

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



ITEM
3.25
(ID # 9091)

MEETING DATE:

Tuesday, March 12, 2019

FROM : RUHS-PUBLIC HEALTH:

SUBJECT: RIVERSIDE UNIVERSITY HEALTH SYSTEM – PUBLIC HEALTH: Ratify and Approve Amendment Number 02 to the Standard Agreement Number 15-10166 between the California Department of Public Health and the County of Riverside, Department of Public Health for the California Home Visiting Program for the period of performance of July 1, 2015 through June 30, 2019. All Districts. [(\$142,856) -100% State Funds]

RECOMMENDED MOTION: That the Board of Supervisors:

1. Ratify and approve Amendment Number 02 to the Standard Agreement Number 15-10166 between the California Department of Public Health and the County of Riverside Department of Public Health (Amendment 02) for California Home Visiting Program decreasing the amount of funding by \$142,856 for a total amount of \$3,508,854;
2. Authorize the Chairman of the Board of Supervisors to execute Amendment 02 on behalf of the County of Riverside; and
3. Authorize the Director of Public Health, or designee, to take all steps necessary to implement Amendment 02 including, but not limited to, signing subsequent amendments that do not change the substantive terms of the agreement, and signing all certifications, assurances, reports, or other related documents required by the California Department of Public Health, subject to County Counsel approval.

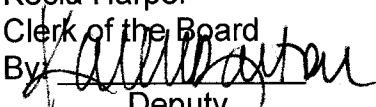
ACTION:Policy


Kim Saruwatari, Director of Public Health 2/7/2019

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Perez, seconded by Supervisor Spiegel and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Jeffries, Spiegel, Washington, Perez and Hewitt
Nays: None
Absent: None
Date: March 12, 2019
xc: RUHS-Public Health

Kecia Harper
Clerk of the Board
By 
Deputy

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

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$ (142,856)	\$ 0	\$ (142,856)	\$ 0
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0
SOURCE OF FUNDS: 100% State Funds			Budget Adjustment: No	
			For Fiscal Year: 18/19	

C.E.O. RECOMMENDATION: Approve

BACKGROUND:

Summary

The California Home Visiting Program (CHVP) was created as a result of the Patient Protection and Affordable Care Act of 2010. The CHVP focus is to provide comprehensive, coordinated in-home services to support positive parenting and to improve outcomes for families residing in identified at-risk communities. The goal of CHVP is to work with local health jurisdictions that serve clients using either Healthy Families America or the Nurse Family Partnership home visiting model.

The County of Riverside Department of Public Health, Public Health Nursing/Maternal, Child and Adolescent Health branch employs the Nurse Family Partnership Home Visitation Program. The Nurse Family Partnership Home Visitation Program is an evidence-based, voluntary program offered to pregnant women and children from birth to age 2. Program outcomes include: improved maternal and child health; prevention of child injuries, abuse and maltreatment; reduction of emergency department visits; improvements in school readiness and achievement; reduction in crime or domestic violence; improvements in family economic self-sufficiency; and improvements in the coordination and referrals for other community resources and supports.

The attached Amendment 02 to the Standard Agreement reflects the reductions in funding the allocations to the Health Resources and Services Administration for Fiscal Years 2017/18 and FY 2018/19. County Counsel has approved Amendment 02 as to form. Staff recommend that the Board ratify and approve the attached Amendment 02.

Impact on Residents and Businesses

This early intervention program will help vulnerable families get off to a solid start by helping to ensure the emotional, physical and developmental care of California's children. Evidenced-based home visiting services have proven to have a positive impact on families, by providing measureable and long-term benefits for children's development.

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

SUPPLEMENTAL:

Additional Fiscal Information

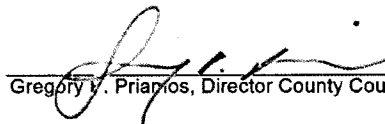
	Previous Amount	Amended Amount	Total Amount
FY 2015/16	\$916,356		\$916,356
FY 2016/17	\$902,642		\$902,642
FY 2017/18	\$916,356	(\$71,428)	\$844,928
FY 2018/19	\$916,356	(\$71,428)	\$844,928
Total	\$3,651,710	(\$142,856)	\$3,508,854

ATTACHMENT:

- Amendment Number 02 to Standard Agreement Number 15-10166


Melissa Noone, Associate Management Analyst

3/4/2019


Gregory V. Priamos, Director County Counsel

2/28/2019

RESOLUTION

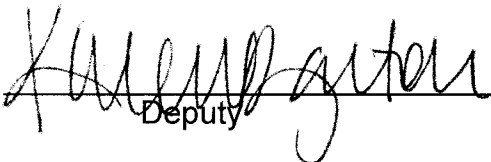
BE IT RESOLVED by the Board of Supervisors of the County of Riverside, State of California, in regular session assembled on Tuesday, March 12, 2019, that Kevin Jeffries, the Chairman is authorized and directed to execute on behalf of said County the Standard Agreement No. 15-10166, Amendment No. 2 between Riverside County and California Department of Public Health providing: for the California Home Visiting Program.

Roll Call:

Ayes: Jeffries, Spiegel, Washington, Perez and Hewitt
Nays: None
Absent: None

The foregoing is certified to be a true copy of a resolution duly adopted by said Board of Supervisors on the date therein set forth.

KECIA R. HARPER, Clerk of said Board

By: 
Deputy

Pursuant to Public Contract Code section 2010, a person that submits a bid or proposal to, or otherwise proposes to enter into or renew a contract with, a state agency with respect to any contract in the amount of \$100,000 or above shall certify, under penalty of perjury, at the time the bid or proposal is submitted or the contract is renewed, all of the following:

1. **CALIFORNIA CIVIL RIGHTS LAWS:** For contracts executed or renewed after January 1, 2017, the contractor certifies compliance with the Unruh Civil Rights Act (Section 51 of the Civil Code) and the Fair Employment and Housing Act (Section 12960 of the Government Code); and
2. **EMPLOYER DISCRIMINATORY POLICIES:** For contracts executed or renewed after January 1, 2017, if a Contractor has an internal policy against a sovereign nation or peoples recognized by the United States government, the Contractor certifies that such policies are not used in violation of the Unruh Civil Rights Act (Section 51 of the Civil Code) or the Fair Employment and Housing Act (Section 12960 of the Government Code).

CERTIFICATION

I, the official named below, certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Proposer/Bidder Firm Name (Printed) County of Riverside	Federal ID Number 95-6000930
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By (Authorized Signature)



Printed Name and Title of Person Signing

Kevin Jeffries, Chairman of the Board of Supervisors

Executed in the County of Riverside	Executed in the State of California
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Date Executed

MAR 12 2019

ATTEST:

KECIA B. HARPER, Clerk

By

DEPUTY

FORM APPROVED COUNTY COUNSEL

BY Amrit P. Dhillon 2/22/2019
AMRIT P. DHILLON DATE

Submit

GOVERNMENT AGENCY TAXPAYER ID FORM

The principal purpose of the information provided is to establish the unique identification of the government entity.

Instructions: You may submit one form for the principal government agency and all subsidiaries sharing the same TIN. Subsidiaries with a different TIN must submit a separate form. Fields bordered in red are required. Please print the form to sign prior to submittal. You may email the form to: GovSuppliers@cdph.ca.gov or fax it to (916) 650-0100, or mail it to the address above.

Principal
Government
Agency Name

County of Riverside

Remit-To
Address (Street
or PO Box)

4065 County Circle Drive

City:

Riverside

State: CA

Zip Code+4: 92503

Government
Type:

City

County

Federal
Employer
Identification
Number
(FEIN)

95-6000930

Special District

Federal

Other (Specify)

List other subsidiary Departments, Divisions or Units under your principal agency's jurisdiction who share the same FEIN and receives payment from the State of California.

FISC# ID#
(if known)

Dept/Division/Unit
Name

Complete
Address

FISC# ID#
(if known)

Dept/Division/Unit
Name

Complete
Address

FISC# ID#
(if known)

Dept/Division/Unit
Name

Complete
Address

FISC# ID#
(if known)

Dept/Division/Unit
Name

Complete
Address

Contact Person

Title

Phone number

E-mail address

Signature

Date

CLERK'S COPY

County of Riverside, Department of Public Health
to Riverside County Clerk of the Board, Stop 1010
Post Office Box 1147, Riverside, Ca 92502-1147

15-10166 A02

STATE OF CALIFORNIA

STANDARD AGREEMENT AMENDMENT

STD 213A (Rev 6/03)

Check here if additional pages are added: 1 Page(s)

Agreement Number 15-10166	Amendment Number A02
Registration Number:	

- This Agreement is entered into between the State Agency and Contractor named below:
 State Agency's Name: California Department of Public Health (Also known as CDPH or the State)
 Contractor's Name: County of Riverside (Also referred to as Contractor)
- The term of this Agreement is: July 1, 2015 through June 30, 2019
- The maximum amount of this Agreement after this amendment is: \$ 3,508,854
 Agreement after this amendment is: Three Million, Five Hundred Eight Thousand, Eight Hundred Fifty Four Dollars
- The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

- Purpose of amendment:** This amendment is due to Health Resources and Services Administration (HRSA) funding reductions that became effective for Fiscal Year (FY) 2017/2018 and FY 2018/2019. FY 2017/2018 and FY 2018/2019 are being reduced by \$71,428 each. The total amount of this Agreement shall not exceed \$3,508,854. Additionally, this amendment adds mandatory programmatic requirements for implementing the California Home Visiting Program (CHVP) as identified by HRSA during a program site visit in June 2017 as well as the removal of some unnecessary language for program clarification purposes. This amendment revises the Contractor's name from County of Riverside, Department of Public Health to County of Riverside.
- Certain changes made in this amendment are shown as: Text additions are displayed in bold and underline. Text deletions are displayed as strike through text (i.e., ~~Strike~~).

(Continued on next page)

ATTEST:
 KECIA R. HARPER, Clerk
 By: *[Signature]*
 DEPUTY

All other terms and conditions shall remain the same.

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

CONTRACTOR

Contractor's Name (If other than an individual, state whether a corporation, partnership, etc.)
 County of Riverside

By (Authorized Signature) *[Signature]* Date Signed (Do not type) 3/12/19

Printed Name and Title of Person Signing
 Kevin Jeffries, Chairman of the Board

Address
 P.O. Box 7600, Riverside, CA 92513-7600

STATE OF CALIFORNIA

Agency Name
 California Department of Public Health

By (Authorized Signature) *[Signature]* Date Signed (Do not type) 3/28/19

Printed Name and Title of Person Signing
 Jeffrey Mapes, Chief, Contracts Management Unit

Address
 1616 Capitol Avenue, Suite 74.262, MS 1802, P.O. Box 997377,
 Sacramento, CA 95899-7377

CALIFORNIA
 Department of General Services
 Use Only

APPROVED

APR 11 2019

OFFICE OF LEGAL SERVICES
 DEPT. OF GENERAL SERVICES

Exempt per:
[Signature]

FORM APPROVED COUNTY COUNSEL
 BY: *[Signature]* DATE: 3/12/2019
 AMRIT P. DHILLON

MAR 12 2019 3.25

III. Exhibit A, Scope Of Work, is hereby replaced in its entirety.

IV. Exhibit B – Budget Detail and Payment Provisions, Item #4, Amounts Payable is revised as follows:

4. Amounts Payable

A. The amounts payable under this contract shall not exceed:

- 1) \$916,356 for the budget period of 07/01/15 through 06/30/16
- 2) \$902,642 for the budget period of 07/01/16 through 06/30/17
- 3) ~~\$916,356~~ 844,928 for the budget period of 07/01/17 through 06/30/18
- 4) ~~\$916,356~~ 844,928 for the budget period of 07/01/18 through 06/30/19

B. Payment allocations shall be made for allowable expenses up to the amount annually encumbered commensurate with the state fiscal year in which services are fulfilled and/or goods are received.

V. Exhibit B, Attachment III and IV are hereby replaced in their entirety.

Exhibit A
Scope of Work

1. **Service Overview**

County of Riverside, Department of Public Health agrees to provide the following services to the California Department of Public Health (CDPH).

The California Home Visiting Program was created as a result of the Patient Protection and Affordable Care Act of 2010, Social Security Act, Title V, Section 511 (42 U.S.C. §711), CFDA# 93.505 and CFDA# 93.870. The purpose of this contract is to provide comprehensive, coordinated in-home services to support positive parenting, and to improve outcomes for families residing in identified at-risk communities. Programs are meant to target participant outcomes, which include:

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

2. **Service Location**

The Riverside County Nurse Family Partnership Program targets its services to first time mothers, 28 weeks pregnant or less and low income who live in Western and Mid-County. Perris/Moreno Valley/ represent the two hubs and the surrounding areas within the County of Riverside and are located in approximately the middle of the county. The city of Riverside represents the hub for the surrounding areas in Western Riverside County. Eligibility criteria for low income is based on the clients' being eligible for Medi-Cal and/or participation in the Women, Infant and Children (WIC) program.

3. **Project Representatives**

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

<p>California Department of Public Health Genellee Ann Paras, Interim Contract Manager Contract Manager: Michael Neff Telephone: 916-650-0411 (916) 341-6726 Fax: (916) 650-0309 Email: Genellee.Parasmichael.neff@cdph.ca.gov</p>	<p>County of Riverside, Department of Public Health Attention: Hermia Parks Telephone: 951-358-5304<u>516</u> Fax: 951-358-4762 Email: hparks@rivcocha.org</p>
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Exhibit A
Scope of Work

B. Direct all inquiries to:

<p>California Department of Public Health Title V Fiscal and Program Oversight <u>Contract Administrative Oversight</u> Attention: Genellee Paras, Interim Contract Manager <u>Michael Neff</u> 1615 Capitol Avenue, Suite 73.560, MS 8305 P.O. Box 997420 Sacramento, CA 95899-7420 Telephone: 916-650-0414 <u>(916) 341-6726</u> Fax: <u>(916) 650-0309</u> Email: <u>Genellee.Parasmichael.neff@cdph.ca.gov</u></p>	<p>County of Riverside, Department of Public Health Attention: Hermia Parks Address: 4065 County Circle Drive #210, Riverside, CA 92503 Telephone: 951-358-5304 <u>516</u> Fax: 951-358-4762 Email: <u>hparks@rivcocha.org</u></p>
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C. All payments from CDPH to the Contractor shall be sent to the following address:

<p style="text-align: center;"><u>Remittance Address</u></p> <p><u>Contractor: County of Riverside</u> <u>Attention: Hermia Parks</u> <u>Address: 4065 County Circle Drive</u> <u>City, Zip: Riverside, 92503</u> <u>Phone: 951-358-5516</u> <u>Fax: 951-358-4762</u> <u>Email: hparks@rivcocha.org</u></p>

D. Either party may make changes to the information above by giving written notice to the other party. Said changes shall not require an amendment to this agreement.

4. **Subcontracting Requirements**

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

5. **Services to be performed**

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

The purpose of the SOW is to provide parameters for implementing or expanding an existing Nurse Family Partnership (NFP) or Healthy Families America (HFA) home visiting program in accordance with Federal Maternal Infant Early Childhood Home Visiting and CHVP requirements

Exhibit A
Scope of Work

to achieve positive outcomes through maternal and child health for each of the following three goals:

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

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

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

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

All activities in this SOW shall take place from receipt of funding beginning July 1 through June 30 of each contracted year contingent on availability of funds and spending authority. The table below summarizes a list of Status Reports due to CHVP throughout the year.

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

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

Exhibit A
Scope of Work

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

Exhibit A
Scope of Work

#	Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures	
			Process, Short and/or Intermediate Measures	Short and/or Intermediate Outcome Measure(s)
		<p>Note: <i>Partners for Healthy Baby is the required curriculum for HFA sites.</i></p> <p>(.2) Participate in meetings, workgroups, and trainings as directed by CHVP.</p> <p>(.3) Hire and maintain sufficient staff to serve Home Visiting program participants and adhere to the specific evidence-based model guidelines.</p>	<p>required trainings.</p>	
PROGRAM REQUIREMENTS				
1.4	<p>LHJ sites will reach active caseload of 100 participants within 18 months of initial program implementation and maintain through the duration of the program. <u>LHJ site will reach and maintain Maximum Caseload Capacity (MCC) of 101 participants within 18</u></p>	<p>(.1) Receive referrals from appropriate agencies and triage as appropriate to meet the required number of enrolled participants.</p>	<p>Home Visiting Program staff will maintain an outreach log with program contacted, method, materials used and date of contact.</p> <p>Home Visiting Program staff will maintain a documented triage process.</p>	<p>CDPH – CHVP staff will review outreach log and triage process at site visit.</p> <p>LHJ sites must provide outreach log upon request.</p>

Exhibit A
Scope of Work

#	Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures	
			Process, Short and/or Intermediate Measures	Short and/or Intermediate Outcome Measure(s)
	<u>months of initiation.</u>	<p>(.2) <u>Maintain active caseload at capacity. The LHJ site will be placed on Corrective Action if active caseload is not consistently maintained above 85% of capacity. Following Policies and Procedures (P&F), determine the LHJ site's MCC with CHVP State staff and submit the MCC each year with CHVP Agreement Funding Application (AFA) Packet.</u></p> <p>(.3) <u>Maintain a minimum caseload of 85%; the LHJ site will be placed on a Performance Improvement Plan (PIP) if caseload drops under 85% as specified in CHVP P&P.</u></p> <p>(.4) <u>For home visitors funded at or above 25% through MIECHV, provide data for their entire caseload to CHVP. Consent forms must be completed at intake for all participants on the home visitor's caseload. NFP ONLY: The priority population form must be completed at intake and annually for all participants.</u></p>	<p>Home Visiting Program staff will monitor monthly caseload, including new enrollments and dismissals.</p>	<p>Present signed consent form to <u>CDPH-CHVP staff upon request.</u></p> <p><u>CHVP-NFP sites must submit priority population count to CHVP quarterly.</u></p>
1.5	LHJ site will ensure NFP or HFA program fidelity and quality assurance.	(.1) Abide by NFP and HFA model requirements and must be implemented in accordance with the NFP 18 Model Elements or the HFA 12 Critical Elements and the HFA Best Practice Standards.	Home Visiting Program staff will maintain current affiliation and accreditation with NFP National Service Office (NSO) or HFA Prevent Child Abuse America (PCAA) National Office.	Present to CDPH-CHVP staff upon request.
1.6	The LHJ site will implement the home visiting program using current policies and procedures.	(.1) Conduct an annual review of LHJ site policies and procedures and update as needed. (.2) Comply with CHVP Policies and Procedures as found on the CHVP website.		CDPH-CHVP staff will review LHJ site policies and procedures at site visit and upon request.

Exhibit A
Scope of Work

#	Short and/or Intermediate Objective(s)	Intervention, Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures	
			Process, Short and/or Intermediate Measures	Short and/or Intermediate Outcome Measure(s)
1.7	Collect participant data using HFA or NFP and CHVP- required forms and maintain current and accurate documentation. ⁴	(.1) Develop chart documentation processes and procedures. (.2) Home Visiting Program staff will implement and oversee chart audit process including review of current charts at a minimum of 3 times per year.	Home Visiting Program staff will maintain up-to-date chart documentation procedures. Home Visiting Program staff will maintain chart documentation and audit process.	CDPH-CHVP staff will review chart documentation and audit process at site visit.
CONTINUOUS QUALITY IMPROVEMENT (CQI) REQUIREMENTS				
1.8	Conduct a CQI process which is aligned with CHVP CQI improvement goals.	(.1) Perform CHVP directed CQI activities. (.2) Communicate quality improvement activities with the Community Advisory Board (CAB) or other community collaborative designated to address quality improvement.	Home Visiting Program staff will report action steps taken to achieve program improvement on selected priority areas. Home Visiting Program staff will maintain CAB as a resource for program improvement.	Home Visiting Program staff will participate in quarterly CQI teleconferences with CHVP Program Consultant. CDPH-CHVP staff will observe at CAB meeting annually.
1.9	LHJ site will use data to inform and improve program activities.	(.1) Home Visiting Program staff will use model issued reports and CHVP-created reports as available in the CHVP <u>ETQ data system</u> for the purposes of data cleaning, CQI, and program management.	Home Visiting Program staff will demonstrate understanding of the program quality measures.	CDPH-CHVP staff will observe at site visit and on CQI calls.

⁴-REQUIRED-SCREENING-AND-ASSESSMENT-TOOLS-<http://www.cdph.ca.gov/programs/mcah/Documents/400-10%20Required%20Screening.pdf>
DATA-COLLECTION-AND-STANDARDIZATION-<http://www.cdph.ca.gov/programs/mcah/Documents/600-10%20Data%20Collection%20Standardization.pdf>

Exhibit A
Scope of Work

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

Exhibit A
Scope of Work

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

Exhibit B, Attachment III
Budget
Year 3
(07/01/17 through 06/30/18)

Personnel Position Title/Classification	Original Annual Salary	Amendment Annual Salary	Original FTE %	Amendment FTE %	Original Annual Cost	Amendment Annual Cost
Dir of Public Health Nursing (MCAH Dir)	\$ 132,743	\$ 135,394	5%	5%	\$ 6,637	\$ 6,770
Nurse Manager (MCAH Coordinator)	\$ 112,436	\$ 0	40%	0%	\$ 11,244	\$ 0
Assistant Nurse Manager	\$ 109,170	\$ 109,505	100%	100%	\$ 109,170	\$ 109,505
Registered Nurse V	\$ 99,830	\$ 102,051	100%	100%	\$ 99,830	\$ 102,051
Registered Nurse IV	\$ 98,442	\$ 0	100%	0%	\$ 98,442	\$ 0
Registered Nurse IV	\$ 88,461	\$ 91,700	100%	100%	\$ 88,461	\$ 91,700
Registered Nurse III	\$ 75,641	\$ 84,631	100%	100%	\$ 75,641	\$ 84,631
Admin. Office Assistant III	\$ 45,030	\$ 41,789	5%	5%	\$ 2,252	\$ 2,089
Office Assistant III	\$ 40,501	\$ 47,804	100%	40%	\$ 40,501	\$ 19,122
Health Services Assistant	\$ 45,855	\$ 0	25%	0%	\$ 11,466	\$ 0
<u>Registered Nurse</u>		\$ 96,737		25%		\$ 24,184

Subtotal Personnel Total Salaries ~~\$ 539,694~~ \$ 440,052

Fringe Benefits (43.74 44.9999% of Personnel)

~~\$ 235,900~~ \$ 198,023

Total Personnel and Fringe Benefits ~~\$ 775,594~~ \$ 638,075

Operating Expenses

Training (Registration fees for CHVP required and other professional development trainings and CEUs as needed. Goal 1.3 in SOW)	\$ 1,371	\$ 2,093
Communication (Land lines and Nurse Home Visitor cell phones.)	\$ 2,613	\$ 2,613
Office Equipment Maintenance	\$ 2,400	\$ 2,400
General Office Supplies	\$ 3,700	\$ 2,898
Printing and Postage	\$ 7,500	\$ 0
Computer Equipment	\$ 600	\$ 0
Nurse-Family Partnership Fee (Goal 1.5 in SOW)	\$ 15,967	\$ 17,256

Total Operating Expenses ~~\$ 34,141~~ \$ 27,260

Equipment (major equipment >\$5,000)

Total Equipment \$ 0
\$ 0

Travel

TRAVEL (Staff travel to statewide CHVP conferences, Nurse Family Partnership or Healthy Families of America trainings (1.3 in SOW), and home visits (Goals 1.4, 1.5, 2, 3, 4, 5 in SOW))	\$ 23,026	\$ 17,535
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Total Travel Costs ~~\$ 23,026~~ \$ 17,535

Subcontracts

Total Subcontracts \$ 0
\$ 0

Other Costs

Outreach Materials (Client Outreach (Goal 1.4 in SOW))	\$ 1,100	\$ 500
Client Support Materials (Educational and parenting support materials (eg. Pamphlets, children's books).	\$ 2,936	\$ 985
Child safety items (eg. Cupboard locks, car seats). (Goals 2,3,4,5 in SOW).	\$ 2,000	\$ 200
Medical/Dental Supplies (Client assessment tools (Goal 1.3 in SOW))		\$ 854
<u>Client Educational Materials (Goals 2,3,4,5 in SOW)</u>		

Total Other Costs ~~\$ 6,036~~ \$ 2,539

Indirect Costs (40 25% of Total Personnel Costs and Fringe Benefits)

~~\$ 77,559~~ \$ 159,519

Total Budget ~~\$ 916,356~~ \$ 844,928

~~COLA - SIEU approved 3.42% cost of living adjustment off 07/01/15. Positions that receive this compensation will show a higher salary. Justification on file.~~

Exhibit B, Attachment IV
Budget
Year 4
(07/01/18 through 06/30/19)

Personnel Position Title/Classification	Original Annual Salary	Amendment Annual Salary	Original FTE %	Amendment FTE %	Original Annual Cost	Amendment Annual Cost
Dir of Public Health Nursing (MCAH Dir)	\$ 132,749	\$ 135,394	5%	5%	\$ 6,637	\$ 6,770
Nurse Manager (MCAH Coordinator)	\$ 112,436	\$ 0	10%	0%	\$ 11,244	\$ 0
Assistant Nurse Manager (1)	\$ 109,170	\$ 109,505	100%	100%	\$ 109,170	\$ 109,505
Registered Nurse V	\$ 99,890	\$ 102,051	100%	100%	\$ 99,890	\$ 102,051
Registered Nurse IV	\$ 96,442	\$ 0	100%	0%	\$ 96,442	\$ 0
Registered Nurse IV	\$ 86,461	\$ 91,700	100%	100%	\$ 86,461	\$ 91,700
Registered Nurse III	\$ 75,641	\$ 84,631	100%	100%	\$ 75,641	\$ 84,631
Admin. Office Assistant III	\$ 45,039	\$ 41,789	5%	5%	\$ 2,252	\$ 2,089
Office Assistant III	\$ 40,501	\$ 47,804	100%	40%	\$ 40,501	\$ 19,122
Health Services Assistant	\$ 45,885	\$ 0	25%	0%	\$ 11,466	\$ 0
<u>Registered Nurse</u>		\$ 96,737		25%		\$ 24,184
Subtotal Personnel Total Salaries	\$ 539,604	\$ 440,052				
Fringe Benefits (43.74 44.9999% of Personnel)					\$ 235,900	\$ 198,023
Total Personnel and Fringe Benefits	\$ 775,504	\$ 638,075				
Operating Expenses						
Training (Registration fees for CHVP required and other professional development trainings and CEUs as needed. Goal 1.3 in SOW)	\$ 1,371	\$ 2,093				
Communication (Land lines and Nurse Home Visitor cell phones.)	\$ 2,613	\$ 2,613				
Office Equipment Maintenance	\$ 2,400	\$ 2,400				
General Office Supplies	\$ 3,700	\$ 2,898				
Printing and Postage	\$ 7,500	\$ 0				
Computer Equipment	\$ 600	\$ 0				
Nurse-Family Partnership Fee (Goal 1.5 in SOW)	\$ 15,957	\$ 17,256				
Total Operating Expenses	\$ 34,141	\$ 27,250				
Equipment (major equipment >\$5,000)					\$ 0	\$ 0
Total Equipment					\$ 0	\$ 0
Travel						
TRAVEL (Staff travel to statewide CHVP conferences, Nurse Family Partnership or Healthy Families of America trainings (1.3 in SOW), and home visits (Goals 1.4, 1.5, 2, 3, 4, 5 in SOW))	\$ 22,026	\$ 17,535				
Total Travel Costs	\$ 22,026	\$ 17,535				
Subcontracts					\$ 0	\$ 0
Total Subcontracts					\$ 0	\$ 0
Other Costs						
Outreach Materials (Client Outreach (Goal 1.4 in SOW))	\$ 1,100	\$ 500				
Client Support Materials (Educational and parenting support materials (eg. Pamphlets, children's books). Child safety items (eg. Cupboard locks, car seats). (Goals 2,3,4,5 in SOW).	\$ 2,936	\$ 985				
Medical/Dental Supplies (Client assessment tools (Goal 1.3 in SOW))	\$ 2,000	\$ 200				
<u>Client Educational Materials (Goals 2,3,4,5 in SOW)</u>		\$ 854				
Total Other Costs	\$ 6,036	\$ 2,639				
Indirect Costs (40 25% of Total Personnel Costs and Fringe Benefits)					\$ 77,550	\$ 159,519
Total Budget	\$ 918,356	\$ 844,928				

COLA - SIEU approved 0.42% cost of living adjustment eff. 07/01/15. Positions that receive this compensation will show a higher salary. Justification on file.