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



ITEM: 3.32 (ID # 24921) MEETING DATE: Tuesday, May 21, 2024

FROM : PUBLIC SOCIAL SERVICES:

SUBJECT: DEPARTMENT OF PUBLIC SOCIAL SERVICES (DPSS): Accept the Children's Crisis Continuum Pilot Program (CCCPP) grant award from the California Department of Social Services (CDSS) to develop a highly integrated continuum of care designed to serve foster youth who are in crisis, through June 30, 2028; All Districts. [Total Cost \$10,000,000; 100% State Funding]

RECOMMENDED MOTION: That the Board of Supervisors:

 Accept the Children's Crisis Continuum Pilot Program (CCCPP) grant award from the California Department of Social Services (CDSS) for the total aggregate amount of \$10,000,000 to develop a highly integrated continuum of care designed to serve foster youth who are in crisis through June 30, 2028;

Continued on Page 2

ACTION:A-30, Policy

5/8/2024

MINUTES OF THE BOARD OF SUPERVISORS

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

Ayes:	Jeffries, Spiegel, Washington, Perez and Gutierrez
Nays:	None
Absent:	None
Date:	May 21, 2024
XC:	DPSS

Kimberly A. Rector Clerk of the Board By:

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

RECOMMENDED MOTION: That the Board of Supervisors:

- 2. Authorize the Director of DPSS, or designee, to sign Standard Agreement #ALLOC-23-0005 with the CDSS to accept the grant award;
- 3. Authorize the Director of DPSS, or designee, to administer the Children's Crisis Continuum Pilot Program allocation and execute any certifications, agreements, assurances, reports, memorandums of understanding or amendments thereto, or other related documents required by CDSS to effectuate the allocation, as approved to form by County Counsel, and consistent with the Board's approval; and
- 4. Authorize the Director of DPSS, or designee, to:
 - a. Accept additional funding, if available, in the current or future fiscal year(s) through 2028, as a result to the Children's Crisis Continuum Pilot Program Initiative set form by CDSS; and
 - b. Execute subsequent amendments, agreements, and Memorandum of Understanding resulting from additional funding, as approved to form by County Counsel, and consistent with Board approval that (a) make modifications to the scope of work that stay within the intent of the agreement, and (b) make modifications to the compensation provisions that result from an additional funding allocation.

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$0	\$835,689	\$10,000,000	\$0
NET COUNTY COST	\$0	\$0	\$0	\$0
SOURCE OF FUNDS: 100% State			Budget Adjus	stment: No
			For Fiscal Ye	ar: 23/24 – 27/28

C.E.O. RECOMMENDATION: Approve

BACKGROUND:

Summary 5 1

On February 24, 2023, Riverside County Department of Public Social Services was awarded \$10,000,000 to participate in the Children's Crisis Continuum Pilot Program, which allows counties, or regional collaboratives of counties, to develop a robust, highly integrated continuum of services designed to serve foster youth who are in crisis.

The pilot program's intention is to address perceived gaps in the continuum of services and placements so that behavioral, developmental and physical health needs of foster youth are met within the least restrictive care environment. The pilot program shall be implemented until June 30, 2028.

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The County of Riverside, as a lead agency, submitted a combined proposal to CDSS on behalf of Riverside and San Bernardino Counties, to request funding for the Children's Crisis Continuum Pilot Program. CDSS awarded both Counties to provide services to their foster youth who are in crisis and according to the Pilot Program's guidelines.

The proposal outlined therapeutic interventions and specialized programming to permit the seamless transition for the appropriate treatment of foster youth between placement settings and health care programs, while ensuring that all the necessary health and social services are available within the continuum. Programs offered under the pilot shall include Crisis Stabilization Unit, Psychiatric Health Services, Children Crisis Residential Unit and Intensive Services Foster Care. The Pilot program administered under both Counties shall have a total capacity of four (4) children/youth served at a time, who shall be replaced once a child/youth exits the Pilot Program.

Impact on Citizens and Businesses

This funding will allow both Riverside County and San Bernardino County, under the pilot's guidelines, to provide short-term crisis stabilization, therapeutic interventions, and specialized programming to children/youth which shall support California's commitment to keeping foster children/youth in family-based settings to the greatest possible degree based on the best interest of the community.

SUPPLEMENTAL: Additional Fiscal Information

The CCCPP is one hundred percent (100%) State funded.

FISCAL YEAR PERIOD	ANNUAL PAYMENT
July 1, 2024 through June 30, 2025	\$835,689
July 1, 2025 through June 30, 2026	\$3,871,213
July 1, 2026 through June 30, 2027	\$3,972,742
July 1, 2027 through June 30, 2028	\$826,918
July 1, 2024 – June 30, 2028 – DPSS (lead agency)	\$493,438
Total	\$10,000,000

ATTACHMENT:

Attachment A: CDSS Allocation Agreement 23-0005–Children's Crisis Continuum Pilot Program

Katherine Wilkins, atherine Wilkins, Deputy County Counsel Katheri

aron Gettis 5/8/2024 Aaron Gettis, Chie

5/9/2024

STANDARD AGREEMENT

GRANT AGREEMENT NUMBER

GRANT \Box (NEW) \Box (AMENDED)

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

State Agency's Name

Grantee's Name

2. The term of this Agreement is:

Start Date

Through End Date

- 3. The maximum amount of this Agreement is:
- 4. The parties agree to comply with the terms and conditions of the following exhibits, which are by this reference made a part of the Agreement.

Exhibits	Title	Pages
Exhibit A		
Exhibit A-1		
Exhibit A-2		
Exhibit A-3		
Exhibit A-4		
Exhibit B		
Exhibit B-1		
Exhibit B-2		
Exhibit B-3		
Exhibit B-4		
Exhibit C		
Exhibit C-1		
Exhibit C-2		
Exhibit D		
Exhibit D-1		
Exhibit D-2		
Exhibit E		
Exhibit E-1		
Exhibit E-2		
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Exhibits	Title	Pages
Exhibit F		
Exhibit F-1		
Exhibit F-2		
Exhibit G		
Exhibit G-1		
Exhibit G-2		
Exhibit H		
Exhibit H-1		
Exhibit H-2		
Exhibit I		
Exhibit I-1		
Exhibit I-2		

Items shown with an asterisk (*), are hereby incorporated by reference and made part of this agreement as if attached hereto.

These documents can be viewed at https://www.dgs.ca.gov/OLS/Resources

IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.

GRANTEE				
Grantee's Name (if other than an individual, s	state whether a corporation,	partnership, etc	.)	
Grantee's Business Address	City	State	Zip	
Printed Name Of Person Signing	Title			
Grantee Authorized Signature	Date Signed			
STA	TE OF CALIFORNIA			
Agency Name				
Agency Business Address	City	State	Zip	
Printed Name Of Person Signing	Title			
Agency Authorized Signature	Date Signed			
Evenuetion on Other (If explicable)	l.			

Exemption or Other (If applicable)

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EXHIBIT A (Grant Agreement)

SCOPE OF WORK

A. BACKGROUND AND PURPOSE

The System of Care (SOC) provides the statutory and policy framework to ensure that services and supports provided to foster youth and their families are tailored towards the goal of achieving permanency in a stable, nurturing, and permanent family. In the years since implementing the Continuum of Care Reform through Assembly Bill (AB) 403 (Chapter 773, Statutes of 2015) and Senate Bill (SB) 794 (Chapter 425, Statutes of 2015), California has made clear and impactful progress in developing alternative, therapeutic, family-based placement options for foster youth. Assembly Bill (AB) 2083 (Chapter 815, Statutes of 2018) built upon SOC efforts by promoting a coordinated, timely, and trauma-informed system-of-care approach for children and youth in foster care who have experienced severe trauma.

Despite these advancements, some child welfare and/or probation involved youth may have urgent and complex needs that are not immediately able to be met in a family setting and require short-term intensive stabilization and transition support in a trauma-focused residential treatment setting. To support California's commitment to keep youth in families to the greatest extent practicable based on the best interests of the youth, and to provide for innovative and constructive approaches to therapeutic treatments, Assembly Bill (AB) 153 (Chapter 86, Statutes of 2021) requires the California Department of Social Services (CDSS), jointly with the State Department of Health Care Services (DHCS), to establish the Children's Crisis Continuum Pilot Program (Welfare and Institutions Code (WIC) section 16550 et seq.). The pilot program shall be implemented until June 30, 2028.

The purpose of the pilot program is to allow counties, or regional collaboratives of counties, to develop a highly integrated continuum of services designed to serve foster youth who are in crisis. The pilot program's intention is to address perceived gaps in the continuum of care, including services and placements, so that behavioral (including mental health and substance use disorders), developmental, and physical health needs of foster youth are better met and that there are no gaps in the continuum of care.

The main goals of the pilot include:

1. The development of a trauma-focused system of care through which intensive care, qualified supervision, and behavioral health services are provided in a home environment including on-site crisis response to respond to and de-escalate circumstances in which foster youth are experiencing behavioral health symptoms/conditions causing distress, with the goal of preventing hospitalizations and unnecessary interactions with law enforcement; and,

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2. The implementation of a network of services so that when a youth requires a higher or lower level of intervention, the movement within the levels of services and between levels of care is not disrupted or delayed by the need to arrange for provision of services and care or locate appropriate placements that include or can accommodate the provision of services and care.

B. TERMS AND CONDITIONS

The CDSS and County of Riverside Department of Public Social Services (Grantee) enter into this Grant Agreement (Agreement) for the Grantee to provide a Children's Crisis Continuum Pilot Program ("the pilot" or "the pilot program"), which is a continuum of services, including crisis stabilization, therapeutic interventions, and specialized programming to permit the seamless transition between placement settings and programs for the appropriate treatment of foster youth. Grantee shall ensure that all the necessary services and supports are available and provided within the continuum.

The CDSS shall award the amount of \$10,000,000 to County of Riverside Department of Public Social Services for the grant period of July 1, 2023 through June 30, 2028. The funds provided for services pursuant to this Agreement shall be for the sole purpose of providing a highly integrated continuum of care¹ for the foster youth served in the pilot program. The Grantee shall develop a continuum of care that is designed in compliance with all applicable state and federal laws to permit seamless transitions between treatment settings and programs for the appropriate treatment of foster youth. Funding received from the CDSS pursuant to the pilot may be used to supplement but shall not be used to supplant existing funding. Except as otherwise provided, the Grantee shall provide a Children's Crisis Continuum Pilot Program, which shall include, at a minimum:

1. Crisis Stabilization Units² which must provide service activities that include but are not limited to assessment, collateral, therapy, and referral for up to 23 hours and 59 minutes for youth experiencing a mental health crisis, serve no more than eight foster youth, be licensed as a 24-hour health care facility or hospital-based outpatient program or provider site and be co-located with, or within 30 miles of, a psychiatric health facility or other secure hospital alternative setting that is capable of meeting the needs of youth experiencing a mental health crisis. If the youth's exhibiting symptoms have not subsided within 23 hours and 59 minutes, youth shall be transitioned to a setting that is able to meet the needs of the youth. Grantee must comply with all

¹ For the purposes of the Children's Crisis Continuum Pilot Program, the California Department of Social Services defines "continuum of care" as an integrated system of care that guides and tracks foster youth over time through a comprehensive array of foster care placements and behavioral health supports and services spanning all levels of intensity of care.

² Although the California Department of Social Services would like to see a full continuum, per WIC Section 16553(b)(2), the Department may award a county whose Children's Crisis Continuum Pilot Program does not include a psychiatric health facility and a crisis stabilization unit, or a psychiatric health facility on its own.

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regulations contained in Chapter 11 (commencing with Section 1810.100) of Division 1 of Title 9 of the California Code of Regulations that are applicable to the provision of crisis stabilization, and specifically including Section 1810.210. Relevant regulations include, but are not limited to, the following: 9 CCR 1840.338 and 1840.348.

- 2. Psychiatric Health Facilities³ which must provide a secure, highly individualized, therapeutic, hospital-like setting for foster youth who require inpatient treatment and serve no more than four youth at a time. The psychiatric health facility shall be integrated with community-based supports and tiered placement settings, including Intensive Services Foster Care (ISFC) and Enhanced ISFC homes. The psychiatric health facility shall be licensed by DHCS and shall be operated in accordance with Chapter 9 (commencing with Section 77001) of Division 5 of Title 22 of the California Code of Regulations. Additional relevant citations include but are not limited to:
 - 9 CCR 1810.237 and 1840.370.
 - Welfare and Institutions Code (WIC) section 16553(b)(1)(C)(iii)
- 3. Crisis Residential Programs which must provide short-term, highly individualized stabilization and support for foster youth who do not require inpatient treatment, but are experiencing acute mental health crisis, serve no more than four youth at a time, and shall be designed to reduce the reliance for care in emergency rooms and psychiatric hospitals. The crisis residential program shall be operated in accordance with all statutes and regulations governing the placements of foster youth, including the California Community Care Facilities Act (Article 1 (commencing with Section 1500) of Chapter 3 of Division 2 of the Health and Safety Code). The crisis residential program shall be operated in accordance with all statutes and regulations governing its licensure category, including, for short-term residential therapeutic programs, the interagency placement committee process established pursuant to WIC section 4096. Additional relevant citations include but are not limited to, 9 CCR 1840.356 and 1840.364.
- 4. Intensive Services Foster Care Homes which must be designed to step youth down to a less restrictive placement, have the capacity to maintain at least two times the amount of homes as the number of beds in the residential treatment setting used in the pilot, and have in-home staff available 24 hours a day, 7 days week to provide care, behavioral support, permanency services, specialty mental health services and educational services.

³ Although the California Department of Social Services would like to see a full continuum, per WIC Section 16553(b)(2), the Department may award a county whose Children's Crisis Continuum Pilot Program does not include a psychiatric health facility and a crisis stabilization unit, or a psychiatric health facility on its own.

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- 5. Community-based Supportive Services which must provide intensive transition planning and aftercare services using a team approach; provide integrated transition services and supports prior to and after transitions between levels of care; provide an intensive transition planning team consisting of, at a minimum, a mental health professional with a master's degree who is either licensed or license-eligible, a support counselor with a bachelor's degree, and a peer partner, that may serve up to four foster youth at a time and shall have the ability to support foster youth in any out-of-home treatment setting in the continuum of care;⁴ work in collaboration with county child welfare agency, probation department, and mental health plan to provide at least six months of aftercare services; provide mobile crisis response and/or crisis response teams that are available 24 hours a day, 7 days a week to respond to foster youth experiencing crisis in the community; provide access to non-clinical services, including, but not limited to the following:
 - Mentoring programs
 - Faith-based/cultural activities
 - Volunteer opportunities

6. Term:

- a. The term of this Agreement shall be July 1, 2023 through June 30, 2028.
- 7. Grantee Final Work Plan and Budget:
 - a. Grantee shall prepare and submit to the CDSS a Final Work Plan and Budget prior to the execution of this Agreement, which shall describe how the Grantee will provide the services in the Scope of Work and shall include key dates addressing the implementation of the following:
 - 1) Existing capacity and program sustainability.
 - 2) A plan to leverage existing infrastructure.
 - 3) A plan to implement service components and ensure staff capacity.
 - 4) A plan to fill identified existing gaps in both staff and services capacity.
 - 5) Ability to administer the program, in full.
 - 6) Ability to oversee all levels of the continuum of care.

⁴ Although the California Department of Social Services would like participants to implement the intensive transition planning team as described above, per WIC Section 16553(b)(1)(E)(iv), the Department may award a county whose Children's Crisis Continuum Pilot Program has an alternate proposal for transition planning services, including modified standards.

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- 7) A detailed program plan budget including budget line items, a budget narrative, and a subcontractor table for the Children's Crisis Continuum Pilot Program.
- 8) Ability to partner and collaborate with county child welfare, behavioral health (including both mental health and substance use disorder prevention, treatment, and recovery services), probation, regional centers, and education departments in the design, delivery, and evaluation of the pilot program.
- b. Grantee may modify the Final Work Plan only with prior written consent from the CDSS. Approved modifications to the Final Work Plan shall not require a formal amendment to the Agreement.
- c. The CDSS may share the Final Work Plan and Budget with the DHCS.

C. GRANTEE RESPONSIBILITIES

In addition to the requirements set forth above, the Grantee shall:

- 1. Undertake, carry out, and complete, in a competent and satisfactory manner, all the work and services set forth in this Agreement.
- 2. Acquire prior written approval from the CDSS before utilizing the services of a subcontractor. The subcontractor must be an individual or non-profit organization. Entering into this Agreement with the CDSS does not constitute written approval of any proposed subcontractor.
- 3. Grantees approved to subcontract shall:
 - a. Ensure that at all times during the term of this Agreement, subcontractors maintain the qualifications required to provide the services for which the Grantee receives funding.
 - b. Provide to CDSS a signed agreement between Grantee and each subcontractor within 90 days of the final execution of the agreement that describes the services to be provided by the subcontractor pursuant to this Agreement, and the compensation to be received by the subcontractor for performing said services.
 - c. Assume responsibility for all work performed under this Agreement. If any subcontractor fails to perform any work in a manner satisfactory to the CDSS, the Grantee shall remove the subcontractor immediately upon written request of the CDSS and the subcontractor shall not be re-employed in the work of the Grantee required under this Agreement.
 - d. Verify status and/or satisfactory completion of the activities by subcontractor before submitting an Invoice Claim Form or report, which includes the subcontractor activities.
 - e. Not substitute any subcontractor without advance written consent of the CDSS.

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- f. Ensure that the subcontractor complies with all applicable state and federal laws and regulations, and any other relevant guidance set forth by the CDSS or the DHCS.
- g. Ensure that if multiple subcontractors are involved with performance of activities described in the Agreement, that such subcontractors will develop and enter into Memorandum of Understanding or other business agreements between themselves that defines the processes and procedures for provision of services to foster youth, including, but not limited to the :
 - Case Planning
 - Care Coordination
 - Intensive Transition Planning
 - Assessment
 - Transportation between service settings
 - Information sharing
 - Data collection and dissemination
- 4. Maintain records of any and all services performed for a period not less than three (3) years after final payment or a longer retention period, if applicable.
- 5. Provide the CDSS with unrestricted access to all documents, files, reports, materials, and data developed by the Grantee or their subcontractor within five (5) business days of request.
- 6. Certify the eligibility of Children's Crisis Continuum Pilot Program participants and maintain certification documents.
- 7. Collaborate with relevant county departments including child welfare, mental health plan, Substance Use Disorder (SUD) treatment plan (either Drug Medi-Cal or Drug Medi-Cal Organized Delivery System), behavioral health, probation, regional center, and education in the design, delivery, and evaluation of the pilot program.
- 8. Submit Children's Crisis Continuum Pilot Program Quarterly Progress Reports in the format and within the time frames specified by the CDSS. Reports must address how the Grantee is meeting the objectives of the Children's Crisis Continuum Pilot Program and shall include, but not be limited to, qualitative and quantitative youth-specific information and data, and information that may pertain to the overall continuum pilot, consistent with the evaluation criteria set forth in WIC section 16555, and any other outcomes reporting that the CDSS and the DHCS requires.

NOTE: Grantee's Quarterly Progress Reports are an integral part of the State's ability to meet Children's Crisis Continuum Pilot Program reporting requirements.

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- 9. To the extent that Medi-Cal services are provided through the pilot program, ensure that service providers comply with all relevant state and federal Medi-Cal (Medicaid) laws, including applicable subregulatory guidance, contracts, and state plan provisions. Nothing in this Agreement shall be construed as an exemption for compliance with these state and federal Medi-Cal (Medicaid) laws.
- 10. To the extent that services are provided through licensed or certified mental health facilities and/or substance use disorder treatment facilities, ensure that all services are provided in compliance with relevant licensing laws and subregulatory guidance. Nothing in this Agreement shall be construed as an exemption for compliance with state and federal laws pertaining the provision of services in licensed or certified mental health facilities or substance use disorder treatment facilities.
- 11. Submit Children's Crisis Continuum Pilot Program Final Progress Report in the format and within the time frame specified by the CDSS. Report must address how the Grantee met the objectives of the Children's Crisis Continuum Pilot Program and shall include, but shall not be limited to, qualitative and quantitative youth-specific information and data, and information that may pertain to the overall pilot program, consistent with the evaluation criteria set forth in WIC section 16555, and any other outcomes reporting that the CDSS and the DHCS requires.
- 12. Provide Children's Crisis Continuum Pilot Program proposed budget narrative for the FY 2023-28 project period that shows the correlation between the proposed budget, project activities, and the pilot program components and supporting documentation in the format specified and within the time frames specified by the CDSS.
- 13. Meet with CDSS and DHCS staff upon request and/or as necessary regarding the operation of the Children's Crisis Continuum Pilot Program. Such meetings shall include any technical assistance sessions, learning sessions, or webinars related to the pilot provided by the CDSS or any of its subcontractors.
- 14. Reimburse the CDSS and/or the DHCS for any disallowed costs as determined by a state and/or federal audit or review.
- 15. Participate and present at conferences and workshops, at the request of the CDSS, in order to disseminate and share Children's Crisis Continuum Pilot Program activities, program knowledge, and best practices; and network and exchange information with other organizations regarding the Children's Crisis Continuum Pilot Program.
- 16. Meet, collaborate to develop procedures for data collection and dissemination, disseminate data to, and collaborate with any subcontractors hired by the CDSS to conduct evaluation(s) of the Children's Crisis Continuum Pilot Program, including the Interim Report as described in WIC section 16555.

EXHIBIT A (Grant Agreement)

D. CDSS RESPONSIBILITIES

- 1. Provide program consultation and technical assistance to the Grantee upon request. A CDSS Grant Manager will be assigned to assist the Grantee. The Grant Manager will be the primary contact responsible for consultation and assistance to the program.
- 2. Monitor and evaluate the Grantee's performance, expenditures, and service levels for compliance with Grant requirements. The CDSS and any of its subcontractors may review data, materials, and publications used by the Children's Crisis Continuum Pilot Program, etc., and all fiscal records related to the Children's Crisis Continuum Pilot Program. Grant monitoring shall be accomplished in a manner, location, and time at the sole discretion of the CDSS.
- 3. Provide the Grantee with reporting time frames for submission of reports.
- 4. Evaluate Grantee's Quarterly Progress Report and Final Work Plan for compliance and provide a written response within 30 business days of receipt if the report is determined inconsistent with reporting requirements.
- 5. Review the proposed budget narrative that shows the correlation between the proposed budget, project activities, and the pilot program components submitted by Grantee for allowable costs and approve as appropriate, as determined in the CDSS' sole discretion, and conditioned on the availability of funds. In the event an audit or a review establishes the costs were not allowable, the CDSS will work with the Grantee to ensure the return of any improper payment or overpayment.
- Retain the right to modify the program and this Scope of Work based on the results of its evaluation and review. The CDSS may use the results of monitoring reviews in future grant decisions. The evaluation shall include, but is not limited to, Grant compliance, effectiveness of planning, and program outcomes.

E. MUTUAL RESPONSIBILITIES

- 1. Amendments to the Scope of Work must be initiated in writing by either the CDSS or the Grantee and must be approved in writing by the CDSS before any changes can be implemented.
- 2. Each party shall give to the other party ten (10) days prior written notice of a change in the Program Representative.

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F. ALLOWABLE ACTIVITIES

Allowable activities shall support the Grantee's capacity to provide short-term crisis stabilization, therapeutic intervention, and specialized programming in an unlocked, staff-secured setting with a high degree of supervision and structure and the goal of supporting the rapid and successful transition of the child back to the community. The activities must include treatment options that are needed to support California's commitment to keep youth in families to the greatest extent possible based on the best interest of the youth. Allowable activities may include, but are not limited to:

- 1. Maintenance of a case management system or strategy to ensure continuity of care for youth throughout the continuum;
- 2. Implementation of family supports and services to keep youth in family settings from escalating to more restrictive settings;
- 3. Services to conduct intensive family finding and engagement to support permanency and foster connections;
- 4. Providing medically necessary behavioral health supports and services, including specialty mental health services, consistent with all state and federal Medicaid requirements;
- Services to ensure access to educational services, permanency services, behavioral support services, intellectual/developmental delay services, and other communitybased services;
- 6. Services to support implementation of culturally and linguistically responsive and competent treatment across all programs in the pilot.

G. ADDITIONAL TERMS AND CONDITIONS

In addition to the requirements set forth above, the Grantee shall:

- 1. Expend funds as described in the Scope of Work and Exhibit B Budget Detail, the Payment Provisions of this Agreement, and Grantee's Final Work Plan and Budget, unless prior written permission is granted by the CDSS.
- 2. Ensure that any amendments to the Scope of Work be initiated in writing by either the CDSS or the Grantee, and be approved in writing by CDSS, before any changes can be implemented.
- 3. Maintain and manage records of Children's Crisis Continuum Pilot Program activities and expenditures in accordance with all applicable state and federal privacy laws.

EXHIBIT A (Grant Agreement)

- 4. Comply with any written response from the CDSS to the Grantee's reports, including requested due dates for any additional information or required reports.
- 5. Return any improper payment or overpayment upon request and within the timeframe specified by the CDSS and/or the DHCS.

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H. PROGRAM REPRESENTATIVES

The Program Representatives during the term of the Agreement shall be:

CDSS	Grantee
John Gugino Associate Governmental Program Analyst Policy and Technical Assistance Bureau	Nicole Ford Administrative Service Manager Riverside County Department of Public Social Services (DPSS)
744 P Street, MS 8-3-570	10281 Kidd St., Bldg. A, 2nd Floor
Sacramento, CA 95814	
(916) 261-0339	Riverside, CA 92503
ChildrensCrisisContinuumPilot@dss.ca.go	(951) 204-0851
	 nford@rivco.org

Either party may change the Program Representative but is required to provide written notification of the change to the other party within ten (10) business days. Approved changes shall not require an amendment to this Agreement.

Inland Empire Collaborative Response – Riverside & San Bernardino Counties (Final Work Plan)

A. Pilot Overview:

1. The Inland Empire Collective's (IEC) Need for and Objectives of the CCCPP

A large number of our foster youth require an intricate level of acute care that often times are difficult to meet in a standard family-based setting. One major goal of the CCCPP is to develop family-based placements that are capable of caring for youth with high acuity needs. The state of California is in a crisis where the enhanced placement needs of the youth are very difficult to address due to the gaps that exist in the current continuum including but not limited to providers reducing their capacity or closed/ing their doors, with no alternative placement options for youth with unmet complex needs. Additionally, in Riverside and San Bernardino Counties we have seen a decrease in family-based placement settings for this population. This has put both counties in a position of having long wait periods for placements or viable placement options for our youth.

The Inland Empire Collaborative (IEC), which is a partnership between Riverside and San Bernardino Counties, has built this pilot designed to support *every* youth with a strong system of care approach. This pilot will address the gaps in the continuum of services and placements so that all needs of the youth are met within the least restrictive environment. This pilot will provide seamless transitions from one placement to another with services available and in place before each youth's transition. The IEC will provide the oversight to services for youth and families where youth are the subject of maltreatment, providing a variety of placement options, including those integrated with behavioral health services. The oversight will occur from the moment they enter out of home care until they successfully meet treatment goals and stabilize in the least restrictive environment.

2. How the IEC's CCCPP will Achieve Objectives

As part of the CCCPP, the IEC will establish a program with the capacity to provide short-term crisis stabilization, therapeutic interventions, and specialized programming to foster youth. The pilot will provide a trauma-focused continuum of care designed to support acute and complex needs including crisis-response in a family-based setting. Non-family-based service settings within the pilot shall include a trauma-focused model of care, be unlocked, but staff secured, with a high degree of qualified supervision and structure and shall also align with the goals of maintaining family and community connection and supporting the rapid and successful transition of the youth back into family-based settings. Treatment options under the pilot support California's commitment to keeping youth in family-based settings to the greatest possible degree based on the best interest of the youth.

The IEC will ensure pilot providers successfully deliver Specialty Mental Health Services (SMHS) to each youth, with specialized mental health staff in each aspect of the continuum. Pilot providers will be trained in trauma informed care. There will be oversight of these services from the MHP in each county. Substance Use Disorders (SUDS) prevention will also be an aspect of each program in the pilot. Prevention services will be available directly from the provider. Recovery Services, in both counties will be provided by the county SUDS team. This will include assessments and referrals to treatment. Medications for addiction will be provided by a medical doctor, off site. Educational needs will be met through collaboration with the local school district, as well as both counties have educational liaisons/case managers that will assist in educational needs of the youth. The IEC will

Inland Empire Collaborative Response – Riverside & San Bernardino Counties (Final Work Plan)

work together with Inland Regional Center (IRC) on cases where identified youth meet Regional Center criteria for services related to developmental and/or intellectual needs, placement coordination, crisis stabilization and transitional services. Medical needs will be provided off site, though a doctor's office, or the local hospital.

The IEC has an established workgroup in each county that meets respectively on a weekly basis to discuss identified youth with acute, complex care needs to identify barriers to placement services due to history of instability, significant Mental Health and/or Behavioral needs. The complex treatment needs of these identified youth create extreme challenges to provide placements in family-based settings. This weekly workgroup meeting serves as the preliminary marker for identifying potential youth from each county for the pilot by completing the IEC referral form.

The IEC will utilize a Pilot Admissions Team (PAT) comprised of representatives from both counties' child welfare, probation, and behavioral health departments, as well as an IEC Program Administrator, to review and discuss the referrals to determine if the youth meet the criteria for the pilot. The IEC Program Administrator as staff of the lead agency, will work closely with Riverside County Fiscal Department, Accounting team to monitor the budget and ensure funding supports pilot participants 3. Facilities, Programs, and Services that Compose the IEC's CCCPP

Intensive Transition Planning (ITP) Team İ.

The Intensive Transition Planning (ITP) teams will play an integral role in ensuring coordination of services with the contracted providers throughout the duration of the pilot. The ITP team consists of three Behavior Health staff (i.e., Clinical Therapist, Rehab Specialist, and Peer Partner) from Riverside and San Bernardino County Departments of Behavioral Health (DBH). This ITP team will exist for every four-youth enrolled in the pilot. They will serve as the center of the coordination and service planning, as they will coordinate the weekly workgroup meetings.

The ITP team will be responsible for contacting providers, inviting them to CFTM meetings to discuss the youth's complex needs, interventions, treatment goals, and supports tailored to ensure the youth can smoothly transition through the continuum of care. The ITP team is responsible for making sure that youth will remain connected to any supports and services that they can continue to access after transitioning out of the CCRP. The ITP team will also report to the PAT team the status of each youth as they matriculate through the various levels of care during their treatment. In addition, the Program Administrator, IEC Steering Committee representatives, and all providers will meet monthly via a Joint Operation Meeting (JOM) where the provisions for the pilot, contractual language, and service coordination is reviewed and discussed to remove any barriers. The frequency of the JOMS meetings will be re-evaluated as the need arises.

İİ. The IEC's Wrap-Informed Intensive Community-Based Model (Intensive Stabilization Services – San Bernardino County)

The IEC will utilize a Wrap-Informed Intensive Community-Based Model. Family voice with informed choice is the driving force in coordination of services. We understand that community-based and intensive care allows for efforts to engage families continually. The Wrap-Informed Intensive Community Based Model uses an individualized, team-based, collaborative process to provide a coordinated set of services and supports. The intensive community-based model establishes systems of care based on the individualized needs of the youth. It provides trauma informed

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services in-home and community-based settings, establishing a roadmap with short- and long-term strategies to ultimately meet the desired goals of improved safety, permanency, and well-being outcomes for youth, and families. The team approach to care is guided and driven by the youth and family. The team facilitates a process for the youth and family to set goals that meet the youth's needs and develop an individualized care plan based on the youth and family's strengths. A care coordinator engages family members, friends, and care providers to serve as members of the wraparound team. The model provides planning and linkages for youth with complex emotional, behavioral, or mental health needs, and their families. Programmatic services are designed to ensure a stable placement for youth by addressing their identified needs. Services are provided a flexible schedule to accommodate youth and families by working evenings and weekends, and by responding to mental health crises 24 hours a day, seven days a week. There is no limit on the length of services provided and services will remain in place as determined by needs assessments and ITP Team.

San Bernardino County Child and Family Services partners with their Behavioral Health Department will provide the aforementioned services.

iii. Expedited Transition Services (Intensive Stabilization Services- Riverside County) Expedited Transition Services (ExTS) support complex care needs youth to preserve and stabilize placements. Within 24 hours, at any service level in the pilot, the process will begin for the youth to receive an assessment for SMHS as well as an SUD screening to determine the array of services needed for the youth. These services will follow the youth through all levels of placement to provide continuity of care. These services will be provided as long as the youth is involved in the pilot. The intensive mental health services are strategically individualized and evaluated on an ongoing basis. Each youth is evaluated to receive some, or all, of the mental health services that are available including individual, family, and group therapy, Intensive Home-Based Services (IHBS), Intensive Care Coordination (ICC), rehabilitation, collateral and case management, and medication management services. When Therapeutic Behavioral Services (TBS) are determined to be a need, the provider will make a referral to the appropriate MHP to arrange provision of that service. In addition, once the SUD screening is completed by the provider, they will follow the protocols to refer to the appropriate level of care.

Riverside County has existing contracts in place with Seneca Family Agencies and Pacific Clinics with a term through June 30, 2026, and will renew contract terms based on available funding.

iv. Family Urgent Response System (FURS)

The IEC will provide community-based support services consistent with the California Family Urgent Response System (FURS), which will provide a county-level system that will respond independently across Riverside and San Bernardino counties using crisis intervention services including phone-based response, in-home, and in-person mobile response, after hours, weekends, and holidays during situations of instability, to preserve the relationship of the caregiver and the youth. Initially a phone call will be made to the provider, an assessment of the situation will be made. At this time, it will be determined if an in-person response is necessary. If an in-person response is needed the FURS provider will go to the home and provide crisis intervention services. Both counties Behavioral Health Departments maintain a toll-free hotline available 24 hours a day, 7 days a week staffed with counselors trained in conflict resolution and de-escalation techniques for youth impacted by trauma. ALLOC-23-0005

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The FURS team will interact with the ITP teams in that the ITP teams will be given any reports from any FURS responses in relation to the youth in the pilot. As for the PAT team, when considering youth for the pilot, the PAT team may request if the youth current provider has requested the services of FURS providers, and what that consisted of.

Both Counties CSUs have established MOUs with their respective Behavioral Health Departments for FURS and will utilize the existing agreements for services.

As provided below, see San Bernardino County existing FURS providers.

Lutheran Social Services (LSS)

Contact Person: Tawanda Counts 309 East Mountain View St. Ste. 100 Barstow, CA 92311 Phone: (760) 256-7279

Contact Person: Felix Hallig 58923 Business Center Dr. Ste. A – E Yucca Valley, CA 92284 Phone: (760) 365-7209

Mountain Counseling Services & Training Contact Persons: Angela Harrington / Rhonda Boss 340 Highway 138 Crestline, CA 92325 Phone: (909) 336-3330

Pacific Clinics Contact Persons: Candy Curiel / Rachel Riphagen 572 North Arrowhead Ave. Ste. 100 San Bernardino, CA 92401 Phone: (909) 266-2700

South Coast Community Services (SCCS) Suzette Toscano 1461 East Cooley Dr. Ste. 100 Colton, CA 92324 Phone: (877) 527-7227

Poonam Natha 1425 West Foothill Blvd. Ste. 200 Inland Empire Collaborative Response – Riverside & San Bernardino Counties (Final Work Plan)

Upland, CA 91786 Phone: (877) 527-7227

Victor Community Support Services (VCSS) Contact Person: Denice Hutner 222 East Main St. Ste. 117 Barstow, CA 92311 Phone: (760) 255-1496

Elizabeth Madsen 15095 Armargosa Rd. Ste. 201, 205, 208 Victorville, CA 92394 Phone: (760) 245-4695

v. Intensive Services Foster Care (ISFC) Homes

The pilot will support four (4) ISFC beds that includes two (2) E-ISFC and two (2) ISFC with Integrated Wrap. Each E-ISFC and ISFC with integrated wrap home will have one bed per home. Currently San Bernardino County has a contract with The Heart Matters FFA for 10 E-ISFC homes. Currently, The Heart Matters has one home through this contract. Riverside County has also partnered with The Heart Matters for E-ISFC homes. Both counties have requested and were approved for IMC rate for up to 21 E-ISFC homes through The Heart Matters. The Heart Matters has expressed interest in building E-ISFC homes for the Crisis Continuum Pilot.

ISFC homes are intended to be linked directly with supportive community-based services to prevent placement disruption and build natural support systems around a youth with intensive needs. ISFC with Integrated Wrap parents are specially trained and supported to stabilize and nurture youth in a home setting with fully integrated behavioral health supports utilizing Therapeutic Foster Care

(TFC) and Wraparound. The E-ISFC model integrates ISFC-level homes with additional staffing supports to support youth with the most complex and challenging emotional and behavioral needs in a home-based setting.

Due to the complexity of their needs, the youth require high-intensity individualized treatment. The intent is to stabilize the youth, develop an individualized treatment plan, and create a natural support system as well as a nurturing home that will allow the youth to receive the necessary treatment to integrate them into a less intensive treatment program. Within 72 hours of placement, the youth will receive an assessment for SMHS as well as an SUD screening to determine the array of services needed for the youth. The intensive mental health services are strategically individualized and evaluated on an ongoing basis. Each youth is evaluated to receive some, or all, of the mental health services that are available including individual, family, and group therapy, Intensive Home-Based Services (IHBS), Intensive Care Coordination (ICC), rehabilitation, collateral and case management, and medication management services. When Therapeutic Behavioral Services (TBS) are determined to be a need, the provider will make a referral to the appropriate MHP to arrange provision of that service. In addition, once the SUD screening is completed by the provider, they will follow the protocols to refer to the appropriate level of care. Both Counties will

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establish contracts with The Heart Matters and/or Seneca Family of Agencies through SSJ or other identified procurement method to ensure specialty beds with qualified providers are available to the pilot program. The method of procurement will be determined in collaboration with County Purchasing/Procurement Departments and will be based on resources available in the community.

vi. Children's Crisis Residential Program (CCRP)

The facilities will serve youth experiencing acute mental health crisis as an alternative to psychiatric hospitalization. They will meet the needs of all gender male, female, transgender, and non-binary youth. Each youth will have their own room with one-to-one support as needed. Two CCRP's will be identified, they will each have one bed, and will provide structured mental health treatment services tailored to each youth, individual and group counseling, crisis stabilization, (to include treatment focused on the immediate needs to resolve the crisis at the time), creative activities that encourages positive socialization and linkages to resources within the community, medication support services, and targeted case management and family finding. In addition, CCRP's mental health program staff will meet once every 3 days or more to discuss the mental health progress of the youth along with their diagnosis, treatment planning, transition and aftercare services for each youth admitted.

The identified CCRP's will be required to participate in weekly work group meetings coordinated by the Intensive Transition Planning (ITP) team to discuss the youth's complex needs, interventions, treatment goals, and supports tailored to ensure the youth can smoothly transition through the continuum of care whether that is most restrictive or lower level of care. The weekly work group meetings will identify any adjustments needed to the treatment plan and ensure that service referrals are occurring. The ITP team is responsible for making sure that youth will remain connected to any supports and services that they can continue to access after transitioning out of the CCRP. Both Counties will work with Trinity Youth Services and a second TBD licensed partner(s) to stand up a CCRP for the pilot program.

vii. Crisis Stabilization Unit (CSU)

Both Riverside and San Bernardino County have an existing relationship with their Crisis Stabilization Units as an ongoing collaborative partnership in which services have been utilized to service the families in each community. Both county's CSUs serve their respective counties, with the understanding that for youth in the pilot, they will be served by the CSU that is closest to the youth's placement. Currently both counties have spots that are held for youth that are in need of stabilization services. Department of Behavioral Health in both counties have been active partners in the development of the Children's Crisis Continuum pilot, they understand the need to have availability in the crisis stabilization units for youth in the continuum that may need stabilization. In both counties, Department of Behavioral Health have ensured that these spots will be available.

The plan of care sets specific benchmarks (due to either a crisis event or through a deliberate planning process that builds on growth. If CSU services are needed it will be provided by the local identified CSU with the ITP team closely involved in every step. Both counties will create an MOU with DBH for the CSUs in our respective counties. Riverside County has three (3) CSUs and San Bernardino has two (2) CSUs to service their respective Counties.

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The Crisis Stabilization Unit (CSU) is a 24/7, community-based emergency service for those experiencing a crisis related to a mental health condition. The services include assessment, urgent mental health care and referral to mental health and/or co-occurring substance abuse treatment services. A youth may remain in the CSU for up to 23 hours and 59 minutes for intensive treatment services. Admission is voluntary or via Welfare and Institutions Code (WIC) 5150, involuntary psychiatric hold. During their stay youth will have a medical screening performed by CSU staff to determine if they are medically stable to be admitted. Once stabilized the youth will be transitioned to the appropriate placement level within the pilot with the necessary supportive services to ensure maintained stabilization.

B. Personnel and Material Resources:

County	Position	Department	Role
Riverside	Administrative Services Manager (ASM)	DCFS	Main point of contact for the providers and the Transition Planning team. Makes monthly progress reports to the Inland Empire Collaborative (IEC) Steering Committee and coordinate on all matters relating to the execution of this pilot. Provides oversight to the program, working closely with Community Care Licensing to ensure the providers remain licensed, in good standing, monitor performance, and evaluate any concerns.
Riverside	Program Specialist II (PS)	DCFS	Ensures the specific strategies, treatment, services, and supports are identified for the youth and discussed in the weekly work group meetings. Works with the data collection team. The collaborative will leverage its existing data collection teams, to compile and create highly complex statistical reports to ensure operation activities meet pilot requirements. Additionally, each provider will also collect client level data to provide to the IEC. Analysis from each county will be used to pull data and develop dashboards for the pilot.
Riverside	Clerical Staff	DCFS	Assists in the development of the recommended policies and procedures; reviews present and pending legislation related to the pilot. Assists in recommendations, establishing contract

1. Key Riverside & San Bernardino County Positions

			forms and procedures, and monitoring contract adherence and terms.
San Bernardino	Special Projects Manager	DCFS	Coordinates with Riverside County and be the liaison between Riverside County, and San Bernardino County. They will also coordinate efforts for youth in the pilot in San Bernardino County, between internal departments, such as Children Family Services (CFS), Department of Behavioral Health (DBH), and Probation. Ensure regular meetings are occurring and data is being collected.
Riverside	Clinical Therapist	DBH	Lead in the ITP teams. Ensures all coordination of services for youth in the pilot, including the design and implementation of personalized treatment plans and interventions.
Riverside	Rehabilitation Specialist	DBH	Provides supportive and direct services to high-risk youth with behavior problems, mental illness, and academic problems in the school setting.
Riverside	Peer Partner	DBH	Provides support and advocacy to the youth in the pilot.
San Bernardino	Clinical Therapist	DBH	Lead in the ITP teams. Ensures all coordination of services for youth in the pilot, including the design and implementation of personalized treatment plans and interventions.
San Bernardino	Rehabilitation Specialist	DBH	Provides supportive and direct services to high-risk youth with behavior problems, mental illness, and academic problems in the school setting.
San Bernardino	Peer Partner	DBH	provide support and advocacy to the youth in the pilot.

2. <u>IEC CCCPP Workgroups</u>

Youth considered for referral to the Pilot Admissions Team (PAT) are identified by the Interagency Placement Committee (IPC). The IPC determines the overall placement level of the youth, while the PAT determines eligibility for the pilot. The Inland Empire Collaborative (IEC) has an established work group in each county that meets respectively on a weekly basis to discuss youth identified by the IPC. This work group consists of placement managers, supervisors, and social workers, from both counties, others will be invited based on the youth. Once the workgroup from each county identifies a youth to present for the pilot, the youth will be presented at the (PAT). This weekly work group meeting serves as the preliminary marker for identifying potential youth from each county for the pilot by completing the IEC referral form. The IEC will utilize a (PAT) comprised of

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representatives from both counties' child welfare, probation, and behavioral health departments, as well as an IEC Program Administrator (this is the position of the ASM), to review and discuss the referrals to determine if the youth meet the criteria for the pilot.

3. <u>Subcontractors</u>

- *i.* Subcontractors by Component:
 - a. Wrap-Informed Intensive Community-Based Model (Intensive Stabilization Services San Bernardino County)
 - San Bernardino County Behavioral Health Department
 - b. Expedited Transition Services (Intensive Stabilization Services Riverside County)
 - Seneca Family of Agencies
 - Pacific Clinics
 - c. Children's Crisis Residential Programs (CCRP)
 - Trinity (Yucaipa)
 - Provider #2 TBD
 - d. Intensive Services Foster Care Foster Family Agencies
 - The Heart Matters
 - Seneca Family of Agencies (Backup)
 - e. Crisis Stabilization Units
 - Perris Mental Health Urgent Care
 - Merrill Center
 - Windsor Center
 - f. FURS/Mobile Response Team
 - Riverside County Department of Behavioral Health
 - San Bernardino County
 - Lutheran Social Services (LSS)
 - Mountain Counseling Services & Training
 - Pacific Clinics
 - South Coast Community Services (SCCS)
 - Victor Community Support Services (VCSS)

ii. Subcontractors' Roles and Key Personnel

Organization: The Heart Matters - 366427925

Contact Name: Carrie Mathews – Executive Director

E-mail: <u>cmathews@thmffa.org</u>

Provides ISFC Services and will continue to develop a targeted strategy to recruit specialized, experienced, trauma-informed caregivers for the youth in the pilot. This subcontractor will recruit Professional Parents who will be fully committed to caring for youth placed in the home 24 hours a day. They will have experience in working with youth with behavioral issues,

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mental health diagnoses, and/or specialized health care needs. The subcontractor will also collaborate with the ITP team to provide supportive services to the youth in the pilot. The ITP team will be led by Behavioral Health partners in each county, with each provider offering support. Additionally, the subcontractor will possess an understanding of how to support the needs of youth with a history of mental, emotional, or physical trauma.

Organization: Trinity - 360900416

Contact Name: Cher Ofsteddahl – Chief Executive Officer

E-mail: Cher@TrinityYS.org

The provider will stand up a new facility to provide CCRP services. Upon becoming licensed as a CCRP, the subcontractor will serve youth experiencing acute mental health crisis as an alternative to psychiatric hospitalization. Provide beds to meet the needs of these youth at the time a youth is discharged from a Crisis Stabilization Unit and require a higher level of care. The subcontractor will also collaborate with the ITP team to provide supportive services to the youth in the pilot. The ITP team will be lead by Behavioral Health partners in each county, with each provider offering support.

Organization: Seneca Family of Agencies - 306004365

Contact Name: Erin Grierson – Clinical Director of Riverside Programs

E-mail: <u>erin.grierson@senecacenter.org</u> Provides Intensive Stabilization Services via Expedited Transition Services (ExTS) program to

support complex care needs youth to preserve and stabilize placements. Within 24 hours, at any service level in the pilot, the youth will receive an assessment for SMHS as well as an SUD screening to determine the array of services needed for the youth. These services will follow the youth through all levels of placement to provide continuity of care. These services will be provided as long as the youth is involved in the pilot. The intensive mental health services are strategically individualized and evaluated on an ongoing basis. Each youth is evaluated to receive some, or all, of the mental health services that are available including individual, family, and group therapy, Intensive Home-Based Services (IHBS), Intensive Care Coordination (ICC), rehabilitation, collateral and case management, and medication management services. When Therapeutic Behavioral Services (TBS) are determined to be a need, the provider will make a referral to the appropriate MHP to arrange provision of that service. In addition, once the SUD screening is completed by the provider, they will follow the protocols to refer to the appropriate level of care.

Seneca will also provide ISFC Services they will continue to develop a targeted strategy to recruit specialized, experienced, trauma-informed caregivers for the youth in the pilot. This subcontractor will recruit Professional Parents who will be fully committed to caring for youth placed in the home 24 hours a day. They will have experience in working with youth with behavioral issues, mental health diagnoses, and/or specialized health care needs. The subcontractor will also collaborate with the ITP team to provide supportive services to the youth in the pilot. The ITP team will be led by Behavioral Health partners in each county, with each provider offering support.

<u>Organization: Pacific Clinics (Success First Early Wraparound)</u> Contact Name: Nosheen Samuel – Clinical Director

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Email: nosheen.samuel@pacificclinics.org

Provides Intensive Stabilization Services via a Wrap-Informed Full-Service Partnership to help youth during difficult transitions (e.g., residing in the office). In addition to providing Expedited Transition Services (ExTS) to support complex needs youth to preserve and stabilize placements.

Organization: San Bernardino, CSU - Telecare - Merrill/Windsor

Contact Name: Dianne Wolkenhauer – Program Manager II Email: dwolkenhauer@dbh.sbcounty.gov

Type of services provided: Crisis Stabilization Services

Describe Existing Relationship and Collaboration: Service youth in need of 23-hour stabilization and medication management.

Organization: Riverside, CSU: Telecare - Perris Contact Name: Brenda Hamamoto – Program Administrator

E-mail: vruss@telecarecorp.com

Type of services provided: Crisis Stabilization Services

Describe Existing Relationship and Collaboration: Service youth in need of 23-hour stabilization and medication management.

Organization: Riverside, CSU: Telecare - Palm Springs

Contact Name: Stephanie Ramirez - Program Administrator

E-mail: stramirez@telecarecorp.com

Type of services provided: Crisis Stabilization Services

Describe Existing Relationship and Collaboration: Service youth in need of 23-hour stabilization and medication management.

ΪΪ. Subcontractors Facilities and Contact Info

- CCRP #1: Trinity, Yucaipa Address: 10776 Fremont St., Yucaipa, CA 92399 Phone number: 909-797-0114
- CCRP #2: TBD
- ISFC: The Heart Matters. Address: 21935 Van Buren St. Suite A-1, Grand Terrace Ca 92313. Phone number: (909) 906-1023.
- ISFC: Seneca Family of Agencies. Address: 233 S. Quintana Anaheim Hills, Ca 92807 • (714) 957-1004
- Crisis Stabilization Unit #1: Perris MH Urgent Care 85 Ramona Expressway, Perris • CA – Riverside
- Crisis Stabilization Unit #2: Riverside Desert Mental Health Urgent Care 2500 N. Palm Canyon Drive Suite A4, Palm Springs, CA – Riverside County
- Crisis Stabilization Unit #3: County Merrill Center 14677 Merrill Ave., Fontana CA -• San Bernardino County
- Crisis Stabilization Unit #4: Windsor 1481 N. Windsor Dr., San Bernardino, CA San • Bernardino County

C. Methodology Table 4. <u>Inland Empire Collective Children's Crisis Continuum Pilot Program Methodology Table</u>

ID Activity 1 Providers will obtain appropriate licenses.		Activity Description		Responsible Party	
		Deliverable: providers will have a license to operate a CCRP	7/1/23-6/30/24	Providers	
1.1		Providers apply for licensure. Providers will have to submit necessary documentation to the state to obtain the necessary license.	7/1/23-6/30/24	Providers	
1.2		Collaborative will support the providers in any necessary documentation needed, as well as assist in any startup costs associated with	7/1/23-6/30/24	Inland Empire Collaborative (IEC)	
1.3		Collaborative will assist providers with any startup costs associated with developing of a CCRP.	7/1/23-6/30/24	Inland Empire Collaborative (IEC	
1.4		Consistent meeting schedule will need to be established between collaborative and providers to discuss progress and any barriers.	7/1/23-6/30/24	Inland Empire Collaborative (IEC)/Providers	
1.5		Providers will obtain licensure	7/1/23-6/30/24	Inland Empire Collaborative (IEC)/Providers	
2	Communication plan for Juvenile Courts in both counties	Deliverable: Create and Implement the Communication Plan	7/1/23-3/30/24	Inland Empire Collaborative (IEC)	
2.1		Determine parties that need to be notified at Juvenile Court about the pilot	7/1/23-3/30/24	Inland Empire Collaborative (IEC)	
2.2		Determine what information Juvenile Court need to know about the pilot and when a youth enters the pilots.	7/1/23-3/30/24	Inland Empire Collaborative (IEC)	
2.3		Determine method of communication to identified parties.	7/1/23-3/30/24	Inland Empire Collaborative (IEC)	
2.4		Develop communication plan, on going communication, and communicate plan to all parties.	7/1/23-3/30/24	Inland Empire Collaborative (IEC)	
2.5		Implement Communication Plan	7/1/23-3/30/24	Inland Empire Collaborative (IEC)	
3	Engage Policy to develop Pilot Policies and Procedures	<u>Deliverable:</u> The IEC and providers will finalize and implement policies and procedures around pilot requirements (see attachment D)	7/1/23-6/30/24	Inland Empire Collaborative (IEC)	
3.1		Develop policies and procedures for Children's staff to refer a youth to the pilot.	7/1/23-6/30/24	Inland Empire Collaborative (IEC)/Providers	
3.2		Develop an MOU between providers participating in the pilot and Children's that defines the policies and procedures for care coordination, transition planning, capacity management, etc.	7/1/23-6/30/24	Inland Empire Collaborative (IEC)/Providers	
4	Counties to establish MOUs (all inclusive)	Deliverable: MOU between Riverside and San Bernardino County	Current-9/30/23	Inland Empire Collaborative (IEC)	
4.1		Riverside and San Bernardino County will draft MOU specifically for CCC Pilot	Current-9/30/23	Inland Empire Collaborative (IEC)	
4.2		MOU will go before the board.	Current-9/30/23	Inland Empire Collaborative (IEC)	

ID	Activity	Description	Date	Responsible Party
1.0				
4.3		MOU will be approved.	Current-9/30/23	Inland Empire Collaborative (IEC)
5	Pilot Admissions Team (PAT) - comprised of representatives from both counties' child welfare, probation, behavioral health departments and the Pilot Administrator will review and discuss the referrals to determine if the youth meet the criteria for the pilot.	Deliverable: PAT team developed, with referral packet for pilot.	7/1/23-9/30/24	Inland Empire Collaborative (IEC)
	Referral packet for pilot.			
5.1		Determine appropriate personnel that would need to be on PAT team from each county.	7/1/23-9/30/24	Inland Empire Collaborative (IEC)
5.2		Set meeting schedule for PAT team.	7/1/23-9/30/24	PAT Team
5.3		Develop referral packet for youth. Referral packet will be used by (providers, assigned social worker/probation officer) to refer youth to the PAT.	7/1/23-9/30/24	PAT Team
5.4		Develop process for admitting youth into the pilot.	7/1/23-9/30/24	PAT Team
5.5		Develop process for youth exiting the pilot.	7/1/23-9/30/24	PAT Team
5.6		Referrals will come into the PAT team and youth will begin being accepted into the pilot.	9/30/24-	PAT Team
6	Provide training to all pilot staff and subcontractors.	<u>Deliverable:</u> All pilot staff and subcontractors will be trained on pilot procedures.	7/1/23-9/30/24	Inland Empire Collaborative (IEC
6.1		. Provide orientation on pilot requirements including scope of work and contract. This training will include an overview of the pilot, all levels of the continuum, as well as the process for step downs and the role of the ITP Teams.	7/1/23-9/30/24	Inland Empire Collaborative (IEC)
6.2		Provide training from American Society of Addiction Medicine (ASAM). Provide training to providers for a better understanding of substance use/abuse.	7/1/23-9/30/24	Inland Empire Collaborative (IEC)/Providers
6.3		 Provide training or Substance Use/abuse. Provide training on Together Facing the Challenge (FFAs) training. This training is intended to train providers on Therapeutic foster care. 	7/1/23-9/30/24	Inland Empire Collaborative (IEC)
7	Data Collection, Analysis, and Reporting	Deliverable: CDSS/DHCS evaluation of the pilot through the use of data collection	7/1/23-6/30/28	Inland Empire Collaborative (IEC
7.1		Along with CDSS, Draft a collection tool for participants, approve tool, and implement.	7/1/23-12/30/23	Inland Empire Collaborative (IEC

7.4		Create a dashboard to track key performance indicators for	7/1/23-12/30/23	Inland Empire Collaborative (IEC
/.4		the pilot.	//1/25-12/30/25	
7.5		Create a SharePoint site to enter and store data throughout the length of the pilot.	7/1/23-12/30/23	Inland Empire Collaborative (IEC
7.6		Work with CDSS to provide any data needed	7/1/23-12/30/23	Inland Empire Collaborative (IEC
7.7		Use data to submit quarterly report to CDSS	7/1/23-6/30/28	Inland Empire Collaborative (IEC
7.8		Submit final report to CDSS	7/1/27-6/30/28	Inland Empire Collaborative (IEC
7.6			7/1/23-12/30/27	Inland Empire Collaborative (IEC
ID	Activity	Description	Date	Responsible Party
8.1	Assist Provider with start up.	Ensure program staff have all required agency-specific training (i.e., trauma informed, medication management, etc.)	7/1/23-6/30/24	Providers
8.2		Clear all pilot ISFC homes through each County's Children's Placement Unit. This is a process that providers complete with each county before the Children's Placement Unit can place youth in homes.	7/1/23-6/30/24	Providers
8.3		Consistent meeting schedule to navigate startup barriers. These can include applying for IMC rates.	7/1/23-12/30/27	Inland Empire Collaborative (IEC)/Providers
8.4		Collaborative will assist providers with any startup costs associated with developing the of Enhanced ISFC's	7/1/23-6/30/24	Inland Empire Collaborative (IEC)/Providers
8.5		E-ISFC Homes will be available for placement	7/1/23-6/30/24	Inland Empire Collaborative (IEC)/Providers
9	Assist the youth in transitions in the pilot.	Deliverable: Will provide Intensive Transition Planning Teams to provide services to the youth in the pilot.	10/1/23-6/30/24	Inland Empire Collaborative (IEC)/Providers
9.1		Hire Staff – (Clinical Therapist, Rehab Specialist, and Peer Partners,	10/1/23-6/30/24	Inland Empire Collaborative (IEC)/Providers
9.2		Ensure program staff have all required agency-specific training (i.e., trauma informed, service provision, etc.)	10/1/23-6/30/24	Inland Empire Collaborative (IEC)/Providers
9.3		Ensure staff receive training regarding the pilot. This training will include training on all levels of the continuum, as well as the policies and procedures that will be developed for the pilot.	10/1/23-6/30/24	Inland Empire Collaborative (IEC)/Providers
9.4		Provide support and case management to ensure the youth are stabilizing in placement.	7/1/24-6/30/27	Inland Empire Collaborative (IEC)/Providers
9.5		Offer aftercare services to the youth in the pilot. For 6 months.	7/1/24-6/30/27	Inland Empire Collaborative (IEC)/Providers
10	County staff assigned to pilot.	<u>Deliverable</u> : Riverside County to assign staff for oversight of the Pilot.	7/1/23-6/30/24	Riverside County-Children's
10.1		Children's Services In Riverside County to hire for Program Administrator Staff	7/1/23-6/30/24	Riverside County-Children's
10.2		Leverage Joint Operation Meeting (JOM) –JOM is comprised of administrative staff that oversees contacts and MOUs. The lead will be providing oversight of the pilot to ensure all contacts and MOUS are in compliance.	7/1/23-12/30/27	Riverside County-Children's
11	County to hire staff for pilot.	Deliverable: San Bernardino County DBH will hire peer partners for ITP teams	7/1/23-6/30/24	San Bernardino County-DBH

11.1		Will open position for applications of peer partners.	7/1/23-6/30/24	San Bernardino County-DBH
11.2		Ensure parent partners receive training on the pilot and their role on the team.	7/1/23-6/30/24	San Bernardino County-DBH
12	Develop a work group in each county.	<u>Deliverable</u> : A team will be formed to meet regularly to discuss youth identified by the IPC.	7/1/23-9/30/24	Inland Empire Collaborative (IEC
12.1		Determine appropriate personnel that would need to be in the work group team from each county.	7/1/23-9/30/24	Inland Empire Collaborative (IEC
12.2		Set meeting schedule for the work group team.	7/1/23-9/30/24	Inland Empire Collaborative (IEC
13	Mental Health Plans (MHP) will contract with at least one community- based organization that can be available on call 24/7.	Deliverable: A contract will be established with a community- based organization to provide services to youth in the pilot. The 24 hour service is FURS and it includes phone based response, in-home, and in-person mobile response.	10/1/23-3/31/24	Inland Empire Collaborative (IEC
13.2		Expand current contracts with community-based organizations	10/1/23-3/31/24	Inland Empire Collaborative (IEC
13.3		Select a Provider	10/1/23-3/31/24	Inland Empire Collaborative (IEC
13.4		Enter into a contract with a provider to offer clinical supportive services to the youth services to the youth	10/1/23-3/31/24	Inland Empire Collaborative (IEC

D. Inland Empire Collective Children's Crisis Continuum Pilot Program Implementation Timeline

1. <u>Timeline Key</u>

Letter	Meaning
S	Start
I	In Progress
E	End
S/E	Start/End

2. IEC CCCPP Timeline FY 2024-24 thru FY 2027-28

ID	Activity	Responsible	FY 2023-24				F	Y 20	24-2	5	F	FY 20	25-20	ô	FY 2026-27				FY 2027-28			
		Party	Q1	Q2	Q 3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
2	Work with pilot placement providers to ensure all necessary applications and documentations are submitting to appropriate licensing/certification agencies.	Collaborative (IEC)	S	I	I	E																
	communication plan for Juvenile Courts in both counties.	Collaborative (IEC)																				
		Inland Empire Collaborative (IEC	Ι	Ι	Ι	E																
	Referral Packets for Pilot Counties to establish MOUs (all inclusive)	Inland Empire Collaborative (IEC)	E																			

5	Develop Pilot Admissions Team (PAT) - comprised of representatives from both counties' child welfare, probation, behavioral health departments and the Pilot Administrator will review and discuss the referrals to determine if the youth meet the criteria for the pilot. This will be the oversight group.				s	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	E		
6	Engage Policy to develop Pilot Policies and Procedures	Inland Empire Collaborative (IEC)	Ι	I	I	Ι	Е															
7	Pilot collection tools (leverage CQI in this process)	Inland Empire Collaborative (IEC)	S	Ι	Ι	Ι	I	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Е
8	start up	Provider/ Inland Empire Collaborative (IEC)	S	Ι	Ι	E																
9	transitions in the pilot	Inland Empire Collaborative (IEC)		S	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι	E		
10		Children's	S	Ι	Ι	Е																
11	County to Hire staff for pilot	fSan Bernardino County-DBH																				

12	Develop a work group in each county.	Inland Empire Collaborative (IEC)											
	Mental Health Plans (MHP) will contract with at least one community-based organization that can be available on call 24/7.	Inland Empire Collaborative (IEC)		S	e								

EXHIBIT B

BUDGET DETAIL AND PAYMENT PROVISIONS

A. <u>Term:</u>

1. The term of this Agreement shall be July 1, 2023 through June 30, 2028.

B. Invoicing and Payment

- 1. The maximum amount payable under this Agreement shall not exceed \$10,000,000.00.
- 2. For services satisfactorily rendered, and upon receipt and approval of the invoice(s), CDSS agrees to pay the Grantee for said services in accordance with the Final Work Plan and Budget.
- 3. Funding for necessary travel expenses and per diem are included in this Agreement and will be reimbursed at rates established by the California Department of Human Resources for comparable classes. (See

http://www.calhr.ca.gov/employees/Pages/travel-rules-excluded.aspx). Grantee will itemize travel expenses, including receipts, and submit to CDSS Program Grant Manager for approval. This approval, including itemization and receipts must be attached to the invoice submitted for payment.

No travel outside the State of California by Grantee shall be reimbursed unless there is prior written authorization from CDSS.

- 4. Grantee shall submit the request for payment using an invoice and supporting documentation on a quarterly basis as specified by the CDSS.
- 5. Invoices shall include the Agreement Number ALLOC-23-0006 and Index code 9990 and shall be electronically submitted on Grantee's letterhead as specified by the CDSS. Any invoices submitted without the above referenced information may be returned to the Grantee for further re-processing.
- 6. Invoice payment will be conditioned upon the timely receipt by the CDSS of the quarterly progress reports and final report from the Grantee within the specified due dates and in the manner acceptable by the CDSS. If acceptable reports are not received or a request for an extension of a due date has not been granted by the CDSS, invoices will not be processed and will be returned to the Grantee.

C. State Budget Contingency Clause

1. It is mutually agreed that if the Budget Act of the current year and/or any subsequent years covered under this agreement does not appropriate sufficient funds for the program, this Agreement shall be of no further force and effect. In this sevent, of shall have no liability to pay any funds whatsoever to Grantee

EXHIBIT B

or to furnish any other considerations under this Agreement and Grantee shall not be obligated to perform any provisions of this Agreement.

2. If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this program, CDSS shall have the option to either cancel this Agreement with no liability occurring to the State or offer an agreement amendment to Grantee to reflect the reduced amount.

D. Budget Modification Without Written Amendment

Line item shifts of up to fifteen percent (15%) of the grant total are allowable, subject to the prior review and approval of the CDSS Project Manager. Line item shifts that meet these criteria do not require a formal grant amendment. Any line item shift exceeding this amount must be executed through a formal grant amendment. All requests for line item shifts must be submitted in writing and include a substantial justification for the shift. If the Agreement is formally amended for any other purpose, all line item shifts agreed to by the parties and not previously included in an amendment must be included in the amendment.

E. Prompt Payment Clause

Payment will be made in accordance with, and within the time specified by Government Code Chapter 4.5, commencing with Section 927.

F. <u>Review</u>

CDSS reserves the right to review service levels and billing procedures as they impact charges against this agreement.

G. Final Billing

Invoices for services must be received by CDSS within 90 days following each state fiscal year (July 1 through the following June 30), or 90 days following the end of the grant term, whichever comes first. The final invoice must include the statement "Final Billing."

H. Nonresident Tax Withholdings

Payments to all nonresidents may be subject to withholding. Nonresident payees performing services in California or receiving rent, lease, or royalty payments from property (real or personal) located in California will have seven percent of their total payments withheld for state income taxes. However, no withholding is required if total payments to the payee are \$1,500 or less for the calendar year.

EXHIBIT B

I. Advance Payment

Upon execution of this Agreement, Grantee may request an advance payment, not to exceed twenty five percent (25%) of the total award amount, contingent upon CDSS approval. The advance payment request must include a detailed justification for the need and the purpose of the advance. The advance payment amount shall be deducted by CDSS from invoices submitted during the grant term. CDSS shall ascertain that sufficient funds remain to be claimed by Grantee to fully liquidate the advance payment.

EXHIBIT B – Att 1

Children's Crisis Continuum Pilot Program – Inland Empire Collective (IEC) – Budget Table

Item	Deliverable ID (Methodology Table)	Pilot Expenditure	Existing Funding Source(s)	Existing Funding Amount	Project Total
Riverside Department of Public Social Services Administrative Services Manager I/II	5 &10	\$123,013	Other Social Services Revenue	\$319,142	\$442,155
Riverside Department of Public Social Services Program Specialist I/II	5 &10	\$78,408	Other Social Service Revenue	\$203,422	\$281,830
Riverside Department of Public Social Services Clerical Staff	5 & 10	\$43,722	Other Social Service Revenue	\$113,431	\$157,153
Riverside County Behavioral Health Costs - (1) Clinical Therapist	5 & 9	\$706,816	\$-	\$-	\$706,816
San Bernardino County Behavioral Health Costs - (1) Clinical Therapist II	5 & 9	\$623,081	\$-	\$-	\$623,081
Intensive Stabilization Services	8&9	\$215,747	FFP Revenue	\$2,799,688	\$3,015,435
Crisis Residential	1	\$5,869,216	Placement Rate (ISFC) & FFP Revenue	\$951,327	\$6,820,543
Enhanced ISFC w/ Integrated Wrap	8	\$2,259,228	Placement Rate (ISFC) & Wraparound/ETS Revenue & FFP Revenue	\$1,935,715	\$4,194,943

EXHIBIT B – Att 1

ISFC w/ Integrated Wrap	8	\$80,769	Placement Rate (ISFC) & Wraparound/ETS Revenue & FFP Revenue	\$1,970,802	\$2,051,571
Total		\$10,000,000		\$8,293,527	\$18,293,527

ALLOC-23-0005 CDSS/County of Riverside Department of Public Social Services

EXHIBIT B – Att 1

Children's Crisis Continuum Pilot Program - County of Riverside - Exhibit B (Attachment I)

County of Riverside - Line Item Expenses by Fiscal Year (FY)						
Line Item	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27	FY 2027-28	TOTAL (All FYs)
County of Riverside Administrative Services Manager	\$123,013.00	\$0.00	\$0.00	\$0.00	\$0.00	\$123,013.00
County of Riverside Program Specialist	\$78,408.00	\$0.00	\$0.00	\$0.00	\$0.00	\$78,408.00
County of Riverside Clerical Staff	\$43,722.00	\$0.00	\$0.00	\$0.00	\$0.00	\$43,722.00
Riverside County Clinical Therapist I/II	\$706,816.00	\$0.00	\$0.00	\$0.00	\$0.00	\$706,816.00
San Bernardino County Clinical Therapist I/II	\$623,081.00	\$0.00	\$0.00	\$0.00	\$0.00	\$623,081.00
Intensive Stabilization Services	\$215,747.00	\$0.00	\$0.00	\$0.00	\$0.00	\$215,747.00
Crisis Residential	\$5,869,216.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,869,216.00
Enhanced Intensive Services Foster Care (E-ISFC) Home with Integrated Wraparound	\$2,259,228.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,259,228.00
Intensive Services Foster Care (ISFC) Home with Integrated Wraparound	\$80,769.00	\$0.00	\$0.00	\$0.00	\$0.00	\$80,769.00

County of Riverside - Total Grant Expenses by FY				
FY	Total Grant Expenses (All Line Items)			
FY 2023-24	\$10,000,000.00			
FY 2024-25	0			
FY 2025-26	0			
FY 2026-27	0			
FY 2027-28	0			

County of Riverside - Total Grant Expenses by Line Item				
Line Item	Total Grant Expenses (All FYs)			
County of Riverside Administrative Services Manager	\$123,013.00			
County of Riverside Program Specialist	\$78,408.00			
County of Riverside Clerical Staff	\$43,722.00			
Riverside County Clinical Therapist I/II	\$706,816.00			
San Bernardino County Clinical Therapist I/II	\$623,081.00			
Intensive Stabilization Services	\$215,747.00			
Crisis Residential	\$5,869,216.00			
Enhanced Intensive Services Foster Care (E- ISFC) Home with Integrated Wraparound	\$2,259,228.00			
Intensive Services Foster Care (ISFC) Home with Integrated Wraparound	\$80,769.00			
TOTAL	\$10,000,000.00			

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Riverside County - Children's Crisis Continuum Pilot Program - Expense Breakdown by Line Item FY 2023-24

		1								
	ty - Children's Crisis t Program - Expense									
	ine Item FY 2023-24									
Line Item	Allocation for FY 23-24	-								
County of Riverside Artiministrative Services	\$123,013.00									
Manager County of Riverside Program	\$78,408.00									
Specialist County of Riverside Clerical Staff	\$43,722.00									
Riverside County Clinical	\$706,816.00	1								
San Bernardino County Clinical Therapist I/II	\$623,081.00]								
Intensive Stabilization Services Crisis Residential	\$215,747.00 \$5,869,216.00									
Crisis Residential Enhanced Intensive Services Foster Care (E-ISFC) Home with	\$2,259,228.00									
Integrated Wraparound Intensive Services Foster Care										
(ISFC) Home with Integrated Wraparound	\$80,769.00 \$10,000,000.00									
TOTAL (ALL Line Items)										
Riversi	de County - Expense Bi	reakdown for Co	unty of River	side Administrativ Total Salary +	ve Services Manager - FY	2023-24				
Line Item	Allocation for FY 23-24	Average Annual Salary + Benefits		Benefits over Duration of Program	Non-Pilot Funding for Clinical Therapist I/II	Pilot Funding Needed to Cover Expenses				
County of Riverside Administrative Services Manazer	\$123,013	\$196,513	2.25	\$442,154	\$319,142	\$123,012				
	Riverside County - Exp	ense Breakdowr	for County o		am Specialist - FY 2023-2	4				
Line Item	Allocation for FY 23-24	Average Annual	FTE	Total Salary + Benefits over	Non-Pilot Funding for	Pilot Funding Needed to				
Line item	Allocation for FT 23-24	Salary + Benefits		Duration of Program	Clinical Therapist I/II	Cover Expenses				
County of Riverside Program Specialist	\$78,409	\$125,258	2.25	\$281,830.50	\$203,422	\$78,409				
	Riverside County - I	Expense Breakdo	wn for Count	y of Riverside Cle	erical Staff - FY 2023-24					
				Total Salary + Benefits over	Non-Pilot Funding for	Pilot Funding Needed to				
Line Item	Allocation for FY 23-24	Average Annual Salary + Benefits	FTE	Duration of Program	Clinical Therapist I/II	Cover Expenses				
Staff	\$43,722	\$69,846.00	2.25	\$157,154	\$113,431	\$43,723				
	Riverside County - Expe	ense Breakdown	for County of		Therapist I/II - FY 2023-	24				
Line Item	Allocation for FY 23-24	Average Annual Salary + Benefits		Total Salary + Benefits over Duration of Program	Non-Pilot Funding for Clinical Therapist I/II	Pilot Funding Needed to Cover Expenses				
Riverside County Clinical Therapist I/II	\$706,816.00	\$176,704.00	4	\$706,816.00	\$0.00	\$706,816.00				
Rive	erside County - Expense	e Breakdown for	County of Sa	n Bernardino Clin	ical Therapist I/II - FY 202	23-24				
Line Item	Allocation for FY 23-24	Average Annual Salary + Benefits		Total Salary + Benefits over Duration of	Non-Pilot Funding for Clinical Therapist I/II	Pilot Funding Needed to Cover Expenses				
San Bernardino County Clinical Therapist I/II	\$623,081.00	\$155,770.00	4	Program \$623,080.00	\$0.00	\$623,080.00				
		•	Riverside	ounty - Expense	Breakdown for Intensive	Stabilization Services	FY 2023-24			
Line Item	Allocation for FY 23-24	Payroll Expenses over 4 Years	Contract Services over 4 Years	Program Support Expenses over 4 Years	Occupancy Expenses over 4 Years	Child & Family Related Expenses	Operating Expenses	Total Expenses	Non-Pilot Funding for Intensive Stabilization	Pilot Funding Needed to Cover Expenses
Intensive Stabilization Services	\$215,747.00	\$2,320,500.00	\$28,299.00	\$172,975.00	\$82,065.00	\$39,837.00	\$371,758.00	\$3,015,434.00	\$2,799,688.00	\$215,746.00
			Pive	arsida County - Ex	pense Breakdown for Cri	sis Posidontial - EV 20	22-24			
			Contract	Program Support					Non-Pilot	Pilot Funding
Line Item	Allocation for FY 23-24	Payroll Expenses over 4 Years	Services over 4 Years	Expenses over 4 Years	Occupancy Expenses over 4 Years	Child & Family Related Expenses	Operating Expenses	Total Expenses	Funding for Crisis Residential	Needed to Cover Expenses
Crisis Residential	\$5,869,216.00	\$5,629,577	\$423,676.00	\$197,510.00	\$406,352.00	\$17,169.00	\$146,260	\$6,820,544	\$951,327.00	\$5,869,217.00
	Riverside	e County - Expen	se Breakdow	n for Enhanced In	ntensive Services Foster C	are (E-ISFC) Home wit	th Integrated Wraparou	und - FY 2023-24	Non-Pilot	
Line Item	Allocation for FY 23-24	Payroll Expenses over 4 Years	Contract Services over 4 Years	Program Support Expenses over 4 Years	Occupancy Expenses over 4 Years	Child & Family Related Expenses	Operating Expenses	Total Expenses	Non-Pilot Funding for Crisis Residential	Pilot Funding Needed to Cover Expenses
Enhanced Intensive Services Foster Care (E-ISFC) Home with Integrated Wraparound	\$2,259,228.00	\$2,168,447	\$81,882.00	\$146,097.00	\$489,767.00	\$793,580.00	\$515,167	\$4,194,940	\$1,935,715.00	\$2,259,225.00
	Ri	verside County -	Expense Brea	akdown for Intens	sive Services Foster Care	(ISFC) Home with Inte	grated Wraparound - F	Y 2023-24		
Line Item	Allocation for FY 23-24	Payroll Expenses over 4 Years	Contract Services over 4 Years	Program Support Expenses over 4 Years	Occupancy Expenses over 4 Years	Child & Family Related Expenses	Operating Expenses	Total Expenses	Non-Pilot Funding for Crisis	Pilot Funding Needed to Cover Expenses
Intensive Services Foster Care (ISFC) Home with Integrated Wraparound	\$80,769.00	\$1,229,589	4 Years \$45,583.00	\$61,916.00	\$6,695.00	\$455,840.00	\$251,950	\$2,051,573	Residential \$1,970,802.00	580,771.00

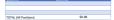


EXHIBIT B – Att 1

<u>Riverside County - Children's Crisis Continuum Pilot Program - Expense Breakdown by Line Item FY 2024-25</u>

Line Item	Allocation for FY 24-25	Expense Breakdown
County of Riverside Administrative Services Manager	\$0.00	N/A
County of Riverside Program Specialist	\$0.00	N/A
County of Riverside Clerical Staff	\$0.00	N/A
Riverside County Clinical Therapist I/II	\$0.00	N/A
San Bernardino County Clinical Therapist I/II	\$0.00	N/A
Intensive Stabilization Services	\$0.00	N/A
Crisis Residential	\$0.00	N/A
Enhanced Intensive Services Foster Care (E-ISFC) Home with Integrated Wraparound	\$0.00	N/A
Intensive Services Foster Care (ISFC) Home with Integrated Wraparound	\$0.00	N/A
TOTAL	\$0.00	N/A

Riverside County - Children's Crisis Continuum Pilot Program - Expense Breakdown by Line Item FY 2025-26

Line Item	Allocation for FY 25-26	Expense Breakdown
County of Riverside Administrative Services Manager	\$0.00	N/A
County of Riverside Program Specialist	\$0.00	N/A
County of Riverside Clerical Staff	\$0.00	N/A
Riverside County Clinical Therapist I/II	\$0.00	N/A
San Bernardino County Clinical Therapist I/II	\$0.00	N/A
Intensive Stabilization Services	\$0.00	N/A
Crisis Residential	\$0.00	N/A
Enhanced Intensive Services Foster Care (E-ISFC) Home with Integrated Wraparound	\$0.00	N/A
Intensive Services Foster Care (ISFC) Home with Integrated Wraparound	\$0.00	N/A
TOTAL	\$0.00	N/A

EXHIBIT B – Att 1

<u>Riverside County - Children's Crisis Continuum Pilot Program - Expense Breakdown by Line Item FY 2026-27</u>

Line Item	Allocation for FY 26-27	Expense Breakdown
County of Riverside Administrative Services Manager	\$0.00	N/A
County of Riverside Program Specialist	\$0.00	N/A
County of Riverside Clerical Staff	\$0.00	N/A
Riverside County Clinical Therapist I/II	\$0.00	N/A
San Bernardino County Clinical Therapist I/II	\$0.00	N/A
Intensive Stabilization Services	\$0.00	N/A
Crisis Residential	\$0.00	N/A
Enhanced Intensive Services Foster Care (E-ISFC) Home with Integrated Wraparound	\$0.00	N/A
Intensive Services Foster Care (ISFC) Home with Integrated Wraparound	\$0.00	N/A
TOTAL	\$0.00	N/A

<u>Riverside County - Children's Crisis Continuum Pilot Program - Expense Breakdown by Line Item FY 2027-28</u>

Line Item	Allocation for FY 27-28	Expense Breakdown
County of Riverside Administrative Services Manager	\$0.00	N/A
County of Riverside Program Specialist	\$0.00	N/A
County of Riverside Clerical Staff	\$0.00	N/A
Riverside County Clinical Therapist I/II	\$0.00	N/A
San Bernardino County Clinical Therapist I/II	\$0.00	N/A
Intensive Stabilization Services	\$0.00	N/A
Crisis Residential	\$0.00	N/A
Enhanced Intensive Services Foster Care (E-ISFC) Home with Integrated Wraparound	\$0.00	N/A
Intensive Services Foster Care (ISFC) Home with Integrated Wraparound	\$0.00	N/A
TOTAL	\$0.00	N/A

Exhibit B (Attachment II) – Budget Narrative – FY 2023-24

1. Inland Empire Collective (IEC) Budget Narrative

Item	Pilot	Justification/Breakdown
	Expenditure	
County of Riverside Administrative Services Manager	(Total) \$123,013	 The Program Administrator/Administrative Services Manager will provide program oversight. They will be the main point of contact for the providers and the Transition Planning team. They will meet with the IEC Steering Committee monthly to provide updates on the pilot. Additionally, the program administrator will ensure the following occur: A dashboard is created to track key performance indicators of the pilot program. Work closely with Community Care Licensing to ensure the contracted providers remain licensed and in good standings. Monitor performance and elevate any concerns. Will ensure regular visits to the placements occur to monitor for compliance. Ensure weekly workgroup meetings occur with all providers involved in the pilot.
County of Riverside Program Specialist	\$78,408	The Program Specialist (PS) will ensure the specific strategies, treatment, services, and supports are identified for the youth and discussed in the weekly workgroup meetings. Additionally, the PS will work with the data collection team to ensure the tracking and reporting of deliverables for the pilot. review present and pending legislation related to the pilot.
County of Riverside Clerical Staff	\$43,722	The Clerical Staff will assist in the development of the recommended policies and procedures; Assist in recommendations and establishing contract forms and procedures. Additionally, will prepare correspondence, coordinate, and note taking at various meetings.
Riverside County Clinical Therapist I/II	\$706,816	 In both Riverside and San Bernardino counties the Clinical Therapist (I/II) respectively, is the Lead in the ITP teams. They will ensure all coordination of services for youth in the pilot, including the design and implementation of personalized treatment plans and interventions. Clinical Therapist serves as lead of the ITP team, as the Intensive Care Coordinator (ICC) Develop trauma-focused recommendations for youth engagement, communication, and transition preparedness.

		 Identify the individualized services and supports needed and the relevant system partners. Identify significant safety risks and provide clinically based recommendations to mitigate these risks to the greatest extent possible based on collaboration with the CFT and input from the IPC. Work closely with the youth's family, home based caregivers, or STRTP or CTF provider to prepare the family, caregiver, or provider for the youth's return.
San Bernardino County Clinical Therapist I/II	\$623,081	 In both Riverside and San Bernardino counties the Clinical Therapist (I/II) respectively, is the Lead in the ITP teams. They will ensure all coordination of services for youth in the pilot, including the design and implementation of personalized treatment plans and interventions. Clinical Therapist serves as lead of the ITP team, as the Intensive Care Coordinator (ICC) Develop trauma-focused recommendations for youth engagement, communication, and transition preparedness. Identify the individualized services and supports needed and the relevant system partners. Identify significant safety risks and provide clinically based recommendations to mitigate these risks to the greatest extent possible based on collaboration with the CFT and input from the IPC. Work closely with the youth's family, home based caregivers, or STRTP or CTF provider to prepare the family, caregiver, or provider for the youth's return.
Intensive Stabilization Services	\$215,747	The IEC will leverage other funding sources, such as Capacity Building. Provides a common thread of supportive services to ensure individualized stabilization. Provides Expedited Services to support complex care needs youth to preserve and stabilize placements. These services will follow the youth through all levels of placement to provide continuity of care.
Crisis Residential	\$5,869,216	The IEC will leverage Capacity Building funding. These funds will be used to assist with start-up. The CCRPs will serve youth experiencing acute mental health crisis as an alternative to psychiatric hospitalization. The identified CCRP's that are part of the pilot will be required to participate in weekly workgroup meetings to discuss the youth's complex needs, interventions, treatment goals, and supports tailored to ensure the youth can smoothly transition through the continuum of care whether that is most restrictive or lower level of care.

Enhanced Intensive Services Foster Care (E-ISFC) Home with Integrated Wraparound	\$2,259,228	The IEC will leverage Program- Specific Innovated Model of Care Rates. The E-ISFC model integrates ISFC-level homes with additional staffing supports to support youth with the most complex and challenging emotional and behavioral needs in a home-based setting.
Intensive Services Foster Care (ISFC) Home with Integrated Wraparound	\$80,769	The IEC will leverage Program- Specific Innovated Model of Care Rates. ISFC with Integrated Wrap parents are specially trained and supported to stabilize and nurture youth in a home setting with fully integrated behavioral health supports utilizing Therapeutic Foster Care (TFC) and Wraparound.
TOTAL	\$10,000,000	

2. IEC CCCPP Salary + Benefits Breakdown for Riverside Department of Public Social Services Staff

Department of Public Social Services Expenses					Year 1	Year 2	Year 3	Year 4	Year 5
Payroll		FTE	Annual Salary						
	Admin Services Manager II	0.50	\$116,443	\$58,222	\$29,111	\$58,222	\$60,551	\$62,973	\$65,492
	Program Specialist II	0.50	\$74,221	\$37,111	\$18,556	\$37,111	\$38,595	\$40,139	\$41,745
	Office Assistant II	0.50	\$41,387	\$20,693	\$10,347	\$20,693	\$21,521	\$22,382	\$23,277
Total Salaries			\$232,051	\$116,026	\$58,013	\$116,026	\$120,667	\$125,494	\$130,513
	Benefits @ 60%		\$139,231	\$69,615	\$34,808	\$69,615	\$72,400	\$75,296	\$78,307
Total Payroll			371,282	\$185,641	\$92,82 1	\$185,641	\$193,067	\$200,789	\$208,821
1-5 Year Total									\$881,138

3. IEC CCCPP Salary + Benefits Breakdown for Riverside County Behavioral Health Staff

Riversid	e County			Year 1	Year 2	Year 3	Year 4	Year 5
Behavioral Health								
Expense	s							
Payroll		FTE	Annual Salary					
	Clinical	1	\$93,525		\$93,525	\$97,266	\$101,157	\$105,203
	Therapist							

	Operational		\$2,500	\$2,500	\$2,500	\$2,500	\$2,500
	Expenses						
	Admin		\$21,895	\$21,895	\$21,895	\$21,895	\$21,895
Total		1	\$117,920	\$117,920	\$121,661	\$125,552	\$129,598
Salaries							
	Benefits @		\$49,944	\$49,944	\$51,941	\$54,019	\$56,180
	55%						
Total			\$167,864	\$167,864	\$173,603	\$179,571	\$185,778
Payroll							
1-5 Year							\$706,816
Total							

4. IEC CCCPP Salary + Benefits Breakdown for San Bernardino County Behavioral Health Staff

San Berr	nardino			Year 1	Year 2	Year 3	Year 4	Year 5
County E	Behavioral							
Health E	xpenses							
Payroll		FTE	Annual Salary					
	Clinical	1	\$82,706		\$82,706	\$85,187	\$87,742	\$90,375
	Therapist II							
	Operational		\$2,500		\$2,500	\$2,500	\$2,500	\$2,500
	Expenses							
	Admin		\$19,552		\$19,552	\$19,552	\$19,552	\$19,552
Total		1	\$104,758		\$104,758	\$107,239	\$109,794	\$112,427
Salaries								
	Benefits @		\$45,143		\$45,143	\$46,498	\$47,892	\$49,329
	55%							
Total			\$149,901		\$149,901	\$153,737	\$157,687	\$161,756
Payroll								
1-5 Year								\$623,081
Total								

EXHIBIT C GENERAL TERMS AND CONDITIONS

- 1. <u>APPROVAL</u>: This Agreement is of no force or effect until signed by both parties. Grantee may not commence performance until such approval has been obtained.
- 2. <u>AMENDMENT</u>: No amendment or variation of the terms of this Agreement shall be valid unless made in writing, signed by the parties and approved as required. No oral understanding or Agreement not incorporated in the Agreement is binding on any of the parties.
- 3. <u>ASSIGNMENT</u>: This Agreement is not assignable by the Grantee, either in whole or in part, without the consent of the State in the form of a formal written amendment.
- 4. <u>AUDIT</u>: Grantee agrees that the awarding Department, the State, the California State Auditor, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to the performance of this Agreement. Grantee agrees to maintain such records for possible audit for a minimum of three (3) years after final payment or end of the grant term, whichever is later, unless a longer period of records retention is stipulated. Grantee agrees to allow the auditor(s) access to such records during normal business hours and to allow interviews of any employees who might reasonably have information related to such records. Further, Grantee agrees to include a similar right of the State to audit records and interview staff in any subgrant related to performance of this Agreement. (Gov. Code § 8546.7, Pub. Contract Code § 10115 et seq., Cal. Code Regs., tit. 2, § 1896.)
- 5. <u>INDEMNIFICATION</u>: Grantee agrees to indemnify, defend and save harmless the State, its officers, agents and employees from any and all claims and losses accruing or resulting to any and all grantees, subgrantees, suppliers, laborers, and any other person, firm or corporation furnishing or supplying work services, materials, or supplies in connection with the performance of this Agreement, and from any and all claims and losses accruing or damaged by Grantee in the performance of this Agreement.
- 6. <u>DISPUTES</u>: Grantee shall continue with the responsibilities under this Agreement during any dispute.
- 7. <u>TERMINATION FOR CAUSE</u>: The State may terminate this Agreement and be relieved of any payments should the Grantee fail to perform the requirements of this Agreement at the time and in the manner herein provided. In the event of such termination the State may proceed with the work in any manner deemed proper by the State. All costs to the State shall be deducted from any sum due the Grantee under this Agreement and the balance, if any, shall be paid to the Grantee upon demand.
- 8. <u>INDEPENDENT CONTRACTOR</u>: Grantee, and the agents and employees of Grantee, in the performance of this Agreement, shall act in an independent capacity and not as officers or employees or agents of the State.

- 9. <u>RECYCLING CERTIFICATION:</u> The Grantee shall certify in writing, under penalty of perjury, the minimum, if not exact, percentage of post-consumer material as defined in the Public Contract Code section 12200, in products, materials, goods, or supplies offered or sold to the State regardless of whether the product meets the requirements of Public Contract Code section 12209. With respect to printer or duplication cartridges that comply with the requirements of section 12156(e), the certification required by this subdivision shall specify that the cartridges so comply. (Pub. Contract Code § 12205.)
- 10. NON-DISCRIMINATION CLAUSE: During the performance of this Agreement, Grantee and its subgrantees shall not deny the grant's benefits to any person on the basis of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status, nor shall they discriminate unlawfully against any employee or applicant for employment because of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status. Grantee shall ensure that the evaluation and treatment of employees and applicants for employment are free of such discrimination. Grantee and subgrantees shall comply with the provisions of the Fair Employment and Housing Act (Gov. Code § 12900 et seq.), the regulations promulgated thereunder (Cal. Code Regs., tit. 2, § 11000 et seq.), the provisions of Article 9.5, Chapter 1, Part 1, Division 3, Title 2 of the Government Code (Gov. Code §§ 11135-11139.5), and the regulations or standards adopted by the awarding state agency to implement such article. Grantee shall permit access by representatives of the Department of Fair Employment and Housing and the awarding state agency upon reasonable notice at any time during the normal business hours, but in no case less than 24 hours' notice, to such of its books, records, accounts, and all other sources of information and its facilities as said Department or Agency shall require to ascertain compliance with this clause. Grantee and its subgrantees shall give written notice of their obligations under this clause to labor organizations with which they have a collective bargaining or other agreement. (See Cal. Code Regs., tit. 2, § 11105.)

Grantee shall include the nondiscrimination and compliance provisions of this clause in all subgrants to perform work under the Agreement.

- 11. <u>CERTIFICATION CLAUSES</u>: Grantee shall complete the GRANTEE CERTIFICATION CLAUSES contained in Exhibit C Attachment 1 of this Agreement.
- 12. <u>TIMELINESS</u>: Time is of the essence in this Agreement.
- 13. <u>COMPENSATION</u>: The consideration to be paid Grantee, as provided herein, shall be in compensation for all of Grantee's expenses incurred in the performance hereof, including travel, per diem, and taxes, unless otherwise expressly so provided.
- 14. <u>GOVERNING LAW:</u> This grant is governed by and shall be interpreted in accordance with the laws of the State of California.

- 15. <u>ANTITRUST CLAIMS</u>: The Grantee by signing this Agreement hereby certifies that if these services or goods are obtained by means of a competitive bid, the Grantee shall comply with the requirements of the Government Code sections set out below.
 - a. The Government Code chapter on antitrust claims contains the following definitions:
 - "Public purchase" means a purchase by means of competitive bids of goods, services, or materials by the State or any of its political subdivisions or public agencies on whose behalf the Attorney General may bring an action pursuant to subdivision (c) of section 16750 of the Business and Professions Code.
 - 2) "Public purchasing body" means the State or the subdivision or agency making a public purchase. (Gov. Code § 4550.)
 - b. In submitting a bid to a public purchasing body, the bidder offers and agrees that if the bid is accepted, it will assign to the purchasing body all rights, title, and interest in and to all causes of action it may have under section 4 of the Clayton Act (15 U.S.C. § 15) or under the Cartwright Act (Chapter 2 (commencing with section 16700) of Part 2 of Division 7 of the Business and Professions Code), arising from purchases of goods, materials, or services by the bidder for sale to the purchasing body pursuant to the bid. Such assignment shall be made and become effective at the time the purchasing body tenders final payment to the bidder. (Gov. Code § 4552.)
 - c. If an awarding body or public purchasing body receives, either through judgment or settlement, a monetary recovery for a cause of action assigned under this chapter, the assignor shall be entitled to receive reimbursement for actual legal costs incurred and may, upon demand, recover from the public body any portion of the recovery, including treble damages, attributable to overcharges that were paid by the assignor but were not paid by the public body as part of the bid price, less the expenses incurred in obtaining that portion of the recovery. (Gov. Code § 4553.)
 - d. Upon demand in writing by the assignor, the assignee shall, within one year from such demand, reassign the cause of action assigned under this part if the assignor has been or may have been injured by the violation of law for which the cause of action arose and (a) the assignee has not been injured thereby, or (b) the assignee declines to file a court action for the cause of action. (Gov. Code § 4554.)
- 16. <u>CHILD SUPPORT COMPLIANCE ACT</u>: For any Agreement in excess of \$100,000, the Grantee acknowledges in accordance with Public Contract Code section 7110, that:

- a. The Grantee recognizes the importance of child and family support obligations and shall fully comply with all applicable state and federal laws relating to child and family support enforcement, including, but not limited to, disclosure of information and compliance with earnings assignment orders, as provided in Chapter 8 (commencing with section 5200) of Part 5 of Division 9 of the Family Code; and
- b. The Grantee, to the best of its knowledge, is fully complying with the earnings assignment orders of all employees and is providing the names of all new employees to the New Hire Registry maintained by the California Employment Development Department.
- 17. <u>UNENFORCEABLE PROVISION</u>: In the event that any provision of this Agreement is unenforceable or held to be unenforceable, then the parties agree that all other provisions of this Agreement have force and effect and shall not be affected thereby.
- PRIORITY HIRING CONSIDERATIONS: If this Grant includes services in excess of \$200,000, the Grantee shall give priority consideration in filling vacancies in positions funded by the Grant to qualified recipients of aid under Welfare and Institutions Code section 11200 in accordance with Public Contract Code section 10353.

19. <u>SMALL BUSINESS PARTICIPATION AND DVBE PARTICIPATION REPORTING</u> <u>REQUIREMENTS:</u>

- a. If for this Agreement Grantee made a commitment to achieve small business participation, then Grantee must within 60 days of receiving final payment under this Agreement (or within such other time period as may be specified elsewhere in this Agreement) report to the awarding department the actual percentage of small business participation that was achieved. (Gov. Code § 14841.)
- b. If for this Agreement Grantee made a commitment to achieve disabled veteran business enterprise (DVBE) participation, then Grantee must within 60 days of receiving final payment under this Agreement (or within such other time period as may be specified elsewhere in this Agreement) certify in a report to the awarding department: (1) the total amount the prime Grantee received under the Agreement; (2) the name and address of the DVBE(s) that participated in the performance of the Agreement; (3) the amount each DVBE received from the prime Grantee; (4) that all payments under the Grant have been made to the DVBE; and (5) the actual percentage of DVBE participation that was achieved. A person or entity that knowingly provides false information shall be subject to a civil penalty for each violation. (Mil. & Vet. Code § 999.5(d); Gov. Code § 14841.)
- LOSS LEADER: If this Agreement involves the furnishing of equipment, materials, or supplies then the following statement is incorporated: It is unlawful for any person engaged in business within this state to sell or use any article or product as a "loss leader" as defined in section 17030 of the Business and Professions Code. (Pub. Contract Code § 10344(e).)

EXHIBIT C – ATTACHMENT 1 GRANTEE CERTIFICATION CLAUSES

CERTIFICATION

I, the official named below, CERTIFY UNDER PENALTY OF PERJURY that I am duly authorized to legally bind the prospective Grantee to the clause(s) listed below. This certification is made under the laws of the State of California.

Grantee Name (Printed)		Federal ID Number
By (Authorized Signature)		
Printed Name and Title of Person Signin	ng	
Date Executed	Executed in the County of	

GRANTEE CERTIFICATION CLAUSES

- 1. <u>STATEMENT OF COMPLIANCE</u>: Grantee has, unless exempted, complied with the nondiscrimination program requirements. (Gov. Code § 12990 (a-f) and Cal. Code Regs., tit. 2, § 11102.) (Not applicable to public entities.)
- 2. <u>DRUG-FREE WORKPLACE REQUIREMENTS</u>: Grantee will comply with the requirements of the Drug-Free Workplace Act of 1990 and will provide a drug-free workplace by taking the following actions:
 - a. Publish a statement notifying employees that unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited and specifying actions to be taken against employees for violations.
 - b. Establish a Drug-Free Awareness Program to inform employees about:
 - 1. the dangers of drug abuse in the workplace;
 - 2. the person's or organization's policy of maintaining a drug-free workplace;
 - 3. any available counseling, rehabilitation and employee assistance programs; and,
 - 4. penalties that may be imposed upon employees for drug abuse violations.
 - c. Every employee who works on the proposed Agreement will:

- 1. receive a copy of the company's drug-free workplace policy statement; and,
- 2. agree to abide by the terms of the company's statement as a condition of employment on the Agreement.

Failure to comply with these requirements may result in suspension of payments under the Agreement or termination of the Agreement or both and Grantee may be ineligible for award of any future State agreements if the Department determines that any of the following has occurred: the Grantee has made false certification, or violated the certification by failing to carry out the requirements as noted above. (Gov. Code § 8350 et seq.)

- 3. <u>NATIONAL LABOR RELATIONS BOARD CERTIFICATION</u>: Grantee certifies that no more than one (1) final unappealable finding of contempt of court by a Federal court has been issued against Grantee within the immediately preceding two-year period because of Grantee's failure to comply with an order of a Federal court, which orders Grantee to comply with an order of the National Labor Relations Board. (Pub. Contract Code § 10296.) (Not applicable to public entities.)
- <u>CONTRACTS FOR LEGAL SERVICES \$50,000 OR MORE PRO BONO</u> <u>REQUIREMENT</u>: Grantee hereby certifies that Grantee will comply with the requirements of section 6072 of the Business and Professions Code, effective January 1, 2003.

Grantee agrees to make a good faith effort to provide a minimum number of hours of pro bono legal services during each year of the grant equal to the lessor of 30 multiplied by the number of full time attorneys in the firm's offices in the State, with the number of hours prorated on an actual day basis for any grant period of less than a full year or 10 percent of its grant with the State.

Failure to make a good faith effort may be cause for non-renewal of a state grant for legal services and may be taken into account when determining the award of future grants with the State for legal services.

5. <u>EXPATRIATE CORPORATIONS</u>: Grantee hereby declares that it is not an expatriate corporation or subsidiary of an expatriate corporation within the meaning of Public Contract Code sections 10286 and 10286.1 and is eligible to contract with the State of California.

6. <u>SWEATFREE CODE OF CONDUCT:</u>

a. All contractors contracting for the procurement or laundering of apparel, garments or corresponding accessories, or the procurement of equipment, materials, or supplies, other than procurement related to a public works contract, declare under penalty of perjury that no apparel, garments or corresponding accessories, equipment, materials, or supplies furnished to the State pursuant to the contract have been laundered or produced in whole or in part by sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor, or with the benefit of sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor. The contractor further declares under penalty of perjury that they adhere to the Sweatfree Code of Conduct as set forth on the California Department of Industrial Relations website located at <u>www.dir.ca.gov</u>, and Public Contract Code section 6108.

- b. The Grantee agrees to cooperate fully in providing reasonable access to the Grantee's records, documents, agents or employees, or premises if reasonably required by authorized officials of the granting agency, the Department of Industrial Relations, or the Department of Justice to determine the Grantee's compliance with the requirements under paragraph (a).
- 7. <u>DOMESTIC PARTNERS</u>: For agreements of \$100,000 or more, Grantee certifies that Grantee is in compliance with Public Contract Code section 10295.3.
- 8. <u>GENDER IDENTITY</u>: For agreements of \$100,000 or more, Grantee certifies that Grantee is in compliance with Public Contract Code section 10295.35.

DOING BUSINESS WITH THE STATE OF CALIFORNIA

The following laws apply to persons or entities doing business with the State of California.

1. <u>CONFLICT OF INTEREST</u>: Grantee needs to be aware of the following provisions regarding current or former state employees. If Grantee has any questions on the status of any person rendering services or involved with the Agreement, the awarding agency must be contacted immediately for clarification.

Current State Employees (Pub. Contract Code § 10410):

- No officer or employee shall engage in any employment, activity or enterprise from which the officer or employee receives compensation or has a financial interest and which is sponsored or funded by any state agency, unless the employment, activity or enterprise is required as a condition of regular state employment.
- 2) No officer or employee shall contract on his or her own behalf as an independent contractor with any state agency to provide goods or services.

Former State Employees (Pub. Contract Code § 10411):

- 1) For the two-year period from the date he or she left state employment, no former state officer or employee may enter into a contract in which he or she engaged in any of the negotiations, transactions, planning, arrangements or any part of the decision-making process relevant to the contract while employed in any capacity by any state agency.
- 2) For the twelve-month period from the date he or she left state employment, no former state officer or employee may enter into a contract with any state agency if he or she was employed by that state agency in a policy-making position in the same general subject area as the proposed contract within the 12-month period prior to his or her leaving state service.

If Grantee violates any provisions of above paragraphs, such action by Grantee shall render this Agreement void. (Pub. Contract Code § 10420.)

Members of boards and commissions are exempt from this section if they do not receive payment other than payment of each meeting of the board or commission, payment for preparatory time and payment for per diem. (Pub. Contract Code § 10430(e).)

- 2. <u>LABOR CODE/WORKERS' COMPENSATION</u>: Grantee needs to be aware of the provisions which require every employer to be insured against liability for Workers' Compensation or to undertake self-insurance in accordance with the provisions, and Grantee affirms to comply with such provisions before commencing the performance of the work of this Agreement. (Labor Code § 3700.)
- 3. <u>AMERICANS WITH DISABILITIES ACT</u>: Grantee assures the State that it complies with the Americans with Disabilities Act (ADA) of 1990, which prohibits discrimination on the basis of disability, as well as all applicable regulations and guidelines issued pursuant to the ADA. (42 U.S.C. § 12101 et seq.)
- 4. <u>GRANTEE NAME CHANGE</u>: An amendment is required to change the Grantee's name as listed on this Agreement. Upon receipt of legal documentation of the name change, the State will process the amendment. Payment of invoices presented with a new name cannot be paid prior to approval of said amendment.

5. CORPORATE QUALIFICATIONS TO DO BUSINESS IN CALIFORNIA:

- a. When agreements are to be performed in the State by corporations, the Department will be verifying that the Grantee is currently qualified to do business in California in order to ensure that all obligations due to the State are fulfilled.
- b. "Doing business" is defined in Revenue and Taxation Code section 23101 as actively engaging in any transaction for the purpose of financial or pecuniary gain or profit. Although there are some statutory exceptions to taxation, rarely will a corporate contractor performing within the State not be subject to the franchise tax.
- Both domestic and foreign corporations (those incorporated outside of California) must be in good standing in order to be qualified to do business in California. The Department will determine whether a corporation is in good standing by calling the Office of the Secretary of State.
- 6. <u>RESOLUTION</u>: A county, city, district, or other local public body must provide the State with a copy of a resolution, order, motion, or ordinance of the local governing body which by law has authority to enter into an agreement, authorizing execution of the Agreement.
- 7. <u>AIR OR WATER POLLUTION VIOLATION</u>: Under State law, the Grantee shall not be: (1) in violation of any order or resolution not subject to review promulgated by the State Air Resources Board or an air pollution control district; (2) subject to a cease and desist order not subject to review issued pursuant to section 13301 of the Water Code for violation of waste discharge requirements or discharge prohibitions; or (3) finally determined to be in violation of provisions of federal law relating to air or water pollution.
- 8. <u>PAYEE DATA RECORD FORM STD. 204</u>: This form must be completed by all grantees that are not another state agency or other governmental entity.

EXHIBIT D (Standard Agreement)

SPECIAL TERMS AND CONDITIONS

A. <u>Dispute Provisions</u>

- If the Grantee disputes a decision of the State's designated representative regarding the performance of this Agreement or on other issues for which the representative is authorized by this Agreement to make a binding decision, Grantee shall provide written dispute notice to the State's representative within 15 calendar days after the date of the action. The written dispute notice shall contain the following information:
 - a. the decision under dispute;
 - b. the reason(s) Grantee believes the decision of the State representative to have been in error (if applicable, reference pertinent grant provisions);
 - c. identification of all documents and substance of all oral communication which support Grantee's position; and
 - d. the dollar amount in dispute, if applicable.
- 2. Upon receipt of the written dispute notice, the State program management will examine the matter and issue a written decision to the Grantee within 15 calendar days. The decision of the representative shall contain the following information:
 - a. a description of the dispute;
 - b. a reference to pertinent grant provisions, if applicable;
 - c. a statement of the factual areas of agreement or disagreement; and
 - d. a statement of the representative's decision with supporting rationale.
- 3. The decision of the representative shall be final unless, within 30 days from the date of receipt of the representative's decision, Grantee files with the California Department of Social Services a notice of appeal addressed to:

California Department of Social Services 744 P Street, M.S. 9-6-646 Sacramento, CA 95814 Attention: Bureau Chief, Policy and Technical Assistance Bureau

Pending resolution of any dispute, Grantee shall diligently continue all grant work and comply with all of the representative's orders and directions.

B. <u>Termination of the Agreement</u>

1. This Agreement may be terminated without cause by the State upon 30 days written notice to the Grantee.

C. <u>Debarment and Suspension</u>

For federally funded agreements, <u>Grantee certifies</u> that to the best of his/her knowledge and belief that he/she and their principals or affiliates or any subgrantee utilized under this agreement, are not debarred or suspended from federal financial assistance programs and activities nor proposed for debarment, Rev: 10/17/2019 declared ineligible, or voluntarily excluded from

EXHIBIT D (Standard Agreement)

participation in covered transactions by any federal department or agency. The Grantee also certifies that it or any of its subgrantees are not listed with any active exclusions on the <u>System for Award Management</u> (Executive Order 12549, 2 CFR Parts 180, 376, 417 and 2336).

D. <u>Certification Regarding Lobbying</u>

Applicable to Grants, Subgrants, Cooperative Agreements, and Grants Exceeding \$100,000 in Federal Funds.

- 1. For Agreements with Grantees who are State entities not under the authority of the Governor, or cities, private firms or agencies which are receiving in excess of \$100,000 in federal funds from CDSS to perform services. By signing this Agreement, the Grantee certifies that to the best of his or her knowledge and belief, that:
 - a. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of a Federal grant, the making of a Federal grant, the making of a Federal loan, the entering into of a cooperative agreement, and the extension, continuation, renewal, amendment, or modification of a Federal grant, grant, loan, or cooperative agreement.
 - b. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this Federal Grant or agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying", in accordance with its instructions.
 - c. The Grantee shall require that the language of this certification be included in the award documents for all covered subawards exceeding \$100,000 in Federal funds at all appropriate tiers and that all subrecipients shall certify and disclose accordingly.
- 2. This certification is a prerequisite for making or entering into this transaction and is imposed by Section 1352, Title 31, U. S. Code. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Any person who fails to file the required certification shall be subject to a civil penalty of no less than \$10,000 and not more than \$100,000 for each such failure.

DI. Computer Software Copyrights

Grantee certifies that it has appropriate systems and controls in place to ensure that state funds will not be used in the performance of this grant for the acquisition, operation or maintenance of computer software in violation of copyright

EXHIBIT D (Standard Agreement)

F. OMB Audit

Pursuant to Office of Management and Budget (OMB) audit requirement regulations (2 C.F.R. § 200.501), non-federal entities that expend \$750,000 or more in a year in Federal awards from all sources combined shall have a single or program-specific audit conducted for that year in accordance with the provisions of 2 C.F.R. § 200.514 (previously OMB Circular A-133). All OMB audit reports shall meet the report submission requirements established in **Q**.F.R § 200.512 and a copy shall be forwarded to CDSS.

G. Subgrantees

(Applicable to agreements in which the Grantee subgrants out a portion of the work.) Nothing contained in this Agreement or otherwise shall create any contractual relationship between CDSS and any subgrantees, and no subgrantee shall relieve the Grantee of its responsibilities and obligations hereunder. The Grantee agrees to be fully responsible to CDSS for the acts and omissions of its subgrantees and of persons either directly or indirectly employed by any of them as it is for the acts and omissions of persons directly employed by the Grantee. The Grantee's obligation to pay its subgrantees is an independent obligation from the obligation of CDSS to make payments to the Grantee. As a result, CDSS shall have no obligation to pay or to enforce the payment of any moneys to any subgrantee.

H. Indirect Costs/Administrative Overhead

For agreements with other governmental entities and public universities, indirect costs are

expenses incurred for administrative services such as, but not limited to, accounting; personnel and payroll administration; accounts payable services; general and specialized insurance coverage; compliance and regulatory monitoring; independent audit services; and legal services. Indirect costs are applied to personnel, operating expenses, supplies, equipment, and travel expenses. Per State Contracting Manual, Section 3.06.B, agencies shall assure that all administrative fees are reasonable considering the services being provided. Agencies may only pay overhead charges on the first \$25,000 of each subgrant. Any subgrantee receiving \$25,000 or more must be clearly identified in the budget display and excluded when the total indirect costs are calculated.

I. Accessibility Requirements

Contractor shall comply with California Government Code sections 7405 and 11135 which requires, among other things. that Contractor shall comply with the accessibility requirements of Section 508 of the Federal Rehabilitation Act of 1973, as amended (29 U.S.C. Sec. 794d}, and regulations implementing that act as set forth in Part 1194 of Title 36 of the Federal Code of Regulations. All Contractor deliverables shall meet the requirements of the Web Content Accessibility Guidelines 2.0, or a subsequent version, published by the Web Accessibility Initiative of the World Wide Web Consortium at minimum Level AA success criteria. Contractor shall respond to and resolve any complaint regarding accessibility of its products or services that is brought to its attention.

EXHIBIT D

(Standard Agreement)

J. Russia - Ukraine Conflict Economic Sanctions

Contractor shall ensure compliance with economic sanctions imposed by the U.S. government in response to Russia's actions in Ukraine, as well as any sanctions imposed under state law (collectively, economic sanctions). Economic sanctions include, but are not limited to, refraining from new investments in, and financial transactions with, Russian institutions or companies that are headquartered or have their principal place of business in Russia (Russian entities), and not transferring technology to Russia or Russian entities. Contractor(s) are further notified that they will be subject to pursuant to Executive Order (N-6-22) issued March 4, 2022, and any other subsequently issued orders.

Riverside County Board of Supervisors Request to Speak
Submit request to Clerk of Board (right of podium), Speakers are entitled to three (3) minutes, subject to Board Rules listed on the reverse side of this form.
SPEAKER'S NAME: Roy BLECIMM
Address:(only if follow-up mail response requested)
City:Zip:
Phone #: 3.8 Date: 5.21 Agenda # 3.32
Date: Agenda #
PLEASE STATE YOUR POSITION BELOW:
Position on "Regular" (non-appealed) Agenda Item:
SupportOpposeNeutral
Note: If you are here for an agenda item that is filed for "Appeal", please state separately your position on the appeal below:
SupportOpposeNeutral
I give my 3 minutes to:
(Revised: 08/16/2022)