


COUNTY OF SAN MATEO
Departmental Correspondence

DATE: SEP 04 2001
HEARING DATE: SEP 18 2001

TO: Honorable Board of Supervisors
FROM: Gale Bataille, Director, Mental Health Services 
SUBJECT: Agreement with Peninsula Network of Mental Health Clients

RECOMMENDATION

Adopt a resolution:

1. authorizing the President of the Board to execute an agreement with Peninsula Network of Mental Health Clients for socialization services, community programs and peer support for seriously mentally ill adult consumers.
2. authorizing the Director of Health Services to execute amendments and minor modifications to this agreements not to exceed the aggregate of \$25,000.

Background

The Peninsula Network of Mental Health Clients (PNMHC) is the only client-run, mental health self-help provider in San Mateo County. They have a proven track record of successfully staffing and managing peer support programs for adult mentally ill consumers. San Mateo County Mental Health Services has contracted with PNMHC for 10 years to provide socialization services, advocacy and peer support. These services provide peer operated alternatives for mental health clients who otherwise may not be able to participate in community activity programs on their own.

Discussion

The services provided by PNMHC include operating drop-in centers, known as Miller Center North and Miller Center Central, for seriously mentally ill clients of San Mateo County. These drop-in centers offer a variety of consumer-led groups in a safe and supportive environment providing peer support and social and independent living skills training. PNMHC also provides evening programs including "movie nights" and social activities.

The total amount for this contract has been increased to cover the costs of extending the socialization services and adding accounting services.

Term and Fiscal Impact

The term of this agreement is from July 1, 2001 through June 30, 2002. This agreement is included in the Health Services Continuing Resolution and has been reviewed and approved by Risk Management and County Counsel.

The contract maximum amount is \$117,817. Funds are included in the approved Mental Health Services' approved budget for 2001-02. Sales tax provided through realignment will cover 82% of the cost or \$96,610. The remaining \$21,207 represents the net county cost. We are requesting that the Director of Health Services be given signing authority to execute minor amendments and adjustments up to \$25,000.

RECOMMENDED



HEALTH SERVICES DEPARTMENT

RESOLUTION NO. _____

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA

RESOLUTION AUTHORIZING EXECUTION OF AGREEMENT WITH
PENINSULA NETWORK OF MENTAL HEALTH CLIENTS

RESOLVED, by the Board of Supervisors of the County of San Mateo, State of
California, that

WHEREAS, there has been presented to this Board of Supervisors for its consideration
and acceptance an Agreement, reference to which is hereby made for further particulars, whereby
Peninsula Network of Mental Health Clients shall provide socialization services, peer support
and community programs for our seriously mentally disabled adult consumers; and

WHEREAS, this Board has been presented with the Agreement and has examined and
approved it as to both form and content and desires to enter into the Agreement:

NOW, THEREFORE, IT IS HEREBY DETERMINED AND ORDERED that the
President, of this Board of Supervisors be, and is hereby, authorized and directed to execute said
Agreement for and on behalf of the County of San Mateo, and the Clerk of this Board shall attest
the President's signature thereto;

BE IT FURTHER RESOLVED, that the Director of Health Services is hereby authorized
to execute subsequent Amendments and minor modifications to the Agreement with Peninsula
Network of Mental Health Clients, not to exceed the aggregate of \$25,000 for each Agreement.

AGREEMENT WITH PENINSULA NETWORK OF MENTAL HEALTH CLIENTS
FOR MENTAL HEALTH SERVICES

THIS AGREEMENT, entered into this _____ day of _____, 20____, by and between the COUNTY OF SAN MATEO, hereinafter called "County," and PENINSULA NETWORK OF MENTAL HEALTH CLIENTS, hereinafter called "Contractor";

W I T N E S S E T H:

WHEREAS, it is necessary and desirable that Contractor be retained for the purpose of performing the professional services hereinafter described for the Health Services Agency, Mental Health Services Division; and

WHEREAS, pursuant to Government Code, Section 31000, County may contract with independent contractors for the furnishing of such services to or for County or any Department thereof;

NOW, THEREFORE, IT IS HEREBY AGREED BY THE PARTIES HERETO AS FOLLOWS:

1. Services to be Performed by Contractor

In consideration of the payments hereinafter set forth, Contractor, under the general direction of the Director of Health Services, or her designee, with respect to the product or result of Contractor's services, shall provide socialization services, community programs and peer support to mentally ill adult consumers as described in Schedule A, attached hereto and incorporated by reference herein. Such services shall be provided in a professional and diligent manner.

2. Payments

A. Maximum Amount. In full consideration of Contractor's performance of the services described in Schedule A, the amount that County shall be obligated to pay for services rendered under this Agreement shall not exceed ONE HUNDRED SEVENTEEN THOUSAND EIGHT HUNDRED SEVENTEEN DOLLARS (\$117,817) for the contract term.

B. Rate of Payment. The rate and terms of payment shall be as specified in Schedule B, attached hereto and incorporated herein. Any rate increase is subject to the approval of the Director of Health Services or her designee, and shall not be binding on County unless so approved in writing. In no event may the rates established in Schedule B be increased to the extent that the maximum County obligation shall exceed the total specified in paragraph 2A above. Each payment shall be conditioned on the performance of the services described in Schedule A to the full satisfaction of the Director of Health Services or her designee.

C. Time Limit for Submitting Invoices. Contractor shall submit an invoice for services to County for payment in accordance with the provisions of Schedule B. County shall not be obligated to pay Contractor for the services covered by any invoice if Contractor presents the invoice to County more than one hundred eighty (180) days after the date Contractor renders the services, or more than ninety (90) days after this Agreement terminates, whichever is earlier.

3. Relationship of Parties

It is expressly understood that this is an agreement between two (2) independent contractors and that no agency, employee, partnership, joint venture or other relationship is established by this Agreement. The intent by both County and Contractor is to create an independent contractor relationship. Contractor expressly acknowledges and accepts his/her tax status and the tax consequences of an independent contractor. Further, as an independent contractor, Contractor expressly acknowledges and accepts that he/she has no rights, benefits, privileges and/or claims in any form whatsoever under, from, through and/or pursuant to the San Mateo County Civil Service Rules.

4. Hold Harmless

Contractor shall indemnify and save harmless County, its officers, agents, employees, and servants from all claims, suits, or actions of every name, kind and description, brought for, or on account of: (A) injuries to or death of any person, including Contractor, or (B) damage to any property of any kind whatsoever and to whomsoever belonging, or (C) any failure to withhold and/or pay to the government income and/or employment taxes from earnings

under this Agreement, or (D) any other loss or cost, including but not limited to that caused by the concurrent active or passive negligence of County, its officers, agents, employees, or servants, resulting from the performance of any work required of Contractor or payments made pursuant to this Agreement, provided that this shall not apply to injuries or damage for which County has been found in a court of competent jurisdiction to be solely liable by reason of its own negligence or willful misconduct.

The duty of Contractor to indemnify and save harmless as set forth herein, shall include the duty to defend as set forth in Section 2778 of the California Civil Code.

5. Insurance

Contractor shall not commence work under this Agreement until all insurance required under this section has been obtained and such insurance has been approved by the Director of Health Services. Contractor shall furnish the Health Services Agency with Certificates of Insurance evidencing the required coverage and there shall be a specific contractual liability endorsement extending Contractor's coverage to include the contractual liability assumed by Contractor pursuant to this Agreement. These Certificates shall specify or be endorsed to provide that thirty (30) days' notice must be given, in writing, to the Health Services Agency of any pending change in the limits of liability or of any cancellation or modification of the policy.

In the event of the breach of any provision of this section, or in the event any notice is received which indicates any required insurance coverage will be diminished or canceled, County at its option, may, notwithstanding any other provision of this Agreement to the contrary, immediately declare a material breach of this Agreement and suspend all further work pursuant to this Agreement.

A. Workers' Compensation and Employer Liability Insurance. Contractor shall have in effect during the entire life of this Agreement, Workers' Compensation and Employer Liability Insurance providing full statutory coverage. In signing this Agreement, County makes the following certification, required by Section 1861 of the California Labor Code:

I am aware of the provisions of Section 3700 of the California Labor Code which require every employer to be insured against liability for Workers' Compensation or to undertake self-insurance in accordance with the provisions of the Code, and I will comply with such provisions before commencing the performance of the work of this Agreement.

B. Liability Insurance. Contractor shall take out and maintain during the life of this Agreement such Bodily Injury Liability and Property Damage Liability Insurance as shall protect him while performing work covered by this Agreement from any and all claims for damages for bodily injury, including accidental death, as well as any and all claims for property damage which may arise from Contractor's operations under this Agreement, whether such operations be by himself or by any subcontractor or by anyone directly or indirectly employed by either of them. Such insurance shall be combined single limit bodily injury and property damage for each occurrence and shall not be less than the amounts specified below.

Such insurance shall include:

- 1) Comprehensive General Liability \$1,000,000
- 2) Motor Vehicle Liability Insurance\$0
- 3) Professional Liability\$0

If this Agreement remains in effect more than one (1) year from the date of its original execution, County may, at its sole discretion, require an increase in the amount of liability insurance to the level then customary in similar County agreements by giving sixty (60) days' notice to Contractor.

County and its officers, agents, employees and servants shall be named as additional insured on any such policies of insurance, which shall also contain a provision that the insurance afforded thereby to County, its officers, agents, employees, and servants shall be primary insurance to the full limits of liability of the policy, and that if County or its officers and employees have other insurance against the loss covered by such a policy, such other insurance shall be excess insurance only. Said certificate(s) of insurance is (are) attached hereto and incorporated by reference herein as Attachment II (and III).

6. Non-Discrimination

Contractor shall comply with the non-discrimination requirements described in Schedule C, which is attached hereto, and incorporated herein.

Contractor shall comply with County admission and treatment policies which shall provide that patients are accepted for care without discrimination on the basis of race, color, religion, sex, sexual orientation, national origin, age, handicap, or political affiliation.

Violation of the non-discrimination provisions of this Agreement shall be considered a breach of this Agreement and subject Contractor to penalties, to be determined by the County Manager, including, but not limited to:

- i. termination of this Agreement;
- ii. disqualification of Contractor from bidding on or being awarded a County contract for a period of up to three (3) years;
- iii. liquidated damages of TWO THOUSAND FIVE HUNDRED DOLLARS (\$2,500) per violation;
- iv. imposition of other appropriate contractual and civil remedies and sanctions, as determined by the County Manager.

To effectuate the provisions of this paragraph, the County Manager shall have the authority to:

- i. examine Contractor's employment records with respect to compliance with this paragraph;
- ii. set off all or any portion of the amount described in this paragraph against amounts due to Contractor under the Contract or any other contractor between Contractor and County.

Contractor shall report to the County Manager the filing by any person in any court of any complaint of discrimination or the filing by any person of any and all charges with the Equal Employment Opportunity Commission, the Fair Employment and Housing Commission or any other entity charged with the investigation of allegations within thirty (30) days of such filing, provided that within such thirty (30) days such entity has not notified Contractor that such charges

are dismissed or otherwise unfounded. Such notification shall include the name of the complainant, a copy of such complaint, and a description of the circumstance. Contractor shall provide County with a copy of its response to the complaint when filed.

With respect to the provision of employee benefits, Contractor shall comply with the County Ordinance which prohibits contractors from discriminating in the provision of employee benefits between an employee with a domestic partner and an employee with a spouse.

7. Assignments and Subcontracts

A. Without the written consent of the Director of Health Services or her designee, this Agreement is not assignable in whole or in part. Any assignment by Contractor without the written consent of the Director of Health Services or her designee is a breach of this Agreement and shall automatically terminate this Agreement.

B. Contractor shall not employ subcontractors or consultants to carry out the responsibilities undertaken pursuant to this contract without the written consent of the Director of Health Services or her designee.

C. All assignees, subcontractors, or consultants approved by the Director of Health Services or her designee shall be subject to the same terms and conditions applicable to Contractor under this Agreement, and Contractor shall be liable for the assignee's, subcontractor's or consultant's acts and/or omissions.

D. All agreements between Contractor and subcontractor and/or assignee for services pursuant to this Agreement shall be in writing and shall be provided to County.

8. Amendment of Agreement

This Agreement is complete and contains all the terms and conditions agreed upon by the parties. No amendment shall be valid unless made in writing and signed by the parties hereto, and no oral understanding or agreement shall be binding on the parties hereto.

9. Records

A. Contractor agrees to provide to County, to any federal or state department having monitoring or reviewing authority, to County's authorized representatives and/or their appropriate audit agencies upon reasonable notice, access to and the right to examine and audit all

records and documents necessary to determine compliance with relevant federal, state, and local statutes, rules and regulations, and this Agreement, and to evaluate the quality, appropriateness and timeliness of services performed.

B. Contractor shall maintain and preserve all financial records relating to this Agreement for a period of four (4) years from the termination date of this Agreement, or until audit findings are resolved, whichever is greater.

10. Compliance with Applicable Laws

All services to be performed by Contractor pursuant to this Agreement shall be performed in accordance with all applicable federal, state, county, and municipal laws, including, but not limited to, the Americans with Disabilities Act of 1990, as amended, and Section 504 of the Rehabilitation Act of 1973, as amended and attached hereto and incorporated by reference herein as Attachment I, which prohibits discrimination on the basis of handicap in programs and activities receiving any federal or county financial assistance. Such services shall also be performed in accordance with all applicable ordinances and regulations, including, but not limited to, appropriate licensure, certification regulations, provisions pertaining to confidentiality of records, and applicable quality assurance regulations.

11. Interpretation and Enforcement

A. Any notice, request, demand or other communication required or permitted hereunder shall be deemed to be properly given when deposited in the United States mail, postage prepaid, or when deposited with a public telegraph company for transmittal, charges prepaid, addressed:

1) In the case of County, to:

San Mateo County
Mental Health Services Division
225 37th Avenue
San Mateo, CA 94403

or to such person or address as County may, from time to time furnish to Contractor.

2) In the case of Contractor, to:

Peninsula Network of Mental Health Clients
19 West 41st Avenue
San Mateo, CA 94403

B. Controlling Law. The validity of this Agreement and of its terms or provisions, as well as the rights and duties of the parties hereunder, the interpretation and performance of this Agreement shall be governed by the laws of the State of California.

12. Term of the Agreement

Subject to compliance with the terms and conditions of this Agreement, the term of this Agreement shall be from July 1, 2001 through June 30, 2002. This Agreement may be terminated by Contractor, Director of Health Services or her designee at any time upon sixty (60) days' written notice to the other party.

Parties recognize that Contractor has performed services from July 1, 2001 through date of execution of this Agreement in anticipation of execution of this Agreement. Parties agree that services are subject to all terms and conditions contained herein.

IN WITNESS WHEREOF, the parties hereto, by their duly authorized representatives, have affixed their hands.

COUNTY OF SAN MATEO

PENINSULA NETWORK OF MENTAL
HEALTH CLIENTS

By: _____
Michael D. Nevin, President
Board of Supervisors, San Mateo County

By: Deborah Anne Ton

Date: _____

Date: July 31st 2001

ATTEST:

By: _____

Date: _____

Clerk of Said Board

Attachment I

(Required only from Contractors who provide services directly to the Public on County's behalf.)

Assurance of Compliance with Section 504 of the
Rehabilitation Act of 1973, as Amended

The undersigned (hereinafter called the "Contractor(s)") hereby agrees that it will comply with Section 504 of the Rehabilitation Act of 1973, as amended, all requirements imposed by the applicable DHHS regulation, and all guidelines and interpretations issued pursuant thereto.

The Contractor(s) gives/give this assurance in consideration of and for the purpose of obtaining contracts after the date of this assurance. The Contractor(s) recognizes/recognize and agrees/agree that contracts will be extended in reliance on the representations and agreements made in this assurance. This assurance is binding on the Contractor(s), its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this assurance on behalf of the Contractor(s).

The Contractor(s): (Check a or b)

- a. employs fewer than 15 persons.
- b. employs 15 or more persons and, pursuant to Section 84.7 (a) of the regulation (45 C.F.R. 84.7 (a)), has designated the following person(s) to coordinate its efforts to comply with the DHHS regulation.

DEBORAH ANNE TAN

Name of 504 Person - Type or Print

Peninsula Network of Mental Health Clients

Name of Contractor(s) - Type or Print

19 West 41st Avenue

Street Address or PO Box

San Mateo
City

CA
State

94403
Zip Code

I certify that the above information is complete and correct to the best of my knowledge.

July 31st 2001
Date

Deborah Anne Tan

Signature and Title of Authorized Official

*Exception: DHHS regulations state that:

"If a recipient with fewer than 15 employees finds that, after consultation with a handicapped person seeking its services, there is no method of complying with (the facility accessibility regulations)...other than making a significant alteration in its existing facilities, the recipient may, as an alternative, refer the handicapped person to other providers of those services that are accessible."

SCHEDULE A

PENINSULA NETWORK OF MENTAL HEALTH CLIENTS: 2001-2002

- A. Contractor shall provide, under the general supervision of the department, services described below in a manner consistent with the terms and provisions of this Agreement.
1. Operate two consumer drop-in centers known as Miller Center North located at North County Mental Health (NCMH) and Miller Center Central located at Central County Mental Health (CCMH).
 2. Miller Center North at NCMH will operate one (1) day a week and Miller Center Central (CCMH) will operate two (2) days a week. The drop-in center hours are from 12 noon to 4:00 p.m., for a total of twelve (12) hours per week.
 3. The drop-in centers will be available to consumers at least one hundred forty-five (145) times between July 1, 2001 and June 30, 2002.
 4. Contractor staff will check in with a designated NCMH and CCMH staff member upon arrival between 11:30 a.m. and 12:00 noon, and when leaving between 3:45 and 4:00 p.m.
 5. Contractor will operate a socialization program at New Horizons in San Mateo on Saturday evening and on one other evening, and at NCMH on Friday evenings. New Horizons will have at least eighty (80) and NCMH forty (40) program meetings between July 1, 2001 and June 30, 2002.
 6. Contractor will be responsible for the set-up and clean-up of the room at NCMH and CCMH.
 7. Contractor will use consumers to coordinate and staff drop-in centers and programs offered at the New Horizon site.
 8. Contractor will provide, on a monthly basis, a schedule reflecting program activities and weekly count of participants.
 9. Contractor will provide monthly financial accounting to the Deputy Director of Administration for the San Mateo County Mental Health Services Division. Contractor will hire an accountant to assist them with this requirement.

SCHEDULE B

PENINSULA NETWORK OF MENTAL HEALTH CLIENTS: 2001-2002

B. PAYMENTS SCHEDULE

In full consideration of the services provided by Contractor pursuant to this Agreement, County shall pay Contractor in the manner described below, except that any and all payments shall be subject to the conditions contained in this Agreement:

1. County shall pay Contractor upon submission of appropriate billing documents including a monthly report of activities at the various facilities.
2. Contractor shall be paid NINE THOUSAND EIGHT HUNDRED EIGHTEEN DOLLARS (\$9,818) per month, for a contract total not to exceed ONE HUNDRED SEVENTEEN THOUSAND EIGHT HUNDRED SEVENTEEN DOLLARS (\$117,817).

SCHEDULE C

Contract between County of San Mateo and Peninsula Network of Mental Health Clients, hereinafter called "Contractor."

- a. No person shall, on the grounds of race, color, creed, national origin, religious affiliation or non-affiliation, sex, sexual orientation, marital status, age (over forty (40)), disability, medical condition (including but not limited to AIDS, HIV positive diagnosis, or cancer), political affiliation or union membership be excluded from participation in, be denied the benefits of, or be subjected to discrimination under this Agreement.
- b. Contractor shall insure equal employment opportunity based on objective standards of recruitment, selection, promotion, classification, compensation, performance evaluations, and management relations, for all employees under this contract. Contractor's personnel policies shall be made available to County upon request.
- c. Contractor shall assure compliance with Section 504 of the Rehabilitation Act of 1973 by submitting a signed letter of assurance (Attachment I) of compliance. Contractor shall be prepared to submit a self-evaluation and compliance plan to County upon request within one (1) year of the execution of this Agreement.

PNMHC
Proposed Budget 2001-2002

	Monthly Plan	Plan for Year	Basic Assumptions for Yearly Plan
San Mateo County	\$9,818.00	\$117,816.00	\$89,240.80 plus \$27,000 increase
Interest	\$15.00	\$180.00	based on last year experience
Peninsula Community Foundation	\$0.00	\$30,000.00	Increase of \$6000 from previous year
Atkinson Foundation		\$5,000.00	based on last year experience
TOTAL	\$9,833.00	\$152,996.00	
Program Expenses			
3 Supervisor	\$789.75	\$9,477.00	4.5 hour per week, 52 weeks, \$13.50/hr.
1 Supervisor	\$526.60	\$6,318.00	9 hours per week, 52 weeks, \$13.50/hr
2 Peer Counselors	\$300.33	\$3,604.00	4.5 hour per week, 52 weeks, \$7.70/hr.
1 Peer Counselors	155.41	\$1,865.00	4.5 hour per week, 52 weeks, \$7.97/hr.
2 Peer Counselors	\$643.50	\$7,722.00	9 hours per week, 52 weeks, \$8.25/hr
3 Peer Counselors	\$1,029.60	\$12,355.00	9 hours per week, 52 weeks, \$8.80/hr
4 Peer Counselors	\$772.20	\$9,266.00	4.5 hours per week, 52 weeks, \$9.90/hr
Food expense - Program Supplies	\$975.00	\$11,700.00	\$75 per week, 52 weeks X 3
Food expense - Program Supplies	\$216.00	\$2,600.00	\$50 per week, 52 weeks
Annual Raises	\$429.00	\$5,148.00	1.00 per person per annual review
SUBTOTAL	\$5,837.39	\$70,055.00	
Administrative Expenses			
Executive Director	\$3,080.00	\$36,960.00	140 hours per month \$22.00/hr@35wk
Administrative Assistant	\$1,350.00	\$16,200.00	135 hours per month \$ 10.00/hr
Payroll expenses	\$1,000.00	\$10,000.00	Employer Taxes
Associated Payroll Costs/Service	\$150.00	\$1,500.00	assumes 5% increase over past year
At & T Phones	\$300.00	\$3,000.00	571-0616/1398-/245-5805/571-8701/web
California Water	\$22.00	\$264.00	Per Monthly Statement
Printing Costs	\$29.17	\$350.00	
Furniture & Equipment	\$291.67	\$3,500.00	
Staff Training & Development	\$125.00	\$1,500.00	
PG & E	\$150.00	\$1,800.00	Unsure????
Water/Black Mountain	\$22.80	\$273.60	Average monthly statement
Banking Fees	\$19.00	\$228.00	Falls Below required Balance
Rent	\$1,011.10	\$12,166.32	assumes 5% Increase over past year
Postage	\$58.33	\$700.00	assumes 5% Increase over past year
Office Supplies	\$208.33	\$2,500.00	assumes 5% increase over past year
Insurance (all)	\$1,415.00	\$1,415.00	
Accounting & Legal	\$208.33	\$2,500.00	\$500 for taxes, \$150 for misc. filing fees
Other	\$25.00	\$300.00	
CPA	\$416.66	\$5,000.00	Bookkeeping
Subtotal	\$9,881.73	\$101,656.92	
Total Expenses	\$15,719.12	\$171,711.92	
Ending Balance	\$5,886.12	\$12,749.66	

COUNTY OF SAN MATEO
HEALTH SERVICES ADMINISTRATION

MEMORANDUM

DATE: August 7, 2001

TO: Priscilla Morse, Risk Management/Insurance Division
FROM: Mary Vozikes, Mental Health Services/PONY #MLH 322

CONTRACTOR: Peninsula Network of Mental Health Clients

DO THEY TRAVEL: No

PERCENT OF TRAVEL TIME:

NUMBER OF EMPLOYEES: Yes

DUTIES (SPECIFIC): See attached

COVERAGE:

Comprehensive General Liability:	\$1,000,000
Motor Vehicle Liability:	\$0
Professional Liability:	\$0
Worker's Compensation:	\$Yes

APPROVE ✓ WAIVE _____ MODIFY _____

REMARKS/COMMENTS:


SIGNATURE

8-7-01

ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)
07/27/2001

PRODUCER

Andreini & Co License 0208825
220 West 20th Ave.
San Mateo, CA 94403
(650) 573-1111 Fax (650) 378-4361

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

- COMPANY LETTER **A** NIAC
- COMPANY LETTER **B** STATE COMPENSATION INSUR FUND
- COMPANY LETTER **C**
- COMPANY LETTER **D**
- COMPANY LETTER **E**

INSURED

PENINSULA NETWORK OF MENTAL HEALTH
19TH WEST 41ST AVE.
SAN MATEO, CA 94402

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY				
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	2001-02485	06/05/01	06/05/02	GENERAL AGGREGATE \$ 1,000,00
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PRODUCTS-COMP/OP AGG. \$ 1,000,00
	<input checked="" type="checkbox"/> OWNER'S & CONTRACTOR'S PROT.				PERSONAL & ADV. INJURY \$ 1,000,00
					EACH OCCURRENCE \$ 1,000,00
					FIRE DAMAGE (Any one fire) \$ 50,00
					MED. EXPENSE (Any one person) \$ 5,00
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
	<input type="checkbox"/> HIRED AUTOS				EACH OCCURRENCE \$
	<input type="checkbox"/> NON-OWNED AUTOS				AGGREGATE \$
	<input type="checkbox"/> GARAGE LIABILITY				
	EXCESS LIABILITY				
	<input type="checkbox"/> UMBRELLA FORM				
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				
B	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	1448601-01	07/04/01	07/04/02	<input checked="" type="checkbox"/> STATUTORY LIMITS
					EACH ACCIDENT \$ 1,000,00
					DISEASE - POLICY LIMIT \$ 1,000,00
					DISEASE - EACH EMPLOYEE \$ 1,000,00
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

ADDITIONAL INSURED ENDORSEMENT TO FOLLOW FROM COMPANY

30 DAYS CANCELLATION EXCEPT WITH RESPECT TO NON-PAY, WHICH IS 10 DAYS

CERTIFICATE HOLDER

SAN MATEO COUNTY MENATL HEALTH
225 W. 37TH AVENUE
SAN MATEO CA 94403

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Kandace Reeves

COUNTY OF SAN MATEO

Equal Benefits Compliance Declaration Form

I Vendor Identification

Name of Contractor: Peninsula Network of Mental Health Clients
Contact Person: Deborah Tan
Address: 19 West 41st Avenue
San Mateo, CA 94403
Phone Number: Fax Number:

II Employees

Does the Contractor have any employees? [X] Yes ___ No
Does the Contractor provide benefits to spouses of employees? ___ Yes [X] No

If the answer to one or both of the above is no, please skip to Section IV.

III Equal Benefits Compliance (Check one)

- [] Yes, the Contractor complies by offering equal benefits, as defined by Chapter 2.93, to its employees with spouses and its employees with domestic partners.
[] Yes, the Contractor complies by offering a cash equivalent payment to eligible employees in lieu of equal benefits.
[X] No, the Contractor does not comply.
[] The Contractor is under a collective bargaining agreement which began on July 1, 2001 and expires on June 30, 2002.

IV Declaration

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct, and that I am authorized to bind this entity contractually.

Executed this 31st day of July, 2001 at San Mateo, CA
(City) (State)

Deborah Anne Tan
Signature

Deborah Anne Tran
Name (Please Print)

Executive Director

94 30 80045

DEPT OF HEALTH SUCS

DATE	TIME	TO/FROM	MODE	MIN/SEC	PGS	JOB#	STATUS
26	09/04 09:38		7882 G3--S	00'28"	001	145	OK

JUN-01-1900 02:07

Debbie Jetproinc

From: Debbie (Jetproinc) [debbie@jetproinc.com]
Sent: Saturday, September 01, 2001 8:56 AM
To: hs*morrow@co.sanmateo.ca.us
Subject: bad food at a restaurant

I just want to know where I can send a complaint of a restaurant. The restaurant is called **SZECHWAN** restaurant
681 San Mateo avenue
San Bruno, ca 94066
650-583-7171

I had lunch there and I ordered soup and it had other kinds of food in it. (tofu and some other particles) I also ordered kun pao chicken and it had chicken and some pieces of beef on the bottom covered with chicken and it had very bad vegetables-sour it tasted rotten. I mentioned it to the waitress and she did not say anything she just took the plates away and came back to give me the bill. She did not even give me credit for the bad food because I had tasted the food already. It was only about 5 spoons full of food. Is there a place that I can call and ask them to check their food out, like an inspection of the kitchen.

Please let me know.
Thanks-
debbie@jetproinc.com

Please contact the San Mateo County Health Officer:

Scott Morrow, M.D., M.P.H.
225 37th Avenue
San Mateo, CA 94403
hs*morrow@co.sanmateo.ca.us
FAX (650) 573-2116
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