

**AGREEMENT BETWEEN THE COUNTY OF SAN MATEO AND
WOMEN'S RECOVERY ASSOCIATION**

THIS AGREEMENT is entered into this _____ day of _____, 20_____, by and between the COUNTY OF SAN MATEO, hereinafter called "County," and **Women's Recovery Association**, hereinafter called "Contractor";

WITNESSETH:

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

WHEREAS, it is necessary and desirable that Contractor be retained for the purpose of performing professional alcohol and drug treatment services in accordance with state and federal laws, regulations, and funding mandates.

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

1. Exhibits

The following exhibits and attachments are included hereto and incorporated by reference herein:

- Exhibit A: Description of Services
- Exhibit B: Method and Rate of Payment
- Attachment 1: Assurance of Compliance with Section 504
- Attachment 2: Fingerprinting Compliance Form
- Attachment 3: Contractor Declaration Form

2. Services to be performed by Contractor

In consideration of the payments set forth herein and in Exhibit B, Contractor shall perform the services as set forth in this Agreement, in the Alcohol and Other Drug Services Policy and Procedure Manual and in the Exhibits and Attachments to the Agreement.

3. Payments

A. Maximum Amount

In consideration of the services provided by Contractor in accordance with all terms, conditions and specifications set forth herein, in Exhibit A, and in the Alcohol and Other Drug Services Policy and Procedure Manual, County shall make payment to Contractor based on the rates and in the manner specified in Exhibit B and attachments herein for the contract term. The County reserves the right to withhold payment if the County determines that the quantity or quality of the work performed is unacceptable.

The total fiscal obligation under this Agreement shall not exceed SIX MILLION FOUR HUNDRED EIGHTY-NINE THOUSAND FOUR HUNDRED TWENTY-SIX DOLLARS (\$6,489,426). The County's total fiscal obligation under this Agreement shall include (a) a fixed amount, and (b) a variable amount, which shall be a portion of an aggregate amount allocated between all contractors who provide the same or similar services as those described in this Agreement.

The County's total fiscal obligation for the fixed amount shall not exceed \$1,403,249 for FY 2009-10, and \$1,403,249 for FY 2010-11.

The County's total fiscal obligation for the aggregate amount allocated between all contractors who provide the same or similar services as those described in this Agreement shall not exceed THREE MILLION SIX HUNDRED EIGHTY-TWO THOUSAND NINE HUNDRED TWENTY-EIGHT DOLLARS (\$3,682,928). The maximum aggregate amount for FY 2009-10 is \$1,841,464, and the maximum aggregate amount for FY 2010-11 is \$1,841,464.

The Contractor acknowledges that the County has agreed to pay a "variable amount" to all contractors who provide fee for service alcohol and drug treatment and drug testing services authorized individually or collectively by a County Resolution, which shall be the Contractor's share of an aggregate amount allocated between all contractors who provide the same or similar services as those described in this Agreement.

Therefore, the funds available to pay each individual contractor are dependent upon the amount or volume of services provided by the other contractors, as authorized by County.

The aggregate amount to be allocated between all contractors who provide the same or similar services as those described in this Agreement shall include and shall be limited to the following amounts:

For FY 2009-10:

1. NINE HUNDRED FIFTY THOUSAND EIGHT HUNDRED SIXTY-THREE DOLLARS (\$950,863) for SACPA Funded alcohol and drug treatment and prevention services as described in Exhibit A.
2. THREE HUNDRED THIRTY-NINE THOUSAND FOUR HUNDRED THIRTY-EIGHT DOLLARS (\$339,438) for SACPA OTP services as described in Exhibit A.
3. ONE HUNDRED SIXTY THOUSAND SIX HUNDRED SEVEN DOLLARS (\$160,607) for SB223 Drug Testing described in Exhibit A.
4. TWO HUNDRED THIRTY-THREE THOUSAND THREE HUNDRED TWENTY-FIVE DOLLARS (\$233,325) for Comprehensive Drug Court Implementation funded alcohol and drug treatment services as described in Exhibit A.
5. SEVENTY-TWO THOUSAND TWO HUNDRED THIRTY-ONE DOLLARS (\$72,231) for Drug Court Partnership funded alcohol and drug treatment services as described in Exhibit A.
6. EIGHTY-FIVE THOUSAND DOLLARS (\$85,000) for Ryan White CARE Act funded alcohol and drug treatment services as described in Exhibit A for the Contract term.

For FY 2010-11:

1. NINE HUNDRED FIFTY THOUSAND EIGHT HUNDRED SIXTY-THREE DOLLARS (\$950,863) for SACPA Funded alcohol and drug treatment and prevention services as described in Exhibits A.
2. THREE HUNDRED THIRTY-NINE THOUSAND FOUR HUNDRED THIRTY-EIGHT DOLLARS (\$339,438) for SACPA OTP services as described in Exhibit A.
3. ONE HUNDRED SIXTY THOUSAND SIX HUNDRED SEVEN DOLLARS (\$160,607) for SB223 Drug Testing described in Exhibit A.
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6. EIGHTY-FIVE THOUSAND DOLLARS (\$85,000) for Ryan White CARE Act funded alcohol and drug treatment services as described in Exhibit A for the Contract term.

B. Rates, Amounts and Terms of Payment

The amounts, rates and terms of payment shall be specified in the Exhibits, the Alcohol and Other Drug Services Policy and Procedure Manual and Attachments to this Agreement. Any rate increase is subject to the approval of the Chief of the Health System or designee, and shall not be binding on County unless so approved in writing.

In no event shall the maximum County obligation exceed the total specified in paragraph 3.A. above, unless a duly executed written Amendment to this Agreement authorizes an increase. Each payment shall be conditioned on the satisfactory performance of the services described in the Exhibits herein. In the event the Chief of the Health System or the Chief's designee determines that Contractor has not satisfactorily performed services, and therefore decides to withhold payment, the Chief, or designee shall issue written findings of unsatisfactory performance of services within seven (7) days of any decision to withhold payment.

C. Time Limit for Submitting Invoices

Contractor shall submit an invoice for services to County in accordance with the provisions of the Exhibits and Attachments herein. County shall not be obligated to pay Contractor for the services covered by any invoice if Contractor presents the invoice to County more than one hundred eighty (180) days after the date Contractor renders the services, or more than ninety (90) days after this Agreement terminates, whichever is earlier. To ensure full and timely payment for services provided, Contractor is required to submit invoices for services provided no later than the tenth (10th) day of each month.

4. Term and Termination

Subject to compliance with all terms and conditions, the term of this Agreement shall be from July 1, 2009, through June 30, 2011.

This Agreement may be terminated by Contractor, the Chief of the Health System or designee

at any time without a requirement of good cause upon thirty (30) days' written notice to the other party.

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 County and shall be promptly delivered to the County. Upon termination, the Contractor may make and retain a copy of such materials. Subject to availability of funding, Contractor shall be entitled to receive payment for work/services provided prior to termination of the Agreement. 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.

5. Availability of Funds

The County may terminate this Agreement or a portion of the services referenced in the Attachments and Exhibits based upon unavailability of Federal, State, or County funds, by providing written notice to Contractor as soon as is reasonably possible after the County learns of said unavailability of outside funding.

6. 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 County and that Contractor acquires none of the rights, privileges, powers, or advantages of County employees.

7. Hold Harmless

Contractor shall indemnify and save harmless County, its officers, agents, employees, and servants from all claims, suits, or actions of every name, kind, and description, brought for, or on account of: (A) injuries to or death of any person, including Contractor, or (B) damage to any property of any kind whatsoever and to whomsoever belonging, (C) any sanctions, penalties, or claims of damages resulting from Contractor's failure to comply with the requirements set forth in the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and all Federal regulations promulgated thereunder, as amended, or (D) any other loss or cost, including but not limited to that caused by the concurrent active or passive negligence of County, its officers, agents, employees, or servants, resulting from the performance of any work required of Contractor or payments made pursuant to this Agreement, provided that this shall not apply to injuries or damage for which County has been found in a court of competent jurisdiction to be solely liable by reason of its own negligence or willful misconduct.

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

8. Assignability and Subcontracting

Contractor shall not assign this Agreement or any portion thereof to a third party or subcontract with a third party to provide services required by contractor under this Agreement without the prior written consent of County. Any such assignment or subcontract without the County's prior written consent shall give County the right to automatically and immediately terminate this Agreement.

9. Insurance

The Contractor shall not commence work or be required to commence work under this Agreement unless and until all insurance required under this paragraph has been obtained and such insurance has been approved by Risk Management, and Contractor shall use diligence to obtain such insurance and to obtain such approval. The Contractor shall furnish the Department/Division with certificates of insurance evidencing the required coverage, and there shall be a specific contractual liability endorsement extending the Contractor's coverage to include the contractual liability assumed by the Contractor pursuant to this Agreement. These certificates shall specify or be endorsed to provide that thirty (30) days' notice must be given, in writing, to the Department/Division of any pending change in the limits of liability or of any cancellation or modification of the policy.

(1) **Worker's Compensation and Employer's Liability Insurance** The Contractor shall have in effect during the entire life of this Agreement Workers' Compensation and Employer's Liability Insurance providing full statutory coverage. In signing this Agreement, the Contractor certifies, as required by Section 1861 of the California Labor Code, that it is aware of the provisions of Section 3700 of the California Labor Code which requires every employer to be insured against liability for Worker's Compensation or to undertake self-insurance in accordance with the provisions of the Code, and I will comply with such provisions before commencing the performance of the work of this Agreement.

(2) **Liability Insurance** The Contractor shall take out and maintain during the life of this Agreement such Bodily Injury Liability and Property Damage Liability Insurance as shall protect him/her while performing work covered by this Agreement from any and all claims for damages for bodily injury, including accidental death, as well as any and all claims for property damage which may arise from contractors operations under this Agreement, whether such operations be by himself/herself or by any sub-contractor or by anyone directly or indirectly employed by either of them. Such insurance shall be combined single limit bodily injury and property damage for each occurrence and shall be not less than the amount specified below.

Such insurance shall include:

(a) Comprehensive General Liability	\$1,000,000
(b) Motor Vehicle Liability Insurance	\$1,000,000
(c) Professional Liability	\$1,000,000

County and its officers, agents, employees and servants shall be named as additional insured on any such policies of insurance, which shall also contain a provision that the insurance afforded thereby to the County, its officers, agents, employees and servants shall be primary insurance to the full limits of liability of the policy, and that if the County or its officers and employees have other insurance against the loss covered by such a policy, such other insurance shall be excess insurance only.

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

10. Compliance with laws; payment of Permits/Licenses

All services to be performed by Contractor pursuant to this Agreement shall be performed in accordance with all applicable Federal, State, County, and municipal laws, including, but not limited to, Health Insurance Portability and Accountability Act of 1996 (HIPAA) and all Federal regulations promulgated thereunder, as amended, and the Americans with Disabilities Act of 1990, as amended, and Section 504 of the Rehabilitation Act of 1973, as amended and attached hereto and incorporated by reference herein as Attachment 1 which prohibits discrimination on the basis of handicap in programs and activities receiving any Federal or County financial assistance. Such services shall also be performed in accordance with all applicable ordinances and regulations, including, but not limited to, appropriate licensure, certification regulations, provisions pertaining to confidentiality of records, and applicable quality assurance regulations.

In the event of a conflict between the terms of this agreement and State, Federal, County, or municipal law or regulations, the requirements of the applicable law will take precedence over the requirements set forth in this Agreement.

Contractor will timely and accurately complete, sign, and submit all necessary documentation of compliance.

11. Non-Discrimination and Other Requirements

- A. *Section 504 applies only to Contractor who are providing services to members of the public.* Contractor shall comply with § 504 of the Rehabilitation Act of 1973, which provides that no otherwise qualified handicapped 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.
- B. *General non-discrimination.* No person shall, on the grounds of race, color, religion, ancestry, gender, age (over 40), national origin, medical condition (cancer), physical or mental disability, sexual orientation, pregnancy, childbirth or related medical condition, marital status, or political affiliation be denied any benefits or subject to discrimination under this Agreement.
- C. *Equal employment opportunity.* Contractor shall ensure equal employment opportunity based on objective standards of recruitment, classification, selection, promotion, compensation, performance evaluation, and management relations for all employees under this Agreement. Contractor's equal employment policies shall be made available to County of San Mateo upon request.
- D. *Violation of Non-discrimination provisions.* 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 County Manager, including but not limited to
 - i) termination of this Agreement;
 - ii) disqualification of the Contractor from bidding on or being awarded a County 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 County Manager.

To effectuate the provisions of this section, the County Manager shall have the authority to examine Contractor's employment records with respect to compliance with this paragraph and/or to 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 County.

Contractor shall report to the County Manager the filing by any person in any court of any complaint of discrimination or the filing by any person of any and all charges with the Equal Employment Opportunity Commission, the Fair Employment and Housing Commission or any other entity charged with the investigation of allegations within 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 County with a copy of their response to the Complaint when filed.

E. *Compliance with Equal Benefits Ordinance.* 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.

F. The Contractor shall comply fully with the non-discrimination requirements required by 41 CFR 60-741.5(a), which is incorporated herein as if fully set forth.

12. Compliance with Contractor Employee Jury Service Ordinance

Contractor shall comply with the County Ordinance with respect to provision of jury duty pay to employees and have and adhere to a written policy that provides that its employees shall receive from the contractor, on an annual basis, no less than five days of regular pay for actual jury service in San Mateo County. The policy may provide that employees deposit any fees received for such jury service with the contractor or that the contractor deduct from the employees' regular pay the fees received for jury service.

13. Retention of Records, Right to Monitor and Audit

(a) CONTRACTOR shall maintain all required records for three (3) years after the COUNTY makes final payment and all other pending matters are closed, and shall be subject to the examination and/or audit of the County, a Federal grantor agency, and the State of California.

(b) Reporting and Record Keeping: CONTRACTOR shall comply with all program and fiscal reporting requirements set forth by appropriate Federal, State and local agencies, and as required by the COUNTY.

(c) CONTRACTOR agrees to provide to COUNTY, to any Federal or State department having monitoring or review authority, to COUNTY's authorized representatives, and/or their appropriate audit agencies upon reasonable notice, access to and the right to examine 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.

14. Merger Clause

This Agreement, including the Exhibits attached hereto and incorporated herein by reference, constitutes the sole Agreement of the parties hereto and correctly states the rights, duties, and obligations of each party as of this document's date. In the event that any term, condition, provision, requirement or specification set forth in this body of the agreement conflicts with or is inconsistent with any term, condition, provision, requirement or specification in any exhibit and/or attachment to this agreement, the provisions of this body of the agreement shall prevail. Any prior agreement, promises, negotiations, or representations between the parties not expressly stated in this document are not binding. All subsequent modifications shall be in writing and signed by the parties.

15. 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. Any dispute arising out of this Agreement shall be venued either in the San Mateo County Superior Court or the United States District Court for the Northern District of California.

16. Notices

Any notice, request, demand, or other communication required or permitted hereunder shall be deemed to be properly given when both (1) transmitted via facsimile to the telephone number listed below and (2) either deposited in the United States mail, postage prepaid, or when deposited for overnight delivery with an established overnight courier that provides a tracking number showing confirmation of receipt for transmittal, charges prepaid, addressed to:

**In the case of County, to:
COUNTY OF SAN MATEO
DIRECTOR, ALCOHOL AND OTHER DRUG
SERVICES
225 - 37TH AVENUE
SAN MATEO, CA 94403**

**In the case of Contractor, to:
WOMEN'S RECOVERY ASSOCIATION
LINDA CARLSON, EXECUTIVE DIRECTOR
1450 CHAPIN AVE 1ST FLOOR
BURLINGAME, CA 94010**

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

COUNTY OF SAN MATEO

By: _____
Mark Church, President
Board of Supervisors, San Mateo County

Date: _____

ATTEST:

By: _____
Clerk of Said Board

WOMEN'S RECOVERY ASSOCIATION

By: Linda Carlson, Executive Director

Signature

Date: _____

**Exhibit A - Description of Services
WOMEN'S RECOVERY ASSOCIATION**

Alcohol and Drug Treatment and Prevention Services

Contractor will provide the following alcohol and drug treatment and prevention services at a mutually agreed upon location in San Mateo County. All payments under this Original Agreement must directly support services specified in this Exhibit A. Contractor will give priority admission to San Mateo County residents and who are referred by County Behavioral Health and Recovery Services (BHRS) and Alcohol and Drug Services (AOD). Contractor will provide the following services to clients, who meet Alcohol and Drug Services (AOD) treatment and recovery and prevention services criteria in the following priority populations and service modalities. In providing its services and operations, Contractor will maintain compliance with requirements of the AOD Policy and Procedure Manual including additions and revisions, incorporated by reference herein.

I. Alcohol and Drug Treatment and Recovery Services

A. STRATEGIC DIRECTION 1: PRIORITY POPULATIONS

1. The base of the funds must be used to serve priority population clients. Specifically:
 - a. 85% of annualized flat rate base funding must serve clients from one or more of Priority Populations as identified in Strategic Directions 2010.
 - b. 15% of the flat rate base funding is discretionary.
 - c. 100% of the Strategic Directions 2010 funding shall be used to fund services for clients in the four priority populations as outlined in the Strategic Directions 2010.

**Units of Service
July 1, 2009 - June 30, 2010**

Modalities / Priority Populations	Individuals Served	Units of Service (UOS)- Staff Available Hours (SAH) Bed Days (BD)
Residential – Adult (Families with young children, Youth, Homeless families and individuals, Adults in the criminal justice system)	28	2917
Residential – Perinatal Adult (Families with young children, Homeless families and individuals, Adults in the criminal justice system)	33	4395
Residential – Perinatal Children (Families with young children, Homeless families and individuals, Adults in the criminal justice system)	11	987
Outpatient – Adult (Families with young children, Homeless families and individuals, Adults in the criminal justice system)	40	384
Intensive Outpatient (Families with young children, Homeless families and individuals, Adults in the criminal justice system)	15	432
Women’s Treatment Pilot	20	N/A

Priority Population Funding: UOS Breakdown

Funding Type	Total Units of Service (UOS)	Priority Population UOS	Priority Population UOS %	Allowable Discretionary UOS	Allowable Discretionary UOS %
NRC Non Residential – Flat Rate	384 SAH	326 SAH	85%	58 SAH	15%
NRC Perinatal Residential Flat Rate	2228 BD	1894 BD	85%	334 BD	15%
NRC Residential – Women’s Flat Rate	2917 BD	2479 BD	85%	438 BD	15%
County Residential – Children Flat Rate	987 BD	840 BD	85%	147 VD	15%
County Intensive Outpatient – Women’s Flat Rate	432 VD	367 VD	85%	65 VD	15%
Strategic Directions 2010 Funding Residential – Families with young children	2167 BD	2167 BD	100%	0	0%
Strategic Directions 2010 Women’s Treatment Pilot	20 Clients	20 Clients	100%	0	0%
TOTAL (UOS) (Bed Days)	6132	5212	85%	920 BD	15%
TOTAL (UOS) (Staff Available Hours)	384	326	85%	58 SAH	15%
TOTAL (UOS) (Visit Days)	432	367	85%	65 VD	15%
Strategic Directions 2010	2167	2167	100%	0	0%

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July 1, 2010 - June 30, 2011**

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Strategic Directions 2010	2167	2167	100%	0	0%
NRC Non Residential – Flat Rate	384 SAH	326 SAH	85%	58 SAH	15%

2. Best Practices

To enhance services to these priority populations, services must align with evidence based and promising practices.

Contractor will utilize the following Evidence Based Practices:

- a. Dr. Marsha Linehan’s *Dialectical Behavioral Therapy (DBT)*
- b. Dr. Lisa Najavits’ *Seeking Safety: A Treatment Manual for Post-Traumatic Stress Disorder (PTSD) and Substance Abuse*
- c. Dr. Stephen J. Bavolek’s *Nurturing Parent Programs* curriculum.
- d. Trauma-informed treatment services.
- e. Drs. William R. Miller and Stephen Rollnick’s *Motivational Interviewing* techniques

3. Client-Centered Continuum of Care

Contractor will involve clients in a treatment plan that includes a continuity of care plan beginning with the initial assessment focusing on the client’s resources, issues and strengths. A client’s relapse plan and other crisis planning will also be incorporated into the treatment plan. The plan will be evaluated and evolve during the course of the client’s engagement with the contractor. The plan and the modifications will be documented in the client file. Contractor will also document referrals and linkages to

other services and providers. Contractor shall include the following components when developing a treatment plan.

- a. Client Involvement
Contractor will involve client in the development, review, and revision of the client's treatment plan. Contractor will use Motivational Enhancement Therapy and the Stages of Change Model in client treatment plans. Treatment plans will be formally reviewed with the client at a minimum of every ninety (90) days, but will be reviewed on an informal basis every other week, or more frequently.
- b. Crisis Planning
Contractor will develop crisis plans, including relapse plans, with the client. When a crisis occurs, the counselor will link the client to needed ancillary services and will document the services in the case notes.
- c. Continuum of Care
Contractor will involve client in treatment plans that include a continuity of care plan beginning with the initial assessment focusing on the client's resources, issues, and strengths. The plans will be evaluated and evolve during the course of the client's engagement with the Contractor. The plans and any modifications will be documented in the client's file. Contractor will also document referrals and linkages to other services and providers.

B. STRATEGIC DIRECTION 2: SYSTEM-WIDE IMPROVEMENTS

1. Co-occurring Disorders
 - a. Contractor will continue participation as a Change Agent and will participate in monthly activities to effect the changes necessary to maintain and enhance Co-occurring Disorders (COD) capability.
 - b. Based on Contractor self-assessment utilizing the COMPASS, (Co-morbidity Program Audit and Self-Survey for Behavioral Health Services) Contractor will continue implementation of COMPASS action plan as recommended by the CCISC. Contractor will provide quarterly progress on implementation.
 - c. Contractor will work to improve COD outcomes by providing the following:
 - i. Contractor's treatment staff will increase competencies with respect to conducting culturally sensitive assessment and referral to identify and address clients' mental health issues and concerns.
 - ii. Contractor will provide and/or access staff training and implement culturally appropriate strategies to reduce stigma and improve outcomes for clients with co-occurring mental health and AOD issues by facilitating three (3) specialized groups: Seeking Safety, Food and Feelings and Dialectical behavioral therapy (DBT).
 - iii. Additional co-occurring services are medication management and administration and scoring of the Beck Depression Inventory (BDI-II)
 - iv. Improve identification of co-occurring clients. "Eighty percent of all clients who remain in treatment for at least 30 days will be assessed against DSM-IV criteria for a co-occurring mental illness. The diagnosis (or absence of a DSM-IV mental health diagnosis) will be recorded in WRA's database.
 - v. To improve retention of clients with co-occurring diagnosis, "Fifty percent of clients diagnosed with a co-occurring disorder will complete their primary/acute treatment episode.

2. Standards of Care
 - a. There is a need for a coordinated system of treatment services within San Mateo County for those with substance abuse problems. The County has identified specific standards of care for treatment services which incorporate scientific research and clinical practice. Contractor will maintain compliance with requirements of the AOD Policy and Procedure Manual including additions and revisions, incorporated by reference herein
 - i. Screening and Assessment Standards
 - ii. Treatment Standards of Care that incorporate Evidence Based Treatment Standards.
 - b. Contractor will develop an analysis of program elements which align with the Standards of Care by September 1, 2009.
 - c. Contractor shall submit training and technical assistance needs to BHRS no later than October 1, 2009.
 - d. Contractor will report quarterly on progress towards Standards of Care

3. AOD Policy Implementation

AOD Services implements new policies to advance the quality of treatment services and to align with scientific and clinical research about best practices in substance abuse treatment. Contractors shall also develop guidelines and procedures consistent with County Policy and continue staff training and development of policy adherence. The following new policies were effective July 1, 2008: Medications, Relapse, and Narcotic Replacement Therapy Policies.

Contractor will participate in training to further develop the implementations needs of these policies.

C. STRATEGIC DIRECTIONS 3: BUILDING CAPACITY

1. Quality Improvement Program

To enhance the quality of services, all contractors must have an established Quality Improvement (QI) program. A QI program must include a QI committee made up of staff from all levels that guide the development and implementation of the QI Plan. AOD Services intends for Contractor QI programs to establish a mechanism whereby contractors will identify processes and practices at the organizational level which undermine client access and retention in treatment. A QI program does not look at the level of individual employee performance. BHRS requires all contractors to:

 - a. Use the Plan-Do-Study-Act (PDSA) rapid change cycle process as at least one component of the organizational quality improvement program. This process improvement initiative must focus on improving client outcomes.
 - b. Defined measure(s) of change (i.e.: rate of “no shows” for intake)
 - c. Baseline data (using the above identified measures) has been collected
 - d. A change action/activity has been identified for implementation
 - e. A timeline for measuring change data and sharing with QI team
 - f. Contractor will regularly complete two (2) PDSA change cycles annually as part of this contract.
 - g. Contractor will report quarterly to BHRS on the status of the PDSA process.

2. Client Feedback Required

A rigorous Quality Improvement program must solicit and integrate feedback from service recipients. Contractor will implement a process to include client feedback to understand

the client experience of treatment services. This client feedback process may include but is not limited to: focus groups, client satisfaction surveys, etc. Feedback will be shared with the QI committee which is urged to address identified improvement areas through future QI plans.

- a. Contractor will incorporate client feedback by implementing a client satisfaction feedback survey by June 30, 2010.
 - b. Contractor will utilize client feedback in conjunction with the QI process for program improvement.
 - c. Contractor will report quarterly to BHRS on the status of the client feedback process and outcomes on a quarterly basis.
3. Contractor will work with Behavioral Health and Recovery Services and other consultants to develop skills and implement infrastructure to maximize Medi-Cal billing and the billing of other private insurance by February 2010.

D. FEE FOR SERVICE

In providing its services and operations, Contractor will maintain compliance with requirements of the AOD Policy and Procedure Manual including additions and revisions, incorporated by reference herein. The maximum length of stay is set by the specific funding source and an extension beyond a 90 day period may be granted only by written approval from the Alcohol and Other Drug Services (AOD) Administrator, pursuant to a Contractor's written request outlining and justifying the client's clinical need. Reimbursement will be approved only for clients who referred through the formal referral process outlined in the AOD Policy and Procedure Manual.

1. SACPA and SACPA OTP Services

In accordance with the AOD Policy and Procedure Manual, contractor will provide the following alcohol and drug treatment and recovery services for clients referred to SACPA and SACPA OTP services as:

- a. Level 1 / Level 1 Plus - Basic Outpatient Treatment Services;
- b. Level 2 - Day Treatment Services;
- c. Level 3 - Residential Treatment;
- d. Level 3- COD Residential Treatment
- e. SB223 drug testing

2. Comprehensive Drug Court Implementations (CDCI) Grant and Drug Court Partnership (DCP) Grant funded Services

In accordance with the AOD Policy and Procedure Manual, Contractor will provide the following alcohol and drug treatment and recovery services to clients who have been referred by the San Mateo County Drug Court Team(s):

- a. Outpatient Treatment Services
- b. Day Treatment Services
- c. Residential Treatment Services
- d. Aftercare Treatment Services
- e. Sober Living Environment Services
- f. Drug Testing

iii. Ryan White CARE Act funded services

In accordance with the AOD Policy and Procedure Manual, contractor will provide the following alcohol and drug treatment and recovery services to clients who have been referred by the Ryan White Case Manager. The maximum length of stay is 90 days and an extension beyond a 90 day period may be granted only by written approval from the

Alcohol and Other Drug Services (AOD) Administrator, pursuant to a Contractor's written request outlining and justifying the client's clinical need. Requests must be submitted by 1-month prior to the 90 day maximum.

- a. Outpatient Treatment Services
- b. Day Treatment Services
- c. Residential Treatment Services

II. Description of Unique Program Services

A. TREATMENT SERVICES AT WRA

WRA is a 90-day treatment program for residential, day outpatient and evening outpatient. Women can extend on a month-to-month basis for up to one year. Extensions are granted when the treatment team decides that an extension is clinically warranted and necessary. Treatment is organized into a range of groups and services, including individual counseling, psycho-educational groups (educational groups that include the whole community and provide information important for women in recovery), process groups, specialized groups, case management and vocational, educational and housing services.

WRA provides services to clients with co-occurring disorders by employing counselors who are registered with the BBS as Marriage Family Therapist – Interns. As part of their employment, we provide clinical supervision and training to each MFT-I. Per the requirements of the BBS, each MFT-I receives one hour of individual and 2 hours of group supervision each week. We contract with a supervisor @ \$80 per hour to provide this supervision. In addition, we utilize counselor trainees to co-facilitate groups and take a small caseload. We provide each of them with one hour of individual and three hours of group supervision each week. The Program Director provides the group supervision and we contract with an outside provider @ \$80 per hour to provide individual supervision. The Program Director, also schedules multiple trainings each year for the counseling staff and the house operations managers. These include trainings by outside (private) trainers, trainings by BHRS and in-service trainings by program director or other staff.

B. RECOVERY MANAGEMENT PILOT PROGRAM

The Women's Recovery Association in collaboration with San Mateo County Department of Behavioral Health is offering San Mateo County women a unique one-year program for women who are seeking addiction recovery services. This program is based on the concept that addiction treatment, like the treatment of any other disease, is best managed with primary care during the acute phase, followed by long-term recovery management support and regular check-ups.

The target populations eligible for the Recovery Management Project are women with histories of incarceration, homeless women and women with children under the age of six who are willing to make a commitment to receive services from WRA and to maintain contact with WRA for a period of one year.

Services provided during the one year project may include: residential and/or intensive outpatient substance abuse treatment, individual counseling, case management services, assistance meeting educational goals, assistance with meeting vocational goals, assistance with housing needs, aftercare groups, recovery case management, telephone counseling and supportive check-ups for one year. Additionally, there will be Addiction Severity Index (ASI) follow-up surveys to measure client change across each of the ASI domains with monetary incentives.

C. PATHWAYS PROGRAM

Contractor shall provide women's residential alcohol and drug treatment services/beds and/or perinatal residential alcohol and drug treatment services/beds on an as-available and as-needed basis in accordance to the instructions below. Referrals for the use of beds must come through Mental Health Services Deputy Director or designee. In addition to the AOD Policy and Procedure Manual contractor will provide the following:

1. Residential and Perinatal Alcohol and Drug Treatment Services

Contractor shall provide the following services which are part of Contractor's basic women's residential alcohol and drug treatment program:

- a. Refer all appropriate unemployed program participants to the Department of Rehabilitation for assessment, job training, and placement;
- b. Review all medical needs of program participants and make appropriate referrals as required;
- c. Provide aftercare services upon completion of Contractor's residential alcohol and drug treatment program. Such aftercare services shall include development of an aftercare plan with each program participant prior to the final phase of the treatment program; and

2. Transitional Living

Contractor shall operate a transitional living program at a minimum of the following guidelines:

- a. Treatment is not provided at Juniper House, but resident lodgers are required to engage in counseling with an experienced drug and alcohol counselor; seek mental health services and take medications as prescribed; attend aftercare or continuing care support groups as recommended and actively follow and update a continuing care / relapse prevention plan.
- b. Lodgers are encouraged to attend 12 step meetings daily for the first ninety days and three times per week thereafter; and work the 12 steps of recovery under the direction of a sponsor.
- c. All lodgers are expected to actively engage an activity of at least 20 hours per week, which could be school, employment, or volunteer work.

3. Intensive Outpatient Services Alcohol and Drug Treatment Services

- a. Contractor shall provide three (3) hours a day of intensive nonresidential alcohol and drug treatment services. Such services shall be provided for clients three (3) to five (5) days per week as referred by the Mental Health Services Deputy Director or designee.
- b. Contractor shall provide the following services which are part of Contractor's basic women's intensive nonresidential alcohol and drug treatment program:
 - i. Case coordination and referrals with other San Mateo County providers as necessary;
 - ii. Collateral services will be provided to family member including education on substance abuse behavior and lifestyle, along with educational meetings on how to give support to the family member in treatment;
 - iii. Opportunities will be provided for participants to engage in community involvement activities, encouraging them to be active in their community and in society. These activities may include community service;
 - iv. Aftercare services upon completion of Contractor's intensive nonresidential alcohol and drug treatment program. Such aftercare services shall include

development of an aftercare plan with each program participant prior to the final phase of the treatment program.

4. Nonresidential Alcohol and Drug Treatment Services (Outpatient Services)
For each client referred to Contractor's nonresidential alcohol and drug treatment services Contractor shall provide:
 - a. Recovery-oriented group counseling. Program topics will include addiction and recovery, parenting skills, health issues, the twelve-step model of recovery, family dynamics, self-esteem, communication and conflict resolution, disease model of substance abuse, health issues, housing options, financial management, interviewing and job application skills, and ongoing educational workshops; and
 - b. Two (2) hours of relapse prevention each month including ongoing program activities, group and individual support, education, and ongoing links to community services.
5. Contractor's representative shall participate three (3) hours a week in the Pathways for Women program meetings at a time and location determined by the County.
6. County staff will develop and maintain mental health client treatment plans, provide case management and medication support services, and work with Contractor to coordinate client transportation needs.

**EXHIBIT B – PAYMENTS AND RATE OF PAYMENTS
WOMEN'S RECOVERY ASSOCIATION**

In full consideration of the services provided by Contractor, County shall pay Contractor as follows:

I. Alcohol and Drug Treatment and Recovery Services

A. FIXED RATE Negotiated Rate Contract (NRC):

In full consideration of the funded alcohol and drug treatment services provided to clients who lack the necessary resources to pay for all, or part of these services themselves. The County will pay Contractor the total contract amount in twenty four (24) monthly payments in a manner as outlined in the charts below. County will pay Contractor's monthly payment within (thirty) 30 days, upon timely submission of reports as outlined in the Alcohol and Other Drug Services (AOD) Policy and Procedure Manual.

July 1, 2009- June 30, 2010

Services	Funding amount	Monthly amount	Units Of Service per Fiscal Year BD, VD or SAH	Rate	# clients to be served	Slots
NRC Non Residential – Flat Rate	\$32,527	\$2,711	384	\$84.62	40	8
NRC Perinatal Residential Flat Rate	\$227,288	\$18,941	2228	\$102.00	17	6
NRC Residential – Women's Flat Rate	\$255,360	\$21,280	2917	\$87.54	28	8
County – Residential – Children Flat Rate	\$100,713	\$8,393	987	\$102.00	11	3
County – Intensive Outpatient – Flat Rate	\$69,202	\$5767	432	\$160.00	15	3
Strategic Directions 2010 Funding Residential – Families with young children	\$221,093	\$18,424	2167	\$102.00	16	6
Strategic Directions 2010 Women's Treatment Pilot	\$300,000	\$25,000	N/A	N/A	20	10
MHSA Co-Occurring Disorders	\$52,066	\$4338.83	N/A	N/A	0	0
TOTAL	\$1,258,249	\$104,855				

Summary of Funding for Priority Population

Funding Type	Total Funding Allocation	Priority Population Funding	Priority Population %	Allowable Discretionary Funding	Allowable Discretionary %
Annual Flat Rate	\$737,156	\$626,583	85%	\$110,573	15%
Strategic Directions 2010	\$521,093	\$521,093	100%	0	0%
TOTAL Funding	\$1,258,249	\$1,147,676	91.2%	\$110,573	8.8%

(*) Priority Populations as identified in the AOD Strategic Directions 2010 plan. The plan, as well as the funding, was approved by the Board of Supervisors. Discretionary funding can be used for non-priority population clients.

July 1, 2010- June 30, 2011

Services	Funding amount	Monthly amount	Units Of Service per Fiscal Year BD, VD or SAH	Rate	# clients to be served	Slots
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MHSA Co-Occurring Disorders	\$52,066	\$4338.83	N/A	N/A	0	0
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TOTAL Funding	\$1,258,249	\$1,147,676	91.2%	\$110,573	8.8%

(*) Priority Populations as identified in the AOD Strategic Directions 2010 plan. The plan, as well as the funding, was approved by the Board of Supervisors. Discretionary funding can be used for non-priority population clients.

B. VARIABLE RATE /FEE FOR SERVICE

In full consideration of the fee for service funded alcohol and drug treatment services provided to individuals who lack the necessary resources to pay for all, or part of these services themselves and are referred by the County, the variable amount County shall be obligated to pay for such services rendered under this Agreement and all other Agreements approved individually, or collectively by a resolution, shall not exceed the aggregate amounts stated in Section 3. Payments – Maximum Amount, in the main body of this Agreement.

1. SACPA and SACPA OTP Funded Services

The fees for SACPA and OTP funded services shall be as follows:

- a. Level I Standard Outpatient Treatment and Level I Plus Additional Outpatient Treatment
 - i. \$30.00 per individual for each one and one half (1½) hour group counseling session provided within the approved treatment period for SACPA and SACPA OTP funded outpatient alcohol and drug treatment and recovery services.

- ii. \$40.00 per individual for each one half (1/2) hour individual counseling session provided within the approved treatment period for SACPA and SACPA OTP funded outpatient alcohol and drug treatment and recovery services.
- iii. \$80.00 per individual for each one (1) hour intake assessment provided for SACPA and SACPA OTP funded outpatient alcohol and drug treatment and recovery services.
- iv. \$80.00 per individual for each one (1) hour exit assessment provided for SACPA and SACPA OTP funded outpatient alcohol and drug treatment and recovery services.
- b. Level II Day Treatment
\$85.00 per individual for each visit day provided within the approved treatment period for SACPA and SACPA OTP funded alcohol and drug day treatment and recovery services.
- c. Level III Residential Treatment
\$80.00 per individual for each bed day provided within the approved treatment period for SACPA and SACPA OTP funded residential alcohol and drug treatment and recovery services, including food, shelter and other basic needs.
- d. Level III- COD Residential Treatment
\$118.00 per client with co-occurring disorders for each residential treatment day completed within the approved treatment period.
- e. SB223 Drug Testing
The rate will not exceed the actual cost of the drug screen, plus an administrative fee as specified in the Contractor's approved Drug Testing Plan. Total cost reimbursed, including the administrative fee, will not exceed \$30.00 per screen.

2. CDCI and DCP Grant Funded Services

The fees for CDCI and DCP funded services shall be as follows:

- a. Outpatient Treatment Services
\$37.00 per individual for each one (1) hour individual and/or group counseling session provided for CDCI/DCP funded outpatient alcohol and drug treatment and recovery services.
- b. Day Treatment Services \$88.00 per individual for each visit day provided for CDCI/DCP funded alcohol and drug day treatment and recovery services.
- c. Residential Treatment Services
\$85.00 per individual for each bed day provided for CDCI/DCP funded residential alcohol and drug treatment and recovery services.
- d. Aftercare Treatment Services \$37.00 per individual for each one (1) hour group counseling session provided for CDCI/DCP funded aftercare alcohol and drug treatment and recovery services.
- e. Sober Living Environment Services
\$22.00 per bed day provided for CDCI/DCP funded sober living environment services. The individual receiving services will be charged a co-payment of \$330.00 per month. The first month's co-payment will be due on the day of move-in, and each subsequent co-payment will be due on the 1st of each month. Co-payments will be pro-rated if client does not receive services for the entire month.
- f. Drug Testing
The rate will not exceed the actual cost of the drug screen, plus an administrative fee as specified in the Contractor's approved Drug Testing Plan. Total cost reimbursed, including the administrative fee, will not exceed \$30.00 per screen.

3. Ryan White CARE Act Funded Services
 - a. Outpatient Treatment Services
\$37.00 per individual for each one (1) hour individual and/or group counseling session provided for Ryan White CARE Act funded outpatient alcohol and drug treatment and recovery services.
 - b. Day Treatment Services
\$88.00 per individual for each visit day provided for CDCI/DCP funded alcohol and drug day treatment and recovery services.
 - c. Residential Treatment Services
\$85.00 per individual for each bed day provided for Ryan White CARE Act funded residential alcohol and drug treatment and recovery services, including food, shelter and other basic needs.

C. FEE FOR SERVICE WITH ALLOCATION

1. Pathways Program

In providing its services and operations, Contractor will maintain compliance with requirements of the AOD Policy and Procedure Manual including additions and revisions, incorporated by reference herein. In full consideration of the Pathways Program services provided by Contractor, County shall allocate contractor a maximum of \$290,000 for the Pathways Program for the term of the Agreement. \$145,000 for FY 2009-10, and \$145,000 FY 2010-11.

Maximum amounts for specific services rendered by Contractor shall be as follows:

\$18,000 for Outpatient Treatment Services;
\$36,000 for Intensive Outpatient Treatment Services;
\$73,000 for Residential Treatment Services; and
\$18,000 for Sober Living Environment (SLE) Services.

Payment Rates for specific services by Contractor shall be as follows:

- a. \$38.70 per direct staff hour for Pathway Program funded outpatient alcohol and drug treatment and recovery services.
- b. \$116.00 per individual for each visit day provided for Pathway Program funded alcohol and drug day treatment and recovery services.
- c. \$135.00 per bed day provided for Pathway Program funded residential alcohol and drug treatment and recovery services.
- d. \$22.00 per bed day provided for Pathway Program funded services Sober Living Environment (SLE) alcohol and drug treatment and recovery services.

D. REQUIRED FISCAL DOCUMENTATION

1. Contractor's annual budget, and line item narrative justification covering all contracted services under this Agreement is subject to review and approval by the San Mateo County Alcohol and Other Drug Services program liaison for each fiscal year.
2. Contractor will comply with all fiscal and reporting requirements for funded services as specified in the AOD Policy and Procedure Manual.

F. AUTHORIZATION TO AMEND AGREEMENT

The Chief of the Health System is authorized to execute contract amendments which modify the County's maximum fiscal obligation by no more than \$25,000 (in aggregate), and/or modify the contract term and/or services so long as the modified term or services is/are within the current or revised fiscal provisions.

**ATTACHMENT 1 - ASSURANCE OF COMPLIANCE WITH SECTION § 504
of the Rehabilitation Act of 1973, as Amended
WOMEN'S RECOVERY ASSOCIATION**

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

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

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

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

Name of § 504 Person - Type or Print

Women's Recovery Association
1450 Chapin Ave 1st Floor
Burlingame, CA 94010

Name of Contractor(s) – type or Print

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 disabled 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."

**ATTACHMENT 2 - FINGERPRINTING COMPLIANCE FORM
WOMEN'S RECOVERY ASSOCIATION**

Contractor agrees that its employees and/or its subcontractors, assignees and volunteers who, during the course of performing services under this agreement, have contact with children will be fingerprinted in order to determine whether they have a criminal history which would compromise the safety of children with whom contractors employees, assignees and subcontractors or volunteers have contact.

Name

Title

Signature

Date

**ATTACHMENT 3 - CONTRACTOR'S DECLARATION FORM
COUNTY OF SAN MATEO
WOMEN'S RECOVERY ASSOCIATION**

I. CONTRACTOR INFORMATION

Contractor Name:	Women's Recovery Association	Phone:	(650) 348-6603
Contact Person:	Linda Carlson, Executive Director	Fax:	(650) 348-0615
Address:	1450 Chapin Ave 1st Floor Burlingame, CA 94010		

II. EQUAL BENEFITS (check one or more boxes)

Contractors with contracts in excess of \$5,000 must treat spouses and domestic partners equally as to employee benefits.

- Contractor complies with the County's Equal Benefits Ordinance by:
 - offering equal benefits to employees with spouses and employees with domestic partners.
 - offering a cash equivalent payment to eligible employees in lieu of equal benefits.
- Contractor does not comply with the County's Equal Benefits Ordinance.
- Contractor is exempt from this requirement because:
 - Contractor has no employees, does not provide benefits to employees' spouses, or the contract is for \$5,000 or less.
 - Contractor is a party to a collective bargaining agreement that began on ____ (date) and expires on (date), and intends to offer equal benefits when said agreement expires.

III. NON-DISCRIMINATION (check appropriate box)

- Finding(s) of discrimination have been issued against Contractor within the past year by the Equal Employment Opportunity Commission, Fair Employment and Housing Commission, or other investigative entity. Please see attached sheet of paper explaining the outcome(s) or remedy for the discrimination.
- No finding of discrimination has been issued in the past year against the Contractor by the Equal Employment Opportunity Commission, Fair Employment and Housing Commission, or any other entity.

IV. EMPLOYEE JURY SERVICE (check one or more boxes)

Contractors with original or amended contracts in excess of \$100,000 must have and adhere to a written policy that provides its employees living in San Mateo County up to five days regular pay for actual jury service in the County.

- Contractor complies with the County's Employee Jury Service Ordinance.
- Contractor does not comply with the County's Employee Jury Service Ordinance.
- Contractor is exempt from this requirement because:
 - the contract is for \$100,000 or less.
 - Contractor is a party to a collective bargaining agreement that began on ____ (date) and expires on (date), and intends to comply when the collective bargaining agreement expires.

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

Signature Name

Date Title