



COUNTY OF HUMBOLDT

AGENDA ITEM NO.  
**C-8**

For the meeting of: May 09, 2017

Date: April 17, 2017

To: Board of Supervisors

From: Connie Beck, Director *MS for Connie Beck*  
Department of Health and Human Services – Public Health

Subject: Second Amendment to State Standard Agreement 15-10156 with California Department of Public Health for the California Home Visiting Program

RECOMMENDATION(S):

That the Board of Supervisors:

1. Approve the second amendment (A02) to State Standard Agreement 15-10156 for the term of July 1, 2015 to June 30, 2019;
2. Authorize the Chair of the Board to sign two (2) originals of the second amendment;
3. Authorize the Chair of the Board to sign one (1) original of the DGS OLS 04-CA Civil Rights Laws Attachment;
4. Authorize the Chair of the Board to sign one (1) original of the CCC 307, Contractor Certification;
5. Direct the Clerk of the Board to return two (2) executed originals of the second amendment, one (1) signed original of the DGS OLS 04-CA Civil Rights Laws Attachment, one (1) signed original of the CCC 307, Contractor Certification and one (1) fully executed Board Agenda Item to the Department of Health and Human Services (DHHS), Contract Unit for forwarding to DHHS-Public Health; and
6. Authorize the Public Health Director or Designee to sign any subsequent amendments and

Prepared by Shannon Falk-Carlsen, AA I CAO Approval *[Signature]*

REVIEW: Auditor *MSM* County Counsel \_\_\_\_\_ Human Resources *[Signature]* Other \_\_\_\_\_

TYPE OF ITEM:  
 Consent  
 Departmental  
 Public Hearing  
 Other \_\_\_\_\_

PREVIOUS ACTION/REFERRAL:  
 Board Order No. C-15  
 Meeting of: August 18, 2015

**BOARD OF SUPERVISORS, COUNTY OF HUMBOLDT**  
 Upon motion of Supervisor *Fennell* Seconded by Supervisor *Wilson*

Ayes *Fennell, Bass, Bohn, Wilson*  
 Nays \_\_\_\_\_  
 Abstain \_\_\_\_\_  
 Absent *Sundberg*

and carried by those members present, the Board hereby approves the recommended action contained in this Board report.

Dated: May 9, 2017  
 By: *[Signature]*  
 Kathy Hayes, Clerk of the Board



documents directly related to the State Standard Agreement 15-10156 upon County Counsel and Risk Management review and approval.

SOURCE OF FUNDING:

Public Health Fund

DISCUSSION:

In March 2010 the Patient Protection and Affordable Care Act (Social Security Act, Title V, Section 511 (42 U.S.C. §711) established the Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program to provide an opportunity for collaboration and partnership at the federal, state, and community levels to improve outcomes for families who reside in at-risk communities through evidence-based home visiting programs. The California Home Visiting Program (CHVP) was created as a result of this action, and its purpose is to provide comprehensive, coordinated in-home services to support positive parenting, and to improve outcomes for families residing in identified at-risk communities. In February 2012 Humboldt County was selected as the lead county in a tri-county consortium with Del Norte and Siskiyou Counties for the regional expansion of Nurse Family Partnership (NFP) home visiting services. The State Standard Agreement supports the Tri-County Consortium for CHVP services, and CHVP funding continues to support NFP in Humboldt County, Siskiyou and Del Norte Counties under Humboldt County's oversight.

In 2014 it was announced that CHVP would be granting four (4) year contracts in place of the annual Agreement Funding Applications (AFA) that had been completed previously. On August 18, 2015, agreement #15-1056 was approved for the period of July 1, 2015 to June 30, 2019. During the term of this agreement the California Department of Public Health (CDPH) will allow one budget revision per year. Each budget revision will warrant an amendment to the original agreement. The opportunity for annual budget revisions will be extended to the Del Norte and Siskiyou County subcontracts as well. The annual budget revisions will allow the Tri-County Consortium to adjust their spending to program needs, including but not limited to changes in annual salary and benefits for program staff. Approval of the Public Health Director to sign future amendments will allow for expedited turn around.

This second amendment to State Standard Agreement 15-10156 revises Exhibit B, Year 2, for Humboldt, Siskiyou and Del Norte Counties.

FINANCIAL IMPACT:

The State Standard Agreement 15-10156 with CDPH allows DHHS- Public Health to be reimbursed up to a maximum of \$3,750,546 for the period of July 1, 2015 to June 30, 2019. The funding for fiscal year (FY) 2016-17 was included in the approved county budget in the amount of \$908,565, in fund 1175, budget unit 421, California Home Visiting Program. This amendment decreases the overall amount for FY 2016-17 by \$13,714. This amendment to Exhibit B, Year 2, revises the budgets for FY 2016-17 for Humboldt, Siskiyou and Del Norte Counties to the reduced allocation of \$894,851. There will be no net increase or decrease to the county General Fund.

This agreement supports subcontracts with Del Norte County and Siskiyou County for CHVP services.

Approving the CHVP agreement amendment supports the Board's Strategic Framework by creating opportunities for improved safety and health for a vulnerable population. It matches service availability with residents' needs, ensures sustainability of services and promotes quality services by building regional cooperation.

**OTHER AGENCY INVOLVEMENT:**

California Department of Public Health – State of California Health and Human Services is the grantor agency involved in this funding. Del Norte County and Siskiyou County are part of the tri-county consortium.

**ALTERNATIVES TO STAFF RECOMMENDATIONS:**

The Board could choose not to approve the first amendment to State Standard Agreement # 15-10156 with California Department of Public Health for California Home Visiting Program for the term of July 1, 2015 – June 30, 2019. However, DHHS-Public Health does not recommend this alternative. The CHVP home visiting program has been very successful and has enabled Humboldt County, Del Norte County and Siskiyou County to assist families with services which the county would be unable to provide without the consortium.

**ATTACHMENTS:**

1. State Standard Agreement Amendment # 15-10156, A02 between California Department of Public Health (CDPH) for California Home Visiting Program (CHVP) and DHHS – Public Health
2. State Standard Agreement Amendment # 15-10156, A01 between California Department of Public Health (CDPH) for California Home Visiting Program (CHVP) and DHHS – Public Health
3. State Standard Agreement # 15-10156 between California Department of Public Health (CDPH) for California Home Visiting Program (CHVP) and DHHS – Public Health
4. DGS OLS 04-CA Civil Rights Laws Attachment
5. CCC 307, Contractor Certification

# Attachment 1:

State Standard Agreement Amendment # 15-10156, A02 between California Department of Public Health (CDPH) for California Home Visiting Program (CHVP) and DHHS – Public Health



STATE OF CALIFORNIA  
**STANDARD AGREEMENT AMENDMENT**  
 STD 213A (Rev 6/03)

Check here if additional pages are added: \_\_\_ Page(s)

Agreement Number <b>15-10156</b>	Amendment Number <b>A02</b>
Registration Number:	

1. This Agreement is entered into between the State Agency and Contractor named below:
 

State Agency's Name <b>California Department of Public Health</b>	Also known as CDPH or the State
Contractor's Name <b>County of Humboldt Department of Health and Human Services</b>	(Also referred to as Contractor)
2. The term of this Agreement is: **July 1, 2015 through June 30, 2019**
3. The maximum amount of this Agreement after this amendment is: **\$ 3,750,546**  
 Three Million Seven Hundred Fifty Thousand Five Hundred Forty Six Dollars
4. The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:
  - I. **Purpose of Amendment** – This amendment will replace Exhibit A in its entirety. Exhibit A is amended to clarify and condense the original scope of work into three main goals in order to ensure compliance with implementation and evaluation requirements of the Maternal, Infant, and Early Childhood Home Visiting Grant. Exhibit B, Budget Year 2 reflects a funding decrease of \$13,714 and shifts to accommodate actual implementation of the program that was unknown at time of original contract development.
  - II. Certain changes made in this amendment are shown as: Text additions are displayed in **bold and underline**. Text deletions are displayed as strike through text (i.e., ~~Strike~~).
  - III. Exhibit B - Budget Detail and Payment Provisions #4A, Amounts Payable, is hereby amended as follows:
    - 1) \$1,038,565 for the budget period of 07/01/15 through 06/30/16.
    - 2) ~~\$908,565~~ **\$894,851** for the budget period of 07/01/16 through 06/30/17.
    - 3) \$908,565 for the budget period of 07/01/17 through 06/30/18.
    - 4) \$908,565 for the budget period of 07/01/18 through 06/30/19.

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR		CALIFORNIA Department of General Services Use Only
Contractor's Name (If other than an individual, state whether a corporation, partnership, etc.) <b>County of Humboldt Department of Health and Human Services</b>		<i>KWP</i>
By (Authorized Signature) <i>Virginia Bass</i>	Date Signed (Do not type) <b>5/9/17</b>	
Printed Name and Title of Person Signing <b>Virginia Bass, Chair, Board of Supervisors</b>		<div style="border: 2px solid blue; padding: 5px; margin: 10px auto; width: 150px;"> <p style="text-align: center; margin: 0;"><b>APPROVED</b></p> <p style="text-align: center; margin: 0; color: red; font-size: 1.2em;"><b>JUL - 7 2017</b></p> <p style="text-align: center; margin: 0; font-size: 0.8em;">OFFICE OF LEGAL SERVICES DEPT. OF GENERAL SERVICES</p> </div>
Address <b>825 5th Street, Room 111, Eureka, CA 95501</b>		
<b>STATE OF CALIFORNIA</b>		
Agency Name <b>California Department of Public Health</b>		<input type="checkbox"/> Exempt per: <i>Jeffrey Mapes</i>
By (Authorized Signature) <i>Jeffrey Mapes</i>	Date Signed (Do not type) <b>6/19/17</b>	
Printed Name and Title of Person Signing <b>Jeffrey Mapes, Chief, Contracts Management Unit</b>		
Address <b>1616 Capitol Avenue, Suite 74.262, MS 1802, P.O. Box 997377 Sacramento, CA 95899-7377</b>		

Exhibit A  
Scope of Work

**1. Service Overview**

County of Humboldt Department of Health and Human Services agrees to provide the following services to the California Department of Public Health (CDPH).

The California Home Visiting Program was created as a result of the Patient Protection and Affordable Care Act of 2010, Social Security Act, Title V, Section 511 (42 U.S.C. §711), CFDA# 93.505. The purpose of this contract is to provide comprehensive, coordinated in-home services to support positive parenting, and to improve outcomes for families residing in identified at-risk communities. Programs are meant to target participant outcomes which include:

- Improved maternal and newborn health;
- Prevention of child injuries, child abuse, neglect and maltreatment, and reduction of emergency department visits;
- Improvement in school readiness and achievement;
- Reduction in domestic violence;
- Improvements in family economic self-sufficiency; and
- Improvements in the coordination and referrals for other community resources and supports.

**2. Service Location**

The services shall be performed within the geographic boundaries of the tri-county consortium community that extend to the ocean west of Del Norte and Humboldt counties, to the north where Del Norte and Siskiyou border the state of Oregon, to the east where Siskiyou borders Modoc County and Humboldt borders Trinity County and to the south where Humboldt borders Mendocino County and Siskiyou borders Trinity and Shasta counties. The service location will be limited in Siskiyou County to follow the Interstate 5 corridor. This is due to one nurse covering a large geographic area.

**3. Project Representatives**

A. The project representatives during the term of this agreement will be:

California Department of Public Health Contract Manager: Kobe Nijjar Telephone: 916-650-0347 Fax: 916-650-0309 Email: Kulbir.Nijjar@cdph.ca.gov	County of Humboldt Department of Health and Human Services Marilyn Powell, MCAH Director Telephone: (707) 441-5087 Fax: (707) 268-8495 Email: mpowell@co.humboldt.ca.us
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Exhibit A  
Scope of Work

B. Direct all inquiries to:

<b>California Department of Public Health</b> Financial Management & Contract Operations Attention: Kobe Nijjar 1615 Capitol Avenue, Suite 73.560, MS 8305 P.O. Box 997420 Sacramento, CA 95899-7420 Telephone: (916) 650-0347 Fax: (916) 650-0309 Email: Kulbir.Nijjar@cdph.ca.gov	County of Humboldt Department of Health and Human Services Marilyn Powell, MCAH Director 908 7 <sup>th</sup> Street Eureka, CA 95501 Telephone: (707) 441-5087 Fax: (707) 268-8495 Email: mpowell@co.humboldt.ca.us
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C. Either party may make changes to the information above by giving written notice to the other party. Said changes shall not require an amendment to this agreement.

**4. Subcontracting Requirements**

All subcontracting must comply with the requirements of the State Contracting Manual, Sections 3.03, 3.06, 3.18, and 4.04, as applicable.

**5. Services to be performed**

The Local Health Jurisdiction (LHJ) agrees to provide the services presented in this Scope of Work (SOW) from the California Department of Public Health, Maternal, Child and Adolescent Health (CDPH/MCAH) Division in collaboration with the California Home Visiting Program Branch for implementation of the California Home Visiting Program (CHVP). The funded LHJ/Agency is referred to as "LHJ site" in this SOW. CHVP shall strive to develop collaborative community systems that protect and improve the health and well-being for California families.

The purpose of the SOW is to provide parameters for implementing or expanding an existing Nurse Family Partnership (NFP) or Healthy Families America (HFA) home visiting program in accordance with Federal Maternal Infant Early Childhood Home Visiting and CHVP requirements to achieve positive outcomes through maternal and child health for each of the following three goals:

1. Provide leadership and structure for implementation of the California Home Visiting Program at the LHJ site.
2. Embed the LHJ site into a well-integrated local early childhood system of services.
3. Monitor federal benchmark measures to show improvement in maternal and early childhood health.

Each LHJ site shall assure program integrity and fidelity to their selected evidenced-based model. These requirements include, but are not limited to: attending required meetings and trainings, performing continuous quality improvement, fulfilling all deliverables associated with Benchmark Constructs, using an approved version of the Efforts to Outcomes data system (referred herein as the "CHVP ETO data system"), enter and submit timely data, and complete other reports as required. The LHJ site must comply with deliverables as outlined in the SOW and may receive technical assistance from CHVP, if needed. CHVP reserves the right to require a Corrective Action Plan from the LHJ site.

Exhibit A  
Scope of Work

LHJ sites must contact their CHVP Program Consultant to request assistance from CHVP as soon as concerns regarding the program requirements are identified.

LHJ site agrees to abide by the Maintenance of Effort (MOE) as defined in the Affordable Care Act Section 295:

***“Funds provided to an eligible entity receiving a grant shall supplement, and not supplant, funds from other sources for early childhood visitation programs or initiatives. The grantee must agree to maintain non-Federal funding (State General Funds) for grant activities at a level which is not less than expenditures for such activities as of the date of enactment of this legislation, March 23, 2010.”***

All activities in this SOW shall take place from receipt of funding beginning July 1 through June 30 of each contracted year contingent on availability of funds and spending authority.

The table below summarizes a list of Status Reports due to CHVP throughout the year.

Reporting	From	To	Due Date
1 <sup>st</sup> Status Report	July 1	October 31	November 30
2 <sup>nd</sup> Status Report	November 1	February 28	March 31
3 <sup>rd</sup> Status Report	March 1	June 30	July 31

Program Letters—Directives or clarification related to the SOW or CHVP Policies and Procedures, such as required trainings or conferences, will be communicated to the LHJ site via email or a CHVP Policy Alert Letter. For a description of required training, current schedules and dates, refer to the CHVP website: <http://www.cdph.ca.gov/programs/mcah/Pages/HVP-HomePage.aspx>.



Exhibit A  
Scope of Work

**Goal 1: Provide leadership and structure for implementation of the California Home Visiting Program at the LHJ site**

#	Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures	
			Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
<b>STAFF REQUIREMENTS</b>				
1.1	The LHJ site Maternal, Child and Adolescent Health (MCAH) Director and/or designee will provide oversight to the LHJ and/or its subcontractors.	(.1) The MCAH Director and/or designee must dedicate <u>no less</u> than .05 Full Time Equivalent (FTE), but <u>no more</u> than .15 FTE on the CHVP budget. <i>Note: The MCAH Director may designate the MCAH Coordinator as the central point of contact for CHVP program-related administration. In this case, the MCAH Director must maintain a minimum of .05 FTE. The total FTE for both the Director and Coordinator must total no more than .15 FTE.</i>	Home Visiting Program staff will submit an organizational chart, staffing report and budget with appropriate FTE in Contract Agreement.	
		(.2) Provide informative advice, guidance, and assistance to LHJ site managers, supervisors, staff, and various non-profit and private entities on all matters related to the development, implementation, operation, administration, evaluation, and funding for local implementation of CHVP.		Present to CDPH-CHVP staff upon request.
		(.3) MCAH Director to provide leadership and oversight of SOW objective 2.1.		
1.2	LHJ site will implement home visiting programs using culturally sensitive home visiting practices.	(.1) Home Visiting Program staff will participate in trainings or educational opportunities designed to enhance cultural sensitivity by utilizing cultural sensitivity trainings via webinars and/or in person attendance.	Home Visiting Program staff will maintain a training log which includes topic, trainer, and list of attendees.	Present to CDPH-CHVP staff upon request.
		(.2) Staffing should reflect the diverse cultures and languages of the population being served. When possible hire staff that reflect the culture and speak the language of participants.		Maintain status of home visitors' ethnicity and languages spoken in staffing report.
		(.3) Use culturally sensitive materials and translation services when necessary.		Present to CDPH-CHVP staff upon request.
1.3	The LHJ site will hire, train and retain staff in compliance with NFP and HFA model requirements.	(.1) Ensure that home visiting staff receives core training on NFP or HFA models and are trained in CHVP required curricula and screening and assessment tools as specified in the Policies and Procedures. <i>Note: Partners for Healthy Baby is the required curriculum for HFA sites.</i>	Home Visiting Program staff will maintain a training log or file which includes topic, trainer, list of attendees and proof of completion of all required trainings.	Present to CDPH-CHVP staff upon request.



Exhibit A  
Scope of Work

#	Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures	
			Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
		(.2) Participate in meetings, workgroups, and trainings as directed by CHVP.		
		(.3) Hire and maintain sufficient staff to serve Home Visiting program participants and adhere to the specific evidence-based model guidelines.		Report staffing changes to CDPH-CHVP staff quarterly using staffing template provided by MCAH-CHVP.
<b>PROGRAM REQUIREMENTS</b>				
1.4	LHJ sites will reach active caseload of 100 participants within 18 months of initial program implementation and maintain through the duration of the program.	(.1) Receive referrals from appropriate agencies and triage as appropriate to meet the required number of enrolled participants.	Home Visiting Program staff will maintain an outreach log with program contacted, method, materials used and date of contact.	CDPH – CHVP staff will review outreach log and triage process at site visit.  LHJ sites must provide outreach log upon request.
		(.2) Maintain active caseload at capacity. The LHJ site will be placed on Corrective Action if active caseload is not consistently maintained above 85% of capacity.	Home Visiting Program staff will maintain a documented triage process.  Home Visiting Program staff will monitor monthly caseload, including new enrollments and dismissals.	
1.5	LHJ site will ensure NFP or HFA program fidelity and quality assurance.	(.1) Abide by NFP and HFA model requirements and must be implemented in accordance with the NFP 18 Model Elements or the HFA 12 Critical Elements and the HFA Best Practice Standards.	Home Visiting Program staff will maintain current affiliation and accreditation with NFP National Service Office (NSO) or HFA Prevent Child Abuse America (PCAA) National Office.	Present to CDPH-CHVP staff upon request.

Exhibit A  
Scope of Work

#	Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures	
			Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
1.6	The LHJ site will implement the home visiting program using current policies and procedures.	(.1) Conduct an annual review of LHJ site policies and procedures and update as needed.  (.2) Comply with CHVP Policies and Procedures as found on the CHVP website.		CDPH-CHVP staff will review LHJ site policies and procedures at site visit and upon request.
1.7	Collect participant data using HFA or NFP and CHVP-required forms and maintain current and accurate documentation. <sup>1</sup>	(.1) Develop chart documentation processes and procedures.	Home Visiting Program staff will maintain up-to-date chart documentation procedures.	CDPH-CHVP staff will review chart documentation and audit process at site visit.
		(.2) Home Visiting Program staff will implement and oversee chart audit process including review of current charts at a minimum of 3 times per year.	Home Visiting Program staff will maintain chart documentation and audit process.	
<b>CONTINUOUS QUALITY IMPROVEMENT (CQI) REQUIREMENTS</b>				
1.8	Conduct a CQI process which is aligned with CHVP CQI improvement goals.	(.1) Perform CHVP directed CQI activities.	Home Visiting Program staff will report action steps taken to achieve program improvement on selected priority areas.	Home Visiting Program staff will participate in quarterly CQI teleconferences with CHVP Program Consultant.
		(.2) Communicate quality improvement activities with the Community Advisory Board (CAB) or other community collaborative designated to address quality improvement.	Home Visiting Program staff will maintain CAB as a resource for program improvement.	CDPH-CHVP staff will observe at CAB meeting annually.

<sup>1</sup> REQUIRED SCREENING AND ASSESSMENT TOOLS <http://www.cdph.ca.gov/programs/mcah/Documents/400-10%20Required%20Screening.pdf>  
DATA COLLECTION AND STANDARDIZATION <http://www.cdph.ca.gov/programs/mcah/Documents/600-10%20Data%20Collection%20Standardization.pdf>



Exhibit A  
Scope of Work

#	Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures	
			Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
1.9	LHJ site will use data to inform and improve program activities.	(.1) Home Visiting Program staff will use model issued reports and CHVP-created reports as available in the CHVP ETO for the purposes of data cleaning, CQI, and program management.	Home Visiting Program staff will demonstrate understanding of the program quality measures.	CDPH-CHVP staff will observe at site visit and on CQI calls.

**Goal 2: Embed the LHJ site into a well-integrated local early childhood system of services**

#	Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures	
			Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
2.1	LHJ site will participate in the improvement of the local early childhood system of services.	(.1) MCAH Director will ensure LHJ participation in activities to improve the local early childhood system of services with specific emphases on enhancing cross-agency coordination, collaboration and communication; preventing duplication of services; and addressing gaps in local services and support.		Home visiting Program staff will complete all required CHVP interviews and surveys regarding the local early childhood system of services.
2.2	LHJ site will maintain a Community Advisory Board (CAB)	(.1) Maintain CAB activities according to the model and CHVP Policy and Procedure requirements. CAB will assist with efforts to improve systems integration, interagency coordination, information sharing, and referral systems.	Home Visiting Program staff will maintain a list of current CAB members and the organizations or agencies they represent.	Home visiting Program staff will submit updated CAB information in Status Report #1.
2.3	LHJ site will increase the number of collaborating community agencies with whom they have a clear point of contact.	(.1) Develop and maintain collaborative relationships with local service agencies and hospitals.		
		(.2) LHJ site will develop a clear point of contact (person/s) with collaborating community agencies for purposes of making warm referrals by phone or in-person on a participant's behalf.		Home visiting Program staff will complete annual CHVP Service Provider Survey. Input information in Status Report # 3



Exhibit A  
Scope of Work

#	Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures	
			Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
2.4	LHJ site will increase the number of formal agreements, informal written agreements, and/or Memorandums of Understanding (MOUs) with other local service agencies in the community.	(.1) Develop community partnerships and facilitate coordination and integration of services among MCAH and other community programs/services.  (.2) Develop and/or maintain formal agreements, informal written agreements (e.g., letters of support) and/or MOUs with community agencies and other service providers.		Home visiting Program staff will complete annual CHVP Service Provider Survey. Input information in Status Report # 3

**Goal 3: Monitor federal benchmark measures to show improvement in maternal and early childhood health**

#	Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures	
			Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
3.1	LHJ sites will collect all information that contributes to the performance measures for the Constructs that comprise the six federally-mandated Benchmark domains.  Constructs are located at: <a href="http://www.cdph.ca.gov/programs/mcah/Documents/All%20Benchmarks%20Combined%20Final.pdf">http://www.cdph.ca.gov/programs/mcah/Documents/All%20Benchmarks%20Combined%20Final.pdf</a>	(.1) Use model issued forms, assessment tools, and processes as defined in the model issued data collection manual. Further, the site will use CHVP required data forms and processes as defined in the <i>CHVP Data Collection Manuals</i> . <i>Note: All forms must be used as written, no individual site modifications are allowed without prior written consent from CHVP.</i>		At site visit, CDPH-CHVP staff will review process for data collection, entry, secure data storage and data cleaning annually.
		(.2) Home Visiting Program staff will collect and enter the data defined in the NFP or HFA <i>ETO User Manual</i> into the secure ETO data system <i>within seven working days</i> of data collection and as required by NFP or HFA.	Home Visiting Program staff will comply with the monthly and quarterly data cleaning schedule provided by CHVP.	
		(.3) Home Visiting Program staff will verify the accuracy and completeness of data input into the CHVP and NFP ETO data systems adhering to the CHVP data cleaning schedule.	Home Visiting Program staff and supervisors will demonstrate reporting proficiency.	

**Exhibit B, Attachment II  
Budget (Year 2)  
(07/01/16 through 06/30/17)**

<b>Personnel Classification</b>	<b>Original Annual Salary</b>	<b>Amendment Annual Salary</b>	<b>Original FTE %</b>	<b>Amendment FTE %</b>	<b>Original Annual Cost</b>	<b>Amendment Annual Cost</b>
Sup PHN (MCAH Director)	<del>\$ 83,965</del>	\$ 89,003	<del>11.39%</del>	10%	<del>\$ 9,564</del>	\$ 8,900
Administrative Analyst II	<del>\$ 57,316</del>	\$ 0	20%	0%	<del>\$ 11,463</del>	\$ 0
Medical Office Assistant II	<del>\$ 28,734</del>	\$ 0	25%	0%	<del>\$ 7,184</del>	\$ 0
Director of PH Nursing	<del>\$ 71,937</del>	\$ 77,790	5%	1%	<del>\$ 3,597</del>	\$ 778
Translator/Interpreter	<del>\$ 39,737</del>	\$ 42,121	2.5%	2%	<del>\$ 993</del>	\$ 842
Sup PHN (CHVP Supervisor)	<del>\$ 88,259</del>	\$ 93,555	50%	50%	<del>\$ 44,130</del>	\$ 46,778
Public Health Nurse	<del>\$ 68,994</del>	\$ 77,623	100%	100%	<del>\$ 68,994</del>	\$ 77,623
Public Health Nurse	<del>\$ 80,279</del>	\$ 85,096	100%	100%	<del>\$ 80,279</del>	\$ 85,096
Fiscal Support-Senior Fiscal Assistant	<del>\$ 39,354</del>	\$ 43,849	8%	5%	<del>\$ 3,148</del>	\$ 2,192
Fiscal Support-Fiscal Assistant	<del>\$ 33,343</del>	\$ 35,023	20%	15%	<del>\$ 6,669</del>	\$ 5,253
Medical Office Assistant II	<del>\$ 35,964</del>	\$ 38,122	55%	55%	<del>\$ 19,780</del>	\$ 20,967
Sup PHN (CHVP Supervisor)	<del>\$ 80,280</del>	\$ 85,096	50%	40%	<del>\$ 40,140</del>	\$ 34,038
<b>Administrative Analyst I</b>		\$ 43,694		30%		\$ 13,108
<b>Medical Office Assistant I</b>		\$ 29,717		25%		\$ 7,429
<b>Subtotal Personnel</b>					<del>\$ 295,941</del>	\$ 303,004
<b>Fringe Benefits (52.78% <u>48.16%</u> of Personnel)</b>					<del>\$ 156,198</del>	\$ 145,927
(FICA 7.65% <u>6.99%</u> , Pers 23.625% <u>22.965%</u> , Health Insurance 15.984% <u>15.324%</u> , SUI .75% <u>.65%</u> , Life .062% <u>.052</u> , Dental 1.463% <u>.933%</u> , Workers Comp 3.246% <u>1.246%</u> )						
<b>Total Personnel and Fringe Benefits</b>					<del>\$ 452,139</del>	\$ 448,931
<b>Operating Expenses</b>						
Training (Registration fees for CHVP required and other professional development trainings and CEUs as needed.)					<del>\$ 13,000</del>	\$ 16,000
Communications (Land lines and Nurse Home Visitor cell phones.)					<del>\$ 4,120</del>	\$ 7,378
Duplicating/Postage (Mailouts to Clients). (SOW Goals 2.4, 3, 4-5)					<del>\$ 1,200</del>	\$ 1,100
Medical Supplies (Scales, educational materials, testing materials, gloves, stethoscopes). (SOW Goal 1.3)					<del>\$ 1,000</del>	\$ 500
General Office Supplies					<del>\$ 1,000</del>	\$ 500
Professional Services					<del>\$ 500</del>	\$ 0
Rent and Leases (Est. per FTE annually: Rent @ 2nd street per fte (\$2,141.19 x <del>2.83</del> <u>5.5</u> ) = \$8,200.76); CWC per fte (\$5,109.49 x <del>5</del> <u>4.33</u> ) = \$3,448.91 & rental for fair booths (\$500) totalling \$12,149.67) (200 square feet x 4.47 <u>4.33</u> FTE x \$2 <u>1.153</u> /square feet x 12 months)					<del>\$ 13,000</del>	\$ 12,484
Utilities					<del>\$ 1,585</del>	\$ 1,414
Computer Software					<del>\$ 600</del>	\$ 0
Books and Periodicals					<del>\$ 500</del>	\$ 0
Nurse Family Partnership Fee (The NFP fee gives us access to all NFP model forms, data, and materials, to assure federally mandated fidelity with an evidence-based home visiting program). (Goal 1.5 in SOW)					\$ 14,928	\$ 14,928
<b>Total Operating Expenses</b>					<del>\$ 51,433</del>	\$ 54,304



**Travel**

Travel (Staff travel to statewide CHVP conferences, Nurse Family Partnership trainings (1.3 in SOW), and home visits (Goals 1.1.4, 1.4, 1.5, 2, 3, 4-5 in SOW))	<del>\$ 15,001</del>	<u>\$ 12,000</u>
<b>Total Travel Costs</b>	<del>\$ 15,001</del>	<u>\$ 12,000</u>

**Subcontracts**

Del Norte (Administer the Nurse Family Partnership program and is held to the activities listed in the Scope of Work Goals 1, 2, 3, 4, & 5)	\$ 165,612	\$ 165,612
Siskiyou (Administer the Nurse Family Partnership program and is held to the activities listed in the Scope of Work Goals 1, 2, 3, 4, & 5)	<del>\$ 197,773</del>	<u>\$ 187,773</u>
<b>Total Sub-contractor Costs</b>	<del>\$ 363,385</del>	<u>\$ 353,385</u>

**Other Costs**

Client Support Materials (Educational and parenting support materials (eg. Pamphlets, children's books). Group activities (Goals 2,3,4,5 in SOW))	<del>\$ 4,000</del>	<u>\$ 5,000</u>
<b>Total Other Costs</b>	<del>\$ 4,000</del>	<u>\$ 5,000</u>

**Indirect Costs (5% 4.7293% of Total Personnel Costs)**

	<del>\$ 22,607</del>	<u>\$ 21,231</u>
<b>Total Budget</b>	<del>\$ 908,565</del>	<u>\$ 894,851</u>

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~~Longevity pay for staff qualified after 10 years.~~

**Exhibit B, Attachment II, Schedule 1**  
**Subcontractor Budget**  
**Del Norte**  
**Year 2**  
**(07/01/16 through 06/30/17)**

<b>Personnel Classification</b>	<b>Original Annual Salary</b>	<b>Amendment Annual Salary</b>	<b>Original FTE %</b>	<b>Amendment FTE %</b>	<b>Original Annual Cost</b>	<b>Amendment Annual Cost</b>
Health Program Manager	<del>\$ 68,212</del>	\$ 72,365	8%	8%	<del>\$ 5,457</del>	\$ 5,789
Sn. Certified Public Health Nurse	<del>\$ 77,083</del>	\$ 87,960	100%	100%	<del>\$ 77,083</del>	\$ 87,960
Office Assistant	<del>\$ 19,700</del>	\$ 23,310	37.0428%	37%	<del>\$ 7,297</del>	\$ 8,625
				<b>Subtotal Personnel</b>	<del>\$ 89,837</del>	\$ 102,374
<b>Fringe Benefits (43.83% <u>46.438%</u> of Personnel)</b>					<del>\$ 39,372</del>	\$ 47,540
				<b>Total Personnel and Fringe Benefits</b>	<del>\$ 129,209</del>	\$ 149,914
<b>Operating Expenses</b>						
Training (Registration fees for CHVP required and other professional development trainings and CEUs as needed.)					<del>\$ 4,786</del>	\$ 400
General Office Supplies					<del>\$ 600</del>	\$ 100
Miscellaneous Supplies/Minor Equipment (Costs related specifically to CHVP program such as medical supplies, professional services, software, equipment maintenance). (Goal 1.3 in SOW)					<del>\$ 1,875</del>	\$ 300
<u>Communications (Telephone and cellular costs for the CHVP program)</u>						\$ 100
				<b>Total Operating Expenses</b>	<del>\$ 7,261</del>	\$ 900
<b>Travel</b>						
Travel (Staff travel to statewide CHVP conferences, Nurse Family Partnership trainings (Goal 1.3 in SOW), and home visits (Goals 1.1.4, 1.4, 1.5, 2, 3, 4, 5 in SOW))					<del>\$ 4,511</del>	\$ 1,000
				<b>Total Travel Costs</b>	<del>\$ 4,511</del>	\$ 1,000
<b>Other Costs</b>						
<u>Client Support Materials (Educational and safety materials as required by NFP NSO, client related transportation (bus passes, gas cards))</u>						\$ 1,805
				<b>Total Other Costs</b>		\$ 1,805
<b>Indirect Costs (19.06% <u>8%</u> of Total Personnel Costs)</b>					<del>\$ 24,631</del>	\$ 11,993
				<b>Total Budget</b>	<del>\$ 165,612</del>	\$ 165,612

**Exhibit B, Attachment II, Schedule 2**  
Subcontractor Budget  
Siskiyou  
Year 2  
(07/01/16 through 06/30/17)

<b>Personnel Classification</b>	<u>Original Annual Salary</u>	<u>Amendment Annual Salary</u>	<u>Original FTE %</u>	<u>Amendment FTE %</u>	<u>Original Annual Cost</u>	<u>Amendment Annual Cost</u>
MCAH Coordinator <sup>⊕</sup>	<del>\$ 52,817</del>	<b>\$ 50,445</b>	5%	5%	<del>\$ 2,641</del>	<b>\$ 2,522</b>
PHN Home Visitor	<del>\$ 74,718</del>	<b>\$ 58,556</b>	100%	100%	<del>\$ 74,718</del>	<b>\$ 58,556</b>
PHN Home Visitor	<del>\$ 52,817</del>	<b>\$ 50,445</b>	5%	<b>10%</b>	<del>\$ 2,641</del>	<b>\$ 5,045</b>
PH Office Assistant	<del>\$ 25,383</del>	<b>\$ 24,946</b>	50%	50%	<del>\$ 12,692</del>	<b>\$ 12,473</b>
			<b>Subtotal Personnel</b>		<del>\$ 92,692</del>	<b>\$ 78,596</b>
<b>Fringe Benefits (48.13% <u>55.149% of Personnel</u>)</b>					<del>\$ 44,613</del>	<b>\$ 43,345</b>
			<b>Total Personnel and Fringe Benefits</b>		<del>\$ 137,305</del>	<b>\$ 121,941</b>
<b>Operating Expenses</b>						
Training (Registration fees for CHVP required and other professional development trainings and CEUs as needed.)					<del>\$ 2,500</del>	<b>\$ 10,094</b>
General Office Supplies					<del>\$ 3,500</del>	<b>\$ 7,700</b>
Computer Equipment and Software (Dragon Speaking software, lap top and PC computer)					<del>\$ 2,500</del>	<b>\$ 0</b>
			<b>Total Operating Expenses</b>		<del>\$ 8,500</del>	<b>\$ 17,794</b>
<b>Travel</b>						
Travel (Staff travel to statewide CHVP conferences, Nurse Family Partnership trainings (Goal 1.3 in SOW), and home visits (Goals 1.1.4, 1.4, 1.5, 2, 3, 4, 5 in SOW))					<del>\$ 15,000</del>	<b>\$ 12,553</b>
			<b>Total Travel Costs</b>		<del>\$ 15,000</del>	<b>\$ 12,553</b>
<b>Other Costs</b>						
Client Support Materials (Educational and parenting support materials (eg. Pamphlets, children's books). Group activities (Goals 2,3,4,5 in SOW))					<del>\$ 5,800</del>	<b>\$ 5,000</b>
			<b>Total Other Costs</b>		<del>\$ 5,800</del>	<b>\$ 5,000</b>
<b>Indirect Costs (22.7% <u>24.9999% of Total Personnel Costs</u>)</b>					<del>\$ 31,168</del>	<b>\$ 30,485</b>
			<b>Total Budget</b>		<del>\$ 197,773</del>	<b>\$ 187,773</b>

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~~Deferred compensation (additional retirement benefit)~~