STA	DF CALIFORNIA NDARD AGREEMENT AMENDMENT BA (Rev 6/03)		
	(i.d. 555)	Agreement Number	Amendment Number
\boxtimes	Check here if additional pages are added: 1 Page(s)	15-10165	5 A02
		Registration Number:	
1.	This Agreement is entered into between the State Agency a	and Contractor nam	ed below:
	State Agency's Name California Department of Public Health		Also known as CDPH or the State
	Contractor's Name County of Nevada		(Also referred to as Contractor)
2.	The term of this July 1, 2015 through July 1, 2015	une 30, 2019	
3.	The maximum amount of this \$ 3,002,040 Agreement after this amendment is: Three Million, Two Tho	usand and Forty Dollar	rs
4.	The parties mutually agree to this amendment as follows. A of the Agreement and incorporated herein:	All actions noted be	low are by this reference made a part
	I. Purpose of amendment: This amendment is due to I funding reductions that became effective for Fiscal FY 2018/2019 are being reduced by \$101,794 each \$3,002,040. This amendment revises the Contract County of Nevada. Additionally, This amendment a implementing the California Home Visiting Program June 2017 as well as the removal of some unneces	Year(FY) 2017/201 n. The total amount or's name from Nev dds mandatory prog ı (CHVP) as identific	8 and FY 2018/2019. FY 2017/2018 and of this Agreement shall not exceed rada County Public Health Department to grammatic requirements for ed by HRSA during a program site visit in
	II. Certain changes made in this amendment are shown a Text deletions are displayed as strike through text (i.e.		are displayed in bold and underline .
	(Continued on next page)		
	All other terms and conditions shall remain the same.		
IN V	VITNESS WHEREOF, this Agreement has been executed by the	parties hereto.	CALIFORNIA
	CONTRACTOR		CALIFORNIA Department of General Services
	ractor's Name (If other than an individual, state whether a corporation, partnership, etc.,)	Use Only
COL	ınty of Nevada		

CONTRACTOR	CALIFORNIA Department of General Services	
Contractor's Name (If other than an individual, state whether a corporation, par	Use Only	
County of Nevada		
By(Authorized Signature)	Date Signed (Do not type)	
K		
Printed Name and Title of Person Signing		
Richard Anderson, Chair, Board of Supervisors		
Address		
500 Crown Point Circle, Suite 110, Grass Valley, CA, 9		
STATE OF CALIFORNIA		
Agency Name		
California Department of Public Health		
By (Authorized Signature)	Date Signed (Do not type)	
K		
Printed Name and Title of Person Signing	Exempt per:	
Jeffrey Mapes, Chief, Contracts Management Unit		
Address		
1616 Capitol Avenue, Suite 74.262, MS 1802, P.O. Box Sacramento, CA 95899-7377		

- III. Exhibit A, Scope Of Work, is hereby replaced in its entirety.
- IV. Exhibit B Budget Detail and Payment Provisions, Item #4, Amounts Payable is revised as follows:
 - 4. Amounts Payable
 - A. The amounts payable under this contract shall not exceed:
 - 1) \$807,502 for the budget period of 07/01/15 through 06/30/16
 - 2) \$783,122 for the budget period of 07/01/16 through 06/30/17
 - 3) \$807,502705,708 for the budget period of 07/01/17 through 06/30/18
 - 4) \$807,502705,708 for the budget period of 07/01/18 through 06/30/19
 - B. Payment allocations shall be made for allowable expenses up to the amount annually encumbered commensurate with the state fiscal year in which services are fulfilled and/or goods are received.
- V. Exhibit B, Attachment III and IV are hereby replaced in their entirety.
- VI. Exhibit B, Attachment III, Schedule 1 and Exhibit B, Attachment III, Schedule 2 are hereby replaced in their entirety.
- VII. Exhibit B, Attachment IV, Schedule 1 is hereby replaced in its entirety.
- VIII. Exhibit B, Attachment IV, Schedule 2 is hereby removed in its entirety.

1. Service Overview

<u>County of Nevada</u> Nevada County Public Health Department agrees to provide the following services to the California Department of Public Health (CDPH).

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

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

2. Service Location

The services shall be performed at Nevada County in the County of Nevada.

3. Project Representatives

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

California Department of Public Health
Contract Manager: Fiona Humphrey Michael

Neff
Telephone: (916) -650-0326 341-6726
Fax: (916) -650-0309 650-0307
Email: fiona.humphrey@cdph.ca.gov
Michael.neff@cdph.ca.gov

Nevada County Public Health
Department County of Nevada
Attention: Cynthia Wilson, Project
Director
Telephone: (530) 265-7269
Fax: (530) 271-0894
Email: cynthia.wilson@co.nevada.ca.us

B. Direct all inquiries to:

California Department of Public Health Financial Management & Contract Operations

Attention: Fiona Humphrey Michael Neff
1615 Capitol Avenue, Suite 73.560, MS 8305

P.O. Box 997420

Sacramento, CA 95899-7420

Telephone: (916) 650-0326 341-6726

Fax: (916) 650-0309 650-0307

Email: Fiona.Humphrey@cdph.ca.gov

Michael.neff@cdph.ca.gov

Nevada County Public Health
Department County of Nevada
Attention: Cynthia Wilson, Project

Director

Address: 500 Crown Point Circle,

Suite 110

Grass Valley, CA 95945

Telephone: (530) 265-7269

Fax: (530) 271-0894

Email:

cynthia.wilson@co.nevada.ca.us

C. All payments from CDPH to the Contractor; shall be sent to the following address:

Remittance Address

Contractor: County of Nevada

Attention: Cynthia Wilson

Address: 500 Crown Point Circle, Suite 110

City, Zip: Grass Valley, CA 95945

Phone: (530) 265-7269 Fax: (530) 271-0894

E-mail: cynthia.wilson@co.nevada.ca.us

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

4. Subcontracting Requirements

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

5. Services to be performed

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

The purpose of the SOW is to provide parameters for implementing or expanding an existing Nurse Family Partnership (NFP) or Healthy Families America (HFA) home visiting program in accordance

with Federal Maternal Infant Early Childhood Home Visiting and CHVP requirements to achieve positive outcomes through maternal and child health for each of the following three goals:

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

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

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

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

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

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

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

Goal 1: Provide leadership and structure for implementation of the California Home Visiting Program at the LHJ site

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

#	Short and/or Intermediate	Intervention Activities to Meet Objectives (Describe the	Evaluation/Performance Measures Process, Short and/or Intermediate Measures			
#	Objective(s)	steps of the intervention)	Process Description and Measures	Short and/or Intermediate Outcome Measure(s)		
	compliance with NFP and HFA model requirements.	curricula and screening and assessment tools as specified in the Policies and Procedures. Note: Partners for Healthy Baby is the required curriculum for HFA sites. (.2) Participate in meetings, workgroups, and trainings as directed by CHVP.	proof of completion of all required trainings.			
		(.3) Hire and maintain sufficient staff to serve Home Visiting program participants and adhere to the specific evidence-based model guidelines.		Report staffing changes to CDPH-CHVP staff quarterly using staffing template provided by MCAH-CHVP.		
PROG	RAM REQUIREMENTS					
1.4	LHJ sites will reach active caseload of 100 participants within 18 months of initial program implementation and maintain through the duration of the program. LHJ site will reach and maintain	(.1) Receive referrals from appropriate agencies and triage as appropriate to meet the required number of enrolled participants.	Home Visiting Program staff will maintain an outreach log with program contacted, method, materials used and date of contact.	CDPH – CHVP staff will review outreach log and triage process at site visit. LHJ sites must provide outreach log upon request.		
	Maximum Caseload Capacity (MCC) of 112		Home Visiting Program staff will maintain a documented triage process.			

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

# Short and/or Intermediate		Intervention Activities to Meet Objectives (Describe the	Evaluation/Performance Measures Process, Short and/or Intermediate Measures				
#	Objective(s)	steps of the intervention)	Process Description and Measures	Short and/or Intermediate Outcome Measure(s)			
1 7	Collect participant data using HFA or NFP and CHVP-required forms and maintain	(.1) Develop chart documentation processes and procedures.	Home Visiting Program staff will maintain up-to-date chart documentation procedures.	CDPH-CHVP staff will review chart documentation and audit process at site visit.			
1.7 required forms and maintain current and accurate documentation.		(.2) Home Visiting Program staff will implement and oversee chart audit process including review of current charts at a minimum of 3 times per year.	Home Visiting Program staff will maintain chart documentation and audit process.				
CONTI	NUOUS QUALITY IMPROVEMENT (C	QI) REQUIREMENTS					
1 8	Continuous Quality Improvement (Conduct a CQI process which is aligned with CHVP CQI improvement goals.	(.1) Perform CHVP directed CQI activities.	Home Visiting Program staff will report action steps taken to achieve program improvement on selected priority areas.	Home Visiting Program staff will participate in quarterly CQI teleconferences with CHVP Program Consultant.			
1.0		(.2) Communicate quality improvement activities with the Community Advisory Board (CAB) or other community collaborative designated to address quality improvement.	Home Visiting Program staff will maintain CAB as a resource for program improvement.	CDPH-CHVP staff will observe at CAB meeting annually.			
1.9	LHJ site will use data to inform and improve program activities.	(.1) Home Visiting Program staff will use model issued reports and CHVP-created reports as available in the CHVP ETO data system for the purposes of data cleaning, CQI, and program management.	Home Visiting Program staff will demonstrate understanding of the program quality measures.	CDPH-CHVP staff will observe at site visit and on CQI calls.			

¹-REQUIRED SCREENINGAND ASSESSMENT TOOLS http://www.cdph.ca.gov/programs/mcah/Documents/400-10%20Required%20Screening.pdf
DATA COLLECTION AND STANDARDIZATION http://www.cdph.ca.gov/programs/mcah/Documents/600-10%20Data%20Collection%20Standardization.pdf

Goal 2: Embed the LHJ site into a well-integrated local early childhood system of services

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

Goal 3: Monitor federal benchmark measures to show improvement in maternal and early childhood health

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

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

Personnel Position Title/Classification Senior Public Health Nurse (In-Kind) Accountant (In-Kind)	Original Annual Salary \$ 82,489 \$ 57,602	Amendment Annual Salary	Original FTE % 25% 2%	Amendment FTE % <u>10%</u> 2.5%	Original Annual Cost \$ 20,623	An	nendment nual Cost
Director of Public Health Nursing Administrative Services Officer (In-Kind) Behavioral Health Program Manager(see other Costs)*	\$ 106,314 \$ 85,390	\$ 116,073	10% 2%	15% 2.5%	\$ 10,63 \$ 1,700	<u> </u>	17,411
				Subtotal Personnel	\$ 34,113	<u>\$</u>	17,411
Fringe Benefits (61.22 <u>58.13</u> % <u>of Personn</u>	el)				\$ 20,884	⊢ <u>\$</u>	10,121
(FICA 7.65%, Retirement 26.515%, OPEB 8	.7%, Health and Dei	ntal Insurance 18.35	55 15.265%)				
		Tot	tal Personnel	l and Fringe Benefits	\$ 54,99	<u> </u>	27,532
Operating Expenses							
Training (Registration Fees for CHVP require	ed and other profess	sional development t	trainings and	CEUs as needed.)	\$ 1,049) _	
General Office					\$ 10		262
Duplication/Printing/Postage					\$ 100	<u>\$</u>	2
		Total O	perating Exp	enses	\$ 1,250	÷ <u>\$</u>	264
Equipment (major equipment >\$5,000)							
				Total Favinanant		\$	0
				Total Equipment		<u> </u>	
Travel Travel (Staff travel and registration fees to st of America trainings (1.3 in SOW), and home					\$ 1,50 0		3,078
Travel (Staff travel and registration fees to st					\$ 1,50 0)\$	
Travel (Staff travel and registration fees to st of America trainings (1.3 in SOW), and home Subcontracts	e visits (Goals 1.1.4 ,			ip or Healthy Families	\$ 1,500 \$ 1,500	\$ } } <u>\$</u>	3,078
Travel (Staff travel and registration fees to st of America trainings (1.3 in SOW), and home Subcontracts Child Advocates of Nevada County (Goals 1 Cognitive Behavorial Therapist	e visits (Goals 1.1.4 ,			ip or Healthy Families	\$ 1,50 0	\$ } \$ } \$	3,078
Travel (Staff travel and registration fees to st of America trainings (1.3 in SOW), and home Subcontracts Child Advocates of Nevada County (Goals 1	e visits (Goals 1.1.4 ,			ip or Healthy Families	\$ 1,500 \$ 1,500 \$ 702,000	\$ } \$ } \$	3,078
Travel (Staff travel and registration fees to st of America trainings (1.3 in SOW), and home Subcontracts Child Advocates of Nevada County (Goals 1 Cognitive Behavorial Therapist	e visits (Goals 1.1.4 ,			ip or Healthy Families	\$ 1,500 \$ 1,500 \$ 702,000 \$ 34,000	\$	3,078 3,078 649,472
Travel (Staff travel and registration fees to st of America trainings (1.3 in SOW), and home Subcontracts Child Advocates of Nevada County (Goals 1 Cognitive Behavorial Therapist	e visits (Goals 1.1.4 ,			ip or Healthy Families Total Travel Costs	\$ 1,500 \$ 1,500 \$ 702,000 \$ 34,000	\$	3,078 3,078 649,472 8,440
Travel (Staff travel and registration fees to st of America trainings (1.3 in SOW), and home Subcontracts Child Advocates of Nevada County (Goals 1 Cognitive Behavorial Therapist Every Child Succeeds (Goals 1 & 3 in SOM) Other Costs *Nevada County Behavorial Health (BH President Control of Co	e visits (Goals 1.1.4 , ,2,3 in SOW) <u>N)</u>	,1.4, 1.5, 2, 3, 4, 5 ir	n ŚOW)	ip or Healthy Families Total Travel Costs Total Subcontracts	\$ 1,500 \$ 1,500 \$ 702,000 \$ 34,000	\$	3,078 3,078 649,472 8,440
Travel (Staff travel and registration fees to st of America trainings (1.3 in SOW), and home Subcontracts Child Advocates of Nevada County (Goals 1 Cognitive Behavorial Therapist Every Child Succeeds (Goals 1 & 3 in SOV	e visits (Goals 1.1.4 , ,2,3 in SOW) <u>N)</u>	,1.4, 1.5, 2, 3, 4, 5 ir	n ŚOW)	ip or Healthy Families Total Travel Costs Total Subcontracts	\$ 1,500 \$ 1,500 \$ 702,000 \$ 34,000 \$ 736,000	\$	3,078 3,078 649,472 8,440 657,912
Travel (Staff travel and registration fees to st of America trainings (1.3 in SOW), and home Subcontracts Child Advocates of Nevada County (Goals 1 Cognitive Behavorial Therapist Every Child Succeeds (Goals 1 & 3 in SOM) Other Costs *Nevada County Behavorial Health (BH President Control of Co	e visits (Goals 1.1.4 , ,2,3 in SOW) <u>N)</u>	,1.4, 1.5, 2, 3, 4, 5 ir	n ŚOW)	ip or Healthy Families Total Travel Costs Total Subcontracts	\$ 1,500 \$ 1,500 \$ 702,000 \$ 34,000 \$ 736,000	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	3,078 3,078 649,472 8,440 657,912
Travel (Staff travel and registration fees to st of America trainings (1.3 in SOW), and home Subcontracts Child Advocates of Nevada County (Goals 1 Cognitive Behavorial Therapist Every Child Succeeds (Goals 1 & 3 in SOM) Other Costs *Nevada County Behavorial Health (BH President Control of Co	e visits (Goals 1.1.4, ,2,3 in SOW) M) rogram Manager to in SOW)	,1.4, 1.5, 2, 3, 4, 5 in	n ŚOW)	ip or Healthy Families Total Travel Costs Total Subcontracts	\$ 1,500 \$ 1,500 \$ 702,000 \$ 34,000 \$ 736,000	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	3,078 3,078 649,472 8,440 657,912

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

Personnel Position Title/Classification Senior Public Health Nurse (In-Kind) Accountant (In-Kind) Director of Public Health Nursing Administrative Services Officer (In-Kind) Behavioral Health Program Manager(see	Original Annual Salary \$ 82,489 \$ 57,602 \$ 106,314 \$ 85,390	Amendment Annual Salary	Original FTE % 25% 2% 10% 2%	Amendment FTE % 10% 2.5% 15% 2.5%		Original nual Cost 20,622 1,152 10,631 1,708		nendment nual Cost 18,292
other Costs)*				Subtotal Personne	l <u>\$</u>	34,113	<u>\$</u>	18,292
Fringe Benefits (61.22 58.98% of Personnel)					\$	20,884	\$	10,789
(FICA 7.65%, Retirement 26.515%, OPEB 8.7%	%, Health and Denta	al Insurance 18.355	16.115%)		•	_0,00.	<u></u>	.0,.00
		To	tal Personne	l and Fringe Benefits	\$	54,997	\$	29,081
Operating Expenses								
Training (Registration Fees for CHVP required	and other profession	onal development tra	inings and CE	EUs as needed.)	-\$	1.049		
General Office			9	,	\$	107	\$	262
Duplication/Printing/Postage					\$	100	\$	2
		Total O	perating Exp	enses	\$	1,256	<u>\$</u>	264_
Equipment (major equipment >\$5,000)								
				Total Equipment	i		\$	0_
Travel (Staff travel and registration fees to star of America trainings (1.3 in SOW), and home v				o or Healthy Families	\$	1,500	\$	3,054
				Total Travel Costs	\$	1,500	<u>\$</u>	3,054
Subcontracts								
Child Advocates of Nevada County (Goals 1,2, Cognitive Behavorial Therapist	<u>,3 in SOW)</u>				\$	702,000 34.000	\$	656,000
Cognitive Benavonal Metapist		Total	Subcontracts	Sub-contract Costs	Ψ	736,000	\$	656,000
Other Costs					1			
*Nevada County Behavorial Health (BH Prog Program 3-4 Hours/week(Goals 1.2 & 1.3 in S		rovide supervision	of therapists	supporting			\$	10,039
Program 3-4 Hours/Week/Goals 1.2 & 1.5 III s	<u>30W))</u>			Total Other Costs	i		<u>\$</u>	10,039
Indirect Costs (25 <u>24.999%</u> of Total Personne	el Costs and Fringe	e Benefits)		Total Budget	\$	13,749 807.502	<u>\$</u> \$	7,270 705,708

Exhibit B, Attachment III, Schedule 1

Subcontractor Budget Child Advocates of Nevada County Budget (Year 3) (07/01/17 through 06/30/18)

_					·	,					
Personi		Original		Ar	nendment	Original	Amendment		Original	Am	endment
	Title/Classification and Number of	Annual Sal	arv	Anr	nual Salary	FTE %	FTE %	Ar	nnual Cost	Anı	nual Cost
<u>each</u>			•		•						
	Executive Director		704		70,000	4 8.74%	<u>14.27%</u>	\$	32,996	\$	9,989
	Operations Manager	\$ 29,	952 280	<u>\$</u>	0 31,209	60.92%	<u>0.00%</u>	\$	18,246 20,274	<u>\$</u> \$	0 18,491
	Bookkeeper Healthy Families America		280 405		59,405	60.92% 82.14%	<u>59.2489%</u> 79.2492%	-\$ -\$	20,274 48,797	\$	47,078
	Healthy Family America	. ,	008		42,008	82.14%	79.2491%	\$	34,506	\$	33,291
	Healthy Family America		008		37,340	82.14%	79.2492%	\$	34,506	\$	29,592
	Healthy Family America Family				38,475				,	¢	30,491
	Assessment Worker	\$ 36,	200	Ψ	30,473	82.14%	<u>79.248%</u>	-\$	29,736	\$	30,431
	Healthy Family America Family	\$ 28.	960	\$	28,960	82.14%	<u>79.25%</u>	-\$-	23,788	\$	22,951
	Assessment Worker						·	•	,		
	Family Support Worker	. ,	686		9,309	82.14%	<u>79.245%</u>	\$	16,991	\$	7,377
	Family Support Worker	. ,	371 274		40,310	82.14%	<u>79.25%</u>	\$	33,983	\$	31,946 31,946
	Family Support Worker Family Support Worker		371 371		40,310 24,186	82.14%	<u>79.25%</u>	\$	33,983	<u>\$</u> \$	19,189
		. ,			40,310	82.14%	79.339%	\$	33,983	\$	31,945
	Family Support Worker	. ,	371 000		40,310	82.14%	<u>79.248%</u>	\$_	33,983	\$	31,946
	Family Support Worker	. ,	028	_	30,233	82.14%	<u>79.25%</u>	\$_	25,487	-	23,960
	Family Support Worker	. ,	686			82.14%	<u>79.25%</u>	\$	16,992	\$	
	Family Support Worker	. ,	411		40,310	82.15%	<u>79.25%</u>	\$	10,195	\$	31,946
	Family Support Worker	. ,	686		20,155	82.14%	<u>79.25%</u>	\$	16,992	\$	15,973
	Family Support Worker		028			82.14%		-\$-	25,487	\$	0
	Quality Assurance Tech	\$ 34,	320		31,200	82.14%	<u>79.25%</u>	-\$	28,192	\$	24,726
	IT Specialist			\$	29,961		<u>59.25%</u>			\$	17,752
							Outstate December	•	540 447	÷	400 E00
							Subtotal Personnel	-\$-	519,117	<u>\$</u>	460,586
Cuinas B	lanefite (0.60.0 F0000) of Davisania	.n						Φ.	40.005		44.040
Fringe E	enefits (9.60 <u>9.5998</u> % <u>of Personne</u>	<u>:1</u>)				T. (.) D.		->	49,835	\$	44,216
						Total Per	sonnel and Fringe Benefits	_\$	568,952		<u>\$504,805</u>
	_										
Operati	ng Expenses										
	Training (Registration fees for CHV	P required ar	nd ot	her pr	ofessional de	evelopment tr	ainings and CEUs as	\$	4.107	\$	3,170
	needed.)							•	, -		
	Rent (14.8513.22 FTE * \$2 * 200sq		s = \$	71,28	30 <u>63,456)</u>	3,456 - \$26,1	88 (In Kind) = \$37,268	-\$	42,587	\$	37,268
	Technical Support (IT and other me							\$	6,080	\$	0_
	Mileage (home visits (Goals 1.1.4,	1.4, 1.5, 2, 3,	4, 5	in SO	W))			\$	18,729	\$	10,303
	Vehicle fuel and maintenance							\$	4,832	\$	6,340
	Recruitment Costs							\$	789	\$	1,157
	Insurance (General Liability, Improp	er Sexual Mi	scon	iduct,	Professional	Liability, etc.))	\$	4,605	\$	4,528
	Outreach							\$	3,163	\$	0
	General Office Supplies							\$	9,087	\$	1,288
	Printing, Copying, Duplication							\$	5,580	\$	6,650
	Communication (Staff desk phones	, fax lines, ar	id ce	ll pho	ne charges)			\$	13,456	\$	11,583
	Audit							\$	7,919	\$	0
	Dues, Program Fees, Subscriptions	3						\$	1,066	\$	4,913
	Healthy Families America Members	ship Dues						\$	2,546	\$	0
	Utilities	•						•	_,-,-	\$	3,200
							Total Operating Expenses	\$	124,546	\$	90,400
							3 1	<u> </u>	,		<u> </u>
Equipme	ent (major equipment >\$5,000)										
										\$	0
							Total Equipment			\$	0
										<u> </u>	
Travel											
	TRAVEL (Staff travel to statewide 0	CHVP confere	ence	s Nur	se Family Pa	rtnershin or l	Healthy Families of America				
	trainings (1.3 in SOW))	31111 00111011		o, 11a.	oo i aiiiiy i o	iranoromp or r	reality ramines or ramonea	\$	4,107	\$	3,171
	gc (//										
							Total Travel Costs	\$	4.107	\$	3,171
								<u> </u>	.,		
Other C	osts										
	Stipends							\$	1,109	\$	436
	Curriculum							\$	3.286	\$	1,189
									•		
							Total Other Costs	\$_	4 305	\$	1,625
							Total Other Ousts	Ψ	7,000	<u>*</u>	.,020
Indiroct	Costs (9.8% of Total Personnel an	d Erinas Ps	nofi+	e)						\$	49,471
munect	Oosta (3.0 % OF TOTAL PERSONNEL AN	u rinige bei	ieli(<u>ə j</u>			- :	_	700 000	<u>*</u>	<u> </u>
							Total Budget	\$	/02,000	<u>\$</u>	649,472

Exhibit B, Attachment IV, Schedule 1

Subcontractor Budget Child Advocates of Nevada County Budget (Year 4) (07/01/18 through 06/30/19)

Personnel		Original	Ar	mendment	Original	Amendment		Original	Am	nendment
Position Title/Classification and Number	of	J			J			Ü		
each	Anı	nual Salary	Anr	nual Salary	FTE %	FTE %	An	inual Cost	Anı	nual Cost
Executive Director	\$	67,704		70,000	48.74%	<u>14.27%</u>	\$	32,996	\$	9,989
Operations Manager	-\$	29,952		24 200	60.92%	<u>0.00%</u>	\$	18,246	\$	0
Bookkeeper	\$	33,280		31,209	60.92%	<u>59.2489%</u>	\$	20,274 48,797	<u>\$</u> \$	18,491 47,078
Healthy Families America Progr Healthy Family America	am \$ \$	59,405 42,008		59,405 42,008	82.14% 82.14%	<u>79.2492%</u> 79.2491%	\$	48,797 34,506	\$	33,291
Healthy Family America	\$	42,008 42,008	-	37,340	82.14%	79.25%	\$	34,506	\$	29,592
Healthy Family America Family	•	,					•	,		
Assessment Worker Healthy Family America Family	\$	36,200	<u> </u>	38,475	82.14%	<u>79.2485%</u>	->	29,736	\$	30,491
Assessment Worker	\$	28,960		28,960	82.14%	<u>79.25%</u>	\$	23,788	\$	22,951
Family Support Worker	-\$	20,686	-	9,309	82.14%	<u>79.245%</u>	\$	16,991	\$	7,377
Family Support Worker	-\$	41,371		40,310	82.14%	<u>79.25%</u>	\$	33,983	\$	31,946
Family Support Worker	-\$	41,371		40,310 24,186	82.14%	79.25%	\$	33,983	<u>\$</u> \$	31,946 19,189
Family Support Worker Family Support Worker	\$ \$	41,371 41,371		40,310	82.14% 82.14%	79.3385%	\$ \$	33,983 33,983	\$	31,945
Family Support Worker	\$	31,028		40,310	82.14% 82.14%	<u>79.248%</u> 79.25%	\$	25,487	\$	31,946
Family Support Worker	\$	20,686	-	30,233	82.14%	79.25% 79.25%	\$	16,992	\$	23,960
Family Support Worker	\$	12,411	_	40,310	82.15%	79.25%	\$	10,332	\$	31,946
Family Support Worker	\$	20,686		20,155	82.14%	79.25%	\$	16,992	\$	15,973
Family Support Worker	\$	31.028	_		82.14%	13.2070	\$	25.487	\$	0
Quality Assurance Tech	\$	34,320		31,200	82.14%	79.25%	\$	28.192	\$	24,726
IT Specialist	•	- 1,	\$	29,961		59.25%	•	,	\$	17,752
						Subtotal Personne	I_\$	519,117	\$	460,586
Eringo Ponefito (0.50.0 50000) of Porco	nnol)						·	49.835	•	44.046
Fringe Benefits (9.60-9.5998% of Perso	illiei)				Total Porcor	nnel and Fringe Benefits	<u> </u>	-,	\$	44,216
					Total Person	mer and Fringe Benefits	• 	568,952	\$	504,805
Operating Expenses										
Training (Registration fees for C	:HVP rea	uired and ot	her nr	ofessional dev	elonment traini	ings and CEUs as				
needed.)		a	о. р.	0.000.0.1.0. 00.	0.00	go aa 0200 ao	-\$	4,107	\$	6,434
Rent (14.8513.22 FTE * \$2 * 20	0sqft * 12	months = \$	71,28	(063,456) \$63,	456 - \$26,188 ((In Kind) = \$37,268	-\$	42,587	\$	37,268
Technical Support (IT and other			,			<u> </u>	\$	6,080	\$	0
Mileage (home visits (Goals 1.1.4, 1.4, 1.5, 2, 3, 4, 5 in SOW)) \$\\\$\\$\\$\\$\\$18,729							\$	10,303		
Vehicle fuel and maintenance \$\\4,832							\$	6,340		
Recruitment Costs \$ 789							\$	1,157		
Insurance (General Liability, Improper Sexual Misconduct, Professional Liability, etc.) \$ 4,605							\$	4,528		
Outreach							\$	3,163	\$	0
General Office Supplies \$ 9,087						\$	1,289			
Printing, Copying, Duplication \$5,580						\$	6,650 11,583			
Communication (Staff desk phones, fax lines, and cell phone charges) \$\frac{13,456}{4000}\$ \$\frac{7.919}{1000}\$							\$			
Dues, Program Fees, Subscript	one						\$ \$	7,919 1,066	<u>\$</u> \$	<u>0</u> 4,913
Healthy Families America Member		1100					\$	2,546	\$	0
<u>Utilities</u>	Cromp D	uco					Ψ	2,040	¢	3,200
<u>Otinties</u>					To	otal Operating Expenses	. \$	124 546	\$	93,665
						tu. opo.ug =xpooo	Ψ	121,010	<u> </u>	
Equipment (major equipment >\$5,000)										
									\$	0
						Total Equipment	<u>t</u>		\$	0
<u>Travel</u>										
TRAVEL (Staff travel to statewing	de CHVP	conferences	s, Nur	se Family Part	nership or Hea	Ithy Families of America	œ	4.107	\$	6,434
trainings (1.3 in SOW))							Φ	4,107	Ψ	0,404
						Total Travel Costs	\$	4,107	\$	6,434
Other Costs							_		•	400
Stipends							-\$	1,109	\$	436
Curriculum							-\$-	3,286	\$	1,189
						Total Other Costs	\$ <u>_</u>	4,395	<u>\$</u>	1,625
Indirect Costs (9.8% of Total Personne	and Frin	nge Benefit	<u>s</u>)						\$	49,471
						Total Budge	t <u>\$</u>	702,000	\$	656,000

Total Budget \$

15-10165 <u>**A02**</u>

8,440

Exhibit B, Attachment III, Schedule 2

Subcontractor Budget Every Child Succeeds Budget Year 3 (07/01/17 through 6/30/18)

Operating Expenses Licensing Fees	Original Annual Cost \$5,250	Annual Cost \$5,250
Oversight, Training and Supervision calls. The counseling sessions are monitored by ECS and then follow up phone conversations occur to analyze the sessions.	\$3,190	\$3,190