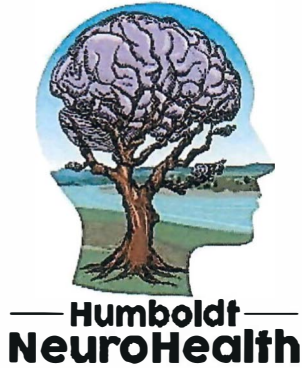




2313 I street
Eureka CA 95501
707-296-9295

RE: Request for Proposals # DHHS2022-03

Dear Ms. Martinez,

Humboldt NeuroHealth Therapeutic Services (HNH) is pleased to submit a response to Humboldt County's Request for Proposals for High Fidelity Wraparound (#DHHS2022-03). As a current Wraparound and mental health services provider, HNH is grateful for the opportunity to serve more Humboldt County residents with evidence-based, high fidelity Wraparound. HNH's mission is to, *"Cultivate wellness by supporting the healing and strengthening of individuals and families in order to lift and empower our community."* Our Vision is to engage in a thriving community free from the duress/constraints of trauma. HNH is a licensed 501(c)(3) nonprofit organization and has been providing services equivalent to those set forth in this RFP for three (3) years as a provider of high fidelity Wraparound services for the State Adoptions, Adoption Assistance Program (AAP). Additionally, HNH has been providing evidence-based, trauma-informed mental health services in Humboldt County since 2018.

The HNH service delivery model for Wraparound is guided by the California Wraparound standards, the principles of trauma-informed practice, and fully integrates the 10 Guiding Principles of Wraparound throughout service structure and delivery and follows the four phases of Wraparound treatment: Facilitation Team and Plan Preparation, Initial Plan Development, Implementation, and Transition. All services are highly individualized, data driven, and focus on permanency of the youth and long term stability of the family.

We offer three locations throughout the county including the main office located at 2313 I St., Eureka, CA 95501; a second location is located at 3429 Renner Ave., Fortuna, CA 95540; and the third location on 830 Brett Hart Alley, Arcata, CA 95521.

HNH's primary contact is Executive Director Jennifer Brown and the representative authorized to communicate with the County on behalf of Humboldt NeuroHealth. Ms. Brown can be reached by email Jennifer.Brown@humboldtneurohealth.org; phone (707) 498-4845 or mail at 3429 Renner Dr, Fortuna, CA 95540.

Sincerely,

Jennifer Brown
Executive Director

2.0 Table of Contents

TAB	Item	Page Number
1.0	Introductory Letter	1
2.0	Table of Contents	2
3.0	Attachment A – Signature Affidavit	3
4.0	Professional Profile	4
	A. Organizational Overview	5
	B. Overview of Qualifications and Experience	8
5.0	Project Description	20
	A. Description of Services	21
	B. Quality Assurance Capabilities	30
6.0	Attachment B – Cost Proposal Form	33
	Budget Justification	38
7.0	Supplemental Documentation	40
	Exhibit 1 – IRS Designation Letter	41
	Exhibit 2 – Humboldt NeuroHealth Organizational Chart	43
	Exhibit 3 – Key Staff Resumes	44
	Exhibit 4 – Job Descriptions	57
8.0	Attachment C – Reference Data Sheet	77
9.0	Evidence of Insurability & Business Licensure	80
10.0	Exceptions, Objections & Requested Changes	114

3.0 ATTACHMENT A

REQUEST FOR PROPOSALS NO. DHHS2022-03
High Fidelity Wraparound Services
ATTACHMENT A – SIGNATURE AFFIDAVIT
(Submit with Proposal)

REQUEST FOR PROPOSALS – NO. DHHS2022-SIGNATURE AFFIDAVIT	
NAME OF ORGANIZATION/AGENCY:	Humboldt NeuroHealth Therapeutic Services
STREET ADDRESS:	3429 Renner Dr
CITY, STATE, ZIP	Fortuna, CA 95540
CONTACT PERSON:	Jennifer Brown
PHONE #:	707-498-4845
FAX #:	707-324-0314
EMAIL:	Jennifer.Brown@humboldtneurohealth.org

Government Code Sections 6250, *et seq.*, the “Public Records Act,” define a public record as any writing containing information relating to the conduct of public business. The Public Records Act provides that public records shall be disclosed upon written request, and that any citizen has a right to inspect any public record, unless the document is exempted from disclosure.

In signing this Proposal, I certify that this firm has not, either directly or indirectly, entered into any agreement or participated in any collusion or otherwise taken any action in restraint of free competition; that no attempt has been made to induce any other person or agency to submit or not to submit a Proposal; that this Proposal has been independently arrived at without collusion with any other Proposer, competitor or potential competitor; that this Proposal has not been knowingly disclosed prior to the opening of Proposals to any other Proposer or competitor; that the above statement is accurate under penalty of perjury.

The undersigned is an authorized representative of the above-named agency and hereby agrees to all the terms, conditions and specifications required by the County in Request for Proposals No. DHHS2022-03 and declares that the attached Proposal and pricing are in conformity therewith.


Signature

Jennifer Brown
Name

Executive Director
Title

7/27/2022
Date

This agency hereby acknowledges receipt / review of the following Addendum(s), if any
Addendum # Response 1 Addendum # Addendum # Addendum #

4.0 PROFESSIONAL PROFILE

7.5 Professional Profile:

A. Organization Overview. *The professional profile must contain an overview of the structure and operation of the Proposer's organization, which includes, at a minimum, all of the following information:*

1. The Proposer's organization name, physical location, mission statement, accreditation, certification and/or licensure status, legal organizational status, such as partnership, corporation or limited liability company, current staffing levels and overall budget.

Humboldt NeuroHealth Therapeutic Services (HNH) has three locations throughout Humboldt County. The main office is located at 2313 I St., Eureka, CA 95501; the second location is located at 3429 Renner Ave., Fortuna, CA 95540; and the third location is 830 Brett Hart Alley, Arcata, CA 95521. HNH's mission is to, "*Cultivate wellness by supporting the healing and strengthening of individuals and families in order to lift and empower our community.*" Our Vision is to engage in a thriving community free from the duress/constraints of trauma. HNH is a licensed 501(c)(3) nonprofit organization providing evidenced based mental health services and high fidelity wraparound services since 2019. HNH has a current staff of 24 employees with an overall budget of \$1,502,000.

Please see Exhibit 1 – IRS Designation Letter, and HNH Business License in Section 9.0 Evidence of Insurability and Business Licensure.

2. A detailed description of the Proposer's current and previous business activities, including, without limitation:

a. The history of the Proposer's organization, including the date when the organization was founded and how innovation and high-quality performance is fostered thereby.

Humboldt NeuroHealth (HNH) was founded in 2018 by Executive Director Jennifer Brown, Licensed Clinical Social Worker (LCSW). In July 2019, HNH began operating as a 501(c)(3) nonprofit organization. Jennifer Brown began practice in 2012 as a LCSW and a certified Neurofeedback provider in Lake County, traveling to Humboldt County on a regular basis to offer mental health therapy and neurofeedback services to the Humboldt County community members. Neurofeedback is direct training of brain function by which the brain learns to function more efficiently. By rewarding the brain for changing its own activity to more appropriate patterns, neurofeedback helps address the problems of brain dysregulation including anxiety, depression,

attention deficits, behavior disorders, and other challenges. It is also useful in organic brain conditions such as seizures, the autism spectrum, and cerebral palsy.

Seeing the great need in this area, Ms. Brown relocated to Humboldt County in 2017 with a goal helping families in the community and establishing a nonprofit organization that would provide high quality services including high fidelity Wraparound, quality psychotherapy supported by evidence-based practices, and the highest quality neurofeedback services available.

At HNH, we are wholeheartedly committed to our clients and their healing journey. We pride ourselves in having the highest quality training and taking a person-centered, results-oriented approach to services – all of which align with the provision of Wraparound services. We see ourselves as a guide and facilitator of our client’s healing journey, and firmly believe in the ability of individuals and families to heal, grow, and reclaim joy. Our service philosophy closely aligns with Wraparound in that all services incorporate the basic tenants including:

- Promoting and prioritizing family voice and choice, we value your expertise and life experience;
- Services are flexible to address the changing needs and strengths throughout treatment;
- Services are team-based care;
- Staff promote and use natural supports and help clients develop and use their network of interpersonal community relationships to navigate challenges and needs;
- Services are collaborative and blend team members perspectives, mandates, and resources;
- Services are provided in the community, at the times and locations that meet the youth and family’s needs;
- Services are individualized to the specific needs and strengths of each youth and family;
- Services are strengths-based building on the capabilities, knowledge, and skills of the youth and family;
- Services are unconditional – we don’t blame, reject, or give up when faced with challenges or setbacks; and
- Services are outcomes based using the CANS as a guide.

Additionally, aware of the provider shortage crisis in Humboldt County, Ms. Brown established a secondary goal for HNH of establishing a group practice that fostered employment opportunities with rich supervision and healthy work environments to promote provider retention and increase access to services in this rural area. Currently, HNH has 24 employees, supporting

Humboldt County residents throughout HNH's programs and services. HNH has retained the same leadership team since inception and has a low rate of staff turnover.

b. The total number of years the Proposer has been operating under the present organization name, and any prior organization names under which the Proposer has provided Services equivalent to those set forth in this RFP.

HNH has operated under the Humboldt NeuroHealth name since its inception in 2018. All services provided, including services equivalent to those in the RFP have been provided by HNH for four (4) years, three of which have been under the 501(c)(3) nonprofit status granted in December 2018.

c. The number of years the Proposer has been providing Services equivalent to those set forth in this RFP.

HNH has been providing services equivalent to those set forth in this RFP for three (3) years as a provider of high fidelity Wraparound services for the State Adoptions, Adoption Assistance Program (AAP). HNH provides AAP Wraparound in Humboldt, Tehama, and San Francisco Counties. Additionally, HNH has been providing evidence-based, trauma-informed mental health services in Humboldt County since 2018.

d. The total number of government agencies for which the Proposer has provided Services equivalent to those set forth in this RFP.

HNH has provided high fidelity Wraparound services and evidence-based psychotherapy to for the State Adoptions, Adoption Assistance Program in three (3) California Counties in the last three years. Counties include Humboldt, Tehama, and San Francisco.

Additionally, HNH has been providing evidence-based, trauma-informed mental health services in Humboldt County since 2018. In that time HNH has worked with schools, medical providers, county tribes, and community residents to deliver high quality, therapeutic services to children and families. In 2020 HNH saw 344 clients in 6,366 sessions; 2021 419 clients in 8,387 sessions, and in the first six-months of 2022 has cared for 399 clients in 5,301 sessions.

3. A detailed description of any litigation regarding the provision of Services equivalent to those set forth in this RFP that has been brought by or against the Proposer, including, without limitation, the nature and result of such litigation, if applicable.

HNH has not been involved in any litigation regarding provision of services of any kind.

4. *A detailed description of any fraud convictions related to the provision of services pursuant to the terms and conditions of public contracts, if applicable.*

Not applicable. HNH does not have any fraud convictions to report.

5. *A detailed description of any current or prior debarments, suspensions, or other ineligibility to participate in public contracts, if applicable.*

Not applicable. HNH does not have any current or prior debarments, suspensions, or other ineligibility to participate in public contracts.

6. *A detailed description of any violations of local, state and/or federal regulatory requirements, if applicable.*

Not applicable. HNH does not have any violations of local, state, and/or federal regulatory requirements.

7. *A detailed description of any controlling or financial interest the Proposer has in any other organizations, or whether the Proposer's organization is owned or controlled by any other organizations. If the Proposer does not hold a controlling or financial interest in any other organizations, that must be stated.*

HNH is not controlled by any other organization and does not have any controlling or financial interests of any other organizations.

B. Overview of Qualifications and Experience.

1. *Identification of the Proposer's management team, key personnel and subcontractors that will be responsible for providing Services equivalent to those set forth in this RFP, including, without limitation, any and all applicable organizational charts and/or diagrams.*

HNH's management team consists of Executive Director Jennifer Brown LCSW, Operations Director Larissa Krause LCSW, PPSC/CWA, Clinical Supervisor Megan Shewmaker, LCSW, Office Manager Melissa Culbertson, and Wraparound Program Manager Amanda Shelton. This management team is responsible for the implementation, oversight, and delivery of the HNH Wraparound program described in this proposal.

Key personnel include Wraparound Facilitator Joah Gonzalez, Family Specialist Nicholas Wennerholm, Family Specialist Caroline Mortazavi, a to-be-hired Parent Partner, and the multiple Clinicians that provided trauma-informed therapeutic mental health services. Current Clinicians include:

- Sonya Woody, ASW, PPSC: Play therapist, neurofeedback, **works with Wraparound families**
- Eric Gronley, AMFT: Therapist, neurofeedback, **works with Wraparound families**
- Samantha Brown, AMFT: Previous Wraparound facilitator, therapist, neurofeedback, **works with Wraparound families**
- Nina Misch, ASW: Previous Wraparound case manager/facilitator, therapist, **works with Wraparound families**
- Erica Ashby, ASW: Play therapist, neurofeedback, **works with Wraparound families**
- BriAnne Hutchinson, APCC: Eco-therapist, neurofeedback
- Alyse LaVerne, AMFT: Trauma Specialist, neurofeedback
- Janiel Giraldo, AMFT: Spanish speaking, neurofeedback
- Brett Sumner, APCC: Alcohol and other Drug, neurofeedback
- Kate Maxey, AMFT: Trauma Specialist, neurofeedback
- Allison Lundahl, LCSW: Grief therapy, neurofeedback
- Neurofeedback Provider: Kristina Sell
- Certified Neurofeedback Provider: Emily Christensen

Subcontractors

- Manuel Lua, MFT, High Fidelity Wraparound Coach and Consultant. Mr. Lua has been a National Consultant for the Wraparound Initiative since 2009; participated in the California Wraparound Advisory Council chairs for the training curriculum development workgroup; and was a core contributor to the development of the California Wraparound Standards published by the Center for Human Services at UC, Davis Extension. Mr. Lua has provided Wraparound training and certification to more than 10 counties and has been providing coaching and consultation to HNH on high fidelity Wraparound services.
- Shadeed Haashan, BCBA, LCSW
- Occupational Therapist

Please see, Exhibit 2 – Humboldt NeuroHealth Organizational Chart.

As a current provider of Wraparound and mental health treatment, HNH has the staffing and resources to provide high fidelity Wraparound as outlined in this proposal and is ready to welcome referrals from Humboldt County on the contract start date of November 1, 2022. HNH staff will

work closely with county personnel to establish the referral process and if necessary, transition current Wraparound youth and families to HNH's Wraparound program.

All staffing, systems, and processes are in place to begin providing services immediately. Every HNH clinician has been approved for billing Medi-Cal through the Partnership Health Plan and HNH has the ability to obtain Medi-Cal certification related to High fidelity Wraparound should further certification be necessary.

2. A detailed description of the qualifications and experience of key personnel and subcontractors that will be responsible for providing Services.

Jennifer Brown, LCSW, HNH Executive Director:

Qualifications & Experience: Ms. Brown is a trauma informed Licensed Clinical Social Worker (LCSW) and has been practicing since 2009. She is trained in the evidence-based modalities of: Attachment Therapy, Play Therapy, Eye Movement Desensitization Reprocessing (EMDR), Internal Family Systems (IFS) and is a certified Othmer Neurofeedback Provider. Alongside her administrative duties, Ms. Brown continues to provide clinical services to children, teens, adults, and families. As a local expert for the Othmer Method of Neurofeedback, she serves as an educator/trainer for the Neurofeedback Advocacy Project. Additionally, Ms. Brown is currently enrolled in the California Institute of Integral Studies certification program for a Psychedelic Therapies and Research Certificate emphasizing on FDA approved medications. Before founding Humboldt NeuroHealth in 2018, Ms. Brown had a private practice specializing in working with clients around trauma, dissociation, and attachment disorders and had worked previously as a juvenile corrections counselor at Sonoma County Juvenile Hall as well as a counselor at a residential treatment facility.

Responsibilities: As Founder and Executive Director of HNH, Ms. Brown is responsible for communicating effectively with the board of directors, maintaining fiscal integrity, and ensuring HNH is carrying out its mission. She oversees the hiring and retention of staff, auditing all clinicians charting to ensure appropriate standards, and provides ongoing training, support, and supervision to all employees.

Larissa Krause, LCSW, PPSC/CWA, HNH Operations Director:

Qualifications & Experience: Ms. Krause is a trauma-informed LCSW and holds a Pupil Personnel Services Credential for School Social Work & Child Welfare and Attendance. She is trained in evidence-based therapeutic modalities of: Attachment Therapy, Emotionally-Focused Therapy

(EFT), Dialectical Behavioral Therapy (DBT), Eye Movement Desensitization Reprocessing (EMDR), and Internal Family Systems (IFS), and is a Neurofeedback Provider trained in the Othmer Neurofeedback. Prior to working at HNH, Ms. Krause worked on multiple school campuses throughout Humboldt County as a School Social Worker and Counselor and has served as faculty for the Department of Social Work at CalPoly Humboldt, as an Adjunct Professor and the Assistant Director of Online Learning and Field Education. She continues to provide guest lectures and community training for Trauma-Informed care/approach and Introduction to Adverse Childhood Experiences (ACEs) 101 through Cal Poly Humboldt and the 0-8 Mental Health Collaborative.

Responsibilities: As Operational Manager for HNH, Ms. Krause supports the agency in a leadership position that interacts broadly across the organization. As a part of the senior management team, the OD oversees operational and administrative functions assigned to the position by the Executive Director (ED), and is responsible for overseeing the quality, efficiency, and productivity of services; reducing costs, increasing profits, and improving control measures; establishing policies; managing relationships with stakeholders; and as a member of the management team to develop and implement plans for the operational infrastructure of programs, processes, and personnel designed to accommodate the rapid growth objectives of HNH.

Megan Shewmaker, LCSW, Clinical Supervisor:

Qualifications & Experience: Ms. Shewmaker is a trauma-informed LCSW trained in Play Therapy, Cognitive Behavioral Therapy (CBT), Eye Movement Desensitization Reprocessing (EMDR), Internal Family Systems (IFS), and Othmer Neurofeedback. Before working at HNH Megan worked at Child Welfare Services in Emergency Response and Resource Family Approval.

Responsibilities: As Clinical Supervisor Ms. Shewmaker monitors the clinical work of supervisees and provides individual and group supervision for clinical staff; maintains appropriate supervision agreements and proof of hours; signs off on required paperwork for the California Board of Behavioral Sciences and the California Board of Psychology; completes staff and student evaluations and written recommendations; and assists with crisis intervention, mandated reporting, and other urgent clinical matters.

Amanda Shelton, ASW, Wraparound Program Manager:

Qualifications & Experience: Ms. Shelton is a trauma-informed Associate Clinical Social Worker (ASW) trained in evidence-based therapeutic modalities of: Emotion-Focused Therapy (EFT),

Narrative Therapy, Reflective Practice, and is a Neurofeedback provider. Before working at HNH she served as a Tribal Social Worker for Bear River Band of Rohnerville Rancheria, Planned Parenthood, and Arcata House Partnership. Cultural Competency and Awareness of the indigenous peoples of Humboldt County is one of Ms. Shelton's deepest values, which is demonstrated through her continued work and relationships with local tribal partners and professional approach to her work. She has completed the Wraparound 101 and the Wraparound Facilitator Training at the Partnerships for Wellbeing Wraparound Conference, and previously worked for HNH as a Wraparound Facilitator and was promoted to Wraparound Manager.

Responsibilities: As Humboldt NeuroHealth's Wraparound Program Manager, Ms. Shelton is directly responsible for the day-to-day operations of the Wraparound program, managing the functioning of service delivery teams, which provide a wide array of community-based youth and family support services. These services may include child and family team planning, resource acquisition, case management and linkage, interagency collaboration, and program budgeting. As Wraparound Manager, she also participates in the collection and review of the data used for evaluation of the Wraparound program (WFI, CANS), for supporting fidelity through field supervision, training, and chart reviews.

Joah Gonzalez, MA, Wraparound Case Manager/Facilitator Bilingual (American Sign Language/English):

Qualifications & Experience: Mr. Gonzalez holds a Master's in Psychology from the California State Polytechnic University, Humboldt, and a Bachelor's in Psychology, American Sign Language and Special Populations from Humboldt State University. Currently a Wraparound Facilitator serving families in Humboldt County, Mr. Gonzalez is CANS certified and has completed the UC, Davis Foundational Wraparound training, and Motivational Interviewing for Wraparound Facilitation.

Responsibilities: Under the direct supervision of the Wraparound Program Manager, the Facilitator is responsible for the coordination of the entire Wraparound team and the provision of services as outline in the Individualized Service Plan. In close collaboration with the Parent Partner and the Family Specialist, the Facilitator will support the development of the Child and Family Teams (CFTs) that drive the development and implementation of each Individualized Service Plan. The Facilitator coordinates and develops the CFT to carry out the Wraparound activities, acts as the liaison between the program and community agencies and individuals such as Clinicians, Case

Managers, County Social Workers, and Probation Officers, and schools, developing a network of support for the youth and family. The Facilitator also holds weekly meetings to discuss treatment and progress with stakeholders and completes a safety plan that utilizes the family's natural supports and keeps it up to date in the on-call binder. The Facilitator will deliver direct family support as needed including, coaching, collateral support, linking to community services, skill building, and completes all required documentation according to agency and program standards within required timeframes, and provides crisis stabilization and management to child/family teams when plans disrupt and/or crisis situations occur.

Nick Wennerholm, Family Specialist:

Qualifications and Experience: Currently enrolled in a Board Certified Assistant Behavioral Analysis (BCaBA) program through the University of Florida, Mr. Wennerholm works closely with a youths lead therapist under the supervision of a licensed Board Certified Behavioral Analyst (BCBA) and applies a scientific approach to the study of behavior. Mr. Wennerholm has been working as a Family Specialist in the Wraparound program for two years providing one-to-one therapeutic behavioral interventions for children and their families as needed at home, school, or other community-based settings in accordance with the treatment plan.

Responsibilities: Mr. Wennerholm helps develop Child and Family Team driven behavioral plans and interventions to youth aimed at stabilizing their behavior(s) and teaching/coaching functional skills that enable the youth to remain in a family setting and provides one-to-one therapeutic behavioral interventions for children and their families as needed at home, school, or other community-based settings in accordance with the treatment plan. The Family Specialist attends and actively participates in monthly Child and Family Team Meetings and provides consistent support to youth and families at medical appointments, Individual Educational Plan (IEP), and 504 meetings. Interventions include, but are not limited to social skills training, anger management, anxiety reduction, communication skills, feeling identification, emotional regulation, etc.

Caroline Mortazavi, Family Specialist:

Qualifications and Experience: Caroline has recently completed an Introduction to Equine Assisted Services and Therapies course taught by local Equine Therapist, Dr. Terri Jennings through Cal Poly Humboldt. There, Caroline learned the foundations of evidence-based practices of equine therapy, and currently assists subcontracted equine therapist(s) working with Humboldt

NeuroHealth's wraparound program. Ms. Cortazavi is a Family Specialist in the Wraparound program.

Responsibilities: As a Family Specialist, Ms. Mortazavi provides Child and Family Team driven one-to-one therapeutic behavioral interventions for children and their families as needed at home, school, or other community-based settings in accordance with the treatment plan. Interventions include, but are not limited to social skills training, anger management, anxiety reduction, communication skills, feeling identification, emotional regulation, etc.

Parent Partner Position: (To-be-hired): This position has been part of the Wraparound program for the last three years but is currently vacant. HNH in the process of hiring for this role.

Qualifications & Experience: Parent Partners must have lived experience dealing with mental health issues, child welfare, and/or juvenile probation. Experience can include dealing with their own mental health or other challenges, or via their child or other family member. Their experience creates a bridge between the youth and family and the formalized services and systems they are engaged in.

Responsibilities: Parent Partners are responsible for establishing and implementing the support services for children and families, serving as the primary liaison for the family's involvement with the program and offering support in whatever way is most helpful to each individual family according to program guidelines. They serve as the client representative to the program and primary family advocate and provide introduction and engagement support for families receiving services. The Parent Partner coordinates with the Facilitator, Family Specialist, and Child and Family Team in the development and implementation of program systems and standards; participates in family advocate training to support the family in advocating effectively for themselves; links families with appropriate services and serves as a role model and advocate for children/families; and engages and provides skill-building to youth and families.

Please see Exhibit 3 – Key Staff Resumes and Exhibit 4 – Job Descriptions.

3. A detailed description of the Proposer's overall experience regarding the provision of Services equivalent to those set forth in this RFP, which includes specific examples of the outcomes and successes of such Services.

HNH has been providing high quality psychotherapy and neurofeedback for four years, and high fidelity Wraparound for three years for the State Adoptions Adoption Assistance Program. In

that time, HNH has displayed a high rate of engagement of youth and families in the Wraparound program. In the last three years of Wraparound, 12 of 13 families achieve **permanency**. Current Wraparound and mental health clients are meeting their initial goals, creating new goals, and display a growth in skills and understanding that supports the stabilization of the family unit and the individuals.

Of the current Wraparound clients who have been with the program for six months or longer, **all** clients have remained in their placements. Additionally, these clients have made significant improvement in the life functioning areas of Family Functioning, Living Situation, Social Functioning, School Behavior, and Decision Making; and all clients who started with needs in Oppositional, Anger Control, Impulsivity/Hyperactivity, and Adjustment to Trauma have improved in these areas. Concurrently, these same clients have seen improvements in their strengths including Family Strengths, Interpersonal, Educational Settings, and Talents and Interests.

The caregivers of these clients have also made improvement in their needs and strengths with increases in their Involvement with Care, Caregiver Knowledge, and Social Resources; and have addressed their own mental health needs and seen decreased symptoms as a result.

Two current case examples are included below.

Client A:

When Client A started with HNH Wraparound services, they would not use words to express their needs, instead shrieking until their caregivers figured out what their need was; they had tantrums that would turn violent, including hitting, scratching, and biting, and were at risk of retention and had no social connections at school. Additionally, although school age, due to encopresis they wore a diaper and needed it to be changed every time they urinated, or they would throw a tantrum.

At last review, Client A is speaking in full sentences to express their needs, using appropriate language, and waiting for a response and they are waiting for attention instead of having fits. School has improved significantly, and they are functioning almost at grade level and have developed connections with their peers that are solid and enriching; and they are using the restroom almost independently.

Client B:

Client B would have severe fits of shame where they would shut down and be non-responsive for long periods of time balled up in a fetal position and on a weekly basis, they would injure animals by hitting, kicking, and pinching.

Now they are conveying their needs and feelings and modeling this behavior for siblings and has had no reports of animal cruelty in the past 10 months.

4. A detailed description of the Proposer's overall experience implementing evidence-based, trauma-informed and culturally and linguistically responsive practices in relation to the provision of Services equivalent to those set forth in this RFP.

Approaching the development of HNH with a 'start as you mean to go' mindset, HNH has actively developed a conscious staff rich in cultural diversity and practice. As trauma-informed Clinicians, we take great pride in our capacity to offer an evidence-based service model that is culturally and linguistically responsive to the diverse needs of our community. All HNH's clinical staff has graduated from accredited graduate programs focused on a vast array of science based knowledge of effective treatments and therapeutic modalities. The majority of HNH's mental health clinicians are from the community having graduated from Cal Poly Humboldt's department of Psychology and/or the department of Social Work programs.

Specific to our region, the Social Work department prepares "students for advanced generalist social work practice responsive to the challenges and resources present in rural areas in general and indigenous communities in particular, and to present local historical and contemporary social issues within a global perspective."¹ Having staff that live and work in the communities they serve provides a deep understanding of the challenges and issues faced by the youth and families in Humboldt County.

HNH also have extensive experience working with indigenous people in the community, with six (6) current staff members who graduated with a degree that included a concentration in working with Native American tribes and communities. HNH maintains ongoing relationships with the local tribal leaders and indigenous groups including Trinidad Rancheria Social Services who work with HNH for consultation for their Neurofeedback providers and with the Bear River Tribe who

¹ Cal Ploy Humboldt, Social Work. <https://www.humboldt.edu/programs/social-work>

are implementing neurofeedback and are receiving support from HNH staff. HNH is also in the process of establishing a cultural humility training for staff with the Hoopa Valley Tribe.

HNH understands the importance of linguistic competence and maintains the capacity to serve the Spanish speaking community by employing a bilingual (Spanish/English) Clinician and is working on translating written materials and curriculum into Spanish. We are also competent to serve the deaf and hard of hearing populations.

The foundation of HNH's service delivery has been the use of evidence-based practices and treatment modalities including Wraparound. Our mindful implementation of evidence-based practices in service delivery is sourced with an acute objective to provide a balanced and responsible use of current and relevant research developing and integrating appropriate treatments/interventions that have been proven to yield positive outcomes for our clients. The HNH service delivery model is guided by the principles of trauma-informed practice: Safety, Trustworthiness and Transparency, Peer Support, Collaboration and Mutuality, Empowerment, Voice and Choice, and Cultural, Historical and Gender Issues. Some of the evidence-based trauma-informed theories and models practiced by our agency include Wraparound, Acceptance and Commitment Therapy (ACT), Cognitive Behavioral Therapy (CBT), Dialectical Behavioral Therapy (DBT), Mindfulness-based Cognitive Therapy (DBT), Attachment Therapy (AT), Emotion Focused Therapy (EFT), Internal Family Systems (IFS), Play Therapy (PT), Motivational Interviewing (MI), and Eye Movement Desensitization Reprocessing (EMDR).

HNH maintains fidelity to these evidence-based practices by using certified trainers and professionals to train and coach staff in the use of the practice. Ongoing oversight is maintained through weekly group and individual supervision, coaching, use of appropriate consultants, and reviewing individual client data (CANS) for treatment outcomes.

5. A detailed description of the Proposer's overall knowledge of the legal, billing, organizational productivity and other procedural requirements and standards applicable to the provision of Services equivalent to those set forth in this RFP.

HNH has four (4) years of experience managing the legal complexities of mental health services including billing insurances such as Medi-Cal, Beacon/Partnership, Medi-Care, private insurances, and community organization providers. HNH has a high track record of being productive and cost effective with specific attunement for quality service delivery agencywide. We have established standards for Wraparound within our structure of wraparound services.

6. A detailed description of how the Proposer's qualifications will help meet the County's objective of providing High Fidelity Wraparound Services.

Humboldt County having one of the highest ACE's scores in the state, HNH has been working with State Adoptions, Adoptions Assistance Program (AAP) providing high fidelity Wraparound services for the past three (3) years to some of Humboldt County's most challenging populations.

To ensure the highest quality services, HNH has been engaged in a Wraparound quality improvement project, receiving high fidelity coaching and technical assistance from a state certified Wraparound trainer Manuel Lua. Through weekly consultations, HNH has implemented significant refinements to the Wraparound model, and has fully integrated the 10 Guiding Principles of Wraparound throughout service structure and delivery. Our team has worked diligently with the guidance of our Wraparound trainer to ensure high fidelity Wraparound service delivery throughout all four phases of Wraparound services and is implementing the Wraparound Fidelity Index (WFI) to ensure fidelity to the Wraparound principles and treatment model. The WFI will measure and track HNH's Wraparound implementation fidelity, caregiver and youth satisfaction, and youth and family outcomes.

Throughout Wraparound services, the CANS is used to identify strengths and needs and develop the Individualized Service Plan (ISP). Wraparound services are data driven and are used to create an ISP. It is through the CANS and CFT process that the family speaks, utilizing their *voice and choice* to inform the picture of their challenges, strengths, and needs. It then becomes the Wraparound team's responsibility to support the family in removing obstacles to achieving their goals. The ISP is a living document that evolves and changes throughout the Wraparound process, guiding the discussion of needs and services at all Child and Family Team (CFT) meetings. CFTs are the main tool for reviewing and adapting services and dealing with significant changes including crisis. The ISP is informed by the CANS, the CANS is used as a measurement tool within the CFT, and guides decision making throughout the Wraparound process.

Within the high fidelity Wraparound Program, HNH's team members have vested interests throughout the community such as Rotary, Chamber of Commerce, 0-8 Mental Health Collaborative, CalPoly Humboldt's School Social Worker Community, school-based mental health services, serving as faculty for the department of Social Work at CalPoly Humboldt, volunteering time at community events, providing essential mental health groups for community

members including eco-therapy women empowerment and teen ADHD groups, Dialectical Behavior Therapy (DBT) skills group, trauma-yoga, and mindfulness group add more here. These are just some of the partnerships that HNH maintains with community organizations and resources. These relationships help remove barriers to service delivery, granting access and opportunities for those in need facilitated by our Wraparound team.

5.0 PROJECT DESCRIPTION

7.6 Project Description:

A. Description of Services.

1. *A detailed description of any and all Services equivalent to those set forth in this RFP that will be provided as part the High Fidelity Wraparound Services program.*

Below is a list of the activities and services that are provided within the four phases of high fidelity Wraparound.

~Assessment/Engagement: The strength assessment is an early and vital activity which encourages family members to identify, acknowledge, and support each other. We use the Child and Adolescent Needs and Strengths (CANS) assessment tool to assist with identifying the family's strengths and needs, and it is used guide services throughout the Wraparound process.

~Safety Planning& Crisis Stabilization: Wraparound staff will work with the family and county partners to assess for risk and protective factors and develop a safety plan. Copies of these plans are provided to child welfare/probation worker and are available to the after-hours on-call staff who answer emergency calls from the families 24 hours a day, 7 days a week. Staff responding to emergency calls are able to assist the families in establishing safety and stabilization for most crisis situations by walking the families through their safety plans. They also help the families to assess for immediate safety concerns that would necessitate the utilization of formal crisis stabilization (e.g., respite, law enforcement services, or other community-based emergency response resources).

~Family Finding and Team Development: The Connection Map is used to help families identify their natural supports, gaps, and brainstorm how the gaps might be filled. The process of creating a Connection Map allows for a nonjudgmental way of discovering not only available natural supports but also an opportunity for the family to identify the connections associated with each support person. The Connection Map is updated throughout services and is a tool the family take with them after graduation.

~Plan Development: The Wraparound teamwork with the youth, family, and stakeholders to develop an Individualized Service Plan (ISP). The ISP outlines the family's strengths and needs, identifies activities to meet those needs, who is responsible, and the timeframe for completion.

~*Child and Family Teams (CFTs)*: CFTs are the primary intervention and activity for developing and overseeing Wraparound services. At a minimum it should include the child/youth (as appropriate), caregivers, Wraparound Team, Clinician, County Social Worker/Probation Officer, and other individuals identified by the family as important.

~*Case Management*: Assists clients in accessing needed medical, educational, social, vocational, rehabilitative, or other community services. This could be communication, coordination, and referral.

~*Individual, Couples, and Family Therapy*: A service activity that focuses on symptom reduction, self-regulation, skill building, communication, emotion awareness, and other therapeutic supports based on the needs of the individual, couple, or family served.

~*Rehabilitation*: Activities that support improving, maintaining, and restoring a client's daily living skills, social, and leisure skills—rehab services can be provided in an individual or group setting.

~*Emergency/On-call Services*: HNH provides an on-call system for crisis intervention and support for Wraparound clients 24/7. Crisis intervention is specifically intended to stabilize a presenting emergency in the least restrictive environment.

2. A detailed description of the manner in which Services equivalent to those set forth in this RFP will be provided as part the High Fidelity Wraparound Services program, including, without limitation, the recruitment, engagement, support, and evaluation methods that will be utilized.

Humboldt NeuroHealth (HNH) provides High Fidelity Wraparound Services to families by way of adherence to the Ten Principles of Wraparound which includes the following:

- ***Family Voice and Choice***: HNH engages families in all the decision making processes, ensuring they are in the driver seat in determining the types and terms of the services they are provided, goal setting, evaluating progress or not toward the goals, and the impact of the Family Plan.
- ***Team Based***: Wraparound services are team based led by the Child and Family Team. HNH holds monthly (at minimum) Child and Family Team meetings and invites all identified CFT members to provide input and take accountability for the strategies developed from the Family Plan.

- ***Natural Supports:*** HNH works closely with the family to gather information regarding the family's natural supports, identify gaps in their support system, and works constantly to build and strengthen these connections. Natural supports are essential to the long term stability of the youth and family, and development of a strong network of support that the family is comfortable using is integral to the success of our Wraparound services.
- ***Collaboration:*** HNH works in close cooperation with the family, schools, contracted service providing agencies, stakeholders, and natural supports on a continual basis to ensure services support attainment of the outlined goals and provide the best outcomes for families.
- ***Community Based:*** Services are provided in the homes, schools, and other community-based locations that ensure ease of access for the families. HNH staff work with families to ensure the least restrictive environment by providing services that are accessible, inclusive, and responsive.
- ***Culturally Competent:*** HNH identifies the unique cultural values, traditions, beliefs, and identity of each family and child served and incorporates these components throughout the Wraparound process. A family's cultural identity is often an identified strength and is used to meet the youth and family's needs throughout services.
- ***Individualized:*** HNH provides services that have been determined to be relevant and necessary with the input of the family and team. These services are part of the development of the Family Plan which is unique to each client family and is created using interviews and assessment tools including the CANS.
- ***Strengths-Based:*** An intensive and ongoing evaluation of the family's and team's strengths is undertaken and incorporated within the Family Plan so that each team member is able to pull from their own unique strengths in engaging and determining strategies to meet the identified needs.
- ***Unconditional Care:*** HNH and team members commit to creatively overcoming challenges and obstacles working through a strengths-based lens to create team cohesion and encourage a collaborative environment.
- ***Outcome Based:*** HNH evaluates fidelity and competency by periodic reassessment of the CANS (intake, every three months, and discharge) and tracking successful strategy implementation.

Services are flexible, individualized, family-centered, strength-based, and follow the state Wraparound standards and the four (4) phases of Wraparound services: Facilitation/Team Preparation [Engagement], Initial Plan Development, Implementation, and Transition. By adhering to these standards and phases, HNH Wraparound services are designed to build upon the child/youth and family strengths, maximize the development and utilization of community resources to sustain improvements, and increase permanency and placement stability. Three critical elements need to align to effectively provide Wraparound services: 1) Clearly defined program goals, 2) A set of guiding principles underlying the goals and strategies, and 3) Milestones/phases of treatment.

In HNH's Wraparound program, the Wraparound team works very closely to provide care and support to the family for their specific needs; the team includes a Wraparound Facilitator, Family Specialist, Clinician, and a Parent Partner.

The Facilitator leads the Child and Family Team (CFT) provides leadership in the assessment, development, implementation, and evaluation of the ISP, and assumes responsibility for the management of interventions and coordination of formal and informal supports. The Facilitator learns the family's strengths, and underlying needs, which creates rapport with the family, and ensures they are driving the Wraparound process by utilizing their voice and choice. The Family Specialist is the behavioral skill building expert, and prioritizes family search and engagement activities, and use of natural supports in the CFT process. Their primary responsibility is to transition their community-based knowledge and expertise to the youth and caregivers, and to develop sustainable interventions that help promote independence. The Clinician completes the Mental Health Assessments and works closely with the CFT to develop the Mental Health Plan and provides clinical treatment and therapy to the individuals as well as family therapy. The Parent Partner supports the CFT in bridging any gaps that may occur between service providers and the families, and as a former recipient of services, is in a prime position to assist the family in finding and expressing their 'voice and choice' within the CFT. The Parent Partner provides clarification on the Wraparound Principles, the CFT process, and what to expect from the services offered. It is through the three critical elements (above), and this effective strategy of teaming that the family will achieve long lasting transformation. The four Wraparound phases, Facilitation Team and Plan Preparation, Initial Plan Development, Implementation, and Transition, are described in depth below.

Facilitation and Team Preparation

Engagement and team preparation begins immediately. Within 24 hours the referring party receives acknowledgement of the referral, and the Wraparound team is identified. Within three (3) business days the Wraparound team will contact the child/youth and family. While the Facilitator works closely with the referral party, to understand any court mandated requirements that may exist and the department's goals for the family, the Parent Partner begins engaging the family, educating them about the Wraparound program, the CFT process and learning about their story and perspective on their challenges. The Parent Partner and Family Specialist will begin the Family Finding by engaging the family in an ongoing discussion to identify existing and potential natural supports which will be used to build the CFT and their network of natural supports. The Facilitator and Clinician will also work with the youth and family and CFT to complete an initial safety plan and will provide immediate crisis stabilization and support.

The Facilitator will work closely with the Clinician and will complete the Child and Adolescent Needs and Strengths (CANS) assessment within the first two weeks of opening. The CANS guides the creation of the ISP and serves as a point of reference throughout all four stages of Wraparound. The Facilitator will work on sustainability of the ISP through the Family Finding process, utilizing the Connection Map to help families identify the inherent strengths in current relationships, as well as potential natural supports to promote independence after formalized services have ended. Family Finding is not a one-time event, and the Connection Map is used throughout all stages of treatment to attain sustained transformation.

Following the initial completion of the Connection Map, the Wraparound team will collectively support the family in the creation of a Safety Plan. Safety planning is at the heart of every placement decision and is done by formally assessing risk and protective factors, and constantly monitoring those factors for changes that could necessitate a safety-based change of placement. Safety planning occurs early in our engagement process and uses the families existing capabilities to maintain safety, while adding new resources that they may have not considered during times of stress. The Facilitator, working in partnership with Child Welfare or referring partner (shared responsibility), helps the family to identify situations that could compromise the safety of the child, the family, or the community (and/or situations that have done so in the past), and clear steps are outlined for how the family will respond to these anticipated situations. The Family Specialist assists the youth in identifying effective strategies to prevent safety concerns

from occurring or to minimize negative consequences once they have. The Parent Partner acknowledges and validates existing challenges or barriers that have impeded the provision of safety.

By the end of the first two weeks the CANS assessment, Connection Map, and Safety Plan is completed with the family. Collectively, this information creates the foundation for the Wraparound Team's work with the family and is used to inform decision making, initial plan development, and progress monitoring throughout services.

Initial Plan Development

Using the information gathered in phase one, the Facilitator works with the child and family team (CFT) to create an Individualized Service Plan (ISP), utilizing a strength-based highly individualized approach to help the family explore and prioritize their strengths and areas of greatest needs (i.e. safety, emotional well-being, family, a place to live, school, work, cultural, spiritual, social/fun, legal, medical/health, mental health, emotional and behavioral health, finances, relationships, developmental or independent living skills, and other). Utilization of the CANS supports the planning process by prioritizing needs and goals. Ratings of 2 or 3 are discussed with the CFT to ensure those areas are incorporated into the ISP, as are all court order requirements. Goals are developed to address any unmet need via the family's strengths, resources, and supports. The result is the ISP that is developed for each participant and family and is updated frequently throughout the provision of Wraparound services.

Implementation

During implementation, the initial ISP activities are implemented. The primary goal is to begin making progress on the family's general stabilization, including their ability to meet their basic needs, and to begin fostering independence from social services. CFT Meetings are a highly successful way of promoting a family's ability to become self-sufficient and occur weekly in this phase. The Wraparound team coaches the family to identify their strengths and to utilize both informal and formal supports to make decisions, solve problems, and celebrate each other's successes. An effective CFT requires the active participation of the children, caregivers, informal and natural supports. Collaboration among all team members is essential, and natural supports should outnumber service providers to encourage family voice, independent decision making, the sharing of tasks, and moving toward self-sufficiency.

The CFT meeting is also the forum used by the Facilitator to monitor progress towards domain goals. It is important to remember that a CFT is an intervention and should be monitored and adjusted just as any other intervention, to fully maximize its potential. The ISP outlines the specific assignments of each team member to assist the family with reaching their stated goals and is reviewed at every CFT.

During implementation the Family Specialist is implementing behavior management and skill development with the youth and family, while the Parent Partner is continuing to provide parent support and coaching. The Clinician works closely with all members of the CFT to create the Mental Health Plan (MHP) that works in conjunction with the ISP. The MHP is informed by the CANS/CFT planning process and identifies and sets goals to address in treatment. The Clinician contributes to the attainment of ISP goals by applying their advanced clinical training and scope of practice to infuse mental health services into the entire Wraparound service model. The Clinician will use appropriate evidence-based practices, family, and group work as well as individual therapy to support the children and family's mental health needs.

Transition

Transition planning is a critical part of the CFT process and begins at intake. Once the transition stage is reached, the focus of the work is on building skills and resources in both the family and the youth, so that Wraparound services are no longer needed. Formal services begin to titrate down as tasks are increasingly shifted from members of the Wraparound team to the family and their natural supports.

The goal of each member of the Wraparound team during this stage is to support the family in their ability to function collectively as a unit, utilizing all their renewed strengths and newly developed skills. The shifting of these tasks also serves as an experiential reminder to the family of where they were, and where they are at now with the additional skills, strengths, and resources that they have created.

The family will develop a Transition Plan utilizing an intervention called, “Where we were, Where we are, Where we're going” (WWW) transition activity. The WWW activity elicits input from the CFT to identify what was working well and the areas of need at the time services were initiated, what has improved for the family while Wraparound services have been in place, current tasks, and projected needs once services have ceased. Working together the CFT develops a thorough and individualized Transition Plan that includes but is not limited to an array of

community resources, copies of the tools and strategies that were created in collaboration with the family during the Engagement/Team Preparation and Initial Plan Development stages, and linkages to community resources.

For STRTP youth, Wraparound engagement will begin before the youth transitions from the STRTP to their home. Youth transitioning from a STRTP have high rates of trauma and struggle with the change from the STRTP's therapeutic environment to their home environment. Following best practices to ensure a stable transition and placement stability, HNH will begin working with the youth and the caregivers before the youth leave the residential facility and will work closely with the residential staff to understand the youth's needs, strengths, concerns, and will incorporate all the historical experience of the STRTP staff into the transition planning and care. This may include a trusted residential staff member continuing to support the youth after their time in care. The Wraparound team focuses on supporting the youth and family's needs during this time of change, putting plans in place to assist with challenges, and ensuring all family members have the skills and support necessary for permanency. Wraparound services follow the stages and activities shown above. Services are highly individualized and are based on need and HNH will ensure all necessary services and supports are in place for the child and family prior to transition.

Additional Services

Crisis Intervention/On-call HNH has an effective crisis response system with staff coverage for on-call being on a shared, rotating basis, with a Facilitator, Wraparound Supervisor, and Family Specialist or Parent Partner available 24 hours a day, 7 days a week. Staff respond within 15 minutes of receiving a call and utilize the family's safety plan when responding to crisis. Staff guide the families to assess for immediate safety concerns that would necessitate the utilization of formal crisis stabilization, and help family use their safety plan to stabilize the situation. On-call Family Specialists/Parent Partners may go to the homes to provide in person logistical support, as needed.

Flexible Funding and Resources will be available in special circumstances following the Wraparound philosophy of stewardship; promoting self-sufficiency and the use of limited monies to assist families when all other resources have been exhausted. When utilizing Flex Funds HNH ensures teams remain true to the value of addressing a family's unmet needs while also promoting its self-sufficiency using the following set of criteria: Flex Funding expenditures must move the family toward its stated goals, be cost effective, and sustainable.

3. A detailed description of the processes that will be utilized to track and monitor the Services that will be provided as part of the High Fidelity Wraparound Services program.

HNH will use a three stepped approach to oversee the high fidelity Wraparound services: The Wraparound Fidelity Index (WFI) to track fidelity, the Child and Adolescent Needs and Strengths (CANS) assessment will provide quality indicators that will be used to ensure the needs of the CFT are being met, and service objectives such as length of stay, demographics, and graduation rates to ensure compliance with program requirements.

The Wraparound Fidelity Index (WFI) is used assess the fidelity and adherence to the Wraparound philosophy. Clients, family members, facilitators, and CFT referral sources complete the WFI at the time of a client's discharge, to gain a complete picture of the agency's Wraparound implementation process and provides a rating for HNH's fidelity to the phases and principles of Wraparound. Individual reports will be aggregated and compared to the national mean for Wraparound services and any area that is rated below the national mean will be reviewed and the Executive Director, Operations Director, and Wraparound Supervisor will develop and implement an action plan to address the identified issues.

Quarterly reports that include WFI, CANS, and service data will be shared with the county. Annually, HNH will make training and coaching recommendations based on the data to support HNH and county staff.

4. A detailed description of the processes that will be utilized to collect data related to, and evaluate the effectiveness of, the Services provided as part of the High Fidelity Wraparound Services program, which includes, without limitation, the process for collecting and analyzing client-level data including the CANS, the process for measuring the success of the Services being provided, and the steps that will be taken if identified performance targets are not met.

As described in the program section, the CANS is utilized in treatment planning, decision making, and progress monitoring, and is administered when a client enters the program, every three (3) months, and at discharge. The CANS is comprised of several domains used to identify and monitor client needs and strengths. Specific CANS items are tracked to address the individualized needs of clients and the flexibility of the CANS allows for the creation of county- or program-specific modules when necessary.

HNH will use Objective Arts (OA) for the warehousing, analysis, and reporting of CANS data. The OA system provides various reports to compare assessments across time for the monitoring

of individual client progress and to inform ongoing service planning for that client. Data is also aggregated to measure the overall impact of Wraparound services. Program level CANS reports are reviewed with each month to identify program needs and strengths. Individual reports can be created automatically to assist clinical staff and supervisors in case discussions and indicates when performance targets are not met. If/when this occurs, the Operations Director, Wraparound Supervisor, and Clinical Supervisor will work with the Wraparound team to implement an improvement plan to ensure performance targets are met.

Together, the CANS, WFI, and service objectives provide a comprehensive approach to measure an array of performance and outcome measures related to Wraparound services.

B. Quality Assurance Capabilities.

1. A detailed description of the Proposer's understanding of the requirements, challenges and potential hurdles applicable to the provision of Services equivalent to those set forth in this RFP.

As a current provider of Wraparound and Specialty Mental Health Services in Humboldt County, HNH understands the challenges and potential hurdles faced by the youth and families we serve. HNH's High Fidelity Wraparound Program employs the 10 Wraparound Principles which align with and meet the County's needs for the Wraparound Program including:

- Services promote and empower the youth and family to own their experience in the program including identifying needs, strengths, and goals, and choosing how to meet the identified needs.
- Wraparound services are family centered, culturally relevant, and highly individualized based on identified needs and follow the principles and four phases of Wraparound service delivery.
- Services are team-based with the youth and family at the center of the team.
- Services are community-based, provided in the homes, schools, and other locations convenient for the youth and family.
- Services are flexible. Wraparound staff approach challenges creatively, with a non-judgmental perspective understanding that as the needs and strengths of the youth and family evolve, so too must the approach to services.
- Services focus on building a network of natural and community supports that will be available to the youth and family long after their time in the Wraparound Program ends.

The goal is for the family to have and understand how to utilize their network of support to maintain stability without formal intervention.

- Services are needs and strengths based and utilize a child and family team plan that is developed collaboratively by the Child and Family Team.
- Services focus on keeping children and youth in the least restrictive environment.
- Services are outcomes based with ongoing evaluation and tracking of service objectives and outcomes.
- Services are cost effective and maximize resources available.
- Wraparound teams work toward creative solution that meet the needs of children, youth, and families.

2. A detailed description of the specific management strategies that will be utilized to assure satisfactory performance of Services equivalent to those set forth in this RFP.

HNH's senior management team has been in place since the agency started in 2018. Executive Director Jennifer Brown, Operations Director Larissa Krause, Clinical Supervisor Megan Shewmaker, and two licensed clinicians provide the guidance and leadership for service delivery throughout HNH. All HNH staff receive weekly individual and group supervision. Supervision is a supportive learning process to help staff develop and enhance their skills, and is also a means of monitoring service delivery, treatment outcomes, and performance.

Ms. Shewmaker also conducts monthly chart audits to ensure documentation is at agency and contract standards and reviews clinical treatment and services against performance standards (timeliness, medical necessity, treatment plan, objectives, appropriateness of interventions, etc.).

These activities combine with the use of the CANS, WFI, and service data to provide a comprehensive plan of oversight, remediation of challenges, and recognition for what is working well.

3. A detailed description of how the availability of key personnel, and the expected communication channels between the Proposer and DHHS – Behavioral Health and Child Welfare Services will ensure satisfactory performance of Services.

HNH's Wraparound staff are trained and providing Wraparound services currently and are ready to provide services for Humboldt County referred youth and families at the start of the contract, November 1, 2022.

Throughout HNH's Wraparound program, staff work in close collaboration with all stakeholders, including County departments, schools, other service providers, and tribal organizations to ensure open communication and ongoing support for the youth and family. HNH maintains offices in three (3) locations in Humboldt County, has ongoing relationships with the schools in Humboldt County, and are collocated on three school campuses. Services are community-based and provided in locations that are accessible for those we serve, and key staff are highly available to clients, caregivers, social workers, probation officers, and other key stakeholders in the provision of Wraparound services.

All services are provided in close collaboration with the referring agency including county partners, other community agencies, schools, and other stakeholders. The primary point of contact for communication about the Wraparound program will be the Wraparound Manager, who will oversee the day-to-day operations of the program. Department social workers, Probation Officers, and other relevant staff will be included in the CFT meetings and activities as appropriate, and documentation of the services and activities will be provided to the county as appropriate. The close collaboration with the county departments promotes continuous, open communication between the Wraparound staff and county partners. Should concerns arise that cannot be resolved with the Wraparound team, the Wraparound Supervisor would be the next point of contact for mediating a resolution. Should the issue require escalation to HNH's executive team, the Executive Director and Operations Director will be available for dispute resolution and support.

6.0 COST PROPOSAL

REQUEST FOR PROPOSALS NO. DHHS2022-03**High Fidelity Wraparound Services ATTACHMENT B – COST PROPOSAL FORM**

A. Specialty Mental Health Service and Rate	
Service Title: Individual, Couples, and/or Family Therapy Per Minute Rate: \$3/minute Number Served: 20 Minutes per Person: 6,240 per year	\$374,400.00
Service Title: Rehabilitation Per Minute Rate: \$3 Number Served: 20 Minutes per Person: 3,120 per year	\$187,200.00
Service Title: Assessment Per Minute Rate: \$3.50 Number Served: 20 Minutes per Person: 180	\$12,600.00
Service Title: Case Managment Per Minute Rate: \$2.50 Number Served: 20 Minutes per Person: 4680 per year	\$234,000.00
Service Title: Per Minute Rate: Number Served: Minutes per Person:	\$0.00
Total Specialty Mental Health Service Costs:	\$808,200.00
B. Personnel Costs	

Title: Facilitator Salary Calculation: 2FTE x \$74,829.55 annually, includes salary and benefits Duties Description: Facilitates the Wraparound process, develops the Child and Family Team, and conducts the Child and Family Team meeting. Recruits and encourages natural and formal supports by thoroughly educating them about the CFT process prior to the CFT meetings. Coordinates the development and implementation of individualized service plans and provides direct services to children and families to maximize the involvement of all members of the Child and Family Team Meetings.	\$149,659.10
Title: Wraparound Supervisor Salary Calculation: 1 FTE x 86,173.45 annually, includes salary and benefits Duties Description: Is directly responsible for the day-to-day operations of the Wraparound program, managing the functioning of service delivery teams, which provide a wide array of community-based youth and family support services. These services may include child and family team planning, resource acquisition, case management and linkage, interagency collaboration, and program budgeting.	\$86,173.45
Title: Clinician Salary Calculation: 1 FTE x \$90,000 annually, includes salary and benefits Duties Description: Is responsible for completing mental health assessments, assisting with safety planning, and providing therapeutic interventions for Wraparound client's and their families including individual, couples, and family therapy. Clinicians are an integral part to the Child and Family Team and work closely with the Wraparound team to ensure treatment aligns with the needs, strengths, and goals as outline in the ISP.	\$90,000.00
Title: Family Specialist Salary Calculation: 1 FTE x \$57,996 annually, includes salary and benefits Duties Description: The Family Specialist attends and actively participates in monthly Child and Family Team Meetings and provides consistent support to youth and families at medical appointments, Individual Educational Plan (IEP), and 504 meetings. Interventions include, but are not limited to social skills training, anger management, anxiety reduction, communication skills, feeling identification, emotional regulation, etc.	\$57,996.00

Title: Administrative Support Person Salary Calculation: .50 FTE x \$35,584.54 annually, includes salary and benefits Duties Description: Provides site level direct support to the Humboldt County high fidelity Wraparound programs proposed services. This includes office management, contract monitoring, technical maintenance, general clerical duties, managing client files, and reception.	\$17,792.27
Title: Parent Partner Salary Calculation: 1 FTE x \$57,996 annually, includes salary and benefits Duties Description: Parent Partners are responsible for establishing and implementing the support services for children and families, serving as the primary liaison for the family's involvement with the program and offering support in whatever way is most helpful to each individual family according to program guidelines.	\$57,996.00
Total Personnel Costs:	\$459,616.82
C. Operational Costs	
Item: Rent & Mortgage Description: 25% of \$106,000/year for rent and mortgage	\$26,500.00
Item: Utilities Description: 25% of \$15,000 per year for water, gas, electricity, garbage, and janitorial	\$3,750.00
Item: Telephone and Telecommunication Description: 25% of \$6,000 for landline, cell phones, etc.	\$1,500.00
Total Operational Costs:	\$31,750.00
D. Consumables/Supplies	
Item: Office Supplies Description: Staff supplies paper, pens, technology; office exp	\$3,000.00
Title: Supplies Description: Therapeutic materials, curriculum, equipment, work related equipment	\$3,750.00
Title: Description:	\$0.00
Total Consumable/Supplies:	\$6,750.00
E. Transportation/Travel	

Title: Mileage Reimbursement Description: Mileage reimbursement for staff at .625 per mile, estimated at 800 miles per month per FTE. $3.0 \times 800 \times 12 = 28,800$ miles @ .625 per mile = \$18,000	\$18,000.00
Total Transportation/Travel:	\$18,000.00
F. Other Costs	
Title: Flex Funds Description: Flex Funds for Wraparound families to fill unmet need. Budgeted at \$600 per client per year. $600 \times 20 = \\$12,000$	\$12,000.00
Total Other Costs:	\$12,000.00
G. Indirect Costs	
Title: Indirect Costs Description: Human Resources Support, Executive Director, Operations Director, IT Support, Fiscal and Accounting Support . Calculated at 10% of all existing programs	\$220,000.00
Total Other Costs:	\$220,000.00
Total:	\$748,116.82

Humboldt NeuroHealth Budget Justification

HNH is requesting \$1,408,320.82 per year to serve 20 Wraparound clients and their families with high fidelity Wraparound services. Please note, this total reflects the estimated billing for Specialty Mental Health Services (\$808,200) and the direct costs of providing Wraparound services (\$600,120.82) which does not include the personnel costs for the Clinician and Family Specialist to prevent duplication as their costs are captured under the Specialty Mental Health Services rates.

A. Specialty Mental Health Service and Rate

The services and rates are detailed on Attachment B, and total \$808,200 to serve 20 Wraparound clients with Specialty Mental Health Services.

B. Personnel Costs – Total \$311,620.82 [This total does not include the Clinician or Family Specialist as noted above.]

2.0 FTE Facilitator: Facilitates the Wraparound process, develops the Child and Family Team, and conducts the Child and Family Team meeting. Recruits and encourages natural and formal supports by thoroughly educating them about the CFT process prior to the CFT meetings. Coordinates the development and implementation of individualized service plans and provides direct services to children and families to maximize the involvement of all members of the Child and Family Team Meetings. **2FTE x \$74,829.55 = \$149,659.10**

FTE Wraparound Supervisor: Is directly responsible for the day-to-day operations of the Wraparound program, managing the functioning of service delivery teams, which provide a wide array of community-based youth and family support services. These services may include child and family team planning, resource acquisition, case management and linkage, interagency collaboration, and program budgeting. **1 FTE x \$86,173.45 = \$86,173.45**

1.0 FTE Clinician: Is responsible for completing mental health assessments, assisting with safety planning, and providing therapeutic interventions for Wraparound client's and their families including individual, couples, and family therapy. Clinicians are an integral part to the Child and Family Team and work closely with the Wraparound team to ensure treatment aligns with the needs, strengths, and goals as outline in the ISP. **1 FTE x \$90,000 = \$90,000**

1.0 FTE Family Specialist: The Family Specialist attends and actively participates in monthly Child and Family Team Meetings and provides consistent support to youth and families at medical appointments, Individual Educational Plan (IEP), and 504 meetings. Interventions include, but are not limited to social skills training, anger management, anxiety reduction, communication skills, feeling identification, emotional regulation, etc.
1 FTE x \$57,996 = \$57,996

1.0 FTE Parent Partner: Parent Partners are responsible for establishing and implementing the support services for children and families, serving as the primary liaison for the family's

involvement with the program and offering support in whatever way is most helpful to each individual family according to program guidelines. **1 FTE x \$57,996 = \$57,996**

.50 FTE Administrative Support: Provides site level direct support to the Humboldt County high fidelity Wraparound programs proposed services. This includes office management, contract monitoring, technical maintenance, general clerical duties, managing client files, and reception. **.50 FTE x \$35,584.54 = \$17,792.27**

Salaries given include taxes and benefits.

All other costs are calculated based on the percentage of total revenue the program services account for. As proposed, the high fidelity Wraparound program is estimated to be 25% of HNH's revenue, and the direct costs shown below are allocated using that percentage.

C. Operational Costs - Total \$31,750

Operational Costs include an allocated portion of the rent and mortgage (\$26,500), utilities (\$3,750), and telephone and telecommunications (\$1,500).

D. Consumables/Supplies - Total \$6,750

Office supplies includes staff supplies, paper, pens, and technology (\$12,000 x .25 = \$3,000) and other supplies includes items needed for therapy including therapeutic materials, curriculum, equipment, and other work related equipment (\$15,000 x .25 = \$3,750)

E. Transportation/Travel – Total \$18,000

Mileage reimbursement for direct service staff calculated at the federal reimbursement rate of .625 per mile at an estimated 800 miles per month per FTE.

3.0 x 800 x 12 = 28,800 miles @ .625 per mile = \$18,000

F. Other Costs – Total \$12,000

Flex Funds are used for Wraparound families to fill unmet need when all other means of support have been exhausted. It is budgeted at \$600 per client per year.

G. Indirect Costs – Total \$220,000

Calculated as 10% of all existing programs and includes human resources, executive director, Operations Director, IT Support, Fiscal and Accounting support.

7.0 SUPPLEMENTAL DOCUMENTATION

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **AUG 14 2019**

HUMBOLDT NEUROHEALTH THERAPEUTIC
SERVICES
C/O JENNIFER BROWN
2145 MYRTLE AVE
EUREKA, CA 95501

Employer Identification Number:
83-2600783
DLN:
17053114317039
Contact Person:
JACOB A MCDONALD ID# 31649
Contact Telephone Number:
(877) 829-5500

Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
December 20, 2018
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947

HUMBOLDT NEUROHEALTH THERAPEUTIC

Sincerely,

Stephen A. Martin

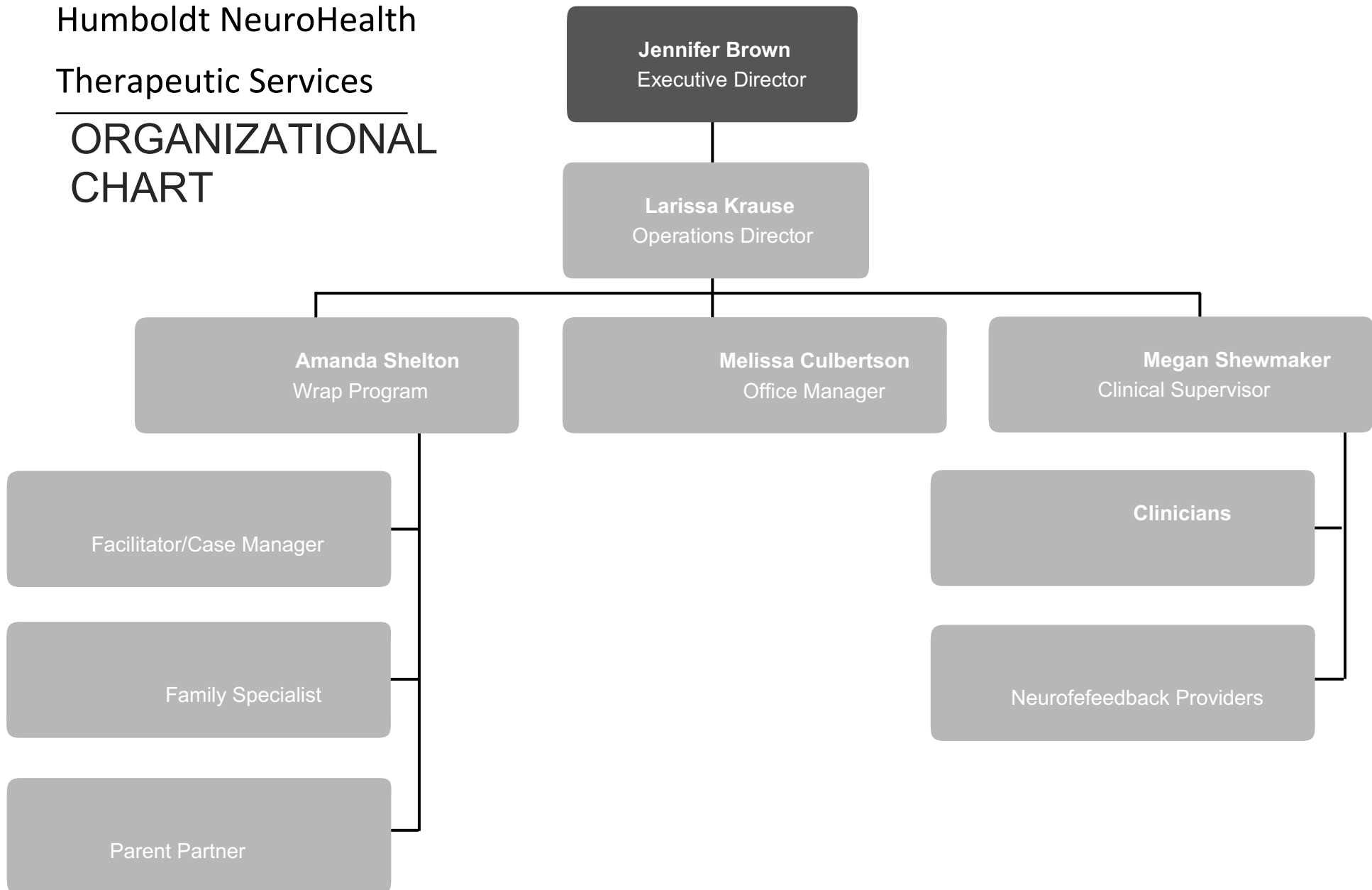
Director, Exempt Organizations
Rulings and Agreements

Letter 947

Humboldt NeuroHealth

Therapeutic Services

ORGANIZATIONAL CHART



Jennifer Brown, LCSW

Jennifer.Brown@humboldtneurohealth.org

Objective

To provide services to youth and families where they normally wouldn't have access while at a setting that is least disruptive to their education.

Education

MASTERS SOCIAL WORK | 05/2010 | CAL STATE LONG BEACH

Certificates and Training

- Neurofeedback, EMDR, Comprehensive Resource Model, Internal Family Systems, Theraplay, Cognitive Behavioral Therapy, Dyadic Developmental Psychotherapy, Love and Logic

Experience

**EXECUTIVE DIRECTOR | HUMBOLDT NEUROHEALTH THERAPEUTIC SERVICES
07/01/2019-CURRENT**

Responsible for leading and guiding HNH to be a thriving community clinic. Responsible for communicating effectively with the board of directors, fiscal integrity, HNH carrying out its mission, hiring and retention of staff, auditing all clinicians charting so that it is up to standard. Has a caseload of 20 clients, supervises 3 clinical interns, provides ongoing training and support to all employees.

JENNIFER BROWN, LCSW | PRIVATE PRACTICE | 08/01/2014-06/30/2019

Provided individual and family therapy to improve quality of life using various different modalities, including EMDR, Theraplay, Neurofeedback, Art therapy, Play therapy, Internal Family Systems, and CBT. Supervised interns and provided case consultation.

BEHAVIORAL HEALTH SPECIALIST | ADVENTIST HEALTH | 05/20/2010-09/16/2015

Provided individual and family therapy for ages 3-18. Led monthly case conferences between Konocti Unified School District and the Pediatricians on staff. I was an integral part of the team that implemented a behavioral health department at Lower Lake High school.

CASE MANAGER | REDWOOD CHILDREN SERVICES | 01/02/2008-05/30/2010

Provided case management to foster youth, ensuring that foster parents and children placed in the home had access to services and that all needs were met.

**JUVENILE CORRECTIONAL OFFICER | SONOMA COUNTY PROBATION
08/01/2006-11/15/2009**

Provided structure, safety, and managed all residents on my unit. Security and court visitation.

Curriculum Vitae

LARISSA KRAUSE, LCSW, PPSC

Registered ASW # 67821

* email: larissa.krause@humboldtneurohealth.org

PROFESSIONAL SUMMARY

Dedicated Clinical Social Worker with rich experience in case management and community networking. Fluent in Parts Work, EMDR, Mindfulness Based Intervention, Strengths-based framework of practice, with an emphasis on Trauma Informed Approach, Decolonization, and Rural Community. Respectful, attentive, and committed to meeting the unique individual needs of clients. Invested in supporting caring professional self-care and sustainable wellness models.

SKILLS

- Comfortable, clear, and articulate when communicating with others.
- Case Management
- Trainer and consultant for: ACEs, Trauma, and Self-Care
- Creative, innovative, and resourceful problem solving skills.
- Calm and objective in crisis situations.
- Able to identify strengths in others and effectively advocate for their needs and/or goals.
- Strong work ethic, resourceful, well organized, reliable and dedicated employee.
- Ability to exercise solid judgment, think critically, plan and execute tasks in a timely manner, manage multiple projects simultaneously, work as part of a team, maintain patience and sense of humor under pressure.
- Excellent writing, research, oral communication, and interpersonal skills.
- Efficient in Microsoft Word, Office, and Excel

Therapeutic Skills

- Eye Movement Desensitization Repair (EMDR)
- Internal Family Systems (IFS)
- Mindfulness - based Interventions
- Motivational Interviewing
- Solutions Focused
- Narrative Approach

- Trauma Informed Approach
-

EDUCATION

Pupil Personnel Services Credential Program (PPSC), San José State University 2015

Masters of Social Work (MSW), Humboldt State University, May 2015

Bachelor of Arts: Social Work (BASW), Humboldt State University, May 2010

Associates of Arts: College of the Redwoods, May 2007

Deaf Studies Major, California State University Northridge (CSUN) Fall 1995 - Spring 1997

Work EXPERIENCE

Humboldt NeuroHealth Therapeutic Services

Licensed Clinical Social Worker/Operations Director

Director of School Based Services

August 2018 - Present

- Oversees responsible for overseeing the quality, efficiency, and productivity of services; reducing costs, increasing profits, and improving control measures; establishing policies; managing relationships with stakeholders
- Senior Management
- Child, Adult & Family Therapist
- Neurofeedback Provider
- Coordinator of School Based Services

Humboldt State University, Department of Social Work

Asst. Director of Distance Learning and Field Education

August 2016 - May 2019

- Faculty Lecturer
- Assistant Coordinator for Distance Learning and Field Education
- Department Mental Health Sponsored Program Representative

Cutten Elementary

School Social Worker

August 2017 - June 2018

- Provide supervision for both BASW and MSW student interns
- Provide supervision for PPSC school social work employees
- 1:1
- Conflict Resolution/Restorative Practice
- Groups

- Administrative consultation

College of the Redwoods, Associate Faculty Counselor- CalWORKs April 2016 - June 2017

- Provide academic advising and counseling services to CalWORKs students at both Eureka and Del Norte campus sites
- Develop student education plans to meet the needs of student self-sufficiency and healthy academic outcomes.
- Liaison between DHHS and CR for CalWORKs students

Eureka High School, Counselor Intern January 2016 - April 2016

- Connect with students (i.e. rapport building, connection to resources)
- Support current School Counselor Director (i.e. parent contact, data entry, file documentation, observation, etc.)

Morris Elementary School, Psychological Technician August 2015 - June 2016

- Student group facilitator (social skills, emotional regulation, friendship skills)
- Parent Liaison (McKinney-Vento)
- Counseling Services
- Staff development and support for Restorative Justice and PBIS models

Humboldt State University, MSW Student Assistant Aug. 2014 - May 2015

- Co-facilitator/Graduate Instructor for Bachelor Course 355: Social Agency Experience
- Support faculty, staff and students with clerical assignments
- Planning Committee Member of the annual Distance Learning Intensive
- Community Resources Directory research and data entry

Cutten Elementary School, MSW Intern Aug. 2014 - May 2015

- Help students achieve the best possible social/emotional adjustment so they are available to participate in a healthy learning process.
- Provide services and support that identifies and addresses the social-emotional-environmental issues that interfere with the developmental process.
- Work with parents/guardians, teachers, school staff, and community based resources to implement strategies that promote students' positive school adjustment.
- Case management for students and families.
- Group facilitation
- 1:1 counseling

St. Joseph Home Health Care Network, BASW Intern Aug 2009 - May 2010

- Case Management, working with an interdisciplinary team to meet patient needs.

Megan Shewmaker

megan.shewmaker@humboldtneurohealth.org

Skills & Abilities Neurofeedback, EMDR, Play Therapy, Trauma Focused, Parts Work/Comprehensive Resource Model, Clinical Supervision

Experience Licensed Clinical Social Worker, Humboldt NeuroHealth Therapeutic Services

04/2018 – Current

- Provide one on one and family counseling to children, adults, and families.
- Supervise Associate social worker/Marriage family therapists/Professional Clinical Counselor
- Leadership Team member

Social Worker IV, Humboldt County Child Welfare Services, Eureka, CA

08/14-03/18

- Undertook case studies for the purpose of assessing problems and determining appropriate types and methods of treatment.
- Provided intensive long or short-term treatment plans, which require a comprehensive fund of professional knowledge with the aim of improving or restoring individual or family functioning.
- Performed the following specific types of counseling: marital, family inter-relationship, protective services for children or adults incapable of self-care.
- Investigated and provided services to children where their physical or emotional welfare is involved such as cases of neglect, emotional or behavioral problems, physical or mental disabilities, or other health conditions involving a child's personality.
- Interpreted and explained rules, regulations and policies to clients and applicants.
- Maintained casework record and handled relevant correspondence.

Education Humboldt State University – Arcata, CA – Masters Social Work, May 2015

Southern Oregon University, Ashland, OR- Bachelor of

Science in Psychology, June 2011

Amanda Shelton, MSW, ASW



Education:

Humboldt State University, Arcata, CA. MSW.

With an emphasis on Rural and Indigenous Communities

May 2018

Humboldt State University, Arcata, CA. B.A. in Psychology.

December 2007

College of the Redwoods, Eureka, CA. A.A. in University Studies.

August 2005

Work Experience:

Wraparound Program Manager

Humboldt NeuroHealth

Fortuna, CA September 2021 - Present

Provide oversight and direction for all components of the Wraparound Program. This includes, but is not limited to, supervision of staff, creation of policies, financial tracking and budgeting, crisis management, interagency and community networking, program development, and oversight of program fidelity.

ICWA Social Worker

Bear River Band of the Rohnerville Rancheria

Loleta, CA November 2018- August 2021

Case management, facilitation of Child and Family Team meetings, crisis intervention, group facilitation (i.e. youth groups, Motherhood/Fatherhood is Sacred, and Seeking Safety), client advocacy, networking across agencies (including CWS, RCRC, UIHS, County of Humboldt Mental Health, Two Feathers NAFS, and Beacon) in order to provide culturally relevant services to Tribal members, Tribal government policy creation, one-on-one counseling, youth development, and AOD service oversight. Provide court advocacy within and outside of California in cases where ICWA applies. Provide supervision to Social Work Interns from HSU.

Outreach Coordinator and One-Stop Supervisor

Arcata House Partnership

Arcata, CA January 2018-November 2018

Oversaw the day to day operations of the drop-in homeless center. This included case management, management of interns and employees, as well as program development. In addition, coordinated all outreach activities; providing multiple assistance opportunities to houseless individuals and families.

Social Work Advanced Year Intern

Humboldt County Office of Education (HCOE) McKinney-Vento and Foster Youth Student Support Services,

Eureka, CA August 2017- December 2017

Worked at court and community school locations directly with students. Worked specifically with students who were identified as Foster youth and/or homeless according to the California Educational Code. Provided academic support

and assistance as well as assistance obtaining needed resources and services directly provided by HCOE or through other outside agencies.

Coordinator for the Rio Dell Skatepark Project

Rio Dell, CA August 2015-Current

Overseeing and organizing community support in the development of a skatepark within Rio Dell city limits. Tabling and fundraising at multiple community events. Organizing and facilitating community planning meetings. Networking with city officials to garner support for the project. Networking with local businesses to gain support and sponsorship for the project. Organizing and advocating for youth interests. Partnered with local non-profit to gain non-profit status under their umbrella.

Social Work Foundation Year Intern

Rio Dell Community Resource Center, Rio Dell, CA August 2015-May 2016

Worked with a variety of clientele to provide direct services and networked with other local agencies in helping to acquire needed resources and services. Worked distributing food at the Resource Center's Food Pantry, helped to organize and implement many community outreach activities, worked with local youth and adults to begin the process of getting a skatepark built within the city. Was responsible for case management with clients in need.

Follow Up Coordinator, Clinic Facilitator and Clinic Assistant

Six Rivers Planned Parenthood, Eureka, CA September 2010- July 2014

Worked with all clients to provide medical services, referrals, and short-term counseling as implicated. In addition to direct client services, implemented clinic follow up program and notified patients of all necessary medical follow up per clinic protocol. Worked closely with providers during medical procedures and facilitated procedure clinics.

Options Educator and General Volunteer

Six Rivers Planned Parenthood, Eureka, CA May 2009-September 2010

Provided educational information and short term counseling for clients. Provided clerical assistance and other volunteer services as needed.

Youth Mentor, Tutor and After School Program Leader

Straight Up AmeriCorps, Eureka, CA. August 2009-June 2010

Provided mentoring and tutoring for students who were identified as at risk of retention. Supervised an after school group and led activities for the after school program.

Office Assistant

Yuba College Foster and Kinship Care Ed., Marysville, CA. January 2001-November 2001 Provided support by means of typing, writing fliers, organizing office, and providing childcare during foster parent education classes.

Foster Youth Mentor

AmeriCorps at Yuba Community College, Marysville, CA. January 2001-November 2001 Worked with foster youth who were "aging out" of the system and learning life skills, offered support and mentoring during the difficult transition.

Skills/Trainings

- YTS-Young Teen Specialist at Six Rivers Planned Parenthood
- Experience in providing short-term and crisis counseling
- Experience advocating for clients' needs
- Experience networking with other agencies to help meet clients' needs
- Familiar with resources within Humboldt County and with many agencies' referral processes

- Familiar with HIPPA and its implementation
- Mandated reporter trainings-have experience completing several child abuse reports
- Experience running small groups with young people
- 2017 HCOE McKinney-Vento and Foster Youth training
- 2017 Case Management Essentials training
- 2018 Adult Protective Services Training for Mandated Reporters
- 2018 Adult and Youth Mental Health First Aid Training
- Multiple trainings and certifications regarding ICWA, Mental Health and Child and Family Health
- ASW
- Multiple trainings regarding Wraparound and best practices in program implementation and case management
- Attendance at the 2022 Partnerships for Wellbeing Institute



Intern Psychologist

hours a week (and successful completion of coursework identified in the program of study).

EDUCATION

School Psychology (MA)
California State Polytechnic University,
Humboldt

08/2019 - 05/2022, 3.77

Psychology (BA)
California State Polytechnic University,
Humboldt

08/2013 - 05/2017, 3.48

American Sign Language & Special Populations
Humboldt State University

08/2013 - 05/2017,

PROFESSIONAL EXPERIENCE

Psychology Clinician (2020)

Supervised practicum experience involving the provision of psycho-educational assessment services to clients for the university's Student Disability Resource Center (SDRC) Clinic. This position is an applied clinical experience designed to promote professional development as a school psychologist who is versed in the provision of comprehensive assessments of intellectual, academic, and social- emotional/behavioral functioning.

Intern Psychologist (2021 - 2022)

Internship is defined as the culminating fieldwork experience in which the school psychology credential candidate seeks to integrate previous classroom and practical fieldwork experiences with the goal of becoming an independent school psychologist. The intern provides direct service to students, parents, and staff within diverse school environments and under the supervision of a credentialed and practicing school psychologist.

School Psychology Practicum Fieldworker (2020 - Present)

School Psychology candidates apply the knowledge and skills they have learned in their coursework. It consists of actual school psychology field experiences with students and the integration and application of the school psychologist's competencies. Practicum provides the school psychology candidate with the opportunity to practice school psychology skills under direct supervision. Following the two-semester practicum sequence for 10-15

CERTIFICATES/MEMBERSHIPS

Internship Credential (2021)

This credential authorizes the holder to perform the following services in grades 12 and below, including preschool, and in programs organized primarily for adults: provide services that enhance academic performance; design strategies and programs to address problems of adjustment; consult with other educators and parents on issues of social development, behavioral and academic difficulties; conduct psycho-educational assessments for purposes of identifying special needs; provide psychological counseling for individuals, groups and families; and coordinate intervention strategies for management of individual and school-wide crises.

SKILLS

EXAMS

The California Basic Educational Skills Test (CBEST)
(2019)

Psychology Praxis (2021)

The Praxis test helps school psychology candidates demonstrate their knowledge of content, and professional practice. This test is an important component of NASP's certification process and is a part of: Praxis Subject Assessments—tests that measure general and subject-specific content knowledge that a psychologist needs for beginning teaching or professional practice.

SEMINARS

Dehn's PPA Software Training (2022)

This course is intended for psychologists who are already familiar with Dehn's PSW Model. It will provide an opportunity to review 3 case studies from planning through interpretation of the report. The course also includes a 30-minute consultation call.

PSW: Dehn's PSW Model for Beginners (2022)

This course is intended for psychologists who are already familiar with Dehn's PSW Model. It will provide an opportunity to review 3 case studies from planning through interpretation of the report. The course also includes a 30-minute consultation call. Access to Dehn's PPA Software is required.

ADHD and Anxiety Webinar (2020)

Dr. Randall Duthler

Topic: Misdiagnosing ADHD as anxiety. How ADHD can often mimic anxiety.



CERTIFICATES/MEMBERSHIPS

CBITS (2021)

The Cognitive Behavioral Intervention for Trauma in Schools (CBITS) program is a school-based, group and individual intervention. It is designed to reduce symptoms of post-traumatic stress disorder (PTSD), depression, and behavioral problems, and to improve functioning, grades and attendance, peer and parent support, and coping skills. CBITS has been used with students from 5th grade through 12th grade who have witnessed or experienced traumatic life events such as community and school violence, accidents and injuries, physical abuse and domestic violence, and natural and man-made disasters. CBITS uses cognitive-behavioral techniques (e.g., psychoeducation, relaxation, social problem solving, cognitive restructuring, and exposure).

Bounce Back: An Elementary School Intervention for Childhood Trauma (2020)

Bounce Back is an elementary school adaptation of CBITS (Cognitive Behavioral Intervention for Trauma in Schools)

Compassion Fatigue Certification Training for Healthcare, Mental Health and Caring Professionals With Debra Premashakti Alvis, PhD, C-IAYT. (2020)

This certification entailed combating compassion fatigue. Practitioners are exposed to the trauma of their clients and patients have experienced. This exposure can leave a practitioner feeling worn down, burdened by the suffering of others, and with a feeling of dread going to work. Compassion fatigue is a threat to the safety of one's patients and one's own wellbeing, relationships, and career. This certification helps practitioners (re)discover their resiliency and optimism so they can perform at their best for their clients.

Mental Health Worker and Social Worker Mandated Reporter Training (2020)

What to do if you discover evidence of child abuse or neglect How to talk to children about suspected abuse The history of child abuse awareness and reporting Special issues related to child abuse reporting in the work environment How to talk about these sensitive topics How to handle a disclosure of child abuse

Page 1 of 3

arise. The general training and the profession-specific trainings meet the training requirements of the California Child Abuse and Neglect Reporting Act (CANRA), Education Code for school personnel, and Health and Safety Code for licensed child care providers.

School Personnel Child Abuse Mandated Reporter Training (2020)

The Child Abuse Mandated Reporter Training California created a training with the California Department of Social Services and the California Department of Education to develop. This training covers the law requirements of mandated reporters, how to spot indicators of possible child abuse or neglect, how to talk to children about suspected abuse, how to make a report, outcomes after a report is filed, and special issues related to child abuse reporting in the school environment.

NASP Membership (2019 - Present)

National Association for School Psychologists membership.

Certificate of Clearance (2017 - Present)

A document issued by the Commission to an individual who has completed the Commission's fingerprint character and identification process, whose moral and professional fitness has been shown to meet the standards as established by law.

Trauma and Stressor-Related Disorders in Children and Adolescents—RLMS Certificate (2018)

Basic Communication and Conflict Management Skills. Crisis Management. Introduction to Trauma-Informed Care. Principles of Positive Behavior. Support for DSPs: Overview Trauma and Stressor-Related Disorders in Children and Adolescents.

CPR/AED Certification (2018)

Hands-on skills training prepares one to respond to breathing and cardiac emergencies. It also teaches the skills and knowledge needed to provide care for victims of sudden cardiac arrest through the safe use of an automated external defibrillator (AED).

American Sign Language and Special Populations (2017) Minor

designed to assist students who are d/Deaf, HoH, or have special needs. Useful for an early-interventionist or family services.

Presidential Scholars Recognition (2014) & (2015)

Term grade point average of 3.85 and above.

Psi Chi (ΨΧ) Membership (2016 - Present)

Requirements: Completed at least 9 semester credit hours or equivalent of psychology courses. Earned a cumulative GPA that is in the top 35% of their class (sophomore, junior, or senior) compared to their classmates across the entire university that houses psychology (minimum GPA of 3.0 on a 4-point scale). Have a minimum 3.0 GPA average for psychology courses.

LANGUAGES

English

Spanish

American Sign
Language

SEMINARS

School Psychology Review: Advancing Youth Suicide Prevention, Intervention, & Postvention

Dr. Shane Jimerson

Topic: An overview of youth suicidal behavior. Age-related racial disparity in suicide rates among US youths. Suicidality in LGBTQIA+. And prevention, intervention, and postvention for youth that struggle with suicidal ideation and attempts.

Historical Trauma and Indigenous Resilience in Northern California/Trauma-Informed Practices

Dr. Sara Chase

Topic: Indigenous trauma
12 academic personnel.

Nondiscriminatory of Culturally and Linguistically Diverse (James Madison University)

workshop is about increasing diversity in public schools, educational services for dual-language learners, understanding first and second language acquisition, generational effects in language development, history of immigrant achievement, parallel procession in development, and language development, legal compliance in assessment of diverse children and a framework for comprehension nondiscriminatory assessment.

Topics: Bilingual assessment vs. assessment of bilinguals, use of interpreters in assessment, current research in support of Culture-Language Test Classifications (C-LTC) and Interpretive Matrix (CLIM), examples of test specific classification matrices, and case study illustration of nondiscriminatory interpretation with the C-LIM.

NASP Convention (2020)

The National Association for School Psychologists convention focuses on learning the latest and most effective products, services, training, and best practices in school psychology.

Topics: Prevention and intervention, assessment, school safety, special needs, academic interventions, crisis response, mental health, depression and suicide prevention, learning and teaching skills, parenting and family life, home-school collaboration, substance abuse, tolerance and integration, cultural and linguistic

training for K-

Assessment

Students
(2020) This

REFERENCES

Carlee Brunner BA, DET—Educator for Pacific Union School District

“3001 Janes Rd, Arcata, CA 95521”

Contact : cbrunner@pacificunionschool.org - (707) 845-4405

Kim Lokey Moore MS—Program Supervisor of Inclusive Education & Community Partnership (IECP)

“7th St suite 204 Eureka, CA 95501”

Contact : kim.moore@iecp.us - (707) 273-7893

Chelsea Reardon BSW—Mental Health Coordinator for Northcoast Children's Services

“1266 9th St
Arcata, California
95521”

Contact :

creardon@ncsheadstart.org - (407) 619-6899

Elvira Schwarz—Program Manager for DHHS
“720 Wood Street Eureka, CA 95501”

Contact : ESchwarz@co.humboldt.ca.us - (707) 441-3780



CERTIFICATES/MEMBERSHIPS

Dean's List (2013 – 2017)

An undergraduate student who completes at least 12 graded (A-F) units with a minimum term grade point average of 3.50.

WORK EXPERIENCE

Department of Human Health Services (DHHS) Bilingual Quality Assurance Test Caller Remi Vista Inc.

2018 – 2019, Eureka, CA

Assists the Humboldt County Mental Health Quality Assurance Department by making rehearsed test calls to access mental health services in Spanish and evaluating the level of service provided. Collects data on questionnaires and provides structured feedback on reports.



Rehabilitation Specialist & Case Manager Remi Vista Inc.

2017 – 2019, Eureka, CA

Serves individuals (ages 0–21) with incapacities or complications that impair social functioning and academic learning. Provides Mental Health Services for individuals in a crisis situation which puts them in danger of losing their placement with their family, foster family, or group home. Collaborates with parents, teachers, school psychologists, and other mental health professionals to create a healthy/safe school and home environment. Translates medical treatment plans and therapy sessions from Spanish to English for MFTs.

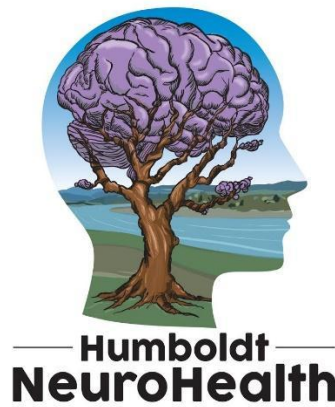
Types of Cases:

IHBS, SELPA, Katie-A, MHS, and TBS.

HOP Counselor & Ambassador Humboldt State University

2013 – 2015, Arcata, CA

Attended weekly training and tested on how to interact with students and parents, the requirements of a mandated reporter, the importance of confidentiality, and in which courses students should be enrolled with respect to their major. Gave presentations during the Humboldt's Orientation Program. Kept student records and worked with the university's computerized student information system.



Job Description

Name:

Job Title: **Wraparound Program Manager**

Location: Fortuna

Supervisor: Operations Director

Supervises: Facilitator, Therapeutic Skills Coach, Parent Partner

Status: *Salaried; full-time,*

SUMMARY: Wraparound Program Manager is directly responsible to the Operations Director for the day-to-day operations of the program services. The Wraparound Manager manages the functioning of service delivery teams, which provide a wide array of community-based youth and family support services. These services may include child and family team planning, resource acquisition, case management and linkage, and interagency collaboration.

ESSENTIAL RESPONSIBILITIES AND DUTIES include the following. Other duties may be assigned.

- **Census Management**
 - Maintains the program enrollment at a minimum of 6 families and a max 12 families.
 - Stakeholder management
- **Program oversight**
 - Monitors and controls the delivery of wraparound services in accordance with Agency standards and acceptable professional practices
 - Communicates and establishes a relationship with county adoption support specialists and other community agencies.
 - Submits billing to county agencies and tracks payments.

- Monitors and controls the referral and intake process of wraparound clients, maintaining high quality service delivery and good working relations within the community being served and community outreach.
- Implements and maintains quality assurance systems and reporting programs related to clinical services and participates on Quality Improvement teams as assigned
- Track Outcomes- Pre and Post
 - CANS, Lengths of Stay, Permanency
- Champion Wraparound philosophy
- Understands, knows, and is able to teach California Wraparound standards.
- Tracks and monitors all expenses

- Risk Management
 - Monitors and ensures that documentation and case records are developed and maintained in accordance with agency standards.
 - Knowing when to file reports, when to create/document safety plans
 - Knowledgeable with workers rights, respects boundaries of employees, understand when to consult regarding personal matters.

- Personal Oversight
 - Provides supervision and performance management of program staff.
 - Promotes a learning environment
 - Able to develop staff to achieve agency expectations
 - Can create and promote team cohesiveness

COMPETENCIES:

To perform the job successfully, an individual should demonstrate the following competencies:

- **Problem Solving** - Identifies and resolves problems in a timely manner; Develops alternative solutions; Works well in group problem solving situations; Uses reason even when dealing with emotional topics.
- **Knowledgeable of Wraparound Client Service** - Manages difficult or emotional wraparound client situations; Responds promptly to client needs; Solicits customer feedback to improve service; Responds to requests for service and assistance; Meets commitments.
- **Interpersonal** - Focuses on solving conflict, not blaming; Maintains confidentiality; Listens to others without interrupting; Keeps emotions under control; Remains open to others' ideas and tries new things.
- **Teamwork** - Balances team and individual responsibilities; Exhibits objectivity and openness to others' views; Gives and welcomes feedback; Able to build morale and group commitments to goals and objectives; Supports everyone's efforts to succeed; Recognizes accomplishments of other team members.
- **Delegation** - Delegates work assignments; Gives authority to work independently; Sets expectations and monitors delegated activities.

- **Leadership** - Exhibits confidence in self and others; Inspires and motivates others to perform well; Inspires respect and trust; Accepts feedback from others; Gives appropriate recognition to others; Displays passion and optimism.
- **Managing People** - Includes staff in planning, decision-making, facilitating and process improvement; Takes responsibility for subordinates' activities; Makes themselves available to staff; Provides regular performance feedback; Develops subordinates' skills and encourages growth; Fosters quality focus in others; Improves processes, products and services; Continually works to improve supervisory skills.
- **Planning/Organizing** - Prioritizes and plans work activities; Uses time efficiently; Plans for additional resources; Sets goals and objectives; Organizes or schedules other employee tasks and their tasks; Develops realistic action plans.
- **Professionalism** - Approaches others in a tactful manner; Reacts well under pressure; Treats others with respect and consideration regardless of their status or position; Accepts responsibility for own actions; Follows through on commitments.

QUALIFICATIONS:

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Education/Experience:

- 2 years experience with Attachment focused interventions, strong understanding on attachment disorders and treatment, and trauma informed.
- 2 years experience with program management.
- Masters Degree in Social Work or related field

Language Ability:

Ability to read and interpret documents such as safety rules, operating and maintenance instructions, and procedure manuals. Ability to write routine reports and correspondence. Ability to speak effectively before groups of customers or employees of organization.

Math Ability:

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent and to draw and interpret bar graphs.

Reasoning Ability:

Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instructions furnished in written, oral, diagram, or schedule form.

Computer Skills:

To perform this job successfully, an individual should have knowledge of Word Processing software; Spreadsheet software; Accounting software; Payroll systems and Internet software.

Certificates and Licenses:

- Valid California Driver's License,
- Personal automobile insurance and driving record that meets the standards outlined in the Agency's Personnel Policy; Motor Vehicle Operating Standards.

Supervisory Responsibilities:

Manages all employees in the wraparound program. Is responsible for the overall direction, coordination, and evaluation of the program. Carries out supervisory responsibilities in accordance with the organization's policies and applicable laws. Responsibilities include interviewing, hiring, and training employees; planning, assigning, and directing work; appraising performance; rewarding and disciplining employees; addressing complaints and resolving problems.

WORK ENVIRONMENT:

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is generally working in an office setting at a computer desk and exposed to moderate noise (i.e. business office with computers, phone, and printers, light traffic).

PHYSICAL DEMANDS:

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

N (Not Applicable) Activity is not applicable to this occupation.

O (Occasionally) Occupation requires this activity up to 33% of the time (0 - 2.5+ hrs/day)

F (Frequently) Occupation requires this activity from 33% - 66% of the time (2.5 - 5.5+ hrs/day)

C (Constantly) Occupation requires this activity more than 66% of the time (5.5+ hrs/day)

Physical Demands		Lift /Carry		Push / Pull	
Stand	C	10 lbs or Less	F	12 lbs or less	O
Walk	C	11-20 lbs	O	13-25 lbs	O
Sit	O	21-50 lbs	O	26-40 lbs	O
Handling/Fingering	C	51-100 lbs	N	41-100 lbs	N
Reach Outward	F	Over 100 lbs	N		
Reach Above Shoulder	O				
Climb	O				
Crawl	O				
Squat or Kneel	O				
Bend	O				
Vision: visual acuity to perform an activity such as: preparing and analyzing data and figures; transcribing; viewing a computer terminal; extensive reading; visual inspection involving small defects, small parts, and/or operation of machines (including inspection); and using measurement devices;					

ACKNOWLEDGMENT:

I have read this job description and fully understand the requirements set forth therein. I hereby accept this position and agree to abide by the requirements set forth and will perform all duties and responsibilities to the best of my ability. The job duties, elements, responsibilities, skills, functions, experience, educational factors, requirements and conditions listed in this job description are representative only and not exhaustive of the tasks that the employee may be required to perform. The employer reserves the right to revise this job description at any time and require employees to perform other tasks as circumstances or conditions of its business, competitive considerations or a work environment change. I further understand that my employment is at-will and thereby understand that the company or I may terminate the employment relationship at any time, with or without cause.

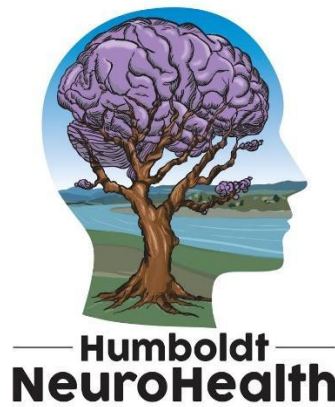
Employee, Signature

Date

Employee, Printed Name

Supervisor, Signature

Date



Job Description

Name:

Job Title: Clinical Case Manager/Facilitator

Location: Fortuna

Supervisor: Wrap Program Manager

Status: *non-exempt; full-time,*

SUMMARY: Under the direct supervision of a Program Director, the Facilitator coordinates the Child and Family Teams (CTFs) and the development and implementation of individualized service plans. If applicable, provides direct services to children and families in order to maximize the involvement of all persons and the implementation of plans

ESSENTIAL RESPONSIBILITIES AND DUTIES include the following. Other duties may be assigned.

1. Coordinate and develop a team to carry out wraparound processes
 - a. Acts as the liaison between the program and community agencies and individuals such as Clinicians, Case Managers, County Social Workers, and Probation Officers, schools.
 - b. Weekly meetings to discuss treatment with stakeholders
 - c. Develop a network of people to support for crisis.
 - d. Completes safety plan that uses natural supports and keeps it up to date in the on call binder
2. Facilitating the Child and Family Team meeting for the purpose of planning and coordinating services.

- a. Conduct responsibility for the Child and Family Plan implementation, case management including activities and service delivery.
 - b.
3. Deliver direct family support as needed including,
 - a. coaching
 - b. collateral support
 - c. linking to community services
 - d. skill building
4. Completes all required documentation according to Agency and program standards within required time constraints.

Completes charting for all team meetings, stake holder meetings,
5. Provides crisis stabilization and management to child/family teams when plans disrupt and/or crisis situations occur.
 - a. ability to utilize and promote the safety plan
 - b. create de escalation plan and go out in person if need be
 - c. available to provide services and answer the call after hours as assigned

COMPETENCIES:

To perform the job successfully, an individual should demonstrate the following competencies:

- **Problem Solving** - Identifies and resolves problems in a timely manner; Develops alternative solutions; Works well in group problem solving situations; Uses reason even when dealing with emotional topics.
- **Knowledgeable of Wraparound Client Service** - Manages difficult or emotional wraparound client situations; Responds promptly to client needs; Solicits customer feedback to improve service; Responds to requests for service and assistance; Meets commitments.
- **Interpersonal** - Focuses on solving conflict, not blaming; Maintains confidentiality; Listens to others without interrupting; Keeps emotions under control; Remains open to others' ideas and tries new things.
- **Teamwork** - Balances team and individual responsibilities; Exhibits objectivity and openness to others' views; Gives and welcomes feedback; Able to build morale and group commitments to goals and objectives; Supports everyone's efforts to succeed; Recognizes accomplishments of other team members.

- **Leadership** - Exhibits confidence in self and others; Inspires and motivates others to perform well; Inspires respect and trust; Accepts feedback from others; Gives appropriate recognition to others; Displays passion and optimism.
- **Planning/Organizing** - Prioritizes and plans work activities; Uses time efficiently; Plans for additional resources; Sets goals and objectives; Organizes or schedules other employee tasks and their tasks; Develops realistic action plans.
- **Professionalism** - Approaches others in a tactful manner; Reacts well under pressure; Treats others with respect and consideration regardless of their status or position; Accepts responsibility for own actions; Follows through on commitments.

QUALIFICATIONS:

1. Masters degree with 1 years experience, Bachelor's degree 3 years experience in social work or relevant field.

Position/Program Requirements:

1. Must possess a valid California driver's license, personal automobile insurance and clean driving record.
2. Must be willing to complete a personal background investigation conducted by the State of California.
3. Must be flexible to work nights and weekends

Language Ability:

Ability to read and interpret documents such as safety rules, operating and maintenance instructions, and procedure manuals. Ability to write routine reports and correspondence. Ability to speak effectively before groups of customers or employees of organization.

Math Ability:

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent and to draw and interpret bar graphs.

Reasoning Ability:

Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instructions furnished in written, oral, diagram, or schedule form.

Computer Skills:

To perform this job successfully, an individual should have knowledge of Word Processing software; Spreadsheet software; Accounting software; Payroll systems and Internet software.

Certificates and Licenses:

- Valid California Driver's License,
- Personal automobile insurance and driving record that meets the standards outlined in the Agency's Personnel Policy; Motor Vehicle Operating Standards.

Supervisory Responsibilities:

Manages all employees in the wraparound program. Is responsible for the overall direction, coordination, and evaluation of the program. Carries out supervisory responsibilities in accordance with the organization's policies and applicable laws. Responsibilities include interviewing, hiring, and training employees; planning, assigning, and directing work; appraising performance; rewarding and disciplining employees; addressing complaints and resolving problems.

WORK ENVIRONMENT:

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is generally working in an office setting at a computer desk and exposed to moderate noise (i.e. business office with computers, phone, and printers, light traffic).

PHYSICAL DEMANDS:

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

N (Not Applicable) Activity is not applicable to this occupation.

O (Occasionally) Occupation requires this activity up to 33% of the time (0 - 2.5+ hrs/day)

F (Frequently) Occupation requires this activity from 33% - 66% of the time (2.5 - 5.5+ hrs/day)

C (Constantly) Occupation requires this activity more than 66% of the time (5.5+ hrs/day)

Physical Demands		Lift /Carry		Push / Pull	
Stand	C	10 lbs or Less	F	12 lbs or less	O
Walk	C	11-20 lbs	O	13-25 lbs	O
Sit	O	21-50 lbs	O	26-40 lbs	O
Handling/Fingering	C	51-100 lbs	N	41-100 lbs	N
Reach Outward	F	Over 100 lbs	N		
Reach Above Shoulder	O				
Climb	O				
Crawl	O				
Squat or Kneel	O				
Bend	O				
Vision: visual acuity to perform an activity such as: preparing and analyzing data and figures; transcribing; viewing a computer terminal; extensive reading; visual inspection involving small defects, small parts, and/or operation of machines (including inspection); and using measurement devices;					

ACKNOWLEDGMENT:

I have read this job description and fully understand the requirements set forth therein. I hereby accept this position and agree to abide by the requirements set forth and will perform all duties and responsibilities to the best of my ability. The job duties, elements, responsibilities, skills, functions, experience, educational factors, requirements and conditions listed in this job description are representative only and not exhaustive of the tasks that the employee may be required to perform. The employer reserves the right to revise this job description at any time and require employees to perform other tasks as circumstances or conditions of its business, competitive considerations or a work environment change. I further understand that my employment is at-will and thereby understand that the company or I may terminate the employment relationship at any time, with or without cause.

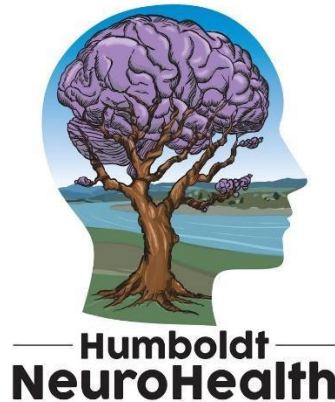
Employee, Signature

Date

Employee, Printed Name

Supervisor, Signature

Date



Job Description

Name:
Job Title: Behavioral Health Clinician
Location: Eureka/Fortuna
Supervisor: Clinical Supervisor
Status: *non-exempt; part-time/Full-Time*

SUMMARY: Providing therapy to children, adults, and families with Humboldt NeuroHealth Therapeutic Services.

ESSENTIAL RESPONSIBILITIES AND DUTIES include the following. Other duties may be assigned.

- Provide ongoing individual counseling
- Establish and maintain professional boundaries
- Demonstrate effective organizational skills regarding flow of paperwork related to the client chart (signatures, authorizations, releases, etc)
- To provide the appropriate documentation for service delivery including treatment goals and progress notes in a timely manner.
- Report all incidents of emergency response, clients in crisis, and mandated reporting incidents to the supervisor same day.
- Follow through with supervisor's clinical recommendations.
- Track and monitor all requirements for the BBS
- Continue to learn new modalities and increase current skills through training, reference materials, and supervision.

COMPETENCIES:

To perform the job successfully, an individual should demonstrate the following competencies:

- **Interpersonal** - Focuses on solving conflict, not blaming; Maintains confidentiality; Listens to others without interrupting; Keeps emotions under control; Remains open to others' ideas and tries new things.
- **Teamwork** - Balances team and individual responsibilities; Exhibits objectivity and openness to others' views; Gives and welcomes feedback; Able to build morale and group commitments to goals and objectives; Supports everyone's efforts to succeed; Recognizes accomplishments of other team members.
- **Dependability** - Follows instructions, responds to management direction; Takes responsibility for own actions; Keeps commitments; Commits to long hours of work when necessary to reach goals; Completes tasks on time or notifies appropriate person with an alternate plan.
- **Judgment** - Displays willingness to make decisions; Exhibits sound and accurate judgment; Supports and explains reasoning for decisions; Includes appropriate people in decision-making process; Makes timely decisions.
- **Planning/Organizing** - Prioritizes and plans work activities; Uses time efficiently; Plans for additional resources; Sets goals and objectives; Organizes or schedules other people and their tasks; Develops realistic action plans.
- **Professionalism** - Approaches others in a tactful manner; Reacts well under pressure; Treats others with respect and consideration regardless of their status or position; Accepts responsibility for own actions; Follows through on commitments.
- **Ethics** - Demonstrates knowledge of EEO policy; Treats people with respect; Shows respect and sensitivity for cultural differences; Promotes a harassment-free environment; Works with integrity and ethically; Upholds organizational values.

QUALIFICATIONS:

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Education/Experience:

- Must have a master's degree in Social work, Counseling, or other equivalent degree.
- Must be registered with the Board of Behavioral Sciences

Language Ability:

Ability to read and interpret documents such as safety rules, operating and maintenance instructions, and procedure manuals. Ability to write routine reports and correspondence. Ability to speak effectively before groups of customers or employees of organization.

Math Ability:

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers,

common fractions, and decimals. Ability to compute rate, ratio, and percent and to draw and interpret bar graphs.

Reasoning Ability:

Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instructions furnished in written, oral, diagram, or schedule form.

Computer Skills:

To perform this job successfully, an individual should have basic computer skills, ability to learn and navigate computer software including electronic record keeping and troubleshoot basic computer issues.

Certificates and Licenses:

Must have active license with the Board of Behavioral Sciences

WORK ENVIRONMENT:

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is generally working in an office setting at a computer and exposed to moderate noise (i.e. business office with computers, phone, and printers, light traffic), as well as frequent interaction with coworkers and members of the public.

PHYSICAL DEMANDS:

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

N (Not Applicable) Activity is not applicable to this occupation.

O (Occasionally) Occupation requires this activity up to 33% of the time (0 - 2.5+ hrs/day)

F (Frequently) Occupation requires this activity from 33% - 66% of the time (2.5 - 5.5+ hrs/day)

C (Constantly) Occupation requires this activity more than 66% of the time (5.5+ hrs/day)

Physical Demands		Lift /Carry		Push / Pull	
Stand	F	10 lbs or Less	F	12 lbs or less	O
Walk	F	11-20 lbs	O	13-25 lbs	O
Sit	C	21-50 lbs	N	26-40 lbs	O
Handling/Fingering	C	51-100 lbs	N	41-100 lbs	N
Reach Outward	F	Over 100 lbs	N		
Reach Above Shoulder	O				
Climb	N				
Crawl	N				
Squat or Kneel	N				
Bend	O				
Vision: visual acuity to perform an activity such as: preparing and analyzing data and figures; transcribing; viewing a computer terminal; extensive reading; visual inspection involving small defects, small parts, and/or operation of machines (including inspection); and using measurement devices;					

ACKNOWLEDGMENT:

I have read this job description and fully understand the requirements set forth therein. I hereby accept this position and agree to abide by the requirements set forth and will perform all duties and responsibilities to the best of my ability. The job duties, elements, responsibilities, skills, functions, experience, educational factors, requirements and conditions listed in this job description are representative only and not exhaustive of the tasks that the employee may be required to perform. The employer reserves the right to revise this job description at any time and require employees to perform other tasks as circumstances or conditions of its business, competitive considerations or a work environment change. I further understand that my employment is at-will and thereby understand that the company or I may terminate the employment relationship at any time, with or without cause.

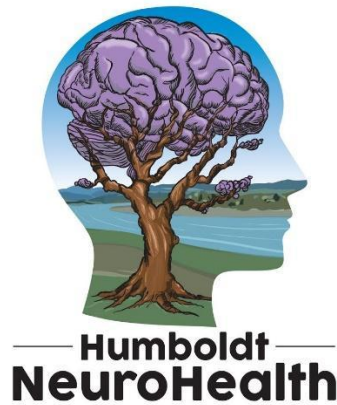
Employee, Signature

Date

Employee, Printed Name

Supervisor, Signature

Date



Job Description

Name:

Job Title: Family Specialist

Location: Fortuna, Eureka, Out in the Field

Supervisor: Wrap Program Manager

Status: *non-exempt; part-time, full-time*

SUMMARY: The Family Specialist provides interventions to youth aimed at stabilizing their behavior(s) and to teach/coach functional skills that enable the youth to remain in a family setting.

ESSENTIAL RESPONSIBILITIES AND DUTIES include the following. Other duties may be assigned.

Teaming

- Works closely with all treatment team members regarding matters pertaining to all one-to-one therapeutic behavioral interventions as outlined in the Treatment Plan.
- Maintains effective lines of communication with Clinical Team and Program Management in regards to program needs.
- Effectively communicates treatment updates to the Clinical Case Manager, parents, and all other treatment team members, apprised of the progress of the child.

Documentation

- Maintains organized progress notes for each client contact; submitting notes weekly.

Engagement and Counseling Services

- Provides one-to-one therapeutic behavioral interventions for children as needed at home, school, or other community-based settings in accordance with the Treatment Plan.
- Interventions included but are not limited to social skills training, anger management, anxiety reduction, communication skills, feeling identification, emotional regulation, etc.
- Able to use rapport, develop therapeutic relationships with those assigned.
- Able to manage boundaries of the role with the therapeutic alliance and with other team members.
- Able to assess for community resources, link, and triage with the child family team.

COMPETENCIES:

To perform the job successfully, an individual should demonstrate the following competencies:

- **Problem Solving** - Identifies and resolves problems in a timely manner; Develops alternative solutions; Works well in group problem solving situations; Uses reason even when dealing with emotional topics.
- **Teamwork** - Balances team and individual responsibilities; Exhibits objectivity and openness to others' views; Gives and welcomes feedback; Able to build morale and group commitments to goals and objectives; Supports everyone's efforts to succeed; Recognizes accomplishments of other team members.
- **Dependability** - Follows instructions, responds to management direction; Takes responsibility for own actions; Keeps commitments; Commits to long hours of work when necessary to reach goals; Completes tasks on time or notifies appropriate person with an alternate plan.
- **Initiative** - Volunteers readily; Undertakes self-development activities; Seeks increased responsibilities; Takes independent actions and calculated risks; Demonstrates persistence and overcomes obstacles; Asks for and offers help when needed.
- **Judgment** - Displays willingness to make decisions; Exhibits sound and accurate judgment; Supports and explains reasoning for decisions; Includes appropriate people in decision-making process; Makes timely decisions.
- **Planning/Organizing** - Prioritizes and plans work activities; Uses time efficiently; Plans for additional resources; Sets goals and objectives; Organizes or schedules other people and their tasks; Develops realistic action plans.
- **Professionalism** - Approaches others in a tactful manner; Reacts well under pressure; Treats others with respect and consideration regardless of their status or position; Accepts responsibility for own actions; Follows through on commitments.

QUALIFICATIONS:

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Education/Experience:

- Bachelor's degree in a related field (social work, sociology, child development, psychology, etc.) or equivalent in work experience.

Language Ability:

Ability to read and interpret documents such as safety rules, operating and maintenance instructions, and procedure manuals. Ability to write routine reports and correspondence. Ability to speak effectively before groups of customers or employees of organization.

Math Ability:

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent and to draw and interpret bar graphs.

Reasoning Ability:

Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instructions furnished in written, oral, diagram, or schedule form.

Computer Skills:

To perform this job successfully, an individual should have knowledge of Word Processing software; Spreadsheet software; Accounting software; Payroll systems and Internet software.

Certificates and Licenses:

- Valid California Driver's License
- Current Insurance and car registration

WORK ENVIRONMENT:

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is generally working out in the community, clients home, or in the office.

PHYSICAL DEMANDS:

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

N (Not Applicable) Activity is not applicable to this occupation.

O (Occasionally) Occupation requires this activity up to 33% of the time (0 - 2.5+ hrs/day)

F (Frequently) Occupation requires this activity from 33% - 66% of the time (2.5 - 5.5+ hrs/day)

C (Constantly) Occupation requires this activity more than 66% of the time (5.5+ hrs/day)

Physical Demands		Lift /Carry		Push / Pull	
Stand	C	10 lbs or Less	F	12 lbs or less	O
Walk	C	11-20 lbs	O	13-25 lbs	O
Sit	O	21-50 lbs	O	26-40 lbs	O
Handling/Fingering	C	51-100 lbs	N	41-100 lbs	N
Reach Outward	F	Over 100 lbs	N		
Reach Above Shoulder	O				
Climb	O				
Crawl	O				
Squat or Kneel	O				
Bend	O				
Vision: visual acuity to perform an activity such as: preparing and analyzing data and figures; transcribing; viewing a computer terminal; extensive reading; visual inspection involving small defects, small parts, and/or operation of machines (including inspection); and using measurement devices;					

ACKNOWLEDGMENT:

I have read this job description and fully understand the requirements set forth therein. I hereby accept this position and agree to abide by the requirements set forth and will perform all duties and responsibilities to the best of my ability. The job duties, elements, responsibilities, skills, functions, experience, educational factors, requirements and conditions listed in this job description are representative only and not exhaustive of the tasks that the employee may be required to perform. The employer reserves the right to revise this job description at any time and require employees to perform other tasks as circumstances or conditions of its business, competitive considerations or a work environment change. I further understand that my employment is at-will and thereby understand that the company or I may terminate the employment relationship at any time, with or without cause.

Employee, Signature

Date

Employee, Printed Name

Supervisor, Signature

Date

8.0 ATTACHMENT C - REFERENCES

REQUEST FOR PROPOSALS NO. DHHS2022-03
Provision of High Fidelity Wraparound Services
ATTACHMENT C – REFERENCE DATA SHEET
(Submit with Proposal)

REFERENCE DATA SHEET		
Provide a minimum of two (2) references with name, address, contact person and telephone number whose scope of business or services is similar to those of Humboldt County (preferably in California). Previous business with the Humboldt County does not qualify.		
NAME OF AGENCY:	South Bay Union Elementary School District	
STREET ADDRESS:	6077 Loma Ave	
CITY, STATE, ZIP:	Eureka, CA 95503	
CONTACT PERSON:	Deanna Morran, MSW, PPSC	EMAIL: dmoran@southbayusd.org
PHONE #:	707-832-8896	FAX #: (707)444-6446
Department Name:	Counseling Services	
Approximate County (Agency) Population:	Tk-8th grade- 500 students	
Number of Departments:	1	
General Description of Scope of Work:	Individual and group counseling at South Bay and Pine Hill	
NAME OF AGENCY:	Child Welfare Services	
STREET ADDRESS:	2440 6th St.	
CITY, STATE, ZIP:	Eureka, CA 95501	
CONTACT PERSON:	Kristen Palmero	EMAIL: KPalmero@co.humboldt.ca.us
PHONE #:	1-707-388-6600	FAX #:
Department Name:		
Approximate County (Agency) Population:		
Number of Departments:		
General Description of Scope of Work:	Provided 1:1 counseling services to at risk youth	
Applicant Tracking System Implementation Date:		

NAME OF AGENCY:	Humboldt Co. DHHS Children & Family Services	
STREET ADDRESS:	929 Koster Street	
CITY, STATE, ZIP:	Eureka, CA 95501	
CONTACT PERSON:	Miranda Cobb	EMAIL: mcobb@co.humboldt.ca.us
PHONE #:	707-388-6499	FAX #: 707-442-2308
Department Name:	- Adoption Program	
Approximate County (Agency) Population:		
Number of Departments:		
General Description of Scope of Work:	Provided AAP Wraparound services	

9.0 BUSINESS LICENSE & EVIDENCE OF INSURABILITY

City of Fortuna Business License

3429 RENNER DRIVE A

LOCATION OF BUSINESS

This license is to be displayed conspicuously at the location of business, and
is not transferable or assignable.

JENNIFER BROWN
HUMBOLDT NEUROHEALTH
3429 RENNER DRIVE
FORTUNA CA 95540

EXPIRATION DATE

6/30/2023

DATE ISSUED

7/01/2022

LICENSE NUMBER

0417

LICENSE FOR

GOVERNMENT/NON-PROFIT

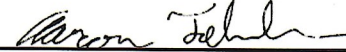
SIC/NAICS CODE

/0087

CLASS

PROF

This license is issued without verification that
the holder is subject to or exempted from
licensing by the state, county federal
government, or any other governmental agency.



AUTHORIZED SIGNATURE

COMMERCIAL LINES COMMON POLICY DECLARATIONS

PRODUCER:

Anderson Robinson Starkey Insurance Agency, Inc.
P.O. Box 1105
Arcata, CA 95518

POLICY NUMBER: **2022-62912**

RENEWAL OF NUMBER: 2021-62912

NAME OF INSURED AND MAILING ADDRESS:

Humboldt NeuroHealth Therapeutic Services
3429 Renner Dr.
Fortuna, CA 95540

POLICY PERIOD:

FROM **08/25/2022** TO **08/25/2023**

AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

BUSINESS DESCRIPTION: Psychotherapy services to individuals

**IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS
POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.**

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. THESE PREMIUMS MAY BE SUBJECT TO ADJUSTMENT.

	PREMIUM
COMMERCIAL GENERAL LIABILITY COVERAGE PART - OCCURRENCE	\$1,222
COMMERCIAL AUTO LIABILITY COVERAGE PART	\$2,144
COMMERCIAL AUTO PHYSICAL DAMAGE COVERAGE PART	\$901
IMPROPER SEXUAL CONDUCT AND PHYSICAL ABUSE COVERAGE PART	Not Covered
SOCIAL SERVICE PROFESSIONAL COVERAGE PART	Not Covered
COMMERCIAL LIQUOR LIABILITY COVERAGE PART	INCLUDED
TERRORISM COVERAGE (Certified Acts)	Not Covered
TOTAL:	\$4,267

FORM(S) AND ENDORSEMENT(S) MADE A PART OF THIS POLICY AT TIME OF ISSUE:*

CG 00 01 04 13,	CG 00 33 04 13,	CG 20 10 12 19,	CG 20 11 12 19,	CG 20 12 04 13,	CG 20 18 04 13,	CG 20 20 11 85,
CG 20 21 07 98,	CG 20 26 12 19,	CG 20 34 12 19,	CG 20 37 12 19,	CG 21 09 06 15,	CG 21 47 12 07,	CG 21 73 01 15,
CG 21 96 03 05,	CG 22 44 04 13,	CG 24 07 01 96,	IL 00 17 11 98,	IL 00 21 09 08,	IL 02 70 12 19,	NIAC-AL 01 80,
NIAC-E003 GL 08 20,	NIAC-E069 GL 02 19,	NIAC-E078 11 20,	NIAC-E11 GL 09 19,	NIAC-E120 09 19,	NIAC-E123 09 19,	NIAC-E15 09 20,
NIAC-E180 GL 01 21,	NIAC-E180 LL 01 21,	NIAC-E195 GL 05 21,	NIAC-E22 09 19,	NIAC-E25 12 15,	NIAC-E26 11 17,	NIAC-E28 01 99,
NIAC-E282 GL 12 21,	NIAC-E29 12 09,	NIAC-E33 GL 09 19,	NIAC-E34 09 18,	NIAC-E42 GL 09 19,	NIAC-E44 04 07,	NIAC-E5 07 15,
NIAC-E56 01 17,	NIAC-E59 02 12,	NIAC-E60 07 12,	NIAC-E61 02 19,	NIAC-E70 03 19,	NIAC-E72 01 17,	NIAC-E74 03 14,
NIAC-GL 01 80,	NIAC-LL 01 80,	NIAC-NPO-001 05 20,	NIAC-X1 06 18,	SCHEDULE BA 01 80,	SCHEDULE G 01 80,	SCHEDULE L 01 80

*OMITS APPLICABLE FORMS AND ENDORSEMENTS IF SHOWN IN
SPECIFIC COVERAGE PART / COVERAGE FORM DECLARATIONS.

COUNTERSIGNED: 07/21/2022

BY



(AUTHORIZED REPRESENTATIVE)

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S)
AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

Notice: This risk pooling contract is issued by a pooling arrangement authorized by California Corporations Code Section 5005.1. The pooling arrangement is not subject to all of the insurance laws of the State of California and is not subject to regulation by the Insurance Commissioner. Insurance guaranty funds are not available to pay claims in the event the risk pool becomes insolvent.

COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

PRODUCER:

POLICY NUMBER: **2022-62912**

Anderson Robinson Starkey Insurance Agency,
Inc.
P.O. Box 1105
Arcata, CA 95518

RENEWAL OF NUMBER: 2021-62912

NAME OF INSURED AND MAILING ADDRESS:

Humboldt NeuroHealth Therapeutic Services
3429 Renner Dr.
Fortuna, CA 95540

POLICY PERIOD:

FROM 08/25/2022 TO 08/25/2023

AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

BUSINESS DESCRIPTION: Psychotherapy services to individuals

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS
POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.

LIMITS OF COVERAGE:

GENERAL AGGREGATE LIMIT (OTHER THAN PRODUCTS - COMPLETED OPERATIONS)	\$2,000,000
PRODUCTS - COMPLETED OPERATIONS AGGREGATE LIMIT	\$2,000,000
PERSONAL AND ADVERTISING INJURY LIMIT	\$1,000,000
EACH OCCURRENCE LIMIT	\$1,000,000
DAMAGE TO PREMISES RENTED TO YOU	\$500,000 any one premises
MEDICAL EXPENSE LIMIT	\$20,000 any one person

ADDITIONAL COVERAGES:

CLASSIFICATION(S)

SEE ATTACHED SUPPLEMENTAL DECLARATIONS SCHEDULE G

PREMIUM

\$1,222

FORMS AND ENDORSEMENTS APPLICABLE TO THIS POLICY ARE INCLUDED IN COMMERCIAL LINES COMMON POLICY DECLARATIONS

COUNTERSIGNED: 07/21/2022

BY



(AUTHORIZED REPRESENTATIVE)

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S)
AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

NIAC-GL

Humboldt NeuroHealth Response to RFP #DHHS2022-03

82

**COMMERCIAL GENERAL LIABILITY
EXTENSION OF DECLARATIONS**

Schedule G

POLICY NUMBER: 2022-62912-NPO

Page 1

NAME OF INSURED: Humboldt NeuroHealth Therapeutic Services

PREMISES CODE/CLASS	*LOC	PREMIUM BASIS	RATE	*ADVANCED PREMIUM
44440/Health Care Facilities clinics, dispensaries or infirmaries treating outpatients only - no regular	1	2,059	213.514	\$440
61227/Buildings or Premises - office - NFP	2	3,456	209.043	\$723

ADDITIONAL COVERAGES

Increased Aggregate \$59

*See Common Declarations for Total Advanced Premium and Schedule 'L' for locations.

COUNTERSIGNED: 7/21/2022

BY



NIAC - SCHEDULE G - NPO

Humboldt NeuroHealth Response to RFP #DHHS2022-03 (AUTHORIZED REPRESENTATIVE)

83

**COMMERCIAL GENERAL LIABILITY
EXTENSION OF DECLARATIONS**

Schedule L
Page 1

POLICY NUMBER: 2022-62912-NPO

NAME OF INSURED: Humboldt NeuroHealth Therapeutic Services

PREMISES LOC/BLDG	DESIGNATED PREMISES ADDRESS, CITY, STATE, ZIP	ADDITIONAL INSUREDS AND OTHER INTERESTS
1	3429 Renner Dr. Fortuna, CA 95540	
2	2313 I St Eureka, CA 95501	

COMMERCIAL LIQUOR LIABILITY COVERAGE PART DECLARATIONS

PRODUCER:

Anderson Robinson Starkey Insurance Agency, Inc.
P.O. Box 1105
Arcata, CA 95518

POLICY NUMBER: 2022-62912

RENEWAL OF NUMBER: 2021-62912

NAME OF INSURED AND MAILING ADDRESS:

Humboldt NeuroHealth Therapeutic Services

3429 Renner Dr.
Fortuna, CA 95540

POLICY PERIOD:

FROM 8/25/2022 TO 8/25/2023

AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

BUSINESS DESCRIPTION: Psychotherapy services to individuals

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.

LIMITS OF COVERAGE:

GENERAL AGGREGATE LIMIT.....\$ 1,000,000

EACH COMMON CAUSE LIMIT.....\$ 1,000,000

PREMIUM:

Included

FORMS AND ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART AND MADE PART OF THIS POLICY AT THE TIME OF ISSUANCE:

CG 00 33 04 13

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

Notice: This risk pooling contract is issued by a pooling arrangement authorized by California Corporations Code Section 5005.1. The pooling arrangement is not subject to all of the insurance laws of the State of California and is not subject to regulation by the Insurance Commissioner. Insurance guaranty funds are not available to pay claims in the event the risk pool becomes insolvent.



COUNTERSIGNED: 7/21/2022

BY

(AUTHORIZED REPRESENTATIVE)

INDEX OF FORMS ATTACHED TO THE POLICY

POLICY NUMBER: 2022-62912

NAME OF INSURED: Humboldt NeuroHealth Therapeutic Services

Page: 1

LIABILITY FORMS AND ENDORSEMENTS

FORM NUMBER/EDITION DATE

Commercial General Liability Coverage Form	CG 00 01 04 13
Liquor Liability Coverage Form	CG 00 33 04 13
Additional Insured - Owners, Lessees or Contractors	CG 20 10 12 19
Additional Insured - Managers or Lessors of Premises	CG 20 11 12 19
Additional Insured - State or Political Subdivisions - Permits	CG 20 12 04 13
Additional Insured - Mortgagee, Assignee or Receiver	CG 20 18 04 13
Additional Insured - Charitable Institutions	CG 20 20 11 85
Additional Insured - Volunteers	CG 20 21 07 98
Additional Insured - Designated Person or Organization	CG 20 26 12 19
Additional Insured - Lessor of Leased Equipment - Automatic Status - Lease	CG 20 34 12 19
Additional Insured - Owners, Lessees or Contractors - Completed Operations	CG 20 37 12 19
Exclusion - Unmanned Aircraft	CG 21 09 06 15
Employment-Related Practices Exclusion	CG 21 47 12 07
Exclusion of Certified Acts of Terrorism	CG 21 73 01 15
Silica - Exclusion	CG 21 96 03 05
Health or Cosmetic Services Exclusion	CG 22 44 04 13
Products/Completed Operations Hazard Redefined	CG 24 07 01 96
Common Policy Conditions	IL 00 17 11 98
Nuclear Energy Liability Exclusion Endorsement (Broad Form)	IL 00 21 09 08
California Changes - Cancellation and Nonrenewal	IL 02 70 12 19
Business Auto Coverage Part Declarations	NIAC-AL-NPO
Member Criteria	NIAC-E003 GL 08 20
Fiscal Sponsor Limitation	NIAC-E069 GL 02 19
Professional Services - Exclusion	NIAC-E078 11 20
Fireworks Exclusion	NIAC-E11 GL 09 19
Lead Liability - Exclusion	NIAC-E120 09 19
Firearms Sublimit Endorsement	NIAC-E123 09 19
Blood Testing Exclusion	NIAC-E15 09 20
Communicable Disease - Exclusion	NIAC-E180 GL 01 21
Communicable Disease - Exclusion	NIAC-E180 LL 01 21
Discrimination Exclusion	NIAC-E195 GL 05 21
Asbestos Exclusion	NIAC-E22 09 19
Additional Insured - Designated Person or Organization	NIAC-E25 12 15
Waiver of Transfer of Rights of Recovery Against Others	NIAC-E26 11 17
Property Damage to Personal Property in the Care, Custody or Control of the Insured	NIAC-E28 01 99
Cyber Incident - Exclusion	NIAC-E282 GL 12 21
Employee Personal Auto Reimbursement	NIAC-E29 12 09
Mold, Fungus Exclusion	NIAC-E33 GL 09 19
Construction and Conversion Exclusion	NIAC-E34 09 18

This list of forms is not part of the actual policy, but is for your information only.

Please refer to the policy(s) for **Humboldt NeuroHealth Therapeutic Services** for details on coverage and exclusions. DHHS2022-03

INDEX OF FORMS ATTACHED TO THE POLICY

POLICY NUMBER: 2022-62912

NAME OF INSURED: Humboldt NeuroHealth Therapeutic Services

Page: 2

LIABILITY FORMS AND ENDORSEMENTS

FORM NUMBER/EDITION DATE

Nuclear, Chemical and Biological Hazard Exclusion	NIAC-E42 GL 09 19
Exclusion - Medical Payments Coverage (Patients or Clients)	NIAC-E44 04 07
Trampoline Bounce House Exclusion	NIAC-E5 07 15
Liberalization - GL, SSP, EBL	NIAC-E56 01 17
Liberalization - LL	NIAC-E59 02 12
Volunteer Medical Payments	NIAC-E60 07 12
Additional Insured - Primary and Non-Contributory Endorsement for Public Entities	NIAC-E61 02 19
Fundraiser and Event Endorsement	NIAC-E70 03 19
Other Insurance - Coverage C	NIAC-E72 01 17
Mental Anguish Endorsement	NIAC-E74 03 14
Commercial General Liability Coverage Part Declarations	NIAC-GL-NPO
Commercial Liquor Liability Coverage Part Declarations	NIAC-LL 01 80
Nonprofits' OWN Enhancement Endorsement	NIAC-NPO-001 05 20
Improper Sexual Conduct and Physical Abuse Exclusion	NIAC-X1 06 18
Business Auto Coverage Schedule	SCHEDULE BA 01 80
Commercial General Liability Class Code Schedule	SCHEDULE G 01 80
Commercial General Liability Location Schedule	SCHEDULE L 01 80

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED
PRIMARY AND NON-CONTRIBUTORY
ENDORSEMENT FOR PUBLIC ENTITIES**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:
--

A. Section II – WHO IS AN INSURED is amended to include:

4. Any public entity as an additional insured, and the officers, officials, employees, agents and/or volunteers of that public entity, as applicable, who may be named in the Schedule above, when you have agreed in a written contract or written agreement presently in effect or becoming effective during the term of this policy, that such public entity and/or its officers, officials, employees, agents and/or volunteers be added as an additional insured(s) on your policy, but only with respect to liability for “bodily injury”, “property damage” or “personal and advertising injury” caused, in whole or in part, by:

- a. Your negligent acts or omissions; or
- b. The negligent acts or omissions of those acting on your behalf;

in the performance of your ongoing operations.

No such public entity or individual is an additional insured for liability arising out of the sole negligence by that public entity or its designated individuals. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.

B. Section III – LIMITS OF INSURANCE is amended to include:

8. The limits of insurance applicable to the public entity and applicable individuals identified as an additional insured(s) pursuant to Provision A.4. above, are those specified in the written contract between you and that public entity, or the limits available under this policy, whichever are less. These limits are part of and not in addition to the limits of insurance under this policy.

C. With respect to the insurance provided to the additional insured(s), Condition 4. Other Insurance of SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS is replaced by the following:

4. Other Insurance

a. Primary Insurance

This insurance is primary if you have agreed in a written contract or written agreement:

- (1) That this insurance be primary. If other insurance is also primary, we will share with all that other insurance as described in c. below; or

- (2) The coverage afforded by this insurance is primary and non-contributory with the additional insured(s)' own insurance.

Paragraphs (1) and (2) do not apply to other insurance to which the additional insured(s) has been added as an additional insured or to other insurance described in paragraph **b.** below.

b. Excess Insurance

This insurance is excess over:

1. Any of the other insurance, whether primary, excess, contingent or on any other basis:
 - (a) That is Fire, Extended Coverage, Builder's Risk, Installation Risk or similar coverage for "your work";
 - (b) That is fire, lightning, or explosion insurance for premises rented to you or temporarily occupied by you with permission of the owner;
 - (c) That is insurance purchased by you to cover your liability as a tenant for "property damage" to premises temporarily occupied by you with permission of the owner; or
 - (d) If the loss arises out of the maintenance or use of aircraft, "autos" or watercraft to the extent not subject to Exclusion **g.** of **SECTION I – COVERAGE A – BODILY INJURY AND PROPERTY DAMAGE.**
 - (e) Any other insurance available to an additional insured(s) under this Endorsement covering liability for damages which are subject to this endorsement and for which the additional insured(s) has been added as an additional insured by that other insurance.
- (1) When this insurance is excess, we will have no duty under Coverages **A** or **B** to defend the additional insured(s) against any "suit" if any other insurer has a duty to defend the additional insured(s) against that "suit". If no other insurer defends, we will undertake to do so, but we will be entitled to the additional insured(s)' rights against all those other insurers.
- (2) When this insurance is excess over other insurance, we will pay only our share of the amount of the loss, if any, that exceeds the sum of:
 - (a) The total amount that all such other insurance would pay for the loss in the absence of this insurance; and
 - (b) The total of all deductible and self-insured amounts under all that other insurance.
- (3) We will share the remaining loss, if any, with any other insurance that is not described in this **Excess Insurance** provision and was not bought specifically to apply in excess of the Limits of Insurance shown in the Declarations of this Coverage Part.

c. Methods of Sharing

If all of the other insurance available to the additional insured(s) permits contribution by equal shares, we will follow this method also. Under this approach each insurer contributes equal amounts until it has paid its applicable limit of insurance or none of the loss remains, whichever comes first.

If any other the other insurance available to the additional insured(s) does not permit contribution by equal shares, we will contribute by limits. Under this method, each insurer's share is based on the ratio of its applicable limit of insurance to the total applicable limits of insurance of all insurers.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - DESIGNATED PERSON
OR ORGANIZATION -
FOOD CONTRIBUTIONS OR CLIENT REFERRALS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:

Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy, in consideration of food contributions or client referrals you receive from them.

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less. This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

- A. Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:
1. In the performance of your ongoing operations; or
 2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

- B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - LESSOR OF LEASED
EQUIPMENT - AUTOMATIC STATUS WHEN
REQUIRED IN LEASE AGREEMENT WITH YOU**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

- A. Section II – Who Is An Insured** is amended to include as an additional insured any person(s) or organization(s) from whom you lease equipment when you and such person(s) or organization(s) have agreed in writing in a contract or agreement that such person(s) or organization(s) be added as an additional insured on your policy. Such person(s) or organization(s) is an insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your maintenance, operation or use of equipment leased to you by such person(s) or organization(s).

However, the insurance afforded to such additional insured:

1. Only applies to the extent permitted by law; and
2. Will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

A person's or organization's status as an additional insured under this endorsement ends when their contract or agreement with you for such leased equipment ends.

- B.** With respect to the insurance afforded to these additional insureds, this insurance does not apply to any "occurrence" which takes place after the equipment lease expires.
- C.** With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

The most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement you have entered into with the additional insured; or
2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – MANAGERS OR LESSORS OF PREMISES

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Designation Of Premises (Part Leased To You):
Name Of Person(s) Or Organization(s) (Additional Insured): Any person or organization acting as a manager or lessor of a covered premises that you are required to name as an additional insured on this policy, under a written contract, lease or agreement currently in effect, or becoming effective during the term of this policy.
Additional Premium: Included
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability arising out of the ownership, maintenance or use of that part of the premises leased to you and shown in the Schedule and subject to the following additional exclusions:

This insurance does not apply to:

1. Any "occurrence" which takes place after you cease to be a tenant in that premises.
2. Structural alterations, new construction or demolition operations performed by or on behalf of the person(s) or organization(s) shown in the Schedule.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and

2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.	All insured premises and operations.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.	All insured premises and operations.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and

2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or

2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

- C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – MORTGAGEE, ASSIGNEE OR RECEIVER

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Person(s) Or Organization(s)	Designation Of Premises
Any person or organization acting as mortgagee, assignee, or receiver with respect to locations scheduled on the policy.	
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to their liability as mortgagee, assignee, or receiver and arising out of the ownership, maintenance, or use of the premises by you and shown in the Schedule.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. This insurance does not apply to structural alterations, new construction and demolition operations performed by or for that person or organization.

C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – STATE OR GOVERNMENTAL AGENCY OR SUBDIVISION OR POLITICAL SUBDIVISION – PERMITS OR AUTHORIZATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

State Or Governmental Agency Or Subdivision Or Political Subdivision:

Any state or political subdivision that issues a permit or authorization to the named insured.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured any state or governmental agency or subdivision or political subdivision shown in the Schedule, subject to the following provisions:

1. This insurance applies only with respect to operations performed by you or on your behalf for which the state or governmental agency or subdivision or political subdivision has issued a permit or authorization.

However:

- a. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- b. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

2. This insurance does not apply to:

- a. "Bodily injury", "property damage" or "personal and advertising injury" arising out of operations performed for the federal government, state or municipality; or
- b. "Bodily injury" or "property damage" included within the "products-completed operations hazard".

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**WAIVER OF TRANSFER OF RIGHTS OF RECOVERY
AGAINST OTHERS (WAIVER OF SUBROGATION)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
SOCIAL SERVICE PROFESSIONAL LIABILITY COVERAGE FORM

SCHEDULE

Name of Person or Organization:

Where you are so required in a written contract or agreement currently in effect or becoming effective during the term of this policy, we waive any right of recovery we may have against that person or organization, who may be named in the schedule above, because of payments we make for injury or damage.

BUSINESS AUTO COVERAGE PART DECLARATIONS

PRODUCER: Anderson Robinson Starkey Insurance Agency, Inc.
P.O. Box 1105
Arcata, CA 95518

POLICY NUMBER: 2022-62912
RENEWAL OF NUMBER: 2021-62912

Item One: **NAME OF INSURED AND MAILING ADDRESS:**
Humboldt NeuroHealth Therapeutic Services

3429 Renner Dr.
Fortuna, CA 95540

POLICY PERIOD: FROM 08/25/2022 TO 08/25/2023
AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

BUSINESS DESCRIPTION: Psychotherapy services to individuals

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS
POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.

Item Two: **SCHEDULE OF COVERAGES AND COVERED AUTOS.**

This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos". "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the COVERED AUTOS Section of the Business Auto Coverage Form next to the name of the coverage.

COVERAGES		COVERED AUTOS Entry of one or more of the symbols from the COVERED AUTOS Section of the Business Auto Coverage Form shows which autos are covered autos.	LIMIT THE MOST WE WILL PAY FOR ANY ONE ACCIDENT OR LOSS	PREMIUM
LIABILITY CSL		1	\$1,000,000	\$1,242
HIRED AUTO		8	INCLUDED	\$50
NONOWNED AUTO		9	INCLUDED	\$200
AUTO MEDICAL PAYMENTS		2	\$5,000	\$64
UNINSURED MOTORIST		2	\$1,000,000	\$588
PHYSICAL DAMAGE	COMPREHENSIVE COVERAGE	2, 8	Actual cash value or cost of repair whichever is less minus \$250 Deductible shown on supplemental declaration for each covered auto applies to loss except caused by fire or lightning. See ITEM THREE for hired or borrowed autos.	\$314
	COLLISION COVERAGE	2, 8	\$1,000 Deductible shown on supplemental declaration for each covered auto. See ITEM THREE for hired or borrowed autos.	\$570
TOWING AND LABOR		7	\$N/A for each disablement of a private passenger "auto"	\$17
ESTIMATED TOTAL PREMIUM				\$3,045

FORMS AND ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART AND MADE PART OF THIS POLICY AT THE TIME OF ISSUANCE:

CA 00 01 10 13, CA 01 43 05 17, CA 03 05 10 13, CA 04 24 10 13, CA 04 44 10 13, CA 20 54 10 13, CA 20 55 10 13,
CA 21 54 11 20, CA 23 84 10 13, CA 23 85 10 13, CA 99 23 10 13, CA 99 33 10 13, CA 99 34 10 13, IL U 001 09 03,

NIAC-E180 BA 01 21

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

Notice: This risk pooling contract is issued by a pooling arrangement authorized by California Corporations Code Section 5005.1. The pooling arrangement is not subject to all of the insurance laws of the State of California and is not subject to regulation by the Insurance Commissioner. Insurance guaranty funds are not available to pay claims in the event the risk pool becomes insolvent.

COUNTERSIGNED: 07/21/2022

BY



NIAC - AL

Humboldt NeuroHealth Response to RFP #DHHS2022-03
(AUTHORIZED REPRESENTATIVE)

100

BUSINESS AUTO COVERAGE FORM

POLICY NUMBER: 2022-62912

SCHEDULE BA
Page 1

NAME INSURED: Humboldt NeuroHealth Therapeutic Services

Item Three: SCHEDULE OF COVERED AUTOS YOU OWN

DESCRIPTION					DEDUCTIBLES apply only if coverage is provided as indicated below.		TOWING & LABOR
COVERED AUTO NO.	YEAR, MODEL, TRADE NAME, BODYTYPE, SERIAL NUMBER(S)	VIN	TERR.	CLASS CODE	OTHER THAN COLLISION	COLLISION	Limit per Disablement
1	2006 Toyota Corolla	2T1BR32E76C602854	079	7391	250	1,000	50
2	2016 Toyota Camry	4T1BD1FK8GU187725	079	7391	250	1,000	N/A

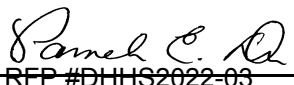
PREMIUMS: COVERAGE IS PROVIDED ONLY IF A PREMIUM CHARGE IS INDICATED.

COVERED AUTO NO.	NON-OWNED	HIRED	LIABILITY	MED PAY	UM/ UIM	PHYSICAL DAMAGE		TOWING AND LABOR	ADDITIONAL INSURED / LOSS PAYEE:
						COLL.	COMP.		Except for towing, all physical damage loss is payable to you and the Loss Payee named below as interest may appear at the time of loss. See attached Schedule A1.
1			621	32	294	285	157	17	
2			621	32	294	285	157	N/A	

NO/H 200 50

Hired PD Hired Physical Damage Deductibles:
Comprehensive: \$250 Collision: \$1,000

UM Waiver of Collision Deductible Coverage (premium included above)
-- on all eligible vehicles

Humboldt NeuroHealth Response to RFP #DHHS2022-03
Signature 

07/21/2022
101
Date

INDEX OF FORMS ATTACHED TO THE POLICY

POLICY NUMBER: 2022-62912

NAME OF INSURED: Humboldt NeuroHealth Therapeutic Services

Page 1

AUTO FORMS AND ENDORSEMENTS

FORM NUMBER/EDITION DATE

Business Auto Coverage Form	CA 00 01 10 13
California Changes	CA 01 43 05 17
California Changes - Waiver of Collision Deductible	CA 03 05 10 13
CA - Auto Med Pay Coverage	CA 04 24 10 13
Waiver of Transfer of Rights of Recovery Against Others to us (Waiver of Subrogation)	CA 04 44 10 13
Employee Hired Autos	CA 20 54 10 13
Fellow Employee Coverage	CA 20 55 10 13
California Uninsured Motorists Coverage - Bodily Injury	CA 21 54 11 20
Exclusion of Terrorism - Auto	CA 23 84 10 13
Exclusion of Terrorism - Auto - Involving Nuclear, Biological or Chemical Terrorism	CA 23 85 10 13
Rental Reimbursement Coverage	CA 99 23 10 13
Employees as Insureds	CA 99 33 10 13
Social Service Agencies - Volunteers as Insureds	CA 99 34 10 13
California Uninsured Motorists Coverage Selection / Rejection	IL U 001 09 03
Communicable Disease - Exclusion	NIAC-E180 BA 01 21

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

RENTAL REIMBURSEMENT COVERAGE

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM
BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured: Humboldt NeuroHealth Therapeutic Services

Endorsement Effective Date: 8/25/2022

SCHEDULE

Coverage	Designation or Description of Covered "Autos" to which this insurance applies	Maximum Payment Each Covered "Auto"			Premium
		Any One Day	No. of Days	Any One Period	
Comprehensive	Any Covered "Auto"	\$50	30	\$1500	Incl.
Collision	Any Covered "Auto"	\$50	30	\$1500	Incl.
Specified Causes of Loss	N/A				
Total Premium					Incl.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.					

- A.** This endorsement provides only those coverages where a premium is shown in the Schedule. It applies only to a covered "auto" described or designated in the Schedule.
- B.** We will pay for rental reimbursement expenses incurred by you for the rental of an "auto" because of "loss" to a covered "auto". Payment applies in addition to the otherwise applicable amount of each coverage you have on a covered "auto". No deductibles apply to this coverage.
- C.** We will pay only for those expenses incurred during the policy period beginning 24 hours after the "loss" and ending, regardless of the policy's expiration, with the lesser of the following number of days:
1. The number of days reasonably required to repair or replace the covered "auto". If "loss" is caused by theft, this number of days is added to the number of days it takes to locate the covered "auto" and return it to you.

- 2. The number of days shown in the Schedule.
- D. Our payment is limited to the lesser of the following amounts:
 - 1. Necessary and actual expenses incurred.
 - 2. The maximum payment stated in the Schedule applicable to "any one day" or "any one period".
- E. This coverage does not apply while there are spare or reserve "autos" available to you for your operations.
- F. If "loss" results from the total theft of a covered "auto" of the private passenger type, we will pay under this coverage only that amount of your rental reimbursement expenses which is not already provided for under the Physical Damage Coverage Extension.

COMMERCIAL UMBRELLA POLICY DECLARATIONS

PRODUCER:
Anderson Robinson Starkey Insurance Agency, Inc.
P.O. Box 1105
Arcata, CA 95518

POLICY NUMBER: 2022-62912A-UMB

RENEWAL OF NUMBER: 2022-62912-UMB-NPO

Item 1 NAME OF INSURED AND MAILING ADDRESS:
Humboldt NeuroHealth Therapeutic Services
3429 Renner Dr.
Fortuna, CA 95540

Item 2 POLICY PERIOD: FROM 8/25/2022 TO 8/25/2023
AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

BUSINESS DESCRIPTION: Psychotherapy services to individuals

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS
POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.

Item 3 **THE ANNUAL AND MINIMUM PREMIUM DUE AT INCEPTION:** **\$836**

Item 4 **LIMITS OF INSURANCE:**

- | | | |
|------|--|-----------|
| a. | Occurrence / Accident / Injury / Claim Limits (where applicable): | 1,000,000 |
| i) | Each Occurrence - Commercial General Liability and Products-
Completed Operations Liability | |
| ii) | Each Accident - Business Auto Liability | |
| iii) | Each Injury - Liquor Liability | |
| iv) | Each Claim - Employee Benefits Liability | |
| b. | Each Claim - Directors and Officers Liability | Excluded |
| c. | Each Claim - Improper Sexual Conduct and Physical Abuse Liability | Excluded |
| d. | Each Claim - Social Service Professional Liability | Excluded |

Aggregate limits:

- | | | |
|----|--|-----------|
| e. | Commercial General Liability, Business Auto Liability, Products- Completed Operations
Liability, Liquor Liability, and Employee Benefits Liability Aggregate
(where applicable): | 1,000,000 |
| f. | Directors and Officers Liability Aggregate | Excluded |
| g. | Improper Sexual Conduct and Physical Abuse Liability Aggregate | Excluded |
| h. | Social Service Professional Liability Aggregate | Excluded |

Item 5 **RETROACTIVE DATES - SEE SCHEDULE OF UNDERLYING INSURANCE**

FORMS AND ENDORSEMENTS ATTACHED TO THIS POLICY AT INCEPTION (NUMBER AND EDITION DATE):
CU 21 33 01 15, NIAC-E003 UMB 08 20, NIAC-E180 UMB 01 21, NIAC-E253 UMB 08 21, NIAC-E42 UMB 09 19, SCHEDULE A 01 80, UMB 231 06 16, UMB 232 06 16,
UMB-100 05 21, UMB61 05 13

COUNTERSIGNED: 7/21/2022

BY



(AUTHORIZED REPRESENTATIVE)

THESE DECLARATIONS, THE ATTACHED SCHEDULE OF UNDERLYING INSURANCE, TOGETHER WITH THE ATTACHED SCHEDULE OF FORMS AND ENDORSEMENTS,
AND ANY FORMS AND ENDORSEMENTS WE MAY LATER ATTACH TO REFLECT CHANGES, MAKE UP AND COMPLETE THE ABOVE NUMBERED POLICY.

Notice: This risk pooling contract is issued by a pooling arrangement authorized by California Corporations Code Section
5005.1. The pooling arrangement is not subject to all of the insurance laws of the State of California and is not subject to
regulation by the Insurance Commissioner. Insurance guaranty funds are not available to pay claims in the event the risk pool
becomes insolvent.

SCHEDULE A - SCHEDULE OF UNDERLYING INSURANCE

POLICY NUMBER: 2022-62912A-UMB

CONTROL NUMBER: **62912**

NAME OF INSURED: Humboldt NeuroHealth Therapeutic Services

TYPE OF POLICY	APPLICABLE LIMITS	INSURER POLICY #	APPLICABLE PERIOD
(A) Automobile Liability Business Auto	Bodily Injury and Property Damage Combined Single Limit \$1,000,000 Uninsured/Underinsured Motorist N/A	NIAC 2022-62912	08/25/2022 to 08/25/2023
(Does not include: Terrorism Coverage - Certified Acts)			
(B) Commercial General Liability	Each Occurrence Limit \$1,000,000 General Aggregate Limit \$2,000,000 Products/Completed Operations Aggregate Limi \$2,000,000 Personal & Advertising Injury Limit \$1,000,000 Damage to Premises Rented to You N/A (any one premises)	NIAC 2022-62912	08/25/2022 to 08/25/2023
(Does not include: Terrorism Coverage - Certified Acts)			
(C) Social Service Professional Liability	Each Occurrence Limit N/A Aggregate Limit N/A		
(D) Standard Workers Compensation & Employers Liability	Coverage B - Employers Liability Bodily Injury by Accident N/A Bodily Injury by Disease N/A Bodily Injury by Disease N/A	Each Accident Each Employee Policy Limit	
(E) Improper Sexual Conduct and Physical Abuse	Each Occurrence Limit N/A General Aggregate Limit N/A		
(F) Directors' And Officers'	Each Wrongful Act Limit N/A Aggregate Limit N/A		
(G) Liquor Liability	Each Common Cause Limit \$1,000,000 Aggregate Limit \$1,000,000	NIAC 2022-62912	08/25/2022 to 08/25/2023
(Does not include: Terrorism Coverage - Certified Acts)			
(H) Employee Benefits Liability	Each Employee N/A Aggregate Limit N/A		

INDEX OF FORMS ATTACHED TO THE POLICY

POLICY NUMBER: 2022-62912A-UMB-NPO

NAME OF INSURED: Humboldt NeuroHealth Therapeutic Services

Page 1

UMBRELLA FORMS AND ENDORSEMENTS

FORM NUMBER/EDITION DATE

Exclusion of Terrorism	CU 21 33 01 15
Member Criteria	NIAC-E003 UMB 08 2
Communicable Disease - Exclusion	NIAC-E180 UMB 01 2
Workers' Compensation - Exclusion	NIAC-E253 UMB 08 2
Nuclear, Chemical and Biological Hazard Exclusion	NIAC-E42 UMB 09 19
Schedule A - Schedule of Underlying Insurance	SCHEDULE A 01 80
Privacy Liability and Cyber Coverage Exclusion	UMB 231 06 16
Medical Payments Exclusion	UMB 232 06 16
Commercial Umbrella Policy	UMB-100 05 21
Employers' Liability Exclusion	UMB61 05 13

BUSINESSOWNERS POLICY DECLARATIONS

PRODUCER:

Anderson Robinson Starkey Insurance Agency, Inc.
P.O. Box 1105
Arcata, CA 95518

POLICY NUMBER: 2022-62912-PROP

RENEWAL OF NUMBER: 2021-62912-PROP

NAME OF INSURED AND MAILING ADDRESS:

Humboldt NeuroHealth Therapeutic Services
3429 Renner Dr.
Fortuna, CA 95540

POLICY PERIOD:

FROM: 08/25/2022 TO: 08/25/2023

AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

BUSINESS DESCRIPTION:

Psychotherapy services to individuals

**IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS
POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.**

(See SCHEDULE A for applicable coverage information & limits)

SECTION I - PROPERTY

POLICY DEDUCTIBLE: \$1,000

BUILDINGS

\$765

BUSINESS PERSONAL PROPERTY (BPP)

\$510

BOP Enhancement Endorsement (NIAC-BOP-002)

\$128

Misc. Covered Property

\$67

Mandatory Fire Loss coverage following Certified Acts of Terrorism

\$7

OPTIONAL COVERAGES:

\$500 deductible applies to the following optional coverages:

Money & Securities

\$66

Employee Dishonesty Coverage

\$58

SECTION II - LIABILITY

N/A (Not Available in this Policy)

TOTAL PREMIUM

\$1,601

FORM(S) AND ENDORSEMENT(S) MADE A PART OF THIS POLICY AT TIME OF ISSUE:

BP 01 55 02 20, BP 04 30 07 13, BP 12 03 01 10, BP 15 60 02 21, NIAC-BOP-000 01 16, NIAC-BOP-002 05 20, NIAC-BOP-004 01 16,
NIAC-BOP-005 01 16, NIAC-BOP-011 01 16, NIAC-BOP-021 01 16, NIAC-BOP-NCBR 01 16, NIAC-E003 BOP 08 20

AUTOMATIC INCREASE IN INSURANCE : 8%

COUNTERSIGNED: 7/21/2022

BY



(AUTHORIZED REPRESENTATIVE)

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S)
AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

Notice: This risk pooling contract is issued by a pooling arrangement authorized by California Corporations Code Section 5005.1. The pooling arrangement is not subject to all of the insurance laws of the State of California and is not subject to regulation by the Insurance Commissioner. Insurance guaranty funds are not available to pay claims in the event the risk pool becomes insolvent.

Humboldt NeuroHealth Response to RFP #DHHS2022-03

108

**NONPROFITS INSURANCE ALLIANCE OF CALIFORNIA
BUSINESSOWNERS PROPERTY POLICY
EXTENSION OF DECLARATIONS
SCHEDULE A**

POLICY NUMBER: 2022-62912-PROP - 62912
NAMED INSURED: Humboldt NeuroHealth Therapeutic Services

Loc	Bldg	Coverage	Address	Class Code	Limit	Premium
2	1	Business Personal Property	3429 Renner Drive	44440	\$40,000	\$264
		Misc. Covered Property	Fortuna, CA 95540		\$25,000	\$67
		Money & Securities - On Prem.			\$15,000	\$66
		Money & Securities - Off Prem.			\$5,000	Incl.
		Protective Safeguards (P-1)				
3	1	Building (Replacement Cost)	2313 I Street	63611	\$807,000	\$765
		Business Personal Property	Eureka, CA 95501		\$60,000	\$246
Employee Dishonesty (1 Location(s))					\$5,000	\$58
Forgery & Alteration					\$5,000	Incl.

LOSS PAYEES / MORTGAGEES SCHEDULE:

Loc	Bldg	Loss Payee (Name & Address)	Provision Applicable (Indicate Paragraph A, B, C or D)
3	1	Arcata Economic Development Corporation 707 K Street Eureka, CA 95501	B

INDEX OF FORMS ATTACHED TO THE POLICY

POLICY NUMBER: 2022-62912-PROP

NAME OF INSURED: Humboldt NeuroHealth Therapeutic Services

Page 1

PROPERTY FORMS AND ENDORSEMENTS

FORM NUMBER/EDITION DATE

California Changes	BP 01 55 02 20
Protective Safeguards	BP 04 30 07 13
Loss Payable Provision	BP 12 03 01 10
Cyber Incident Exclusion	BP 15 60 02 21
Businessowners Coverage Form	NIAC-BOP-000 01 16
BOP Enhancement Endorsement	NIAC-BOP-002 05 20
Include Volunteer Workers As Employees	NIAC-BOP-004 01 16
International Trade or Economic Sanctions	NIAC-BOP-005 01 16
Exclusion of Certified Acts of Terrorism	NIAC-BOP-011 01 16
Exclusion of Other than Certified Acts of Terrorism	NIAC-BOP-021 01 16
Nuclear, Chemical, Biological, and Radioactive Exclusion - With or Without Terrorism	NIAC-BOP-NCBR 01 16
Member Criteria	NIAC-E003 BOP 08 20

Customer ID:	<u>463VWBMA4D</u>	Named Insured:	<u>Humboldt Neurohealth Therapeutic Services</u>
Policy Number:	<u>P-GRO4B2UXDDJ41-02</u>		
Effective Date:	<u>01/02/2022</u>	Address:	<u>2145 Myrtle Ave</u>
Expiration Date:	<u>01/02/2023</u>		<u>Eureka, CA 95501</u>
Retroactive Date:	<u>01/02/2020</u>		

NOTICE: A LOWER LIMIT OF LIABILITY APPLIES TO JUDGEMENTS OR SETTLEMENTS WHEN THERE ARE ALLEGATIONS OF SEXUAL MISCONDUCT. (SEE POLICY FOR DETAILS) THE POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED, THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

PROFESSIONAL LIABILITY COVERAGE A		LIMITS OF LIABILITY	PREMIUM
Liability Per Claim Limit		\$1,000,000.00	\$2,195.00
Liability Aggregate Limit		\$5,000,000.00	
SUPPLEMENTAL LIABILITY COVERAGE B		LIMITS OF LIABILITY	PREMIUM
Liability Aggregate Limit		\$5,000,000.00	
Liability Per Claim Limit		\$1,000,000.00	
ADDITIONAL COVERAGES C		LIMITS OF LIABILITY	PREMIUM
Deposition Expense		\$5,000 per deposition/\$35,000 per policy period	
Subpoena Expense		\$400.00 per policy period	
State License Board Investigation Defense		\$35,000.00 per policy period	
Emergency First Aid		\$15,000.00 per policy period	
Health Information - HIPAA		\$25,000.00 per policy period	
First Party Assault		\$15,000.00 per policy period	
Medical Payments		\$5,000 per incident/\$50,000 per policy period	
Wage Loss and Expense		\$1,000 per day/\$35,000 per policy period	

TOTAL PREMIUM FOR THIS COVERAGE PART: \$2,195.00

NOTICE: THIS POLICY IS ISSUED BY YOUR RISK RETENTION GROUP. YOUR RISK RETENTION GROUP MAY NOT BE SUBJECT TO ALL OF THE INSURANCE LAWS AND REGULATIONS OF YOUR STATE. STATE INSURANCE INSOLVENCY GUARANTY FUNDS ARE NOT AVAILABLE FOR YOUR RISK RETENTION GROUP.

ATTENTION: THE POLICY OF INSURANCE IDENTIFIED ABOVE HAS BEEN ISSUED TO THE NAMED INSURED FOR THE POLICY PERIOD INDICATED. ALL INSURED ARE SUBJECT TO THE LIMITS OF LIABILITY THAT ARE APPLICABLE TO THE POLICY. THE LIMITS OF LIABILITY MAY NOT BE STACKED TO INCREASE THE AMOUNT WE WILL PAY FOR ANY CLAIM. THE AGGREGATE LIMIT MAY HAVE BEEN REDUCED BY PAID CLAIMS. **Regarding Cancellation:** Should the policy be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions to the Named Insured.

Authorized Representative:



Tony Benedetto

Brokered and Administered by:



NASW RRG Plan Administrator
1200 E. Glen Avenue
Peoria Heights, IL 61616-5348
License: CA# 0F76076, AR# 1322

The NASW RRG Inc. supports this policy with its full faith, credit and assets.

This policy is reinsured by Swiss Re America.



10.0 EXCEPTIONS, OBJECTIONS, & REQUESTED CHANGES

7.11 Exceptions, Objections and Requested Changes:

HNH has no exceptions, objections, or changes to the County's sample contract.