

**INTERAGENCY AGREEMENT BETWEEN  
THE SAN MATEO COUNTY CHILDREN & FAMILIES FIRST COMMISSION  
AND  
SAN MATEO COUNTY HEALTH SERVICES AGENCY, DIVISION OF PUBLIC HEALTH  
(Prenatal to Three Initiative)**

**THIS AGREEMENT** is entered into this 1st day of January 2003, by and between the San Mateo County Children & Families First Commission, hereinafter called "Commission," and San Mateo County Health Services Agency, Division of Public Health (Prenatal to Three Initiative), hereinafter called "Contractor."

**W I T N E S S E T H :**

**WHEREAS**, pursuant to Health & Safety Code Section 130100 et seq., Commission may contract with independent contractors for the furnishing of such services to or for the Commission; and

**WHEREAS**, the Exhibit A, Project Services, Exhibit B, Payments, and Exhibit C, Intellectual Property Protocol, are attached hereto and incorporated by reference herein;

**WHEREFORE**, the Commission and Contractor agree as follows:

1. **Services to be Performed**

In consideration of the payments hereinafter set forth in Exhibit B, attached hereto and incorporated by reference herein, Contractor under the general direction of the Executive Director of the Commission, or his/her authorized representative, with respect to the product or result of Contractor's services, shall perform services as described in Exhibit A, attached hereto and incorporated by reference herein, which includes: increasing access of Prenatal to Three Initiative services to 200 additional families as well as enhancing mental health services to Prenatal to Three Initiative clients. Contractor shall ensure compliance with all state, federal and local laws or rules applicable to performance of the work required under this contract.

Exhibits A and B and their attachments reflect the scope of work and budget for the term of the contract January 1, 2003 to December 31, 2003.

2. **Contract Term**

The term of this Agreement shall be from January 1, 2003 to December 31, 2003, subject to the termination provisions noted in paragraph 7, and subject further to the agreement provided for in paragraphs 3.C and 11, that there are reports due followed by final payment and evaluation required which occur after December 31, 2003. Contractor further agrees that the requirements of this Agreement pertaining to records in paragraph 8, and intellectual property in paragraph 9, including Exhibit C, shall survive the termination of this Agreement.

3. **Payments**

A. **Maximum Amount**. In full consideration of Contractor's performance of the services described in Exhibit A, the amount that the Commission shall be obligated to pay for services rendered under this Agreement shall not exceed FIVE HUNDRED TWENTY THOUSAND, FOUR HUNDRED EIGHTY THREE DOLLARS (\$520,483) for the term January 1, 2003– December 31, 2003.

B. **Rate of Payment**. The rate of payment shall be as specified in Exhibit B. Each payment shall be conditioned on the performance of the services described in Exhibit A to the full satisfaction of the Executive Director, on behalf of the Commission. In the event that the Commission makes any advance payments, Contractor agrees to refund any amounts in excess of the amount owed by the Commission at the time of contract termination.

C. **Time Limit for Submitting**. Contractor shall submit semi-annual progress reports within 31 days of completion of the 6<sup>th</sup> and 12<sup>th</sup> month under this Agreement for services to the Commission for payment in accordance with the provisions of Exhibit B. The first report, therefore, shall be due July 31, 2003. Guidelines for progress reports will be provided by the Commission staff and shall include a descriptive narrative, tracking of the approved timeline and work plan, and a detailed financial accounting of all grant funds spent in comparison with the approved budget. The Commission must approve any substantial

changes to the approved work plan and/or timeline. The Commission Staff will provide guidelines for such changes.

- D. **Availability of Funds.** Payment for all services provided pursuant to this Agreement is contingent upon the availability of funds under Proposition 10. In the event such funds are not provided or not available to the San Mateo County Children & Families First Commission, the Commission shall not be liable for any payment whatsoever; including, but not limited to, payments that are based on Commission funds. The Commission may terminate the agreement for unavailability of State funds. In this event, the Commission shall, through its Executive Director, inform Contractor of such unavailability as soon as it is known, and to the extent legally possible pay all outstanding amounts due.
- E. **Supplantation.** Funds pursuant to this Agreement are provided pursuant to Proposition 10 and are intended to supplement, expand upon, and enhance activities funded from existing sources. Contractor shall not use funds under this Agreement to supplant existing resources or services.

4. **Child Abuse Prevention and Reporting.**

Contractor agrees to ensure that all known or suspected instances of child abuse or neglect are reported to a child protective agency as defined in Penal Code Section 11165.9. This responsibility shall include:

- A. A requirement that all employees, consultants, or agents performing services under this contract who are required by Penal Code Section 11166(a), to report child abuse or neglect, sign a statement that he or she knows of the reporting requirement and will comply with it.
- B. Establishing procedures to ensure reporting even when employees, consultants, or agents who are not required to report child abuse under Penal Code 11166(a), gain knowledge of, or reasonably suspect that a child has been a victim of abuse or neglect.
- C. Contractor agrees that its employees, subcontractors, assignees, volunteers, and any other persons who provide services under this contract and who will have supervisory or disciplinary power over a minor or any person under his or her care (Penal 11105.3) will be fingerprinted in order to determine whether they have a criminal history which would compromise the safety of children with whom Contractor's employees, subcontractors, assignees or volunteers have contact. All fingerprinting services will be at the Commission's sole discretion and Contractor's sole expense.

5. **Smoke Free Premises:**

The Contractor shall prohibit smoking on its premises. "Premises" shall include all property owned, leased, or occupied by Contractor, including its offices and day care centers, if applicable. In addition, all Contractors shall include or incorporate by reference in all subcontracts the requirements of this provision; failure to do so shall constitute a material breach of this Agreement.

6. **Assignments and Subcontracts**

- A. Without the written consent of the Executive Director of the Commission or his/her designee, this Agreement is not assignable in whole or in part with the exception of subcontractors already approved as part of this Agreement. Any assignment by Contractor without the written consent of the Executive Director of the Commission or his/her designee violates this Agreement and shall automatically terminate this Agreement.
- B. All assignees, subcontractors, or consultants approved in writing by the Executive Director of the Commission or his/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.

7. **Termination of Agreement**

The Executive Director, after consultation with the Chair of the Commission, may at any time from execution of Agreement, terminate this Agreement, in whole or in part, for the convenience of the Commission, by giving written notice specifying the effective date and scope of such termination. Termination shall be effective on a date not less than thirty days from notice. In the event of termination, all finished or unfinished documents, data, studies, maps, photographs, reports, and materials (hereafter referred to as materials) prepared by Contractor under this Agreement shall become the property of the Commission and shall be promptly delivered to the Commission. In the event of termination, Contractor shall be paid for all work satisfactorily performed until termination, except where the contracting department determines the quality or quantity of the work performed is unacceptable. Such payment shall be that portion of the full payment, which is determined by comparing the work/services completed to the work/services required by the Agreement.

8. **Records**

- A. Contractor agrees to provide to the Commission, to any Federal or State department having monitoring or reviewing authority, to Commission'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 records relating to this Agreement in its possession of any third party performing work related to this Agreement for a period of three (3) years from the termination date of this Agreement, or until audit findings are resolved, whichever is greater.
- C. Contractor shall notify Commission staff of all instances and/or requests for data disclosure.

9. **Intellectual Property**

All products and concepts, however recorded, prepared or generated by the Contractor in the performance of this Agreement shall be the exclusive property of the Commission. The term "product" as used in the Agreement shall include, but will not be limited to, documentation, findings, design, report, form, evaluation, method of analysis, system, software developed, design documents and concepts related to the work under this Agreement. This Agreement shall preclude Contractor from using or marketing products developed or originated for the Commission hereunder unless and until the parties execute a marketing agreement. All products, inventions, discoveries and improvements developed in the performance of this Agreement while using Commission facilities, including hardware and software shall be the property of the Commission. It shall be presumed that any product, invention, discovery or improvement was developed using Commission facilities unless Contractor is able to show by documented proof that such invention, discovery or improvement was developed solely with Contractor's facilities. If such product, invention, discovery or improvement shall be determined to be the property of Contractor, Commission shall be granted a nonexclusive, irrevocable, royalty free license to use said invention, discovery or improvement.

The Contractor agrees to abide by the Commission policy and procedures relating to intellectual property. Such policy is incorporated by reference and attached hereto as Exhibit C.

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, ordinances, regulations, including but not limited to appropriate licensure, certification regulations, confidentiality requirements and applicable quality assurance regulations.

11. **Program Monitoring and Evaluation**

Contractor shall track achievement of program objectives and the process and outcome measures for this project as they are described in the scope of work, as amended pursuant to this Agreement. Contractor shall cooperate with any Evaluator hired by the Commission to aid in the evaluation process. Contractor shall collect client level data for each funded year and shall participate in a countywide and statewide evaluation of the effectiveness of Proposition 10 efforts, whether it occurs during or after the term of this contract. Contractor shall submit reports as requested by the Executive Director or the Evaluator, and comply with reports as required in the Program Handbook, which include the following:

- 1. A semi-annual and year-end progress report of each funded year.
- 2. A draft evaluation plan within 31 days of the effective date of this contract, thereby being due January 31, 2003, or as agreed upon by the Executive Director, after consultation with the Chair of the Commission.
- 3. A year-end evaluation report of each funded year.

12. **Alteration of Agreement**

This Agreement is entire and contains all the terms and conditions agreed upon by the parties. No alteration or variation shall be valid unless made in writing and signed by the parties hereto, or as permitted by the terms of this Agreement, and no oral understanding or agreement shall be binding on the parties hereto.

13. **Notices**

- 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, addressed:

- 1) In the case of Commission, to:  
 Kris Perry, Executive Director  
 Children & Families First Commission  
 1700 S. El Camino Real, Suite 405  
 San Mateo, CA 94402  
 Phone: (650) 372-9500
  
- 2) In the case of Contractor, to:  
 Mary Hansell, BSN, Cr. PH - Director  
 San Mateo County Health Services Agency  
 225 W. 37th Avenue  
 San Mateo, CA 94403  
 Phone (650) 573-2316

**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.

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

**COUNTY OF SAN MATEO**

**SAN MATEO COUNTY CHILDREN & FAMILIES FIRST COMMISSION**

~~Rose Jacobs Gibson, President, Board of Supervisors~~  
 Print Name and Title

*Margaret Taylor*  
 Chair

Signature

Date

1-21-03

Date

Budget Unit

94-6000532

Contractor's Tax ID Number

**ATTEST:**

\_\_\_\_\_  
 Clerk of Said Board

## EXHIBIT A

### PROJECT SERVICES

Pursuant to the Agreement for Services between The San Mateo County Children & Families First Commission and San Mateo County Health Services Agency, Division of Public Health (Prenatal to Three Initiative), entered onto on January 1, 2003, Contractor shall provide the following services as described more fully in Attachment A, attached hereto and incorporated by reference herein, over the term of this contract from January 1, 2003 to December 31, 2003.

Exhibit A and its attachments reflect the scope of work for the term of the contract January 1, 2003 to December 31, 2003.

Under this grant, Contractor will use service delivery improvement and systems change strategies to:

1. Increase access to Prenatal to Three Initiative services by:  
Providing two hundred (200) additional families with home visits
2. Enhancing mental health and social services to Prenatal to Three initiative services by:  
Expanding capacity by offering thirty (30) families home based mental health services  
Conducting outreach and case management for at least twenty-five (25) African American families in the northern cities of San Mateo County "North County"  
Providing social support and empowerment classes to five to ten (5-10) African-American women, and  
Providing training to at least (5) mental health professionals in treatment of pregnant and post-partum women, and  
assess and treat Prenatal to Three clients by the contracted psychiatrist

**EXHIBIT B**

**PAYMENTS**

Pursuant to the Agreement for Services between The San Mateo County Children & Families First Commission and San Mateo County Health Services Agency, Division of Public Health (Prenatal to Three Initiative) entered into on January 01, 2003, the Commission shall pay Contractor, as described more fully in Attachment B, attached hereto and incorporated by reference herein over the term of this contract from January 01, 2003 to December 31, 2003.

Exhibit B and its attachments reflect the budget for the term of the contract January 1, 2003 to December 31, 2003. It is understood that contractor may earn money from funds received under this contract. Any monies earned from investments or otherwise shall be expended on services provided under this contract. Provision for expenditure of this money shall be included in the budgets for year two.

1. The Commission shall pay Contractor based on a 60/40 formula whereby in the first year, 60% of the Maximum Amount of the annual award shall be released to the Contractor upon approval and execution of the contract. After a review of the Contractor's Semi-Annual Progress Report, 40% of the Maximum Amount of the annual award shall be released.

Guidelines for the progress reports will be provided by the Commission staff and shall include a descriptive narrative, tracking of the approved timeline and work plan (scope of work), and a detailed financial accounting of all grant funds spent in comparison with the approved budget.

2. Payment shall be conditioned on the performance of the services described in Exhibit A to the full satisfaction of the Executive Director, on behalf of the San Mateo County Children & Families First Commission.
3. The amount that the Commission shall be obligated to pay for services rendered under this Agreement shall not exceed \$520,483 for the contract term, January 1, 2003 – December 31, 2003.
4. Payment is contingent upon satisfactory performance, appropriate grant management, and timely reporting.
5. Contractor shall expend funds received, in accordance with the budget as described in Attachment B, attached hereto and incorporated by reference herein, or as approved later by the Executive Director, after consultation with the Chair of the Commission.

**San Mateo County Health Services Agency, Division of Public Health (Prenatal to Three Initiative)**

<b>Maximum Amount:</b>
<b>\$520,483</b>
<b>Funding: 60/40</b>
60% - \$312,290
40% - \$208,193

## EXHIBIT C

### INTELLECTUAL PROPERTY-PROTOCOL

The protocol provided below addresses how and when a person must gain permission to disseminate data, findings or products emerging from CFFC-funded projects or their evaluations.

#### **1. Categories of Materials**

The following tiers represent the general types or categories of dissemination and the CFFC's policy for each category.

- Tier 1** acknowledges that cleaned and reviewed data, and summaries of cleaned/reviewed data are commonly shared among individuals and/or organizations (collectively "person"). The CFFC encourages this practice and does not expect any advance notice, pre-approval or involvement.
- Tier 2** recognizes that data sets are commonly analyzed and findings are broadly shared through publication, teaching and other methods of dissemination. These activities are viewed as beneficial to the community and therefore the CFFC encourages them. However, prior to any publication of CFFC-funded and produced materials, such material shall be submitted to the CFFC for prior approval for input and to ensure inclusion of appropriate CFFC acknowledgment.
- Tier 3** acknowledges that in some instances, persons will develop analyses, materials or products for distribution and/or sale (e.g. software programs, CD Roms, brochures, manuals, curricula and books). Persons need to acknowledge that in such instances, the CFFC owns the rights to such analyses, materials or products. Consequently, no person shall sell or otherwise appropriate, any analyses, materials or products which are made possible, in whole or in part, by CFFC funded support, without the express prior approval of the CFFC. When presented with a request by a person for prior approval, the CFFC shall decide whether, and to what extent, such analyses, materials or products may be appropriated or sold, the determination of which shall include consideration of such issues such as profit sharing, on a case by case basis.

#### **2. Definitions and Process**

At present, CFFC contracts state that CFFC owns any products from CFFC-funded projects. The protocol provided below addresses how/when a person must gain permission to disseminate data, findings or products emerging from CFFC-funded projects or their evaluations.

##### **Tier 1- Cleaned/Reviewed Data and Summary of Findings**

**Definition:**

*This category generally includes data that are considered to be "in the public domain." This includes data from general surveys as well as specific surveys and other data collection methods utilized to identify the "results" of CFFC-funded efforts (e.g.: % of WIC clients who initiate breast feeding).*

This data has been cleaned and reviewed for clarity and reasonable validity. This does not include "draft" data or draft summaries which have not been-approved or-finalized by the originator.

**Criteria/Conditions for Release of Information:**

In the spirit of cooperating/coordinating with all persons who are working to improve the health and well being of children and families in the County, these data may be released without specific CFFC review and approval provided that appropriate measures are taken to ensure client confidentiality AND provided that the methods used to collect the data are reasonably valid and are available for review upon request.

##### **Tier 2- Analytic Reports for Public Dissemination, Publication and/or Teaching**

**Definition:**

This category includes reports that analyze cleaned data and their significance, which are to be used for public dissemination, publication, or teaching.

**Criteria/Conditions for Release of Information:**

Reports for public dissemination, publication and/or teaching must (1) acknowledge CFFC support for the intervention or evaluation effort; and (2) be submitted to CFFC prior to distribution/publication for approval, feedback and comments. This includes reports which analyze the status of population (results) and/or those which assess the effectiveness of funded interventions.

Client confidentiality must be maintained and methods of data collection utilized must be included or available upon request. Requests for comments/feedback shall be submitted to CFFC offices. The Executive Director will conduct a review and forward the materials and comments to the evaluation oversight committee for review and additional comments. The request shall then go to the full CFFC for comment and/or approval.

**Tier 3- Products with Sales or Profit-Producing Potential**

**Definition**

This category includes any analyses, materials or products wholly or partially created or produced with CFFC support which may be sold or otherwise appropriated. This may include, but is not limited to: manuals, brochures, software programs, CD Roms, curricula, and books.

**Process for Consideration and /or Approval of Product Sale:**

Any person with a CFFC-supported product for sale or for profit must submit a request to CFFC for approval for sale specifying the use of profits prior to its sale. Terms of approval of such requests will be considered on a case by case basis.

Requests shall be submitted to CFFC offices. The Executive Director will conduct a review and forward the materials and comments to the evaluation oversight committee for review and additional comments. The request shall then go to the full CFFC for comment and/or approval.



**FIRST FIVE  
YEAR 3 SCOPE OF WORK**

Program Objectives	Major Activities <i>(list for each objective)</i>	Activities Timeline <i>(beginning date- end date)</i>	Unduplicated Clients Served	Process Measures	Outcome Indicators
1. Increase the percentage of families on Medi-Cal offered home visits from 79% to 90%.	<ul style="list-style-type: none"> <li>a. Conduct Outreach to unserved families</li> <li>b. Assure registration in PTT of all families currently served by BIH and AFLP.</li> <li>c. Schedule home visits</li> <li>d. Examine performance data</li> </ul>	<ul style="list-style-type: none"> <li>9<sup>th</sup>-12<sup>th</sup> Quarters</li> <li>9<sup>th</sup>-12<sup>th</sup> Quarters</li> <li>9<sup>th</sup>-12<sup>th</sup> Quarters</li> <li>10<sup>th</sup> and 12<sup>th</sup> Quarters</li> </ul>	200 families in Year 3	<ul style="list-style-type: none"> <li>Number of PHNs serving PTT clients</li> <li>Number of families registered in PTT</li> </ul>	90 percent of families on Medi-cal will be offered home visits.
2. Increase the number of psychiatrists competent in the treatment of pregnant and post-partum women	<ul style="list-style-type: none"> <li>a. Maintain a .2 FTE Psychiatrist and Nurse Practitioner to provide services.</li> <li>b. Consultant Psychiatrist will treat women</li> <li>c. Continue providing initial assessment</li> <li>d. Continue to train other MII providers</li> <li>e. Train psychiatric residents to provide medication services to pregnant and post-partum women</li> </ul>	9 <sup>th</sup> -12 <sup>th</sup> Quarters	<ul style="list-style-type: none"> <li>A caseload of 40 clients in Year 3</li> <li>30 Providers (including Primary care MDs) will be given additional training &amp; consultation</li> </ul>	Number of consultations, case conferences and trainings.	Increase in number of psychiatrists that report competence in treatment of pregnant and post-partum women
3. Provide home-based mental health services to 30 additional Pre-To-Three clients	<ul style="list-style-type: none"> <li>a. Psych SW to provide mental health services</li> <li>b. Continue to identify clients in need of specialized services</li> <li>c. PSW continues to provide home-based therapy</li> <li>d. Clients will be seen by PSW an average of 2 times per month</li> </ul>	9 <sup>th</sup> -12 <sup>th</sup> Quarters	<ul style="list-style-type: none"> <li>20 clients in Year 1</li> <li>10 additional clients in Year 2; some clients identified in Year 1 will be case managed in Year 2 as well</li> <li>A caseload of 30 clients in Year 3</li> </ul>	Number of clients served by PSW	Increase the number of clients assessed and treated by Psychiatric Social Worker

**FIRST FIVE  
YEAR 3 SCOPE OF WORK**

Program Objectives	Major Activities <i>(list for each objective)</i>	Activities Timeline <i>(beginning date-end date)</i>	Unduplicated Clients Served	Process Measures	Outcome Indicators
4. Within one year of receiving home-based MH services, increase the % of children demonstrating appropriate development	<ul style="list-style-type: none"> <li>a. Continue to provide home-based mental health services from PSW</li> <li>b. Continue to assess development of children served by PTT mental health team through use of ASQ</li> <li>c. Children not showing appropriate development will be referred to GGRC.</li> </ul>	9 <sup>th</sup> -12 <sup>th</sup> Quarters	30 children in Year 3	Number of children with families receiving home-based MH services who are assessed for development	<p>Increase the percentage of children who demonstrate appropriate development within one year of family beginning MH services.</p> <p>Number of GGRC referred</p>
5. Increase by 10 percent the Medi-Cal families that place their babies on their backs or sides to sleep.	<ul style="list-style-type: none"> <li>a. Distribute multi-language written materials to Medi-Cal families</li> <li>c. Teach families about SIDS prevention during home visits and groups</li> <li>d. Use 1<sup>st</sup> PTT/CFFC parental survey to compare with data from PHNs.</li> </ul>	9 <sup>th</sup> -12 <sup>th</sup> Quarters	200 families in Year 3	Number of presentations to families	Increase by 10 percent the parents who place baby on back or side to sleep.
		9 <sup>th</sup> -12 <sup>th</sup> Quarters			
		9 <sup>th</sup> -12 <sup>th</sup> Quarters			

AGENCY NAME: Prenatal-To-Three Initiative

**FIRST FIVE  
YEAR 3 SCOPE OF WORK**

Program Objectives	Major Activities <i>(list for each objective)</i>	Activities Timeline <i>(beginning date-end date)</i>	Unduplicated Clients Served	Process Measures	Outcome Indicators
6. Increase breastfeeding among Medi-Cal delivered babies to 90%	a. Counsel women about the benefits of breastfeeding	9 <sup>th</sup> -12 <sup>th</sup> Quarters	150 families in Year 3	Number of pregnant and lactating women counseled about breastfeeding	90 percent of families will give breast milk to babies.
	b. Provide support to women experiencing problems breast feeding	9 <sup>th</sup> -12 <sup>th</sup> Quarters			
	e. Analyze data from PHNs.	9 <sup>th</sup> -12 <sup>th</sup> Quarters			
7. Provide on going outreach and case management services to 25 African-American families in North County annually	a. Conduct ongoing outreach to medical and community providers to identify potential families.	9 <sup>th</sup> -12 <sup>th</sup> Quarters	20 - 25 families annually, with some additions after attrition.	Frequency and number of agency and provider contacts	Increase number of families served by Black Infant Health.
	b. Conduct culturally competent outreach targeting AA families	9 <sup>th</sup> -12 <sup>th</sup> Quarters		Number of street and direct community contacts	
	c. Follow-up on outreach contacts and referrals of potential clients	9 <sup>th</sup> -12 <sup>th</sup> Quarters		Number of families contacted	
	d. Enroll and case manage clients up to 24 months following delivery	9 <sup>th</sup> -12 <sup>th</sup> Quarters		Number of families enrolled and tracked	
	e. Support the Pre-3 Initiative overall goals in SIDS, breastfeeding, and mental health referrals.	9 <sup>th</sup> -12 <sup>th</sup> Quarters		Number of clients referred and served as it relates to SIDS education, breastfeeding and mental health referrals.	

<p>8. Enroll 50% of new BIH clients in social support and empowerment classes.</p>	<p>a. Identify potential class participants  b. Conduct social support/empowerment classes in North County as new clients are enrolled.  c. Do pre- and post-tests</p>	<p>9<sup>th</sup>-12<sup>th</sup> Quarters</p>	<p>5 - 10 women per year, depending on new enrollments</p>	<p>Number of families contacted and enrolled from program data.   Class attendance records   Pre- and post-test scores</p>	<p>50% of new BIH clients will attend social support and empowerment classes.</p>
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**AGENCY NAME: Prenatal-To-Three Initiative -- FIRST FIVE YEAR 3 SCOPE OF WORK**

**YEAR 3 REAPPLICATION: BUDGET REQUEST FORM**  
(Jan. 1, 2003 - Dec. 31, 2003)

Agency Name: Pre-to-Three  
Amount of Request: \$ 520,483

<b>I. PERSONNEL</b>			<b>Amount</b>	<b>Leveraged</b>	<b>Total Program</b>
			<b>Requested</b>	<b>Amount</b>	<b>Budget</b>
<b>Position Title</b>	<b>Salary</b>	<b># FTEs</b>			
A. PTT Public Health Nurse	\$74,447	5.00	\$ 204,000	\$ 168,236	\$ 372,236
B. MH - Psych Social Worker	\$67,725	1.00	\$ 67,000	\$ 725	\$ 67,725
C. BIH - Case Manager	\$52,500	1.00	\$ 40,000	\$ 12,500	\$ 52,500
D. PTT - Medical Office Asst	\$34,860	1.00	\$ 15,000	\$ 19,860	\$ 34,860
Sub-total Benefitted Personnel			\$ 326,000	\$ 201,321	\$ 527,321
E. Benefits @ 33% (Positions A-E)			\$ 107,580	\$ 66,436	174,016
G. MH - Nurse Practitioner (extra help)	\$83,400	0.10	\$ 8,340	\$ -	\$ 8,340
<b>Sub-total</b>			<b>\$ 441,920</b>	<b>\$ 267,756</b>	<b>\$ 709,676</b>
<b>II. OPERATING EXPENSES</b>					
A. Rent and Utilities			\$ -	\$ 21,600	\$ 21,600
B. Telephone/ Communications			\$ -	\$ 12,000	\$ 12,000
C. Office Supplies and Materials			\$ -	\$ 1,800	\$ 1,800
D. Printing and copying			\$ -	\$ 1,000	\$ 1,000
E. Travel			\$ 4,900	\$ 4,900	\$ 9,800
F1. Sub-Contractor - FACES MFT			\$ 33,000	\$ -	\$ 33,000
F2. Sub- Contractor - Psychiatrist			\$ 27,660	\$ -	\$ 27,660
<b>Sub-total</b>			<b>\$ 65,560</b>	<b>\$ 41,300</b>	<b>\$ 106,860</b>
<b>III. CAPITAL EXPENDITURES</b>					
			\$ -	\$ -	\$ -
<b>IV. INDIRECT COSTS: 3% Personnel</b>					
			\$ 13,003	8,287	21,290
<b>V. TOTAL YR. 2 PROGRAM COSTS</b>					
			\$ 520,483	\$ 317,344	\$ 837,827

**Budget Narrative**  
**Prenatal to Three Initiative – Year 3**

**I. PERSONNEL**

- |    |   |           |
|----|---|-----------|
| A. | Public health nurses (5 FTE PHNs) will conduct outreach to prenatal care providers and delivery hospitals to identify Medi-Cal eligible families and enroll them in Pre-to-Three. The nurses will make assessments, refer families to specialty services and provide case management services.  | \$204,000 |
| B. | A psychiatric social worker (1.0 FTE PSW) will provide mental health services in the home. The PSW will serve at least 10 new Pre-to-Three families during the third project year and continue to work with families from Yrs. 1 and 2. The PSW will coordinate with the psychiatrist, nurse practitioner and FACES therapists (See sub-contractors below.) | \$67,000  |
| C. | The case manager (1.0 FTE) for Black Infant Health will case manage at least 25 families during the third year of the project. She will also enroll at least 10 families into <i>Social Support and Empowerment</i> classes during Year 3.  | \$40,000  |
| D. | A medical office assistant (1.0 FTE) will provide necessary clerical support to Pre-to-Three. The position provides part of the essential infrastructure to the direct services of the PHNs. She will also assist with data entry for the evaluation.   | \$15,000  |
| E. | The County's fringe benefit rate for positions A-D above is 33% and includes the following: FICA (7.2%), health (8.5%), retirement (12.3%, dental (1.1%) and Unemployment/Worker's Comp (3.9%).   | \$107,580 |
| F. | Mental health will hire an extra help nurse practitioner (.10 FTE) to work with the psychiatrist and provide complementary medical treatment to Pre-to-Three clients. The Nurse Practitioner who was working with Pre-to-Three resigned mid-way through Year 2.   | \$8,340   |

**II. OPERATING EXPENSES**

Almost all of the operating expenses related to the grant activities will be paid for in-kind by the County. This budgeting is not ideal for infrastructure building in Pre-to-Three and will not be able to be continued indefinitely. This budgeting was done to honor the original intent to maximize new service provision with the CFFC funding. The only indirect costs included in the second year budget request follow:

- |    |  |          |
|----|--|----------|
| E  | Travel costs are split between the CFFC and in-kind match. Travel is estimated as half of: \$1,000 per year per case manager x 7 case managers = \$3,500. Added to this is half the travel for clients newly seen due to grant funding = \$1,400.  | \$4,900  |
| F1 | County Mental Health will continue to contract with FACES to provide therapy services to uninsured clients.  | \$33,000 |
| F2 | The Department of Mental Health contracts for the services of a psychiatrist to serve Pre-to-Three families with mental health diagnoses that indicate the need for such medical services. The psychiatrist will continue to work at least .15 FTE to assess and treat Pre-to-Three clients. In addition, she will train other psychiatrists | \$27,660 |

in "Best Practices" with the perinatal population.

**III. CAPITAL EXPENDITURES**

None.

**IV. INDIRECT COSTS**

These are requested at a 3% of personnel rate to cover non-specified indirect costs, such as a portion of the cost of managing the project. \$13,003

**V. TOTAL YR. 3 PROGRAM COSTS**

Sum of all costs in each column. The total required from the Commission for Yr 3 \$520,483

**IN-KIND MATCH and LEVERAGE**

Almost half of the cost of the PHN positions and the Medial Office Assistant positions (45%) will be drawn from billing to Medi-Cal. The Mental Health and BIH positions obtain leveraged dollars from either local or State government sources.

The direct service and office staff for the CFFC project activities are housed in East Palo Alto San Mateo and South San Francisco in County-owned buildings. Rent to house the 9 positions supported by this grant is estimated at \$1.00 per square foot (County-owned buildings used at present) per month multiplied by 12 months multiplied by 200 feet per person. \$21,600

Telephone charges \$12,000

Office supplies \$1,800

Printing and copying charges \$1,000

Travel is split between the Commission grant and County funds.