



California Institute for Behavioral Health Solutions

&

Riverside University Health System -Behavioral Health

REQUEST FOR PROPOSAL #01: CIBHS-RUHS CULTURAL COMMUNITY LIAISON

JUNE 10, 2026

For complete information regarding this project, see Request for Proposal (RFP) posted at [CIBHS.org](https://www.cibhs.org)

For all inquiries please contact: CCLProject@cibhs.org

RESPONSE DUE

July 24, 2026, 5 PM PST

Electronic Submission Only

Note: *It is the applicant's responsibility to check the request for proposals website, or to contact the RFP point-of-contact identified on this cover page for any addenda issued to this RFP. CIBHS and RUHS-BH shall not be responsible for any incomplete proposal submitted as a result of missing addenda, attachments, or other information regarding this RFP.*

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REQUEST FOR PROPOSAL #01: CIBHS-RUHS CULTURAL COMMUNITY LIAISON

1. INTRODUCTION & PROJECT BACKGROUND

1.1 Agency Mission and Project Background

About the California Institute for Behavioral Health Solutions (CIBHS): Founded in 1993, (CIBHS) is a statewide non-profit organization with a three-decade legacy of shaping and strengthening California’s behavioral health landscape. CIBHS operates at the intersection of clinical excellence, policy implementation, and systemic transformation. We serve as a strategic bridge between visionary health policy and real-world application, specializing in implementation science and the delivery of equitable care.

Our mission is to advance behavioral health systems designed to serve all people, shaped by local communities, and grounded in strong evidence. At the heart of our work is a commitment to "generative equity", moving beyond simply reducing disparities to actively creating conditions where local communities can build, own, and sustain their well-being and opportunity over time. We achieve this by seamlessly integrating standard Evidence-Based Practices (EBPs) with grassroots Community-Defined Evidence Practices (CDEPs), ensuring our impact is guided equally by rigorous data and firsthand lived experience.

The Partnership with Riverside County Behavioral Health Services

CIBHS has partnered with Riverside University Health Systems-Behavioral Health (RUHS-BH) to operate this Cultural Community Liaison (CCL) initiative. Riverside County is geographically vast and structurally diverse, containing distinct regions that require tailored, culturally responsive approaches to mental health and substance use care.

While the County offers robust clinical networks and support systems, structural barriers, linguistic gaps, and historical mistrust often prevent individuals in marginalized or underserved communities from accessing the care they need.

Through this partnership, CIBHS will provide fiscal administration, technical infrastructure, and strategic oversight for the CCL program. Meanwhile, selected independent contractors will act as the vital, front-line architecture, supporting the translation of the County’s clinical resources into trusted, localized, and community-led solutions. Together, we aim to ensure that the voices of Riverside County’s diverse residents directly shape, inform, and improve the delivery of behavioral health care across the county.

1.2 Project Purpose and Scope

RUHS-BH is committed to advancing behavioral health equity, improving access to care, and reducing disparities in mental health and substance use services throughout Riverside County. In alignment with the goals and priorities of the Behavioral Health Services Act (BHSA), RUHS-BH seeks to strengthen meaningful engagement with historically underserved, underrepresented, and culturally diverse communities through the implementation of a CCL program.

Riverside County is one of California's most geographically and culturally diverse counties, encompassing urban, suburban, rural, mountain, and desert communities. Many communities continue to experience barriers to behavioral health access, including stigma, language barriers, transportation challenges, lack of culturally responsive services, and mistrust of systems of care. RUHS-BH recognizes that authentic community engagement and partnership are essential to reducing disparities and ensuring behavioral health services are accessible, equitable, culturally grounded, and responsive to community needs.

Through this Request for Proposals (RFP), CIBHS seeks qualified individuals to serve as CCLs for targeted populations and communities across Riverside County. The CCLs will function as trusted community connectors and partners who help bridge communication and engagement between RUHS-BH and the communities they serve. CCLs will support outreach, engagement, education, stigma reduction, community-informed planning, and feedback gathering efforts related to behavioral health services and BHSA implementation activities.

The selected CCLs will play a critical role in:

- Building and strengthening relationships between RUHS-BH and underserved communities;
- Increasing awareness of available behavioral health services and resources;
- Supporting culturally and linguistically responsive outreach and engagement efforts;
- Identifying community strengths, needs, barriers, and priorities;
- Promoting inclusion of community voices in BHSA planning and implementation processes;
- Advancing behavioral health equity and access across Riverside County; and
- Supporting BHSA planning efforts.

Through this RFP, CIBHS is seeking to contract with nine (9) CCLs, with one liaison dedicated to serving each identified targeted population or community. Applicants should demonstrate strong community relationships, cultural knowledge, lived and/or professional experience working with the identified population, and the ability to engage communities in a respectful, collaborative, and culturally responsive manner.

The nine (9) targeted communities/populations are:

- a. Asian Pacific Islander Desi American & Native Hawaiian (Bilingual Mandarin Chinese preferred)
- b. Black/African American
- c. Deaf/Hard of Hearing (ASL fluency required)
- d. Hispanic/Latino/Latina/Latinx/Latine´ (Professional bilingual Spanish fluency required)
- e. LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Questioning/Queer, Intersex, Asexual +)
- f. Middle Eastern/North African
- g. Native American/American Indian
- h. People with Disabilities
- i. Spirituality/Faith-Based

1.3 Contractor Model and Operational Flexibility

Independent Contractor Status (1099) Selected candidates will be retained strictly as **Independent Contractors (Form 1099)** and not as employees of CIBHS and RUHS-BH. Contractors are responsible for their own business expenses, insurance, licensing, and state/federal tax self-withholding.

Why This Model Matters for Community Work

Traditional, rigid 8-to-5 employment schedules often create a barrier to authentic cultural engagement. By utilizing an Independent Contractor model, this program intentionally grants you the **full operational flexibility** required to do impactful, grassroots work.

As a contractor, you will have the autonomy to:

- **Set Your Own Hours:** Align your weekly schedule with the pulse of the community you serve. This includes shifting your availability to evenings, weekends, or specific cultural events or programming when outreach is most effective. It also includes attending required meetings/activities as outlined in the scope of work.
- **Control Your Methods:** Rely on your unique cultural expertise and trusted community relationships to determine *how* best to engage residents, run workshops, or build partnerships, while functioning within the expressed objectives of the contract with CIBHS and the requirements of the BHSA and RUHS-BH.
- **Maintain Professional Independence:** The contractor retains the right to perform services for other entities, provided such services do not constitute a conflict of interest or interfere with the timely and successful completion of the deliverables outlined in the scope of work. The focus of the agreement that results from this RFP process is not managing *how* or *when* activities are completed, but rather on the quality, integrity, and completion of the monthly deliverables.

1.4 Contract Term, Award, and Funding

A. Funding

Following the award, the bidder will be required to enter into a written contract with CIBHS.

The term of this contract is upon execution through June 30, 2027, with potential for renewal for two additional years: July 1, 2027, to June 30, 2028, and from July 1, 2028, to June 30, 2029. Extensions of contract periods into FY 27, FY 28 and FY29 are contingent upon funding availability and performance.

- Base Year: upon execution to June 30, 2027
- Year 2: July 1, 2027, to June 30, 2028
- Year 3: July 1, 2028, to June 30, 2029

Funding for the full contract year is preset and determined by RUHS-BH. Funding is capped at \$85,000 per year per CCL. The base year's funding will be pro-rated based on the date of contract execution. Continued funding is contingent upon contractor performance and the availability of monies from RUHS-BH.

B. Award Procedures

The top highest scoring proposals for each CCL category will be advanced to the interview stage. Bidders will undergo two interviews (in accordance with the RFP schedule below) before a final award is made. Prior to awarding the contract, a notice of intent to award will be posted on CIBHS's website (www.cibhs.org) for a period of no less than five (5) working days.

Bidders are not permitted to be awarded more than one CCL category for each contracting period.

C. RFP Cancellation

CIBHS reserves the right to do any of the following:

- Cancel this RFP
- Amend this RFP as needed; or
- Reject any or all proposals received in response to this RFP.

D. RFP Protest and Appeal Procedure

Notice of Intent to Award: Upon completion of the proposal evaluation process, CIBHS will notify all applicants via email of the selection results.

Protest Deadlines and Grounds: Any applicant who submitted a proposal and wishes to dispute the award selection must submit a formal written protest to CIBHS within **five (5) business days** of the date of the notification email. Protests must be based strictly on claims that CIBHS failed to follow the evaluation procedures outlined in this RFP, or that a conflict

of interest occurred. Disagreements with the scoring panel's professional judgment or final scores are not valid grounds for protest.

Content of Protest: The written protest must clearly state the factual and legal basis for the dispute, provide any supporting evidence, and specify the requested remedy. Protests must be emailed directly to CCLProject@cibhs.org.

Final Decision: A designated CIBHS administrative official who was not involved in the original scoring process will review the protest. CIBHS will issue a final, written determination within **fifteen (15) business days** of receiving the protest. This administrative decision shall be final and binding on all parties.

2. SCOPE OF WORK

See Attachment 2 for a draft version of the CCL scope of work.

3. RFP SUBMISSION INSTRUCTIONS

3.1 Select One Specific Focus

Applicants must apply for **only one (1) specific community role per application** submission. Your narrative answers and experience must directly align with that chosen population.

3.2 Applying for Multiple Roles

If you possess the expertise and wish to apply for more than one community role (for example, both *Black/African American* and *LGBTQIA+*), **you must submit a separate and distinct application for each community role.**

3.3 Disqualification Risk

Combining multiple target populations into a single application narrative will make the proposal impossible to score accurately and may result in the disqualification of your submission.

3.4 Response Length Instructions

Please limit your response to each question in Attachment 1 to a **maximum of 300 words**. Answers should be concise, well-structured, and focused on sharing real-world examples from your lived, volunteer, or professional experience. Technical formatting polish is less important to the review panel than clear evidence of community trust, integration, and navigation skills.

3.5 Questionnaire and Form

Applicants must use the form in the link below to provide their responses to the questions in Attachment 1. Questions must be answered here:

[Cultural Community Liaison Questionnaire](#)

3.6 Resume

Applicants must submit a resume in addition to their responses to Attachment 1. Resumes should be uploaded to the [Cultural Community Liaison Questionnaire](#) and **will not** be accepted via the CCLProject@cibhs.org email.

3.7 RFP Due Date

RFP responses are due by July 24, 2026, 5:00 p.m. PST. Late applications will not be accepted. Proposals received after the deadline will be rejected without review. Incomplete submissions may also be rejected without review.

3.8 RFP Questions

All RFP questions should be submitted to CCLProject@cibhs.org by June 22, 2026, 5:00 p.m. PST. For reference, please include the following in the subject line: RFP #01 CIBHS-RUHS CCLs. Questions should be submitted in the following format:

RFP Section Reference	Question

3.9 Letter of Intent (LOI) Submission

All applicants intending to submit a proposal for the CCL RFP are highly encouraged to submit a Letter of Intent (LOI) to CCLProject@cibhs.org

The LOI is a critical tool for CIBHS/RUHS to gauge bidder interest across our targeted populations, plan for the evaluation process, and ensure we have adequate coverage for the communities we intend to serve. **Failure to submit an LOI will not disqualify you from submitting a full proposal**, but submission is strongly recommended so you can receive timely updates, Q&A clarifications, and webinar materials.

Submission Deadline: June 20, 2026, by 5:00 PM PST.

Submission Method: Via email to CCLProject@cibhs.org

To keep this process low-barrier and accessible, a formal, attached letter is not required. Applicants may submit their LOI directly within the body of an email using the following structure:

Email Subject Line: LOI: CCL RFP, [insert CCL category] – [Insert Bidder Name/Organization Name (if applicable)]

Email Body Content:

- **Applicant/Organization Name:** (Legal name of organization or individual applicant)
- **Primary Contact Person:** (Name, Title, Email Address, and Phone Number)
- **Mailing Address / Region Served:** (Physical address and the specific geographic area/county you serve)
- **Target Community Population(s):** Clear identification of which of the nine targeted community categories your proposal will focus on (Please reference Section 1.2 for the list of approved target populations)
- **Brief Statement of Interest (Optional):** A brief paragraph (no more than 150–200 words) describing your existing connection to this community and why you are interested in serving as a CCL.

Upon receipt of your LOI, you will be added to the official Bidders List. This ensures you will receive the link to the upcoming informational webinar, answers to all submitted stakeholder questions, and any addenda issued for this RFP.

3.10 FINAL SUBMISSION CHECKLIST

A responsive application shall consist of all the required items identified below. Use this checklist for your reference to ensure completion of each item you are submitting.

Check	Description	Submission Format
	Letter of Intent (Optional)	Via email to CCLProject@cibhs.org
	Cultural Community Liaison Questionnaire	Via online application portal only
	References (x2)	Via online application portal only
	Resume (in PDF format)	Via online application portal only

4. EVALUATION CRITERIA AND SCORING RUBRIC

All proposals received in response to this RFP will be reviewed and scored by an evaluation panel comprised of representatives from CIBHS and RUHS-BH. There is a total of **130 scoring points** possible.

Because the role of CCL relies on trust, panel members will prioritize **deep community integration, linguistic capability, and practical navigation skills** over polished grant-writing styles.

The evaluation panel will score applications based on the following breakdown:

4.1 RFP Scoring Summary

RFP Scoring Summary		
Evaluation Category	Associated Questions	Maximum Points per Section
Category 1: Regional Alignment & Community Trust	Questions 6, 7, & 8	30 points
Category 2: Tactical Outreach & Partnership Development	Questions 9, 10, 11, & 12	40 points
Category 3: System Navigation & Public Facilitation	Questions 13 & 14	20 points
Category 4: Operational Readiness & Independent Execution	Questions 15 & 16	20 points
Resume	NA	10 points
Reference #1	Question 17	5 points
Reference #2	Question 18	5 points
Total Possible Score		130 points

4.2 Detailed Evaluation Criteria

Responses will be evaluated based on clarity and thoroughness according to the detailed criteria outlined below for each category:

Category 1: Regional Alignment & Community Trust (30 Points Max)

- **Geographic Familiarity:** Applicant clearly demonstrates a baseline residency or proximity to Riverside County and understands the distinct geographic layout and service regions of the area.
- **Authentic Connection:** Evidence of an established, respected, and active presence within the chosen target population. The applicant shows a deep understanding of the community's unique cultural values and history.
- **Stigma Reduction:** Responses demonstrate a thoughtful, culturally humble approach to handling sensitive conversations around mental health and substance use in spaces where fear or historical mistrust of public systems exists.

Category 2: Tactical Outreach & Partnership Development (40 Points Max)

- **Outreach Experience:** Proven history of leading or actively participating in grassroots events, presentations, or community gatherings that successfully engage underserved populations.
- **Inclusive Communication:** Demonstrated ability to tailor communication styles to ensure accessibility across internal community diversity (such as age, language preferences, or socioeconomic differences).
- **Collaborative Track Record:** A concrete example of building a mutually beneficial partnership with a local community organization, faith leader, or key neighborhood stakeholder to achieve a shared goal.

Category 3: System Navigation & Public Facilitation (20 Points Max)

- **Hands-On Navigation:** Clear evidence of successfully guiding individuals or families through complex service networks (behavioral health, school, social services) and actively breaking down the barriers they faced.
- **Public Bridging:** Comfort and experience participating in or facilitating public forums, hearings, and collaborative meetings. The applicant shows an ability to bridge the gap and translate needs between community members and County staff.

Category 4: Operational Readiness & Independent Execution (20 Points Max)

- **Administrative Competence:** Experience tracking data, keeping records, and preparing basic, structured reports. The applicant demonstrates comfort using standard digital tools (such as Excel, Word, or Zoom) to complete the required monthly deliverables.
- **Self-Management:** A realistic approach to time management, showcasing the ability to handle competing priorities and organize a flexible work schedule (including evenings and weekends) independently without daily direct supervision.

5. RFP TIMELINE AND AWARD CALENDAR

Key RFP Events	Timeline
RFP Release Date	By June 10, 2026
Letter of Intent (LOI) Submission (optional) Deadline	June 20, 2026, 5:00 PM PST
Deadline to Submit Questions	June 22, 2026, 5:00 PM PST
RFP Webinar/Bidder’s Conference	June 29, 2026
CIBHS Posts Answers / Addendum	July 6, 2026
Proposal Submission Deadline	July 24, 2026, 5:00 PM PST
Administrative Review/Scoring Period	July 27 to August 7, 2026
1 st Round Interview Dates	August 8 to 30, 2026
2 nd Round Interview Dates	August 20 to September 10, 2026
Notice of Intent to Award	September 2026
Contract Execution Period	September 2026

**** Please see the following page for Attachment 1: RFP Questions ****

ATTACHMENT 1: SAMPLE RFP QUESTIONS

FOR REFERENCE ONLY — NOT INTENDED FOR SUBMISSION

IMPORTANT NOTE: This document is a **sample reference copy only** and cannot be used to submit your proposal.

All applications must be completed and submitted electronically via the online application portal at [Cultural Community Liaison Questionnaire](#). We provide this downloadable template solely for your reference and convenience so that you or your team may prepare and draft answers (e.g., in Microsoft Word) before copying and pasting them into the online system. Hard copies, faxes, or emailed submissions will not be reviewed.

Cultural Community Liaison Questionnaire and Instructions:

Please prepare and review your responses before completing this section. The questions included here are part of the RFP package and may be reviewed and drafted in advance.

Important: Once you submit your responses, you will not be able to return to this page to make revisions or edits. We recommend that you finalize all answers before beginning the submission process.

Please ensure that all responses are complete, accurate, and ready for final submission prior to selecting "Submit."

Applicants must answer all seventeen (17) questions below. Please limit your responses to a maximum of one to two paragraphs per question and a maximum of 300 words per question, focusing on concrete examples from your personal, lived, or professional experience.

1. Please enter your full name here.*
2. Please enter your email address.*
3. Please enter your phone number.*
4. Please enter your business/organization name if applicable.*
5. Which population are you applying for:*

 - Asian Pacific Islander Desi American & Native Hawaiian (Bilingual Mandarin Chinese preferred)
 - Black/African American
 - Deaf/Hard of Hearing (ASL proficiency required)
 - Hispanic/Latino/Latina/Latinx/Latine´ (Professional bilingual Spanish fluency required)

- LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Questioning/Queer, Intersex, Asexual +)
- Middle Eastern/North African
- Native American/American Indian
- People with Disabilities
- Spirituality/Faith-Based

Category 1: Regional Alignment and Community Trust

This section establishes your baseline geographic connection and your deep, trusted relationships within your chosen target population.

6. Are you currently a resident of Riverside County (or living within 30 miles of its borders)? Please specify your city of residence and briefly describe your familiarity with the distinct geographic regions and service areas of Riverside County. **300-word limit**
7. Describe your personal or professional connection to the specific target population you are applying to serve. What specific strategies have you used in the past to build and maintain authentic trust within this community? **300-word limit**
8. How do you approach conversations about mental health or substance use in communities where there is significant cultural stigma, fear, or historical mistrust of government and behavioral health services? **300-word limit**

Category 2: Tactical Outreach & Partnership Development

This section evaluates your hands-on experience running community events and building networks of allies

9. Tell us about your direct experience with community outreach. What specific responsibilities did you have organizing different types of events, cultural presentations or grassroots activities to engage underserved populations? **300-word limit**
10. The target population you choose to serve will still have its own internal diversity (e.g., variations in age, language preferences, or socioeconomic status). How do you ensure your communication is culturally responsive, accessible, and inclusive so that all voices within that community are heard? **300-word limit**
11. You are working with a cultural community that includes several distinct sub-groups with varying levels of visibility and influence. How would you design an approach to ensure equitable engagement across all the members of the target population? **300-word limit**
12. Describe a specific example of a successful partnership or collaboration you developed with a local community organization, faith leader, or key stakeholder. What was the goal, and how did you work together to achieve it? **300-word limit**

Category 3: System Navigation & Public Facilitation

This section assesses your ability to move individuals into care systems and bridge the gap between the public and county leadership.

13. Describe a specific time when you helped an individual or family navigate a complex system (such as behavioral health, healthcare, school, or social services). What specific barriers did they face, and how did you support them to ensure a successful connection to services? **300-word limit**
14. This role involves participating in community forums, public hearings, and collaborative discussions with County staff. Describe your experience facilitating or actively participating in these types of public engagement meetings. How do you bridge communication between community members and agency staff? **300-word limit**

Category 4: Operational Readiness & Independent Execution

This section evaluates your capacity to operate successfully under an independent contractor (1099) model, where data collection and self-organization are critical.

15. Reviewing the scope of work and deliverables, describe your experience tracking data, maintaining documentation, and preparing structured reports for community programs. What digital tools (e.g., Excel, Word, Zoom) are you comfortable using to complete this work? **300-word limit**
16. Operating as an independent contractor requires a high degree of self-management to balance varying community needs, deadlines, and flexible hours (including evening and weekends). How do you stay organized, manage your time independently, and handle competing priorities without daily direct supervision? **300-word limit**
17. Reference #1 (Please provide full name, organization, role, relationship, phone number, and email address) *. Reference cannot be a Riverside County Behavioral Health employee.
18. Reference #2 (Please provide full name, organization, role, relationship, phone number, and email address) *. Reference cannot be a Riverside County Behavioral Health employee.
19. Please upload your resume in PDF format. *

ATTACHMENT 2: SCOPE OF WORK

CULTURAL COMMUNITY LIAISON (Consultant)-Riverside University Health Systems, Behavioral Health (RUHS-BH)

Purpose- Riverside University Health Systems- Behavioral Health (RUHS) is committed to advancing health equity, improving access to care, and reducing disparities in behavioral health outcomes. As part of Behavioral Health Services Act (BHSA)-aligned efforts, the County seeks to strengthen engagement with historically underserved and underrepresented communities and populations through the contracting of Cultural Community Liaisons (CCLs) focused on serving these populations. In Riverside County, where the geography and demographics are incredibly diverse, ranging from urban centers to rural desert communities, the CCL's role is pivotal in overcoming system mistrust, increasing access to care, reducing stigma, reducing behavioral health disparities among underserved communities, and supporting BHSA planning efforts. The CCLs will serve as a trusted bridge between the County and diverse communities to help the county communicate with targeted populations about behavioral health services in a culturally and linguistically responsive manner, RUHS is seeking nine CCLs to serve each of the following targeted populations or communities (one liaison per community):

- a. Asian Pacific Islander Desi American & Native Hawaiian (Bilingual Mandarin Chinese preferred)
- b. Black/African American
- c. Deaf/Hard of Hearing (ASL required)
- d. Hispanic/Latino/Latina/Latinx (Bilingual Spanish required)
- e. Lesbian, Gay, Bisexual, Transgender, Questioning/Queer, Intersex, Asexual +
- f. Middle Eastern/North African
- g. Native American/American Indian
- h. People with Disabilities
- i. Spirituality/Faith-Based

Guiding Principles

- Engagement efforts must be ongoing, consistent, and year-round
- Activities must demonstrate “meaningful engagement” as defined by BHSA
- Services and outreach must prioritize reducing disparities in access to serious mental health services (SMHS)
- Collaboration with RUHS-BH staff and other liaisons is critical to maximize reach and efficiency
- Community input must be actively incorporated into planning processes
- All CCLs are required to adhere to the RUHS-BH CCL Handbook, which will be provided upon award

Scope of Work

A. Community Engagement

- Conduct culturally responsive engagement in non-traditional settings (e.g. barber shops, food banks, faith-based organizations, etc.) to targeted communities using tools such as U.S. Census information, RUHS-BH data, and other reliable sources to identify ways to reduce disparities in accessing behavioral health services among targeted communities and populations in Riverside County.
- Facilitate conversations with community members to frame behavioral health through a cultural lens (e.g. focusing on wellness or family harmony rather than mental illness or disease).
- Review and provide written feedback and suggestions on County outreach materials for target population to ensure they aren't just translated literally but are written in a way that is culturally resonant.
- Build and maintain relationships with community-based organizations, faith-based groups, schools, and local leaders that serve targeted populations.
- Increase awareness of behavioral health services within Riverside County and reduce stigma by hosting formal and informal events to gather community voice regarding barriers to care, which are then reported back to RUHS-BH.
- Collate, create, and hand out information packets to individuals seeking information about how to access behavioral health services and care.
- Identify target populations, prioritizing Medi-Cal beneficiaries and those who serve them.
- Coordinate with Cultural Competency Reducing Disparities (CCRD) committees to establish engagement priorities.
- Develop an annual engagement plan that includes a variety of outreach methods.
- Ensure all activities are culturally relevant and accessible.

B. Community Partnership & Network Development

- Identify and recruit key influencers such as community leaders (e.g., native/faith leaders, trusted representatives, public service officers, neighborhood leaders, advocates, etc.) within the target population to create a referral ecosystem and develop plans and strategies to promote behavioral health information with the targeted community or population.
- Serve as a liaison to local school districts, law enforcement, and housing authorities to ensure a unified cultural approach to behavioral health.
- Assist small, grassroots Community-Based Organizations (CBOs) in understanding how to interface with County systems.
- Participate in community coalitions and local events.
- Support coordination between County and community partners to develop, shape, and inform best practices and program implementation.

- Partner with County staff to advise clinicians and administrative staff on the specific cultural nuances, histories, and traumas of the community they represent in order to better inform the delivery of services.

C. Navigation and Linkage to Services

- Empower clients by teaching them how to use the County's beneficiary handbooks, portals, and crisis lines to access behavioral health and related services.
- Identify and provide recommendations to address practical obstacles to care, such as lack of transportation, digital divide issues (for telehealth), or childcare needs.
- Conduct post linkage follow-up with community members linked to service and/or first appointments (30 days or more after) to ensure the placement was culturally appropriate and there is a plan to continue seeking support/services.
- Provide culturally responsive system navigation and referrals.

D. BSA Planning

- Plan and implement community engagement activities (e.g., forums, listening sessions, surveys).
- Represent the department in community meetings and coalitions.
- Encourage and support community participation in public hearings.
- Share information and report community feedback to the broader team.
- Participate in a shared responsibility model to maximize coverage and reduce duplication.

E. Committee & Meeting Participation

- Attend and actively participate in CCRD meetings as scheduled.
- Participate in additional meetings as required by RUHS-BH.

F. The Mindful Body (MB) and Recovery Eating Disorder Intensive Outpatient Program Participation

- Inform the work of the Council regarding specific culture-based treatment, training, and education.
- Distribute information to their target community on the MB program and resources.
- Provide training, or connection to other agencies, on their specific cultural community.
- Connect with interested agencies or community organizations requiring eating disorder presentations.

- Collaborate with MB Outreach team on presentations, training or other outreach activities.
- Attend any additional meetings and/or support as required to meet the goals of the innovation proposal.

G. Subcommittee Leadership & Facilitation

- Plan, coordinate, and chair subcommittee meetings for the target population in collaboration with RUHS-BH staff and community stakeholders.
- Ensure meetings are accessible, inclusive, and responsive to community needs.

H. Event Sponsorship & Fiscal Oversight

- Manage and allocate an approved budget to support culturally relevant community events and activities that support access to behavioral health services.
- Ensure all sponsorship requests are reviewed and approved by the target population subcommittee and the Cultural Community Engagement Team Staff Development Officer prior to disbursement.
- Monitor and document expenditures in accordance with RUHS-BH fiscal guidelines.

I. Collaboration with Staff & Programs

- Partner with BHS Administration as part of the overall BHS Community Planning Process.
- Identify and address barriers to engagement and service access using community-informed strategies.
- Partner with the Mindful Body and Recovery program (Eating Disorder Intensive Outpatient and Training Program) to provide culturally relevant input to support program implementation.
- Participate in the quarterly guidance council meeting

J. Provider Engagement & Service Access Strategies

- Collaborate with contracted providers to develop and implement strategies that improve accessibility and reduce barriers to behavioral health services.

K. Event Participation & Representation

- Attend and actively contribute to key events, including the BHS Public Hearings, BHS Steering Committee meetings, and other events as directed by RUHS-BH.
- Assist in planning, facilitating, and implementing the Multi-Cultural Symposium. May act as chair of the planning committee.

L. Training, Consultation & Capacity Building

- Consult on, develop, and deliver culturally responsive trainings, workshops, and materials.
- Support the enhancement of cultural competency among RUHS-BH staff and community service providers in coordination with relevant program managers.
- Utilize data, community feedback, and stakeholder input to inform ongoing improvements to outreach, engagement, and service delivery strategies.

Key Deliverables

A. Community mapping

- a. Create a map of the target population within Riverside County using tools such as the U.S. Census, RUHS-BH data, and other reliable sources.

B. Community Engagement

Monthly Community Engagement Log: A structured report (spreadsheet or dashboard entry) documenting the breadth of outreach. The deliverable will include:

- a. **Detailed Tracking:** A list of events attended, "pop-up" information booths held, and presentations given.
- b. **Quantitative Reach:** Number of community members engaged, materials distributed, and specific cultural groups reached.
- c. **"Third Space" Documentation:** Evidence of visits to non-traditional settings (e.g., churches, community centers, or local markets)
- d. **CCL Materials:** include copies of flyers, social media posts, or brochures that the CCL edited/or reviewed for cultural and linguistic nuance.
- e. The deliverable shall be due the 5th of the following month/quarter and will be submitted via excel or word table.

C. Community Partnership & Network Development

- a. **Partnership & Network Report:** includes documentation of the ecosystem the CCL is building between the County and the community. The deliverable will include:
 - **New Stakeholder Onboarding:** Brief summaries of meetings with new community leaders, "natural helpers," or CBO directors.
 - **Referral Map Updates:** A list of active community partners who are now trained to recognize behavioral health needs and refer to the CCL.
 - **Collaborative Activity:** Summaries of any joint events or co-facilitated workshops held with partner organizations.

- The deliverable shall be due the 5th of the following month/quarter and will be submitted via email.

D. BHS Public Hearing

- a. **Attend all required public hearings**
- b. **Encourage and support community member attendance**
- c. **Assist in gathering and documenting public input**

E. Navigation & Linkage to Services

- a. **Navigation & Linkage Summary (monthly):** A monthly snapshot of how the CCL is moving people into the care system. The deliverable will include:
 - **Linkage Tracking:** Total number of individuals assisted just before first appointments with Riverside County Behavioral Health services.
 - **Barrier Identification:** A brief log of common obstacles encountered (e.g., "three families cited lack of evening transportation as a reason for missed intakes").
 - **Outcome Follow-up:** A report on the status of previously linked individuals (names/identifiable information removed) to ensure they successfully navigated the intake process.
 - The deliverable shall be due the 5th of the following month/quarter and will be submitted via a word document.

F. Data Collection & Documentation

Collect, track, and submit monthly data in accordance with RUHS-BH data protocols that include demographics, outreach and engagement activities, service linkages, satisfaction surveys, and other required documentation.

G. Reporting & Evaluation

- a. **Annual Report:** Produce and submit a comprehensive annual report summarizing activities, outcomes, and progress toward goals outlined in the Cultural Competency Plan. The annual report will include:
 - **Trend Analysis:** A one-page summary of recurring themes, fears, or misconceptions regarding behavioral health services heard from the community that year.
 - **Resource Gaps:** Direct feedback on where the County's current linguistic or cultural offerings are falling short.
 - **Success Stories:** One or two anonymized Impact Stories that demonstrate how the CCL's intervention changed a community member's trajectory.

- The annual report will be due on the last day of the contract period of performance.

Required Experience and Qualifications

- Deep community roots: Minimum of 3-5 years of experience living or working directly with the specific cultural, ethnic, or linguistic community being served in RUHS
- Direct experience in community engagement, outreach, or behavioral health services, preferably with the identified target population.
- Demonstrated advocacy: proven track record of community organizing, peer support, or volunteer leadership (e.g., serving as a Promotor, tribal leader, or youth mentor).
- Demonstrated knowledge of public behavioral health systems and health equity principles.
- Experience navigating social services, healthcare, or school systems (e.g. should understand what a referral looks like in practice).
- Professional level fluency (speaking, reading and writing) in Spanish for Hispanic/Latino/Latina/Latinx, ASL for deaf/hard of hearing, and Chinese Mandarin for Asian Pacific Islander Desi American & Native Hawaiian
- Experience building partnerships with community-based organizations and facilitating meetings or community groups.
- Ability to plan and coordinate events, trainings, or community initiatives.
- Experience with basic data collection, reporting, and documentation.
- Experience managing or supporting budgets and community events (preferred).
- High school diploma or GED required. An associates level degree in social work, psychology, ethnic studies, or related field is preferred.
- Proficient digital literacy with Microsoft Office applications specifically.

Preferred Unless Noted Otherwise

- Professional-level fluency (speaking, reading, and writing) in the primary language of the target community, including the ability to explain complex clinical concepts in plain language that is culturally appropriate.

Contract Timeline and Compensation

The contract begins as soon as an award is made, and a contract is fully executed and concludes June 30, 2027.

Compensation will be provided at an hourly rate of \$60.00 for up to 1,416.67 hours, not to exceed \$85,000 annually.