



**BOARD OF SUPERVISORS  
AGENDA LETTER**

**Agenda Number:**

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

**Department Name:** Behavioral Wellness  
**Department No.:** 043  
**For Agenda Of:** June 25, 2024  
**Placement:** Administrative  
**Estimated Time:** N/A  
**Continued Item:** No  
**If Yes, date from:**  
**Vote Required:** Majority

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**TO:** Board of Supervisors

**FROM:** Department Antonette Navarro, LMFT, Director  
Behavioral Wellness (805) 681-5220

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Contact Info: John Winkler, LMFT, Division Chief of Clinical Operations  
Katie Cohen, Psy.D., LMFT, Branch Chief of Clinical Outpatient  
Operations  
(805) 681-5220

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**SUBJECT: Casa Pacifica Centers for Children and Families FY 2024-26 Contract Renewal**

**County Counsel Concurrence**

As to form: Yes

**Auditor-Controller Concurrence**

As to form: Yes

**Other Concurrence: Risk**

As to form: Yes

**Recommended Actions:**

That the Board of Supervisors:

- a) Approve and authorize the Chair to execute an Agreement for Services of Independent Contractor with **Casa Pacifica Centers for Children and Families** (not a local vendor) for the provision of mental health services for a total maximum contract amount not to exceed **\$9,238,690**, inclusive of \$4,619,345 per fiscal year, for the period of July 1, 2024, through June 30, 2026;
- b) Delegate to the Director of the Department of Behavioral Wellness or designee the authority to suspend, delay, or interrupt the services under the Agreement for convenience per Section 20 of the Agreement; make immaterial changes to the Agreement per Section 26; authorize additional services per Exhibits A-2 through A-6; amend program staffing requirements per Exhibits A-2 through A-6; reallocate the subsidy per Exhibit B of the Agreement, reallocate funds between funding sources, revise or waive the County Maximum Allowable rate, and reallocate between the contract allocations in the Exhibit B-1 MHS to increase or decrease the incentive payment with discretion per the Exhibit Bs; incorporate new codes and make fee-for-service rate changes to Exhibit B-3 MHS issued by the California Department of Health Care Services and may make rate changes to Exhibit B-3; and amend the program goals, outcomes, and measures per the Exhibit Es, all without altering the maximum contract amount and without requiring the Board’s approval of

an amendment of the Agreement, subject to the Board’s ability to rescind this delegated authority at any time; and

- c) Determine that the above actions are government funding mechanisms or other government fiscal activities, which do not involve any commitment to any specific project that may result in a potentially significant physical impact on the environment, and are therefore not a project under the California Environmental Quality Act (CEQA) pursuant to section 15378(b)(4) of the CEQA Guidelines.

**Summary Text:**

This item is on the agenda to renew Casa Pacifica Centers for Children and Families (Casa Pacifica) fiscal year (FY) 24-26 Agreement for mental health services for a maximum contract amount of \$9,238,690, inclusive of \$4,619,345 per fiscal year, for the period of July 1, 2024, through June 30, 2026. Casa Pacifica provides mandated mental health services to Medi-Cal-eligible children under the age of 21 with Serious Emotional Disturbances (SED) countywide, inclusive of crisis services, therapy, rehabilitation, residential treatment, shelter beds, and ancillary services.

**Background:**

The Santa Barbara County Department of Behavioral Wellness (BWell) provides a continuum of mental health services to Santa Barbara County residents, in part, through contracted providers including community-based organizations (CBOs). CBOs provide various specialty mental health services to adults with Serious Mental Illness (SMI) and children and youth with SED.

Casa Pacifica provides mandated mental health services to Medi-Cal-eligible children with SED countywide, such as therapy, rehabilitation, residential treatment, shelter beds, and ancillary services. They provide intensive individual services through Therapeutic Behavioral Services (TBS), Wraparound services to keep children in their homes (Wraparound), and group home placement in their Short-Term Residential Therapeutic Program (STRTP). Approval of the recommended actions will allow BWell to continue to deliver mandated services to children and youth with SED.

**Performance Measures:** Casa Pacifica’s Agreement will provide performance reports on the following performance measures for TBS, Wrap-Around, and STRTP:

<b>Casa Pacifica Mental Health Services</b>				
Program Goals	Outcomes	STRTP	TBS	Wrap-around
Census Information	Unique Clients Served	#	#	#
	Unique Clients Discharged	#	#	#
1. Reduce mental health and substance abuse symptoms	A. Incarcerations/Juvenile Hall	≤10	≤5	≤5
	B. Follow up after discharge from jail/juvenile hall within 7 days	≥95	≥95	≥95

resulting in reduced utilization of involuntary care.	C. Crisis Services	≤10	≤10	≤10
	D. Psychiatric inpatient admissions	≤10	≤5	≤5
	E. Follow up after discharge from inpatient hospital within 7 days	≥95	≥95	≥95
2. Assist clients in their mental health recovery process and with developing the skills necessary to lead healthy and productive lives in the community	A. Stable/permanent housing	≥95	≥95	≥95
	B. Engaged in purposeful activity (educational, vocational, volunteer)	≥95	≥95	≥95
	C. <b>Of those who discharged (#dc = denominator), % who transitioned to a higher level of care</b>	≤15	≤15	≤15
	D. <b>Of those who discharged (#dc = denominator), % who transitioned to a lower level of care (or graduated / discharged because care no longer needed or medical necessity not met)</b>	≥85	≥85	≥85
3. Provide mental health and/or substance use services for children and their families in order to prevent out-of-home and out-of-county placements	A. New out-of-primary home placements (county & out-of-county)	N/A	≤5	≤5
	B. Child and Adolescent Needs and Strengths (CANS) (% completed)	≥95	N/A	≥95
	C. CANS Improvement in 3+ Domains (report % positive change by domain)	≥10 (In 3 of 6)	N/A	≥10 (In 3 of 6)
	D. Pediatric Symptom Checklist PSC (% completed)	≥95	N/A	≥95

### **Performance Outcomes:**

*The following data is from the first three quarters of FY 23/24*

SAFTY served an average of 46 clients and discharged an average of 33.

TBS served an average of 75 clients and discharged an average of 28.

Wrap-Around served an average of 32 clients and discharged an average of 9.

STRTP served 2 clients and discharged 1.

1. Reduce mental health and substance abuse symptoms resulting in reduced utilization of involuntary care and emergency rooms for mental health and physical health problems.

***The programs met or are on target to meet all of these goals with the exception of Wrap-Around. The program states their clients have higher acuity than they have in the past which they attribute to more clients on probation and the fentanyl crisis.***

- **Incarcerations/Juvenile Hall:**

TBS: goal is less than 5%. Outcome: 0%

Wrap-Around: goal is less than 5%. Outcome: 16%

STRTP: goal is less than 10%. Outcome: 0%

SAFTY: goal is less than 5%. Outcome: 0%

- Psychiatric inpatient admissions:

TBS: goal is less than 5%. Outcome:7%

Wrap-Around: goal is less than 5%. Outcome: 6%

STRTP: goal is less than 10%. Outcome: 0%

SAFTY: goal is less than 5%. Outcome: 1%

2. Assist clients in their mental health recovery process and with developing the skills necessary to lead healthy and productive lives in the community.

*The TBS program met all goals. STRTP had a very small sample size (2 discharges total) which skewed their data. Wrap-Around did well with stable housing and engagement but is not meeting the goals for discharge. This is attributed to the higher acuity clients being referred.*

- Stable/permanent housing:

TBS: goal is  $\geq 95\%$ . Outcome:100%

Wrap-Around: goal is  $\geq 95\%$ . Outcome:100%

STRTP: goal is  $\geq 95\%$ . Outcome:50%

SAFTY: goal is  $\geq 95\%$ . Outcome:100%

- Engaged in purposeful activity (educational, vocational, volunteer):

TBS: goal is  $\geq 95\%$ . Outcome:98%

Wrap-Around: goal is  $\geq 95\%$ . Outcome:99%

STRTP: goal is  $\geq 95\%$ . Outcome:50%

SAFTY: goal is  $\geq 95\%$ . Outcome:100%

- Of those who discharged, % who transitioned to a higher level of care:

TBS: goal is  $< 15\%$ . Outcome:3%

Wrap-Around: goal is  $< 15\%$ . Outcome:37%

STRTP: goal is  $< 15\%$ . Outcome:100%

SAFTY: goal is  $< 15\%$ . Outcome:4%

- Of those who discharged, % who transitioned to a lower level of care (or graduated / discharged because care no longer needed or medical necessity not met):

TBS: goal is  $\geq 85\%$ . Outcome:97%

Wrap-Around: goal is  $\geq 85\%$ . Outcome:63%

STRTP: goal is  $\geq 85\%$ . Outcome:0%

SAFTY: goal is  $\geq 85\%$ . Outcome:96%

3. Provide mental health (and/or substance abuse) services for children and their families in order to prevent out-of-home and out-of-county placements.

*Both programs have low rates of out of out of home placements. Wrap-Around struggled in Q1 and Q2 with completing the CANS and PCS due to the electronic health record (EHR) changeover, but has been catching up in Q3.*

- New out-of-primary home placements (county & out-of-county):

Wrap-Around: goal is  $< 5\%$ . Outcome:2%

TBS: goal is  $< 5\%$ . Outcome:3%

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SAFTY: goal is  $\leq 5\%$ . Outcome: 0%• CANS (% completed):Wrap-Around: goal is 100%. Outcome: 56%STRTP: goal is 100%. Outcome: 100%• CANS Improvement in 3+ Domains (report % positive change by domain):  $\geq 10\%$  in 3 of 6. Data not available due to EHR changeover.• PSC (% completed):Wrap-Around: goal is 100%. Outcome: 56%STRTP: goal is 100%. Outcome: 100%FURS Outcomes

FURS received an average of 5 calls/quarter. The program is on target to meet all outcomes for FY 23/24.

Responded to calls timely: goal 95%. Outcome: 100%Calls successfully de-escalated: goal 90%. Outcome: 94%Foster Youth Maintained Community Placement: goal 90%. Outcome: 83%Participants Expressed Satisfaction: goal is 90%. Outcome: 100%**Fiscal and Facilities Impacts:**

Budgeted: YES

**Fiscal Analysis:**

<b><u>Funding Sources</u></b>	<b><u>FY 24-25</u></b>		<b><u>FY 25-26</u></b>		<b><u>TOTAL</u></b>
General Fund					
State	\$	591,484	\$	591,484	\$ 1,182,968
Federal					
Department of Social Services	\$	42,600	\$	42,600	\$ 85,200
Other: Medi-Cal Patient Revenue	\$	3,985,261	\$	3,985,261	\$ 7,970,522
<b>Total</b>	<b>\$</b>	<b>4,619,345</b>	<b>\$</b>	<b>4,619,345</b>	<b>\$ 9,238,690</b>

Narrative:

The above-referenced Agreement is funded with a combination of State and federal funds. With the transition to CalAIM Payment Reform, the fee-for-service portion of the contract will be funded with Medi-Cal Patient Revenue which primarily consists of federal funds. The amount of federal funds is contingent on the client's aid code and the State issued rate for the service. The Non-Medi-Cal portion of the contract is funded by both Mental Health Service Act (MHSA) and Realignment funding. Funding associated with this contract was included in the FY 24-25 Recommended Budget and will also be included in future budgets presented to the Board.

**Key Contract Risks:**

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As with any contract funded by State and Federal sources, there is a risk of future audit disallowances and repayments. The agreement includes language requiring the contractor to repay any amounts disallowed in audit findings, minimizing financial risks to the County.

**Special Instructions:**

Please email one (1) complete, executed contract and one (1) Minute Order to M. Simon-Gersuk at [msimongersuk@sbcbswell.org](mailto:msimongersuk@sbcbswell.org) and to BWell Contracts at [bwellcontractsstaff@sbcbswell.org](mailto:bwellcontractsstaff@sbcbswell.org).

**Attachments:**

Attachment A: Casa Pacifica FY 24-26 Board Contract

**Authored by:**

M. Simon-Gersuk