

Preventing and Responding to Adverse Childhood Experience (ACE)-Associated Health Conditions and Toxic Stress in Clinics through Community Engagement (PRACTICE) Statewide Learning Collaborative

Roles and Responsibilities of the Community-Based Organization

The [UCLA-UCSF ACEs Aware Family Resilience Network \(UCAAN\)](#) in collaboration with the [Office of the California Surgeon General \(CA-OSG\)](#), [Department of Health Care Services \(DHCS\)](#), and [Population Health Innovation Lab \(PHIL\)](#), a program of [Public Health Institute \(PHI\)](#), are pleased to announce a Request for Proposal (RFP) for a new statewide learning collaborative. PRACTICE will support the efforts of clinical teams to address toxic stress in local communities.

The lead applicant will form a project team that *must* include members from each of the following:

1. A primary care clinic or [clinic consortia](#) serving primarily Medi-Cal beneficiaries,
2. A community-based organization (CBO), and
3. A Medi-Cal managed care plan serving the partnership community.

The primary care clinic or clinic consortia serving primarily Medi-Cal beneficiaries will serve as the lead applicant organization for PRACTICE. Visit www.pophealthinnovationlab.org/PRACTICE for up-to-date information and to apply for the RFP.

Role of the Community-Based Organization

Community-based organizations (CBO) play a crucial role on the project team by providing the services that treat, reduce, and heal the effects of ACEs and toxic stress. Many services provided by the CBO are eligible for reimbursement under [SB 428 \(Hurtado\)](#). This includes the [Community Supports for Social Drivers of Health](#) that are rolling out as part of California Advancing and Innovating Medi-Cal (CalAIM).

As part of the project team, CBOs will:

- Contribute to project planning and implementation efforts.
- Participate in the PRACTICE statewide learning collaborative.
- Create strategies and pathways to receive referrals from the lead clinic entity.
- Seek opportunities to integrate trauma-informed practices into their organizations and workflow.

Additional responsibilities could include:

- Contributing to a sustainable workforce to include Care Coordinators, Community Health Workers, Doulas, Peer Support Specialists, and/or other paraprofessionals.

- Implementing or expanding billing capacity for the project team to provide sustainable, community-informed, evidence-based services for Medi-Cal beneficiaries. For example, by contracting with a Medi-Cal managed care plan.
- Providing [CalAIM Community Supports services](#) either directly or indirectly. For example, by contracting with qualified service providers.
- Providing backbone support to the lead clinic entity. For example, the clinic lead entity could contract with a CBO to obtain this support.

Additional Information on PRACTICE

Up to 30 teams will receive funding through the PRACTICE initiative, each ranging from \$500,000 to up to \$1 million, with the goal of increasing the capacity of Medi-Cal primary care organizations/clinics, community-based organizations (CBOs), and Medi-Cal managed care plans to leverage existing and new sources of state funding to:

- Strengthen partnerships to screen for ACEs in order to identify clinical risk for and respond to toxic stress.
- Develop sustainable, practical, community-informed, evidence-based services that target toxic stress physiology and ACE-Associated Health Conditions, and support the prevention of ACEs and toxic stress.
- Build a sustainable workforce to support ACE screening, toxic stress response, and prevention of ACEs, toxic stress, and ACE-Associated Health Conditions.

A Letter of Intent to apply to the RFP is due on May 13, 2022, 5 p.m. PDT. Applications are due by June 13, 2022, 5 p.m. PDT, unless otherwise posted. The contract resulting from the RFP will begin around August 2022 and end in June 2023, pending state budget approval.