SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

322



FROM: Department of Public Health

SUBJECT: Ratify the Subrecipient Agreement Number 754-5320-71209-13 with the California Family Health Council, Inc. (CFHC) and the County of Riverside, Department of Public Health, Family Planning Program.

	RECOMMENDED	MOTION: That the Board of	Supervisors:		
Concurrentae	1) Ratify the Agree Riverside, Departr December 31, 201	ement between the California nent of Public Health in the a 13; and	Family Health Cour mount of \$447,568	ncil, Inc. and the County of or the period of January 1	f I, 2013 to
	2) Authorize the C and	hairperson to sign three (3) o	riginals of said Agre	ement on behalf of the Co	ounty;
anDepartments	(RECOMMENDED	O MOTION Continued on Pag	e 2)	`>	
Mark Seiler, Assistant Director		ROCEDURES APPROVED GULO, CPA, AUDITOR-CONTROLLER 1040 - 1813 te Rose	Jusan D. A Susan D. Harringto	n, Director of Public Health	
Sec	FINIANIOIAI	Current F.Y. Total Cost:	\$ 223,748	In Current Year Budget:	Ye
F.	FINANCIAL DATA	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	N
Seile		Annual Net County Cost:	\$ 0	For Fiscal Year:	12/13
当	SOURCE OF FUN	NDS: 100% Federal Funding		Positions To B Deleted Per A-3	
S				Requires 4/5 Vo	
	C.E.O. RECOMM	ENDATION: AF	PROVE		
□ Policy		e Office Signature	Debra Cournoye	ager	
Consent					
Per Exec. Ofc.:	S	13 168 53 bW/S: 58			
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Dep't Recomm.:
Per Exec. Ofc.:

Policy

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Form 11

Subject: Ratify the Subrecipient Agreement Number 754-5320-71209-13 with the California Family Health Council, Inc. (CFHC) and the County of Riverside, Department of Public Health, Family Planning Program
Page 2

RECOMMENDED MOTION: (Continued)

3) Authorize the Purchasing Agent to sign subsequent amendments to Subrecipient Agreement Number 754-5320-71209-13 that do not change the substantive terms of the agreement from January 1, 2013 through December 31, 2013 not to exceed the Board-approved amount of \$447,568.

BACKGROUND:

The California Family Health Council, Inc. is contracted by the Federal Government to administer Title X Family Planning funds in California. They have renewed the agreement with the County of Riverside, Department of Public Health's Family Planning Program in the amount of \$447,568 for basic contraceptive services and teen pregnancy prevention outreach programs. The Family Planning Program provides reproductive health education to the community through collaborations with the Family Care Centers, the Women, Infants and Children (WIC) Program, schools and other community partners. The program also provides referrals to the Family Care Centers for reproductive health exams and contraceptive services.

In compliance with Section 1008 of the Public Health Services Act, 42 CFR 59.5 (a) (5) and Federal Register / Vol. 65 No. 128, the Family Planning Program does not promote or provide abortion as a method of family planning.

Funds will be distributed as follows for County Fiscal Year:

a) FY12/13 – for period of January 1, 2013 – June 30, 2013	\$223,784
b) FY13/14 – for period of July 1, 2013 to December 31, 2013	\$223,784
Total Award	\$447,568

Pursuant to Board Policy A-30, the positions funded by this grant will be eliminated should the funding be discontinued.

SUBRECIPIENT AGREEMENT AGREEMENT NUMBER 754-5320-71209-13

This Subrecipient Agreement, also known as the Delegate Agency Agreement ("the Agreement") is hereby entered into by and between the California Family Health Council ("CFHC"), and County of Riverside Department of Public Health ("Subrecipient") (individually "the Party" and collectively "the Parties"), to set forth the objectives, understandings, and agreements between the Parties in connection with the subaward of Title X grant funds as described herein.

WHEREAS, CFHC has received a grant (the "Grant") pursuant to Title X of the Public Health Services Act ("PHS"), CFDA #93.217, for the purpose of providing comprehensive sexual and reproductive health services, including family planning services; and

WHEREAS, CFHC is authorized by the U.S. Department of Health and Human Services ("DHHS"), Office of Population Affairs ("OPA"), and desires to execute an agreement with Subrecipient to support the provision of Title X services to residents of Subrecipient's geographic area; and

WHEREAS, Subrecipient is appropriately licensed and qualified and desires to enter into this Agreement with CFHC and agrees to deliver the services described herein in accordance with the terms and conditions set forth below;

NOW THEREFORE, in consideration of the mutual promises and covenants herein contained and intending to be legally bound hereby, CFHC and Subrecipient agree as follows:

ARTICLE I: TYPE OF AGREEMENT

This Agreement is a subaward of federal funds awarded by CFHC to Subrecipient. It is a cost-reimbursement agreement that will pay Subrecipient for allowable costs as provided for in the applicable cost principles issued by the Office of Management and Budget ("OMB"): 2 C.F.R. part 230, "Cost Principles for Non-Profit Organizations" (formerly OMB Circular A-122), 2 C.F.R. part 225, "Cost Principles for State, Local, and Indian Tribal Governments" (formerly OMB Circular A-87), and 2 C.F.R. part 220, "Cost Principles for Educational Institutions" (formerly OMB Circular A-21).

ARTICLE II: SCOPE OF WORK

A. Scope of Services.

1. Subrecipient shall, in a manner satisfactory to CFHC, make available to all individuals the services provided under the Title X program ("Clients"), including comprehensive sexual and reproductive services, except for abortion, and such other services as are reflected in the Scope of Work, attached hereto and incorporated by reference herein as

Attachment A (the "Family Planning Services").

2. Subrecipient shall establish and implement policies and procedures governing personnel, financial management, and programmatic management, as specified more fully in 45 C.F.R. Part 74 or 45 C.F.R. Part 92, as applicable. Such policies and procedures shall be consistent with: (i) CFHC's Title X grant, as approved by DHHS; (ii) requirements of the Title X statute and implementing regulations, as well as all requirements of all Title X related laws and regulations; (iii) other applicable federal and State laws and regulations, including procurement laws and OMB Circulars; (iv) DHHS and/or OPA Program Guidance, Program Instructions; and (v) CFHC's policies and procedures applicable to Title X.

B. Program Modification.

Subrecipient may make changes to staff and location of its Family Planning services, provided that Subrecipient shall notify CFHC in writing within ten (10) working days of any such change in key staff or any address change or closure of a Title X clinic site location.

ARTICLE III: FINANCIAL PROVISIONS

A. Amount of Award.

In consideration of the services to be delivered by as described in Article II herein, CFHC shall pay Subrecipient a total amount not to exceed \$447,568 (the "Title X Award") during the term of this Agreement, provided that funds are available for this purpose under the Grant. Subrecipient is only entitled to receive reimbursement for its actual, allowable costs and is not entitled to any payments over and above its actual, allowable cost of operating the Title X program provided for herein._

B. Financial Systems.

Subrecipient shall maintain financial systems in accordance with United States Generally Accepted Accounting Principles ("U.S. GAAP") and, as applicable, 45 C.F.R. § 74.20 et seq. or 45 C.F.R. § 92.20 et seq.

C. Budget.

- 1. The approved annual budget plan and cost allocation methodology statement is attached hereto and incorporated by reference herein as Attachment B: Approved Budget and Cost Allocation Methodology Statement.
- 2. Subrecipient may make modifications to the budget included in Attachment B, provided that such modification does not require prior approval pursuant to 45 C.F.R. § 74.25 or 45 C.F.R. § 92.25, as applicable, and that any request for modification is submitted to CFHC by January 11,2014. Approval of a requested modification does not alter or extend the reporting

due dates as set forth in Attachment C: Subrecipient Reporting Requirements, attached hereto and incorporated by reference herein.

3. If Subrecipient has an approved DHHS negotiated indirect cost rate, Subrecipient may use such rate only after it has provided current documentation of the approved rate to CFHC. If Subrecipient uses a non-approved indirect cost rate, Subrecipient will be limited to the lesser of its indirect cost rate or 21.2% of total direct costs less capital equipment, subcontracts, and patient care.

D. Non-Federal Share.

Pursuant to 42 C.F.R. § 59.7, Subrecipient must provide non-federal matching share in the amount of not less than ten percent (10%) of the Title X Award ("Matching Requirement").

E. <u>Cost Allowability</u>.

- 1. Subrecipient expressly understands and agrees that the allowability of costs shall be determined in accordance with 2 C.F.R. parts 230, 225, or 220, as applicable. Subrecipient is liable for payment of any costs incurred by Subrecipient under this Agreement that may be disallowed by CFHC, DHHS, or other appropriate federal officials. As such, Subrecipient shall be obliged to remit to CFHC any funded amounts which were paid pursuant to this Article III and used to cover disallowed costs. If Subrecipient fails to remit such amounts within thirty (30) days, CFHC may offset such amount against future funding obligations by CFHC or take any other action available to it under law to reclaim such amount.
- 2. CFHC agrees that, in the event that DHHS disallows any cost incurred by Subrecipient under this Agreement, CFHC will, at Subrecipient's request and subject to CFHC's determination that the appeal will not be frivolous and will not be contrary to the best interests of CFHC, pursue appropriate administrative appeals to DHHS, provided Subrecipient agrees to pay all costs associated with the appeal and will promptly pay into an escrow account such amount as CFHC deems appropriate to cover the disallowed costs and appeal costs, including attorney's fees and interest penalties. Subrecipient agrees to cooperate fully with CFHC in providing documentation and other supporting material relevant to such a determination. If applicable, payment of questioned costs may be withheld by CFHC until the questions are resolved; however, CFHC shall issue payment of all otherwise properly documented and allowable costs not in question in accordance with Article III, Section F of this Agreement.

F. Payment.

1. Subrecipient shall furnish CFHC with reports of its costs by the 25th of the month following the end of each calendar quarter. If the 25th falls on a weekend or holiday, then the report will be due on the next business day.

- 2. Payment will be made based on Subrecipient's timely submission of financial and performance reports required herein, and approval by CFHC of such reports. Accordingly, within thirty (30) days of receipt and approval of such report, CFHC shall reimburse Subrecipient for properly documented and allowable costs under this Agreement.
- 3. This Agreement is subject to the availability of federal grant funds to CFHC. CFHC shall promptly notify Subrecipient, in writing, of any modification, payments, delays, or cancellations of said DHHS grant. The Title X Award may be reduced if DHHS reduces the Grant for any reason.
- 4. Notwithstanding any other provision of this Agreement, Subrecipient understands and agrees that should Subrecipient fail to expend its Title X Award, CFHC reserves the right to reallocate the Title X Award to ensure that funds are expended efficiently. CFHC shall review the Subrecipient's use of the Title X Award at the beginning of the fourth quarter of the Term, and upon determination that the Title X Award is not being expended efficiently or will not be expended fully during the Agreement's term, CFHC may, in its sole discretion, reallocate all or a portion of Subrecipient's Title X Award to another organization. Subrecipient understands and agrees that it may not carry over any non-obligated portion of its Title X Award to the next grant year.

ARTICLE IV: TECHNICAL ASSISTANCE

CFHC shall provide Subrecipient with support and technical assistance that CFHC, in its sole discretion, deems necessary and appropriate, regarding Subrecipient's responsibilities set forth in this Agreement. The provision of any technical assistance does not, however, relieve or reduce Subrecipient's responsibility for compliance with any of the terms and conditions of this Agreement. In addition, Subrecipient shall participate in CFHC's annual Title X Business Meeting and any other Title X-related trainings, quality assurance initiatives and service enhancements developed by DHHS, OPA, and/or CFHC, as required by CFHC.

ARTICLE V: TERM

This Agreement shall be in effect from January 01, 2013 through December 31, 2013, or unless the Agreement is terminated or suspended at an earlier date in accordance with Article X of this Agreement.

ARTICLE VI: GENERAL PROGRAM REPORTING AND OTHER REQUIREMENTS

A. Reporting.

1. Subrecipient shall maintain and furnish to CFHC financial and programmatic information and reports (in such forms as CFHC may reasonably prescribe) as required under 45 C.F.R. § 74.50 *et seq.* or 45 C.F.R. § 92.40 *et seq.*, as applicable, and set forth herein in Attachment C.

- 2. Subrecipient shall cooperate with and, as reasonably requested, assist CFHC in the development and preparation of those portions of the Federal Financial Report ("FFR"), as well as other required reports, which pertain to Subrecipient's activities under this Agreement. Such reports shall be prepared according to the timeframes established by CFHC and shall be reviewed and revised in accordance with the directives of CFHC. Such reports shall be approved, signed and submitted to DHHS, or the appropriate authorities, by CFHC.
- 3. Notwithstanding Article III, in the event that Subrecipient fails to deliver the required reports at the appropriate times, or otherwise comply with the terms of this Agreement, it is agreed that CFHC may, upon reasonable notice, suspend reimbursements to Subrecipient until such reports' are delivered to and approved by CFHC or Subrecipient fully complies with the terms of this Agreement.

B. Record Keeping and Access.

- 1. Subrecipient shall maintain financial records, supporting documents, statistical records, and all other books, documents, papers or other records pertinent to this Agreement for a period of three (3) years from the date of CFHC's submission of the annual financial report covering the funds awarded hereunder, or for such other period as may be specifically required by 45 C.F.R. § 74.53 or 45 C.F.R. § 92.42, as applicable. If an audit, litigation, or other action involving the records is started before the end of the three (3) year period, Subrecipient agrees to maintain the records until the end of the three (3) year period or until the audit, litigation, or other action is completed, whichever is later. Client medical records must be retained in accordance with state and federal regulations. Records for real property and equipment acquired with Title X funds shall be retained for three (3) years after final disposition.
- 2. Subrecipient shall make available to CFHC, DHHS, the Comptroller General, or any of their duly authorized representatives, upon appropriate notice, such books, records, reports, documents, and papers that are pertinent to the award for audit, examination, excerpt, transcription, and copy purposes, for as long as such records, reports, books, documents, and papers are retained. This right also includes timely and reasonable access to Subrecipient's facility and to Subrecipient's personnel for the purpose of interview and discussion related to such documents. Subrecipient shall, upon request, transfer certain records to the custody of CFHC or DHHS.

C. Monitoring/Oversight/Assessment.

1. Subrecipient agrees to permit CFHC and/or DHHS to evaluate, through inspection or other means, the quality, appropriateness, and timeliness of services delivered under this Agreement and to assess Subrecipient's compliance with applicable legal and programmatic requirements. If CFHC identifies and notifies Subrecipient of any instances of Subrecipient non-compliance with the terms of this Agreement, or otherwise in the operation of Subrecipient's Program, CFHC shall notify Subrecipient of such deficiencies, and may ask for a corrective

action plan. CFHC, in its sole discretion, may offer to provide technical assistance to Subrecipient in order to correct or eliminate such deficiencies. Additionally, CFHC shall grant Subrecipient a reasonable time period to correct or eliminate such deficiencies; provided that in no case shall the time allowed exceed six (6) months from the date of notice of the deficiency.

2. Subrecipient agrees to permit CFHC and DHHS to evaluate, through inspection or other means, the quality, appropriateness, and timeliness of services delivered pursuant to this Agreement. CFHC may, at its discretion, conduct periodic, announced or unannounced monitoring visits to ensure program and administrative compliance with Title X goals and the scope of work under this Agreement, and to ensure compliance with all applicable requirements.

D. Audit.

- 1. Annually, at the end of each Subrecipient fiscal year, Subrecipient shall have an external audit (the "Audit") performed, including of its Title X Award, in accordance with the provisions of OMB Circular A-133, if applicable, and U.S. GAAP.
- 2. Upon receipt of the report resulting from the Audit, Subrecipient shall submit to CFHC (and to any other agency, as directed by CFHC) a copy of such report. In addition, if necessary, Subrecipient shall provide to CFHC any corrective action plan resulting from the findings of the audit within the earlier of thirty (30) days of Subrecipient's receipt of the audit report(s), or nine (9) months after the end of the audit period. CFHC shall review and evaluate the audit results, including Subrecipient's corrective action plan, where such a plan is necessary. CFHC reserves the right to request additional information regarding Subrecipient's corrective action plan. Subrecipient agrees to promptly implement such corrective action plan, including any recommendations made by CFHC.

ARTICLE VII: CALIFORNIA STATE BILLING REQUIREMENTS

A. Required Billing Numbers.

Subrecipient must have all National Provider Identification ("NPI") numbers necessary to bill Family Planning Services it will provide pursuant to this Agreement. Subrecipient is required to identify both Medi-Cal and Family PACT eligible patients and bill services for these patients to the Medi-Cal and Family PACT programs, as applicable.

B. Medications Billed to Third Parties.

Funding provided by this contract may not be allocated for any medications that are also billed to a third party.

ARTICLE VIII: CENTRALIZED DATA SYSTEM

A. CFHC's Data System.

CFHC maintains a Centralized Data System ("CDS") to collect and securely store data regarding services provided to Title X Clients at clinic sites throughout California. CFHC shall maintain the CDS, monitor the quality of agency data submission, develop action plans ("CDS Action Plans"), provide data management services, and provide ongoing CDS-related support to Subrecipients.

B. Subrecipient Responsibilities for CDS.

Subrecipient is responsible for:

- 1. Completion of all steps in any CDS Action Plan within a mutually agreed timeframe tailored to the Subrecipient's capabilities and resources. The CDS Action Plan may require the modification of Subrecipient's registration forms, data entry screens, and or billing instruments. The CDS Action Plan may also require modifications to the Subrecipient's payment management system ("PMS") or electronic health records ("EHR") system to identify client visit records ("CVR") of eligible Title X clients and export files in CDS-compatible formats, as well as completing Software Release Forms to enable CDS staff to work directly with agency software vendors, as applicable;
- 2. Submission by the 25th of the month of CVR export files, including error corrections;
- 3. Notification within thirty (30) days to CFHC if the CDS audit report is inconsistent with the export file;
- 4. Notification within thirty (30) days to CFHC of the addition, deletion, or modification of any data codes included in the agency's submission;
- 5. Notification to CFHC of clinic site closure(s) or changes in key personnel in accordance with Article II, Section B of this Agreement.
- 6. Manual updates of Semi-Annual Progress Report tables with any aggregate data not submitted through CDS.

ARTICLE IX: OWNERSHIP OF PROPERTY ACQUIRED UNDER THIS AGREEMENT

A. Equipment and Supplies.

1. Subrecipient's purchase, use and disposition of property, equipment and supplies

is governed by, 45 C.F.R. § 74.33 et seq., 45 C.F.R. § 92.32 et seq., as applicable, and related DHHS policies.

- 2. Subrecipient shall maintain adequate property records, as well as effective inventory, control, and maintenance procedures. Subrecipient will be responsible for replacing or repairing equipment for which it is accountable if lost, damaged or destroyed due to negligence on the part of the Subrecipient, or failure to secure appropriate insurance, or noncompliance with property management regulations or instructions of CFHC or its funding source. For the purposes of this Agreement, "equipment" is defined as any item purchased with Title X Award funds with a useful life of more than one (1) year with a per unit acquisition cost of \$5000 or more, unless Subrecipient uses a lower limit. Subrecipient shall submit a list with the required elements from 45 C.F.R. Part 74 or Part 92, as applicable, of all such equipment to CFHC forty-five (45) days after the Agreement ends (the "Equipment Inventory List").
- 3. CFHC reserves the right to require transfer of property acquired with funds awarded under this Agreement as provided in 45 C.F.R. § 74.34 and 45 C.F.R. § 92.32.

B. <u>Copyrightable Material</u>.

- 1. If any copyrightable material is developed in the course of or under this Agreement, CFHC and DHHS shall have a royalty-free, non-exclusive and irrevocable right to reproduce, publish, and authorize others to reproduce or publish, or otherwise use such material.
- 2. Subrecipient must obtain CFHC's prior written approval to copyright any such material or to permit any third party to do so.
- 3. Subrecipient must appropriately acknowledge federal grant support (i.e., from CFHC or DHHS) in any such publication.
- 4. CFHC and the funding source reserve the right to conduct its own examination of materials produced under this contract. If, upon examination any materials are deemed inappropriate, CFHC reserves the right to recall these materials from public distribution.

ARTICLE X: SUSPENSION AND TERMINATION

A. Suspension.

Suspension means any action by CFHC that temporarily suspends payments under this Agreement. CFHC may, after providing notice to Subrecipient, suspend this Agreement for failure to comply with reporting requirements set forth in Article VI for a period not to exceed thirty (30) days, pending corrective action by Subrecipient.

B. Termination Without Cause.

Either Party may terminate this Agreement for any reason by giving the other party at least thirty

(30) days' written notice, unless otherwise required herein.

C. Termination by CFHC.

- 1. CFHC may, by giving written notice to Subrecipient specifying the effective date, terminate this Agreement, in whole or in part, for cause. The term "cause" for termination shall include, but not be limited to:
 - a. Failure in any material respect, for any reason, of Subrecipient to fulfill, in a timely and proper manner, its obligations under the Agreement, including non-compliance with the approved Family Planning Services and applicable laws, regulations, policies and procedures, including reporting requirements, provided that Subrecipient shall have thirty (30) days to correct such failure (which period may be extended in the sole discretion of CFHC) after receiving notice of the failure thereof from CFHC;
 - b. Submission by Subrecipient to CFHC of reports that are incorrect or incomplete in any material respect, provided that Subrecipient shall have fifteen (15) days to correct such submission (which period may be extended in the sole discretion of CFHC) after receiving notice of the defect therein from CFHC;
 - c. Improper use of Title X-obligated funds, or CFHC's reasonable belief that the Title X Award paid hereunder has been or will be misappropriated, or used for the purpose of providing abortions, in which case this Agreement shall terminate immediately;
 - d. Suspension or termination of the Grant under which this Agreement is made, or a portion thereof;
 - e. The occurrence of, or criminal indictment for, any act or omission by Subrecipient that is reasonably determined by CFHC to be materially detrimental to the reputation, operation or activities of CFHC;
 - f. The loss of required insurance by Subrecipient;
 - g. The loss or suspension of any license or other authorization to do business that is necessary for Subrecipient to perform services under this Agreement;
 - h. The omission or commission of any act or conduct for which a license or authorization is necessary for Subrecipient to perform its duties under this Agreement may be revoked or suspended (regardless of whether such suspension or revocation actually occurs);

- i. Any material change in the legal or financial condition of Subrecipient that reasonably indicates that Subrecipient will be unable to perform as required under this Agreement;
- i. The suspension or debarment of Subrecipient; or
- k. The good faith determination by CFHC that the health, welfare or safety of clients receiving care provided by Subrecipient is jeopardized by the continuation of the Agreement.

D. Termination by Subrecipient.

- 1. Subrecipient may terminate this Agreement for cause by giving written notice to CFHC specifying the effective date. The term "cause" for termination shall include, but not be limited to:
 - a. Failure of CFHC to provide payment in accordance with Article III, provided that CFHC shall have fifteen (15) days to correct such breach (which period may be extended in the sole discretion of Subrecipient), and provided that all funds provided to Subrecipient pursuant to Article III have been exhausted; or
 - b. Application of special terms and conditions to the Grant by DHHS or CFHC, with which Subrecipient is unable or unwilling to comply.

E. Termination Procedures.

- 1. Should this Agreement be terminated before the end of the Term by either party, Subrecipient agrees to comply with the following closeout procedures:
 - a. Subrecipient shall submit all financial, performance and other reports as required by the terms and conditions of the Agreement. At its sole discretion, CFHC may approve or deny extensions when requested by the Subrecipient.
 - b. Unless an extension is granted, Subrecipient shall liquidate all obligations incurred pursuant to this Agreement no later than ninety (90) calendar days after the funding period or date of completion as specified in the Agreement.
 - c. CFHC will make payments for allowable costs incurred prior to termination only after all required documentation has been received and approved.
- 2. In the event of termination of this Agreement, either in whole or in part, all property, finished or unfinished documents, data, studies, and/or reports purchased or prepared by the Subrecipient under this Agreement shall, at the option of CFHC, become its property or be

disposed of and Subrecipient shall be entitled to compensation for any unreimbursed expenses necessarily incurred in satisfactory performance of this contract. Notwithstanding the above, Subrecipient shall not be relieved of liability to CFHC for damages sustained by CFHC by virtue of any breach of this Agreement by Subrecipient, and CFHC may withhold any reimbursement to Subrecipient for the purpose of offset until such time as the exact amount of damages due CFHC from Subrecipient is agreed upon or otherwise determined.

3. CFHC, by the rules and regulations set by its funding source, reserves the right to determine ownership of any and all equipment purchased by Subrecipient during the course of this Agreement. Ownership will be determined after Subrecipient has submitted an Equipment Inventory in accordance with Article IX of this Agreement.

ARTICLE XI: RELATIONSHIP; INDEMNIFICATION

A. Relationship of Parties.

- 1. During the term of this Agreement, CFHC and Subrecipient shall remain separate and independent entities. None of the provisions of this Agreement are intended to create, nor shall be deemed or construed to create any relationship between or among the Parties other than that of independent entities. Except as otherwise provided, neither of the Parties shall be construed to be the agent, partner, co-venturer, employee or representative of the other Party.
- 2. Subrecipient is an independent contractor and, therefore, is not covered by, or entitled to, any insurance (including Worker's Compensation coverage for Subrecipient's employees) or other benefits maintained by CFHC for its officers, agents, or employees.

B. Indemnification.

- 1. Subrecipient hereby agrees to indemnify, defend and hold harmless CFHC, its affiliates, officers, directors, employees and agents against any and all liability, loss, damages or expenses that CFHC, its affiliates, officers, directors, employees or agents may hereinafter sustain, incur or be required to pay (including court costs and attorney fees) arising from the acts or omissions of Subrecipient, its officers, employees, agents or representatives in connection with the performance of or failure to perform its obligations under this Agreement, except to the extent caused by or resulting from the negligence or willful misconduct of CFHC.
- 2. CFHC hereby agrees to indemnify, defend and hold harmless Subrecipient, its affiliates, officers, directors, employees and agents against any and all liability, loss, damage or expense that Subrecipient, its affiliates, officers, directors, employees or agents may hereinafter sustain, incur or be required to pay (including court costs and attorneys' fees) arising from the acts or omissions of Grantee, its officers, employees, agents or representatives in connection with the performance or failure to perform its obligations under this Agreement, except to the extent caused by or resulting from the negligence or willful misconduct of Subrecipient.

3. The obligations of this Section shall survive termination of this Agreement.

ARTICLE XII: DISPUTE RESOLUTION

The Parties shall first attempt to resolve any dispute arising under this Agreement by informal discussions between the Parties, subject to good cause exceptions, including, but not limited to, disputes determined by either Party to require immediate relief (*i.e.*, circumstances which may result in a misappropriation of Title X funds). Any dispute that has not been resolved by informal discussions between the Parties within a reasonable period of time after the commencement of such discussion (not to exceed thirty (30) days), may be resolved by any means available.

ARTICLE XIII: INSURANCE

A. Subrecipient Insurance Requirements.

- 1. Subrecipient agrees to secure and maintain, or cause to be secured and maintained, during the Term of this Agreement and as appropriate, the insurance coverage set forth as follows:
 - a. General Liability: coverage of at least \$1,000,000 per occurrence and \$3,000,000 annual aggregate against general liability endorsed for premises-operations, products/completed operations, contractual, property damage, and personal injury liability;
 - b. Workers' Compensation: in accordance with applicable law;
 - c. <u>Professional Liability</u>: coverage of at least \$1,000,000 against professional liabilities for itself and its employed health care practitioners which may occur as a result of services provided by Subrecipient's health care practitioners; and
 - d. <u>Fidelity</u>: coverage adequate to protect against loss due to employee dishonesty.

B. Additional Insurance Provisions.

- 1. CFHC will be named as a co-insured or additional insured on all of Subrecipient's insurance policies showing the above coverage amounts and effective dates.
- 2. If Subrecipient's professional liability insurance is written in a "claims made", as opposed to an "occurrence" form, Subrecipient agrees to purchase or otherwise make arrangements for a "tail" or extended disclosure period policy for all activities so insured during the course of this Agreement.

3. Within ten (10) days after execution of this Agreement, Subrecipient will provide CFHC with certificates of insurance for the above required coverages. Subrecipient shall promptly provide CFHC with written notice of any ineligibility determination, suspension, revocation or other action or change relevant to the insurance requirements set forth above. Subrecipient may provide all or a portion of the required coverage through programs of self-insurance as allowed by California law.

ARTICLE XIV: CONFIDENTIALITY

In accordance with prevailing federal and state of California confidentiality statutes, regulations, customs and usage, canons, or code of professional ethics, the Parties (and their employees, agents, and contractors) shall not disclose, except to each other, any proprietary information, professional secrets or other information, records, data and data elements (including, but not limited to, protected health information as defined by the Health Insurance Portability and Accountability Act of 1996 ("HIPAA")) collected and maintained in the course of carrying out responsibilities under this Agreement, unless either Party receives prior written authorization to do so from the other Party or as authorized or required by law; provided that, nothing contained herein shall be construed to prohibit CFHC or DHHS from obtaining, reviewing, and auditing any information, record, data, and data elements to which it is lawfully entitled. All confidential obligations contained herein (including those pertaining to information transmitted orally) shall survive termination of this Agreement.

ARTICLE XV: CONFLICT OF INTEREST

A. Written Conflict of Interest Policy.

Subrecipient shall maintain a written conflict of interest policy that includes provisions to ensure that no employee, officer, or agent shall participate in the administration of the Title X Award if a real or apparent conflict of interest would be involved. Such a conflict would arise when the employee, consultant, or member of Subrecipient's Board of Directors uses his/her position for purposes that are, or give the appearance of being, motivated by the possibility of private gain for himself, herself, or others, such as those with whom they have family, business, or personal ties.

B. Subrecipient Employees.

Subrecipient shall ensure that no employee shall be paid as a staff member and a consultant.

ARTICLE XVI: GOVERNING LAWS

A. <u>Grant-Related Laws, Regulations, and Policies</u>.

This Agreement shall be governed and construed in accordance with applicable federal and state laws, regulations, and policies, including, but not limited to:

- 1. The Title X Statute (42 U.S.C. § 300 et seq., as amended);
- 2. The Title X Regulations (42 C.F.R. part 59, Subpart A);
- 3. The terms and conditions of the Grant, as well as relevant Program Guidelines and Program Instructions issued by DHHS and OPA;
 - 4. The Transparency Act (2 C.F.R. Part 170);
- 5. 45 C.F.R. Part 74 or 45 C.F.R. Part 92 (DHHS Grants Administration regulations), as applicable; and
- 6. 2 C.F.R. part 230, "Cost Principles for Non-Profit Organizations" (formerly OMB Circular A-122), 2 C.F.R. part 225, "Cost Principles for State, Local, and Indian Tribal Governments" (formerly OMB Circular A-87), and 2 C.F.R. part 220, "Cost Principles for Educational Institutions" (formerly OMB Circular A-21), as applicable.

B. Compliance with other Applicable Law.

In connection with the provision of services pursuant to this Agreement, Subrecipient agrees:

- 1. to comply with the Civil Rights Act of 1964 and all other federal, state, or local laws, rules, and orders prohibiting discrimination. Consistent with the foregoing, Subrecipient agrees to comply with Executive Order 11246, entitled "Equal Employment Opportunity," as amended by Executive Order 11375, and as supplemented in U.S. Department of Labor regulations (42 C.F.R. Part 60);
- 2. if this Agreement is for more than \$100,000, to comply with applicable standards, orders, or regulations issued pursuant to the Clean Air Act of 1970 (42 U.S.C. § 7401 *et. seq.*) and the Federal Water Pollution Control Act (33 U.S.C. § 1251 *et seq.*), as amended;
- 3. if this Agreement is for more than \$100,000, to comply with the Sections 102 of the Contract Work Hours and Safety Standards Act (40 U.S.C. §327 *et seq.*), as amended; and
- 4. to make positive efforts to utilize small businesses, minority-owned firms and women's business enterprises in connection with any subcontracted work performed hereunder,

whenever possible.

C. <u>Compliance with State and Local Laws</u>.

Subrecipient shall comply with all applicable laws, ordinances, and codes of the state of California and local governments in the performance of the Agreement, including all licensing standards and all applicable professional standards.

ARTICLE XVII: CERTIFICATIONS AND ACKNOWLEDGEMENTS

A. Certifications.

Subrecipient hereby certifies:

- 1. That neither it, nor any of its principal employees, has been debarred, excluded or suspended from participation in Medicare, Medicaid or in federally-funded contracts, in accordance with Executive Order 12549 and Executive Order 12689, entitled "Debarment and Suspension," and any applicable implementing regulations;
- 2. That it has not and will not use federal funds to pay any person or organization for influencing or attempting to influence an officer or employee of any federal agency, a member of Congress, or an employee of a member of Congress in connection with obtaining any federal contract, grant, or any other award covered by 31 U.S.C. § 1342, and that it will disclose any lobbying with non-federal funds that takes place in connection with obtaining any federal contract, grant, or other award;
- 3. That its employees providing Title X Family Planning Services shall not be exempt from any State law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest, and that it will comply with all federal anti-trafficking laws, including the Trafficking Victims Protection Act of 2000 (Pub. L. 106-586), as amended, and 22 U.S.C. § 7104;
- 4. That it will encourage family participation in the decision of minors to seek Family Planning Services and that it provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities;
- 5. That no Title X Award funds shall be used to perform abortions or to supplant any funds used to perform abortions;
- 6. That if Subrecipient also provides abortions, it has implemented CFHC's policy and procedure ("Separation Policy"), which is attached hereto as Attachment D to keep all funds provided under the Title X Award wholly separate and apart from any funds used to provide abortions and to prevent any commingling of such funds; and

7. That it does not, and will not, during the term of this Agreement, advertise, advocate, or promote abortion as a method of family planning, or receive any fee or any other consideration as payment for referrals for abortion services.

B. Acknowledgments.

Subrecipient hereby acknowledges:

- 1. That any violation of certifications five (5), six (6), and/or seven (7) of this Article's Section A above will result in immediate termination of this Agreement by CFHC; and
- 2. That this Agreement is nonexclusive in nature, and CFHC retains the authority to contract with other parties for the delivery of Family Planning Services in Subrecipient's geographic area.

ARTICLE XVIII: NOTICES

All notices required to be given under this Agreement shall be in writing, and delivered in person or sent by facsimile, overnight courier or certified mail, return receipt requested, postage prepaid, or electronic mail to the following addresses:

CFHC:

California Family Health Council

Attn: Richard Reetz

3600 Wilshire Blvd., Suite 600

Los Angeles, CA 90010

Subrecipient:

County of Riverside Department of Public Health

Attn: Dr. Cameron Kaiser 4065 County Circle Drive

Riverside, CA 92503

The foregoing addresses may be changed and/or additional persons may be added thereto by notifying the other Parties hereto in writing and in the manner hereinafter set forth.

ARTICLE XIX: MISCELLANEOUS

A. <u>Severability</u>. The provisions of this Agreement are not severable. In the event that any one or more provisions of this Agreement are deemed null, void, illegal or unenforceable, the Parties shall renegotiate or terminate the remaining provisions of this Agreement unless the Parties mutually agree in writing that the invalidity, illegality or unenforceability of said provision does not materially change the obligations of the Parties under this Agreement. In the event that the Parties reach such an agreement, this Agreement shall be construed in all respects

as if such invalid or unenforceable provisions have been omitted.

- B. <u>Third Party Beneficiaries</u>. This Agreement was created by the Parties solely for their benefit and is not intended to confer upon any person or entity other than the Parties any rights or remedies hereunder.
- C. <u>Assignment</u>. The rights, obligations and responsibilities established herein shall not be assigned, subcontracted, or transferred by either Party without the express prior written consent of the other Party.
- D. <u>Entire Agreement</u>. This Agreement represents the complete understanding of the Parties with regard to the subject matter. This Agreement supersedes any other agreements or understandings between the Parties, whether oral or written, relating to the subject matter of this Agreement. No such other agreements or understandings may be enforced by either Party or employed for interpretation purposes in any dispute involving this Agreement.
- E. <u>Amendments</u>. Any amendment to this Agreement shall be in writing and signed by both Parties. Except for the specific provision of this Agreement which thereby may be amended, this Agreement shall remain in full force and effect after such amendment.
- F. <u>Headings and Construction</u>. All headings contained in this Agreement are for reference purposes only and are not intended to affect in any way the meaning or interpretation of this Agreement.
- G. <u>Waiver</u>. Performance of any obligation required of a party hereunder may be waived only by a written waiver signed by the other party, which waiver shall be effective only with respect to the specific obligations described therein. The waiver of a breach of any provision shall not operate or be construed as a waiver of any subsequent breach.

IN WITNESS WHEREOF, the Parties have executed this Agreement:

California Family Health Council	County of Riverside Department of Public Health
Ву:	Dag
Print: Nina Clymer, RN, MBA	By: Print:
Title: Chief Operating Officer	Title: Chairman, Board of Supervisors
Date:	Date:
	ATTEST: Kecia Harper-Ihem, Clerk
	FORM APPROVED COUNTY COUNSEL 17

Attachment A: Scope of Work

Subrecipient shall provide the services required under this Agreement, in accordance with the following OPA Program Priorities for FY 2013:

- 1. Assuring the delivery of quality family planning and related preventive health services, where evidence exists that those services should lead to improvement in the overall health of individuals, with priority for services to individuals from low-income families. This includes ensuring that grantees have the capacity to train staff throughout their Title X projects, and that project staff have received training on Title X program requirements;
- 2. Expanding access to a broad range of acceptable and effective family planning methods and related preventive health services in accordance with Title X program requirements and nationally recognized standards of care. These services include, but are not limited to, natural family planning methods, infertility services, services for adolescents, breast and cervical cancer screening, and sexually transmitted disease (STD) and HIV prevention education, testing, and referral. The broad range of services does not include abortion as a method of family planning;
- 3. Emphasizing the importance of discussing a reproductive life plan with all family planning clients, and providing preconception health services as a part of family planning services, as appropriate;
- 4. Addressing the comprehensive family planning and other health needs of individuals, families, and communities through outreach to hard-to-reach and/or vulnerable populations, and partnering with other community-based health and social service providers that provide needed services; and
- 5. Identifying specific strategies for adapting delivery of family planning and reproductive health services to a changing health care environment including addressing provisions of the Affordable Care Act (ACA). This includes, but is not limited to, increasing the capacity of Title X service sites to utilize health information technologies that will enhance their ability to bill third party payers.

Specifically, the Subrecipient shall provide the services and items set forth herein:

		Sta	tement of Work (SOW)					
	Children Ver	Admir	nistrative Goal and Objectiv	es				
Administr	ative Goal:	A STATE OF THE PARTY OF THE PAR		m and its ability to meet the needs of the				
Objective 1		Planning services an	Implement or maintain a review process of all agency functions, in order to ensure high quality Family Planning services and compliance with all Title X Guidelines by December 31, 2014, as evidenced by completion of activities 1.A through 1.I.					
Number		Activity	Job Title	Evaluation				
1.A	procedures are	ninistrative policies and in place to facilitate ficient management and	Medical Director Family Planning Director Program Manager ClinicalServices Director	Policies and procedures maintained and reviewed at program evaluations. Desk audits determined by CFHC staff.				
1.B			Medical Director Family Planning Director Program Manager ClinicalServices Director	Meeting minutes maintained and reviewed at program evaluations and desk audits.				
1.C	feedback throug	ain annual systematic client Family Planning Director back through client satisfaction veys inclusive of all sites. Family Planning Director Program Manager ClinicalServices Director		Community needs assessment inclusive of the Family Planning Program maintained CNA is reviewed at program evaluations.				
1.D	needs assessment Family Planning basis (at least or	tain and update a community s assessment inclusive of the ly Planning Program on a periodic (at least once every 5 years) to e agency's role in the community. Family Planning Directly Program Manager Epidemiologist Epidemiologist		Community needs assessment inclusive of the Family Planning Program maintained. CNA is reviewed at program evaluations.				
1.E	The Title X Family Planning Program is implemented with input from individuals representative of served community and knowledgeable of community needs.		Family Planning Director Program Manager	Advisory Board meeting minutes reflect materials review, approval and maintained and reviewed at program evaluations and desk audits.				
1.F	Maintain and update current clinical and client education protocols which include but are not limited to: reproductive health care and appropriate primary care, disability, domestic violence, emergency care, pregnancy counseling and testing, birth control methods, STI/HIV and flu vaccinations.		Medical Director Family Planning Director Program Manager ClinicalServices Director	Protocols maintained and staff updates are reviewed at program evaluations and desk audits.				
1.G	with the following pressure, HIV p	edures for the ad referral of patients ag problems: high blood ositive, domestic bstance using/abusing.	Medical Director ClinicalServices Director	Protocols and referral policies maintained. Reviewed during program evaluations.				

1.Н	Improvement (CQI) System that will,			Director Manager ervices Director	Minutes of the Continuous Quality Improvement (CQI) medical team maintained. CQI is reviewed at program evaluations and desk audits.		
1.I	the Centralized	contract reporting and	Program 1 Epidemio		Centralized Data System (CDS) data submitted per the contract and/or agency action plan.		
		Cli	nical G	oal and Objectives			
Clinical	Goal:	Provide comprehens plan and space their			es to Title X clients of reproductive age to		
Objectiv	ve 1:			on and medical services to elig 3, as evidenced by completion	ible individuals per the Federal Poverty of activities 1A through 1H.		
Number	•	Activity	# of Clients	Job Title	Evaluation		
1. A	Document and of family planning	report the poverty status ing clients.	12000	Medical Director Program Manager ClinicalServices Director Epidemiologist	As documented in the Semi-Annual Progress Report (SPR) with sample data verified via chart audits at program evaluations.		
1. B	medical services	planning education, s and FDA approved athods, either on site or emale clients. CFHC Measure.	11000	Medical Director Program Manager ClinicalServices Director	As documented in the Semi-Annual Progress Report (SPR) with sample data verified via chart audits at program evaluations.		
1. C	medical services	planning education, s and FDA approved ethods, either on site or nale clients. CFHC Ieasure.	1000	Medical Director Program Manager ClinicalServices Director	As documented in the Semi-Annual Progress Report (SPR) with sample data verified via chart audits at program evaluations.		
1. D	80% of women years of age wit	nydia test to at least less than or equal to 25 hin a 12 month period. nance Measure.		Medical Director Program Manager ClinicalServices Director	As documented in the Semi-Annual Progress Report (SPR) with sample data verified via chart audits at program evaluations.		
1. E	finding on their	All female clients with an abnormal finding on their clinical breast exam should be followed for further evaluation.		Medical Director Program Manager ClinicalServices Director	As documented in the Semi-Annual Progress Report (SPR) with sample data verified via chart audits at program evaluations.		
1.F	clients with pos within 72 hours Upon notification	st attempt to notify all itive STD/HIV tests of receiving lab results. on, counsel client wup and treatment.		Medical Director Program Manager ClinicalServices Director	As documented in the Semi-Annual Progress Report (SPR) with sample data verified via chart audits and lab logs reviewed during program evaluations.		
1.G				Medical Director Program Manager ClinicalServices Director	As documented in the Semi-Annual Progress Report (SPR) with sample data verified via chart audits and lab logs reviewed during program evaluations.		

1.H	Incorporate routine opt out HIV screening for all clients and testing for high risk clients in accordance with 2006 CDC HIV guidelines. CFHC Performance Measure.			Medical Director Program Manager ClinicalServices Director	As documented in the Semi-Annual Progress Report (SPR) with sample data verified via chart audits at program evaluations.
Objective		Provide family plannin 31, 2013, as evidenced			-risk, hard-to-reach populations by December
Number	Ac	etivity	# of Clients	Job Title	Evaluation
2, A	medical services to number of individ hard-to-reach popular			Program Manager	As documented in Semi-Annual Progress Report (SPR) and reviewed at program evaluations.
	Homeless Individu	ıals	200		
	Substance-Using/	Abusing Individuals	500		
	Individuals with D	Disabilities	0		
	Individuals with L Proficiency (LEP)	imited English	1100		
	Migrant Workers		0		
	Males		1000		
	Adolescents (17 & under)		1500		
	TOTAL Clients S	Served	4300		
 Individuals # of males v 	nter #'s into at least four(4) may be entered into multip will be prepopulated from o	ole populations objective 1.C			
4. must be able	e to collect valid data for a	Il selected special populations	U. C. B. C. S.	ion Cool and Object	
Adolescen	t Services Goal:	NAME OF TAXABLE PARTY.		ices Goal and Object and counseling services to add	
				nseling to all adolescent cliented by completion of activities 1	ts seeking Family Planning services by A through 1D.
Number Activity				Job Title	Evaluation
3.A	Provide adolescents with information, support and counseling to delay the initiation of sexual activity as appropriate.		Medical Director Family Planning Director Program Manager ClinicalServices Director		Documentation of counseling maintained in charts. Reviewed at program evaluations.
3.B Provide counseling to minors on how to resist coercive attempts to engage in sexual activity.			Program N	anning Director	Protocols maintained and staff updates reviewed. Chart audits performed at program evaluations.

3.C	family involvement to all adolescents less than or equal to 17 years of age seeking reproductive health services whose family is not already aware that they are seeking reproductive services.			rector nning Director Ianager vices Director	Protocols maintained and reviewed. Chart audits performed at program evaluations.		
3.D	Report child an required by star	d sexual abuse as te law.	Program M	nning Director	Protocols maintained and staff updates reviewed annually. Chart audits performed at program evaluations.		
		Communi	ty Educa	tion Goal and Object	etives		
Community Goal:	Education	Increase the commun	nity's know	ledge and access to family	planning services offered by the Agency.		
Objective 1	•			streach and education to potent of activities 1A through 1F.	tial Title X eligible clients by December 31,		
Number		Activity	# of Clients	Job Title	Evaluation		
1. A	Education and increases comm reproductive he planning service Activities include:	onplement a Community Outreach Plan that nunity knowledge of ealth and family ees to the community. de: general outreach, ivities and mass nibit B).	3700	Family Planning Director Program Manager Program Coordinator	Community Education and Outreach Plan maintained, updated, and reviewed at program evaluations and desk audits.		
1. B	as stated in the	l outreach to individuals Community Education l'an (Exhibit B, Section	1000 Family Planning Director Program Manager Program Coordinator		As documented in the Semi-Annual Progress Report (SPR) and verified at program evaluations.		
1. C	Provide education and outreach to individuals at partnership agencies as stated in the Community and Education and Outreach Plan (Data will be automatically populated from information entered in Exhibit B, Section II).		1700	Family Planning Director Program Manager Program Coordinator	As documented in the Semi-Annual Progress Report (SPR) and verified at program evaluations.		
1. D	Conduct mass marketing activities as stated in the Community Education and Outreach Plan (Exhibit B, Section III).		1000 Family Planning Director Program Manager Program Coordinator		As documented in the Semi-Annual Progress Report (SPR) and verified at program evaluations.		
1. E	An Advisory Committee of 5-9 members representative of the populations to be served will review and approve new educational materials developed and made available by the agency on annual basis.		Family Planning Director Program Manager Program Coordinator		Advisory meeting minutes and material review maintained and reviewed at program evaluation.		
1. F		on and outreach to ncrease utilization of a services.		Family Planning Director Program Manager Program Coordinator	Integration of the vaccination education into the community education plan.		

		Financial 1	Management Goal and Object	ives				
Financial 1	Management Goal	: Improve and mainta	in the Agency's financial systems to ensure	contract compliance.				
Objective	4		n a Family Planning Program that is in financial compliance with the contract tle X Guidelines, as evidenced by completion of activities 1A through 1D.					
Number	A	ctivity	Job Title	Evaluation				
4.A	Develop a line ite the period of Janu December 31, 20 modifications as a designated period	13 and submit necessary during	Family Planning Director Program Manager	Line item budget by site and necessary modifications submitted.				
designated periods. 4.B Develop and maintain financial management systems that are in compliance with the Code of Federal Regulations (CFR) and include the following: budgetary control procedures, accounting systems and reports, purchasing, inventory control, property management, charges, billing and collection procedures.			Fiscal Manager Financial management system maintained in compliance an at program evaluations.					
4.C	Develop and prop sliding fee scale of reflect the current guidelines.	n an annual basis to	Clinical Services Director	Sliding fee scale developed, implemented and reviewed at program evaluations.				
4.D	Complete all final requirements as d contract.		Family Planning Director Program Manager Fiscal Manager	All financial reports submitted on time as required.				
		Reproduct	ive Life Plan Goal and Object	ives				
Reproduct	ive Life Plan:		nning clients to take steps toward becoming nning discussions and providing preconcept 1, 2013.					
Objective :	5		on/inter-conception care and reproductive live exam patients annually through Decemb					
Number	Number Activity		Job Title	Evaluation				
5.A	Provide pre-conception counseling to women planning pregnancy, open to pregnancy or using less effective contraceptive methods; in particular for women with chronic medical conditions that may affect pregnancy outcomes such as obesity, diabetes, hypertension and seizure disorders, and encourage use of folic acid.		Medical Director Program Manager ClinicalServices Director	Document reproductive life plan counseling in client charts annually through 12/31/2013				

X adolescents

X Women's Shelters

Other (Specify)

Agency Number:	754								
Agency Name: County of Riverside Department of Public Health									
Community Education and Outreach Partnering Plan for Family Planning									
	Total number of	general outreach activities(Sectio	n I):	1,000					
	Total Number	er of partnering activities(Section	1I):	1,700					
	Total number of m	ass marketing activities (Section	III):	1,000					
Total Number of individua	als reached in Community	and Education Outreach Partne I	ring Plan:	3,700					
Section 1: General Outreach	Projected Outreach Plan	for Entire Family Planning Prog	gram						
# of individuals reached 1	1000								
Type of Agency/Outreach Venue	Population Reached	Type of Educ./Presetation		Method of Evaluating Success					
X Community Group	X Homeless individuals	X Abstinence		Sign-in sheets maintained and compared to projected numbers					
Middle or High School									
Community College or University	X Substance using individuals	X STDs/HIV		Pre and post tests to assess changes in knowledge					
Faith-based organization									
X Social Service Agency	Individuals with disabilities	X Family planning and contraceptive methods	X	Post Presentation participant evaluations					
WIC Center									
Migrant Camp or Services Organization	X Individuals with limited English proficiency	X Life Skills		Assessment of number of people who visit clinic as a result of outreach					
X Detention/Incarceration Center									
Job Training Center/Program		X Services provided/making appointments		Regular meetings with outreach venue organization to discuss progress and challenge					
Parenting Program	migrant workers								
Business or Workplace		X Flu Vaccination		Other(specify)					
X Homeless Shelter									
X Substance Abuse Treatment /Recovery Center	X males	X Reproductive Life Plan (RLP)							

Other (Specify)

	tion 2: Partnering Plan me:	W	IC				
# o:	f individuals reached 12	200					
Ty	vpe of Agency/Outreach Venue		Population Reached		Type of Educ./Presetation		Method of Evaluating Success
	Community Group		Homeless individuals		Abstinence	X	Sign-in sheets maintained and compared to projected numbers
	Middle or High School Community College or University		Substance using individuals	X	STDs/HIV		Pre and post tests to assess changes in knowledge
	Faith-based organization Social Service Agency		Individuals with disabilities	X	Family planning and contraceptive methods	X	Post Presentation participant evaluations
X	WIC Center Migrant Camp or Services Organization Detention/Incarceration Center	X	Individuals with limited English proficiency		Life Skills		Assessment of number of people who visit clinic as a result of outreach
	Job Training Center/Program		and the same and the same		Services provided/making appointments		Regular meetings with outreach venue organization to discuss progress and challenges
	Parenting Program Business or Workplace Homeless Shelter		migrant workers	X	Flu Vaccination		Other(specify)
	Substance Abuse Treatment /Recovery Center Women's Shelters		males		Reproductive Life Plan (RLP)		
			- 1-1		Other (Specify)		
Sac	Other (Specify)	Day	adolescents		One (Specify)		
Nai # of	tion 2: Partnering Plan ne:	Pa:	rolee Population Reached	7	Type of Educ./Presetation		Method of Evaluating Success
Nai # of	tion 2: Partnering Plan ne: findividuals reached 50	00	rolee Population Reached	1	Type of Educ./Presetation		
Nai # of Ty	tion 2: Partnering Plan ne: findividuals reached 50 pe of Agency/Outreach Venue Community Group	00	rolee	17			Method of Evaluating Success Sign-in sheets maintained and compared to projected numbers
Nai # of Ty	tion 2: Partnering Plan me: f individuals reached 50 Tope of Agency/Outreach Venue Community Group Middle or High School Community College or University	00 X	Population Reached Homeless individuals		Type of Educ./Presetation		Sign-in sheets maintained and compared to
Nai # of Ty	tion 2: Partnering Plan me: findividuals reached 50 Tope of Agency/Outreach Venue Community Group Middle or High School Community College or University Faith-based organization Social Service Agency	00 X	Population Reached Homeless individuals	X	Type of Educ./Presetation Abstinence		Sign-in sheets maintained and compared to projected numbers Pre and post tests to assess changes in
Nai # of Ty X	tion 2: Partnering Plan ne: f individuals reached 50 The of Agency/Outreach Venue Community Group Middle or High School Community College or University Faith-based organization	00 X	Population Reached Homeless individuals Substance using individuals	X	Type of Educ./Presetation Abstinence STDs/HIV Family planning and contraceptive		Sign-in sheets maintained and compared to projected numbers Pre and post tests to assess changes in knowledge
Nai # of Ty	tion 2: Partnering Plan me: findividuals reached 50 Type of Agency/Outreach Venue Community Group Middle or High School Community College or University Faith-based organization Social Service Agency WIC Center Migrant Camp or Services Organization Detention/Incarceration Center Job Training Center/Program	00 X	Population Reached Homeless individuals Substance using individuals Individuals with disabilities Individuals with limited English proficiency	X	Type of Educ./Presetation Abstinence STDs/HIV Family planning and contraceptive methods		Sign-in sheets maintained and compared to projected numbers Pre and post tests to assess changes in knowledge Post Presentation participant evaluations Assessment of number of people who visit
Nai # of Ty X	tion 2: Partnering Plan ne: f individuals reached 50 Tope of Agency/Outreach Venue Community Group Middle or High School Community College or University Faith-based organization Social Service Agency WIC Center Migrant Camp or Services Organization Detention/Incarceration Center Job Training Center/Program Parenting Program	00 X	Population Reached Homeless individuals Substance using individuals Individuals with disabilities Individuals with limited	x x	Abstinence STDs/HIV Family planning and contraceptive methods Life Skills Services provided/making appointments	X	Sign-in sheets maintained and compared to projected numbers Pre and post tests to assess changes in knowledge Post Presentation participant evaluations Assessment of number of people who visit clinic as a result of outreach Regular meetings with outreach venue organization to discuss progress and challenges
Nai # of Ty X	tion 2: Partnering Plan me: findividuals reached 50 Type of Agency/Outreach Venue Community Group Middle or High School Community College or University Faith-based organization Social Service Agency WIC Center Migrant Camp or Services Organization Detention/Incarceration Center Job Training Center/Program	00 X	Population Reached Homeless individuals Substance using individuals Individuals with disabilities Individuals with limited English proficiency	x x	Type of Educ./Presetation Abstinence STDs/HIV Family planning and contraceptive methods Life Skills Services provided/making	x	Sign-in sheets maintained and compared to projected numbers Pre and post tests to assess changes in knowledge Post Presentation participant evaluations Assessment of number of people who visit clinic as a result of outreach Regular meetings with outreach venue
Nai # of Ty X	tion 2: Partnering Plan me: f individuals reached 50 Tope of Agency/Outreach Venue Community Group Middle or High School Community College or University Faith-based organization Social Service Agency WIC Center Migrant Camp or Services Organization Detention/Incarceration Center Job Training Center/Program Parenting Program Business or Workplace	x x	Population Reached Homeless individuals Substance using individuals Individuals with disabilities Individuals with limited English proficiency	x x	Abstinence STDs/HIV Family planning and contraceptive methods Life Skills Services provided/making appointments	X	Sign-in sheets maintained and compared to projected numbers Pre and post tests to assess changes in knowledge Post Presentation participant evaluations Assessment of number of people who visit clinic as a result of outreach Regular meetings with outreach venue organization to discuss progress and challenges Other(specify) Participant Count maintained and

County of Riverside Department of Public Health 754

	Mass Ma	keting	Method of Evaluating Sucess				
х	Health Fairs	Print Media	X	Distribution of Educational Materials			
	Street Outreach	Internet Websites		Sign in Sheets			
	Concerts	TwitterCommunity Events	X	Estimated Audiences			
	Radio	Twitter					
	TV	Facebook					

List All	Approved T	itle X-funded	family p	lann	ing pr	ogram	service sites	S.
Site Name and Address: R 7140 Indiana Avenue, Rivers		hood Health Center	4					
Zip Codes of Area Served	Type of Area Served	Services Offered	Family P Days		g Clinic PM	Hours EVN	Prejected Users in 2013	NPI Number
92501, 92503, 92504, 92505, 92506, 92507	X Urban	X Medical X Health Education	Mon: Tue: Web: Thu: Fri: Sat: Sun:	X X X X X	X X X X X		800	1003920943
Site Name and Address: In 42923 Oasis Steet, Indio-922		Center.						
Zip Codes of Area Served	Type of Area Served	Services Offered	Family P Days		g Clinic PM	Hours EVN	Prejected Users in 2013	NPI Number
92201, 92236, 92254, 92274	X Suburban	X Medical X Health Education	Mon: Tue: Web: Thu: Fri: Sat: Sun:	X X X X X	X X X X X	:	1000	1023122967
Site Name and Address: C 505 S. Buena Vista. Corona-		re Center.						
Zip Codes of Area Served	Type of Area Served	Services Offered	Family P Days		g Clinic PM	Hours EVN	Prejected Users in 2013	NPI Number
92879, 92880, 92881, 92882, 92883, 92860	X Urban	X Medical X Health Education	Mon Tue: Web: Thu: Fri: Sat: Sun:	X X X X X	X X X X X	• • • • • • • •	1200	1205940145
Site Name and Address: In N. State Street. Hemet-92343	Hemet Family Car	re Center 880						
Zip Codes of Area Served	Type of Area Served	Services Offered	Family P Days	lanning AM	g Clinic PM	Hours EVN	Prejected Users in 2013	NPI Number
92543, 92554, 92545, 92548, 92582, 92583, 92596	X Suburban	X Medical X Health Education	Mon: Tue: Web: Thu: Fri: Sat: Sun:	X X X X X	X X X X X	-	1400	1114031051

Zip Codes of	Type of Area	Services	Family P	lanning	Clinic	Hours	Prejected	NPI Number
Area Served	Served	Offered	Days	AM	PM	EVN	Users in 2013	
92258, 92262, 92264, 92282	X Urban	X Medical X Health Education	Mon Tue: Web: Thu: Fri: Sat: Sun:	X X X X X	X X X X X	(a) (b) (c) (d)	1000	1386758225
ite Name and Address: 055 West Ramsey Banning	Banning Family C g-92220	Care Center.						
Zip Codes of	Type of Area	Services	Family P	lanning	Clinic	Hours	Prejected	NPI Number
Area Served	Served	Offered	Days	AM	PM	EVN	Users in 2013	
92230, 92220, 92223, 92549	X Suburban	X Medical X Health Education	Mon: Tue: Web: Thu: Fri: Sat: Sun:	X X X X X	X X X X X		1200	1346353679
ite Name and Address:415 Mission Blvd. Riversio		e Center.						
Zip Codes of	Type of Area	Services	Family P	lanning	Clinic Clinic	Hours	Prejected	NPI Number
Area Served	Served	Offered	Days	AM	PM	EVN	Users in 2013	
92509, 91752	X Suburban	X Medical X Health Education	Mon: Tue: Web: Thu: Fri: Sat: Sun:	X X X X X	X X X X	:	1000	1871607713
ite Name and Address: 08 E. San jacinto. Perris-93		e Center.						
Zip Codes of	Type of Area	Services	Family P	lanning	Clinic	Hours	Prejected	NPI Number
Area Served	Served	Offered	Days	AM	PM	EVN	Users in 2013	
92567, 92579, 92571, 92584, 92585, 92586, 92587	X Urban	X Medical X Health Education	Mon Tue: Web: Thu: Fri: Sat: Sun:	X X X X X	X X X X X		1200	1194839035
ite Name and Address:	Lake Elsinore Fam	ily Care Center. 24	199 East Lake	shore D	r. Lake	Elsinore-	92530	
Zip Codes of	Type of Area	Services	Family P	lanning	Clinic	Hours	Prejected	NPI Number
Area Served	Served	Offered	Days	AM	PM	EVN	Users in 2013	
92530, 92532, 92595, 92562, 92563, 92590, 92591, 92592.	X Urban	X Medical	Mon Tue: Web: Thu: Fri: Sat:	X X X X	X X X X	**: **: **:	2500	1396859179

Zip Codes of	Type of Area	Services	Family P	lanning	Clinic	Hours	Prejected	NPI Number
Area Served	Served	Offered	Days	AM	PM	EVN	Users in 2013	
92503 Site Name and Address:		Care Center.	Mon: Tue: Web: Thu: Fri: Sat: Sun:	X X X	X X X X	15 16 16 16 16 17 17	0	0
256 Mission Blvd, River								
Zip Codes of Area Served	Type of Area Served	Services Offered	Family P Days	lanning AM	Clinic PM	Hours EVN	Prejected Users in 2013	NPI Number
92509, 91752		X Medical	Mon: Tue: Web: Thu: Fri:	X X X X	X X X X		700	1356455299

Other Expense

Total Budget

Approved Indirect Cost

CY 2013 Approved Title X Allocation

Total Other Costs

		Family Plannin	g Services		
		Budget Sum	_		
Budget Period:	Start Date: 1/	1/2013 Ending Date: 12/31/201	3		
Budget Category		Total Amount Required	Source of Applicant and Other	of Funds Allocated From CFHC	
Personnel Service					
Physician		669,044	669,044	(
Mid-Level Practitioner	'S	437,769	437,769	(
Other Health Personn	el	382,275	139,263	243,012	
Ancillary Personnel		0	0	(
Administration Staff		42,315	25,315	17,000	
Fringe Benefits		668,221	554,185	114,036	
Fringe Benefits Adjust	tments	0	0	C	
Total Personnel Serv	vice	2,199,624	1,825,576	374,048	
Patient Care					
Clinical Services		0	0	C	
Laboratory Services		700,000	700,000	C	
Total Patient Care		700,000	700,000	(
Equipment					
Equipment		0	0	C	
Total Equipment		0	0	C	
Other Costs					
Consultant		0	0	C	
Medical Supplies		341,788	331,612	10,176	
Office Supplies		42,502	39,216	3,286	
Duplication & Printing		7,689	4,833	2,856	
Health Education Sup	plies	13,010	9,510	3,500	
Utilities & Communica	ation	54,711	49,064	5,647	
Travel Expense		35,109	24,459	10,650	
Lease/Rental Expense	Э	224,544	224,544	0	

59,812

202,576

981,741

3,881,365

59,812

165,171

908,221

3,433,797

0

37,405

73,520

447,568

447,568

Family Planning Services	
Summary of Applicant and Other	
Revenue Category	Total Amount
Applicant Funds	
General Funds (Agency Fund)	312,526
Donations (Cash or In-kind)	0
Total for Applicant Funds	312,526
Family PACT	
Family PACT Fee For Service	2,976,271
Total for Family PACT	2,976,271
Medi-CAL	
Medi-CAL	25,000
Total for Medi-CAL	25,000
Other Federal Grants	
Medicaid	0
Medicare (Title XVIII)	0
MCH Block Grant (Title V)	0
Bureau of Primary Health Care (330 Grant)	0
Total for Other Fed Grants	0
State Government Grants	
None	0
Total for State Gov. Grants	0
Local Government Grants	
Information and Education	100,000
Total for Local Gov. Grants	100,000
Private Grants	
None	0
Total for Private Grants	0
Third Party Payers	
Patient Fees	10,000
Private Health Insurance	10,000
Total for Third Party Payers	20,000
Total Applicant and Other Sources of Revenue	3,433,797

	All Sites Budget				
From 1/1/2013 To 12/31/2013					
Site Name:	Riverside Neighborhood Health Center	Site Number: 1365			
	Budget Category	Allocated From CFHC			
Salaries and Wages					
Primary Care Physician	s	0			
Mid-Level Practitioners		0			
Other Health Personnel		7,572			
Laboratory Staff		0			
Administration Staff		0			
	Total for Salaries and Wages	7,572			
Fringe Benefits					
Fringe Benefits		3,360			
Fringe Benefits Adjustm	ents	0			
	Total for Fringe Benefits	3,360			
Patient Care					
Clinical Services		0			
Laboratory Services		0			
	Total for Patient Care	0	100		
Equipment					
Equipment		0			
	Total for Equipment	0			
Other Costs					
Consultants		0			
Medical Supplies	a a	0			
Office Supplies		0			
Duplication & Printing		0			
Health & Educational Su	pplies	0			
Utilities & Communication	on	0			
Travel Expense		0			
Lease/Rental Expense		0			
Other Expense		0			
Approved Indirect Cost		0			
	Total for Other Costs	0			
	Total CFHC Site Allocation	10,932			

	All Sites Budget				
From 1/1/2013 To 12/31/2013					
ite Name: Indio Family Care Center		Site Number: 1366			
	Budget Category	Allocated From CFHC			
Salaries and Wa	nges .				
Primary Care Ph	ysicians	0			
Mid-Level Practit	ioners	0			
Other Health Per	sonnel	9,794			
Laboratory Staff		0			
Administration St	taff	0			
	Total for Salaries and Wages	9,794			
Fringe Benefits					
Fringe Benefits		4,346			
Fringe Benefits A	djustments	0			
	Total for Fringe Benefits	4,346			
Patient Care					
Clinical Services		0			
Laboratory Service	ces	0			
	Total for Patient Care	0			
Equipment					
Equipment		0			
	Total for Equipment	0			
Other Costs					
Consultants		0			
Medical Supplies		0			
Office Supplies		0			
Duplication & Prir	nting	0			
Health & Education	onal Supplies	0			
Utilities & Commu	unication	0			
Travel Expense		2,156			
_ease/Rental Exp	ense	0			
Other Expense		0			
Approved Indirect	t Cost	0			
	Total for Other Costs	2,156			
	Total CFHC Site Allocation	16,296			

All Sites Budget				
From 1/1/2013 To 12/31/2013				
Site Name: Corona Family Care Center	Site Number: 1368			
Budget Category	Allocated From CFHC			
Salaries and Wages				
Primary Care Physicians	0			
Mid-Level Practitioners	0			
Other Health Personnel	7,572			
Laboratory Staff	0			
Administration Staff	0			
Total for Salaries and Wages	7,572			
Fringe Benefits				
Fringe Benefits	3,360			
Fringe Benefits Adjustments	0			
Total for Fringe Benefits	3,360			
Patient Care				
Clinical Services	0			
Laboratory Services	0			
Total for Patient Care	0			
Equipment				
Equipment	0			
Total for Equipment	0			
Other Costs				
Consultants	0			
Medical Supplies	0			
Office Supplies	0			
Duplication & Printing	0			
Health & Educational Supplies	0			
Utilities & Communication	0			
Travel Expense	0			
_ease/Rental Expense	0			
Other Expense	0			
Approved Indirect Cost	0			
Total for Other Costs	0			
Total CFHC Site Allocation	10,932			

	All Sites Budget			
From 1/1/2013 To 12/31/2013				
Site Name:	Hemet Family Care Center	Site Number: 1369		
	Budget Category	Allocated From CFHC		
Salaries and Wages				
Primary Care Physicians		0		
Mid-Level Practitioners		0		
Other Health Personnel		2,706		
Laboratory Staff		0		
Administration Staff		0		
	Total for Salaries and Wages	2,706		
Fringe Benefits		The second second second		
Fringe Benefits		1,201		
Fringe Benefits Adjustmer	nts	0		
	Total for Fringe Benefits	1,201		
Patient Care				
Clinical Services		0		
Laboratory Services		0		
	Total for Patient Care	0		
Equipment				
Equipment		0		
	Total for Equipment	0		
Other Costs				
Consultants		0		
Medical Supplies		0		
Office Supplies		0		
Duplication & Printing		0		
Health & Educational Supplies		0		
Utilities & Communication		0		
Travel Expense		0		
Lease/Rental Expense		0		
Other Expense		0		
Approved Indirect Cost		0		
	Total for Other Costs	0.00		
	Total CFHC Site Allocation	3,907		

	All Sites Budget			
From 1/1/2013 To 12/31/2013				
Site Name:	Palm Springs Family Care Center	Site Number: 1370		
	Budget Category	Allocated From CFHC		
Salaries and Wag	es			
Primary Care Phys	icians	0		
Mid-Level Practition	ners	0		
Other Health Perso	onnel	8,452		
Laboratory Staff		0		
Administration Stat	ff	0		
	Total for Salaries and Wages	8,452		
Fringe Benefits				
Fringe Benefits		3,750		
Fringe Benefits Adj	ustments	0		
	Total for Fringe Benefits	3,750		
Patient Care				
Clinical Services		0		
Laboratory Service	s	0		
	Total for Patient Care	0		
Equipment				
Equipment		0		
	Total for Equipment	0		
Other Costs				
Consultants		0		
Medical Supplies		0		
Office Supplies		0		
Duplication & Printing		0		
Health & Educational Supplies		0		
Utilities & Communication		0		
Travel Expense		0		
Lease/Rental Exper	nse	0		
Other Expense		0		
Approved Indirect C	Cost	0		
	Total for Other Costs	0		
	Total CFHC Site Allocation	12,202		

	All Sites Budget			
From 1/1/2013 To 12/31/2013				
Site Name:	Banning Family Care Center	Site Number: 1623		
	Budget Category	Allocated From CFHC		
Salaries and Wage	98			
Primary Care Phys	icians	0		
Mid-Level Practition	ners	0		
Other Health Perso	nnel	7,615		
Laboratory Staff		0		
Administration Staf	f	0		
	Total for Salaries and Wages	7,615		
Fringe Benefits				
Fringe Benefits		3,379		
Fringe Benefits Adj	ustments	0		
. Iki Pengan	Total for Fringe Benefits	3,379		
Patient Care				
Clinical Services		0		
Laboratory Services	3	0		
	Total for Patient Care	0		
Equipment				
Equipment		0		
	Total for Equipment	0		
Other Costs				
Consultants		0		
Medical Supplies		0		
Office Supplies		0		
Duplication & Printi	ng	0		
Health & Education	al Supplies	0		
Utilities & Communication		0		
Travel Expense		0		
_ease/Rental Exper	se	0		
Other Expense		0		
Approved Indirect C	ost	0		
	Total for Other Costs	0		
	Total CFHC Site Allocation	10,994		

	All Sites Budget			
From 1/1/2013 To 12/31/2013				
Site Name:	Jurupa Family Care Center	Site Number:	1847	
	Budget Category	Allocated	From CFHC	
Salaries and Wage	es			
Primary Care Phys	icians		0	
Mid-Level Practition	ners		0	
Other Health Perso	nnel	5,8	27	
Laboratory Staff			0	
Administration Staf	f		0	
Spelf 1 Sec. 1986	Total for Salaries and Wages	5,8	27	
Fringe Benefits				
Fringe Benefits		2,5	85	
Fringe Benefits Adj	ustments		0	
	Total for Fringe Benefits	2,58	85	
Patient Care				
Clinical Services			0	
Laboratory Services	S		0	
	Total for Patient Care		0	
Equipment				
Equipment			0	
	Total for Equipment		0	
Other Costs				
Consultants			0	
Medical Supplies			0	
Office Supplies		0		
Duplication & Printi	ng		0	
Health & Education	al Supplies		0	
Utilities & Communication			0	
Travel Expense			0	
Lease/Rental Expense			0	
Other Expense			0	
Approved Indirect C	Cost		0	
	Total for Other Costs		0	
	Total CFHC Site Allocation	8,41	12	

	All Sites Budget		
From 1/1/2013 To 12/31/2013			
Site Name:	Perris Family Care Center	Site Number: 1993	
	Budget Category	Allocated From CFHC	
Salaries and Wag	es:		
Primary Care Phys	sicians	0	
Mid-Level Practitio	ners	0	
Other Health Perso	onnel	5,820	
Laboratory Staff		0	
Administration Sta	ff	0	
	Total for Salaries and Wages	5,820	
Fringe Benefits			
Fringe Benefits		2,582	
Fringe Benefits Adj	iustments	0	
77	Total for Fringe Benefits	2,582	
Patient Care			
Clinical Services		0	
Laboratory Service	s	0	
	Total for Patient Care	0	
Equipment			
Equipment		0	
	Total for Equipment	0	
Other Costs			
Consultants		0	
Medical Supplies		0	
Office Supplies		0	
Duplication & Printi	ng	0	
Health & Educational Supplies		0	
Utilities & Communication		0	
Travel Expense		Ö	
Lease/Rental Expense		0	
Other Expense		0	
Approved Indirect C	Cost	0	
	Total for Other Costs	0	
	Total CFHC Site Allocation	8,402	

	All Sites Budget			
From 1/1/2013 To 12/31/2013				
Site Name:	Lake Elsinore Family Care Center	Site Number: 1995		
	Budget Category	Allocated From CFHC		
Salaries and Wag	jes			
Primary Care Phys	sicians	0		
Mid-Level Practitio	ners	0		
Other Health Perso	onnel	2,706		
Laboratory Staff		0		
Administration Sta	ff	0		
	Total for Salaries and Wages	2,706		
Fringe Benefits				
Fringe Benefits		1,201		
Fringe Benefits Ad	justments	0		
	Total for Fringe Benefits	1,201		
Patient Care				
Clinical Services		0		
Laboratory Service	es	0		
	Total for Patient Care	0		
Equipment				
Equipment		0		
	Total for Equipment	0		
Other Costs				
Consultants		0		
Medical Supplies		0		
Office Supplies		0		
Duplication & Print	ing	0		
Health & Educational Supplies		0		
Utilities & Communication		0		
Travel Expense		0		
Lease/Rental Expense		0		
Other Expense		0		
Approved Indirect (Cost	0		
	Total for Other Costs	0		
	Total CFHC Site Allocation	3,907		

	All Sites Budget		
From 1/1/2013 To 12/31/2013			
Site Name:	County of Riverside Department of Public Health	Site Number:	9202
	Budget Category	Allocated F	From CFHC
Salaries and Wag	es		
Primary Care Phys	sicians	C)
Mid-Level Practitio	ners	C	
Other Health Person	onnel	179,325	5
Laboratory Staff		C)
Administration Sta	ff	17,000)
	Total for Salaries and Wages	196,325	
Fringe Benefits			
Fringe Benefits		85,778	
Fringe Benefits Ad	justments	C	
	Total for Fringe Benefits	85,778	
Patient Care			
Clinical Services		C	
Laboratory Service	es	0	
	Total for Patient Care	0	
Equipment			
Equipment		0	
	Total for Equipment	0	
Other Costs			
Consultants		0	
Medical Supplies		10,176	
Office Supplies		3,286	
Duplication & Print	ing	2,856	
Health & Education	nal Supplies	3,500	
Utilities & Communication		5,647	
Travel Expense		8,494	
_ease/Rental Expe	nse	0	
Other Expense		0	
Approved Indirect (Cost	37,405	
	Total for Other Costs	71,364	
	Total CFHC Site Allocation	353,467	

	All Sites Budget		
From 1/1/2013 To 12/31/2013			
Site Name:	Rubidoux Family Care Center	Site Number: 9204	
	Budget Category	Allocated From CFHC	
Salaries and Wag	es		
Primary Care Phys	sicians	0	
Mid-Level Practitio	ners	0	
Other Health Perso	onnel	5,623	
Laboratory Staff		0	
Administration Sta	ff	0	
VEN BUSINESS	Total for Salaries and Wages	5,623	
Fringe Benefits			
Fringe Benefits		2,495	
Fringe Benefits Adj	justments	0	
	Total for Fringe Benefits	2,495	
Patient Care			
Clinical Services		0	
Laboratory Service	es	0	
	Total for Patient Care	0	
Equipment			
Equipment		0	
	Total for Equipment	0	
Other Costs			
Consultants		0	
Medical Supplies		0	
Office Supplies		0	
Duplication & Print	ing	0	
Health & Education	nal Supplies	0	
Jtilities & Commur	nication	0	
Travel Expense		0	
Lease/Rental Expense		0	
Other Expense		0	
Approved Indirect (Cost	0	
	Total for Other Costs	0	
	Total CFHC Site Allocation	8,118	

Cost Allocation Methodology Policy Statement

1. Please enter the following for your Cost Allocation:

- i. Current calculation figures on how each line item budget was determined (Methodology provided will be tested against your application budget).
- ii. Current Indirect Cost calculation and rate; Copy of approved indirect cost rate agreement must be submitted if available.

Attachment B

County of Riverside Department of Public Health clinics provide Family Planning services to approximately 28% of its clients. Title X funds are used to support community outreach, partnering activities and program administration. The majority of clients are covered by Family PACT. Clients who do not qualify for Family PACT may be covered under Title X based on the sliding fee scale. The funds are cost distributed to each clinic site based on the staff activities recorded on the productivity logs. All staff has time sheets delineating the hours worked each day. The staff also keeps productivity logs accounting for the time and number of clients seen at each location and program.

PERSONNEL SERVICES/SALARIES AND WAGES

The majority of Title X funds are allocated for salaries and benefits to support 7.9 FTEs that perform community outreach, partnering activities and administration duties. The Full Time Equivalent is based on a 40 hour work week and is used for salaries and benefits. Any salary and fringe benefits costs that are not covered by Title X are covered by the County or other grant sources.

- *Assistant Nurse Manager (1 FTE) supervises outreach and partnering activities, is also responsible for meeting grant objectives.
- •Program Coordinator (1 FTE) coordinates and supervises outreach and partnering activities.
- •Licensed Vocational Nurse (2.8 FTE) provides education at WIC sites, Teen Clinics, homeless and women shelters; participates in outreach activities and health fairs.
- •Health Education Assistant (2 FTE) provides education in middle schools, high schools, Teen Clinics; participates in outreach activities and health fairs.
- •Office Assistant (1 FTE) provides clerical support to Family Planning team. Enters statistical data for education, outreach and trainings.
- •Accounting Technician (0.1 FTE) complies financial data needed for invoices.
- •Registered nurse (0.2 FTE- Per Diem) The Per Diem Registered Nurse will provide in-kind support to Title X program activities at the Hemet and Lake Elsinore Teen Clinics each week. Her salary will come from County general funds. OTHER COSTS/OPERATING

Any operating costs that are not covered by Title X are covered by the County or other grant sources.

- •Medical supplies-covers the cost of condoms for outreach activities, WIC sites, homeless shelters and parolees for the purpose of STD and pregnancy prevention (\$1.08 per bag of one dozen condoms X 9,422 clients/bags=\$10,176).
- •Office supplies-covers Family Planning personnel for basic offices supplies including but not limited to pens, pencils, paper, toner, etc. (average monthly cost fiscal year to date is \$274.00=\$3,286)
- •Printing-covers the cost of flyers, brochures, client evaluations, etc. for education, outreach and partnering activities, health fairs and clients seen at the 10 clinics (average monthly cost fiscal year to date is \$238.00=\$2,856)
- •Health and education supplies-is allocated for client incentives; Teen Clinics, video, dvd's and pamphlets (average monthly cost fiscal year to date is \$292.00=\$3,500.00)
- •Communications-Includes cell phones for field staff, desk phones and computer lines (average\$59/person/month=\$5,647 per year).
- •Travel-covers the cost of attending Title X business meeting, other training and conferences and mileage to education sites.

 ? The Title X Business meeting-\$1,630 is the cost of sending (2) essential staff, which includes: Flight, hotel, ground transportation, meals and other travel related expenses.
- ? Travel/Mileage-\$6,469 covers private and county car mileage to outreach and education sites and the 10 County Family Planning clinics (average monthly cost fiscal year to date is \$858.00=\$10,298 per year).
- ? Training/Conference-\$2,551 covers cost of webinar trainings, Women's Conference and Contraceptive Technology course: includes flight, hotel, ground transportation, meals, registration and other travel related expenses.
- •Approved Indirect cost- The Indirect Cost is within the approved amount for CFHC, and it is calculated as 10% of salaries and benefits

County of Riverside Department of Public Health 754

Attachment B

2. Please De	scribe and justify any out-of-state travel
None	
3. Does your	r agency provide abortions at any of your sites?
TAB No	MAB No
3.a If yes, ar	re the sites Title X funded sites? No
If Yes, please p planning:	provide a brief description of how your agency maintains segregation of complete funds between abortion services and family

FAMILY PLANNING SERVICES REPORTING REQUIREMENTS:

The Contractor shall submit the following required reports in compliance with the dates and conditions specified below. CFHC will provide instruction when procedures for the proper completion if these reports change.

Change.		
REPORT TITLE	FREQUENCY OF SUBMISSION	<u>DUE DATE</u>
Family Planning Services Semi-Annual Progress Report (by County) Submitted electronically at www.cfhc.org	Semi-Annually	25th of the month following the period reported for the data that is not submitted monthly. For January, February, March, April, May and June <u>DUE: July 25</u>
		For July, August, September, October, November and December DUE: January 25, 2014
Statement of Revenue and Expenditure Report (includes submission of General Ledger backup of Title X expenditures only)	Quarterly	25th of the month following the period reported For January, February and March DUE: April 25
Submitted electronically at www.cfhc.org		For April, May and June DUE: July 25
		For July, August and September <u>DUE: October 25</u>
		For October, November and December DUE: January 25, 2014
Equipment Inventory Submitted to the Finance Division	Annually	45 days following the close of the Contract period DUE: February 15, 2014
Annual External Audit and A-133 Audit if applicable Submitted to the Finance Division	Annually	30 day after completion of audit(s) or nine months after the end of the audit period
Family Planning Sliding Fee Scale	Annually	Due April 30
Centralized Data System (CDS) submission Submitted electronically at www.cfhc.org	Monthly	25th of the month following the period reported
Special Reports, surveys and questionnaires as may be requested by CFHC or its funding source	Specified Date	Specified Date

CALIFORNIA FAMILY HEALTH COUNCIL SEPARATION OF FAMILY PLANNING AND ABORTION SERVICES POLICY

In compliance with Section 1008 of the Public Health Services Act, 42 CFR 59.5 (a) (5) and Federal Register / Vol. 65, No. 128, California Family Health Council (CFHC) does not provide Title X funding at any family planning project to promote or provide abortion as a method of family planning.

CFHC and the Title X projects of Delegate Agencies receiving Title X funds are bound by the following guidelines:

Prohibited Activities:

- 1. Providing abortion as a method of family planning.
 - 2. Counseling which directs a client to reach a decision to terminate a pregnancy.
 - 3. Making appointments, obtaining signed consents, negotiating a fee reduction, providing transportation or taking further affirmative action to secure abortion services.
 - 4. Promoting or advocating for an abortion within Title X program activities.

Allowable Activities:

- 1. Providing non-directive counseling to clients with positive pregnancy tests, which includes information on the following options, except with respect to any option(s) about which the pregnant woman indicates she does not wish to receive such information and counseling:
 - a. prenatal care and delivery;
 - b. infant care, foster care, or adoption; and
 - c. pregnancy termination
 - 2. Providing neutral and factual information about all of the above-listed options, including abortion services.
 - Referral of a client to a provider of services of all of the above-listed options, including for an abortion.

Procedure for Verification of Separation of Title X Funds and Abortion

Existing Abortion Services

If a delegate agency provides abortion services, the following will be done on each Title X program monitoring visit from CFHC in order to verify that Title X activities and abortion services are separate and distinct:

Activity

- 1. Verification of financial separation of Title X family planning services funding and abortion services funding, to include funding for common costs that are properly allocated.
- 2. Verification of the ability to separate and distinguish between Title X family planning activities and non-Title X abortion related activities within the facility.

Responsible Person

- 1. CFHC Lead Financial Auditor
- 2. CFHC Medical Specialists and CFHC Area Managers

CALIFORNIA FAMILY HEALTH COUNCIL SEPARATION OF FAMILY PLANNING AND ABORTION SERVICES POLICY

Process to Initiate Abortion Services

If a new Delegate Agency provides abortion services, or if an existing Delegate Agency initiates abortion services, the following must be done:

- A. Six weeks prior to adding abortion services, the Delegate Agency will notify CFHC in writing of its intent to implement abortion services.
- B. The separation of funds between Title X family planning service and abortion service must be reflected in the budget to show separation of staff time, equipment, supplies and medications.
- C. CFHC will conduct a site review of the proposed abortion services site prior to the agency's provision of such services. The review will include:
- 1. Verification of financial separation of Title X family planning services funding and abortion service funding, to include funding for common costs that are properly allocated.
- 2. Verification of the ability to separate and distinguish between Title X family planning services and non-Title X abortion related services within the facility.
- 3. Verification that abortion information is not presented as a method of family planning during Title X family planning client education.
- D. CFHC will summarize site review findings and a letter will be sent to the Delegate Agency. A timeline for correction of any findings will be established with the Delegate Agency and a follow-up review will be scheduled prior to the implementation of abortion services, if necessary.