



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: July 18, 2023
Placement: Administrative
Estimated Time: N/A
Continued Item: No
If Yes, date from:
Vote Required: Majority

TO: Board of Supervisors
FROM: Department Antonette Navarro, LMFT, Director
Director(s) Department of Behavioral Wellness, (805) 681-5220
Contact Info: Melissa Wilkins, MPH, CADC-II, CCPS
Division Chief of Alcohol and Drug Programs, (805) 681-5220
SUBJECT: **Good Samaritan Shelter Termination of FY 21-24 Services Agreement and New FY 23-27 Services Agreement for Alcohol and Drug Programs and Mental Health Services**

County Counsel Concurrence

As to form: Yes

Other Concurrence: Risk Management

As to form: Yes

Auditor-Controller Concurrence

As to form: Yes

Recommended Actions:

That the Board of Supervisors:

- a) Approve, ratify, and authorize the termination of the FY 21-24 Agreement for Services of Independent Contractor with **Good Samaritan Shelter** (BC 21-031) for convenience, effective June 30, 2023, to enter into a new services agreement with Good Samaritan Shelter as set forth below in Recommended Action B following the award of the Drug Medi-Cal Organized Delivery System (DMC-ODS) Residential Treatment Services, Outpatient Treatment Services, and Recovery Residences Services Request for Proposals for FY 23-27 to Good Samaritan Shelter;
 - i. Direct the Director of the Department of Behavioral Wellness or designee to issue a letter to Good Samaritan Shelter terminating the FY 21-24 Agreement that is substantially similar to the draft provided in Attachment A;
 - ii. Delegate to the Director of the Department of Behavioral Wellness or designee the authority to take actions necessary for the winddown of the FY 21-24 Agreement, subject to the Board’s ability to rescind this delegated authority at any time;
- b) Approve, ratify, and authorize the Chair to execute a multi-year Agreement for Services of Independent Contractor with **Good Samaritan Shelter**, a California nonprofit (a local vendor), for the provision of substance use disorder services and mental health services, for a total maximum contract amount not to exceed **\$29,826,414**, inclusive of \$26,579,114 (\$7,072,799 for FY 23-24, \$7,041,549 for FY 24-25, \$6,636,966 for FY 25-26, and \$5,827,800 for FY 26-27) in

Alcohol and Drug Program (ADP) funding and \$3,247,300 (\$811,825 annually) in Mental Health Services (MHS) funding for the period of July 1, 2023 through June 30, 2027 (Attachment B);

- i. Delegate to the Director of the Department of Behavioral Wellness or designee the authority to suspend, delay, or interrupt services under the Agreement for convenience and make immaterial changes to the Agreement per Sections 20 and 26 of the Agreement, respectively; make changes to the service locations per Exhibits A-2 through A-9 and A-11 through A-14; amend staffing requirements per Exhibits A-3, A-9, A-11, A-12, and A-14; reallocate funds between funding sources with discretion per Exhibits B ADP and MHS; and amend the program goals, outcomes, and measures per Exhibits E ADP and MHS, 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 that do not involve any commitment to any specific project which 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:

The Department of Behavioral Wellness (BWell) requests approval of the termination of the FY 21-24 Agreement with **Good Samaritan Shelter** (Good Samaritan), effective June 30, 2023, and approval to enter into a new FY 23-27 Agreement with Good Samaritan to provide substance use disorder services and mental health services, for a total Maximum Contract Amount not to exceed **\$29,826,414**, inclusive of \$26,579,114 (\$7,072,799 for FY 23-24, \$7,041,549 for FY 24-25, \$6,636,966 for FY 25-26, and \$5,827,800 for FY 26-27) in Alcohol and Drug Program funding and \$3,247,300 (\$811,825 annually) in Mental Health Services funding, for the period of July 1, 2023 through June 30, 2027.

Background:

The Department of Behavioral Wellness provides a continuum of mental health and substance use disorder services to Santa Barbara County residents, in part, through contracted providers, including Community-Based Organizations (CBOs). Good Samaritan provides comprehensive Alcohol and Drug Program and Mental Health Services.

Good Samaritan provides the following ADP supportive services: Alcohol and Drug-Free Housing, Crisis Recovery, Engagement, Diversion and Outreach Stabilization Center (CREDO 47), CalWORKs Network Provider services, Recovery Residences, and Step-Down Housing. They also provide mandated DMC-ODS services: Contingency Management Services, Early Intervention, Outpatient Services, and Intensive Outpatient Services along with Residential Treatment and Withdrawal Management services. In addition, Good Samaritan provides Mental Health Services consisting of AB 1810 Safe and Stable Housing diversion services, homeless housing case management services, mental health shelter beds for homeless clients with mental illness and homeless clinician services.

On June 22, 2021, the Board of Supervisors approved the Agreement for Services of Independent Contractor with Good Samaritan for the period of July 1, 2021 through June 30, 2024 (referred to as BC 21-031). On April 5, 2022, the Board approved a First Amendment to the FY 21-24 Agreement to add ADP funds for CREDO47 Stabilization Center and Step Down Supported Housing, add MHS Coronavirus Emergency Supplemental Funding (CESF), update the Standard Terms and Conditions, update language for compliance with State and Federal regulations, and update various program exhibits including revising services and staffing where necessary. On January 24, 2023, the Board approved a Second Amendment to the FY 21-24 Agreement to reallocate FY 21-22 ADP and MHS funds to FY 22-23, with a \$2,210,348

increase in overall funds for FY 22-24 and a resulting maximum contract amount not to exceed \$20,640,387 for the period of July 1, 2021 through June 30, 2024.

BWell is required by the California Department of Health Care Services (DHCS) to select providers for ADP SUD services through a competitive bidding process. BWell's previous RFP for Outpatient Treatment Services took place in 2018. In anticipation of statewide California Advancing and Innovating Medi-Cal (CalAIM) reforms, effective July 1, 2023, BWell ADP released six Requests for Proposals (RFP) in October 2022 for various ADP SUD services. Good Samaritan was selected to provide Residential Treatment Services, Outpatient Services, and Recovery Residences Services in North and Mid County for FY 2023-2027, with services to begin on July 1, 2023. Therefore, BWell requests Board approval of the termination of Good Samaritan's FY 21-24 contract and execution of a new FY 23-27 contract.

CalAIM Payment Reform has resulted in significant changes to the boilerplate standard contract templates and entire payment and reimbursement structure for Medi-Cal providers. Due to establishment of a new rate structure by DHCS, Medi-Cal providers have taken this opportunity to renegotiate their rates as they transition to a Fee-for-Service based payment, resulting in a higher maximum contract amount.

Approval of the recommended actions will allow Good Samaritan to continue to provide necessary ADP and mental health services to BWell clients.

Performance Measure:

The FY 23-27 Agreement contains performance measures to monitor implementation and improve staff proficiency. Program goals, outcomes, and measures can be found in Exhibit E (pages 176-183) of the Agreement.

Performance Outcomes:

During the first three quarters of FY 2022-23, Good Samaritan accomplished the following:

- Recovery Point Acute Care Residential-Adult-Level 3.1: They served an average of 22 clients per quarter with an average of 13 discharges per quarter. They met 4 of their 5 goals. Goals met: All clients (100%) initiated treatment with a goal of 80% or more; no one immediately dropped out of treatment with a goal of 2% or less; 98% were engaged in treatment with a goal of 60% or more; and 19% of adults transferred to treatment/lower level of care within 14 days with a goal of 15% or more. Goal not met was 74% were abstinent of primary drug at discharge with a goal of 80%.
- Recovery Point Acute Care Residential-Adult-Level 3.2: They met 4 of their 6 goals. They served an average of 13 clients per quarter with an average of 12 discharges per quarter. Goals met: No one immediately dropped out of treatment with a goal of 4% or less; 69% successfully completed treatment with a goal of 50% or more; 53% of adults transferred to treatment/lower level of care within 14 days with a goal of 30% or more; and 100% were not readmitted within 30 days with a goal of 75% or more. Goals not met were 56% of adults were not readmitted with 14 days with a goal of 95% or more and 58% of adults were abstinent of primary drug at discharge with a goal of 100%.
- Recovery Point Acute Care Residential-Adult-Level 3.5: They met 2 of their 6 goals. They served an average of 4 clients per quarter with an average of 3 discharges. Goals met: No adults immediately dropped out of treatment with a goal of 4% or less; 63% successfully completed treatment with a goal of 50% or higher. Goals not met were 63% were abstinent of primary drug at discharge with a goal of 100%; 13% were transferred to treatment or a lower level of care within 14 days with a goal of 30%; 25% were not re-admitted within 14 days with a goal of 95%; and adults not re-admitted within 30 days was at 0% with a goal of 75%.

- Recovery Way Home-Adult Residential Level 3.1: They met 3 of their 5 goals. They served an average of 25 clients per quarter with an average of 18 discharges per quarter. Goals met: 100% of adults initiated treatment with a goal of 80% or more; 100% were engaged in treatment with a goal of 60% or more and 37% were transferred to treatment or a lower level of care within 14 days with a goal of 15% or more. Goals not met: 4% immediately dropped out of treatment with a goal of 2% or less; 72% were abstinent of primary drug at discharge with a goal of 80% or more.
- Transitional Center-Adult Residential-Level 3.1: They met 4 of their 5 goals and missed reaching the 5th goal by 1%. They served an average of 33 clients per quarter with an average of 19 discharges per quarter. Goals met: 91% initiated treatment with a goal of 80% or more; no one immediately dropped out of treatment with a goal of 2% or less; 95% were engaged in treatment with a goal of 60% or more; and 56% were transferred to treatment or a lower level of care within 14 days with a goal of 15% or more. Goals not met: 79% were abstinent of primary drug at discharge with a goal of 80% or more.
- Another Road Detox-Adult Residential Level 3.1: They met all 5 of their goals. They served an average of 13 clients per quarter with an average of 8 discharges per quarter. All clients initiated treatment with a goal of 80% or more; no clients immediately dropped out of treatment with a goal of 2% or less; 98% were engaged in treatment with a goal of 60% or more; all clients were abstinent of primary drug at discharge with a goal of 80% or more; and 33% transferred to treatment or a lower level of care within 14 days with a goal of 15% or more.
- Another Road Detox-Adult Withdrawal Management Level 3.2: They met 4 of their 6 goals. They served an average of 5 clients per quarter with an average of 5 discharges per quarter. Goals met: no clients immediately dropped out of treatment with a goal of 4% or less; 100% successfully completed treatment with a goal of 50% or more; 60% were transferred to treatment or a lower level of care within 14 days with a goal of 30% or more; 60% were not re-admitted within 14 days with a goal of 95% or more; and 60% were not re-admitted within 30 days with a goal of 75% or more.
- Project PREMIE-Adult Outpatient Level 1.0: They met all 5 of their goals. They served an average of 26 clients per quarter with an average of 12 discharges per quarter; 98% initiated treatment with a goal of 80% or more; 1% immediately dropped out of treatment with a goal of 6% or less; 95% were engaged in treatment with a goal of 75% or more; 49% were retained in treatment with a goal of 45% or more; and 54% successfully completed treatment with a goal of 50% or more.
- Project PREMIE-Adult Outpatient Level 2.1: There were no clients reported at this level.
- Recovery Point Outpatient-Adults-Level 1.0: They met 4 of their 5 goals. They served an average of 62 clients per quarter with an average of 26 discharges per quarter. Goals met: 98% initiated treatment with a goal of 80% or more; 4% immediately dropped out of treatment with a goal of 6% or less; 92% were engaged in treatment with a goal of 75% or more; and 57% successfully completed treatment with a goal of 50% or more. Goal not met: 40% were retained in treatment with a goal of 45% or more.
- Casa De Familia-Adult Outpatient Level 1.0: They met 3 of their 5 goals. They served an average of 20 clients per quarter with an average of 8 discharges per quarter. Goals met: 100% initiated treatment with a goal of 80% or more; no one immediately dropped out of treatment with a goal of 6% or less; and 90% were engaged in treatment with a goal of 75% or more. Goals

not met: 21% were retained in treatment with a goal of 45% or more and 42% successfully completed treatment with a goal of 50% or more.

- Casa De Familia-Adult Outpatient Level 2.1: They met 3 of their 5 goals. They served an average of 3 clients per quarter with 2 discharges. Goals met: All clients initiated treatment with a goal of 80% or more; no clients immediately dropped out of treatment with a goal of 6% or less; 67% were engaged in treatment with a goal of 60% or more. Goals not met: no clients were retained in treatment with a goal of 30% or more and no clients successfully completed treatment with a goal of 35% or more.
- Lompoc Recovery Center-Adult Outpatient Level 1.0: They met 4 of their 5 goals. They served an average of 64 clients per quarter with an average of 28 discharges per quarter. Goals met: 99% of clients initiated treatment with a goal of 80% or more; 2% immediately dropped out of treatment with a goal of 6% or less; 80% were engaged in treatment with a goal of 75% or more; and 45% were retained in treatment with a goal of 45% or more. Goal not met: 39% successfully completed treatment with a goal of 50% or more.
- Lompoc Recovery Center-Adult Outpatient Level 2.1: They met 3 of their 5 goals. They served an average of 6 clients per quarter with an average of 2 discharges per quarter. Goals met: All clients initiated treatment with a goal of 80% or more; 6% immediately dropped out of treatment with a goal of 6% or less; 60% were engaged in treatment with a goal of 60% or more. Goals not met: no clients were retained in treatment with a goal of 30% or more and 14% successfully completed treatment with a goal of 35% or more.
- Turning Point-Adult Outpatient Level 1.0: They met 3 of their 5 goals. They served an average of 19 clients per quarter with an average of 11 discharges per quarter. Goals met: all clients initiated treatment with a goal of 80% or more; no one immediately dropped out of treatment with a goal of 6% or less; 45% were retained in treatment with a goal of 45% or more. Goals not met: 66% were engaged in treatment with a goal of 75% or more, and 36% successfully completed treatment with a goal of 50% or more.
- Turning Point-Adult Outpatient Level 2.1: There were no clients reported at this level.
- Perinatal: They did not meet their 2 goals. They served an average of 5 clients per quarter with an average of 7 discharges per quarter. Goals not met: There were 9 births; 56% were abstinent at discharge/drug-free births with a goal of 100% and 36% successfully completed treatment with a goal of 70% or more.
- CREDO47 Stabilization Center: They met 1 of their 4 goals. They served an average of 60 clients per quarter. Goal met: 45% of clients were referred to other services (Vets services, food distribution, clothing, personal/grooming needs, household goods, local transportation or educational support services) with a goal of 30% or more. Goals not met: 19% were referred to SUD or MH Treatment Services with a goal of 50% or more; 1% was referred for healthcare services with a goal of 65% or more; and no one was referred to step-down housing with a goal of 50% or more.
- Step-Down Supported Housing – They met 3 of their 13 goals. They served an average of 13 clients per quarter with an average of 5 discharges per quarter. Goals met: 63% were engaged in a purposeful activity with a goal of 40% or more; of those discharged, 13% were discharged to a higher level of care with a goal of 15% or less; and 51% were referred to SUD or MH treatment with a goal of 50%. Goals not met: 75% had stable/permanent housing with a goal of 95% or more; of those discharged, 44% were discharged to a lower level of care with a goal of 85% or more; 52% initiated treatment with a goal of 60% or more; 46% were referred to healthcare

services with a goal of 50% or more; 48% were referred to other services (Vets services, food distribution, clothing, personal/grooming needs, household goods, local transportation or educational support services) with a goal of 50% or more and 15% obtained permanent housing with a goal of 75% or more.

- **AB 1810 Safe and Stable Housing:** They met 7 of their 13 goals. They served an average of 4 clients per quarter with an average of 2 discharges per quarter. Goals met: There were no incarcerations with a goal of 5% or less; no admissions for acute psychiatric inpatient care with a goal of 5% or less; no emergency care treatment for physical health with a goal of 10% or less; no hospitalizations for physical health with a goal of 10% or less; 100% had stable/permanent housing with a goal of 95% or more; 100% were engaged in a purposeful activity with a goal of 40% or higher; and of those discharged, 14% were discharged to a higher level of care with a goal of 15% or less. Goals not met: 43% were discharged to a lower level of care with a goal of 85% or more; 22% were referred to SUD or MH treatment services with a goal of 50% or more; 33% initiated treatment with a goal of 60% or more; 6% were referred to healthcare services with a goal of 50% or more and no one was referred to other services (Vets services, food distribution, clothing, personal/grooming needs, household goods, local transportation or educational support services) with a goal of 50% or more.

Fiscal and Facilities Impacts:

Budgeted: Yes

Fiscal Analysis:

| Funding Sources | FY 23-24 Cost: | FY 24-25 Cost: | FY 25-26 Cost: | FY 26-27 Cost: | Total FY 23-27: |
|------------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------------|
| General Fund | | | | | |
| State | \$ 4,416,543 | \$ 4,385,293 | \$ 3,980,710 | \$ 3,171,544 | \$ 15,954,090 |
| Federal | \$ 3,276,445 | \$ 3,276,445 | \$ 3,276,445 | \$ 3,276,445 | \$ 13,105,780 |
| Fees | | | | | |
| Other: | \$ 191,636 | \$ 191,636 | \$ 191,636 | \$ 191,636 | \$ 766,544 |
| Total | \$ 7,884,624 | \$ 7,853,374 | \$ 7,448,791 | \$ 6,639,625 | \$ 29,826,414 |

Narrative: The above-referenced Service Agreement is funded by State and Federal funds. The funding sources were included in the FY 23-24 Adopted Budget. The backdated portion (from July 1, 2023 through July 18, 2023) of the new Agreement will be funded by State funds. Funding for FY 24-27 will be included in subsequent Proposed Budgets and is contingent upon Board approval.

In the new Agreement, the FY 23-24 maximum contract amount is \$7,884,624, which represents approximately an 18.4% increase to the FY 23-24 maximum contract amount of \$6,657,668 in BC 21-031. DHCS’ new Medi-Cal rate structure has prompted service providers to increase rates as they transition to a Fee-for-Service based payment, resulting in a higher maximum contract amount.

Key Contract Risks:

As with any contract funded by State and Federal sources, there is a risk of future audit disallowances and repayments. BWell contracts include language requiring contractors to repay any amount disallowed in audit findings, minimizing financial risks to the County.

For programs funded by Proposition (Prop) 47, the California Board of State and Community Corrections (BSCC) Prop 47 Grant Agreement includes a budget contingency clause which declares that the grant agreement is valid and enforceable only if sufficient funds are made available through the annual transfer of savings generated by Proposition 47 from the General Fund to the Safe Neighborhoods and Schools

Fund and subsequent transfer from the Safe Neighborhoods and Schools Fund to the Second Chance Fund (Gov. Code, § 7599.1 & Pen. Code, § 6046.2). On or before July 31st of each fiscal year, the Department of Finance will calculate the state savings associated with Proposition 47 and certify the calculation to the State Controller who shall transfer those funds to the Safe Neighborhoods and Schools Fund (Gov. Code, § 7599.1). The grantee agrees that BSCC's obligation to pay any sum to the grantee under any provision of the BSCC Grant Agreement is contingent upon the availability of sufficient funding transferred to the Safe Neighborhoods and Schools Fund and subsequent transfer to the Second Chance Fund. If funding for any fiscal year is reduced or falls below the Cohort 2 Prop 47 Request For Proposals estimate, the BSCC may cancel the agreement or propose it be amended with the County's approval. If the County does not agree to amend the BCSS Grant Agreement, the agreement will be canceled and the County will have no obligation to continue providing services.

For the AB 1810 Safe and Stable Housing program, the California Department of State Hospitals (DSH) will disperse grant funds in installments upon County meeting target goals. In order for the County to receive funds, it must meet target population goals defined as a Mental Health Diversion Client participating in the program for a minimum 30 days or completing the program within 30 days. The project team anticipates no difficulty in meeting the performance targets. The contract requires the County to provide all services to Diversion Clients including medical care. If County is unable to serve the proposed number of clients due to actual client costs exceeding the level of funds available, the contract may be amended by DSH. There is also a budget contingency clause which absolves the State from liability to pay funds or other consideration under the Agreement if funds are not budgeted for the program, in which case the County may cease providing services under the Agreement. The County may also cancel the contract upon 50 days' written notice to DSH.

Special Instructions:

Please email one (1) complete executed contract and one (1) minute order to Bethany Le at bethle@sbcbswell.org and to the BWell Contracts Division at bwellcontractsstaff@sbcbswell.org.

Attachments:

Attachment A: Good Samaritan FY 21-24 Draft Termination Letter

Attachment B: Good Samaritan FY 23-27 BC

Authored by:

D. Morales, B. Le