereunder during the First Automatic Renewal Period. Furthermore, Contractor shall inform County when up to 75 percent (75%) of the Maximum Contract Amount has been incurred. Contractor shall send such notice to those persons and addresses which are set forth in Paragraph 58 (NOTICES)."

2. Financial Summary - _____ for Fiscal Year 2004-2005 shall be deleted in its entirety and replaced with Financial Summary - _____ for Fiscal Year 2004-2005, attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary – ____ for Fiscal Year 2004-2005 shall be deemed amended to state "Financial Summary - ____ for Fiscal Year 2004-2005."

3. Financial Summary - _____ for Fiscal Year 2005-2006 shall be deleted in its entirety and replaced with Financial Summary - _____ for Fiscal Year 2005-2006, attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary - ____ for Fiscal Year 2005-2006 shall be

deemed amended to state "Financial Summary - ____ for Fiscal Year 2005-2006." **(If applicable)**

4. Financial Summary - _____ for Fiscal Year 2006-2007 shall be deleted in its entirety and replaced with Financial Summary - _____ for Fiscal Year 2006-2007, attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary - ____ for Fiscal Year 2006-2007 shall be deemed amended to state "Financial Summary - ____ for Fiscal Year 2006-2007." **(If applicable)**

5. The Service Delivery Site Exhibit (ATTACHMENT III) shall be deleted in its entirety and replaced with Service Delivery Site Exhibit - ___.

6. The listing of Service Exhibits (ATTACHMENT IV) shall be deleted in its entirety and replaced with Service Exhibits -_____, attached hereto and incorporated herein by reference.

7. Service Exhibit, "CLIENT SUPPORTIVE SERVICES," shall be added to this Agreement.

8. Contractor shall provide services in accordance with the Contractor's Fiscal Year _____ Negotiation Package for this Agreement and any addenda thereto approved in writing by Director.

9. 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 in its behalf by its duly authorized officer, the day, month, and year first above written.

COUNTY OF LOS ANGELES

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

_____
CONTRACTOR

By _____

Name _____

Title _____
(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

Housing Initiative Plan.Amend.

Contractor Name:
Legal Entity Number:
Agreement Period:
Fiscal Year: 2004-2005

The Financial Summary

Categories		Maximum Funding Source Totals	
A. Allocations:			**CR or NR**
County General Fund (CGF)	1. EPSDT Baseline CGF Match		
	2. SB 90 (AB 3632) Baseline CGF Match	$ -	
	3. EPSDT Growth CGF Match		
	4. Healthy Families CGF Match	$ -	
	5. Non EPSDT - FFP CGF Match		
	6. STOP CGF Match	$ -	
	Sub-Total Categorical CGF	$ -	
	7. Other CGF		
	8. Latino Access Flex Funding		
	9. Countywide Client Activity Fund		
	TOTAL CGF (1 through 7)		**CR**
CalWORKs			**CR**
PATH			**CR**
AB 2034 - Categorically Restricted for Local Match			**CR**
AB 2034 - Non Match			**CR**
SAMHSA/AB 3015			**CR**
	TOTAL ALLOCATIONS (A)		
B. Pass Through:			
FFP:	1. Healthy Families FFP	$ -	
	2. Non EPSDT - FFP		
	a. Medi-Cal Administrative Activities (MAA) FFP		
	3. EPSDT - FFP		
	TOTAL FFP		
EPSDT - State General Fund (SGF)			
SB 90/IDEA (AB 3632)			
	TOTAL PASS THROUGH (B)		
	Maximum Contract Amount/Net Program Budget (A+B):		**$ -**
C. Third Party:			
Medicare		$ -	
Patient Fees		$ -	
Insurance		$ -	
Other		$ -	
	TOTAL THIRD PARTY (C)	$ -	
	Gross Program Budget (A+B+C):		**$ -**

Footnotes Section:

Contractor Name:
Legal Entity Number:
Agreement Period:
Fiscal Year: 2004-2005

DMH Legal Entity Agreement
Attachment II Page 2 of 2
The Rate Summary

MENTAL HEALTH SERVICES		Mode of Service	Service Function Code (SFC) Range	Provisional Rates Negotiated NR	Provisional Rates Cost Reimb CR	Provider Numbers
A. 24 - HOUR SERVICES:						
Hospital Inpatient		05	10 - 18			
Hospital Administrative Day		05	19			
Psychiatric Health Facility (PHF)		05	20 - 29			
SNF Intensive		05	30 -34			
IMD/STP Basic (No Patch)	Beds 1-59	05	35			
	Beds 60 & over	05	35			
Patch for IMD		05	36 - 39			
Mentally Ill Offenders	Indigent	05	36 - 39			
	Regular	05	36 - 39			
IMD - Like		05	36 - 39			
IMD (W/Patch) Sub-Acute (60 days)		05	38			
Adult Crisis Residential		05	40 - 49			
Residential Other		05	60 - 64			
Adult Residential		05	65 - 79			
Semi - Supervised Living		05	80 - 84			
Independent Living		05	85 - 89			
MH Rehab Centers		05	90 - 94			
B. DAY SERVICES:						
Vocational Services		10	30 - 39			
Socialization		10	40 - 49			
SNF Augmentation		10	60 - 69			
Day Treatment Intensive: Half Day		10	81-84			
Day Treatment Intensive: Full Day		10	85-89			
Day Rehabilitative : Half Day		10	91-94			
Day Rehabilitative : Full Day		10	95-99			
C. OUTPATIENT SERVICES:						
Targeted Case Management Services (TCMS), formerly Case Management Brokerage		15	01 - 09			
Mental Health Services		15	10 - 19 /30-59			
Therapeutic Behavioral Services (TBS)		15	58			
Medication Support		15	60 - 69			
Crisis Intervention		15	70 - 79			
D. OUTREACH SERVICES:						
Mental Health Promotion		45	10 - 19			
Community Client Services		45	20 - 29			
E. SUPPORT SERVICES:						
Life Support/Board & Care		60	40 - 49			
Case Management Support		60	60 - 69			
Flexible Funding (Cost Reimbursement)		60	64			
F. Medi-Cal Administrative Activities (MAA):						
MAA		55	01-35			

Contractor Name:
Legal Entity Number:
Agreement Period:
Fiscal Year:

Categories		Maximum Funding Source Totals	
A. Allocations:			**CR or NR**
County General Fund (CGF)	1. EPSDT Baseline CGF Match		
	2. SB 90 (AB 3632) Baseline CGF Match		
	3. EPSDT Growth CGF Match		
	4. Healthy Families CGF Match		
	5. Non EPSDT - FFP CGF Match		
	6. STOP CGF Match		
	Sub-Total Categorical CGF		
	7. Other CGF		
	8. Latino Access Ftex Funding		
	9. Countywide Client Activity Fund		
	TOTAL CGF (1 through 7)		**CR**
CalWORKs			**CR**
PATH			**CR**
AB 2034 - Categorically Restricted for Local Match			**CR**
AB 2034 - Non Match			**CR**
SAMHSA/AB 3015			**CR**
	TOTAL ALLOCATIONS (A)		
B. Pass Through:			
FFP:	1. Healthy Families FFP		
	2. Non EPSDT - FFP		
	a. Medi-Cal Administrative Activities (MAA) FFP		
	3. EPSDT - FFP		
	TOTAL FFP		
EPSDT - State General Fund (SGF)			
SB 90/IDEA (AB 3632)		$ -	
	TOTAL PASS THROUGH (B)	$ -	
	Maximum Contract Amount/Net Program Budget (A+B):		**$ -**
C. Third Party:			
Medicare		$ -	
Patient Fees		$ -	
Insurance		$ -	
Other		$ -	
	TOTAL THIRD PARTY (C)	$ -	
	Gross Program Budget (A+B+C):		**$ -**

Footnotes Section:

Contractor Name:
Legal Entity Number:
Agreement Period:
Fiscal Year:

DMH Legal Entity Agreement
Attachment II Page 2 of 2
The Rate Summary

MENTAL HEALTH SERVICES		Mode of Service	Service Function Code (SFC) Range	Provisional Rates Negotiated NR	Provisional Rates Cost Reimb CR	Provider Numbers
A. 24 - HOUR SERVICES :						
Hospital Inpatient		05	10 - 18			
Hospital Administrative Day		05	19			
Psychiatric Health Facility (PHF)		05	20 - 29			
SNF Intensive		05	30 -34			
IMD/STP Basic (No Patch)	Beds 1-59	05	35			
	Beds 60 & over	05	35			
Patch for IMD		05	36 - 39			
Mentally Ill Offenders	Indigent	05	36 - 39			
	Regular	05	36 - 39			
IMD - Like		05	36 - 39			
IMD (W/Patch) Sub-Acute (60 days)		05	38			
Adult Crisis Residential		05	40 - 49			
Residential Other		05	60 - 64			
Adult Residential		05	65 - 79			
Semi - Supervised Living		05	80 - 84			
Independent Living		05	85 - 89			
MH Rehab Centers		05	90 - 94			
B. DAY SERVICES :						
Vocational Services		10	30 - 39			
Socialization		10	40 - 49			
SNF Augmentation		10	60 - 69			
Day Treatment Intensive: Half Day		10	81-84			
Day Treatment Intensive: Full Day		10	85-89			
Day Rehabilitative : Half Day		10	91-94			
Day Rehabilitative : Full Day		10	95-99			
C. OUTPATIENT SERVICES :						
Targeted Case Management Services (TCMS), formerly Case Management Brokerage		15	01 - 09		$1.62	7065, 7204, 7352, 7018, 7422, 7212
Mental Health Services		15	10 - 19 /30-59		$2.09	7065, 7204, 7352, 7018, 7422, 7212
Therapeutic Behavioral Services (TBS)		15	58			
Medication Support		15	60 - 69		$3.86	7065, 7204, 7352, 7018, 7422, 7212
Crisis Intervention		15	70 - 79		$3.11	7065, 7204, 7352, 7018, 7422, 7212
D. OUTREACH SERVICES :						
Mental Health Promotion		45	10 - 19		$45.00	7384, 7065, 7018, 7212, 7204
Community Client Services		45	20 - 29		$45.00	7384, 7065, 7018, 7212, 7204
E. SUPPORT SERVICES :						
Life Support/Board & Care		60	40 - 49			
Case Management Support		60	60 - 69			
Flexible Funding (Cost Reimbursement)		60	64			7018, 7204, 7212
F. Medi-Cal Administrative Activities (MAA):						
MAA		55	01-35			

Contractor Name:
Legal Entity Number:
Agreement Period:
Fiscal Year:

The Financial Summary

Categories		Maximum Funding Source Totals	
A. Allocations:			CR or NR
County General Fund (CGF)	1. EPSDT Baseline CGF Match		
	2. SB 90 (AB 3632) Baseline CGF Match		
	3. EPSDT Growth CGF Match		
	4. Healthy Families CGF Match		
	5. Non EPSDT - FFP CGF Match		
	6. STOP CGF Match		
	Sub-Total Categorical CGF		
	7. Other CGF		
	8. Latino Access Flex Funding		
	9. Countywide Client Activity Fund		
	TOTAL CGF (1 through 7)		CR
CalWORKs			CR
PATH			CR
AB 2034 - Categorically Restricted for Local Match			CR
AB 2034 - Non Match			CR
SAMHSA/AB 3015			CR
	TOTAL ALLOCATIONS (A)		
B. Pass Through:			
FFP:	1. Healthy Families FFP		
	2. Non EPSDT - FFP		
	a. Medi-Cal Administrative Activities (MAA) FFP		
	3. EPSDT - FFP		
	TOTAL FFP		
EPSDT - State General Fund (SGF)			
SB 90/IDEA (AB 3632)			
	TOTAL PASS THROUGH (B)		
	Maximum Contract Amount/Net Program Budget (A+B):		$ -
C. Third Party:			
Medicare		$ -	
Patient Fees		$ -	
Insurance		$ -	
Other		$ -	
	TOTAL THIRD PARTY (C)	$ -	
	Gross Program Budget (A+B+C):		$ -

Footnotes Section:

Contractor Name:
Legal Entity Number:
Agreement Period:
Fiscal Year:

The Rate Summary

MENTAL HEALTH SERVICES		Mode of Service	Service Function Code (SFC) Range	Provisional Rates Negotiated NR	Provisional Rates Cost Reimb CR	Provider Numbers
A. 24-HOUR SERVICES						
Hospital Inpatient		05	10 - 18			
Hospital Administrative Day		05	19			
Psychiatric Health Facility (PHF)		05	20 - 29			
SNF Intensive		05	30 -34			
IMD/STP Basic (No Patch)	Beds 1-59	05	35			
	Beds 60 & over	05	35			
Patch for IMD		05	36 - 39			
Mentally Ill Offenders	Indigent	05	36 - 39			
	Regular	05	36 - 39			
IMD - Like		05	36 - 39			
IMD (W/Patch) Sub-Acute (60 days)		05	38			
Adult Crisis Residential		05	40 - 49			
Residential Other		05	60 - 64			
Adult Residential		05	65 - 79			
Semi - Supervised Living		05	80 - 84			
Independent Living		05	85 - 89			
MH Rehab Centers		05	90 - 94			
B. DAY SERVICES						
Vocational Services		10	30 - 39			
Socialization		10	40 - 49			
SNF Augmentation		10	60 - 69			
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Day Treatment Intensive: Full Day		10	85-89			
Day Rehabilitative : Half Day		10	91-94			
Day Rehabilitative : Full Day		10	95-99			
C. OUTPATIENT SERVICES						
Targeted Case Management Services (TCMS), formerly Case Management Brokerage		15	01 - 09			
Mental Health Services		15	10 - 19 /30-59			
Therapeutic Behavioral Services (TBS)		15	58			
Medication Support		15	60 - 69			
Crisis Intervention		15	70 - 79			
D. OUTREACH SERVICES						
Mental Health Promotion		45	10 - 19			
Community Client Services		45	20 - 29			
E. SUPPORT SERVICES						
Life Support/Board & Care		60	40 - 49			
Case Management Support		60	60 - 69			
Flexible Funding (Cost Reimbursement)		60	64			
F. Medi-Cal Administrative Activities (MAA)						
MAA		55	01-35			

SERVICE EXHIBIT _____

CLIENT SUPPORTIVE SERVICES

I. OVERVIEW

The inception in 1991 of Realignment and the Rehabilitation Option in California public mental health services enabled counties to expand mental health services into non-traditional areas and move the focus of service provision from clinics into the community. Counties can now treat clients in a holistic way, taking into consideration all of their needs. In order to support and maintain clients' highest level of functioning, mental health services addressing the areas of housing, personal, vocational, and program/socialization needs must be provided, in addition to more traditional therapeutic services.

With the inception in 2000 of the AB 2034 Program, with its focus on individuals who are homeless, recently released from jail or prison, or who are untreated, unstable, and at risk of incarceration or homelessness, the State mandated that counties provide services in all of the above areas. In response to this mandate, counties designed and implemented contracts, policies, procedures and payment processes that supported the provision of these services.

The Department of Mental Health (DMH) provides services to many mentally ill individuals in need of assistance with housing, personal, vocational and program/socialization needs in addition to therapeutic interventions. Many DMH clients receive services from mental health programs other than the AB 2034 Program. DMH has developed this service exhibit to facilitate making these services available to any clients of its agencies and programs, wherever needed.

II. PROGRAM ELEMENTS AND SERVICES

A. Housing Expenses

Key goals of mental health services include assisting clients in achieving stability and living in the least restrictive setting possible. Stable, affordable housing is of critical importance to achieving these goals. Funding for housing expenses may be utilized to augment existing housing resources for clients, who may be linked to a broad array of housing, ranging from temporary/emergent housing to permanent housing. Clients may receive assistance with housing expenses, including, but not limited to, rental and utility deposits, ongoing assistance with utility expenses, furniture, appliances, housewares, moving expenses, repair of housing damages caused by the client, and expenses related to prevention of eviction.

Upon pre-approval by the Director of Mental Health, the services of housing specialists and capital development projects may be included. All fixed assets or

real estate acquisitions purchased within the parameters of this exhibit require the Director's prior approval.

B. Personal/Community Integration Expenses

Funding may be provided to assist clients in achieving their treatmant goals and in supporting their integration into the larger community. Items may include, but are not limited to, food, clothing, school supplies, tuition, transportation, hygiene and personal items, medical and dental care, prescriptions, laboratory tests, dental work and eyeglasses.

C. Vocational Expenses

Funding may be provided to maximize clients' ability to achieve their vocational goals. To prepare and support clients in obtaining employment, these funds can be allocated for, but are not limited to, educational/vocational supplies and training, job searches, job development, job placement, job coaching, and the services of vocational specialists.

III. PERSONS TO BE SERVED

DMH contractors serve clients of all ages, races, cultures and conditions who are severely and persistently mentally ill. Persons to be served by this program include individuals with insufficient funds to provide the materials and resources necessary to achieve their treatment goals.

IV. REIMBURSEMENT

The procedures for reimbursement for Client Supportive Services expenditures are provided in Attachment A.

CLIENT SUPPORTIVE SERVICES
REIMBURSEMENT PROCEDURES

The following procedures will be used for reimbursement of Client Supportive Services expenditures:

1. **EXPENDITURES ELIGIBLE FOR REIMBURSEMENT THROUGH CLIENT SUPPORTIVE SERVICES**

   A. Housing

   Expenditures to augment existing housing resources for clients who may be linked to a broad array of housing, ranging from temporary/emergent housing to permanent housing, may be reimbursed. Clients may receive assistance with housing expenses, including, but not limited to, rental and utility deposits, ongoing assistance with utility expenses, furniture, appliances, housewares, moving expenses, repair of housing damages caused by the client, housing outreach and searches, assisting clients in obtaining letters of reference, preparing for housing interviews, and expenses related to prevention of eviction.

   Upon pre-approval by the Director of Mental Health, the services of housing specialists and capital development projects may be included. All fixed assets or real estate acquisitions purchased within the parameters of this exhibit require the Director's prior approval.

   B. Personal/Community Integration

   Expenditures to assist clients in achieving their treatmant goals and to support their integration into the community may be reimbursed. Personal/community integration items for clients may include, but are not limited to, food, clothing, transportation, school supplies, tuition, hygiene and personal items, medical and dental care, prescriptions, laboratory tests, dental work and eyeglasses.

   C. Vocational

   Expenditures to maximize clients' ability to achieve their vocational goals may be reimbursed. To prepare and support clients in obtaining employment, these funds can be allocated for, but are not limited to, educational/vocational supplies and training, job searches, job development, job placement, job coaching, and the services of vocational specialists.

   Staff time and services in the above areas (Subsections A-C) are reimbursable for those activities which are not Medi-Cal reimbursable services.

2. REIMBURSEMENT GUIDELINES

The funds allocated for Client Supportive Services shall be used only when there are no other funds available. If the client is a current Supplemental Security Income (SSI) recipient, Client Supportive Services' funds shall be utilized only after it has been clearly established that there are no SSI funds available for housing, personal/community integration, vocational, and other expenditures.

3. DOCUMENTATION REQUIREMENTS FOR REIMBURSEMENT

The following supportive documentation shall be maintained on file with the Contract Provider in accordance with the Records and Audits paragraph of the Agreement:

a) Original receipts to support payment invoices (If an original receipt is not obtainable, a copy of the receipt or justification as to why the receipt was not obtained should be retained), identifying individual clients and/or bulk purchases;

b) Copies of original rental agreements, including the "Return of Security and Rental Deposit Agreement", signed by the client and the property owner or authorized agent, when a client receives or secures an apartment or a house;

c) Copies of signed checks issued and petty cash payments; and

d) Copies of staff time records identifying time spent on providing eligible housing, vocational, and socialization services that are not being captured through mental health units of service billings.

Each Contract Provider shall, on the last day of each month, complete the Client Supportive Services invoice indicating the categories of expenses (housing, personal/community integration or vocational), and the amount spent, including staff salaries expended. All claims are to be submitted by Contractor to DMH within sixty (60) days from the month of the expenditure occurrence.

The Client Supportive Services Expense Claim form(s) (Attachment B) shall be submitted to:

County of Los Angeles - Department of Mental Health
550 S. Vermont Avenue, 12th Floor
Los Angeles, CA 90020
ATTN: Adult Systems of Care Program Manager

4. **DMH REVIEW AND APPROVAL OF INVOICES**

The DMH Adult Systems of Care (ASOC) Program Manager will review monthly invoices and sign to affirm that expenditures meet established Client Supportive Services Procedures. Approved invoices will be forwarded to the DMH Provider Reimbursment Unit for payment.

DMH shall process all completed requests for Client Supportive Services reimbursement on a monthly basis. The judgment of DMH as to the allowability of any expenditure shall be final.

5. **MONTHLY RECONCILIATION REPORT**

DMH has allocated each Contract Provider a specified amount of funding for Client Supportive Services. Monthly reconciliation reports will be generated by the Provider Reimbursement Unit for each Contract Provider to ensure expenditures have not been exceeded. The County shall not be liable for reimbursement of any expenses claimable hereunder in the event that any contractor exceeds its allocation or violates the terms and conditions of the Client Supportive Services Procedures or the Legal Entity Agreement.

Attachment B

County of Los Angeles-Department of Mental Health-Provider Reimbursement Division

Monthly Claim for Cost Reimbursement

Fiscal Year _____

SPECIAL HANDLING REQUIRED

SPECIAL HANDLING REQUIRED

Client Supportive Services

Funding Source Name: _____

Legal Entity Name: _____

Legal Entity Mailing Address: _____

Billing Month(s): _____ Contract Amendment No.: _____

Provider Number(s): _____

1. Expenditures:

1.1	Housing	_____ (1.1)
1.2	Personal/Community Integration	_____ (1.2)
1.3	Vocational	_____ (1.3)
1.4	Other	_____ (1.4)

2. Total Expenditures (add lines 1.1 through 1.4) _____ (2.)

3. Less: Patient & Third Party Revenues

3.1	Patient Fees	_____ (3.1)
3.2	Patient Insurance	_____ (3.2)
3.3	Medicare	_____ (3.3)
3.4	Other: _____	_____ (3.4)

4. Total Revenues (add lines 3.1 through 3.4) _____ (4.)

5. Expenditures less revenues (subtract line 4 from line 2) _____ (5.)

6. Total Net Costs _____ (6.)

7. **Total Payment Requested** _____ (7.)

Comments: _____

I hereby certify that all information contained above are services and costs eligible under the terms and conditions for reimbursement under Client Supportive Services and is true and correct to the best of my knowledge. All supporting documentation will be maintained in a separate file for the period specified under the provsions of the Mental Health Services Agreement - Legal Entity, Paragraph 11, Section A, Sub-section (1), Sub-section (1)(a), Sub-section (1)(b), Sub-section (2), Sub-section (3), and Sub-section (4).

NOTE: THE SERVICES OF HOUSING SPECIALISTS AND CAPITAL DEVELOPMENT PROJECTS, INCLUDING ALL FIXED ASSETS OR REAL ESTATE ACQUISITIONS PURCHASED WITHIN THE PARAMETERS OF CLIENT SUPPORTIVE SERVICES, REQUIRE THE DIRECTOR'S PRIOR APPROVAL.

Signature: _____ Phone No.: _____

Title: _____ Date: _____

LAC-DMH Program Approval:

_____ _____

Approved By Date

_____

Title

EX 1010b

DMH LEGAL ENTITY AGREEMENT
ATTACHMENT III

Service Delivery Site Exhibit

CONTRACTOR NAME: _____

LEGAL ENTITY NO.: _____ **PERIOD:** _____

*DESIGNATED PROGRAM OFFICE	SERVICE EXHIBIT NO.	PROV. NO.	SERVICE DELIVERY SITE(S)	M.H. SERVICE AREA(S) SERVED	SITE SUP. DISTRICT

*Legend: ASOC(A) CSOC (C) Critical Care (CC) Court Programs (CP) Homeless (H) Managed Care (MC)

SERVICE EXHIBITS

A duplicate original of the Service Exhibit(s) will be on file in the Department of Mental Health's Contracts Development and Administration Division and is deemed incorporated herein by reference as though fully set forth, and will be made available to interested persons upon request.

DESCRIPTION	CODES	
Targeted Case Management Services (Rehab. Option)	104-A	
Short-Term Crisis Residential Services (Forensic)	201	
Crisis Stabilization Services (Rehab. Option)	202-A	
Vocational Services	304-A	
Day Rehabilitation Services (Adult) (Rehab. Option)	308-A	
Day Rehabilitation Services (Children/Adolescents) (Rehab. Option)	309-A	
Day Treatment Intensive Services (Adult) (Rehab. Option)	310-A	
Day Treatment Intensive Services (Children/Adolescents) (Rehab. Option)	311-A	
Mental Health Services (Rehab. Option)	402	
Medication Support Services (Rehab. Option)	403	
Crisis Intervention Services (Rehab. Option)	404-A	
Mental Health Service Treatment Patch (La Casa)	405	
Therapeutic Behavioral Services	406-A	
Outreach Services	501-A	
Outreach Services (Suicide Prevention Services)	502-A	
Intensive Skilled Nursing Facility Services	601	
Mental Health Rehabilitation Centers (La Casa Mental Health Rehabilitation Center)	602	
Intensive Skilled Nursing Facility Services (La Paz)	603	
Intensive Skilled Nursing Facility Services Forensic Treatment	604	
Skilled Nursing Facilities (Psychiatric Services)	605	
Skilled Nursing Facility – Special Treatment Program Services (SNF-STP/Psychiatric Services)	608	

2	Intensive Skilled Nursing Facility Services – Enhanced Treatment Program (ETP)	609	
3	Socialization Services	701-A	
4	Life Support Service	801	
5	Case Management Support Services	802-A	
6	Case Management Support Services (Forensic)	803-A	
7	Case Management Support Services (Children & Youth)	804-A	
8	Life Support Services (Forensic)	805	
9	Independent Living Services	901	
10	Local Hospital Services	902	
11	Semi-Supervised Living Services	904	
12	Adult Residential Treatment Services (Transitional)	912	
13	Adult Residential Treatment Services (Long Term)	913	
14	Non-Hospital Acute Inpatient Services (La Casa PHF)	914	
15	Comprehensive Adult Residential Treatment Services (Bio-Psycho-Social Services)	915	
16	Assertive Community Treatment Program (ACT)	921	
17	Psychiatric Inpatient Hospital Services	930	
18	Primary Linkage and Coordinating Program	1001	
19	AB 34 Housing and Personal/Incidental Services	1002	
20	Service Provisions (Organizational Provider Only)	1003	
21	Consumer Run/Employment Program	1005	
22	AB 2034 State Demonstration Program (Housing Expenses)	1008	
23	AB 2034 State Demonstration Program (Personal and Incidental Expenses)	1009	
24	Client Supportive Services (Includes Attachment A (Reimbursement Procedures)		
25	and Attachment B (Monthly Claim for Cost Reimbursement)	1010	

DMH Summary of Amendment Changes

LEGAL ENTITY NAME: _____

Contract No.: _____ Legal Entity No.: _____ Amendment No.: _____

LISTING OF FUNDING SOURCES

	Realignment/CGF	12	DCFS AB 3632 Family Preservation	24	PATH/McKinney
1	EPSDT Baseline CGF Match	13	DHS/ADPA (Sidekick)	25	AB 2994
2	SB 90 (AB 3632) Baseline CGF Match	14	DCFS Star View	26	AB 2034: Services
3	EPSDT Growth CGF Match	15	DPSS CalWORKs		AB 2034: Client Supportive Services
4	Healthy Families CGF Match	16	DPSS GROW	27	SAMHSA/AB 3015
5	Non EPSDT-FFP CGF Match	17	DHS Lamp		SAMHSA: Flex Funds
6	STOP CGF Match	18	DHS Social Model	28	State HIV/AIDS
7	Other CGF	19	DCFS STOP (SGF)	29	SB 90 (AB 3632)
8	DHS/ADPA AB 2034	20	DCFS Hillview/Transitional Living	30	Healthy Families FFP
9	DHS/ADPA Dual Diagnosis	21	Probation Schiff-Cardenas	31	Non EPSDT-FFP
10	DCFS Family Preservation	22	DHS/ADPA Dual Diagnosis (BHS)	32	EPSDT-FFP
11	DCFS AB 1733 Child Abuse	23	DCFS THP	33	EPSDT-SGF

FUNDING SOURCE(S): (Select from Funding Sources listed above.)	**AMOUNT Increase/Decrease**	**FISCAL YEAR**	**MCA**
No change to the MCA			

AMENDMENT ACTION(S): **BOARD ADOPTED DATE:** _____ **EFFECTIVE DATE:**

New Headquarters Address: _____ Sup. Dist.: _____
_____ Svc. Area: _____

ADD OR DELETE SERVICE SITE(S):

Name	Address	Sup. Dist.	Svc. Area	Prov. No.

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
HOUSING INITIATIVES PLAN

ATTACHMENT V

Supervisorial Districts	LEGAL ENTITY AGREEMENTS	FY 2004-2005 CURRENT MCA	FY 2004-2005 4.5 MONTHS PRORATED	FY 2004-2005 REVISED MCA	FY 2005-2006 CURRENT MCA	FY 2005-2006 ANNUALIZED ALLOCATION	FY 2005-2006 REVISED MCA
1	Gateways Hospital and Mental Health Center 1891 Effie Street Los Angeles, CA 90026	$9,488,960	$195,000	$9,683,960	N/A	N/A	N/A
1, 2, 3, 5	Portals, Inc.* 679 New Hampshire Avenue, 5th Floor Los Angeles, CA 90005	11,549,892	54,938	11,604,830	$11,549,892	$91,563	$11,641,455
3	Ocean Park Community Center 1453 16th Stsreet Santa Monica, CA 90404-2715	210,817	192,857	403,674	210,817	257,143	467,960
1, 2, 4, 5	National Mental Health of Greater Los Angeles ** 320 Pine Avenue Long Beach, CA 90802	10,879,414	54,938	10,934,352	10,760,460	91,563	10,852,023
	TOTAL ALLOCATION	**$32,129,083**	**$497,733**	**$32,626,816**	**$22,521,169**	**$440,269**	**$22,961,438**

* The Rental assistance program for Service Areas 2, 4, 5 and 6 will be administered from this site.

** The Rental assistance program for Service Areas 1, 3, 7 and 8 will be administered from this site.

ATTACHMENT VI

CONTRACT NO. DMH-01407

AMENDMENT NO. 4

THIS AMENDMENT is made and entered into this ___ day of _____, 2005, by and between the COUNTY OF LOS ANGELES (hereafter "County") and California Institute for Mental Health (CIMH) (hereafter "Consultant").

WHEREAS, County and Consultant have entered into a written Agreement, dated June 10, 2003, identified as County Agreement No. DMH-01407, and any subsequent amendments (hereafter collectively " Agreement"); and

WHEREAS, for Fiscal Year 2004-2005 only, County and Consultant intend to amend Agreement only as described hereunder; and

WHEREAS, for Fiscal Year 2004-2005 County and Consultant intend to amend Agreement to add Sales Tax Realignment funds in the amount of $20,000 to the Total Compensation Amount to provide consultation services and technical assistance in the area of housing development; and

WHEREAS, County and Consultant intend to delete Exhibit A-3 (STATEMENT OF WORK) and Exhibit B-3 (FEE SCHEDULE) in their entirety and replace with Exhibit A-4 and Exhibit B-4.

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

1. Paragraph 4.0 (COMPENSATION), Subparagraphs 4.1 and 4.2, shall be deleted in their entirety and the following substituted therefor:

"4.1 In consideration of the performance by Consultant in a manner satisfactory to County of the services described in Exhibit A-4, Statement of Work, Consultant shall be paid in accordance with the Fee Schedule established in Exhibit B-4. Total compensation for all services furnished hereunder shall not exceed the sum of FOUR HUNDRED THIRTY THOUSAND DOLLARS ($430,000) for Fiscal Year 2004-2005. Notwithstanding such limitation of funds, Consultant agrees to satisfactorily complete all work specified in Exhibit A-4 to request payment, Consultant shall present to County's Project Manager monthly in arrears invoices accompanied by a statement of the number of hours worked daily by each individual assigned to the project and a report of work completed for the invoice period. This report shall be prepared in a format satisfactory to County's Project Manager or his/her designated representative.

"4.2 The total compensation for this Agreement shall not exceed FOUR HUNDRED THIRTY THOUSAND _____ DOLLARS ($430,000) for Fiscal Year 2004-2005. In no event shall County pay Consultant more than this Total Compensation Amount for Consultant's performance hereunder. Payment to Consultant shall be only upon written approval of the invoice and report by County's Project Manager or his/her designated representative.

Consultant shall submit invoices to:

County of Los Angeles
Department of Mental Health
Adult Systems of Care /Children's Systems of Care
550 South Vermont Avenue, 12th Floor
Los Angeles, CA 90020
ATTN: Mental Health District Chief / Mental Health Analyst III

2. Statement of Work Exhibit A-3 and Fee Schedule Exhibit B-3 shall be deleted in their entirety and replaced with Exhibit A-4 and Exhibit B-4 attached hereto and incorporated herein by reference. All references in Agreement to Exhibit A-3 and Exhibit B-3 shall be deemed amended to Exhibit A-4 and Exhibit B-4.

3. 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 Consultant has caused this Amendment to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

COUNTY OF LOS ANGELES

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

California Institute for Mental Health
Contractor

By _____

Name Sandra Goodwin, Ph.D.

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

CIMH-LJ:Amend.4

EXHIBIT A-4

CALIFORNIA INSTITUTE FOR MENTAL HEALTH

STATEMENT OF WORK

SERVICES TO BE PROVIDED BY CIMH

ADULT SYSTEMS OF CARE

California Institute for Mental Health (CIMH) will assist the Los Angeles County Department of Mental Health (DMH) by providing training sessions, workshops, consultation and technical assistance for both the Adult and Children's Systems of Care as follows:

CIMH will provide consultation services and technical assistance in the area of housing development.

CIMH will provide technical assistance in the development and implementation of an outcome measurement system for the CalWORKs program to evaluate the effectiveness of supportive services to CalWORKs participants.

CIMH will conduct three (3) separate studies on supportive services to Los Angeles County's Welfare-to-Work efforts. These three (3) studies will examine program results, measure performance, identify outcomes, and present recommendations:

1. Provide technical assistance in the development and implementation of an outcome measurement system for the CalWORKs program to evaluate the effectiveness of supportive services to the CalWORKs participants;
2. Conduct an evaluation study of a pilot program serving the needs of homeless CalWORKs families; and
3. Conduct a study of Los Angeles County's General Relief Opportunities to Work (GROW) supportive services.

The data provided, based on the outcome measurement system, will assist in the development of treatment services to meet the needs of CalWORKs participants. Using the proposal for developing an outcome measurement system approach, the focus shifts from any given cohort of clients to changes in overall system performance over time.

These performance measures and outcomes will improve the accountability and serve as a tool for continued monitoring, planning and managing the programs.

CHILDREN'S SYSTEMS OF CARE

CIMH will assist DMH by providing training sessions, workshops, consultation and technical assistance for both the Adult and the Children's Systems of Care, as follows:

CIMH will provide training and facilitation in various relevant areas (e.g. strength-based assessment and treatment, school-based services, short-term group and in-home therapy, Wraparound services, and community stakeholder planning) for DMH directly operated and contract providers.

For Fiscal Year 2004-2005, CIMH will provide consultation and technical assistance for the Infant Preschool Family Mental Health Initiative to expand efforts to serve children ages 0-5 and their families through the development and implementation of a comprehensive training program focusing on children who are attending First 5 LA School Readiness Centers.

The Children's Systems of Care in Los Angeles County is expanding rapidly. In support of the continued provision of high quality services, CIMH will provide training for DMH directly operated and contract providers of mental health services in many areas, including, but not limited to, the following:

- Wraparound services
- Treatment of dually diagnosed (mental illness and substance abuse) consumers
- Working with parents of mentally ill children
- The Infant Mental Health Initiative
- Parent providers of care
- Cultural competency
- School-based services
- Short-term group and in-home therapy
- Strength-based assessment and treatment
- Suicide intervention
- The 4th biennial Parent Provider Partnership conference

OLDER ADULTS SYSTEMS OF CARE

California Institute for Mental Health will assist the Los Angeles County DMH by providing training resources, linkage, coordination, support, and technical assistance to the Older Adults Adult Systems of Care in the following areas:

- Older adults assessment tool

- Older adults outcome measure
- Schools of social work intern training
- Training conference
- Training workshops
- Staff specialty skills development

EXHIBIT B-4

CALIFORNIA INSTITUTE FOR MENTAL HEALTH
FEE SCHEDULE

ADULT SYSTEMS OF CARE

FY 2004-2005 $20,000 Sales Tax Realignment Fund

CIMH shall submit monthly invoices for actual costs incurred for housing development consultation provided under the Statement of Work. CIMH shall retain all relevant supporting documents and make them available to DMH at any time for audit purposes. Invoices shall be specific as to the type of services provided and shall be submitted to:

Deputy Director
Adult's Systems of Care
County of Los Angeles – Department of Mental Health
550 S. Vermont Ave., 12th Floor
Los Angeles, CA 90020
Telephone: (213) 738-4385
ATTN: Countywide District Chief

FY 2004-2005 $200,000 ($150,000 CalWORKs and $50,000 GROW Funding)
FY 2005-2006 $200,000 ($150,000 CalWORKs and $50,000 GROW Funding)

The California Institute for Mental Health (CIMH) shall submit monthly invoices for actual costs incurred for studies provided under the Statement of Work. CIMH shall retain all relevant supporting documents and make them available to the Department of Mental Health at any time for audit purposes. Invoices shall be specific as to the type of services provided and shall be submitted to:

Deputy Director
Adult Systems of Care
County of Los Angeles – Department of Mental Health
550 S. Vermont Ave., 11th Floor
Los Angeles, CA 90020
Telephone: (213) 738-2756
ATTN: Mental Health District Chief, CalWORKs

Funding for CIMH housing development consultation under the Adult Systems of Care portion shall not exceed $20,000 for FY 2004-2005 only. Funding for CIMH training under the Adult System of Care portion of the Agreement shall not exceed $400,000 for the term of the Agreement, effective July 1, 2004 through June 30, 2006.

CHILDREN'S SYSTEMS OF CARE

FY 2004-2005 $210,000 (CSOC) Training and Administrative Support Funding)
FY 2005-2006 $ 20,000 (CSOC)

CIMH shall submit monthly invoices for actual costs incurred for studies provided under the Statement of Work. CIMH shall retain all relevant supporting documents and make them available to the Department of Mental Health at any time for audit purposes. Invoices shall be specific as to the type of services provided and shall be submitted to:

Deputy Director
Children's Systems of Care
County of Los Angeles – Department of Mental Health
550 S. Vermont Ave., 4th Floor
Los Angeles, CA 90020
Telephone: (213) 351-8903
ATTN: Mental Health Analyst III

Funding for CIMH training under the Children's Systems of Care portion of the Agreement shall not exceed $230,000 for the term of the Agreement, which begins July 1, 2004 through June 30, 2006.

DMH Summary of Amendment Changes

LEGAL ENTITY NAME: California Institute for Mental Health

Contract No.: DMH-01407 Legal Entity No.: N/A Amendment No.: 4

LISTING OF FUNDING SOURCES

	Realignment/CGF	12	DCFS AB 3632 Family Preservation	24	PATH/McKinney
1	EPSDT Baseline CGF Match	13	DHS/ADPA (Sidekick)	25	AB 2994
2	SB 90 (AB 3632) Baseline CGF Match	14	DCFS Star View	26	AB 2034: Services
3	EPSDT Growth CGF Match	15	DPSS CalWORKs		AB 2034: Client Supportive Services
4	Healthy Families CGF Match	16	DPSS GROW	27	SAMHSA/AB 3015
5	Non EPSDT-FFP CGF Match	17	DHS Lamp		SAMHSA: Flex Funds
6	STOP CGF Match	18	DHS Social Model	28	State HIV/AIDS
7	Other CGF	19	DCFS STOP	29	SB 90 (AB 3632)
8	DHS/ADPA AB 2034	20	DCFS Hillview/Transitional Living	30	Healthy Families FFP
9	DHS/ADPA Dual Diagnosis	21	Probation Schiff-Cardenas	31	Non EPSDT-FFP
10	DCFS Family Preservation	22	DHS/ADPA Dual Diagnosis (BHS)	32	EPSDT-FFP
11	DCFS AB 1733 Child Abuse	23	DCFS THP	33	EPSDT-SGF

FUNDING SOURCE(S): (Select from Funding Sources listed above)	AMOUNT Increase/Decrease	FISCAL YEAR	TCA
Sales Tax Realignment Trust Fund Account	$ 20,000	2004-2005	$ 430,000

AMENDMENT ACTION(S)

AMENDMENT EFFECTIVE DATE: Upon Board Approval

Amendment No. 4 will add Sales Tax Realignment funds in the amount of $20,000 to the Total Compensation Amount (TCA) for training, consultation to older adults mental health providers and interns to develop professional skills in the areas of assessment and treatment. The revised TCA will be $430,000 for FY 2004-2005 only.

New Headquarters Address: N/A

Sup. Dist.: N/A
Svc. Area: N/A

ADD OR DELETE SERVICE SITE(S):

Name	Address	Sup. Dist.	Svc. Area	Prov. No.
N/A	N/A	N/A	N/A	N/A

ATTACHMENT VII

BOARD OF SUPERVISORS OFFICIAL COPY

76R 352M (11/83)

COUNTY OF LOS ANGELES

REQUEST FOR APPROPRIATION ADJUSTMENT

DEPT'S. NO. 435

DEPARTMENT OF MENTAL HEALTH

19

AUDITOR-CONTROLLER.
THE FOLLOWING APPROPRIATION ADJUSTMENT IS DEEMED NECESSARY BY THIS DEPARTMENT. WILL YOU PLEASE REPORT AS TO ACCOUNTING AND AVAILABLE BALANCES AND FORWARD TO THE CHIEF ADMINISTRATIVE OFFICER FOR HIS RECOMMENDATION OR ACTION.

ADJUSTMENT REQUESTED AND REASONS THEREFOR

4 - Votes

Sources:

Department of Mental Health
State Realignment Sales Tax
A01-MH-20500-8899
$758,000

Uses:

Department of Mental Health
Salary & Employee Benefits
A01-MH-20500-1000
$40,000

Department of Mental Health
Services & Supplies
A01-MH-20500-2000
$518,000

Department of Mental Health
Other Charges
A01-MH-20500-5500
$200,000

This appropriation adjustment is requested to increase appropriation in Salary & Employee Benefits, Services & Supplies, and Other Charges to provide spending authority to implement the Housing Initiatives Plan. This request is fully funded with one-time Sales Tax Realignment revenue included in the Trust Account. There is no increase in net County cost.

Susan Kerrya
Marvin J. Southard, D.S.W.
Director of Mental Health

CHIEF ADMINISTRATIVE OFFICER'S REPORT

REFERRED TO THE CHIEF ADMINISTRATIVE OFFICER FOR — ACTION

✓ RECOMMENDATION

AUDITOR-CONTROLLER

NO. 251

BY Helen Tung

FEB 2 2005

APPROVED AS REQUESTED

February 3 2005

AS REVISED

Gregory Clark
CHIEF ADMINISTRATIVE OFFICER
FOR DAVID JANSSEN

APPROVED (AS REVISED): BOARD OF SUPERVISORS

19

BY

DEPUTY COUNTY CLERK