

Request for Letters of Interest (LOI) No. MHC/035

**Dialectical Behavior Therapy
Release Date: December 18, 2024**

**DEADLINE TO EXPRESS INTEREST
By 5:00 PM Pacific Standard Time (PST), January 6, 2025**

The County of Sacramento Department of Health Services (DHS), Behavioral Health Services (BHS), is seeking qualified organizations to build staffing capacity to provide Dialectical Behavioral Therapy (DBT) services to Sacramento County Specialty Mental Health Plan (MHP) beneficiaries ages 25 and under. It includes, but is not limited to, organizations that serve Transition Age Youth. Providers will access this training pool to train staff to provide DBT services and follow the Program Fidelity Scale (PFS). The PFS is found at this [link](#). BHS will contract with qualified organizations which will be expected to access DBT training, implement the training to their staff, implement DBT services, follow the PFS and collaborate with BHS related to data collection around the training and services provided.

A. PURPOSE

BHS was awarded the Children and Youth Behavioral Health Initiative (CYBHI) Round Two: Trauma-Informed Programs and Practices grant which intends to scale up trauma-informed care available to children, youth, parents, and caregivers in California. Trauma-informed care addresses how trauma may impact an individual's life and response to behavioral health services, understanding the prevalence of trauma; recognizing how trauma affects an individual; and responding by putting knowledge into practice. Specifically, BHS will be utilizing this Round Two award to support Specialty Mental Health Plan providers who serve individuals ages 25 and under to access training to offer Medi-Cal funded DBT services for clients struggling with trauma and disordered eating/eating disorders. These funds are intended to expand and create culturally relevant and responsive services for individuals ages 25 and under to prevent and mitigate Behavioral Health (BH) concerns and promote well-being for the individual and to support trauma-informed approaches for parents, caregivers and individuals.

DBT is especially effective for people who have difficulty managing and regulating their emotions. DBT has proven to be effective for treating and managing a wide range of mental health conditions, including:

- Borderline personality disorder (BPD).
- Self-harm.
- Suicidal behavior.
- Post-traumatic stress disorder (PTSD).
- Substance use disorder.
- Eating disorders, specifically binge eating disorder and bulimia.
- Depression.
- Anxiety.

It is important to note that the reason DBT has proved effective for treating these conditions is that each of these conditions is thought to be associated with issues that result from unhealthy or problematic efforts to control intense, negative emotions. Rather than depending on efforts that cause problems for the person, DBT helps people learn healthier ways to cope.

The type of DBT training is not explicitly identified; providers have flexibility in determining their training approach. However, it is imperative that any training acquired by the agency ensures sufficient education to deliver DBT services and follow PFS, which are billable through Medi-Cal services. Agencies interested in accessing this training opportunity are encouraged to train their staff in cohorts to effectively manage the demands of this modality and fulfill the consultation requirements of DBT. The following delineates the scope of work and data requirements for accessing this training pool.

B. SCOPE OF WORK OVERVIEW

CONTRACTORS will:

1. Train staff either directly or through a sub-contractor, virtually or in person, to implement DBT and follow PFS within current MHP program. This should include DBT services and clinical supervision/training as listed below:
 - a. DBT clinical training
 - b. DBT skills training
 - c. DBT consultation teams

- d. Individual psychotherapy for clients
 - e. DBT skills coaching for clients
 - f. In-the-moment phone coaching for clients enrolled in DBT treatment
2. Participate in data collection process in collaboration with BHS which will include:
- a. Client-level data (minimal identifying information)
 - b. Complete National Outcome Measures (NOMs) at intake and discharge for clients enrolled in DBT treatment.
 - c. If clinical outcomes apply, selecting from this list of four clinical outcome measures is required:
 - i. Parental Stress Scale
 - ii. Stress and Difficulties Questionnaire
 - iii. Child PTSD Symptom Scale
 - iv. Outcome Questionnaire (OQ) Measures
 - d. Facilitate quarterly evaluation of DBT trained staff to evaluate level of satisfaction in training and consultation and evaluate further needs of staff. Utilize Attachment D for the questions required as minimum of regular staff evaluation.
 - e. Provide data to COUNTY related to below objectives through Fiscal Year 2025-2026:

Objective	Outcome Measurement Method
Provide DBT training annually as presented in training plan to work with individuals aged 25 and under who present with trauma and/or disordered eating.	Attendance log (Attachment E) of training participation will be utilized to track number of attendees and number of trainings. Contracted agency will provide attendance records to County quarterly.
Provide consultation as presented in training plan to participants of trainings.	Attendance logs (Attachment E) of consultation participation will be utilized to track frequency of consultation, and attendees. Contracted agency will provide attendance records to County quarterly.
85% of staff who were training by this contract and are providing DBT services will express satisfaction with training and consultation offered.	Number of attendees sampled, during the reporting period, who indicate they agree or strongly agree on the evaluation form that they are satisfied with DBT training

	and support provided by the agency (See Attachment D for minimum questions). Contracted agency will provide evaluation data for this question to County quarterly.
Contracted agency will meet DBT fidelity standards 85% of the time.	Program will conduct internal review utilizing appropriate fidelity instruments and share with County at the end of the 2 nd and 4 th quarters.
50% of individuals who have a trauma related diagnosis and/or a disorder eating/eating disorder diagnosis (see Attachment C) will receive DBT treatment.	Number of served individuals identified with a diagnosis listed on Attachment C who received at least one DBT service (Medi-Cal billable service) divided by the total number of clients served with a diagnosis listed on Attachment C.

C. AVAILABLE FUNDING

1. Approximate Available Program Funding for all awarded contractors: \$265,110

Fund Source	Total Available Funds for FY 2024/2026
CYBHI	\$265,110
TOTAL	\$265,110

Funds will be available through a training pool and will be monitored quarterly.

2. Interested providers can request funding until training program funding is depleted. The County will determine the distribution of funds among contracting agencies.
3. Total amount of funding will be based on the training plan (Attachment A) and training budget submitted (Attachment B) with this LOI and is intended for training and/or consultation of staff. Agencies will need to submit a training budget (Attachment B) to request or change funding allocations. Any treatment services using DBT will be paid through the unit-based invoicing through one of the organization's existing contracts (e.g. Flexible Integrated Treatment, Wraparound, Full-Service Partnership, and/or Community Outreach Recovery Empowerment).

4. By accessing this funding, the agency is committing to provide DBT services and follow PFS which include the below client services and clinical supervision/training:
 - a. DBT clinical training
 - b. DBT skills training
 - c. DBT consultation teams
 - d. Individual psychotherapy for clients
 - e. DBT skills coaching for clients
 - f. In-the-moment phone coaching for clients enrolled in DBT treatment
5. Organizations are encouraged to utilize train the trainer courses to help their DBT program be sustainable for long term.
6. The County reserves the right to make adjustments to the total contract amount.

D. REQUEST FOR LOI SUBMISSIONS INSTRUCTIONS

The Request for LOI No. MHC/035 for DBT requires:

1. Organizations to complete and submit the DBT LOI form and meet the Minimum Qualifications stated on the LOI form attached below.
2. Must submit training plan (Attachment A) and a Budget Template (Attachment B) of proposed amount of funding the provider would like to request.

3. LOI forms must be received by email at the email address below:

DHS-BHS-LOIMHC035@sacounty.gov

Email subject line must read, "LOI No. MHC/035"

4. **LOI not received by 5:00 pm (PST) on January 6, 2025, at the above email address will be rejected.** LOI forms received by any other email address or means will not be accepted. It is the responsibility of the organization to submit the LOI form by the time and date to the email address specified above.
5. **Faxed, mailed or hand-delivered submissions will not be accepted.**

6. The Request for LOI is non-binding and does not obligate the applicant to contract with the County.
7. **A response to this Request for LOI is required for an organization to receive funding and contract with the County.**
8. **Please note that receipt of response does not guarantee funding.**

E. Rights of the County

This will be the only advertisement of this request for LOI. The County of Sacramento reserves the right to:

1. Cancel this public notice and/or issue an RFA or RFP for these services, to reject any or all LOI submissions, determine which LOI shall be accepted, and request additional information or documentation from organizations.
2. Only those agencies that successfully submit an LOI to this public notice are eligible to participate in a procurement process, if utilized in the future, and pending award of additional grant funding.
3. Make a contract award to one or more organizations for all or part of the services.
4. Issuance of this LOI in no way constitutes a commitment by the County to award a contract.

Letter of Interest Form ON NEXT PAGE

LOI Form ON NEXT PAGE

Dialectical Behavior Therapy (DBT) Letter of Interest (LOI) Form

Request for LOI No. MHC/035

Both pages of this LOI form must be completed in full without alteration to the form.

Organization's Legal Name:	
The individual to whom all information regarding this Letter of Interest shall be transmitted to:	
Primary Point of Contact Name/Title:	
Address:	
City, State and ZIP Code	
Telephone:	
Contact E-Mail	

Complete Next Page

Submission of this LOI form serves as notice that our organization is interested in contracting for DBT training services.

Minimum Qualifications:

1. Organization is a current Sacramento County Outpatient Specialty Mental Health Plan Provider and serves individuals ages 25 and under. Outpatient Specialty Mental Health Plan Provider includes Flexible Integrated Treatment (FIT), Wraparound, Full Service Partnership (FSP), and Community Outreach Recovery Empowerment (CORE).
2. Organization is able to implement their training plan within 3 months of submitting this LOI.
3. Organization is in compliance with any corrective action plans with Sacramento County as confirmed by County.
4. Single agency responses only. No collaborations, partnerships or multi-agency responses will be accepted.

I hereby certify that my organization meets all of the above Minimum Qualifications:

Signature of Organization Director or Designee

Date

Printed Name/ Title:

Complete and submit Attachment A: Training Plan and Attachment B: Budget Template with the completed LOI form.

Attachment A: Training Plan

Submitting Organization:

Summary of DBT Training to be Implemented (no more than 250 words)
Number and information of type of Staff to be Trained (Title, classification)
Description of Fidelity Measurement Tool (no more than 250 words)
Sustainability Plan (no more than 250 words)

Attachment B: Budget Template

Submitting Organization:

Budget	Please provide a detailed description of the cost associated with each category	Total Amount Requested
Training Costs		
Travel (If applicable, for in person trainings)		
Total Amount Requested		\$

Attachment C: List of Diagnoses Supported by DBT Treatment

Diagnoses which will be prioritized when accessing this training pool.

Eating Disorder/Disordered Eating Diagnoses

F50.00	Anorexia nervosa, unspecified
F50.01	Anorexia nervosa, restricting type
F50.02	Anorexia nervosa, binge eating/purging type
F50.2	Bulimia nervosa
F50.81	Binge eating disorder
F50.82	Avoidant/restrictive food intake disorder
F50.89	Other specified eating disorder
F50.9	Eating disorder, unspecified
F45.22	Body dysmorphic disorder

Trauma Related Diagnoses

F43.10	Post-traumatic stress disorder, unspecified
F43.11	Post-traumatic stress disorder, acute
F43.12	Post-traumatic stress disorder, chronic
F43.0	Acute stress reaction
F48.1	Depersonalization-derealization syndrome

Attachment D: Staff Evaluation Questions

These two questions should be included in staff evaluation of DBT programing by the agency. The agency can include other questions, but these two are required. These evaluations should be completed by staff and submitted to County Contract Monitor after the 2nd and 4th quarter.

1. I am satisfied with DBT training and support provided by _____ . Please choose one:

Strongly Agree

Agree

Neutral

Disagree

Strongly Disagree

2. I want/need support in these areas to better serve clients with DBT:

