

**A CONTRACTED SERVICE DELIVERY MODEL:
THE ALAMEDA COUNTY BEHAVIORAL SERVICES DEPARTMENT**

Charles Couch*

There is a literary allusion that says, in effect, *...a stranger in a strange land ...speaks and understands poorly... I* experienced the truth of this statement during my internship.

For my BASSC internship, I visited the Alameda County Behavioral Services Department's contracts operation under the mentorship of Nancy Fernandez. Since that organization was the result of a fairly recent combination of the Mental Health and Drug and Alcohol Departments, I focused on the contracting model that had been developed in mental health. Ms. Fernandez is not only a talented professional but a very focused and organized mentor host. My experience afforded me the opportunity to interview people in the organization, look at documents and sit in on the dynamics of the on going operations.

As a product of a solely social service agency, previously, I worked with mental health programs as ancillary services for which I had no administrative responsibility. To appreciate the nature of the contracts management that I was observing, I had to constantly work out the differences between mental health and social service orientations, while all the time *understanding the words poorly*. There are two fundamental characteristics of mental health which are different than social service.

1. The originating State legislation created county level mental health services as community based. From the beginning, mental health has had an organizational assumption that service delivery would be community based, and that community based organizations would be integral to the provision of services. This assumption of the origination of service coming from the community rather than a governmental agency is diametrically opposed to the social service model which assumes the service delivery agent is the governmental agency with only ancillary services coming from the client community.
2. In mental health, not only have service delivery contracts been utilized but the same contractors have been service providers for long periods of time. Counties are free to decide how and when to conduct public bid processes. As a result negotiation is used more frequently to adjust program delivery, with the changes being arrived at jointly between the agency and the contractor. and the contract devised as a representation of that joint planning process.

Since I visited only Alameda County rather than an exhaustive sample of existing models, I am limiting my comments to the model I saw in operation in that county. There were, some important characteristics that seemed to me, *a stranger in a strange land*, worth noting. Some of the *unique* features of the Alameda model were:

- In conformity with the nature of mental health sighted above, Alameda contracts are renewed on a yearly basis but not necessarily as the result of public bids. The design of the contract agreements are most often the result of joint contractor and staff planning processes which may include revenue sources outside of the county controlled funding.

*Charles Couch is a Contracts Manager in the Administrative Services Office of the Contra Costa County Social Services Department.

- The Department's budget reflected the cost of services by not only including County, State and Federal dollars but also the outside funding that contractors brought in to fund the same programs that were under contract to the county. Consequently, they reflected the fullest costs of the services provided to the community.
- Many of the same services are provided by different organizations, but to different target populations. This is a recognition of the unique qualities community based organizations (CBO's) can contribute because of special relationships to client communities. They also become by projection advocates for the specific needs of certain communities.
- The same services may be provided by public agency staff as by contract organizations in parallel and interlocking systems. The nature of the target communities and the availability of appropriate resources have determined what the service delivery would look like. The inter-related nature of the service systems are reinforced as both agency and contractor personnel work out "seamless" services.
- The same management information system (MIS) was used in the contracted service delivery as the county staff operated services. Contractor management utilized the MIS data as management tools like the county did. Clients were tracked from intake through their whole involvement in mental health services. The units of service being counted and evaluated are common to contractor and agency service providers alike.
- Meetings (of which there were many) were used as a major communication medium and were participated in by contractors on an egalitarian basis. One of my first problems was figuring out who was a contractor in the meetings. They did not act any differently than the county staff. They even suggested in one meeting that the responsibility for running, recording and setting the agendas would be better handled by rotation among the regular participants which included contractors.
- Alameda experiences an overall benefit of having contractors feel an equal part of the service provision system.
 1. Because they are part of setting the priorities, they buy into the priority system. Open sharing of the available resources starts everyone from the same page in evaluating what needs to be done and what is available to do it with.
 2. When they are part of the development process, contractors can end up bringing in outside resources to augment the delivery system. They recruit skills and resources beyond those the county agency can provide.
 3. Contractors can be co-advocates in the political priority setting. Particularly when the clients served are not a vocal advocate for the provision of services, contractors become a viable source of advocacy with in the political process of priority setting.

4. Though they obviously develop their vested interests, contractors are open to change and adjustment in a way that governmental agencies can not be. They bring flexibility to the partnership so that the result is a joint resiliency not typical of governmental systems.
- On-going relationships between contractors and governmental agencies vest the contractors in a way that open, reoccurring bidding processes can not do. Instead of having to utilize resources to respond to bid processes, vested contractors can be utilizing their management resources to develop and manage programs. The importance of this grows as the speed and frequency of program change increases.
 - The manager` of a viable monitoring and evaluation process is more important in a continuing service than the renewal by public bid. If there is a drop dead date for the service (such as the end of the contract), there is little incentive to make the managerial adjustments necessary to continually upgrade and improve the service. But if the contract rolls over, it automatically gives both the contractor and the county a built in review and readjustment point in the time line of service.
 - The effectiveness of a regular competitive bid process depends upon not only a well run county marketing of needed service, but the availability of a large enough pool of capable providers of these services. There are seldom enough alternative service providers to guarantee an open market place for competitive bid on a regular basis. This is particularly true in terms of the kind of services mental health programs require.
 - Knowing the nature and ever-changing needs of the targ,°ted client communities is one of the highest priorities for the governmental agencies. CBOs are a critical link to those targeted communities. giving a professional perspective on the uniqueness of the targeted clients.
 - Knowing and shepherding the available resources for the delivery of services specific to those communities is the real work of the Alameda Mental Health contract management system. The survival of a viable service system requires the agency to be sensitive to the needs of community based organizations for sustaining resources and talents, and to recognize the necessity of their fund raising and political support development.
 - It was a policy decision of the Alameda County Board of Supervisors to raise the contract funded levels for Mental Health contractors through cost of living allocations over a number of years. The higher level of funding made it possible for a more equitable salary scale to be established between what governmental agencies give their employees and the CBOs pay. The assumption on the part of the Board was that with-out greater equity the delivery of services would drift in the direction of CBOs because of lower costs and then the contracted service costs would rise because of limitation of service providers. The Board chose to keep a mix of equals and thereby keep more service delivery options open .

Though it is a quantum leap from the model I was observing to the organization I work in, there are two critical and transferable elements. This is particularly so if the emerging Social Service funding

Contractor Support

No matter how we award contracts we need a supply of available and capable contractors with whom to enter into service deliver agreements. If Contra Costa Social Service expects to expand its partnership with local CBOs for service delivery, it is necessary to develop a long range perspective. We can only partner with someone who exists and who can provide the type of service we need. Developing and husbanding the contractor resources becomes part of joint interest. Alameda's system is the result of long standing concern for, and support of, the development and maintenance of community based interest groups who can contract with the County department

In addition to the development of resources, the support and strengthening of non-profit organizations is required so that they can meet the program and financial management systems necessary for grant funded programs. When you are in a partnership you can't allow your partners to sink or you sink with them. In Alameda's model the common management information system provides both program and financial monitoring tools to meet the management needs of both the agency and the contractor. Short of that type of common system. the development of training and consulting resources available to assist contractors meet their management needs can be critical to the assurance of having service delivery resources available to the County.

Contract Management

Also important is **the** existence of contract management as an integral organizational management System. Contract management in Alameda is a full service operation. It includes financial and program, planning and review. The separation of budget review from program review weakens both the agency and the contractor in their ability to provide service. Alameda uses contract monitoring staff who encompass both roles with backing from technical contracts and financial staff. The contract monitors are team leaders for agency staff. They keep the big picture always in front of them. making sure the contracted activities are on track for the contract period and in line with the longer term goals the agency is moving towards. Where there are divergences developing, the monitor calls for what ever consultation is necessary. Where there are new directions of service needs being identified from within the agency or the community, it is the contract monitor who leads the consultive planning with contractors (current and potential) and what ever agency staff as is necessary. Contract monitoring is not control. It is management.

Whether in social service or in mental health. contract management never loses sight of the interests of the client community and how to meet those interests with community based contracting resources. No matter whether we are starting new programs or revising existing ones. the insight of the community based organizations is a valuable resource that should not be overlooked. They often have a better understanding of the target communities' willingness to accept or be involved with programs than any one else. They can bridge the professional vision and the client vision. In many circumstances CBOs can create program buy-in from the target community when the governmental agency acting alone, would only generate distrust.

It appears to me that as the Contra Costa Social Service Department moves toward being a provider of enabling services to our client individuals and families, expanded contracting can be the most important means of that change. But, contracting for service does not absolve us of responsibility, rather it commits us to partnerships. Partnerships in turn give both advantage and responsibility. We must be prepared to accept the challenges of both.