

**AGREEMENT BETWEEN
FIRST 5 SAN MATEO COUNTY
AND
SAN MATEO COUNTY HEALTH DEPARTMENT, DIVISION OF PUBLIC HEALTH
(Prenatal to Three Initiative)**

THIS AGREEMENT is entered into this July 1, 2006, by and between First 5 San Mateo County, hereinafter called "Commission," and San Mateo County Health Department, 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, Exhibit C, Non Discrimination declaration, and Exhibit D, 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: referring families to Pre to 3, increasing early identification of children's health and developmental problems, increasing rates of developmentally appropriate interactions with children and strengthen parenting skills, increasing parent skills and confidence through parenting groups and classes, decreasing symptoms in pregnant women and breastfeeding mothers through psychiatric assessment and medication management, reaching underserved populations, and improving effectiveness of Pre-3 services through evaluation. 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 first year of the contract July 1, 2006 to June 30, 2009. Contractor shall submit an updated scope of work and budget for each succeeding year by June 15 and receive approval from the Executive Director of the Commission or his/her designee, after consultation with the Chair of the Commission, prior to commencing the second and third year provided, however, that there shall be no change in the maximum amount payable under this Agreement. It is anticipated that the scope of work and budget will be amended, with approval of the Executive Director of the Commission or his/her designee, upon review of the prior year's progress reports, however there shall be no change in the maximum amount payable under this Agreement.

2. **Contract Term**

The term of this Agreement shall be from July 1, 2006 to June 30, 2009, subject to the termination provisions noted in paragraph 9, and subject further to the agreement provided for in paragraphs 3.C and 13, that there are reports due followed by final payment and evaluation required which occurs after June 30, 2009. Contractor further agrees that the requirements of this Agreement pertaining to records in paragraph 10, and intellectual property in paragraph 11, including Exhibit D, 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 THREE MILLION DOLLARS (\$3,000,000) for the term as follows: Year 1 - \$1,000,000 (July 1, 2006 – June 30, 2007); Year 2 - \$1,000,000 (July 1, 2007 – June 30, 2008); Year 3 - \$1,000,000 (July 1, 2008 – June 30, 2009).

B. **Rate of Payment**. The rate of payment shall be as specified in Exhibit B. The Commission reserves the right to withhold payment if the Commission determines that the quantity or quality of the work performed as

described in Exhibit A is unacceptable. 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 6th and 12th month of each funded year 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 January 31, 2007. 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.
- 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 First 5 San Mateo County, 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. **Relationship of Parties**

Contractor agrees and understands that the work/services performed under this Agreement are performed as an Independent Contractor and not as an employee of the Commission or the County of San Mateo and that Contractor acquires none of the rights, privileges, powers or advantages of Commission or County employees.

5. **Non-Discrimination**

Contractor shall comply with the non-discrimination requirements described below:

A. **Section 504 of the Rehabilitation Act of 1973**

1. Pursuant to Section 504 (Public Law 93-112), the Contractor agrees that no otherwise qualified disabled individual shall, solely by reason of a disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination in the performance of this Agreement.
2. Compliance of Section 504 of the Rehabilitation Act of 1973, as amended, requires that all benefits, aids and services are made available to disabled persons on an equivalent basis with those received by non-disabled persons. Contractor shall agree to be in compliance with Section 504 requirements by (1) signing the Letter of Assurance, attached and incorporated herein as Exhibit C, or (2) by developing a plan for compliance to be submitted to the Section 504 Coordinator, Department of Health Services, as soon as possible, but not later than by the end of the current Fiscal Year.

- B. **Non-Discrimination - General.** No person shall, on the grounds of age (over 40), ancestry, creed, color, disability, marital status, medical conditions, national origin, political or religious affiliation, race, sex, sexual orientation or any non-job-related criteria be excluded from participation in, be denied the benefits, or be subjected to discrimination under this Agreement.

Violation of the non-discrimination provisions of this Agreement shall be considered a breach of this Agreement and subject the Contractor to penalties, to be determined by the Executive Director after consultation with the Chair of the Commission, including but not limited to: i) termination of this Agreement; ii) disqualification of the Contractor from bidding on or being awarded a Commission or County of San Mateo contract for a period of up to 3 years; iii) liquidated damages of \$2,500 per violation; iv) imposition of other appropriate contractual and civil remedies and sanctions, as determined by the Executive Director, on behalf of the Commission.

To effectuate the provisions of this paragraph, the Executive Director 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 Contract between Contractor and the Commission or the County of San Mateo. Contractor shall report to the Executive Director 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 30 days of such filing, provided that within such 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 the Commission with a copy of its response to the Complaint when filed.

- C. **Non-Discrimination - Employment.** Contractor shall ensure equal employment opportunity based on objective standards of recruitment, selection, promotion, classification, compensation, performance evaluations, and management relations, for all employees under this Agreement. Contractor's equal employment opportunity policies shall be made available to the Commission upon request.
- D. **Equal Benefits.** 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.

6. **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 Section 11166(a) but who will be alone with children and/or who have supervisory or disciplinary control over children, gain knowledge of, or reasonably suspect that a child has been a victim of abuse or neglect.
- C. Establishing procedures to ensure fingerprinting, at the Contractor's sole expense, for all employees, subcontractors, assignees, volunteers, and any other persons who provide services under this contract who will have supervisory or disciplinary power over a minor or any person under his or her care (Penal Code Section 11105.3) 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.

7. **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.

8. **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.

9. **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, with or without cause upon 30 days written notice specifying the effective date of such termination. 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. 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. Such payment shall be that portion of the full payment, which is determined by comparing the work/services completed satisfactorily to the work/services required by the Agreement.

10. **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.

11. **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 product, 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 product, 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 D.

12. **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.

13. **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 attached pursuant to this Agreement. Contractor shall cooperate with the staff of 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 staff of the Commission, and comply with reports as required in the Program Handbook, which include the following:

- 1. A semi-annual and year-end progress report due each funded year.
- 2. A draft evaluation plan within 31 days of the effective date of this contract, thereby being due July 31, 2006, or as agreed upon by the Evaluation Manager, after consultation with the Executive Director.
- 3. A year-end evaluation report of each funded year, or as agreed upon by the Evaluation Manager, after consultation with the Executive Director.

14. **Acknowledgement of First 5 San Mateo County (F5SMC) Funding**

Contractor shall acknowledge being a recipient of F5SMC funding in statements or printed materials appropriate to the purpose of their grant. Contractor shall: 1) prominently display any appropriate acknowledgement provided by F5SMC and (2) place the F5SMC logo and/or the following phrase, "Funding provided by First 5 San Mateo County," in all public education and outreach materials and media communication regarding projects funded with Proposition 10 funding.

15. **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.

16. **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:
Tammy Moss, Executive Director
First 5 San Mateo County
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, Dr.PH - Director
San Mateo County Health Department, Prenatal to Three Initiative
225 W. 37th Avenue
San Mateo, CA 94403
Phone (650) 573-2316

Unless First 5 San Mateo County is informed in writing, of any change as to the name and address for notices.

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

FIRST 5 SAN MATEO COUNTY

Print Name and Title

Chair

Signature

Date

19540/6263

Date

Budget Unit

94-6000532

Contractor's Tax ID Number

EXHIBIT A

San Mateo County Health Department, Division of Public Health (Prenatal to Three Initiative)

PROJECT SERVICES

Pursuant to the Agreement for Services between First 5 San Mateo County and San Mateo County Health Services Agency, Division of Public Health (Prenatal to Three Initiative), entered into on July 1, 2006, 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 July 1, 2006 to June 30, 2009.

Exhibit A and its attachments reflect the scope of work for the first year of the contract July 1, 2006 to June 30, 2007. It is understood and agreed that Contractor will submit an updated scope of work for each succeeding year by June 15, and receive approval from the Executive Director of the Commission or his/her designee, after consultation with the Chair of the Commission, prior to commencing the second and third year provided, however, that there shall be no change in the maximum amount payable under this Agreement. It is anticipated that the scope of work will be amended, with approval from the Executive Director of the Commission or his/her designee, upon review of the prior year's progress reports.

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

1. Refer families to Pre-3 (approximately 2,500 families annually referred to central registry):
 - Receive referrals from providers of families in need of services
 - Register clients with pre-3 or refer clients to BIH, AFLP, or Field Nursing
 - Maintain linkages between Pre-3 staff and other county services
2. Increase early identification of children's health and developmental problems including:
Public Health Nurses (PHNs) will screen Medi-Cal eligible families (700 unduplicated families annually) in home-based assessments to:
 - Assess environmental, physical, psychological, and social risk factors
 - Support breastfeeding initiation and continuation
 - Reinforce back sleeping as SIDS prevention
3. Increase rates of developmentally appropriate interactions with children and strengthen parenting skills (approximately 670 unduplicated families annually) through:
 - Home visits with families beyond assessment (more than three visits) to support positive parenting using *Touchpoints* principles
 - Link families to necessary resources
 - Provide anticipatory guidance, parent education, and support
 - Provide treatment readiness and transition services to parents with untreated substance abuse
 - Facilitate re-entry to community following substance abuse treatment
 - Co-case manager families with HSA and other County and community-based agencies
 - Provide clinic and home-based mental health assessment and treatment to parents and children; decrease the negative impact of psychiatric symptoms on parenting.
 - Offer mental health therapy groups to high-risk families, including those with dual diagnosis
4. Increase parent skills and confidence through parenting groups and classes (approximately 280 parents):
 - Facilitate 12-session parenting classes using the Strengthening Multicultural Families and Communities curriculum
 - Facilitate *Touchpoints* parent support groups around the County, building alliances between parents and providers around key points in the development of young children.
5. Reach underserved populations (approximately 25 African American families annually):
 - Provide outreach and case management to African American families in North County, increasing utilization of services, screening infants for developmental delays, early identification of health and mental health problems
6. Decrease symptoms in pregnant women and breastfeeding mothers through psychiatric assessment and medication management (approximately 40 pregnant women and breastfeeding mothers annually):
 - Provide psychiatric medication assessment and management

- Offer continuing consultation and education to providers
7. Improve effectiveness of Pre-3 services through evaluation:
 - Conduct ongoing evaluation of F5SMC SOW activities
 - Continue evaluation of Partners for Safe and Healthy Children
 8. Ensure general public is aware of the benefit of Proposition 10 by keeping the public informed of how and where funds are invested in San Mateo County
 9. To the extent possible, integrate services with other county-wide projects and programs to increase coordination and decrease service duplication.

**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

Lead Agency Name: San Mateo County Health Department Prenatal to Three Initiative (Pre-3)

Measurable Objective: Objective 1: Families will be referred to Pre-3

| Total Unduplicated clients served under this objective: Children 0-5: <input type="checkbox"/> Families of 0-5s: X Providers of 0-5s: X Other: <input type="checkbox"/> Describe: _____ Describe: <u>2,500 families will be referred to the central registry</u> Describe: <u>San Mateo Medical Center</u> Describe: _____ | | | |
|--|---|--|---------------------------------------|
| Major activities and timelines | Staff or agency responsible | Documentation/ Process Measures | Expected measurable outcomes/ results |
| a. Receive referrals from providers of families in need of services. b. Register clients with Pre-3 or refer clients to BIH, AFLP, and Field Nursing. Collect data on clients. c. Continue liaison with future birthing unit at San Mateo Medical Center. d. Maintain linkages between Pre-3 staff and other County program services. Execute MOUs with Child Health and Disability Program and Health Plan of San Mateo to formalize process for referrals to Pre-3. Conduct outreach through standing committees and meetings (see attachment). | Administrative staff Administrative staff Senior Public Health Nurses PHNs, Community Workers, Pre-3 administration, Evaluator | Referral form (IAR) Registration database Meeting notes and IARs MOUs | |

Attachment A: Scope of Work

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| e. Review progress on referrals received by quarter. | Evaluator | Registration database Referrals will be processed within two days Pre-to-Three will receive referrals of 85% of Medi-Cal deliveries | |
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**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

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|------------------------------|---|
| Lead Agency Name: | San Mateo County Health Department Prenatal to Three Initiative |
| Measurable Objective: | Objective 2: Screen Medi-Cal eligible families to identify risk for child health and developmental problems |

| Total Unduplicated clients served under this objective: <div style="display: flex; justify-content: space-between;"> <div> Children 0-5: X Describe: _____ </div> <div> Families of 0-5s: X Describe: 700 unduplicated families (1,500 home visits) </div> <div> Providers of 0-5s: <input type="checkbox"/> Describe: _____ </div> <div> Other: <input type="checkbox"/> Describe: _____ </div> </div> | | | |
|--|-----------------------------|--|---------------------------------------|
| Major activities and timelines | Staff or agency responsible | Documentation/ Process Measures | Expected measurable outcomes/ results |
| Provide home-based assessment for Medi-Cal families: <ul style="list-style-type: none"> • Assess environmental, physical, psychological, and social risk factors in one to three visits; • Support breastfeeding initiation and continuation; • Introduce early literacy concepts; • Reinforce back and side sleeping as SIDS prevention; and • Provide referrals to basic need, legal, housing, and other supports. | PHNs | Charting protocol, Individual Service Plan | |

**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

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| Lead Agency Name: | San Mateo County Health Department Prenatal to Three Initiative |
| Measurable Objective: | Objective 3a: Increase rates of developmentally appropriate interactions with children and strengthen parenting skills |

| Total Unduplicated clients served under this objective: Children 0-5: <input type="checkbox"/> Families of 0-5s: X Other: <input type="checkbox"/> Describe: _____ Describe: _____ Describe: _____ | | | |
|---|-----------------------------|---|--|
| Major activities and timelines | Staff or agency responsible | Documentation/ Process Measures | Expected measurable outcomes/ results |
| Visit families in the home beyond assessment (more than three visits) to support positive parenting using <i>Touchpoints</i> principles and to provide primary prevention: <ul style="list-style-type: none"> • Link families to necessary resources, including substance abuse treatment, domestic violence services, housing support, literacy and library services, and mental health services; • Provide anticipatory guidance, parent education, and support; and • Distribute library applications and offer Raising a Reader. | PHNs, Community Workers | Charting protocol, Individual Service Plan, Outcomes Form, FIA, ASQ 400 library applications distributed 40 families use Raising a Reader 90% of children within age range will be assessed for development using the ASQ 85% of mothers screened for postpartum depression | Achieve breastfeeding initiation rate of 92% (rate will be the same or higher than county general population rate) Maintain rates of back or sides sleeping at 93% (rate will be the same or higher than county general population rate) Increase parent function and improve parent-child interaction by 1.8 points on the Parent Function and Interaction Assessment Instrument (FIA) between birth and six to ten weeks after birth |

**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

Lead Agency Name: San Mateo County Health Department Prenatal to Three Initiative

Measurable Objective: Objective 3b: Increase rates of developmentally appropriate interactions with children and strengthen parenting skills

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| Total Unduplicated clients served under this objective: Children 0-5: <input type="checkbox"/> Families of 0-5s: X Providers of 0-5s: <input type="checkbox"/> Other: <input type="checkbox"/> Describe: _____ Describe: _____ Describe: _____ | | | | Expected measurable outcomes/ results See outcomes/results for Objective 3a Achieve a statistically significant average positive trend as shown in an outcome evaluation instrument (to be determined/developed) |
| Major activities and timelines Provide treatment readiness and transition services to parents with untreated substance abuse: <ul style="list-style-type: none"> • Refer parents to substance abuse treatment; • Facilitate re-entry to community following treatment; • Co-case manage families with Human Services Agency, Children and Family Services and other County and community-based agencies; • Provide parenting education; • Assess children for developmental delays; • Refer parents to Pre-3 parenting classes, <i>Touchpoints</i> groups, mental health groups; and • Provide referrals to community resources. | Staff or agency responsible Behavioral Health Alcohol and Drug Team Community Worker | Documentation/ Process Measures See documentation/ process measures for Objective 3a Outcome evaluation instrument (TBD) | Expected measurable outcomes/ results See outcomes/results for Objective 3a Achieve a statistically significant average positive trend as shown in an outcome evaluation instrument (to be determined/developed) | |

**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

Lead Agency Name: San Mateo County Health Department Prenatal to Three Initiative

Measurable Objective: Objective 3c: Increase rates of developmentally appropriate interactions with children and strengthen parenting skills

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| Total Unduplicated clients served under this objective: | | | |
| Children 0-5: X | Families of 0-5s: X | Providers of 0-5s: <input type="checkbox"/> | Other: <input type="checkbox"/> |
| Describe: _____ Describe: 60 families (continuing caseload, First 5-funded staff, Behavioral Health Team Mental Health staff will provide 1,000 home visits and 2,500 office visits (entire team)) Describe: _____ Describe: _____ | | | |
| Major activities and timelines | Staff or agency responsible | Documentation/ Process Measures | Expected measurable outcomes/ results |
| Provide clinic- and home-based mental health assessment and treatment to parents and children: <ul style="list-style-type: none"> Promote positive parent-child interaction; and Decrease the negative impact of psychiatric symptoms on parenting. | Three Marriage and Family Therapists/ Psychiatric Social Workers | Mental health visit documentation, LOCUS, ASQ | See process/outcome measures above Decrease in level of care determination as measured by the LOCUS (recommended care is less restrictive or urgent) |

**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

Lead Agency Name: San Mateo County Health Department Prenatal to Three Initiative

Measurable Objective: Objective 3d: Increase rates of developmentally appropriate interactions with children and strengthen parenting skills

| Total Unduplicated clients served under this objective: Children 0-5: X Families of 0-5s: X Providers of 0-5s: <input type="checkbox"/> Other: <input type="checkbox"/> Describe: _____ Describe: 42 parent participants Describe: _____ Describe: _____ | | | |
|--|---|---|--|
| Major activities and timelines | Staff or agency responsible | Documentation/ Process Measures | Expected measurable outcomes/ results |
| Offer mental health therapy groups to high risk-families, including those with dual diagnosis. The groups teach and support interactions fostering positive brain development (each group consists of eight to ten sessions). Groups may include: <ul style="list-style-type: none"> • Dialectical Behavioral Therapy • Parent-child interaction • Medication management • Matrix Model (parents with methamphetamine abuse) | Marriage and Family Therapists, Psychiatric Social Workers, and Community Workers | Attendance forms, group registration forms, Beck Depression and Anxiety Inventories, ASQ 80% of parents and infants attend at least three group sessions 100% of families attending at least five group sessions assessed using ASQ 95% of children suspected for developmental delays referred to school or GGRC (some will have already been referred) | Achieve a statistically significant average decrease in depressive symptoms by 8.7 points on Beck Depression Inventory and a statistically significant average decrease in anxiety symptoms by 7.0 points on Beck Anxiety Inventory between the first and last group |

**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

Lead Agency Name: San Mateo County Health Department Prenatal to Three Initiative

Measurable Objective: Objective 4a: Increase parent skills and confidence through parenting groups and classes

| Total Unduplicated clients served under this objective: Children 0-5: <input type="checkbox"/> Families of 0-5s: X Other: <input type="checkbox"/> Describe: _____ Describe: 80 parents of children 0-5 Describe: _____ Describe: _____ | | | |
|--|--|--|---|
| Major activities and timelines | Staff or agency responsible | Documentation/ Process Measures | Expected measurable outcomes/ results |
| Facilitate six 12-session parenting classes using the Strengthening Multicultural Families and Communities curriculum. Modules include: <ul style="list-style-type: none"> • Rites of passage • Consequences and behavior • Traditions and customs • The impact of family violence • Managing anger • Community connections • Emotions and incentives • Family rule discussions • Managing conflict | Parent Education Coordinator, Parenting Class Facilitators | Class registration forms, Parenting Sense of Competence Scale, incentive log | Achieve a statistically significant average increase of 7.4 points in parent confidence and satisfaction between the first and last class as measured by the Parent Sense of Confidence Scale |

**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

Lead Agency Name: San Mateo County Health Department Prenatal to Three Initiative

Measurable Objective: Objective 4b: Increase parent skills and confidence through parenting groups and classes

| Total Unduplicated clients served under this objective: Children 0-5: X Families of 0-5s: X Providers of 0-5s: <input type="checkbox"/> Other: <input type="checkbox"/> Describe: 200 children ages 0-5 Describe: 200 parents Describe: _____ Describe: _____ | | | |
|---|-----------------------------|--|--|
| Major activities and timelines | Staff or agency responsible | Documentation/ Process Measures | Expected measurable outcomes/ results |
| Facilitate seven <i>Touchpoints</i> parent support groups around the County (hour-long drop-in groups held weekly on an ongoing basis). The model, developed by Dr. T. Berry Brazelton, aims to build alliances between parents and providers around key points in the development of young children. "Touchpoints" are predictable periods in a child's development that can disrupt family relations, but can also provide an opportunity for practitioners to connect with parents. Touchpoints groups demonstrate positive interactions parents can have with their children, including singing, playing, and reading. These groups also involve development of support networks among parents and increasing parent access to community resources. | Touchpoints coordinators | Attendance log. Touchpoints survey (May/November), incentive log 55% of parents will attend three or more sessions, 35% will attend six or more sessions | Achieve high satisfaction levels with groups as measured by a survey <ul style="list-style-type: none"> At least 87% of 100 parents [50% of the total number of parents served in the year] say the group is "very important" to them for support; At least 84% say they learned "a lot" from the group; and At least 86% say they have "a lot" more confidence as a parent because of the group) |

**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

Lead Agency Name: San Mateo County Health Department Prenatal to Three Initiative

Measurable Objective: Objective 5a: Reach underserved populations

| | | | |
|---|--|--|--|
| Total Unduplicated clients served under this objective: Children 0-5: <input type="checkbox"/> Families of 0-5s: X Providers of 0-5s: <input type="checkbox"/> Other: <input type="checkbox"/> Describe: _____ Describe: _____ Describe: _____ Describe: _____ Describe: _____ Describe: _____ | | | |
| Major activities and timelines Provide outreach and case management to African American families in North County: <ul style="list-style-type: none"> • Increase community linkages and utilization of services; • Screen infants for developmental delays; and • Provide early identification of health and mental health problems. Black Infant Health aims to decrease the rate of low birthweight and to reduce the rate of infant mortality among African American babies. | Staff or agency responsible BIH Case Manager | Documentation/ Process Measures BIH data book, Outcome Form, FIA, ASQ 90% of children aged four months to five years will be assessed for development using ASQ | Expected measurable outcomes/ results Achieve breastfeeding initiation rate of at least 74% (rate will be the same or higher than general county population rate for African Americans) Maintain 97% rate of back or side sleeping (rate will be higher than general county population rate) Achieve a statistically significant increase in the average rating of parent function and parent-child interaction between birth and six to ten weeks after birth (the exact number of points of increase has yet to be determined because of a low number of baseline assessments to date) |

**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

Lead Agency Name: San Mateo County Health Department Prenatal to Three Initiative

Measurable Objective: Objective 6: Decrease symptoms in pregnant women and breastfeeding mothers through psychiatric assessment and medication management

| Total Unduplicated clients served under this objective: Children 0-5: <input type="checkbox"/> Families of 0-5s: X Other: <input type="checkbox"/> Describe: _____ Describe: <u>40 pregnant women and breastfeeding mothers (continuing caseload)</u> Describe: <u>30 consultations</u> Describe: _____ | | | |
|--|-----------------------------|---------------------------------|---------------------------------------|
| Major activities and timelines | Staff or agency responsible | Documentation/ Process Measures | Expected measurable outcomes/ results |
| a. Provide psychiatric medication assessment and management. Stabilize on psychiatric medication regime. After birth or upon completion of breastfeeding, transition clients to County Adult Mental Health Services or community providers for continuing medication management. | Psychiatrist | Progress notes | |
| b. Offer continuing consultation and education to community providers, psychiatric residents, and staff psychiatrists | Psychiatrist | Consultation log | |

**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

Lead Agency Name: San Mateo County Health Department Prenatal to Three Initiative

Measurable Objective: Objective 7: Improve effectiveness of Pre-3 services through evaluation

Total Unduplicated clients served under this objective:

Children 0-5: ☐

Families of 0-5s: ☐

Providers of 0-5s: ☐

Other: X

Describe: _____

Describe: _____

Describe: _____

Describe: Pre-3 administration

| Major activities and timelines | Staff or agency responsible | Documentation/ Process Measures | Expected measurable outcomes/ results |
|---|---|---|---|
| <p>a. Conduct ongoing evaluation of all First 5 Scope of Work activities</p> <p>b. Continue evaluation of Partners for Safe and Healthy Children (PSHC, mental health and nursing assessment and treatment, alcohol and drug case management for families with open or voluntary cases in child welfare)</p> <p>c. Revise FIA form, document development of instrument</p> <p>d. Provide quarterly evaluation data to program supervisors</p> | <p>Evaluator</p> <p>Evaluator</p> <p>Evaluator</p> <p>Evaluator</p> | <p>Outcome Form, FIA</p> <p>PSHC database; PSHC data collection forms</p> <p>Revised FIA form, documentation</p> <p>TCM, Outcomes, and FIA databases; workload charts, program statistics</p> | <p>Produce evaluative data for First 5 reports (Evaluation Report, Mid-Year and Year-End Reports)</p> <p>Compile periodic evaluation reports for PSHC Implementation and Oversight Committees</p> |

Attachment A: Scope of Work

| | | | |
|---|------------------|--|--|
| <p>e. Hold Data Committee of staff to facilitate program improvements, to interpret findings, and to gain staff oversight of evaluation process</p> | <p>Evaluator</p> | <p>Data Committee meetings, survey</p> | <p>Achieve high staff and supervisor ratings of evaluation:</p> <ul style="list-style-type: none"> • Majority of staff will say the evaluation is "helpful" or "very helpful" to their work; • Majority of staff will say the evaluation is "beneficial" or "very beneficial" to Pre-3; and • Majority of staff will say that the evaluation "improves" or "greatly improves" the effectiveness of Pre-3. |
|---|------------------|--|--|

**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

Lead Agency Name: San Mateo County Health Department Prenatal to Three Initiative

Measurable Objective: Objective 8: Ensure the general public is aware of the benefit of Proposition 10) tax dollars in the community by keeping the public informed of how and where funds are invested in San Mateo County

| Total Unduplicated clients served under this objective: | | | |
|---|--|---|--|
| Children 0-5: <input type="checkbox"/> | Families of 0-5s: <input type="checkbox"/> | Providers of 0-5s: <input type="checkbox"/> | Other: X |
| Describe: _____ | | Describe: <u>Pre-3 administration</u> | |
| Major activities and timelines | Staff or agency responsible | Documentation/ Process Measures | Expected measurable outcomes/ results |
| <p>a. Place acknowledgement of First 5 funding in a prominent area within Pre-3's physical facilities</p> <p>b. Recognize First 5 by placing the First 5 logo and/or the phrase "funding provided by First 5 San Mateo County" in all public education and outreach materials and media communication regarding projects funded with Proposition 10 funding</p> | | <p>Date acknowledgement is placed in agency</p> <p>Provide materials displaying First 5 San Mateo County logo and/or the indicated phrase to First 5 Program Specialist</p> | |

**First 5 San Mateo County
Scope of Work Form for Implementation Grants 2006-2007**

Lead Agency Name: San Mateo County Health Department Prenatal to Three Initiative

Measurable Objective: Objective 9: To the extent possible, integrate services with other county-wide projects and programs to increase coordination and decrease service duplication.

| Total Unduplicated clients served under this objective: Children 0-5: <input type="checkbox"/> Families of 0-5s: <input type="checkbox"/> Providers of 0-5s: <input type="checkbox"/> Other: X Describe: _____ Describe: _____ Describe: <u>Pre-3 administration</u> | | | |
|--|---|---|---------------------------------------|
| Major activities and timelines | Staff or agency responsible | Documentation/ Process Measures | Expected measurable outcomes/ results |
| a. Initiate exploration of "Service Coordinator" staff role to coordinate the involvement of multiple agencies in providing service to high-risk families with the goal of avoiding duplication of services (outlined in Pre-3's Strategic Plan): <ul style="list-style-type: none"> • Work with community agencies to define the roles and responsibilities of a Service Coordinator; • Explore how agencies can share information (e.g., consents to meet conditions of confidentiality laws); • Investigate how data systems can be accessed to find out which agencies are serving families; and • Establish protocols and practices for the role. <i>Note: Delivery of this activity is dependent on the outcome of a pending non-First 5 grant proposal. If funding is not secured, the activity will not be accomplished.</i> | Service Coordinator (pending outside funding) | Roles and responsibilities of Service Coordinator staff, consents to share information among agencies | |
| b. Initiate discussions with the School Readiness Initiative (SRI) regarding coordination and reduction of potential service duplication. | Grant Coordinator and Evaluator, SRI staff, First 5 staff | Meetings of Pre-3, SRI, and First 5; revised Memorandum of Understanding | |
| c. Participate in and plan for the sustainability of the Pre-3 Initiative Committee (a meeting of County and community agencies concerned about parents and children ages 0-5 with the goal of coordinating services, sharing information, and conducting joint planning). | Pre-3 administration | Initiative Committee meetings | |

EXHIBIT B

PAYMENTS

Pursuant to the Agreement for Services between First 5 San Mateo County and San Mateo County Health Services Agency, Division of Public Health (Prenatal to Three Initiative) entered into on July 1, 2006, 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 July 1, 2006 to June 30, 2009.

Exhibit B and its attachments reflect the budget for the first year of the contract July 1, 2006 to June 30, 2007. It is understood and agreed that Contractor will submit an updated budget for the succeeding year by June 15, 2006, and receive approval from the Executive Director of the Commission or his/her designee, after consultation with the Chair of the Commission, prior to commencing the second and third years provided, however, that there shall be no change in the maximum amount payable under this Agreement. It is anticipated that the budget will be amended, with approval of the Executive Director of the Commission or his/her designee, upon review of the prior year's progress reports.

1. Commission shall pay Contractor 25% of the Maximum Annual Amount for Year 1 upon approval and execution. Thereafter, the Commission shall reimburse Contractor for services provided whereby the Contractor shall submit quarterly invoices to the Commission. After review and approval of the Contractor's quarterly invoice, Contractor shall be reimbursed for services provided. The 25% advance will be reconciled against the actual quarterly project expenses and deducted from the final request for reimbursement.

Under no circumstances, shall total payments from the Commission to the Contractor exceed the Maximum Amount of the Agreement.

Guidelines for progress reports, program expenditure reporting, and reimbursement for services 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. The Commission reserves the right to withhold payment if the Commission determines that the quantity or quality of the work performed as described in Exhibit A is unacceptable. 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.
3. The amount that the Commission shall be obligated to pay for services rendered under this Agreement shall not exceed THREE MILLION DOLLARS (\$3,000,000) for the contract term, July 1, 2006 – June 30, 2009.
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.

| Year 1 | Year 2 | Year 3 |
|--|------------------------------|------------------------------|
| Maximum Annual Award: | Maximum Annual Award: | Maximum Annual Award: |
| \$1,000,000 | \$1,000,000 | \$1,000,000 |
| Funding Schedule | | |
| 25% of year 1 budget - \$250,000 - paid upon execution of contract | | |
| Quarterly reimbursements paid upon receipt and approval of quarterly invoices. | | |

First 5 San Mateo County BUDGET REQUEST FORM

Complete this form to show the budget for the **entire** project for the fiscal year in question. If there are subcontractor or collaborative agency budget involved, please complete an additional form for each and identify the subcontractor.

Agency Name: Prenatal to Three Initiative

Amount of Request: \$1,000,000

Budget period: July 1, 2006-June 30,2007

Check the appropriate box:

☐ Planning Grant

☒ Implementation Grant

** List in this column all other agency funds available to support the project, excluding the amount being requested from the Commission. Place an "NS" next to any amounts that are not yet secured.

| I. PERSONNEL | | | A. Amount Requested | B. Leveraged Amount Available** | C. Total Program Budget (A+B) |
|-------------------------------|------------------|--------|---------------------|---------------------------------|-------------------------------|
| Position Title | Salary Range | # FTEs | | | |
| A. Public Health Nurses | \$93,891 | 2.20 | \$206,560 | \$169,004 | \$375,564 |
| B. Psychiatric Social Workers | \$74,776 | 1.90 | \$142,074 | \$82,254 | \$224,328 |
| C. Case Manager (BIH) | \$63,753 | 0.45 | \$28,689 | \$35,064 | \$63,753 |
| D. Parent Educ. Coord. | \$57,377 | 0.70 | \$40,164 | \$17,213 | \$57,377 |
| E. Grant Coord./Evaluator | \$74,828 | 0.45 | \$33,673 | \$41,155 | \$74,828 |
| F. Medical Office Assistant | \$45,864 | 0.55 | \$25,225 | \$20,639 | \$45,864 |
| Benefits @ 29% | 119,042 | | \$138,152 | \$105,945 | \$244,097 |
| | | | | | |
| Subtotal - Personnel | \$529,530 | | \$614,537 | \$471,274 | \$1,085,811 |

| II. OPERATING EXPENSES | A. Amount Requested | B. Leverage Amount Available ** | C. Total Program Budget (A+B) |
|----------------------------------|---------------------|---------------------------------|-------------------------------|
| | | | |
| A. Rent and Utilities | \$25,316 | \$29,625 | \$54,941 |
| B. Office Supplies and Materials | \$2,200 | \$2,000 | \$4,200 |
| C. Telephone/Communications | \$8,500 | \$3,500 | \$12,000 |
| D. Postage/Mailing | \$0 | \$0 | \$0 |
| E. Printing/Copying | \$0 | \$0 | \$0 |
| F. Equipment Lease | \$1,000 | \$0 | \$1,000 |
| G. Travel | \$10,000 | \$0 | \$10,000 |
| H. Training/Conference | \$2,125 | \$0 | \$2,125 |
| I. Consultants | \$0 | \$0 | \$0 |

| | | | |
|--------------------------------------|------------------|------------------|------------------|
| J. Subcontractors | \$235,349 | \$149,051 | \$384,400 |
| YFES (3 Community Workers) | \$114,167 | \$76,111 | \$190,278 |
| 4Cs (2 Community Workers) | \$76,111 | \$50,741 | \$126,852 |
| Psychiatrist | \$45,071 | \$22,199 | \$67,270 |
| K. Other (please specify) | \$45,665 | \$0 | \$45,665 |
| Taxi Vouchers | \$10,500 | \$0 | \$10,500 |
| Incentives | \$26,165 | \$0 | \$26,165 |
| Child care | \$9,000 | \$0 | \$9,000 |
| | ----- | ----- | ----- |
| Subtotal - Operating Expenses | \$330,155 | \$184,176 | \$514,331 |

| | A. Amount Requested | B. Leveraged Amount Available ** | C. Total Program Budget (A+B) |
|--|---------------------|----------------------------------|-------------------------------|
| III. CAPITAL EXPENDITURES | | | |
| Itemize and describe items requested. Competitive bids may be requested by the Commission prior to contract. This section can be left blank if no capital requests are being made. | | | |
| Subtotal - Capital Expenditures | \$0 | \$0 | \$0 |

| | A. Amount Requested | B. Leveraged Amount Available ** | C. Total Program Budget (A+B) |
|----------------------------------|---------------------|----------------------------------|-------------------------------|
| IV. INDIRECT COSTS | | | |
| Personnel costs @ 9% | \$55,308 | \$42,415 | \$97,723 |
| | ----- | ----- | ----- |
| Subtotal - Indirect Costs | \$55,308 | \$42,415 | \$97,723 |

| | A. Amount Requested | B. Leveraged Amount Available ** | C. Total Program Budget (A+B) |
|---------------------------------|---------------------|----------------------------------|-------------------------------|
| V. TOTAL PROGRAM COSTS | | | |
| Total of sections I - IV | \$1,000,000 | \$697,865 | \$1,697,865 |

VI. IN KIND SUPPORT: Please identify any in-kind support that is available to this project (examples: volunteer hours, donated office space or equipment). If volunteer hours are listed, please indicate the role(s) of volunteers in the project.

Child Care Coordinating Council, SM
City of Menlo Park
Community Learning Center, SSF
Human Services Agency, Daly City
Fair Oaks Community Center, RWC
Municipal Building, East Palo Alto
Library, East Palo Alto
Moonridge Community Center, HMB
Martin Luther King Center, San Mateo

Parenting class space
Refreshments for Touchpoints group
Touchpoints group space
Parenting class space
Parenting class and Touchpoints group space
Parenting class space
Touchpoints group space
Touchpoints group space
Touchpoints group space

**Prenatal to Three Initiative
First 5 San Mateo County Budget Narrative
2006-2007 – Year Four¹**

I. PERSONNEL

- | | |
|---|------------------------|
| A. Public Health Nurses (2.20 FTEs): ² Will conduct outreach and provide medical and psychosocial assessment, referral, and case management for Medi-Cal eligible families. Will screen women for depression and children for developmental delays. First 5 funds and leveraged funds provide four PHNs. (Request is 8% higher [+\$16,141] than last year due to salary increases in the last several years and addition of parenting class.) | \$206,560 ³ |
| B. Psychiatric Social Workers (1.90 FTEs): Will conduct assessment and treatment of mothers with mental illness through individual and group interventions. First 5 funds and leveraged funds provide three PSWs. | \$142,074 |
| C. Case Manager (Black Infant Health, 0.45 FTE): Will conduct outreach and provide psychosocial assessment, referral, and case management for at least 25 African American families in North County. First 5 funds and leveraged funds provide one Case Manager. (Request is lower than last year due to elimination of groups.) | \$28,689 |
| D. Parent Education Coordinator (0.70 FTE): Will coordinate parent education classes offered by Pre-3 using the Strengthening Multi-Cultural Families and Communities curriculum. Will supervise provision of eight classes, and will coordinate and facilitate two classes. Will coordinate training program for Pre-3 staff. First 5 funds and leveraged funds provide one Parent Education Coordinator. (Request is 8% lower [-\$3,600] than last year due to voluntary time off this year). | \$40,164 |
| E. Grant Coordinator and Evaluator (0.45 FTE): Will manage First 5 and other program grants. Will design, implement, and manage evaluation of all program components. Will provide infrastructure support to Pre-3 through strategic program planning and staff supervision. First 5 funds and leveraged funds provide one Grant Coordinator and Evaluator. | \$33,673 |

¹ Budget changes of 3% or greater between 2005-2006 and 2006-2007 are noted in the narrative.

² "FTE" refers to the percent of a full-time equivalent position that is being requested from First 5. For example, partial salaries for four PHNs are requested from First 5, which totals the full-time equivalent of 2.10 PHNs (52.5% of each position).

³ Amount requested from First 5. Does not include leveraged funds from San Mateo County, Medi-Cal reimbursement, or other grants.

| | |
|---|------------------|
| F. Medical Office Assistant (0.55 FTE): Will provide necessary clerical and infrastructure support to direct service staff. | \$25,225 |
| Amount for this year is 4% lower than last year due to adjustment in Medi-Cal reimbursement rate. First 5 funds and leveraged funds provide one Medical Office Assistant. | |
| Benefits: The County's fringe benefit rate for the positions above is 29% and includes the following: | \$138,152 |
| County retirement | 13.82% |
| Employment group insurance | 7.06% |
| FICA | 4.38% |
| Worker's compensation | 2.08% |
| Medicare | 1.06% |
| County annuity | 0.42% |
| Unemployment insurance | 0.18% |
| <u>TOTAL</u> | <u>29.0%</u> |
| Subtotal - Personnel | \$614,537 |

II. OPERATING EXPENSES

| | |
|--|----------|
| A. Rent and Utilities: 4% of First 5-funded staff personnel costs. (Request is lower [\$14,111] than last year due to a change in calculation of expenses. Last year's figure was computed based on the proportion of First 5 staff to total Pre-3 staff, which overestimated the amount needed to cover costs for First 5 staff.) | \$25,316 |
| B. Office Supplies and Materials: 100% of supplies for First 5-funded staff and groups. | \$2,200 |
| C. Telephone/Communications: 100% of First 5-funded staff land line and cell phone costs. | \$8,500 |
| D. Postage/Mailing | \$0 |
| E. Printing/Copying | \$0 |
| F. Equipment Lease: 100% of lease for First 5-funded staff computers and Information Support Department maintenance. (Request is 67% lower [-\$500] than last year because maintenance costs are lower than were expected.) | \$1,000 |
| G. Travel: 100% of First 5-funded staff mileage reimbursed at federal rate of \$0.445/mile. (Request is 21% higher [+\$2,114] than last year because actual costs are higher than were expected.) | \$10,000 |
| H. Training/Conference: Partial costs for ongoing staff training. | \$2,125 |
| I. Consultants | \$0 |

| | |
|---|--------------------|
| J. Subcontractors | \$235,349 |
| 1. Community Workers: Will conduct outreach and provide assessment, referral, and case management for Medi-Cal eligible families. Will screen children for developmental delays. Will facilitate parenting classes, <i>Touchpoints</i> parent support groups, and mental health groups. Budgets for contractors are attached. | |
| a. Youth and Family Enrichment Services (3 Community Workers at 0.60 FTE) | \$114,167 |
| b. Child Care Coordinating Council (2 Community Workers at 0.60 FTE) | \$76,111 |
| 2. Psychiatrist (contract with Mental Health Department, 0.67 FTE): Will provide medication management for pregnant and breastfeeding women. Budget for contractor is attached. | \$45,071 |
| K. Other | \$45,665 |
| 1. Taxi Vouchers (300 taxi vouchers at \$8-\$50 each): 100% of costs for transportation of clients to parenting classes, mental health groups, and medical and social services appointments. | \$10,500 |
| 2. Incentives: Target vouchers, food, manuals, and educational materials for participants of parenting classes, <i>Touchpoints</i> parent support groups, mental health groups, and Black Infant Health case management services. Budget for incentives is attached. | \$26,165 |
| 3. Child care: 100% of licensed child care expenses for 25 families to enable parents to attend parenting classes. Provider verification and reimbursement are administered by the Child Care Coordinating Council. | \$9,000 |
| Subtotal - Operating Expenses | \$330,155 |
| III. CAPITAL EXPENDITURES | \$0 |
| IV. INDIRECT COSTS | \$55,308 |
| 9% of First 5-funded staff personnel costs, including the following (a more detailed description is attached): | |
| Public Health Administration | 3.27% |
| Health Department Administration and Accounting | 2.19% |
| County Facilities, Insurance, and Security | 1.84% |
| County-wide Overhead and Support Services | 1.70% |
| TOTAL | 9.00% |
| V. TOTAL PROGRAM COSTS | \$1,000,000 |

| Youth and Family Enrichment Services 2006-2007 Pre-3 Community Worker Budget⁴ | |
|---|---|
| Line Item | Total Program Budget⁵ |
| Personnel | |
| Community Worker | \$39,624 |
| Supervisor (0.5 hours/week) | \$1,646 |
| Benefits @ 26% | \$10,730 |
| Subtotal - Personnel | \$52,000 |
| Operating Expenses | |
| Rent and Utilities | \$0 |
| Office Supplies | \$20 |
| Telephone/Communication | \$520 |
| Postage/Mailing | \$0 |
| Printing/Copying | \$23 |
| Equipment Lease | \$0 |
| Travel | \$1,440 |
| Training/Conference | \$500 |
| Consultants | \$0 |
| Subcontractors | \$0 |
| Other (itemize) | \$83 |
| Fingerprint, background check | \$83 |
| Subtotal - Operating Expenses | \$2,586 |
| Capital Expenses | \$0 |
| Indirect @ 17% of Personnel | \$8,840 |
| TOTAL | \$63,426 |

⁴ See budget section II(J)(1)(a) above. Budget reflects the expenses for one community worker for one year. YFES provides Pre-3 with six community workers, with a portion of three workers charged to First 5.

⁵ Includes First 5 and leveraged funds. Funds requested from First 5 represent 60% of these total costs.

| Child Care Coordinating Council of San Mateo County 2006-2007 Pre-3 Community Worker Budget ⁶ | |
|---|-----------------------------------|
| Line Item | Total Program Budget ⁷ |
| Personnel | |
| Community Worker | \$47,913 |
| Supervisor (2 hours/week) | in kind |
| Benefits @ 28% | \$13,416 |
| Subtotal - Personnel | \$61,329 |
| Operating Expenses | |
| Rent and Utilities | in kind |
| Office Supplies | \$34 |
| Telephone/Communication | \$879 |
| Postage/Mailing | \$137 |
| Printing/Copying | in kind |
| Equipment Lease | in kind |
| Travel | \$533 |
| Training/Conference | \$412 |
| Consultants | \$0 |
| Subcontractors | \$0 |
| Other (itemize) | \$102 |
| 1. Books | \$34 |
| 2. Meals | \$68 |
| Subtotal - Operating Expenses | \$2,097 |
| Capital Expenses | \$0 |
| Indirect @ 10% of Personnel | in kind |
| TOTAL | \$63,426 |

⁶ See budget section II(J)(1)(b) above. Budget reflects the expenses for one community worker for one year. 4Cs provides Pre-3 with two community workers, with a portion of both charged to First 5.

⁷ Includes First 5 and leveraged funds. Funds requested from First 5 represent 60% of these total costs.

| Mental Health Department 2006-2007 Pre-3 Psychiatrist Budget ⁸ | |
|--|-----------------------------------|
| Line Item | Total Program Budget ⁹ |
| Personnel | |
| Psychiatrist (\$86.24/hour for 15 hours/week) | \$67,270 |
| Subtotal - Personnel | \$67,270 |
| Operating Expenses | |
| Rent and Utilities | \$0 |
| Office Supplies | \$0 |
| Telephone/Communication | \$0 |
| Postage/Mailing | \$0 |
| Printing/Copying | \$0 |
| Equipment Lease | \$0 |
| Travel | \$0 |
| Training/Conference | \$0 |
| Consultants | \$0 |
| Subcontractors | \$0 |
| Other (itemize) | \$0 |
| Subtotal - Operating Expenses | \$0 |
| Capital Expenses | \$0 |
| Indirect | N/A |
| TOTAL | \$67,270 |

⁸ See budget section II(J)(2) above.

⁹ Includes First 5 and leveraged funds. Funds requested from First 5 represent 67% of these total costs.

| Incentives and Materials Budget | | | |
|--|--|--|--------------------------------------|
| | Parenting classes | Mental health groups | Touchpoints groups |
| Incentives (Target) | 14 weeks x 12 parents x \$10 x 5 classes = \$8,400 | 10 weeks x 42 parents x \$10 = \$4,200 | \$10 x 7 groups x 50 weeks = \$3,500 |
| Class food | 13 weeks x \$50 x 5 classes = \$3,250 | 9 weeks x 7 classes x \$30 | |
| Graduation food | \$200 x 5 classes = \$1,000 | \$75 x 7 classes = \$525 | |
| Manuals | \$20 x 12 parents x 5 classes = \$1,200 | | |
| Subtotal | \$13,850 | \$6,615 | \$3,500 |
| BIH outreach and educational materials | \$2,200 | | |
| TOTAL (with BIH) | | | \$26,165 |

EXHIBIT C

**ASSURANCE OF COMPLIANCE WITH SECTION 504 OF THE
REHABILITATION ACT OF 1973, AS AMENDED**

The undersigned (hereafter called the "Contractor") 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 gives this assurance in consideration of and for the purpose of obtaining contracts after the date of this assurance. The Contractor recognizes and agrees that contracts will be extended in reliance on the representations and agreements made in this assurance. This assurance is binding on the Contractor, 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.

The Contractor: (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.

Steve Rossi

Name of 504 Person – Type or Print

San Mateo County Health Dept. Public Health Division

Name of Contractor – Type or Print

225 37th Avenue

Address

San Mateo

City

CA

State

94403

Zip Code

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

Date

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."

EXHIBIT D

INTELLECTUAL PROPERTY PROTOCOL

The protocol provided below addresses how and when a person must gain permission to disseminate data, findings or products emerging from F5SMC-funded projects or their evaluations.

1. Categories of Materials

The following tiers represent the general types or categories of dissemination and the F5SMC'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 F5SMC 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 F5SMC encourages them. However, prior to any publication of F5SMC-funded and produced materials, such material shall be submitted to the F5SMC for prior approval for input and to ensure inclusion of appropriate F5SMC 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 F5SMC 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 F5SMC funded support, without the express prior approval of the F5SMC. When presented with a request by a person for prior approval, the F5SMC 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, F5SMC contracts state that F5SMC owns any products from F5SMC-funded projects. The protocol provided below addresses how/when a person must gain permission to disseminate data, findings or products emerging from F5SMC-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 F5SMC-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 F5SMC 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 F5SMC support for the intervention or evaluation effort; and (2) be submitted to F5SMC 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 F5SMC 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 F5SMC 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 F5SMC 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 F5SMC-supported product for sale or for profit must submit a request to F5SMC 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 F5SMC 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 F5SMC for comment and/or approval.