

**SANTA BARBARA COUNTY
BOARD AGENDA LETTER**



Clerk of the Board of Supervisors
105 E. Anapamu Street, Suite 407
Santa Barbara, CA 93101
(805) 568-2240

Agenda Number:
Prepared on: 07/31/2006
Department Name: Alcohol, Drug & Mental Health
Department No.: 043
Agenda Date: 08/15/2006
Placement: Administrative
Estimate Time:
Continued Item: NO
If Yes, date from:

TO: Board of Supervisors

FROM: James L. Broderick, Ph.D., Director
Alcohol, Drug & Mental Health Services

STAFF CONTACT: Marianne Garrity, ADMHS Assistant Director, Administration
805-681-4092

SUBJECT: Child Abuse Listening & Mediation, Inc. Contract

Recommendation(s):

That the Board of Supervisors:

1. Approve and execute a contract amendment in the amount of \$1,205,973, with Child Abuse Listening and Mediation (CALM), a local vendor, to expand therapeutic foster care services to children and their families. The contract term is from July 1, 2006 through June 30, 2007.
2. Authorize the Director of ADMHS to approve amendments to the proposed contracts, provided that any such amendments do not exceed ten percent (10%) of the contract's dollar amount.

Alignment with Board Strategic Plan:

The recommendation(s) are primarily aligned with Goal No. 2. A Safe and Healthy Community in Which to Live, Work and Visit.

Executive Summary and Discussion:

The **CALM** contract for FY 06/07 provides mental health treatment services to Medi-Cal eligible children experiencing severe emotional disturbances (SED). These services include family therapy, individual therapy, school based therapy and therapeutic foster care treatment. Family therapy focuses on the needs of the individual in relation to their family. Individual therapy is designed to provide a goal-directed therapeutic intervention with the client that focuses on the client's mental health needs. School based services are those Medi-Cal eligible services provided to the client in a school environment. Therapeutic

foster care treatment provides therapeutic treatment services to children in foster care that will help them to remain in their placements.

CALM has served over two hundred fifty (250) clients during FY 2005-06. Also, one hundred sixty (160) children are continuing in therapy. One hundred three (103) of the children who received services had an active Juvenile Probation case and ninety four (94) of the children had an open Child Welfare Services (CWS) case.

The target population to be served are clients eighteen (18) years of age or younger with severe mental health disorders who meet Medi-Cal medical necessity criteria. The goal of the program is to stabilize the child and family who reside in their own home, or who are transitioning from a group home or residential placement.

The program goals are to improve the family's level of functioning and the quality of life for children. These goals are met through the use of various educational, behavioral, and clinical interventions. Some of the skills that are taught and modeled include coping, crisis planning, anger management, self-empowerment, and appropriate parenting techniques.

Behavior modification techniques are demonstrated and implemented with the family as a means to improve a child's behavior and provide more structure and routine to the home environment. CALM therapists utilize a variety of modalities including family therapy, cognitive therapy, and play therapy. Parenting education and household management skill building are also included.

For FY 06/07, due to increased service requirements, an increased client population and expanded programs (detailed above) it was agreed to increase CALM's contract to \$1,205,973 resulting in their contract exceeding the 10% variance allowed to the Board of Supervisor approved ongoing contracts list. Therefore ADMHS requests the Board approve and execute the CALM contract renewal with variance exceeding 10% of the amount approved in the ongoing contract list.

Performance Measures:

The CALM contract will assist ADMHS in meeting **Recurring Performance Measures (RPM) 214 and 0198**, to provide effective mental health services to 2,450 youth and their families and to provide high quality Mental Health services to children in order to keep the number of new out of home placements below 100 per year.

Mandates and Service Levels:

Mental Health Services are mandated by the Welfare and Institutions Code, Section 5600.

Fiscal and Facilities Impacts:

The recommended actions have no impact on the General Fund Contribution. The funding source for the CALM contract is Medi-Cal and EPSDT revenue. These funding sources are identified in the Adopted FY 2006-07 Budget, Federal and State Funding, Medi-Cal line item 5404; and EPSDT line items 5405; in the County Budget Book, Children's Services Division, page D-154.

These actions will not result in a need for any additional facilities.

Special Instructions:

Please send one (1) fully executed copy of each contract and endorsed minute order to:

Alcohol, Drug & Mental Health Services
ATTN: Jack Juntunen, Contracts Analyst
300 N. San Antonio Road
Santa Barbara, CA 93110

Concurrence:

Co-Counsel
Auditor-Controller
Risk Management

AMENDMENT 2006-2007

TO AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR

This is an amendment (hereafter referred to as the "Amended Contract") to the Agreement for Services of Independent **CONTRACTOR**, number **BC05-035**, by and between the **COUNTY of Santa Barbara (COUNTY)** and **Child Abuse Listening & Mediation, Inc. (CONTRACTOR)**, for the continued provision of Children's Mental Health Services.

Whereas, **COUNTY** intends to extend the term of the existing contract through Fiscal Year 06-07 and to compensate **CONTRACTOR** for the services to be provided during that Fiscal Year; and

Whereas, this Amended Contract incorporates the terms and conditions set forth in the original contract, approved by the **COUNTY** Board of Supervisors on **Dec. 06, 2005**, except as modified by this Amended Contract.

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, **COUNTY** and **CONTRACTOR** agree as follows:

I. Delete Item 4, TERM, of the Agreement and replace with the following:

- 4. TERM. CONTRACTOR** shall commence performance on **July 1, 2006**, and end performance upon completion, but no later than **June 30, 2007**, unless otherwise directed by **COUNTY** or unless earlier terminated.

II. Delete Item 1, (Paragraph 1 and 2) of Exhibit B, Payment Arrangements, and replace with the following:

EXHIBIT B PAYMENT ARRANGEMENTS

- 1. CONTRACTOR SERVICES.** For **CONTRACTOR** services to be rendered under this Agreement, **CONTRACTOR** shall be paid at the rate specified in the Schedule of Fees (Exhibit B-1), attached hereto and with this reference made a part hereof, with a maximum value not to exceed **\$1,205,973.**

III. Delete Exhibit B-1, Payment Arrangements, and replace with the following:

EXHIBIT B-1 SCHEDULE OF RATES:

AMENDMENT 2006-2007

**ALCOHOL DRUG AND MENTAL HEALTH SERVICES
EXHIBIT B -1
SCHEDULE OF RATES & CONTRACT MAXIMUM
FY0607**

FEE FOR SERVICE

CHILD ABUSE LISTENING MEDIATION INC.	Amount									
<p><u>TOTAL CONTRACT GROSS VALUE</u></p> <p><u>Children System of Care</u> Intensive In Home & HOPE -Therapeutic Foster Care: 698,912 Managed Care 507,061 Subtotal: 1,205,973 Less Administrative Fee (15%): 180,896 NET CONTRACT AMOUNT: 1,025,077</p>	<p>\$ 1,205,973</p>									
<p><u>MEDI-CAL PRODUCTIVITY TARGET</u></p> <p><u>Children System of Care</u> Intensive In Home & Therapeutic Foster Care Treat: 1,205,973</p>	<p>\$ 1,205,973</p>									
<table border="0"> <thead> <tr> <th align="left"><u>Location</u></th> <th align="left"><u>Reporting Unit</u></th> <th align="left"><u>Name</u></th> </tr> </thead> <tbody> <tr> <td>9124</td> <td>21401</td> <td>Intensive In Home/Therapeutic Treat</td> </tr> <tr> <td>9124</td> <td>21402</td> <td>Managed Care</td> </tr> </tbody> </table>	<u>Location</u>	<u>Reporting Unit</u>	<u>Name</u>	9124	21401	Intensive In Home/Therapeutic Treat	9124	21402	Managed Care	<p>N/A</p>
<u>Location</u>	<u>Reporting Unit</u>	<u>Name</u>								
9124	21401	Intensive In Home/Therapeutic Treat								
9124	21402	Managed Care								

NEGOTIATED RATES FY 0506

Category	Mode of Service	Service Function Code	Negotiated Rates / Per min FY 0506 **
Case Management, Brokerage	15	01 - 09	1.95
Mental Health Services	15	10 - 19	2.52
Mental Health Services	15	30 - 59	2.52
Medication Support	15	60 - 69	4.66
Crisis Intervention	15	70 - 79	3.75

**** To be revised upon receipt of State approved rates for FY 0607**

AMENDMENT 2006-2007

SIGNATURE PAGE

Amended Contract for Services of Independent Contractor between the County of Santa Barbara and **Child Abuse Listening & Mediation, Inc.**, for FY 2006-2007.

IN WITNESS WHEREOF, the parties have executed this Amended Contract to be effective on the date executed by COUNTY.

COUNTY OF SANTA BARBARA

By:

Chair, Board of Supervisors

Date: _____

CONTRACTOR:

ATTEST:
MICHAEL F. BROWN
CLERK OF THE BOARD

By: _____
Deputy

By: _____
Tax ID No. 23-7097910

APPROVED AS TO FORM:
STEPHEN SHANE STARK
COUNTY COUNSEL

APPROVED AS TO ACCOUNTING FORM:
ROBERT W. GEIS, CPA
AUDITOR-CONTROLLER

By: _____
Deputy County Counsel

By: _____
Deputy

APPROVED AS TO FORM:
ALCOHOL, DRUG, AND MENTAL HEALTH
SERVICES
JAMES L. BRODERICK, Ph.D.
DIRECTOR

APPROVED AS TO INSURANCE FORM:
RAY AROMATORIO
RISK PROGRAM ADMINISTRATOR

By: _____
Director

By: _____
Risk Program Administrator

AMENDMENT 2006-2007

CONTRACT SUMMARY PAGE

BC05-035

Complete data below, print, obtain signature of authorized departmental representative, and submit this form (and attachments) to the Clerk of the Board (>\$25,000) or Purchasing (<\$25,000). See also "Contracts for Services" policy. Form is not applicable to revenue contracts.

D1. Fiscal Year..... 06-07
 D2. Budget Unit Number 043
 D3. Requisition Number
 D4. Department Name Alcohol, Drug, & Mental Health
 D5. Contact Person Jack Juntunen
 D6. Telephone..... (805) 681-4090

K1. Contract Type (check one): Personal Service Capital
 K2. Brief Summary of Contract Description/Purpose Children's Mental Health Services
 K3. Contract Amount..... \$1,205,973
 K4. Contract Begin Date 7/1/2006
 K5. Original Contract End Date..... 6/30/2006
 K6. Amendment History

Seq#	Effective Date	ThisAmndtAmt	CumAmndtToDate	NewTotalAmt	NewEndDate	Purpose
1	7/1/06	\$1,205,973	\$1,205,973	\$1,205,973	6/30/07	Change term; add funds

B1. Is this a Board Contract? (Yes/No)..... Yes
 B2. Number of Workers Displaced (if any)..... N/A
 B3. Number of Competitive Bids (if any)..... N/A
 B4. Lowest Bid Amount (if bid)..... N/A
 B5. If Board waived bids, show Agenda Date N/A
 and Agenda Item Number.....
 B6. Boilerplate Contract Text Unaffected? (Yes / or cite

F1. Encumbrance Transaction Code 1701
 F2. Current Year Encumbrance Amount..... \$1,205,973
 F3. Fund Number..... 0044
 F4. Department Number 043
 F5. Division Number (if applicable)
 F6. Account Number 7460
 F7. Cost Center number (if applicable)
 F8. Payment Terms

V1. Vendor Numbers (A=Auditor; P=Purchasing)
 V2. Payee/Contractor Name Child Abuse Listening & Mediation, Inc.
 V3. Mailing Address 1236 Chapala Street
 V4. City, State (two-letter) Zip (include +4 if known) Santa Barbara, CA 93101
 V5. Telephone Number..... 805 965-2376
 V6. Contractor's Federal Tax ID Number (EIN or SSN) 23-7097910
 V7. Contact Person Anna Kokotovic
 V8. Workers Comp Insurance Expiration Date..... 3/1/2007
 V9. Liability Insurance Expiration Date[s] (G=Genl; G 5/1/2007 P 5/1/2007
 V10. Professional License Number.....
 V11. Verified by (name of county staff) Jack Juntunen
 V12. Company Type (Check one): Sole Proprietorship Partnership Corporation

I certify information complete and accurate; designated funds available; required concurrences evidenced on signature page.

Date: _____ Authorized Signature: _____