

Plan and Budget Required Documents Checklist

MODIFIED FY 2021/2022

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County/City: **NEVADA COUNTY** **Fiscal Year:** 2021-22

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Agency Information Sheet

County/City: NEVADA COUNTY

Fiscal Year: 2021-22

Official Agency

Name:	Nevada County Public Health	Address:	500 Crown Point Circle, Ste 110 Grass Valley, CA 95945
Health Officer:	Scott Kellermann, MD, MPHTM		500 Crown Point Circle, Ste 110 Grass Valley, CA 95945

CMS Director (if applicable)

Name:	Scott Kellermann	Address:	500 Crown Point Circle, Ste 110 Grass Valley, CA 95945
Phone:	(530)265-1450		
Fax:	(530)271-0894	E-Mail:	Health.Officer@co.nevada.ca.us

CCS Administrator

Name:	Maryellen Beauchamp	Address:	500 Crown Point Circle, Ste 110 Grass Valley, CA 95945
Phone:	(530)265-1425		
Fax:	(530)271-0894	E-Mail:	Maryellen.Beauchamp@co.nevada.ca.us

CHDP Director

Name:	Scott Kellerman	Address:	500 Crown Point Circle, Ste 110 Grass Valley, CA 95945
Phone:	(530)265-1450		
Fax:	(530)271-0894	E-Mail:	Health.Officer@co.nevada.ca.us

CHDP Deputy Director

Name:	Cynthia Wilson	Address:	500 Crown Point Circle, Ste 110 Grass Valley, CA 95945
Phone:	(530)265-7269		
Fax:	(530)271-0894	E-Mail:	Cynthia.Wilson@co.nevada.ca.us

Clerk of the Board of Supervisors or City Council

Name:	Julie Patterson Hunter	Address:	950 Maidu Avenue, Suite 200 Nevada City, CA 95959
Phone:	(530)265-1480		
Fax:	(530)265-9836	E-Mail:	Julie.Patterson-Hunter@co.nevada.ca.us

Director of Social Services Agency

Name:	Rachel Pena Roos	Address:	950 Maidu Avenue, Suite 120 Nevada City, CA 95959
Phone:	(530)265-1340		
Fax:	(530)265-9859	E-Mail:	Rachel.Roos@co.nevada.ca.us

Chief Probation Officer

Name:	Jeff Goldman	Address:	109 ½ North Pine Street Nevada City, CA 95959
Phone:	(530)265-1200		
Fax:	(530)265-6293	E-Mail:	Jeff.Goldman@co.nevada.ca.us

Children's Medical Services Plan and Fiscal Guidelines

State of California - Health and Human Services Agency

Department of Health Care Services - Children's Medical Services

Certification Statement - Child Health and Disability Prevention (CHDP) Program

County/City: NEVADA COUNTY Fiscal Year: **2021-22**

I certify that the CHDP Program will comply with all applicable provisions of Health and Safety Code, Division 106, Part 2, Chapter 3, Article 6 (commencing with Section 124025), Welfare and Institutions Code, Division 9, Part 3, Chapters 7 and 8 (commencing with Section 14000 and 14200), Welfare and Institutions Code Section 16970, and any applicable rules or regulations promulgated by DHCS pursuant to that Article, those Chapters, and that section. I further certify that this CHDP Program will comply with the Children's Medical Services Plan and Fiscal Guidelines Manual, including but not limited to, Section 9 Federal Financial Participation. I further certify that this CHDP Program will comply with all federal laws and regulations governing and regulating recipients of funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further agree that this CHDP Program may be subject to all sanctions or other remedies applicable if this CHDP Program violates any of the above laws, regulations and policies with which it has certified it will comply.

Scott Kellermann MD

Dec 15, 2021

Signature of CHDP Director
Scott Kellermann, MD, MPHTM

Date Signed

Jill Blake

Jill Blake (Dec 17, 2021 09:21 PST)

Dec 17, 2021

Signature of Director or Health Officer
Jill Blake, Public Health Director

Date Signed

Cynthia d Wilson

Cynthia d Wilson (Dec 8, 2021 12:41 PST)

Dec 8, 2021

Signature of CHDP Deputy Director
Cynthia Wilson, Director of Public Health Nursing

Date Signed

I certify that this plan has been approved by the local governing body.

Signature of Local Governing Body Chairperson

Date Signed

Chair of the Board of Supervisors

Children's Medical Services Plan and Fiscal Guidelines

State of California - Health and Human Services Agency

Department of Health Care Services - Children's Medical Services

Certification Statement - California Children's Services (CCS)

County/City: NEVADA COUNTY Fiscal Year: **2021-22**

I certify that the CCS Program will comply with all applicable provisions of Health and Safety Code, Division 106, Part 2, Chapter 3, Article 5, (commencing with Section 123800) and Chapters 7 and 8 of the Welfare and Institutions Code (commencing with Sections 14000-14200), and any applicable rules or regulations promulgated by DHCS pursuant to this article and these Chapters. I further certify that this CCS Program will comply with the Children's Medical Services Plan and Fiscal Guidelines Manual, including but not limited to, Section 9 Federal Financial Participation. I further certify that this CCS Program will comply with all federal laws and regulations governing and regulating recipients of funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.) and recipients of funds allotted to states for the Maternal and Child Health Services Block Grant pursuant to Title V of the Social Security Act (42 U.S.C. Section 701 et seq.). I further agree that this CCS Program may be subject to all sanctions or other remedies applicable if this CCS Program violates any of the above laws, regulations and policies with which it has certified it will comply.

Maryellen Beauchamp Sr. PHN
Maryellen Beauchamp Sr. PHN (Dec 21, 2021 13:07 PST)

Dec 21, 2021

Signature of CCS Administrator
Maryellen Beauchamp, Sr. Public Health Nurse

Date Signed

Jill Blake
Jill Blake (Dec 17, 2021 09:21 PST)

Dec 17, 2021

Signature of Director or Health Officer
Jill Blake, Public Health Director

Date Signed

Erin Mettler
Erin Mettler (Dec 30, 2021 09:41 PST)

Dec 30, 2021

Signature of Chief Fiscal / Administrative Officer
Erin Mettler, Chief Fiscal / Administrative Officer

Date Signed

I certify that this plan has been approved by the local governing body.

Signature of Local Governing Body Chairperson

Date Signed

Chair of the Board of Supervisors

Nevada County Public Health
Children's Medical Service

Agency Description
FY 2021-22

Brief Narrative

Nevada County is in the rural Sierra Nevada Foothills and has a population of just less than 100,000. The three primary aggregated areas of population, Grass Valley, Nevada City, and the town of Truckee, comprise roughly 30% of the county population with the remaining 70% of the residents living in small towns and unincorporated areas.

The county has five geographical districts. Each district elects one representative to serve as a member of the Board of Supervisors, which is the legislative and executive body of county government.

Nevada County Health and Human Services Agency (HHSA) is supervised by Ryan Gruver. The HHSA is comprised of Public Health, Child Support Services, Social Services, and Behavioral Health Departments. Scott Kellermann, M.D., MPHTM, is our Public Health Officer effective January 1, 2021 and Jill Blake, MPA has been the Director of Public Health since November 2014.

Within the Public Health Department, the CMS program consists of California Children's Services (CCS) which includes the Medical Therapy Unit (MTU); Child Health and Disability Prevention (CHDP); and the Health Care Program for Children in Foster Care (HCPCFC).

Nursing and support staff for this FY year include the following: Cindy Wilson, PHN, as the Director of Public Health Nursing (DPHN), Maryellen Beauchamp, Senior PHN, as the CCS Nurse Case Manager; Remy Lindsey, PHN focusing on CHDP management follow-up, Chie Newsom, PHN in Lead management follow-up, Sherry Armstrong PHN in HCPCFC Case Management services; Kathryn Kestler, Senior PHN, also in HCPCFC/CPS; Katie Magliocca, HT, and Dawn Graves, HTII, providing clerical and administrative support.

Staffing at the Medical Therapy Unit is as follows: Carne Barsotti, PT, Senior Therapist. Rebecca Giammona, PTA; and the part-time OT position remains vacant. Nevada County contracts with Permanente Medical Group for Lawrence Manhart, MD, to provide physiatrist services for quarterly clinics.

Accomplishments for FY 2020-2021:

- Case managed an average of approximately 381 active CCS clients per month
- Continued a contract with Permanente Medical Group for continuity of physiatrist services for MTU children
- Maintained a contract/MOU with Medi-Cal Managed Care through California Health and Wellness and Anthem Blue Cross, including whole child model transitions when transferring to or from other counties for CCS
- Developed a Continuity of Operations Plan for events such as power shut-offs, emergencies and pandemics
- Provided PT services, with support for OT activities, to approximately 50 children through the MTU
- Held equipment and orthotic clinics on a quarterly basis at the MTU, with multi-disciplinary providers participating and case-conferencing with 40 families
- Pivoted to video sessions for MTU therapy and in person hybrid indoor/outdoor services.
- Maintained essential CCS services throughout Covid pandemic
- Case managed children referred to CWS, including developmental assessments with referrals as appropriate and monitoring of psychotropic medications
- Continued CHDP responsibilities with a focus on dental and foster care

Anticipated Changes for FY 2021-2022:

- Continue recruitment for part time OT
- Enact programmatic changes in CCS, CHDP, and HCPCFC as directed by California DHCS and/or CDPH
- Continue to meet quarterly with representatives from California Health and Wellness and Anthem Blue Cross to improve services and avoid duplication
- Evaluate clinical practice and fiscal activity processes to enhance efficiencies and effectiveness throughout the CMS program
- Continue to provide all services as mandated via video conferencing and in person when possible during the Covid pandemic
- Continue to update the database of equipment-dependent children to initiate contact during power shut-offs and emergencies
- Establish a referral system for children within CWS and from CWS to MCAH

Children’s Medical Services Plan and Fiscal Guidelines

State of California - Health and Human Services Agency

Department of Health Care Services - Children's Medical Services

Incumbent List - California Children’s Services

For FY 2021-22, complete the table below for all personnel listed in the CCS budgets. Use **the same** job titles for both the budget and the incumbent list. Total percent for an individual incumbent should **not be over 100 percent**.

Specify whether job duty statements or civil service classification statements have been revised or changed. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

County/City:

NEVADA COUNTY

Fiscal Year: 2021-22

Job Title	Incumbent Name	FTE % on CCS Admin Budget	Have Job Duties Changed? (Yes or No)	Has Civil Service Classification Changed? (Yes or No)
Senior PHN, Case Manager	Maryellen Beauchamp	100%	N	N
Health Technician II	Katie Magliocca	100%	N	N
Health Technician II	Dawn Graves	70%	N	N

Children's Medical Services Plan and Fiscal Guidelines

State of California - Health and Human Services Agency

Department of Health Care Services - Children's Medical Services

Incumbent List - Child Health and Disability Prevention Program

For FY 2021-22, complete the table below for all personnel listed in the CHDP budgets. Use **the same** job titles for both the budget and the incumbent list. Total percent for an individual incumbent should **not be over 100 percent**.

Specify whether job duty statements or civil service classification statements have been revised or changed. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

County/City:

NEVADA COUNTY

Fiscal Year: **2021-22**

Job Title	Incumbent Name	FTE % on CHDP No County/ City Match Budget	FTE % on CHDP County/City Match Budget	FTE % in Other Programs (Specify)	Have Job Duties Changed? (Yes or No)	Has Civil Service Classification Changed? (Yes or No)
Senior PHN	Char Weiss-Wenzl	2.5%	0%	97.5% Various	N	N
PHN II, Temp	Remy Lindsey	10%	0%	90% Various	N	N
PHN, Temp	Chie Newsom	5% CHDP 2.6% CHDP-LPP	0%	92.4% Various	N	N
Health Technician II	Dawn Graves	5%	0%	95% Various	N	N
Admin Assistant	Carol Smith	5%	0%	95% Various	N	N

**CHDP Program Referral Data
Fiscal Year 2021-22**

County/City: NEVADA COUNTY	FY 18-19		FY 19-20		FY 20-21	
Basic Informing and CHDP Referrals						
1. Total number of CalWORKs/Medi-Cal cases informed and determined eligible by Department of Social Services	CalWORKs 441	Medi-Cal 2314	CalWORKs 371	Medi-Cal 1701	CalWORKs 451	Medi-Cal 1798
2. Total number of cases and recipients in "1" requesting CHDP services	Cases	Recipients	Cases	Recipients	Cases	Recipients
a. Number of CalWORKs cases/recipients	2	3	10	32	7	22
b. Number of Foster Care cases/recipients	0	0	0	0	0	0
c. Number of Medi-Cal only cases/recipients	1	2	10	25	18	46

3. Total number of EPSDT eligible recipients and unborn, referred by Department of Social Services' workers who requested the following:	5	57	64
a. Medical and/or dental services	5	49	36
b. Medical and/or dental services with scheduling and/or transportation	3	40	28
c. Information only (optional)	2	3	26
4. Number of persons who were contacted by telephone, home visit, face-to-face, office visit, or written response to outreach letter	5	20	25
Results of Assistance			
5. Number of recipients actually provided scheduling and/or transportation assistance by program staff	0	0	0
6. Number of recipients in "5" who actually received medical and/or dental services	0	0	0

Children’s Medical Services Plan and Fiscal Guidelines

State of California - Health and Human Services Agency

Department of Health Care Services - Children's Medical Services

Memoranda of Understanding/Interagency Agreement List

List all current Memoranda of Understanding (MOU) and/or Interagency Agreements (IAA) in California Children's Services, Child Health and Disability Prevention Program, and Health Care Program for Children in Foster Care. Specify whether the MOU or IAA has changed. Submit only those MOU and IAA that are new, have been renewed, or have been revised. For audit purposes, counties and cities should maintain current MOU and IAA on file.

County/City: NEVADA COUNTY

Fiscal Year: 2021-22

Title or Name of MOU/IAA	Is this a MOU or an IAA?	Effective Dates From/To	Date Last Reviewed by County/ City	Name of Person Responsible for this MOU/IAA?	Did this MOU/IAA Change? (Yes or No)
Nevada County IAA	IAA	7/1/21-6/30/23	6/21	Cynthia Wilson	Yes
HCPCFC/CWS MOU	MOU	7/1/21-6/30/23	6/21	Cynthia Wilson	Yes
CHDP/Head Start	IAA	7/1/20-6/30/22	6/20	Cynthia Wilson	No
SELPA MOU	IAA	7/1/18-present	6/18	Cynthia Wilson	No
Blue Cross CCS/HF	MOU	2/99-present	2/99	Cynthia Wilson	No
Blue Shield CCS/HF	MOU	2/99-present	2/99	Cynthia Wilson	No
Access Dental CCS/HF	MOU	2/99-present	2/99	Cynthia Wilson	No

Children’s Medical Services Plan and Fiscal Guidelines

County/City: **NEVADA COUNTY**

Fiscal Year: **2021-22**

Title or Name of MOU/IAA	Is this a MOU or an IAA?	Effective Dates From/To	Date Last Reviewed by County/ City	Name of Person Responsible for this MOU/IAA?	Did this MOU/IAA Change? (Yes or No)
Delta Dental CCS/HF	MOU	2/99-present	2/99	Cynthia Wilson	No
EyeMed Vision Care CCS/HF	MOU	7/1/05-present	10/05	Cynthia Wilson	No
SafeGuard Vision CCS/HF	MOU	7/1/05-present	10/05	Cynthia Wilson	No
VSP Vision Svc CCS/HF	MOU	2/99-present	2/99	Cynthia Wilson	No
California Health & Wellness	MOU	11/1/13-present	7/15	Cynthia Wilson	No

Nevada County
Intra-agency Agreement
Fiscal Years
7/1/21-6/30/22 and 7/1/22-6/30/23

I. Statement of Agreement

This statement of agreement is entered into between Nevada County Public Health, Nevada County Department of Social Services, and Probation Department to assure compliance with federal and state regulations and the appropriate expenditure of Bright Futures funds in the implementation of the Child Health and Disability Prevention (CHDP) Program.

II. Statement of Need

The following specific needs in Nevada County have been identified as a focus for Fiscal Years (FY) 2021-2022 and 2022-2023.

Specific needs in Nevada County are:

- A. Need for increasing the number of referrals for CHDP services and access of Nevada County citizens to Medi-Cal or other medical insurance
- B. Need for continuing staff education for the purposes of increasing referrals to the CHDP program and identifying children's health conditions for which to seek consultation and coordination by trained health professionals.
- C. Need for collaboration between parties for case management and improved client outcomes.

III. Organizational and Functional Relationships

- A. The exchange of information about persons applying for or receiving Medi-Cal, with or without linkages to other social services programs as outlined in this document, is permitted by state and federal law and regulations, and is to be maintained in a confidential manner.

IV. Department of Social Services' Responsibilities and Activities

A. Basic Informing and Documentation of Informing for CalWORKs and Medi-Cal Only

Following are the requirements for basic informing and documentation of Informing by Eligibility Determination staff of persons applying for, or receiving CalWORKs or Medi-Cal Only.

- 1. CalWORKs Application/Annual Re-determination

- a. In the eligibility intake interview, the appropriate responsible adult(s) for Medi-Cal eligible persons, including the unborn, and persons under 21 years of age will be:
 - (1) Given a state approved brochure about the CHDP Program.
 - (2) Given an oral explanation about CHDP including:
 - (a) The value of preventive health services and the differences between episodic and wellness care;
 - (b) Availability of health assessments;
 - (c) Availability of dental services; and
 - (d) The need for prompt diagnosis and treatment of suspected conditions to prevent disabilities and that all medically necessary diagnosis and treatment services will be paid for by Medi-Cal; and
 - (e) The nature, scope, and benefits of the CHDP Program.
 - (3) Asked questions to determine whether:
 - (a) More information about CHDP Program services is wanted; and
 - (b) CHDP Program services--medical and/or dental --are wanted; and
 - (c) Appointment scheduling and/or transportation assistance are needed to obtain requested CHDP medical and/or dental services.
- b. The Eligibility Determination staff will document in the C-IV system that informing occurred:
 - (1) Explanation and brochure given;
 - (2) Date of the explanation and giving of the brochure; and,
 - (3) The individual responses to the CHDP services questions.

2. Medi-cal Application/Annual Re-determination

- a. Responsible adult(s) for Medi-Cal eligible persons under 21 years of age who apply by mail will do so through completion of a State-approved Medi-Cal Application/Annual Re-determination process. The Application/Annual Re-determination process includes providing a

State-approved brochure about the CHDP Program to the applicant. The State-approved brochure about the CHDP Program, entitled "Medical and Dental Health Check-Ups," (PUB 183) informs the family of where to call or write if:

- 1) More information about CHDP Program services is wanted; or
 - 2) Help with getting an appointment and transportation to medical care is needed.
- b. Eligibility Determination staff will document if any follow-up action is required.

Note: Any "Yes" response to the CHDP questions or offer of services through face-to-face encounters or mail-in requests requires a referral on the CHDP Referral Form (PM 357), or a state approved, alternate form. See CHDP Program Letter No. 81-5 and All County Letter No. 81-43.

B. Basic Informing and Documentation of Informing for Children in Foster Care Program Placements

Following are the requirements for basic informing and documentation of informing by staff responsible for placement of children in foster care, including placements controlled by the Probation Department, Licensed Adoption Agency, and/or Placement Agencies.

1. Within 30 days of the date of placement, the staff responsible for placing the child will document the need, if known, for any health, medical, or dental care and will ensure that information is given to the payee, hereafter referred to as the out-of-home care provider, about the needs of the eligible child and the availability of CHDP services through the CHDP Program.
2. In the case of an out-of-state placement, the social worker shall ensure information is given to the out-of-home care provider about the federal EPSDT services. The care provider and/or child will be:

Given a face-to-face oral explanation about CHDP, including:

- (1) The value of preventive health services and the differences between episodic and wellness care;
- (2) The availability of health assessments according to Bright Futures and State and Child Welfare regulations, and how to obtain health assessments at more frequent intervals if no health assessment history is documented, or the child has entered a new foster care placement;

- (3) The availability of annual dental exams for children one year of age and older;
 - (4) The need for prompt diagnosis and treatment of suspected conditions to prevent disabilities and that all medically necessary diagnosis and treatment services will be paid for by Medi-Cal; and
 - c. Asked questions to determine whether:
 - (1) CWS/Probation staff ensure and provide arrangements for appointment scheduling assistance and/or transportation arrangement assistance as needed to obtain medical and/or dental services.
- 2. The Child Welfare Services staff, probation and or Foster Care PHNs responsible for placement will document Health and Dental information in the Health Education Passport (HEP)
- 3. A “payee,” referred to as the “out-of-home care provider” or “substitute care provider (SCP)” is defined as the foster parent(s) in a foster home, or the officially designated representative of the payee when the child in the foster care program or Medi-Cal eligible child residing in a group home, residential treatment center, or other out-of-home care facility.
- 4. Informing requirements described in IV. A. 1. through A. 3. shall apply for AFDC-FC recipients for out-of-home placement with a relative, or upon return of the child to the parents(s).
- 5. All payees (out-of-home care providers) responsible for foster care children placed out-of-county will be informed of the services in the placement county.

C. Referral to the EPSDT Unit or CHDP Program

- 1. All “Yes” responses to the offers of more information about CHDP, CHDP medical/dental services, and appointment scheduling/transportation assistance will be documented on a CHDP Referral Form (PM 357), or a state approved alternate form. The referral form will be sent to the CHDP/EPSDT Unit. This action is required to ensure that these services are received and that any necessary diagnostic and/or treatment services are initiated within 120 days of the date of eligibility determination for persons receiving assistance through CalWORKs or Medi-Cal Only, and within 120 days of the date of request if by self-referral or for children in foster care placements.

D. Information Provided by Social Services Staff on the CHDP Referral Form (PM 357)

The following will be included on the referral form when any “Yes” response is given, written or verbal, to the offer of services:

1. Case Name and Medi-Cal Identification Number.
2. Type of services requested:
 - a. Additional information.
 - b. Medical services.
 - c. Dental services.
 - d. Transportation assistance.
 - e. Appointment scheduling assistance.
3. Source of referral:
 - a. New application.
 - b. Redetermination.
 - c. Self-referral.
4. Case type:
 - a. CalWORKs
 - b. Foster Care.
 - c. Medi-Cal Only (Full Scope, Limited Scope with or without a Share-of-Cost).
5. Complete listing of members in case with birth dates including unborns and the expected date of confinement (EDC).
6. Listing of the payee/out-of-home care provider and child in foster care.
7. Residence address and telephone number.
8. DSS Worker signature.
9. Date of eligibility determination for CalWORKs and Medi-Cal only cases or date of request for children in foster care and self-referrals.

E. Case Management for Children in Foster Care

1. The Child Welfare/Probation staff responsible for placement of the child will ensure that the child receives medical and dental care which places attention on preventive health services as defined by Bright Futures guidelines. More frequent health assessments may be obtained for a child when the child enters a new placement.
2. Medical records including, but not limited to, copies of the form: Health Care Program for Children in Foster Care , the HEP, or State approved alternative form or results of equivalent preventive health services for any child in foster care and for children in foster care over the age of one year, result(s) of dental visit(s) must also be maintained in the case record to verify health status of the child.
3. The case plan will contain a plan which ensures that the child receives medical and dental care which places attention on preventive health services through the CHDP Program or equivalent preventive health services in accordance with the Bright Future's schedule for periodic health and dental assessments.

V. EPSDT Unit Responsibilities and Activities

- A. The EPSDT unit is administratively located and physically stationed in the Nevada County Public Health Department.
- B. Duty Statement of EPSDT Worker and EPSDT Professional Public Health Nurse.
- C. Overall medical and administrative supervision is provided by Nevada County Public Health Officer and the Director of Public Health Nurses. Day-to-day program supervision is provided by an assigned Public Health Nurse.
- D. The Unit will accept and take appropriate action on all referrals of Medi-Cal eligible persons under 21 years of age, including unborns, and will:
 1. Intensively inform those requesting more information, and offer scheduling and transportation assistance to those who request CHDP medical and/or dental services.
 2. Provide all requested scheduling and/or transportation assistance so that medical and/or dental services can be received from a provider of the requester's choice. These services will be provided and diagnosis and treatment initiated within 120 days of the person's date of eligibility determination or redetermination, and within 120 days of a request if by self- referral or for children in foster care placements unless:

- a. Eligibility is lost; or,
 - b. Person is lost to contact and a good faith effort was made to locate the person as defined in Section VII; or,
 - c. Failure to receive services was due to an action or decision of the family or person.
- 3. Assure that persons asking for health assessment procedures not furnished by their provider are referred to another provider for those procedures so that all requested CHDP services are received within 120 days of the initial request.
 - 4. Follow up on persons requesting appointment scheduling and transportation assistance to:
 - a. Re-offer scheduling and transportation assistance to those persons whose failure to keep appointments was not due to an action or decision of the family or person.
 - b. Offer and provide requested assistance to those for whom further diagnosis and treatment is indicated.
- E. The following will be documented on the CHDP Referral Form (PM 357) or an alternate, state-approved form for each eligible person listed:
- 1. Type of transportation assistance and date given.
 - 3. Appointment scheduling assistance and date given.
 - 4. Follow up to needed diagnosis and treatment.
 - 5. Disposition of case: appointment kept or not kept, eligibility lost, family declined further services, or family/person lost to contact and Good Faith Effort was made to locate the person as defined in Section VII.

VI. CHDP Program Responsibilities and Activities

- A. An adequate number of medical providers will be available to meet county needs and federal regulations in regard to allowable time frames.
- B. The county will make all possible attempts to assure an adequate number of dental providers to meet county needs and Federal regulations.
- C. An adequate supply of the following materials will be available to meet Social Services Department and other county needs:

1. State approved informing brochure with the address and phone number of the local CHDP Program.
 2. Current list of CHDP medical and dental providers.
 3. Other informational material, e.g., CHDP poster.
- D. When eligible persons still needing CHDP services move to another county, the new county will be notified and appropriate information sent.
- A memo is sent to the new county with a copy of the PM 357 or State approved alternative form.
- E. All persons eligible for Title V services (California’s women of reproductive age, infants, children, adolescents, and their families) will be informed of availability of these services and referred as requested.
- F. Referrals for Public Health Nursing services for intensive informing and follow up to health assessment and diagnosis and treatment will be accepted, and such services will be provided.

VII. Joint Social Services/CHDP Responsibilities

A Good Faith Effort will be made to locate all persons lost to contact. The EPSDT Unit/CHDP Program will query the Social Services Department for current addresses, telephone numbers, and Medi-Cal status of these persons. Upon request, the Social Services Department will share this information. The exchange of this confidential information is based on federal and state regulations.

VIII. Staff Education

- A. As needed, the Public Health Nurse or designee will provide training to Social Services and Probation Department staff.
- B. All appropriate health department staff will receive an annual update regarding the CHDP Program.
- C. Additional staff in-service education needs will be identified in the event of the following:
 1. Regulatory changes;
 2. Identified needs revealed through program evaluation/reports;
 3. Identified needs revealed through task force/problem solving meetings.

IX. Compliance Certification

In signing this agreement, we hereby certify that the CHDP Program in our community will meet all federal and state legislative and regulatory requirements.

This interagency agreement is in effect from July 1, 2021 through June 30, 2023 unless revised by mutual agreement.

NOTE: In the event that changes in federal or state legislation impact the current Intra-agency Agreement, the Public Health Department and Social Services Department agree to renegotiate the pertinent section within 90 days of receiving new language or instructions from the State.

Jill Blake
Jill Blake (Dec 17, 2021 09:21 PST)

Jill Blake
Nevada County Public Health Director

Dec 17, 2021

Date

Rachel Peña Roos, LCSW
Rachel Peña Roos, LCSW (Dec 21, 2021 10:41 PST)

Rachel Peña Roos
Nevada County Social Services Director

Dec 21, 2021

Date

Jeff Goldman
Jeff Goldman (Dec 21, 2021 09:12 PST)

Jeff Goldman
Nevada County Probation Department
Chief Probation Officer

Dec 21, 2021

Date

**Memoranda of Understanding
Health Care Program for Children in Foster Care
and Child Welfare Services
Fiscal Years
7/1/21-6/30/22 and 7/1/22-6/30/23**

**SUGGESTED AREAS OF RESPONSIBILITY FOR CHILD HEALTH AND DISABILITY PREVENTION (CHDP) PUBLIC HEALTH NURSES (PHNs)
/ CHILD WELFARE SERVICES PUBLIC HEALTH NURSES (PHNs) AND
CHILD WELFARE SERVICES (CWS) AGENCY SOCIAL WORKERS AND PROBATION OFFICERS IN THE
HEALTH CARE PROGRAM FOR CHILDREN IN FOSTER CARE / CHILD WELFARE SERVICES PROGRAMS**

Service Provided	Local Child Welfare Services PHN Responsibilities	Local Child Welfare Service Agency Responsibilities Social Worker/Probation Officer
Location	PHN will be located in CWS and/or Probation Dept. with accessibility to all team members servicing children in CWS programs and Probation Department.	PHN will be located with CWS agency staff and/or the Probation Department. CWS and Probation Department personnel will have accessibility to all PHNs servicing children in placement.
Supervision	PHN I/II will be supervised by the Senior PHN, Sr PHN will be supervised by the Director of Public Health Nursing (DPHN) in the CWS and/or Probation program with input from CWS /Probation managers and supervisors.	CWS Program Manager/Supervising Probation Supervisor will communicate regularly regarding PHN performance with the Senior PHN and/or Director of Public Health Nursing.
Accessing Resources	<p>PHN will serve as a resource to facilitate (e.g., assist in scheduling appointments, arranging transportation, etc.) referrals to early intervention providers, specialty providers, dentists, mental health providers, CCS and other community programs.</p> <p>PHN will assist nurses in the child’s county of residence to identify and access resources to address the health care needs of children placed out of county.</p>	<p>CWS Social Workers/Probation Officers will work with the foster care provider and the PHN to identify an appropriate health care provider for the child.</p> <p>CWS Social Workers/Probation Officers will work with the PHN to ensure that children placed out of county have access to health services appropriate to age and health status.</p>

Service Provided	Local Child Welfare Services PHN Responsibilities	Local Child Welfare Service Agency Responsibilities Social Worker/Probation Officer
<p>Health Care Planning and Coordination</p>	<p>PHN will ensure completion of the Health & Education Passport (HEP), provide a copy to the family or legal guardian, and will participate in updating the HEP as required by state & federal guidelines.</p> <p>PHN will expedite timely referrals for medical, dental, developmental, and mental health services.</p> <p>PHN will assist Social Worker/Probation Officer in obtaining additional services necessary to educate and/or support the child's caregiver in providing for the child's special health care needs and will obtain and provide health care documentation when necessary to support the request for health care services.</p> <p>The PHN will participate in Child Family Team (CFT) meetings and/or multi-disciplinary coalitions related to children's medical, dental, psychiatric, and social needs.</p> <p>PHN will follow the Drug Endangered Child (DEC) protocol and assist the Social Worker/Probation Officer related to child health and welfare. The PHN will attend court detention hearings and provide health education information as needed.</p>	<p>Child's Social Worker/Probation Officer will collaborate with PHN to develop a health plan which identifies the health care needs and service priorities for each child requiring PHN services.</p> <p>Social Worker/Probation Officer or designee will incorporate health plan into child's case record.</p> <p>Social Worker/Probation Officer will assemble and provide health care documentation to the court when necessary to support the request for health care services.</p> <p>Social Worker/Probation Officer will collaborate to complete and keep current the child's HEP or its equivalent and provide a copy of the HEP to the child's care provider, family and/or legal guardian.</p> <p>CWS will provide an RFA screening area and necessary equipment (measurement of height/weight/blood pressure) to perform screening and documentation.</p> <p>Social Worker/Probation Officer will collaborate with PHN regarding health-related concerns and will include PHN in multi-disciplinary meetings related to health needs and concerns.</p> <p>CWS Social Workers/Probation Officers will follow the DEC protocol in consulting the PHN to address child health care needs.</p>

Service Provided	Local Child Welfare Services PHN Responsibilities	Local Child Welfare Service Agency Responsibilities Social Worker/Probation Officer
	<p>The PHN will coordinate and facilitate communications with health care providers regarding Child Welfare Services (CWS) and Probation clients.</p> <p>On an as-needed basis the PHN will assist CWS Social Workers and Probation Officers with in-home and/or group home visits, encompassing psychotropic medication management per state regulations.</p> <p>The PHN will provide nursing assessment services during forensic exams on a case by case basis.</p> <p>The PHN will provide case management for children receiving psychotropic medications according to state regulations and guidelines.</p> <p>The PHN will attend Multi-disciplinary Interviews (MDI) and Child Family Team meetings (CFT) as needed based on the child's health status and related health needs.</p> <p>PHN will participate with Inter-Agency Placement Committee addressing the suitability of child's placement.</p> <p>PHN will assist CWS Social Workers and/or Probation Officers with interpreting health related documents to ensure information provided in court reports is current and up to date.</p>	<p>CWS and Probation will assist in the coordination and facilitation of communications between the PHN and caretakers including group home and/or involved agencies.</p> <p>On an as-needed basis the CWS Social Workers/Probation Officers will request the assistance of the PHN with health related in-home and/or group home visits.</p> <p>On a case by case basis, Social Workers/Probation Officers will request PHN nursing assessment services for forensic findings.</p> <p>Social Workers/Probation Officers will request PHN nursing assessment services for psychotropic medication management for all CWS and Probation cases receiving psychotropic medications.</p> <p>CWS/Probation will request the PHN to attend Multi-disciplinary Interviews (MDI) and/or Child Family Team meetings (CFT), case staffing based on the child's health status and related health needs.</p> <p>Following the Inter-Agency Placement Committee protocol PHN will collaborate with CWS, Probation and Children's Behavioral Health to assess the suitability of the child's placement considering the special health care needs of the child.</p> <p>Social Workers/Probation Officer will review child's health plan with PHN at least every six months and before every court hearing. Relevant health information will be incorporated into the HEP and court report.</p>

Service Provided	Local Child Welfare Services PHN Responsibilities	Local Child Welfare Service Agency Responsibilities Social Worker/Probation Officer
Training/ Orientation	<p>PHN will educate social workers, juvenile court staff, care providers, school nurses and involved parties about the health care needs of children in CWS.</p> <p>PHN will maintain currency with the Child Welfare Services/Case Management System (CWS/CMS) program and policies.</p>	<p>CWS agency staff/Probation Officers will collaborate with PHNs in educating social workers, juvenile court staff, care providers, school nurses and others about the health care needs of children in CWS.</p> <p>CWS agency/Probation department will arrange for PHN access to the Child Welfare Services/Case Management System (CWS /CMS) system and provide training in its use.</p>
Policy /Procedure Development	<p>PHN will provide program consultation to CWS/ Probation Department in the development and implementation of program policies related to the Health Care Program for Children in Foster Care / CWS.</p>	<p>CWS staff/Probation Officers will include the PHN in team and staff meetings and provide orientation to social services and consultation on CWS/CMS.</p>
Transition from CWS	<p>PHN will provide assistance to the Social Worker/Probation Officer and the child exiting CWS on the availability of options of health care coverage and community resources to meet the health care needs of the child.</p>	<p>CWS staff/Probation Officers will collaborate with PHN to assure a child leaving CWS is aware of health care coverage and community resources addressing the child’s health care needs.</p>
Quality Assurance	<p>PHN will conduct joint reviews of case records for documentation of health care services with CWS /Probation Department.</p> <p>PHN will work with CWS /Probation Department to develop a plan for evaluating the process and impact of the addition of the PHN component to CWS/Probation Department.</p> <p>PHN will utilize the CWS/CMS and Safe Measures computer databases to evaluate health care services.</p>	<p>CWS staff/Probation Officers will conduct joint reviews of case records for documentation of health care services.</p> <p>CWS staff/Probation Department will work with PHN to develop a plan for evaluating the process and impact of the addition of the PHN component to the foster care team.</p> <p>CWS staff/Probation Officers will collaborate and assist PHN in gathering data from CWS/CMS and Safe Measures.</p>

CHDP Administrative Budget Summary for FY 2021/2022
No County/City Match
County/City Name: NEVADA

Column	1	2	3	4	5
Category/Line Item	Total Budget (2 + 3)	Total CHDP Budget	Total Medi-Cal Budget (4 + 5)	Enhanced State/Federal (25/75)	Nonenhanced State/Federal (50/50)
I. Total Personnel Expenses	\$26,186	\$26,186	\$26,186	\$12,285	\$13,901
II. Total Operating Expenses	\$1,500	\$1,500	\$1,500	\$0	\$1,500
III. Total Capital Expenses	\$0	\$0	\$0		\$0
IV. Total Indirect Expenses	\$6,546	\$6,546	\$6,546		\$6,546
V. Total Other Expenses	\$0	\$0	\$0		\$0
Budget Grand Total	\$34,232	\$34,232	\$34,232	\$12,285	\$21,947

Column	1	2	3	4	5
Source of Funds	Total Funds	Total CHDP Budget	Total Medi-Cal Budget	Enhanced State/Federal	Nonenhanced State/Federal
State General Funds					
Medi-Cal Funds:					
State	\$14,045		\$14,045	\$3,071	\$10,974
Federal (Title XIX)	\$20,187		\$20,187	\$9,214	\$10,974

James Kraywinkel

Prepared By (Signature)

11/9/2021

Date Prepared

(530) 470-2415

Phone Number

James.Kraywinkel@co.nevada.ca.us

Email Address

Cynthia O. Wilson

CHDP Director or Deputy
Director (Signature)

11-24-21

Date

(530) 265-7269

Phone Number

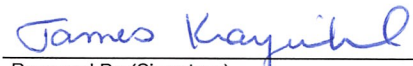
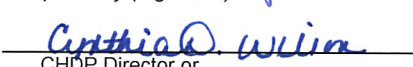
Cynthia.Wilson@co.nevada.ca.us

Email Address

**CHDP Administrative Budget Worksheet for FY 2021/2022
No County/City Match
State and State/Federal**

County/City Name: NEVADA

Column	1A	1B	1	2A	2	3A	3	4A	4	5A	5
Category/Line Item	% or FTE	Annual Salary	Total Budget (1A x 1B or 2 + 3)	CHDP % or FTE	Total CHDP Budget	Total Medi-Cal %	Total Medi-Cal Budget (4 + 5)	% or FTE	Enhanced State/Federal (25/75)	% or FTE	Nonenhanced State/Federal (50/50)
Personnel Expenses											
1. Senior PHN - Weiss-Wenzl	100%	\$106,721	\$106,721.00	2.5%	\$2,668	85%	\$2,268	60.0%	\$1,600.82	25.0%	\$667.01
2. PHN - Newsom	100%	\$96,590	\$96,590.00	5.0%	\$4,830	90%	\$4,347	70.0%	\$3,380.65	20.0%	\$965.90
3. PHN Temp - Lindsey 100 hours	100%	\$45,970	\$45,970.00	10.0%	\$4,597	95%	\$4,367	75.0%	\$3,447.75	20.0%	\$919.40
4. Health Tech - Graves	100%	\$51,012	\$51,012.00	5.0%	\$2,551	100%	\$2,551	0.0%	\$0.00	100.0%	\$2,550.60
5. Admin Ass't - Smith	100%	\$66,446	\$66,446.00	5.0%	\$3,322	100%	\$3,322	0.0%	\$0	100.0%	\$3,322
6.											
Total Salaries and Wages			\$366,739		\$17,967		\$16,854		\$8,429		\$8,425
Less Salary Savings			\$0		\$0		\$0		\$0		\$0
Net Salaries and Wages			\$366,739		\$17,967		\$16,854		\$8,429		\$8,425
Staff Benefits (Specify %) 45.74%			\$187,276		\$8,218		\$7,709		\$3,855		\$3,854
I. Total Personnel Expenses			\$554,015		\$26,186		\$24,563		\$12,285		\$12,279
II. Operating Expenses											
1. Travel					\$300		\$300		\$0		\$300
2. Training					\$300		\$300		\$0		\$300
3. General Office Expense					\$240		\$240				\$240
4. Copier/Duplication					\$240		\$240				\$240
5. Postage					\$60		\$60				\$60
6. Communication					\$360		\$360				\$360
7.											
II. Total Operating Expenses					\$1,500		\$1,500		\$0		\$1,500
III. Capital Expenses											
1.											
II. Total Capital Expenses											
IV. Indirect Expenses											
1. Internal (Specify %) 25.00%					\$6,546		\$6,546				\$6,546
2. External (Specify %) 0.00%							\$0				\$0
IV. Total Indirect Expenses					\$6,546		\$6,546				\$6,546
V. Other Expenses											
1.											
V. Total Other Expenses					\$0		\$0				\$0
Budget Grand Total			\$554,015		\$34,232		\$32,610		\$12,285		\$20,325

	9/29/21	(530) 470-2415	James.Kraywinkel@co.nevada.ca.us
Prepared By (Signature)	Date Prepared	Phone Number	Email Address
	11-24-21	(530) 265-7269	Cynthia.Wilson@co.nevada.ca.us
CHDP Director or Deputy Director	Date	Phone Number	Email Address

NEVADA COUNTY
Children's Medical Services
FY 2021-2022 No Match CHDP Budget Justification Narrative

(1) Personnel Expense		<u>Justification Narrative</u>
Total Salaries	\$17,968	Salaries are based actual individual CHDP staff salaries from the FY 21/22 County budget.
Total Benefits	\$8,218	Benefits are based actual individual CHDP staff benefits from the FY 21/22 County CHDP budget. Annual Worker's Comp charge is included in benefits
Total Personnel Expense	<u>\$ 26,186</u>	
<u>Personnel Positions</u>		
	FTE	
1. Senior Public Health Nurse-Weiss Wenzl	0.03	This position is budgeted for 2.5% which is a decrease of 2.5% from FY 20/21
2. PHN II Temp-Lindsey	0.20	This position is budgeted for 20%, which is the same as FY 20/21
3. PHN II	0.05	This position is budgeted for 5%, which is a decrease of 40% from FY 20/21
4. Health Tech II (Graves)	0.05	This position is budgeted for 5%, which is a decrease of 5% from FY 20/21
5. Administrative Assistant (Smith)	0.05	This position is budgeted at 5%, which is a decrease of 5% from FY 20/21.
<u>(2) Operating Expenses</u>		
		<u>Justification Narrative</u>
Travel	\$300	Includes travel to statewide conferences, regional meetings, travel for approved training, daily program activities, personal vehicle use mileage and actual cost for lodging and meals for overnight travel. This is a reduction of \$300 from FY 20/21.
Training	\$300	This is a reduction of \$300 from FY 20/21.
Office Supplies	\$240	Includes general office supplies and minor equipment under \$1,000. This is a decrease of \$260 from FY 20/21.
Copier/Duplication	\$240	This is a decrease of \$260 from FY 20/21.
Postage	\$60	This is a decrease of \$240 from FY 20/21.
Communication	\$360	This is for PHN cell phone usage. This is a decrease of \$120 from FY 20/21.
Total Operating Expenses	<u>\$1,500</u>	
(3) Capital Expense	\$ -	- No Capital Expense anticipated in FY 21/22.
<u>(4) Indirect Expense</u>		
		<u>Justification Narrative</u>
Internal - 25.00%	\$6,546	CHDP Program's share of costs based on 25.00% of Personnel costs (26,185 X 25.00%) and reflects anticipated program costs as shown in the FY 21/22 County budget. Indirect cost rate equals the CDPH approved ICRP for FY 21/22.
Total Indirect Expense	<u>\$ 6,546</u>	
(5) Other Expenses	\$ -	
Budget Grand Total	<u>\$ 34,232</u>	



Department of Health Care Services - Integrated Systems of Care Division
 Child and Disability Prevention Program
 Lead Poisoning Prevention



COUNTY/CITY: Nevada

CHDP-LPP Budget Summary
 FISCAL YEAR 2021-2022

CATEGORY/LINE ITEM	CHDP-LPP FUNDS (100% CHDP-LPP)
I. TOTAL PERSONNEL EXPENSE	4,087.46
II. TOTAL TRAVEL EXPENSE	
III. TOTAL OTHER EXPENSE	
BUDGET GRAND TOTAL	

Source of Funds	CHDP-LPP FUNDS (100% CHDP-LPP)
CHDP-LPP FUND GRAND TOTAL	4,087.46

James Kraywinkel
 James Kraywinkel

James.Kraywinkel@co.nevada.ca.us

530-470-2415

Prepared By

Email Address

Telephone Number

CERTIFICATION: I hereby certify under penalty of perjury that I am the duly authorized officer of the claimant herein and this claim is in all respects true, correct, and in accordance with the law; that the materials, supplies, or services claimed have been received or performed and were used or performed exclusively in connection with the program; that I have not violated any of the provisions of Section 1030 to 1036 of the Government Code in incurring the items of expense included in this claim; that prior to the end of the quarter for which the claim is submitted, warrants have been issued in payment of all expenditures included in this claim; that payment has not previously been received for the amount claimed herein; and that the original invoices, payrolls, and other vouchers in support of this claim are on file with the county.

Cynthia D. Wilson

11-24-21

CHDP Director/Deputy Director (Signature)

Date

Department of Health Care Services - Integrated Systems of Care Division

CHDP-LPP Local Assistance Allocation Budget Worksheet Fiscal Year:

County/City Name: Nevada

Column	1	2	3
Category/Line Item	% of FTE towards CHDP-LPP	Annual Salary	Total Budget (1 x 2 for Personnel)
I. Personnel Expense			
1. Chie Newsom, Public Health Nurs	0.026%	95,625	2,486.25
2. Employee Name, Position	0.00%	0	0
3. Employee Name, Position	0.00%	0	0
4. Employee Name, Position	0.00%	0	0
6. Employee Name, Position	0.00%	0	0
7. Employee Name, Position	0.00%	0	0
8. Employee Name, Position	0.00%	0	0
9. Employee Name, Position	0.00%	0	0
10. Employee Name, Position	0.00%	0	0
Total Salaries and Wages			0
Staff Benefits (Specify %)	64.83%		1,601.21
I. Total Personnel Expense			4,087.46
II. Total Travel Expense			0
III. Other Expense (Must Separately Itemize all Other Expenses below)			
1.			
2.			
3.			
4.			
5.			
III. Total Other Expense			0
Budget Grand Total			4,087.46

James Kraywinkel	11/9/21	530-470-2415	james.kraywinkel@co.nevada.ca.us
Prepared By	Date Prepared	Phone Number	Email Address
<i>Cynthia D. Wilson</i>	<i>11.24.21</i>	530-265-7269	cynthia.wilson@co.nevada.ca.us
CHDP Director/Deputy Director (Sign)	Date	Phone Number	Email Address

CCS CASELOAD	Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS - Total Cases of Open (Active) Straight CCS Children	630.5670026	14.14%
OTLIPC - Total Cases of Open (Active) OTLIPC Children	976.8780163	21.91%
MEDI-CAL - Total Cases of Open (Active) Medi-Cal (non-OTLIPC) Children	2851.554981	63.95%
TOTAL CCS CASELOAD	4459	100%

CCS Administrative Baseline Budget Summar

Fiscal Year: 2021-22

County: Nevada

	Col 1 = Col 2+3+4	Straight CCS	OTLIPC	Medi-Cal (non-OTLIPC) (Column 4 = Columns 5 + 6)		
Column	1	2	3	4	5	6
Category/Line Item	Total Budget	Straight CCS County/State (50/50)	Optional Targeted Low Income Children's Program (OTLIPC) County/State/Fed (11.75/11.75/76.5)	Medi-Cal State/Federal	Enhanced Medi-Cal State/Federal (25/75)	Non-Enhanced Medi-Cal State/Federal (50/50)
I. Total Personnel Expense	325,450	46,024	71,300	208,127	52,897	155,230
II. Total Operating Expense	6,472	917	1,417	4,140	0	4,140
III. Total Capital Expense	0	0	0	0		0
IV. Total Indirect Expense	65,090	9,205	14,260	41,625		41,625
V. Total Other Expense	4,500	636	986	2,878		2,878
Budget Grand Total	401,512	56,782	87,963	256,770	52,897	203,873

	Col 1 = Col 2+3+4	Straight CCS	OTLIPC	Medi-Cal (non-OTLIPC) (Column 4 = Columns 5 + 6)		
Column	1	2	3	4	5	6
Source of Funds	Total Budget	Straight CCS County/State (50/50)	Optional Targeted Low Income Children's Program (OTLIPC) County/State/Fed (11.75/11.75/76.5)	Medi-Cal State/Federal	Enhanced Medi-Cal State/Federal (25/75)	Non-Enhanced Medi-Cal State/Federal (50/50)
Straight CCS						
State	28,391	28,391				
County	28,391	28,391				
OTLIPC						
State	17,777		17,777			
County	17,777		17,777			
Federal (Title XXI)	52,409		52,409			
Medi-Cal						
State	115,161			115,161	13,224	101,937
Federal (Title XIX)	141,609			141,609	39,673	101,936

James Kraywinkel

James Kraywinkel
Prepared By (Printed Name)

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Email Address

Maryellen Beauchamp

Maryellen Beauchamp
CCS Administrator (Printed Name)

Maryellen.Beauchamp@co.nevada.ca.us
Email Address

CCS CASELOAD	FY 20/21 Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS - Total Cases of Open (Active) Straight CCS Children	630,567	14.14%
OTLICP - Total Cases of Open (Active) OTLICP Children	976,878	21.91%
MEDI-CAL - Total Cases of Open (Active) Medi-Cal (non-OTLICP) Children	2,851,555	63.95%
TOTAL CCS CASELOAD	4,459	100%

CCS Administrative Baseline Budget Worksheet

Fiscal Year: 2021-2022

County: NEVADA

Column				Straight CCS		Optional Targeted Low Income Children's Program (OTLICP)		Medi-Cal (Non-OTLICP)					
	1	2	3	4A	4	5A	5	6A	6	7A	7	8A	8
Category/Line Item	% FTE	Annual Salary	Total Budget (1 x 2 or 4 + 5 + 6)	Caseload %	Straight CCS County/State (50/50)	Caseload %	Optional Targeted Low Income Children's Program (OTLICP) Co/State/Fed (11.75/11.75/76.5)	Caseload %	Medi-Cal State/Federal	Enhanced % FTE	Enhanced Medi-Cal State/Federal (25/75)	Non-Enhanced % FTE	Non-Enhanced Medi-Cal State/Federal (50/50)
I. Personnel Expense													
Program Administration													
1. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0			100.00%	0
2. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0			100.00%	0
3. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0			100.00%	0
4. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0			100.00%	0
5. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0			100.00%	0
Subtotal		0	0		0		0		0				0
Medical Case Management													
1. Maryellen Beauchamp, Public Health Nurse	100.00%	106,721	106,721	14.14%	15,092	21.91%	23,380	63.95%	68,249	45.15%	30,814	54.85%	37,435
2. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
3. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
4. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
5. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
6. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
7. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
8. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
Subtotal		106,721	106,721		15,092		23,380		68,249		30,814		37,435
Other Health Care Professionals													
1. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
2. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
3. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
Subtotal		0	0		0		0		0		0		0
Ancillary Support													
1. Katie Magliocca, Health Technician	100.00%	47,153	47,153	14.14%	6,668	21.91%	10,330	63.95%	30,155			100.00%	30,155
2. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0			100.00%	0
3. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0			100.00%	0
4. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0			100.00%	0
5. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0			100.00%	0
Subtotal		47,153	47,153		6,668		10,330		30,155				30,155
Clerical and Claims Support													
1. Dawn Graves, Health Technician	70.00%	51,012	35,708	14.14%	5,050	21.91%	7,823	63.95%	22,835	0.00%	0	100.00%	22,835
2. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
3. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
4. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
5. Employee Name, Position	0.00%	0	0	14.14%	0	21.91%	0	63.95%	0	0.00%	0	100.00%	0
Subtotal		51,012	35,708		5,050		7,823		22,835		0		22,835

CCS CASELOAD	FY 20/21 Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS - Total Cases of Open (Active) Straight CCS Children	630,567	14.14%
OTLICP - Total Cases of Open (Active) OTLICP Children	976,878	21.91%
MEDI-CAL - Total Cases of Open (Active) Medi-Cal (non-OTLICP) Children	2851,555	63.95%
TOTAL CCS CASELOAD	4459	100%

CCS Administrative Baseline Budget Worksheet

Fiscal Year: 2021-2022

County: NEVADA

Column				Straight CCS		Optional Targeted Low Income Children's Program (OTLICP)		Medi-Cal (Non-OTLICP)					
	1	2	3	4A	4	5A	5	6A	6	7A	7	8A	8
Category/Line Item	% FTE	Annual Salary	Total Budget (1 x 2 or 4 + 5 + 6)	Caseload %	Straight CCS County/State (50/50)	Caseload %	Optional Targeted Low Income Children's Program (OTLICP) Co/State/Fed (11.75/11.75/76.5)	Caseload %	Medi-Cal State/Federal	Enhanced % FTE	Enhanced Medi-Cal State/Federal (25/75)	Non-Enhanced % FTE	Non-Enhanced Medi-Cal State/Federal (50/50)
Total Salaries and Wages			189,582	14.14%	26,810	21.91%	41,534	63.95%	121,239	25.42%	30,814	74.58%	90,425
Staff Benefits (Specify %)	71.67%		135,868	14.14%	19,214	21.91%	29,766	63.95%	86,888		22,083		64,805
I. Total Personnel Expense			325,450	14.14%	46,024	21.91%	71,300	63.95%	208,127		52,897		155,230
II. Operating Expense													
1. Travel			422	14.14%	60	21.91%	92	63.95%	270	0.00%	0	100.00%	270
2. Training			600	14.14%	85	21.91%	131	63.95%	384	0.00%	0	100.00%	384
3. Supplies, postage			1,920	14.14%	272	21.91%	421	63.95%	1,228				1,228
4. Printing/Duplication			210	14.14%	30	21.91%	46	63.95%	134			100.00%	134
5. Communication, cell, fax, main line			2,220	14.14%	314	21.91%	486	63.95%	1,420			100.00%	1,420
6. Memberships			500	14.14%	71	21.91%	110	63.95%	320			100.00%	320
7. Equipment Repair/Upkeep			600	14.14%	85	21.91%	131	63.95%	384			100.00%	384
II. Total Operating Expense			6,472		917		1,417		4,140		0		4,140
III. Capital Expense													
1.				14.14%	0	21.91%	0	63.95%	0				0
2.				14.14%	0	21.91%	0	63.95%	0				0
3.				14.14%	0	21.91%	0	63.95%	0				0
III. Total Capital Expense			0		0		0		0				0
IV. Indirect Expense													
1. Indirect Cost Rate	20.00%		65,090	14.14%	9,205	21.91%	14,260	63.95%	41,625			100.00%	41,625
			0	14.14%	0	21.91%	0	63.95%	0			100.00%	0
IV. Total Indirect Expense			65,090		9,205		14,260		41,625				41,625
V. Other Expense													
1. Maintenance & Transportation			4,500	14.14%	636	21.91%	986	63.95%	2,878			100.00%	2,878
2.				14.14%	0	21.91%	0	63.95%	0			100.00%	0
3.				14.14%	0	21.91%	0	63.95%	0			100.00%	0
4.				14.14%	0	21.91%	0	63.95%	0			100.00%	0
5.				14.14%	0	21.91%	0	63.95%	0			100.00%	0
V. Total Other Expense			4,500		636		986		2,878				2,878
Budget Grand Total			401,512		56,782		87,963		256,770		52,897		203,873

Prepared By (Signature) James Kraywinkel James Kraywinkel Prepared By (Printed Name) Date Prepared 11/24/2021 Phone Number (530) 470-2415
 CCS Administrator (Signature) Maryellen Beauchamp Maryellen Beauchamp CCS Administrator (Printed Name) Date Signed 11/23/2021 Phone Number (530) 265-1425

**Children's Medical Services
Nevada County
CCS Budget Justification Narrative
Fiscal Year 2021-2022**

I. PERSONNEL EXPENSES		
Total Salaries:	\$189,582	Salaries are based actual individual CCS staff salaries from the FY 21-22 County CCS budget. Benefits are based actual individual CCS staff benefits from the FY 21-22 County CCS budget.
Total Benefits:	\$135,868	
Total Personnel Expenses:	\$325,450	
PHN II/ Case Manager (Beauchamp)	This position is budgeted for 100% which is the same as the FY 20/21 budget.	
Health Tech (Magliocca)	This position is budgeted at 100%, which is the same as FY 20/21.	
Health Tech (Graves)	This position is budgeted at 70% which is a decrease of 6% from FY 20/21.	

II. OPERATING EXPENSES		
Travel	\$422	Two overnight stays for training in Sacramento @ \$221 per diem per day
Training	\$600	Three online trainings @ \$200 registration per training. Travel and Training is an overall decrease of \$418 from FY 20/21
Communication	\$2,220	This is an increase of \$276 from FY 20/21.
General Supplies/Postage	\$1,920	This is a decrease of \$1,520 from FY 20/21.
Equipment Repair/Upkeep	\$600	IS. And F/M charges related to equipment repair and teleworking needs. This is a decrease of \$360 from FY 20/21
Duplication	\$210	This a decrease of \$420 from FY 20/21.
CRISS Annual Dues	\$500	This is the same as FY 20/21.
Total Operating Expenses:	\$6,472	

III. CAPITAL EXPENSES		
Total Capital Expenses:	0	None

IV. INDIRECT EXPENSES		
1. Internal (25.00%)	\$65,090	This amount is 20% of Personnel charges(\$325,450 X 20%=\$65,090. the 20% is within the approved CDPH ICRP for FY 20/21. It is a decrease of \$13,518 from FY 20/21.
Total Indirect Expenses:	\$65,090	

V. OTHER EXPENSES		
Maintenance & Transportation	\$4,500	Transportation, meals and lodging for CCS clients. This is the same as FY 20/21.
Total Other Expenses:	\$4,500	

Budget Grand Total	\$401,512
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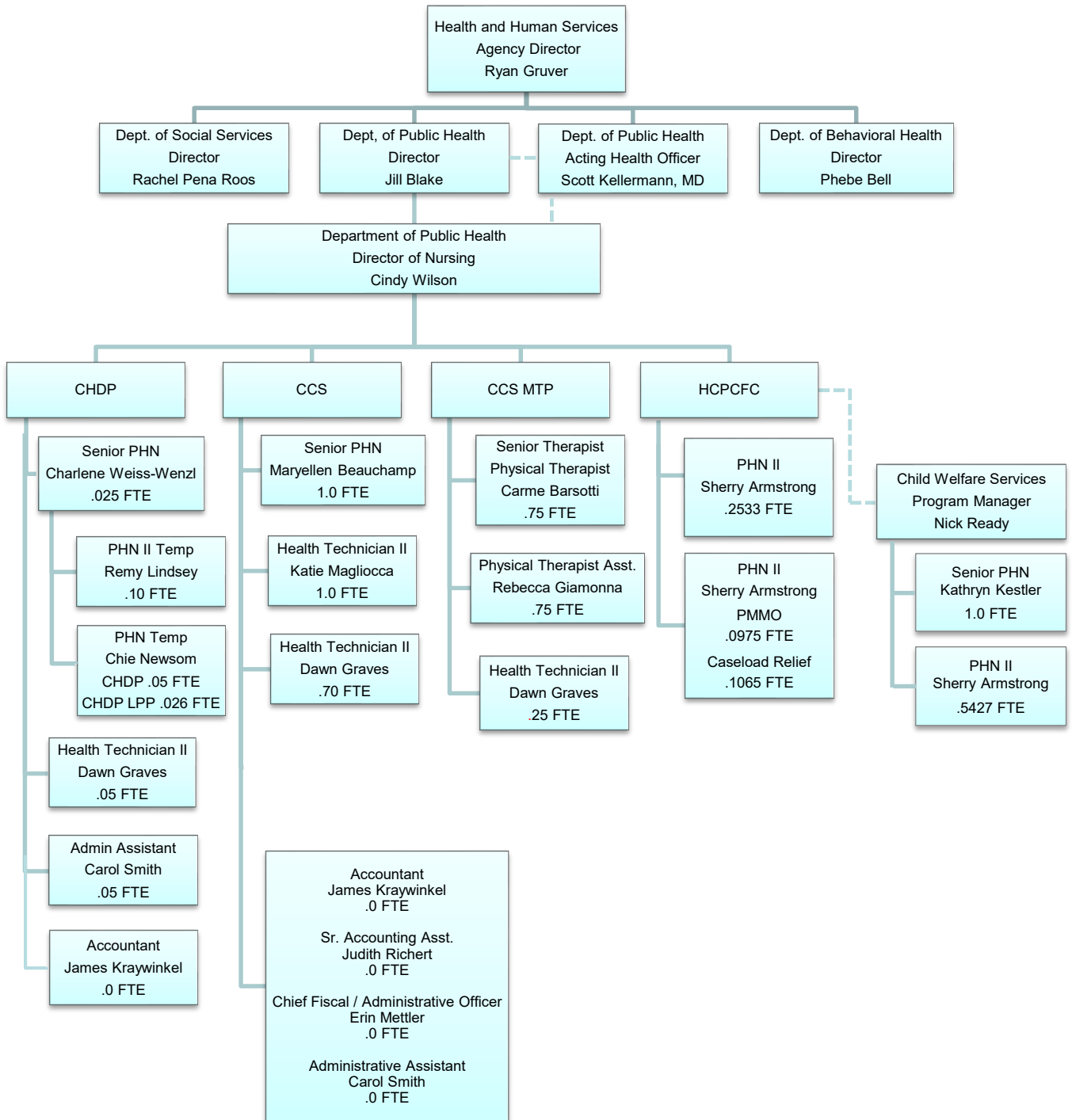
Department of Health Care Services
 Integrated Systems of Care Division
 Health Care Program for Children in Foster Care
 Plan and Budgets Required Checklist



Attachment 2

County-City Name:		NEVADA	Fiscal Year:	2021-22
<input checked="" type="checkbox"/>	A	HCPCFC Incumbent List. Please submit only one list.		
<input checked="" type="checkbox"/>	B	HCPCFC Organizational Chart		
<input checked="" type="checkbox"/>	C	HCPCFC Budgets		
<input checked="" type="checkbox"/>	1	Base		
		<input checked="" type="checkbox"/>	Budget Summary	
		<input checked="" type="checkbox"/>	Budget Worksheet	
		<input checked="" type="checkbox"/>	Budget Justification Narrative	
<input checked="" type="checkbox"/>	2	Psychotropic Medication Monitoring & Oversight (PMM&O)		
		<input checked="" type="checkbox"/>	Budget Summary	
		<input checked="" type="checkbox"/>	Budget Worksheet	
		<input checked="" type="checkbox"/>	Budget Justification Narrative	
<input checked="" type="checkbox"/>	3	Caseload Relief		
		<input checked="" type="checkbox"/>	Budget Summary	
		<input checked="" type="checkbox"/>	Budget Worksheet	
		<input checked="" type="checkbox"/>	Budget Justification Narrative	
<input checked="" type="checkbox"/>	4	Optional County-City/Federal Match		
		<input checked="" type="checkbox"/>	Budget Summary	
		<input checked="" type="checkbox"/>	Budget Worksheet	
		<input checked="" type="checkbox"/>	Budget Justification Narrative	
<input checked="" type="checkbox"/>	D	Civil Service Classification Statements for all HCPCFC Staff		
		<input checked="" type="checkbox"/>	Base	
		<input checked="" type="checkbox"/>	PMM&O	
		<input checked="" type="checkbox"/>	Caseload Relief	
		<input checked="" type="checkbox"/>	County-City/Federal Match	
<input checked="" type="checkbox"/>	E	Duty Statements for all HCPCFC staff		
		<input checked="" type="checkbox"/>	Base	
		<input checked="" type="checkbox"/>	PMM&O	
		<input checked="" type="checkbox"/>	Caseload Relief	
		<input checked="" type="checkbox"/>	County-City/Federal Match	

2021-22 Nevada County Children's Medical Services





Department of Health Care Services
 Integrated Systems of Care Division
 Health Care Program for Children in Foster Care
 State/Federal
 Budget Summary



Identify State/Federal Funding Source (Base, PMM&O, or Caseload Relief): State/Federal - Base

County-City Name: NEVADA Fiscal Year: 2021/2022

Category/Line Item	Total Budget	Enhanced State/Federal (25/75)	Non-Enhanced State/Federal (50/50)
A	(B = C + D)	C	D
I Total Personnel Expenses	\$38,020	\$38,020	\$0
II Total Operating Expenses	\$0	\$0	\$0
III Total Capital Expenses	\$0	\$0	\$0
IV Total Indirect Expenses	\$0	\$0	\$0
V Total Other Expenses	\$0	\$0	\$0
Budget Grand Total	\$38,020	\$38,020	\$0

Source of Funds	Total Funds	Enhanced State/Federal (25/75)	Non-Enhanced State/Federal (50/50)
E	(F = G + H)	G	H
State Funds	\$9,505	\$9,505	\$0
Federal Funds (Title XIX)	\$28,515	\$28,515	\$0
Budget Grand Total	\$38,020	\$38,020	\$0

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 CHDP Director Or Deputy Director (Print & Sign) Date Phone Number E-mail Address



Department of Health Care Services
 Integrated Systems of Care Division
 Health Care Program for Children in Foster Care
 State/Federal
 Budget Worksheet



Identify State/Federal Funding Source (Base, PMM&O, or Caseload Relief): BASE

County-City Name: NEVADA Fiscal Year: 2021/2022

Column					1A	1B	1	2A	2	3A	3
Category/Line Item					% FTE	Annual Salary	Total Budget	% FTE	Enhanced State/Federal (25/75)	% FTE	Non-Enhanced State/Federal (50/50)
I. Personnel Expenses											
#	Last	First	Title	PHN (Y/N)							
1	Armstrong	Shery	Public Health Nurse	Y	25.33%	\$96,590	\$24,467.00	100.00%	\$24,467	0.00%	\$0
2						\$0	\$0.00		\$0	100.00%	\$0
3						\$0	\$0.00		\$0	100.00%	\$0
4						\$0	\$0.00		\$0	100.00%	\$0
5						\$0	\$0.00		\$0	100.00%	\$0
6						\$0	\$0.00		\$0	100.00%	\$0
7						\$0	\$0.00		\$0	100.00%	\$0
8						\$0	\$0.00		\$0	100.00%	\$0
9						\$0	\$0.00		\$0	100.00%	\$0
10						\$0	\$0.00		\$0	100.00%	\$0
11						\$0	\$0.00		\$0	100.00%	\$0
12						\$0	\$0.00		\$0	100.00%	\$0
13						\$0	\$0.00		\$0	100.00%	\$0
14						\$0	\$0.00		\$0	100.00%	\$0
15						\$0	\$0.00		\$0	100.00%	\$0
16						\$0	\$0.00		\$0	100.00%	\$0
17						\$0	\$0.00		\$0	100.00%	\$0
18						\$0	\$0.00		\$0	100.00%	\$0
19						\$0	\$0.00		\$0	100.00%	\$0
20						\$0	\$0.00		\$0	100.00%	\$0
Total Number of PHN Staff				1							
Total FTE PHN Staff					0.25%			100.00%		0.00%	
Total Salaries and Wages							\$24,468		\$24,468		\$0
Less Salary Savings							\$0		\$0		\$0
Net Salaries and Wages							\$24,468		\$24,468		\$0
Staff Benefits (Specify %)				55.39%		\$13,553		\$13,553		\$0	
I. Total Personnel Expenses							\$38,021		\$38,021		\$0
II. Operating Expenses											
1	Travel			\$0			\$0	0.00%	\$0	100.00%	\$0
2	Training			\$0			\$0	0.00%	\$0	100.00%	\$0
II. Total Operating Expenses							\$0		\$0		\$0
III. Capital Expenses											
III. Total Capital Expenses											
IV. Indirect Expenses											
1	Internal (Specify %)			0.00%			\$0				\$0
2	External										
IV. Total Indirect Expenses							\$0		\$0		\$0
V. Other Expenses											
V. Total Other Expenses											
Budget Grand Total							\$38,021		\$38,021		\$0

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Department of Health Care Services
 Integrated Systems of Care Division
 Health Care Program for Children in Foster Care
 State/Federal
 Budget Summary



Identify State/Federal Funding Source (Base, PMM&O, or Caseload Relief): PMM&O

County-City Name: NEVADA Fiscal Year: 2021/2022

Category/Line Item	Total Budget	Enhanced State/Federal (25/75)	Non-Enhanced State/Federal (50/50)
A	(B = C + D)	C	D
I Total Personnel Expenses	\$14,634	\$14,634	\$0
II Total Operating Expenses	\$0	\$0	\$0
III Total Capital Expenses	\$0	\$0	\$0
IV Total Indirect Expenses	\$0	\$0	\$0
V Total Other Expenses	\$0	\$0	\$0
Budget Grand Total	\$14,634	\$14,634	\$0

Source of Funds	Total Funds	Enhanced State/Federal (25/75)	Non-Enhanced State/Federal (50/50)
E	(F = G + H)	G	H
State Funds	\$3,658	\$3,658	\$0
Federal Funds (Title XIX)	\$10,976	\$10,976	\$0
Budget Grand Total	\$14,634	\$14,634	\$0

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Department of Health Care Services
 Integrated Systems of Care Division
 Health Care Program for Children in Foster Care
 State/Federal
 Budget Worksheet



Identify State/Federal Funding Source (Base, PMM&O, or Caseload Relief): PMM&O

County-City Name: NEVADA Fiscal Year: 2021/2022

Column					1A	1B	1	2A	2	3A	3
Category/Line Item					% FTE	Annual Salary	Total Budget	% FTE	Enhanced State/Federal (25/75)	% FTE	Non-Enhanced State/Federal (50/50)
I. Personnel Expenses											
#	Last	First	Title	PHN (Y/N)							
1	Armstrong	Sherry	Public Health Nurse	Y	9.75%	\$96,590	\$9,417.00	100.00%	\$9,417	0.00%	\$0
2						\$0	\$0.00		\$0	100.00%	\$0
3						\$0	\$0.00		\$0	100.00%	\$0
4						\$0	\$0.00		\$0	100.00%	\$0
5						\$0	\$0.00		\$0	100.00%	\$0
6						\$0	\$0.00		\$0	100.00%	\$0
7						\$0	\$0.00		\$0	100.00%	\$0
8						\$0	\$0.00		\$0	100.00%	\$0
9						\$0	\$0.00		\$0	100.00%	\$0
10						\$0	\$0.00		\$0	100.00%	\$0
11						\$0	\$0.00		\$0	100.00%	\$0
12						\$0	\$0.00		\$0	100.00%	\$0
13						\$0	\$0.00		\$0	100.00%	\$0
14						\$0	\$0.00		\$0	100.00%	\$0
15						\$0	\$0.00		\$0	100.00%	\$0
16						\$0	\$0.00		\$0	100.00%	\$0
17						\$0	\$0.00		\$0	100.00%	\$0
18						\$0	\$0.00		\$0	100.00%	\$0
19						\$0	\$0.00		\$0	100.00%	\$0
20						\$0	\$0.00		\$0	100.00%	\$0
Total Number of PHN Staff				1							
Total FTE PHN Staff					0.10%			100.00%		0.00%	
Total Salaries and Wages							\$9,418		\$9,418		\$0
Less Salary Savings							\$0		\$0		\$0
Net Salaries and Wages							\$9,418		\$9,418		\$0
Staff Benefits (Specify %)				55.39%		\$5,217		\$5,217		\$0	
I. Total Personnel Expenses							\$14,635		\$14,635		\$0
II. Operating Expenses											
1 Travel				\$0		\$0	0.00%	\$0	100.00%	\$0	
2 Training				\$0		\$0	0.00%	\$0	100.00%	\$0	
II. Total Operating Expenses							\$0		\$0		\$0
III. Capital Expenses											
III. Total Capital Expenses											
IV. Indirect Expenses											
1 Internal (Specify %)				0.00%		\$0					\$0
2 External											
IV. Total Indirect Expenses							\$0		\$0		\$0
V. Other Expenses											
V. Total Other Expenses											
Budget Grand Total							\$14,635		\$14,635		\$0

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Budget Justification Narrative

**Children's Medical Services
Nevada County
HCPCFC PMM&O Budget Justification Narrative
Fiscal Year 2021-2022**

I. PERSONNEL EXPENSES		Identify and explain any changes in Personnel including FTE percentage changes.
Total Salaries:	\$9,417	Salary based upon actual estimates from county provided budget salary planner for FY 21/22.
Total Benefits:	\$5,217	Staff benefits based upon actual estimates from county provided budget salary planner for FY 21/22.
Total Personnel Expenses:	\$14,634	
Supervising PHN (2)		
Public Health Nurse		
PHN II - Armstrong		FY 21/22 FTE will be 9.74946, a decrease of .38154 from FY 20/21
PHN I		
Office Assistant III (2)		
Office Assistant II (1)		
Office Assistant I		

II. OPERATING EXPENSES		List all Operating Expense line items. Identify and explain any increase, decrease, or newly listed line item.
Travel	\$0	N/A
Training	\$0	N/A
Office Supplies and Services	\$0	N/A
Postage & Shipping	\$0	N/A
Space Rental	\$0	N/A
Telephone	\$0	N/A
Computer upgrade/maintenance	\$0	N/A
Office Equipment	\$0	N/A
Hook-up computers to Hub	\$0	N/A
Computer and Monitor (6)	\$0	N/A
Total Operating Expenses:	\$0	

III. CAPITAL EXPENSES		List all Capital Expense line items. Identify and explain any newly listed Capital Expense. Include County/City Capital Expenses Justification Form.
Total Capital Expenses:	0	None

IV. INDIRECT EXPENSES		
A. Internal	\$0	All Indirect Costs will be claimed in the County Match budget
B. External	\$0	N/A
Total Indirect Expenses:	\$0	All Indirect Costs will be claimed in the County Match budget

V. OTHER EXPENSES		List all Other Expense line items. Identify and explain increased, decreased, or newly listed line items. Include County/City Other Expenses Justification Form.
Maintenance and Transportation	\$0	N/A
Student Internship	\$0	N/A
Total Other Expenses:	\$0	

Budget Grand Total	\$14,634
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Department of Health Care Services
 Integrated Systems of Care Division
 Health Care Program for Children in Foster Care
 State/Federal
 Budget Summary



Identify State/Federal Funding Source (Base, PMM&O, or Caseload Relief):	Caseload Relief
--	-----------------

County-City Name:	NEVADA	Fiscal Year:	2021/2022
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Category/Line Item	Total Budget	Enhanced State/Federal (25/75)	Non-Enhanced State/Federal (50/50)
A	(B = C + D)	C	D
I Total Personnel Expenses	\$15,985	\$15,985	\$0
II Total Operating Expenses	\$0	\$0	\$0
III Total Capital Expenses	\$0	\$0	\$0
IV Total Indirect Expenses	\$0	\$0	\$0
V Total Other Expenses	\$0	\$0	\$0
Budget Grand Total	\$15,985	\$15,985	\$0

Source of Funds	Total Funds	Enhanced State/Federal (25/75)	Non-Enhanced State/Federal (50/50)
E	(F = G + H)	G	H
State Funds	\$3,996	\$3,996	\$0
Federal Funds (Title XIX)	\$11,989	\$11,989	\$0
Budget Grand Total	\$15,985	\$15,985	\$0

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Department of Health Care Services
Integrated Systems of Care Division
Health Care Program for Children in Foster Care
State/Federal
Budget Worksheet



Identify State/Federal Funding Source (Base, PMM&O, or Caseload Relief): Caseload Relief

County-City Name: NEVADA Fiscal Year: 2021/2022

Column					1A	1B	1	2A	2	3A	3
Category/Line Item					% FTE	Annual Salary	Total Budget	% FTE	Enhanced State/Federal (25/75)	% FTE	Non-Enhanced State/Federal (50/50)
I. Personnel Expenses											
#	Last	First	Title	PHN (Y/N)							
1	Armstrong	Sherry	Public Health Nurse	Y	10.65%	\$96,590	\$10,287.00	100.00%	\$10,287	0.00%	\$0
2						\$0	\$0.00		\$0	100.00%	\$0
3						\$0	\$0.00		\$0	100.00%	\$0
4						\$0	\$0.00		\$0	100.00%	\$0
5						\$0	\$0.00		\$0	100.00%	\$0
6						\$0	\$0.00		\$0	100.00%	\$0
7						\$0	\$0.00		\$0	100.00%	\$0
8						\$0	\$0.00		\$0	100.00%	\$0
9						\$0	\$0.00		\$0	100.00%	\$0
10						\$0	\$0.00		\$0	100.00%	\$0
11						\$0	\$0.00		\$0	100.00%	\$0
12						\$0	\$0.00		\$0	100.00%	\$0
13						\$0	\$0.00		\$0	100.00%	\$0
14						\$0	\$0.00		\$0	100.00%	\$0
15						\$0	\$0.00		\$0	100.00%	\$0
16						\$0	\$0.00		\$0	100.00%	\$0
17						\$0	\$0.00		\$0	100.00%	\$0
18						\$0	\$0.00		\$0	100.00%	\$0
19						\$0	\$0.00		\$0	100.00%	\$0
20						\$0	\$0.00		\$0	100.00%	\$0
Total Number of PHN Staff				1							
Total FTE PHN Staff					0.11%			100.00%		0.00%	
Total Salaries and Wages							\$10,287		\$10,287		\$0
Less Salary Savings							\$0		\$0		\$0
Net Salaries and Wages							\$10,287		\$10,287		\$0
Staff Benefits (Specify %)				55.39%		\$5,698		\$5,698		\$0	
I. Total Personnel Expenses							\$15,985		\$15,985		\$0
II. Operating Expenses											
1 Travel				\$0		\$0	0.00%	\$0	100.00%	\$0	
2 Training				\$0		\$0	0.00%	\$0	100.00%	\$0	
II. Total Operating Expenses							\$0		\$0		\$0
III. Capital Expenses											
III. Total Capital Expenses											
IV. Indirect Expenses											
1 Internal (Specify %)				0.00%		\$0					\$0
2 External											
IV. Total Indirect Expenses							\$0		\$0		\$0
V. Other Expenses											
V. Total Other Expenses											
Budget Grand Total							\$15,985		\$15,985		\$0

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**Nevada County
Children's Medical Services
FY 21/22 HCPCFC Caseload Relief Allocation Justification Narrative**

(1) Personnel Expenses		Justification Narrative
Total Salaries	\$10,287	Salaries are based on actual individual HCPCFC staff salaries from the FY 21/22 County HCPCFC budget.
Total Benefits	\$5,698	Benefits are based on actual individual HCPCFC staff benefits from the FY 21/22 County HCPCFC budget.
Total Personnel Expenses	\$15,985	

Personnel Positions

PHN II (Armstrong)	This position is budgeted for 10.65017%, which is a decrease of .41683 from FY 20/21.
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(2) Operating Expenses		Justification Narrative
Travel	\$0	No travel or training is included in this budget.
Training	\$0	
Total Operating Expenses	\$0	

(3) Capital Expense \$0

(4) Indirect Expense		Justification Narrative
Internal	\$0	All Indirect will be claimed in the County Match budget
External	N/A	Not allowable by State HCPCFC
Total Indirect Expense	\$0	
(5) Other Expenses	\$0	
Budget Grand Total	\$15,985	



Department of Health Care Services
 Integrated Systems of Care Division
 Health Care Program for Children in Foster Care
 County-City/Federal
 Budget Summary



	County-City/Federal
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County-City Name:	NEVADA	Fiscal Year:	2021/2022
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Category/Line Item	Total Invoiced	Enhanced County-City/Federal (25/75)	Non-Enhanced County-City/Federal (50/50)
A	(B = C + D)	C	D
I Total Personnel Expenses	\$251,945	\$205,704	\$46,241
II Total Operating Expenses	\$2,000	\$0	\$2,000
III Total Capital Expenses			
IV Total Indirect Expenses	\$80,144		\$80,144
V Total Other Expenses			
Expenditures Grand Total	\$334,089	\$205,704	\$128,385

Source of Funds	Total Funds Invoiced	Enhanced County-City/Federal (25/75)	Non-Enhanced County-City/Federal (50/50)
E	(F = G + H)	G	H
County-City Funds	\$115,619	\$51,426	\$64,193
Federal Funds (Title XIX)	\$218,470	\$154,278	\$64,192
Expenditures Grand Total	\$334,089	\$205,704	\$128,385

Source County-City Funds:	Public Health Realignment
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CERTIFICATION: I hereby certify under penalty of perjury that I am the duly authorized officer of the claimant herein and this claim is in all respects true, correct, and in accordance with the law; that the materials, supplies, or services claimed have been received or performed and were used or performed exclusively in connection with the program; that I have not violated any of the provisions of Section 1090 to 1096 of the Government Code in incurring the items of expense included in this claim; that prior to the end of the quarter for which the claim is submitted, warrants have been issued in payment of all expenditures included in this claim; that payment has not previously been received for the amount claimed herein; and that the original invoices, payrolls, and other vouchers in support of this claim are on file with the county.

11/24/2021
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 Prepared By (Print & Sign) Date Phone Number E-mail Address

11-24-21
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Department of Health Care Services
 Integrated Systems of Care Division
 Health Care Program for Children in Foster Care
 County-City/Federal
 Budget Worksheet



County-City/Federal

County-City Name: NEVADA Fiscal Year: 2021/2022

Column					1A	1B	1	2A	2	3A	3
Category/Line Item					% FTE	Annual Salary	Total Budget	% FTE	Enhanced County-City/Federal (25/75)	% FTE	Non-Enhanced County-City/Federal (50/50)
I. Personnel Expenses											
#	Last	First	Title	PHN (Y/N)							
1	Armstrong	Sherry	Public Health Nurse	Y	54.27%	\$96,590	\$52,419.00	85.00%	\$44,556	15.00%	\$7,863
2	Kestler	Kathryn	Sr. Public Health Nurs	Y	100.00%	\$106,721	\$106,721.00	80.00%	\$85,377	20.00%	\$21,344
3						\$0	\$0.00		\$0	100.00%	\$0
4						\$0	\$0.00		\$0	100.00%	\$0
5						\$0	\$0.00		\$0	100.00%	\$0
6						\$0	\$0.00		\$0	100.00%	\$0
7						\$0	\$0.00		\$0	100.00%	\$0
8						\$0	\$0.00		\$0	100.00%	\$0
9						\$0	\$0.00		\$0	100.00%	\$0
10						\$0	\$0.00		\$0	100.00%	\$0
11						\$0	\$0.00		\$0	100.00%	\$0
12						\$0	\$0.00		\$0	100.00%	\$0
13						\$0	\$0.00		\$0	100.00%	\$0
14						\$0	\$0.00		\$0	100.00%	\$0
15						\$0	\$0.00		\$0	100.00%	\$0
16						\$0	\$0.00		\$0	100.00%	\$0
17						\$0	\$0.00		\$0	100.00%	\$0
18						\$0	\$0.00		\$0	100.00%	\$0
19						\$0	\$0.00		\$0	100.00%	\$0
20						\$0	\$0.00		\$0	100.00%	\$0
Total Number of PHN Staff				2							
Total FTE PHN Staff					1.54%			82.50%		17.50%	
Total Salaries and Wages							\$159,140		\$129,933		\$29,208
Less Salary Savings							\$0		\$0		\$0
Net Salaries and Wages							\$159,140		\$129,933		\$29,208
Staff Benefits (Specify %)				58.31%		\$92,803		\$75,771		\$17,033	
I. Total Personnel Expenses							\$251,945		\$205,704		\$46,241
II. Operating Expenses											
1	Travel			\$1,000			\$1,000	0.00%	\$0	100.00%	\$1,000
2	Training			\$1,000			\$1,000	0.00%	\$0	100.00%	\$1,000
II. Total Operating Expenses							\$2,000		\$0		\$2,000
III. Capital Expenses											
III. Total Capital Expenses											
IV. Indirect Expenses											
1	Internal (Specify %)			31.81%			\$80,144				\$80,144
2	External										
IV. Total Indirect Expenses							\$80,144				\$80,144
V. Other Expenses											
V. Total Other Expenses											
Budget Grand Total							\$334,089		\$205,704		\$128,385

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**Nevada County
Children's Medical Services
FY 21/22 HCPCFC Administrative Budget Justification Narrative**

(1) Personnel Expenses		Justification Narrative
Total Salaries	\$159,140	Salaries are based on actual individual HCPCFC staff salaries from the FY 21/22 County HCPCFC budget.
Total Benefits	\$92,803	Benefits are based on actual individual HCPCFC staff benefits from the FY 21/22 County HCPCFC budget.
Total Personnel Expenses	\$251,943	
 <u>Personnel Positions</u>		
PHN II (Kestler)		This position is budgeted for 100%, which is the same as FY 20/21.
PHN II (Armstrong)		This position is budgeted for 54.26959%, which when added to Caseload Relief, P.M.M. & O, and StateFederal budget, equals 100%, which is the same as FY 20/21.
 (2) Operating Expenses		
Justification Narrative		
Travel		Travel expense is \$2,000, which is the same as FY 20/21.
	\$2,000	
Training	\$0	
Total Operating Expenses	\$2,000	
(3) Capital Expense	\$0	
 (4) Indirect Expense		
Justification Narrative		
Internal	\$80,144	Indirect Cost is a total of 25% of personnel costs from PMM&O, Caseload Relief, State Federal Base and County Federal Base. $(14,634+15,985+38,020+251,945)=(380,584*25\%)=\$80,144$
External	N/A	Not allowable by State HCPCFC
Total Indirect Expense	\$80,144	
(5) Other Expenses	\$0	
Budget Grand Total	\$334,087	



COUNTY OF NEVADA
 Established Date: Jul 13, 2021
 Revision Date: Jul 13, 2021

Public Health Nurse II

Bargaining Unit: Professional--Exempt

Class Code:
 G290

HCPCFC - Base	25.33 FTE
PMM&O	9.75 FTE
Caseload Relief	10.65 FTE
HCPCFC - CWS	54.27 FTE

SALARY RANGE

\$37.66 - \$45.97 Hourly
\$3,012.69 - \$3,677.87 Biweekly
\$6,527.49 - \$7,968.72 Monthly
\$78,329.88 - \$95,624.64 Annually

DEFINITION AND CLASS CHARACTERISTICS:

Under clinical and administrative direction, provides health education, community outreach, case management, medication support, and health counseling services for designated clients within an assigned program; applies and implements professional nursing and public health expertise and skill sets for the purpose of the prevention, treatment, and control of diseases, health risks, and /or other adverse health conditions within an assigned program; to network with local and regional health and welfare communities to ensure clients' well being; to perform a variety of administrative and operational tasks in support of assigned program; and to perform related duties as assigned. This is the journey-level class in the series, fully qualified to independently perform the full range of duties. Under clinical and administrative direction, incumbents exercise considerable independent judgment to provide and coordinate public health services for an assigned client caseload, including client assessment, teaching, counseling, direct care, referral and case management. Incumbents often function as members of multi-disciplinary teams and may provide training, direction and guidance to other team members and less experienced employees. Depending upon assignment, work may include participation in the implementation and/or service delivery coordination of a specialized program, under the direction of a lead nurse or program manager. This class is flexibly staffed with Senior Public Health Nurse, and incumbents may advance to the higher level after gaining sufficient experience and demonstrating proficiency to meet the requirements of the Senior Public Health Nurse.

EXAMPLES OF DUTIES:

Essential:

Public Health Nurse I/II:

- Provides public health nursing and case management services to individuals and families in homes, schools, community facilities, and specialized clinics by assessing health care requirements, counseling, teaching, and providing or coordinating follow-up health and social services; acts as client advocate
- Participates in the operation of public health services by interviewing and counseling clients, performing screening tests, administering medications and treatments, recording data, making referrals, and related client care duties; may instruct and guide other health care personnel and volunteers; may organize, coordinate and direct specialized program operations
- Prepares and administers oral and/or injectable medications/immunizations in accordance with a physician's or standing orders; monitors and records client response to medication and documents any adverse reactions; instructs clients/family/caregiver on safe and effective use of medications
- Participates in epidemiological investigations and communicable disease control activities, including contact tracing and surveillance
- Responds to public health and natural disasters through established partnerships and protocols
- Participates in community outreach and health promotion and health education events
- Compiles and maintains records, reports, charts and statistics, and participates in quality assurance activities
- Audits medical records, department records and contract providers to assure compliance with Federal, State, Medi-Cal and program standards
- Attends a variety of internal and external staff meetings, in-service trainings, team meetings, and case conferences.

KNOWLEDGE AND SKILLS REQUIRED:

NOTE: The required level and scope of the following knowledge and skills relate to the level of the position as defined in the class characteristics.

Knowledge of:

- Principles, practices, methods and procedures of public health nursing, health promotion, and disease prevention and control
- General nursing principles, practices and techniques, including assessment, client care planning and delivery, client education, and evaluation of outcomes
- Medical terminology and equipment
- Nursing routines and protocols specific to area of assignment
- Principles and techniques of drug administration, and uses and effects of medications
- Principles, practices and techniques of safety and infection control
- Techniques and methods used in crisis intervention with ill clients and/or families
- Laws, rules and regulations governing the practice of public health nursing
- Community medical and social agencies and resources
- Environmental, sociological and psychological issues affecting public health nursing
- Principles of work supervision, including work planning, assignment, and review
- Basic principles of program coordination, including program planning, development and implementation, grant writing, and program documentation

Skill in:

- Independently planning, organizing and implementing nursing activities
- Assessing community, individual and family health needs and problems
- Developing and implementing client care plans and/or referrals
- Administering medications/immunizations, performing skilled nursing treatments and procedures, and adapting nursing skills to various environments and situations
- Applying teaching principles and providing education and counseling
- Exercising sound independent judgment within scope of authority and practice
- Preparing and maintaining organized, detailed and accurate medical and other records
- Collaborating with other members of the health care team on an ongoing basis
- Demonstrating sensitivity to the effects of culture and ethnic background, including social determinants of health and disparities on health issues
- Establishing and maintaining effective working relationships with those contacted in the course of work
- Working in, and with individuals from, various cultural, physical, behavioral and environmental settings
- Planning, developing, implementing, and coordinating public health nursing programs in the assigned area of specialty
- Assigning, directing and reviewing the work of others in a lead capacity
- Representing the program to individuals, groups, and governing bodies, and making effective verbal and written presentations
- Assessing community, individual and family health needs and problems
- Developing and implementing client care plans and/or referrals and community health plans

EDUCATION AND EXPERIENCE REQUIRED:

Bachelor's or Master's degree in Nursing from an accredited college or university. Two years of nursing experience comparable to a Public Health Nurse I.

LICENSES AND CERTIFICATES:

Possession of a valid driver's license within 30 days of hire Possession of a valid license as a Registered Nurse issued by the California Board of Registered Nursing Possession of a valid Public Health Nurse certificate issued by the California Board of Registered Nursing or documentation of a submitted and pending application for the PHN certificate, which must be obtained within 1 year of hire as a Public Health Nurse I.

PHYSICAL DEMANDS AND WORKING CONDITIONS:

Mobility to work in both office and clinical settings, and to travel to various sites; strength to lift, carry and position supplies and equipment; touch and dexterity to conduct physical health assessments; vision to read handwritten and printed materials, and examine and observe clients; hearing and speech to communicate in person and by telephone. Working in exposure to communicable disease and/or blood-borne pathogens. Some positions may require work outside normal daytime business hours. Some accommodations may be made for some physical demands for otherwise qualified individuals who require and request such accommodations.

OTHER REQUIREMENTS:

This class description lists the major duties and requirements of the job and is not all-inclusive. Not all duties are necessarily performed by each incumbent. Incumbents may be expected to perform job-related duties other than those contained in this document and may be required to have specific job-related knowledge and skills.



Senior Public Health Nurse

Bargaining Unit: Professional--Exempt

Class Code:
G295

Senior PHN, HCPCFC/CWS 1.0 FTE

COUNTY OF NEVADA
Established Date: Jul 14, 2021
Revision Date: Jul 14, 2021

SALARY RANGE

\$41.61 - \$50.80 Hourly
\$3,328.71 - \$4,063.67 Biweekly
\$7,212.20 - \$8,804.61 Monthly
\$86,546.40 - \$105,655.32 Annually

DEFINITION AND CLASS CHARACTERISTICS:

Under clinical and administrative direction, provides health education, community outreach, case management, medication support, and health counseling services for designated clients within an assigned program; applies and implements professional nursing and public health expertise and skill sets for the purpose of the prevention, treatment, and control of diseases, health risks, and /or other adverse health conditions within an assigned program; to network with local and regional health and welfare communities to ensure clients' well being; to perform a variety of administrative and operational tasks in support of assigned program; and to perform related duties as assigned. This is the advanced journey level classification in the Public Health Nurse series. Incumbents in this class function with minimal supervision in providing lead direction and training to professional, technical and support staff, and providing public health nursing and case management services for an assigned client caseload(s) or program(s). Incumbents typically have primary responsibility for the development, implementation, administration, and/or service delivery coordination of a specialized program (s). Incumbents may have lead responsibility over the more complex client caseloads or over several programs.

EXAMPLES OF DUTIES:

Essential:?

Public Health Nurse I/II:

- Provides public health nursing and case management services to individuals and families in homes, schools, community facilities, and specialized clinics by assessing

health care requirements, counseling, teaching, and providing or coordinating follow-up health and social services;acts as client advocate

- Participates in the operation of public health services by interviewing and counseling clients, performing screening tests, administering medications and treatments, recording data, making referrals, and related client care duties;may instruct and guide other health care personnel and volunteers;may organize, coordinate and direct specialized program operations
- Prepares and administers oral and/or injectable medications/immunizations in accordance with a physician's or standing orders;monitors and records client response to medication and documents any adverse reactions;instructs clients/family/caregiver on safe and effective use of medications
- Participates in epidemiological investigations and communicable disease control activities, including contact tracing and surveillance
- Responds to public health and natural disasters through established partnerships and protocols
- Participates in community outreach and health promotion and health education events
- Compiles and maintains records, reports, charts and statistics, and participates in quality assurance activities
- Audits medical records, department records and contract providers to assure compliance with Federal, State, Medi-Cal and program standards
- Attends a variety of internal and external staff meetings, in-service trainings, team meetings, and case conferences.

Senior Public Health Nurse, in addition to the duties of the Public Health Nurse I/II:

- Plans, organizes and coordinates the day-to-day operations of a specialized program;monitors program to ensure compliance with contract provisions, funding source regulations, and relevant laws, codes and regulations;performs or coordinates service delivery to target population
- Organizes, coordinates, schedules, assigns, directs, reviews, and may supervise the day-to-day work of public health staff;provides on-site consultation to program staff;assures quality of care and coordinates nursing services with other providers and programs;ensures smooth and efficient operation of program services
- Represents the program to other community and state;participates in a variety of internal and external meetings, committees and coalitions to coordinate program activities and operations;serves as primary liaison and resource, and provides training and technical assistance
- Serves as key participant in program design, development and evaluation, including needs assessments and scope of work plans based on the needs assessment;drafts program budgets, contracts, grant applications, funding proposals, periodic narrative and statistical reports, and other required program documentation
- Monitors the implementation of nursing standards and practices for quality assurance and legal compliance;evaluates the effectiveness of current nursing policies and practices and participates in their formulation and revision;disseminates information and advises staff on the interpretation and application of laws, regulations, policies and procedures
- Assists supervisory and management staff in the preparation of performance appraisals

KNOWLEDGE AND SKILLS REQUIRED:

NOTE:?? The required level and scope of the following knowledge and skills relate to the level of the position as defined in the class characteristics.
??

Knowledge of:

- Principles, practices, methods and procedures of public health nursing, health promotion, and disease prevention and control
- General nursing principles, practices and techniques, including assessment, client care planning and delivery, client education, and evaluation of outcomes
- Medical terminology and equipment
- Nursing routines and protocols specific to area of assignment
- Principles and techniques of drug administration, and uses and effects of medications
- Principles, practices and techniques of safety and infection control
- Techniques and methods used in crisis intervention with ill clients and/or families
- Laws, rules and regulations governing the practice of public health nursing
- Community medical and social agencies and resources
- Environmental, sociological and psychological issues affecting public health nursing
- Principles of work supervision, including work planning, assignment, and review
- Basic principles of program coordination, including program planning, development and implementation, grant writing, and program documentation

Skill in:

- Independently planning, organizing and implementing nursing activities
- Assessing community, individual and family health needs and problems
- Developing and implementing client care plans and/or referrals
- Administering medications/immunizations, performing skilled nursing treatments and procedures, and adapting nursing skills to various environments and situations
- Applying teaching principles and providing education and counseling
- Exercising sound independent judgment within scope of authority and practice
- Preparing and maintaining organized, detailed and accurate medical and other records
- Collaborating with other members of the health care team on an ongoing basis
- Demonstrating sensitivity to the effects of culture and ethnic background, including social determinants of health and disparities on health issues
- Establishing and maintaining effective working relationships with those contacted in the course of work
- Working in, and with individuals from, various cultural, physical, behavioral and environmental settings
- Planning, developing, implementing, and coordinating public health nursing programs in the assigned area of specialty
- Assigning, directing and reviewing the work of others in a lead capacity
- Representing the program to individuals, groups, and governing bodies, and making effective verbal and written presentations
- Assessing community, individual and family health needs and problems
- Developing and implementing client care plans and/or referrals and community health plans

EDUCATION AND EXPERIENCE REQUIRED:

Bachelor's or Master's degree in Nursing from an accredited college or university. Three years of nursing experience comparable to Nevada County's Public Health Nurse II.

LICENSES AND CERTIFICATES:

Possession of a valid driver's license within 30 days of hire Possession of a valid license as a Registered Nurse issued by the California Board of Registered Nursing Possession of a valid Public Health Nurse certificate issued by the California Board of Registered Nursing or documentation of a submitted and pending application for the PHN certificate, which must be obtained within 1 year of hire as a Public Health Nurse I.

PHYSICAL DEMANDS AND WORKING CONDITIONS:

Mobility to work in both office and clinical settings, and to travel to various sites; strength to lift, carry and position supplies and equipment; touch and dexterity to conduct physical health assessments; vision to read handwritten and printed materials, and examine and observe clients; hearing and speech to communicate in person and by telephone. Working in exposure to communicable disease and/or blood-borne pathogens. Some positions may require work outside normal daytime business hours. Some accommodations may be made for some physical demands for otherwise qualified individuals who require and request such accommodations.

OTHER REQUIREMENTS:

This class description lists the major duties and requirements of the job and is not all-inclusive. Not all duties are necessarily performed by each incumbent. Incumbents may be expected to perform job-related duties other than those contained in this document and may be required to have specific job-related knowledge and skills.

CMS Program Duty Statement
Child Health and Disability Prevention (CHDP)
Child Welfare Services (CWS)
Health Care Program for Children in Foster Care (HCPCFC)
Psychotropic Medication Monitoring and Oversight (PMM&O)

Program Position Title: Public Health Nurse
County Classification: Public Health Nurse II
Assignment: CWS Program

This position must meet the criteria for Skilled Professional Medical Personnel (SPMP), as described in Federal Financial Participation (FFP) guidelines found in the Children's Medical Services Plan and Fiscal Guidelines, Chapter 8.

Distinguishing Characteristics

Under supervision of the Senior PHN, in support of the Health Care Program for Children in Foster Care (HCPCFC), the PHN II performs a variety of public health nursing duties focused on health care coordination for children in foster care. The PHN carries out the administrative and operational components of the Child Health and Disability Prevention (CHDP) and HCPCFC goals and objectives required by State and Federal mandates. The HCPCFC Unit has oversight and implementation responsibility for program guidelines with health providers, community agencies, Child Welfare Services (CWS) and Juvenile Justice and Probation staff/clients. Additionally, the PHN must have a thorough understanding of laws, regulations and procedures governing medical case management of children in foster care with Medi-Cal and other health resources to children in foster placement.

General Responsibilities

The HCPCFC Unit PHN will utilize nursing assessment skills in working with children in the child welfare system and youth in probation, their families and Resource Family (RFs). Using their SPMP expertise to provide administrative case consultation according to Federal Financial Participation (FFP) guidelines found in the Children's Medical Services Plan and Fiscal Guidelines, Chapter 8, the nurse will use public health nursing skills and knowledge of case management, health teaching, screening, counseling, community organization and resources to work collaboratively with the Health and Human Services Agency (HHS) CWS program, Juvenile Justice and Probation Department, along with community agencies to deliver comprehensive health care coordination to this population. The essential functions include the following:

Duties and Responsibilities

- Using skilled medical professional expertise, provide health care coordination, monitoring and oversight of foster children and youth treated with psychotropic medications. This includes acting as a resource expert and consultant for the RFs, the Child Welfare Service Social Workers (CWS-SW), Probation Officers (PO) and other CWS staff regarding the children's health care needs. In addition to regular HCPCFC administrative health care coordination activities, the PMM&O nurse will:
 - o Review the medical components of each request for psychotropic medication filed to verify all required medical information is provided in the application and supporting documents submitted to the court.
 - o Review, monitor, and confirm that the juvenile court has authorized the psychotropic medication(s) the child is taking based on sufficient medical/psychiatric information.
 - o Review and document in the child's Health and Education Passport (HEP), the psychotropic medications authorized for and being taken by the child, the completion of laboratory tests, other screenings and measurements, evaluations, and assessments required to meet reasonable standards of medical practice.

- o Provide guidance and consultation to social workers and probation officers in the scheduling of periodic follow up visits with the prescribing physician, laboratory services, and other necessary health services.
 - o Contact the child's caregiver and child to inquire about the response of the child to the administration of psychotropic medication, including any adverse effects of the medication and if any, to assist with referrals to the prescribing physician or other appropriate health care providers to ensure that any adverse effects are promptly addressed and brought to the attention of the social worker or probation officer.
 - o Review, interpret, and document as necessary, the results of laboratory tests, screenings, and evaluations for the purpose of case planning and coordination.
 - o Review clinical documentation to assess the child or youth's progress in meeting treatment plan goals.
- Collaborate with the RFs and community health care providers to ensure necessary health care information is available to those persons responsible for providing health care for the youth, including maintaining an updated and current HEP.
 - To provide the most effective oversight and monitoring of foster children and youth treated with psychotropic medications, acts in a liaison role to collaborate with the CWS staff, Juvenile Justice and Probation staff, Foster Care Mental Health team, prescribing psychiatrists, primary care providers, Courts and other stakeholders working with foster children and youth treated with psychotropic medications.
 - Facilitate (e.g., assist in scheduling appointments, arranging transportation, etc.) timely referrals to primary care and specialty providers, dentists, mental health providers and other community programs to assure compliance with medical, dental and mental health care assessment and treatment requirements.
 - Maintain accurate and current documentation using the CWS/CMS case management system and supplemental databases.
 - Interpret health care reports for CWS-SWs, POs and other FCS staff.
 - Conduct reviews of completed health assessment forms to assess provider's compliance, trends and a need for assistance to comply with CHDP medical and periodicity guidelines.
 - Develop and implement educational programs/presentations for RFs about the health care needs of child welfare clients.
 - Participate in training/education programs designed to improve the skill level of the individual staff member in meeting and serving the medical, dental and mental health care coordination needs of foster care children and youth, including education related to psychotropic medication.
 - Record data as required for CHDP Performance Measures, CWS/CMS and SafeMeasures®. Collaborate with stakeholders to develop and implement other metrics as needed.
 - Participate with continuous quality improvement activities.
 - Attend Staff meetings, Child-Family Team Meetings, Multidisciplinary Teams, Administrative Reviews, Placement Meetings, and other meetings as appropriate or directed.
 - Participate on program and collaborative workgroups, committees, taskforces as directed.
 - Perform other related duties as assigned.
 - In addition to the above duties, the PHN will function as a Disaster Service Worker as the need arises and will support the Public Health Department in other programs as needed.

**Nevada County Health & Human Services Agency
CMS Program
Duty Statement**

Child Welfare Services Senior Public Health Nurse
Kathryn Kestler 1.0 FTE

Program Position Title: Public Health Nurse
County Classification: Senior Public Health Nurse
Assignment: Child Welfare Services (CWS)

Distinguishing Characteristics

Under administrative direction of the Director of Public Health Nursing, the Senior PHN performs a variety of public health nursing duties focused on coordination and case management health services for children in the Child Welfare Services (CWS) program and provides leadership within the assigned program, including supervision of other staff members.

General Responsibilities

The CWS PHN will utilize the nursing process in working with CWS clients and their families. Utilizing their skilled professional medical personnel (SPMP) expertise, the CWS PHN will provide comprehensive health care coordination activities according to the Federal Financial Participation, and the Health Insurance Portability and Accountability Act (HIPPA) guidelines for privacy and confidentiality. The CWS PHN will use public health nursing skills and knowledge of case management, community organization and resources to work collaboratively to deliver health care coordination. The essential functions include the following:

Duties and Responsibilities

- Using skilled medical professional expertise, provide health care coordination, monitoring and oversight to children eligible for CWS services. The CWS PHN's duties and responsibilities include:
 - Coordinate quarterly meetings to enhance completion of Health & Education Passports (HEP) and participate in updating the Health Passport as required by State and Federal regulations. Ensure that HEP is completed and provided to the family or legal guardians.
 - Expedite timely referrals for health related services and community resources.
 - Enter necessary health related data into the CWS electronic system and maintain updated health information.
 - Provide health education to social workers and other CWS staff as needed.
 - Case management of the following caseloads to ensure all health-related benchmarks are documented in a timely manner.
 - Nevada County foster care children placed out of County of Nevada

Nevada County Health & Human Services Agency
CMS Program
Duty Statement

Child Welfare Services Senior Public Health Nurse
Kathryn Kestler 1.0 FTE

- Courtesy case manage Interstate Compact for the Protection of Children (ICPC) for medically fragile.
- Foster care and out-of-home placements in Nevada County, including Truckee.
- SMART case clients
- AB 12 clients
- Probation placement clients
- Attend Child Welfare Service meetings and related trainings as appropriate.
- Attend required Public Health Department meetings and trainings.
- Provide support nursing services and screenings for RFA clients. Refer RFA client's for additional evaluation as needed.
- Review all psychiatric and Group Home quarterly reports pertaining to health related issues.
- Following the Drug Endangered Child (DEC) protocol, consult on an as-needed basis detentions related to child health and welfare. Attend court detention hearings and provide health education information as needed.
- Coordinate and facilitate communications with health care providers regarding Child Welfare Services (CWS) and Probation clients.
- Assist CWS Social Workers and Probation Officers with in-home and/or Group Home visits as needed.
- Provide nursing assessment services during forensic exams as needed on a case by case basis.
- Attend Multi disciplinary Interviews (MDI) as needed.
- Maintain currency with new health information guidelines and skills through attending trainings, workshops and related continuing education activities.
- Provide leadership and conduct administrative functions within the CWS program and PHD's Nursing Leadership Team.
- Supervise other nursing staff who are in the CWS program.
- In addition to the above duties, the PHN will function as a Disaster Service Worker as the need arises and will support the Public Health Department in other programs as needed.

Children's Medical Services Plan 2021-22

Final Audit Report


2021-12-30

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