

**Child Abuse Prevention, Intervention and Treatment (CAPIT)  
In-Home Visitation Program and  
Promoting Safe and Stable Families (PSSF)  
Family Preservation and Family Time-Limited Reunification Services**

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**THIS AGREEMENT** made and entered into by and between the County of El Dorado, a political subdivision of the State of California (hereinafter referred to as “County”) and The Center for Violence-Free Relationships, a California Corporation, duly qualified to conduct business in the State of California, whose principal place of business is 344 Placerville Drive, Suite 11, Placerville, California 95667 (hereinafter referred to as “Contractor”);

**RECITALS**

**WHEREAS**, County has determined that it is necessary to obtain a Contractor to provide services for the Child Abuse Prevention, Intervention and Treatment (CAPIT) Program and the Promoting Safe and Stable Families (PSSF) – Family Preservation and Family Time-Limited Reunification components programs; and

**WHEREAS**, Contractor has represented to County that it is specially trained, experienced, expert, and competent to perform the special services required hereunder and County has determined to rely upon such representations; and

**WHEREAS**, it is the intent of the parties hereto that such services be in conformity with all applicable Federal, State (all references to “State” in this Agreement shall mean the State of California unless otherwise specified), and local laws; and

**WHEREAS**, County has determined that the provisions of these services provided by Contractor is in the public’s best interest and that these services are more economically and feasibly performed by outside independent Contractors as well as authorized by the El Dorado County Charter, Section 210(b)(6) or Government Code 31000.

**NOW, THEREFORE**, County and Contractor mutually agree as follows:

**ARTICLE I**

**Scope of Services:** Contractor agrees to furnish the personnel and equipment necessary to provide services described in Exhibit A, Scope of Services, incorporated herein and made by reference a part hereof.

**ARTICLE II**

**Term:** This Agreement shall become effective when fully executed by all parties hereto and shall expire June 10, 2013, unless terminated earlier pursuant to the provisions contained herein this Agreement under the Article(s) titled “Default, Termination, and Cancellation” or “Fiscal Considerations.”

**ARTICLE III**

**Compensation for Services:** For services provided herein, County agrees to pay Contractor in arrears and within forty-five (45) days following County’s approval of received itemized invoice(s) identifying Participant services rendered and containing all data specified herein below. Invoices from Contractor received by County and/or submitted for payment from Contractor and accepted by County shall not be deemed evidence of allowable Agreement costs.

Total amount of this Agreement shall not exceed \$121,000.00 for both the stated services and term as specified in Exhibit B, Budget, incorporated herein and made by reference a part hereof

Contractor shall submit invoice(s) quarterly (no later than January 31, April 30, and June 10, 2013). Failure to submit invoices quarterly may result in a significant delay in payment. Contractor will ensure the expenditure of all funds by June 10 of the fiscal year.

The Contractor will provide documentation demonstrating the expenditure of Contractor’s 10% cash or in-kind match, which will support the goals of child abuse and neglect prevention and intervention for CAPIT funding.

SERVICE	COUNTY BENCHMARK RATE	Funding		
		CAPIT	PSSF-FP	PSSF-FR
<b>Home Visitation</b>	Not to exceed \$45 per hour	X		
<b>Individual Counseling Session.</b> 50-60 minutes per session and per individual upon written authorization by County. Multiple Units of Service shall be allowed upon approval of County.	Current Drug Medi-Cal Reimbursement Rate for Program Code 20 (Alcohol and Drug Services) Outpatient Drug Free (ODF) Individual Counseling UOS Rate		X	X

SERVICE	COUNTY BENCHMARK RATE	Funding		
		CAPIT	PSSF-FP	PSSF-FR
<b>Family Therapy.</b> 1.5 hours per session upon written approval by County and wherein one (1) or more therapists or counselors treat no more than twelve (12) family members at the same time. Multiple Units of Service shall be allowed upon approval of County.	Current Drug Medi-Cal Reimbursement Rate for Program Code 20 (Alcohol and Drug Services) Outpatient Drug Free (ODF) Group Counseling UOS Rate per person		X	X
<b>Group Counseling.</b> 1.5 hours per session and per group therapy participant upon written approval by County and wherein one (1) or more therapists or counselors treat no less than three (3) and no more than twelve (12) group therapy participants at the same time. Multiple Units of Service shall be allowed upon approval of County.	Current Drug Medi-Cal Reimbursement Rate for Program Code 20 (Alcohol and Drug Services) Outpatient Drug Free (ODF) Group Counseling UOS Rate		X	X
<b>Monthly Client Progress Reports.</b> No later than (30) days after the end of each service month, Contractor shall provide the caseworker, at no charge to the County, with a brief written progress report outlining the primary issues being addressed with each Client, their progress, and ongoing treatment goals.	N/A	X	X	X
<b>Classes</b>	Not to exceed \$35.00 per person per class		X	X
<b>Mileage</b>	IRS-approved reimbursement rate	X		X

County shall not pay for “no shows,” cancellations, telephone calls, or preparation of required reports, casework, case management, case management review, review of written documentation or on-site observations or videos.

For families referred by and/or are CPS clients, whether court ordered, voluntary or differential response, Contractor shall immediately and verbally inform the CPS case worker, at no charge to County, of Participant appointment no-shows, cancellations or any other urgent concerns directly affecting Participant’s treatment plan.

The Contractor shall not charge County for services that have been paid, or will be paid, by another funding source or the difference between the amount that has or will be paid with another funding source and the actual cost of the service.

Contractor shall submit an original invoice for each separate funding source (CAPIT, PSSF-FP, PSSF-FR) that shall contain all of the following data:

- Contractor name, address and phone number.
- Funding source.
- Service date(s) and number of units of service per service date.
  - Multiple Units of Service: If Multiple Units of service are provided on a single day, enter reason on invoice. Contractor shall ensure that their Client record and Invoice clearly documents the date and type of each unit of service.
- Case number/identification code (if any).
- Client name(s). List the name(s) of each Client present for each service covered by the written authorizations, including the names of all Clients being seen at the same time for said service, such as In-Home Visitation services.
- Type of service(s) provided.
- Agreement rate for each service provided,
- Actual expenditures for services incurred by Contractor under this Agreement and pre-approved by County.
- Total amount billed to El Dorado County under the subject invoice.
- Statement verifying that Contractor is not charging County for services that have been paid, or will be paid, by another funding source or for the difference between the amount that has or will be paid with another funding source and the actual cost of the service.
- Contractor’s signature confirming fees charged and verifying that all information on the invoice is valid and correct. It is requested, but is not a requirement of this Agreement, that all original signatures be made using blue ink.
- Quarterly Report as discussed in the Article titled “Data and Reporting Requirements.”

Photocopied or faxed invoices shall only be accepted with pre-approval by the Health and Human Services Agency (HHS) Director, Assistant Director or Chief Fiscal Officer. Contractor shall ensure that only billing information is included on the invoice. Information related to Participant(s) diagnosis, prognosis or treatment is not permitted on the invoice. Invoices with “white-out” types of corrections shall not be accepted. Invoices are to be sent as follows:

<p><b><i>Please Send Invoices to:</i></b></p> <p>County of El Dorado Health and Human Services Agency Attn: CAPIT/PSSF Coordinator 3057 Briw Road, Suite A Placerville, CA 95667-5321</p>
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For all satisfactory services provided herein, County agrees to pay Contractor monthly in arrears and within forty-five (45) days following County's receipt and approval of all valid invoice(s) identifying services rendered.

#### **ARTICLE IV**

##### **Data and Reporting Requirements:** Contractor shall:

- A. Maintain, at a minimum, an individual case record for each Participant enrolled in Contractor's program. Individual Participant case records shall include but not be limited to:
  1. All pertinent information concerning each Participant's participation in said program.
  2. A written authorization for release of information from Participant allowing Contractor(s) to disclose information to County prior to documenting said information and include said written approval in Participant's case folder.
  3. Services performed on behalf Participant by Contractor's staff as it relates to Participant participation in the program.
- B. Comply with mandated reporting requirements of County, State or Federal agencies.
- C. Submit Quarterly Data Collection information reports (Quarterly Report) to the HHS/CAPIT/PSSF Coordinator that shall address Contractor(s)'s progress in addressing the achievement of the goals and objectives of this Agreement. The Quarterly Report shall include the Narrative and Data Survey for each funding source (CAPIT, PSSF-FP and PSSF-FR) as identified in Exhibit C, Reporting. The first Quarterly Report shall include a copy of the research-based instruction, materials, activities and forms being used in the activities. The quarterly reports shall be due no later than January 31, April 30 and June 10.
- D. Provide other information as requested by County, State or Federal agencies.

All required reports are to be sent as follows:

El Dorado County  
Health and Human Services Agency  
Attn: CAPIT/PSSF Coordinator  
3057 Briw Road, Suite A  
Placerville, CA 95667

Contractor(s) shall also provide assurance that it will, as requested, participate in independent evaluation(s) as may be conducted by County, State or Federal agencies.

For families referred by and/or are CPS clients, whether court ordered, voluntary or differential response, Contractor shall submit Monthly Client Progress Reports no later than (30) days after the end of each month. Contractor shall provide Caseworker, at no charge to County, with a brief written progress report that outlines the primary issues being addressed with each Client, their progress to date and ongoing treatment goals (see Exhibit D, monthly Client Progress Report, incorporated herein and made by reference a part hereof). A "service month" shall be defined as a calendar month during which Contractor provides Client services in accordance with "Scope of Services." If an alternate progress report is used, all fields noted on Exhibit D are mandatory. Progress reports shall be considered a required deliverable and services shall be

considered incomplete until such date as said reports are received and approved in writing by the appropriate HHS Caseworker and Supervisor or Program Manager. Failure to provide said progress report may delay payment for other preauthorized services, as said report is a required deliverable.

#### **ARTICLE V**

**Personnel Disclosure:** Contractor shall make available to HHS a current list of all personnel providing services hereunder. Changes to this list shall immediately be provided to HHS in writing. This list shall include:

1. All full or part-time staff positions by title, including volunteer positions whose direct services are required to provide the programs described herein; and
2. A brief description of the functions of each such position and the hours each position works each week or, for part-time positions, each day or month, as appropriate; and
3. The professional degree, if applicable, and experience required for each position; and
4. The name of person responsible for fulfilling the terms of this Agreement.

#### **ARTICLE VI**

**Political Activities Prohibited:** None of the funds, provided directly or indirectly, under this Agreement shall be used for any political activities or to further the election or defeat of any candidate for public office. Contractor shall not utilize or allow its name to be utilized in any endorsement of any candidate for elected office. Neither the Agreement nor any funds provided thereunder shall be utilized in support of any partisan political activities, or activities for or against the election of a candidate for an elected office.

#### **ARTICLE VII**

**Criminal Conviction:** Contractor shall immediately notify Contract Administrator concerning the arrest and/or subsequent conviction, for other than minor traffic offenses, for any paid employee and/or volunteer staff, when such information becomes known to the Contractor.

#### **ARTICLE VIII**

**Mandated Reporter Requirements:** Contractor acknowledges and agrees to comply with mandated reporter requirements pursuant to the provisions of Article 2.5 (commencing with Section 11164) of Chapter 2 of Title 1 of Part 4 of the California Penal Code, also known as The Child Abuse and Neglect Reporting Act.

#### **ARTICLE IX**

**Fingerprinting.** Pursuant to California Penal Code §11105.3(a), "Notwithstanding any other law, a human resource agency or an employer may request from the Department of Justice records of all convictions or any arrest pending adjudication involving the offenses specified in subdivision (1) of §15660 of the Welfare and Institutions Code of a person who applies for a

license, employment, or volunteer position, in which he or she would have supervisory or disciplinary power over a minor or any person under his or her care.” Therefore, Contractor warrants that its employees, subcontractors, assignees, volunteers and any other persons who, while providing services under this Agreement, have or may have supervisory or disciplinary power over any person or minor under his or her care, have been fingerprinted in order to determine whether they have a criminal history that would compromise the safety of persons or minors with whom they have contact in the course of provision of services under this Agreement. Contractor further warrants that said employees, subcontractors, assignees, volunteers and other persons have been cleared by Contractor to perform the services described in this Agreement. All fingerprinting services shall be at Contractor’s sole expense. More specifically, Contractor agrees that:

1. Each applicant for paid or volunteer employment by Contractor who shall or may have a supervisory or disciplinary power over a minor or any person under his or her care shall be fingerprinted in order to determine whether they have a criminal history, which would compromise the safety of such minor, or person(s) under his or her care. All fingerprinting shall be at Contractor’s sole expense.
2. The fingerprinting process as set forth above shall be completed and the results of the process shall be obtained before any of the Contractor’s employees, subcontractors, assignees or volunteers are assigned or permitted to work with any minor or person referred to Contractor by County. Alternatively, the Contractor may set a hire date prior to obtaining fingerprinting results contingent on the applicant certifying that: (1) his or her employment application truthfully and completely discloses whether he or she has ever been convicted of a felony or misdemeanor or been on parole or probation and (2) that the applicant understands that a background check shall be conducted and that he or she shall be immediately dismissed from employment if he or she has failed to provide information regarding convictions, has provided incomplete information regarding convictions, has omitted information regarding convictions or if the fingerprinting results reveal any conviction incompatible with employment with Contractor.
3. Contractor shall maintain, and make immediately available to County upon request, a written fingerprint certification for each employee, volunteer or applicant for paid or volunteer employment for whom fingerprinting is required as detailed above. Such certification shall state that the individual has been fingerprinted, shall provide the date of said fingerprinting and shall state whether or not the process has disclosed any criminal history of the individual, which may compromise the safety of minors or other persons with whom that individual has contact. Fingerprint information received from Department of Justice (DOJ) by Contractor shall be retained or disposed of pursuant to current DOJ directives.

## **ARTICLE X**

**Nondiscrimination:** Assurance of compliance with the El Dorado County Health and Human Services Agency nondiscrimination in State and Federally assisted programs requirements as follows:

Contractor hereby agrees that they shall comply with Title VI and VII of the Civil Rights Act of 1964 as amended; Section 504 of the Rehabilitation Act of 1973 as amended; the Age Discrimination Act of 1975 as amended; the Food Stamp Act of 1977, as amended, and in

particular Section 272.6; Title II of the Americans with Disabilities Act of 1990; California Civil Code Section 51 et seq., as amended; California Government Code section 11135-11139.5, as amended; California Government Code section 12940 (c), (h) (1), (i), and (j); California Government Code section 4450; Title 22, California Code of Regulations section 98000 – 98413; Title 24 of the California Code of Regulations, Section 3105A(e); the Dymally-Alatorre Bilingual Services Act (California Government Code Section 7290-7299.8); Section 1808 of the Removal of Barriers to Interethnic Adoption Act of 1996; and other applicable Federal and State laws, as well as their implementing regulations [including 45 Code of Federal Regulations (CFR) Parts 80, 84 and 91, 7 CFR Part 15, and 28 CFR Part 42], by ensuring that employment practices and the administration of public assistance and social services programs are nondiscriminatory, to the effect that no person shall, because of ethnic group identification, age, sex, color, disability, medical condition, national origin, race, ancestry, marital status, religion, religious creed, or political belief, be excluded from participation in or be denied the benefits of, or be otherwise subject to discrimination under any program or activity receiving Federal or State financial assistance; and hereby give assurance that it shall immediately take any measures necessary to effectuate this Agreement.

This assurance is given in consideration of and for the purpose of obtaining any and all Federal and State assistance; and Contractor hereby gives assurance that administrative methods/procedures which have the effect of subjecting individuals to discrimination or defeating the objectives of the California Department of Social Services (CDSS) Manual of Policies and Procedures (MPP) Chapter 21, shall be prohibited.

Contractor and County Representative shall, with oversight from the HHSA Civil Rights Coordinator, develop and implement a plan to allow County to monitor Contractor's non-discrimination and civil rights policies and procedures, as required by the CDSS. Monitoring shall include, but is not limited to: accommodation of individuals with hearing impairments, visual impairments and other disabilities; appropriate language services, including bilingual interpreters available to provide services and how written information is effectively communicated to individuals requiring accommodations; procedures for informing participants and potential participants of their civil rights, adequate Contractor staff training in the civil rights and cultural awareness requirements of Division 21; and procedures on informing participants or potential participants of their civil rights.

By accepting this assurance, Contractor agrees to compile data, maintain records and submit reports as required, to permit effective enforcement of the aforementioned laws, rules and regulations and permit authorized CDSS and/or Federal government personnel, during normal working hours, to review such records, books and accounts as needed to ascertain compliance. If there are any violations of this assurance, CDSS shall have the right to invoke fiscal sanctions or other legal remedies in accordance with Welfare and Institutions Code Section 10605, or Government Code section 11135-11139.5, or any other laws, or the issue may be referred to the appropriate Federal agency for further compliance action and enforcement of this assurance.

This assurance is binding on Contractor directly or through contract, license, or other provider services, as long as it receives Federal or State assistance.



County policy is intended to be consistent with the provisions of all applicable State and Federal laws.

#### **ARTICLE XI**

**HIPAA Compliance:** All data, together with any knowledge otherwise acquired by Contractor during the performance of services provided pursuant to this Agreement, shall be treated by Contractor and Contractor's staff as confidential information. Contractor shall not allow access to, disclose or use, directly or indirectly, at any time any such confidential information. If Contractor receives any individually identifiable health information ("Protected Health Information" or "PHI"), Contractor shall maintain the security and confidentiality of such PHI as required by applicable laws and regulations, including the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and the regulations promulgated thereunder.

#### **ARTICLE XII**

**Confidentiality and Information Security Provisions:** Contractor shall comply with applicable laws and regulations, including but not limited to The Code of Federal Regulations, Title CFR45, parts 160-164, regarding the access to and confidentiality and security of personal identifiable information (PII) and the Social Security Act §1106 regarding disclosure of information in possession of an Agency.

Personal identifiable information (PII) means any information that identifies, relates to, describes, or is capable of being associated with, a particular individual, including but not limited to, his or her name, signature, social security number, passport number, driver's license or state identification card number, insurance policy number, education, employment, employment history, bank account number, credit card number, or any other financial information.

##### **A. Permitted Uses and Disclosures of PII by Contractor.**

- (1) **Permitted Uses and Disclosures.** Contractor shall develop and maintain an information privacy and security program that includes the implementation of administrative, technical and physical safeguards appropriate to the size and complexity of Contractor's operations and the nature and scope of its activities. The information privacy and security programs must reasonably and appropriately protect the confidentiality, integrity, and availability of the PII that it creates, receives, maintains, or transmits; and prevent the use or disclosure of PII other than as provided for in this Agreement. Except as otherwise provided in this Agreement, Contractor, may use or disclose PII to perform functions, activities or services identified in this Agreement provided that such use or disclosure would not violate Federal or State laws or regulations.
- (2) **Specific Uses and Disclosures provisions.** Except as otherwise indicated in the Agreement, Contractor shall:
  - (a) Use and disclose PII for the proper management and administration of Contractor or to carry out the legal responsibilities of Contractor, provided that such use and disclosures are permitted by law; and

- (b) Take all reasonable steps to destroy, or arrange for the destruction of a customer's records within its custody or control containing personal information which is no longer to be retained by Contractor by (1) shredding, (2) erasing or (3) otherwise modifying the personal information in those records to make it unreadable or undecipherable through any means.

B. Responsibilities of Contractor.

(1) Contractor agrees to safeguards:

- (a) To prevent use or disclosure of PII other than as provided for by this Agreement. Contractor shall provide County with information concerning such safeguards as County may reasonably request from time to time; and
- (b) Contractor shall restrict logical and physical access to confidential, personal (e.g., PII) or sensitive data to authorized users only; and
- (c) Contractor shall implement appropriate authenticated and authorized persons. If passwords are used in user authentication (e.g., username/password combination), Contractor shall implement strong password controls on all compatible computing systems that are consistent with the National Institute of Standards and Technology (NIST) Special Publication 800-86 and SANS Institute Password Protection Policy.

(2) Contractor shall implement the following security controls on each server, workstation, or portable (e.g. laptop computer) computing device that processes or stores confidential, personal, or sensitive data:

- (a) Network based firewall and/or personal firewall; and
- (b) Continuously updated anti-virus software; and
- (c) Patch-management process including installation of all operating system/software vendor security patches.

(3) Mitigation of Harmful Effects. To mitigate, to the extent practicable, any harmful effect that is known to Contractor of a use or disclosure of PII by Contractor or its subcontractors in violation of the requirements of this Agreement.

(4) Agents and Subcontractors of Contractor. To ensure that any agent, including a subcontractor to which Contractor provides PII received from County, or created or received by Contractor, for the purposes of this Agreement shall comply with the same restrictions and conditions that apply through this Agreement to Contractor with respect to such information.

(5) Notification of Electronic Breach or Improper Disclosure. During the term of this Agreement, Contractor shall notify County immediately upon discovery of any breach of PII and/or data, where the information and/or data are reasonably believed to have been acquired by an unauthorized person. Immediate notification shall be made to County Privacy Officer at (530) 621-5852. Contractor shall take prompt corrective action to cure any deficiencies and any action pertaining to such unauthorized disclosure required by applicable Federal and State laws and regulations. Contractor shall investigate such breach and provide a written report of the investigation to County Privacy Officer, postmarked within thirty (30) working days of the discovery of the breach.

### **ARTICLE XIII**

**Access to Records:** Contractor shall provide access to the Federal, State or local Contractor agency, the Controller General of the United States, or any of their duly authorized Federal, State or local representatives to any books, documents, papers, and records of Contractor which are directly pertinent to this specific Agreement for the purpose of making an audit, examination, excerpts, and transcriptions.

### **ARTICLE XIV**

**Compliance with All Federal, State and Local Laws and Regulations:** Contractor shall comply with all Federal, State and local laws including, but not limited to, the Americans with Disabilities Act (ADA) of 1990 (42USC12101 et. seq.) and California Government Code Sections 11135-11139.5, and all regulations, requirements, and directives pertinent to its operations. Contractor shall abide by manuals, directives and other guidance issued by the State of California. All appropriate manuals and updates shall be available for review or reference by Contractor from County's Health and Human Services Agency.

Contractor shall further comply with all applicable laws relating to wages and hours of employment and occupational safety and to fire, safety and health and sanitation regulations. Such laws shall include, but not be limited to, the Copeland "Anti-Kickback" Act, the Davis-Bacon Act, the Contract Work Hours and Safety Standards Act, the Clean Air Act and amendments, the Clean Water Act and amendments, and the Federal Water Pollution Control Act.

Contractor further warrants that it has all necessary licenses, permits, notices, approvals, certificates, waivers and exemptions necessary for the provision of services hereunder and required by the laws and regulations of the United States, the State of California, the County of El Dorado and all other appropriate governmental agencies and shall maintain these throughout the term of the Agreement.

### **ARTICLE XV**

**Conflict of Interest:** The parties to this Agreement have read and are aware of the provisions of Government Code Section 1090 et seq. and Section 87100 relating to conflict of interest of public officers and employees. Contractor attests that it has no current business or financial relationship with any County employee(s) that would constitute a conflict of interest with provision of services under this contract and shall not enter into any such business or financial relationship with any such employee(s) during the term of this Agreement. County represents that it is unaware of any financial or economic interest of any public officer or employee of Contractor relating to this Agreement. It is further understood and agreed that if such a financial interest does exist at the inception of this Agreement either party may immediately terminate this Agreement by giving written notice as detailed in the Article in the Agreement titled, "Default, Termination and Cancellation."

## **ARTICLE XVI**

**Contractor to County:** It is understood that the services provided under this Agreement shall be prepared in and with cooperation from County and its staff. It is further agreed that in all matters pertaining to this Agreement, Contractor shall act as Contractor only to County and shall not act as Contractor to any other individual or entity affected by this Agreement nor provide information in any manner to any party outside of this Agreement that would conflict with Contractor's responsibilities to County during term hereof.

## **ARTICLE XVII**

**Assignment and Delegation:** Contractor is engaged by County for its unique qualifications and skills as well as those of its personnel. Contractor shall not subcontract, delegate or assign services to be provided, in whole or in part, to any other person or entity without prior written consent of County. Contractor identified the following entities in its Statement of Qualifications and Interest in response to the Request for Proposal #13-918-013 issued by the County, and the County consents to Contractor subcontracting, delegating or assigning services with these entities to provide the services specified in this Agreement: Family Connections El Dorado, Live Violence Free, and Tahoe Turning Point.

## **ARTICLE XVIII**

**Independent Contractor/Liability:** Contractor is, and shall be at all times, deemed independent and shall be wholly responsible for the manner in which it performs services required by terms of this Agreement. Contractor exclusively assumes responsibility for acts of its employees, associates, and subcontractors, if any are authorized herein, as they relate to services to be provided under this Agreement during the course and scope of their employment.

Contractor shall be responsible for performing the work under this Agreement in a safe, professional, skillful and workmanlike manner and shall be liable for its own negligence and negligent acts of its employees. County shall have no right of control over the manner in which work is to be done and shall, therefore, not be charged with responsibility of preventing risk to Contractor or its employees.

## **ARTICLE XIX**

**Changes to Agreement:** This Agreement may be amended by mutual consent of the parties hereto. Said amendments shall become effective only when in writing and fully executed by duly authorized officers of the parties hereto.

## **ARTICLE XX**

**Fiscal Considerations:** The parties to this Agreement recognize and acknowledge that County is a political subdivision of the State of California. As such, El Dorado County is subject to the provisions of Article XVI, Section 18 of the California Constitution and other similar fiscal and procurement laws and regulations and may not expend funds for products, equipment, or services not budgeted in a given fiscal year. It is further understood that in the normal course of County

business, County shall adoption of a budget does not occur until after the beginning of the fiscal year.

Notwithstanding any other provision of this Agreement to the contrary, County shall give notice of cancellation of this Agreement in the event of adoption of a proposed budget that does not provide for funds for the services, products or equipment subject herein. Such notice shall become effective upon the adoption of a final budget, which does not provide funding for this Agreement. Upon the effective date of such notice, this Agreement shall be automatically terminated and County released from any further liability hereunder.

In addition to the above, should the Board of Supervisors, during the course of a given year for financial reasons, reduce or order a reduction in the budget for any County department for which services were contracted to the performed, pursuant to this paragraph in the sole discretion of County, this Agreement may be deemed to be canceled in its entirety subject to payment for services performed prior to cancellation.

## **ARTICLE XXI**

### **Default, Termination and Cancellation:**

- A. Default: Upon the occurrence of any default of the provisions of this agreement, a party shall give written notice of said default to the party in default (notice). If the party in default does not cure the default with ten (10) days of the date of notice (time to cure), then such party shall be in default. The time to cure may be extended at the discretion of the party giving notice. Any extension of time to cure must be in writing, prepared by the party in default for signature by the party giving notice and must specify the reason(s) for the extension and the date on which the extension of time to cure expires. Notice given under this section shall specify the alleged default and the applicable Agreement provision and shall demand that the party in default perform the provisions of this Agreement within the applicable period of time. No such notice shall be deemed a termination of this Agreement unless the party giving notice so elects in this notice, or the party giving notice so elects in a subsequent written notice after the time to cure has expired.
- B. Bankruptcy: This Agreement, at the option of County, shall be terminable in the case of bankruptcy, voluntary or involuntary, or insolvency of Contractor.
- C. Ceasing Performance: Either party may terminate this Agreement in the event the other party ceases to operate as a business or otherwise becomes unable to substantially perform any term or condition of this Agreement.
- D. Termination or Cancellation Without Cause: Either party may terminate this Agreement in whole or in part seven (7) calendar days upon written notice to County for any reason. If such prior termination is effected, County shall pay for satisfactory services rendered prior to the effective dates as set forth in the Notice of Termination provided to Contractor, and for such other services, which County may agree to in writing as necessary for contract resolution. In no event, however, shall County be obligated to pay more than the total amount of the contract. Upon receipt of a Notice of Termination, Contractor shall promptly discontinue all services affected, as of the effective date of termination set forth in such Notice of Termination, unless the notice directs otherwise.

In the event of termination for default, El Dorado reserves the right to take over and complete the work by contract or by any other means.

**ARTICLE XXII**

**Notice to Parties:** All notices to be given by the parties hereto shall be in writing and served by depositing same in the United States Post Office, postage prepaid and return receipt requested. Notice to County shall be in duplicate and addressed as follows:

Notices to County shall be addressed as follows:

COUNTY OF EL DORADO  
HEALTH AND HUMAN SERVICES AGENCY  
3057 BRIW ROAD, SUITE A  
PLACERVILLE, CA 95667  
ATTN: DeAnn Osborn, Staff Services Analyst II

or to such other location as the County directs with a copy to:

COUNTY OF EL DORADO  
CHIEF ADMINISTRATIVE OFFICE  
PROCUREMENT AND CONTRACTS DIVISION  
330 FAIR LANE  
PLACERVILLE, CA 95667  
ATTN: TERRI DALY, PURCHASING AGENT

Notices to Contractor shall be addressed as follows:

THE CENTER FOR VIOLENCE-FREE RELATIONSHIPS  
344 Placerville Drive, Suite 11  
Placerville, CA 95667  
ATTN: Matthew Huckabay, Executive Director

or to such other location as Contractor directs.

**ARTICLE XXIII**

**Indemnity:** Contractor shall defend, indemnify and hold County harmless against and from any and all claims, suits, losses, damages and liability for damages of every name, kind and description, including attorneys fees and costs incurred, brought for, or on account of, injuries to or death of any person, including but not limited to workers, County employees and the public, or damage to property or any economic or consequential losses, which are claimed to or in any way arise out of or are connected with Contractor's services, operations or performance hereunder, regardless of the existence or degree of fault or negligence on the part of County, Contractor, subcontractor(s) and employee(s) or any of these, except for the sole or active negligence of County, its officers and employees, or as expressly proscribed by statute. This

duty of Contractor to indemnify and save County harmless includes the duties to defend set forth in California Civil Code Section 2778.

#### **ARTICLE XXIV**

**Insurance:** Contractor shall provide proof of a policy of insurance satisfactory to the El Dorado County Risk Manager and documentation evidencing that Contractor maintains insurance that meets the following requirements:

- A. Full Workers' Compensation and Employers' Liability Insurance covering all employees of Contractor as required by law in the State of California.
- B. Commercial General Liability Insurance of not less than \$1,000,000.00 combined single limit per occurrence for bodily injury and property damage and a \$2,000,000.00 aggregate limit.
- C. Automobile Liability Insurance of not less than \$1,000,000.00 is required in the event motor vehicles are used by Contractor in the performance of the Agreement.
- D. In the event Contractor is a licensed professional, and is performing professional services under this Agreement, professional liability (for example, malpractice insurance) is required with a limit of liability of not less than \$1,000,000.00 per occurrence. For the purposes of this Agreement, professional liability is required.
- E. Contractor shall furnish a certificate of insurance satisfactory to the El Dorado County Risk Manager as evidence that the insurance required above is being maintained.
- F. The insurance shall be issued by an insurance company acceptable to the Risk Management Division, or be provided through partial or total self-insurance likewise acceptable to the Risk Management Division.
- G. Contractor agrees that the insurance required above shall be in effect at all times during the term of this Agreement. In the event said insurance coverage expires at any time or times during the term of this Agreement, Contractor agrees to provide at least thirty (30) days prior to said expiration date, a new certificate of insurance evidencing insurance coverage as provided for herein for not less than the remainder of the term of the Agreement, or for a period of not less than one (1) year. New certificates of insurance are subject to the approval of the Risk Management Division and Contractor agrees that no work or services shall be performed prior to the giving of such approval. In the event Contractor fails to keep in effect at all times insurance coverage as herein provided, County may, in addition to any other remedies it may have, terminate this Agreement upon the occurrence of such event.
- H. The certificate of insurance must include the following provisions stating that:
  1. The insurer shall not cancel the insured's coverage without thirty (30) days prior written notice to County, and;
  2. The County of El Dorado, its officers, officials, employees and volunteers are included as additional insured, but only insofar as the operations under this Agreement are concerned. This provision shall apply to all liability policies except workers' compensation and professional liability insurance policies.
- I. Contractor's insurance coverage shall be primary insurance as respects County, its officers, officials, employees and volunteers. Any insurance or self-insurance maintained by County, its officers, officials, employees or volunteers shall be excess of Contractor's insurance and shall not contribute with it.
- J. Any deductibles or self-insured retentions must be declared to and approved by County. Either:

1. Insurer shall reduce or eliminate such deductibles or self-insured retentions as respects County, its officers, officials, employees, and volunteers; or
  2. Contractor shall procure a bond guaranteeing payment of losses and related investigations, claim administration and defense expenses.
- K. Any failure to comply with the reporting provisions of the policies shall not affect coverage provided to County, its officers, officials, employees or volunteers.
- L. The insurance companies shall have no recourse against the County of El Dorado, its officers and employees or any of them for payment of any premiums or assessments under any policy issued by any insurance company.
- M. Contractor's obligations shall not be limited by the foregoing insurance requirements and shall survive expiration of this Agreement.
- N. In the event Contractor cannot provide an occurrence policy, Contractor shall provide insurance covering claims made as a result of performance of this Agreement for not less than three (3) years following completion of performance of this Agreement.
- O. Certificate of insurance shall meet such additional standards as may be determined by the contracting County Department either independently or in consultation with the Risk Management Division, as essential for the protection of County.

#### **ARTICLE XXV**

**Interest of Public Official:** No official or employee of El Dorado County who exercises any functions or responsibilities in review or approval of services to be provided by Contractor under this Agreement shall participate in or attempt to influence any decision relating to this Agreement which affects personal interest or interest of any corporation, partnership or association in which he/she is directly or indirectly interested; nor shall any such official or employee of El Dorado County have any interest, direct or indirect, in this Agreement or the proceeds thereof.

#### **ARTICLE XXVI**

**Interest of Contractor:** Contractor covenants that Contractor presently has no personal interest or financial interest, and shall not acquire same in any manner or degree in either: 1) any other contract connected with or directly affected by the services to be performed by this Agreement; or, 2) any other entities connected with or directly affected by the services to be performed by this Agreement.

Contractor further covenants that in the performance of this Agreement no person having any such interest shall be employed by Contractor.

#### **ARTICLE XXVII**

**County Business License:** It is unlawful for any person to furnish supplies or services, or transact any kind of business in the unincorporated territory of El Dorado County without possessing a County business license unless exempt under County Code Section 5.08.070.



## ARTICLE XXVIII

**Debarment and Suspension Certification:** By signing this agreement, the Contractor agrees to comply with applicable Federal suspension and debarment regulations including, but not limited to 45 CFR 76 and Contractor further certifies to the best of its knowledge and belief that it and its principals or affiliates or any sub-contractor utilized under the agreement:

- A. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any federal department or agency;
- B. Have not within a three year period preceding this application/proposal/agreement been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- C. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in the above Paragraph B;
- D. Have not within a three (3)-year period preceding this Agreement had one or more public transactions (Federal, State or local) terminated for cause or default;
- E. Shall not knowingly enter in to any lower tier or subrecipient covered transaction with any person(s) who are proposed for debarment under Federal regulations (i.e., 48 CFR part 9, subpart 9.4) or are debarred, suspended, declared ineligible or voluntarily excluded from participation in such transactions, unless authorized by the State; and
- F. Shall include a clause entitled, "Debarment and Suspension Certification" that essentially sets forth the provisions herein, in all lower tier or subrecipient covered transactions in accordance with 45 C.F.R. Part 76.

If the Contractor is unable to certify to any of the statements in this certification, the Contractor shall submit an explanation in writing to County.

The terms and definitions herein have the meanings set out in the Definitions and Coverage sections of the rules implementing Federal Executive Order 12549.

If the Contractor knowingly violates this certification, in addition to other remedies available to the Federal and State Governments, County may immediately terminate this Agreement for cause or default.

## ARTICLE XXIX

**Annual Audit:** Pursuant to the Single Audit Act and the Office of Management and Budget (OMB) Circular A-133, any entity that receives a total of \$500,000 or more per year in federal funds for the purposes of carrying out federal programs must complete an annual audit. The funding threshold is aggregate funds from all sources. Contractor shall mail a certified copy of said completed annual audit to County's Health and Human Services Agency at the address listed in Agreement's "Notice to Parties" article within thirty (30) days of Contractor's receipt of same. All adverse audit findings must be documented and included with completed annual audit. Certified evidence of correction(s) of adverse audit findings shall be provided to County at the HHSA address listed in agreement's "Notice to Parties" article. A complete and current copy of OMB A-133 is available at <http://www.whitehouse.gov/omb/rewrite/circulars/a133/a133.html>

## **ARTICLE XXX**

**Accounting Systems and Financial Records:** Contractor shall be required to establish and maintain accounting systems and financial records that accurately account for and reflect all federal funds received, including all matching funds from the State, County and any other local or private organizations. Contractor's records shall reflect the expenditure and accounting of said funds in accordance with all State laws and procedures for expending and accounting for all funds and receivables, as well as meet the financial management standards in 45 Code of Federal Regulations (CFR), Part 92 and all current revisions of OMB Circular A-122. More particularly, Contractors are responsible for complying with OMB Circular A-122 and 45 CFR Part 92, and the allowability of the costs covered therein. Contractor must obtain written approval from HHSA Executive Management prior to the expenditure of any "special" or unusual costs in order to avoid possible disallowances or disputes based on any potential unreasonableness or unallowability of expenditures as detailed under the specific cost principles of OMB Circular A-122. In order to obtain the most current regulations, the user should consult not only the latest version of the CFR, but also the LSA issued in the current month. The *Federal Register* home page (<http://www.gpoaccess.gov/nara/index.html>) offers links to both the *Federal Register* and the CFR. An electronic CFR (e-CFR) is available at <http://www.gpoaccess.gov/ecfr/>. The e-CFR is an unofficial editorial compilation of CFR material and *Federal Register* amendments. It is a current, daily updated version of the CFR; however, it is not an official legal edition of the CFR. Please note that on-line versions of the CFR may not be the most current available.

## **ARTICLE XXXI**

**California Residency (Form 590):** All independent Contractors providing services to County must file a State of California Form 590, certifying their California residency or, in the case of a corporation, certifying that they have a permanent place of business in California. Contractor shall be required to submit a Form 590 prior to execution of an Agreement or County shall withhold seven (7) percent of each payment made to Contractor during term of the Agreement. This requirement applies to any agreement/contract exceeding \$1,500.00.

## **ARTICLE XXXII**

**Taxpayer Identified Number (Form W-9):** All independent Contractors or Corporations providing services to County must file a Department of the Treasury Internal Revenue Service Form W-9, certifying their Taxpayer Identification Number.

## **ARTICLE XXXIII**

**Administrator:** The County Officer or employee with responsibility for administering this Agreement is DeAnn Osborn, Staff Services Analyst, Health and Human Services Agency, or successor.

**ARTICLE XXXIV**

**Authorized Signatures:** The parties to this Agreement represent that the undersigned individuals executing this Agreement on their respective behalf are fully authorized to do so by law or other appropriate instrument and to bind upon said parties to the obligations set forth herein.

**ARTICLE XXXV**

**Partial Invalidity:** If any provision of this Agreement is held by a court of competent jurisdiction to be invalid, void or unenforceable, the remaining provision shall continue in full force and effect without being impaired or invalidate in any way.

**ARTICLE XXXVI**

**Venue:** Any dispute resolution action rising out of this Agreement, including, but not limited to litigation, mediation or arbitration, shall be brought in El Dorado County, California, and shall be resolved in accordance with the laws, of the State of California. Contractor waives any removal rights it might have under Code of Civil Procedure Section 394.

**ARTICLE XXXVII**

**No Third Party Beneficiaries:** Nothing in this Agreement is intended, nor will be deemed, to confer rights or remedies upon any person or legal entity not a party to this Agreement.

**ARTICLE XXXVIII**

**Entire Agreement:** This document and the documents referred to herein or exhibits hereto are the entire Agreement between the parties and they incorporate or supersede all prior written or oral Agreements or understandings.

**REQUESTING CONTRACT ADMINISTRATOR CONCURRENCE:**

By: \_\_\_\_\_

DeAnn Osborn, Staff Services Analyst II  
Health and Human Services Agency

Dated: \_\_\_\_\_

**REQUESTING DEPARTMENT HEAD CONCURRENCE:**

By: \_\_\_\_\_

Daniel Nielson, M.P.A.  
Director  
Health and Human Services Agency

Dated: \_\_\_\_\_

**IN WITNESS WHEREOF**, the parties hereto have executed this Agreement for Services #\_\_\_\_\_ on the dates indicated below.

**-- COUNTY OF EL DORADO --**

Dated: \_\_\_\_\_

By: \_\_\_\_\_

Chair  
Board of Supervisors  
"County"

ATTEST:  
Terri Daly, Acting Clerk  
of the Board of Supervisors

By: \_\_\_\_\_  
Deputy Clerk

Dated: \_\_\_\_\_

**-- CONTRACTOR --**

THE CENTER FOR VIOLENCE-FREE RELATIONSHIPS  
A CALIFORNIA CORPORATION

By: \_\_\_\_\_  
Matthew Huckabay  
Executive Director  
"Contractor"

Dated: \_\_\_\_\_

By: \_\_\_\_\_  
Corporate Secretary

Dated: \_\_\_\_\_

## **Exhibit A Scope of Services**

### **Services Summary:**

The Center for Violence-Free Relationships, Family Connections El Dorado, Tahoe Turning Point, and Live Violence Free will collaborate to provide services to individuals and families whose children are at risk of abuse, neglect, and/or exposure to family violence through trauma-informed services including: home visitation and family support; professional individual, child, youth, couples, and family psychotherapy; trauma-focused therapy group for children; parenting, co-parenting, 52-week parenting; family reunification; and anger management and domestic violence counseling. Services will focus on families with children birth through 5 years of age, families with special needs/developmental delays, marginalized families, and families living in isolated communities throughout El Dorado County.

The services delivered use best practice models of child abuse and violence prevention, intervention, and treatment delivered in agencies that have expertise in working with the identified populations. Logic models for service delivery design and implementation are a part of each agency's program development and implementation process. All the services have staff that is Spanish speaking, bilingual, and bicultural.

All services will be provided on the Western Slope and the South Lake Tahoe areas of El Dorado County. This county-wide collaborative will work with families in their homes and their communities who are at risk for or experiencing child abuse and neglect, and will provide intervention and skill building services to families who are unable or unwilling to access services traditionally.

Licensed Masters and PhD Marriage and Family Therapists, Clinical Social Workers and registered interns will provide professional mental health services. Clinicians utilize therapeutic models that are evidence-based best and promising practices, developmentally informed, biologically respectful and provided in the context of nurturing relationships that are key to effective interventions. The model(s) used will depend on the therapeutic needs of the client(s) as determined by the treating clinician and the referring sources. Examples of best practice models include: Structural Family Therapy, Cognitive Behavioral Therapy, Parent Child Interaction Therapy, Neurosequential Modeling Therapy, Eye Movement Desensitization and Reprocessing (EMDR), sand tray therapy, and art therapy. Frequency and duration of clinical services will be determined through the formal intake and assessment process as well as on-going clinical evaluation.

### **CAPIT - In-Home Visitation**

Priority will be given to isolated families with children five years of age or younger.

The home visitation programs will utilize evidence-based, nationally recognized and innovative approaches designed to empower parents and home visitors to work together to create a customized, competency based parenting program to meet the specific needs of families. The models used will include Nurturing Parent Program, Healthy Families America, CaiSAHF Plus, and the Promotora

model integrated for Latino families. The CAPIT services for home visitation will follow the guidelines set forth in the training documents for the models utilized.

Specific to these models is an approach that is based on supporting families whose children are at risk for abuse and neglect, violence prevention, and early intervention. Agency programs meet CAPIT funding priorities and are also recognized by the Substance Abuse and Mental Health Services Administration, the National Registry for Evidence-Based Parenting Programs, The Office of Juvenile Justice and Delinquency Prevention (OJJPD), and other state and local agencies and are proven programs for the prevention and treatment of child abuse and neglect.

Home visitation services will be provided to support and collaborate with families in maintaining or strengthening family or individual functions; to assess their needs, offer a number of different options, provide education, set goals, and assist clients in making positive choices to become and/or remain self-sufficient. Clients are able to learn new skills and tools to provide safer homes for themselves and their children. This unique approach empowers clients to take an active part in overcoming their difficult situations and strengthening their families to increase overall safety. Home visitors/family advocates assist with parenting and community resources and referrals (including physical and mental health); enhance child development; provide families with access to early intervention services (e.g., counseling, reunification) that can address problems before they manifest or are irreversible; and provide services during family crisis.

In accordance with the models for child abuse prevention and early intervention, clients begin services within 2 weeks of referral unless there is a crisis and contact is made within 24-48 hours. Families identified as lower risk may begin services after the highest risk families have been identified and served. Families will also be referred to other supportive services provided by the collaborative partners in the grant or they may be referred to other El Dorado County services as needed, (e.g., early intervention programs for children with developmental delay, other education services, medical care, food and shelter).

The services will take place in the family's home or community setting (if for safety reasons, a setting other than the home is required) for 60-120 minutes weekly. Home visitor service providers use positive outreach efforts to build family trust in accepting services. The intensity of service will be determined based on the initial assessment and referral information. The service plans will include regular face-to-face contacts and contacts by phone. The intensity of visits is adjusted based on the service plan. Service plans include goal-setting and matching activities and follow-up to those goals with the families.

Families receive 12 weekly home visits over a period of 2-3 months to ensure an increase in the families' knowledge of and ability to utilize the skills and practices, child and family safety and stability, the families' understanding of the impact of violence on children, maternal and child health, strengthening of parent-child relationships, knowledge of childhood development, and education about and access to community resources. Parents are often connecting outside the home visit through phone contact as well.

Providers have a standardized system, including assessment tools and eligibility criteria, for identifying and initiating services for families potentially in need of home visitor services.

Comprehensive and accurate information about the families is retained in client files. Client files are maintained on all clients and case management occurs weekly with supervisor and team. Standardized intake assessments include screening for emotional, developmental, and health concerns of the child/children, parenting and family needs assessment, Ages and Stages Questionnaire, Nurturing Skills Competency Scale, demographic information, and a standardized health assessment. Service plans are created with the family and agreed on with the participants.

Activities while in the home include, but are not limited to: parenting skills development, parenting education, child play activities, communication skills, homemaking skills, resource development skills, education support skills, and transportation to needed resources (i.e., medical or social service appointments). Referrals are made as needed to a broad array of child and family services and support as described above. Providers consider ethnic, cultural, language, and religious diversity issues when assigning home visitors to families and in conducting assessments.

The West Slope provider will maintain a maximum caseload of 18 families at a time. The Tahoe Basin provider will maintain a maximum case load of 8 families at a time. In accordance with the best practices of each model, the home visitor caseload is adjusted according to each family's particular range of needs as well as the complexity of the family's needs and strengths.

Referrals for families eligible for home visitation services will be made through the existing Children and Parents Resource Team (CPRT), the SLT Community Collaborative, as well as community referrals from agencies serving infants and young children who may be at risk for abuse, neglect, or exposure to family violence (e.g., Health and Human Services Agency, Marshall Hospital, Barton Hospital, health and mental health practitioners, early intervention programs, Head Start/Early Head Start, schools, and child welfare public and private institutions.)

Prior to the commencement of work for any services explicitly addressed under "Scope of Service" or "Compensation", Contractor shall obtain written authorization from HHSA that has been signed by the appropriate HHSA staff.

### **PSSF Family Preservation**

- Professional individual, family and child trauma-informed psychotherapy with a humanistic strength-based philosophical orientation. Multiple specialties include high conflict families; children/families/individuals who have been exposed to violence and trauma.
- Trauma Focused Behavioral Therapy group for children exposed to family violence called the Second Generation Project. The 12-week program is designed for children age 8-12 and combines group, individual and parent child sessions to increase effectiveness and family integration.
- Adoption support counseling; pre-placement prevention counseling and support.
- Evidence-based groups for parenting, co-parenting, and 52-week parenting.
- 8 week parenting workshop utilizing a nonviolent communication framework.

### **PSSF Family Reunification (Time-Limited)**

The following services will be provided on the Western Slope and in South Lake Tahoe:

- Professional individual, family and child trauma-informed psychotherapy with a humanistic strength-based philosophical orientation. Multiple specialties include high conflict families; children/families/individuals who have been exposed to violence and trauma.
- Trauma Focused Behavioral Therapy group for children exposed to family violence called the Second Generation Project. The 12-week program is designed for children age 8-12 and combines group, individual and parent child sessions to increase effectiveness and family integration.
- One-on-one crisis counseling and support groups to victims of sexual assault, domestic violence, and their loved ones.
- Anger management.
- Substance abuse and addictions counseling.
- Family reunification counseling and support.
- Transportation to or from any of the services and activities described above.



**Exhibit B  
Budget**

	<b>TOTAL</b>	<b>CAPIT</b>	<b>PSSF-FP*</b>	<b>PSSF-FR*</b>
The Center for Violence Free Relationships	\$15,000		\$7,500	\$7,500
Subcontractors:				
Family Connections El Dorado	66,070	\$54,270	5,900	5,900
Live Violence Free	26,730	26,730		
Tahoe Turning Point	13,200		6,600	6,600
<b>Agreement Total</b>	<b>\$121,000</b>	<b>\$81,000</b>	<b>\$20,000</b>	<b>\$20,000</b>
<b>Match:</b>				
The Center for Violence Free Relationships	\$1,500		\$750	\$750
Subcontractors:				
Family Connections El Dorado	6,607	\$5,427	590	590
Live Violence Free	2,673	\$2,673		
Tahoe Turning Point	1,320		660	660
<b>Match Total</b>	<b>\$12,100</b>	<b>\$8,100</b>	<b>\$2,000</b>	<b>\$2,000</b>

\* No more than ten (10) percent of the funds may be used for administrative costs.

## **Exhibit C Reporting**

### **I. CAPIT**

#### **Narrative**

1. Name of Service Provider.
2. What type of service/program does this provider deliver.
3. Describe the population served through CAPIT funding.
4. Does the provider have other funding source(s) that support this service/program?
5. Specify the tool(s) utilized and how the tool(s) was used to evaluate the service/program's effectiveness. Effectiveness should be measured by using a tool(s) inherent to or developed specifically for a participant in the service/program to measure the change or progress made by the participant (micro level). This tool can be a document, equipment, observation, etc.
6. Discuss the progress achieved by this service/program toward meeting the need of the clients/community as a whole. Progress can be reported as a change in (1) an outcome as discussed in the 2012 System Improvement Plan, (2) child welfare participation rates, (3) a change in demographics or systemic factor or (4) other. Include aggregated quantitative and/or qualitative data in the response.
7. How was client satisfaction measured?

#### **Data Survey**

Client counts are to be recorded as an unduplicated count within one participant categories and one ethnicity category as identified on the CAPIT Data Reporting form. The CAPIT Data Reporting form is to be submitted with each invoice.

### **II. PSSF FAMILY PRESERVATION**

#### **Narrative**

1. Name of Service Provider.
2. What type of service/program does this provider deliver.
3. Describe the population served through PSSF Family Preservation funding.
4. Does the provider have other funding source(s) that support this service/program?
5. Specify the tool(s) utilized and how the tool(s) was used to evaluate the service/program's effectiveness. Effectiveness should be measured by using a tool(s) inherent to or developed specifically for a participant in the service/program to measure the change or progress made by the participant (micro level). This tool can be a document, equipment, observation, etc.
6. Discuss the progress achieved by this service/program toward meeting the need of the clients/community as a whole. Progress can be reported as a change in (1) an outcome as discussed in the 2012 System Improvement Plan, (2) child welfare participation rates, (3) a change in demographics or systemic factor or (4) other. Include aggregated quantitative and/or qualitative data in the response.
7. How was client satisfaction measured?

### **Data Survey**

Client counts are to be recorded as an unduplicated count within one participant categories and one ethnicity category as identified on the PSSF Family Preservation Data Reporting form. Each service category is to be reported on a separate form. The PSSF Family Preservation Data Reporting form is to be submitted with each invoice.

### **III. PSSF TIME-LIMITED FAMILY REUNIFICATION**

#### **Narrative**

1. Name of Service Provider.
2. What type of service/program does this provider deliver.
3. Describe the population served through PSSF Time-Limited Family Reunification funding.
4. Does the provider have other funding source(s) that support this service/program?
5. Specify the tool(s) utilized and how the tool(s) was used to evaluate the service/program's effectiveness. Effectiveness should be measured by using a tool(s) inherent to or developed specifically for a participant in the service/program to measure the change or progress made by the participant (micro level). This tool can be a document, equipment, observation, etc.
6. Discuss the progress achieved by this service/program toward meeting the need of the clients/community as a whole. Progress can be reported as a change in (1) an outcome as discussed in the 2012 System Improvement Plan, (2) child welfare participation rates, (3) a change in demographics or systemic factor or (4) other. Include aggregated quantitative and/or qualitative data in the response.
7. How was client satisfaction measured?

#### **Data Survey**

Client counts are to be recorded as an unduplicated count within one participant categories and one ethnicity category as identified on the PSSF Family Reunification Data Reporting form. Each service category is to be reported on a separate form. The PSSF Family Reunification Data Reporting form is to be submitted with each invoice.

CAPIT DATA REPORTING  
HOME VISITATION

Provider: \_\_\_\_\_  
Reporting Period \_\_\_\_\_

# SAMPLE

New This Quarter?	Case Number/ID (assigned by provider)	Case Name	Participant Names (one per line)	Participant (select one)				Ethnicity (select one)						
				Child	Parent/ Caregiver	Child w/ Disability	Parent/ Caregiver w/ Disability	White--non-Hispanic	Hispanic	Black--non-Hispanic	Asian	Native American	Other (specify)	
No	123456	Smith, John	Smith, John			x		x						
"	"	"	Smith, Jane		x				x					
"	"	"	Smith, Joseph	x					x					

PSSF FAMILY PRESERVATION DATA REPORTING

Service Category: \_\_\_\_\_

Provider: \_\_\_\_\_

Reporting Period: \_\_\_\_\_

# SAMPLE

New This Quarter?	Case Number/ID (assigned by provider)	Case Name	Participant Names (one per line)	Participant (select one)				Ethnicity (select one)						
				Child	Parent/ Caregiver	Child w/ Disability	Parent/ Caregiver w/ Disability	White--non-Hispanic	Hispanic	Black--non-Hispanic	Asian	Native American	Other (specify)	
No	123456	Smith, John	Smith, John		x			x						
"	"	"	Smith, Jane		x				x					
"	"	"	Smith, Joseph			x			x					

PSSF FAMILY REUNIFICATION DATA REPORTING

Service Category: \_\_\_\_\_

Provider: \_\_\_\_\_

Reporting Period: \_\_\_\_\_

**SAMPLE**

New This Quarter?	Case Number/ID (assigned by provider)	Case Name	Participant Names (one per line)	Participant (select one)				Ethnicity (select one)						
				Child	Parent/ Caregiver	Child w/ Disability	Parent/ Caregiver w/ Disability	White--non-Hispanic	Hispanic	Black--non-Hispanic	Asian	Native American	Other (specify)	
No	123456	Smith, John	Smith, John		x			x						
"	"	"	Smith, Jane		x				x					
"	"	"	Smith, Joseph			x			x					



**El Dorado County  
Health and Human Services Agency  
Monthly Client Progress Report**

Provider's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Client's Name: \_\_\_\_\_

Social Worker: \_\_\_\_\_

**Dates of sessions since last report (please indicate no shows by writing "N/A" next to the date):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Assessment, goals and treatment plan:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Progress since last report:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please complete a progress report on each client referred by the El Dorado County Health and Human Services Agency - on a monthly basis and send the report to the appropriate office listed below:

West Slope Vendors, send report to:	East Slope Vendors, send report to:
Child Protective Services El Dorado County Health and Human Services Agency 3057 Briw Road Placerville, CA 95667	Child Protective Services El Dorado County Health and Human Services Agency 3368 Lake Tahoe Blvd., #100 South Lake Tahoe, CA 96150

\_\_\_\_\_  
Provider's Name

\_\_\_\_\_  
Provider's Signature

\_\_\_\_\_  
Date