

ORIGINAL

AGREEMENT FOR SERVICES #202-S0711 AMENDMENT IV

This Amendment IV to that Agreement for Services #202-S0711, 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 New Morning Youth and Family Services, Inc., a non-profit California Corporation, duly qualified to conduct business in the State of California, whose principal place of business is 6765 Green Valley Road, Placerville, CA 95667; (hereinafter referred to as "Subrecipient");

WITNESSETH

WHEREAS, Subrecipient has been engaged by County to provide child abuse prevention, intervention and treatment services for the Child Abuse Prevention, Intervention and Treatment (CAPIT) and Promoting Safe and Stable Families (PSSF) programs, of which the Differential Response Program is a component, for the Human Services Department, Social Services Division, in accordance with Agreement for Services #202-S0711, dated October 17, 2006, Amendment I, dated December 5, 2006, Amendment II, dated January 30, 2007, and Amendment III, dated July 17, 2007, incorporated herein and made reference a part hereof; and

WHEREAS, the parties hereto have mutually agreed to extend the term of said Agreement and increase the compensation, hereby amending **ARTICLE I – Scope of Services, ARTICLE II – Term, ARTICLE III – Compensation for Services; and ARTICLE IV - Program Monitoring and Statistical Reporting Responsibilities**, and

WHEREAS, the parties have mutually agreed to amend **ARTICLE XIV – Notice to Parties and ARTICLE XXXI – Administrator**; and

WHEREAS, the parties hereto have mutually agreed to add **ARTICLE XXXVI – Conflict of Interest, ARTICLE XXXVII – Medi-Cal Screening, ARTICLE XXXVIII - Compliance with All Federal, State and Local Laws and Regulations, ARTICLE XXXIX - Access to Records, and ARTICLE XL - County Business License**.

NOW THEREFORE, the parties do hereby agree that Agreement for Services #202-S0711 shall be amended a fourth time as follows:

ARTICLE I

Scope of Services: Subrecipient agrees that in order to prevent the occurrence or recurrence of child abuse in El Dorado County it shall provide County with county-wide prevention, intervention and treatment services for children, including the families of these children, who are abused, neglected, or at risk of abuse or neglect, under the Child Abuse Prevention, Intervention and Treatment (CAPIT) program as defined in the Welfare and Institutions Code Section 18960, et seq., and more clearly defined in Exhibit "A" marked "Child Abuse Prevention, Intervention and Treatment (CAPIT) Requirements", incorporated herein and made by reference a part hereof, and under the Promoting Safe and Stable Families (PSSF) Program as defined in the Welfare and Institutions Code Sections 16600-16605, and more clearly defined in Exhibit "B" marked "Promoting Safe and Stable Families (PSSF) Requirements", incorporated herein and made by reference a part hereof.

Subrecipient shall ensure that its services meet the goals and objectives of Exhibit "C" marked "El Dorado County Child Abuse Prevention, Intervention and Treatment (CAPIT), Community Based Child Abuse Prevention (CBCAP), and Promoting Safe and Stable Families (PSSF) Three Year Plan, 2005-2008", incorporated herein and made by reference a part hereof.

Subrecipient and its Providers shall participate in Multi-Disciplinary Teams as requested by County, at no charge to County.

Subrecipient and its Providers 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.

Subrecipient and its Providers shall ensure that all employees, volunteers, consultants, and agents performing services under this Agreement shall report child abuse or neglect to a child protective agency 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.

Subrecipient and its Providers shall require each employee, volunteer, consultant, and agent sign a statement acknowledging that he/she knows of and shall strictly comply with the reporting requirements as defined in 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.

Families to be served under this Agreement shall include those that are being served by the Department of Human Services (DHS) due to abuse or neglect, families with Child Welfare Services court-ordered case plans, and at-risk children referred for services by legal, medical or social service agencies. Isolated families shall be identified and served, especially those with children ages 0-14. Subrecipient and its Providers shall employ, and shall continue to employ, bicultural and/or Spanish-speaking staff that are culturally and linguistically competent and able provide the services described in this Agreement to English and Spanish-speaking clients. Subrecipient and its Providers' staff members shall regularly attend best-practice trainings in

order for county-wide access to the most up-to-date and effective therapeutic techniques to be readily accessible and available for the population they serve on behalf of the County.

CAPIT funds shall be used to provide services to children and their families at risk of abuse/neglect using proven programs with demonstrated effectiveness in prevention and intervention of child abuse. Services shall target isolated families, particularly those with children five (5) years of age or younger, including Spanish-speaking families and child victims of crime.

Activities using CAPIT funds that are to be completed between July 1, 2007 and June 10, 2009 include, but are not limited, to:

- Subrecipient shall publish a total of four (4) one-half (1/2) page advertisements in the Mt. Democrat newspaper prior to and during Child Abuse Prevention Month (April) in collaboration with the El Dorado County Child Abuse Prevention Council.
- Subrecipient shall provide child abuse prevention support, crisis intervention, assessment, and on-going therapy to a minimum of thirty (30) children ages 0 - 14 at risk of child abuse.
- South Lake Tahoe's Women's Center (SLTWC) shall provide six (6) Child Abuse Prevention Education presentations to Head Start Classrooms.
- SLTWC shall provide six (6) Child Abuse Prevention Education presentations to licensed child care facilities.
- SLTWC shall provide twenty (20) Child Abuse Prevention Education presentations to 200 South Lake Tahoe kindergarteners.
- SLTWC shall provide twenty (20) Child Abuse Prevention Education presentations to 200 South Lake Tahoe first graders.
- SLTWC shall provide fifteen (15) pregnant or parenting teens participating in the Young Parents Program at Mt. Tallac High School with ongoing/weekly case management, life skills training and parenting education.

PSSF funds shall be used to prevent unnecessary separation of children from their families, improve quality of care and services to children and their families, and ensure permanency for children by reuniting them with their parents, either by adoption or by another permanent living arrangement. PSSF funds shall be allocated and expended with a minimum of thirty percent (30%) in each of the following categories:

- Time-Limited Family Reunification
- Family Support Services
- Family Preservation Services

Activities using PSSF funds that are to be completed between July 1, 2007 and June 10, 2009 include, but are not limited, to:

- Subrecipient shall provide a minimum 250 safe bed nights and 700 meals to a minimum of twenty-five (25) children who are court-ordered into custody while Children's Protective Services (CPS) social workers identify appropriate long-term foster care placements.

- Subrecipient shall provide intake and initial assessment, case management and ongoing therapy to a minimum of eight (8) families residing on the Western Slope of El Dorado County (Western Slope).
- Subrecipient and Tahoe Youth and Family Services (TYFS) shall continue to act as coordinators in implementing the Differential Response Program on both the Tahoe Basin and the Western Slope by assessing, and linking a minimum of twenty-five (25) low-to-moderate risk families with services appropriate to their needs.
- TYFS shall provide the following services (up to 75 units of service), to a minimum of eight (8) pregnant and parenting teens and their children that are participating in the Young Parents Program at Mt. Tallac High School:
 - Intake and initial assessment;
 - Case management;
 - Family therapy;
 - Therapy for children ages 0-5 and 0-14; and
 - Individual and group counseling.
- TYFS shall provide the following services on an “as needed” basis (up to 225 units of service) to a minimum of twenty (20) Tahoe Basin families to be served in family, group, crisis and individual counseling:
 - Individual client intake;
 - Assessment;
 - Case management; and
 - Counseling services

These services shall be provided by TYFS for families with pregnant and parenting teens and families with children ages 0-14, with preference given to families with children ages 0-5 and families involved in the Differential Response and Voluntary Family Maintenance Programs through DHS.

- SLTWC shall provide individual parenting education in Spanish to fifteen (15) clients and group parenting education shall also be conducted in Spanish to a minimum of six (6) clients using a culturally appropriate, non-violent approach through the *Celebrando sus Padres* curriculum for Latina mothers with children ages 0-6.
- Subrecipient shall provide one (1) parenting education course in Spanish to a minimum of six (6) clients using a culturally appropriate, non-violent approach through the *Celebrando sus Padres* curriculum for Latina mothers with children ages 0 - 6.

Subrecipient and its Providers expending Five Hundred Thousand Dollars and No Cents (\$500,000.00) or more in a year in Federal awards shall provide County with an annual independent audit by a certified public accounting firm.

Subrecipient and its Providers shall maintain necessary program records documenting services performed and/or purchased and fiscal records showing expenditures made during the Agreement period. These records shall be open to inspection by representatives of the El Dorado County Department of Human Services and the State of California at all reasonable times. Upon request, Subrecipient and its Providers shall make these records available within the County to all authorized County, State (including Auditor-Controller), and Federal personnel. Records shall be maintained for at least five (5) years from the end of the Agreement period or until State audits are completed and closed, whichever is later.

Failure to perform requisite audit functions as required by the Agreement may result in County performing any necessary audit tasks or, at County's option, County may contract with a public accountant to perform the audit. All audit costs related to this Agreement are the sole responsibility of Subrecipient, who agrees to take corrective action to eliminate any material non-compliance or weakness found as a result of such audit. Audit work performed by County under this Agreement shall be billed to Subrecipient at County's costs.

ARTICLE II

Term: This Amendment shall become effective when fully executed by both parties hereto and shall cover the period of July 1, 2006 through June 30, 2009.

ARTICLE III

Compensation for Services: For services provided herein, County agrees to pay Subrecipient monthly in arrears. Subrecipient shall submit invoices no later than fifteen (15) days following the end of a "service month". An exception shall be the billing for June, which must be received by County no later than June 10 of each fiscal year. Subrecipient shall ensure the expenditure of all funds by June 10 of each fiscal year. For billing purposes, a "service month" shall be defined as a calendar month during which Subrecipient provides services.

Invoices for services rendered under the Agreement shall be submitted on a per client, per service basis and using client information numbers as demonstrated in the attached sample invoice, Revised Exhibit "D" marked "CAPIT/PSSF Invoice", incorporated herein and made by reference a part hereof. If an alternate invoice is used, all fields noted on Revised Exhibit "D" are mandatory. Subrecipient shall attach to each invoice a list of the names associated with client identification numbers, when the clients are referred by and/or are CPS clients, whether they are court-ordered or voluntary family maintenance clients.

For the purposes hereof, the maximum charges¹ to CAPIT/PSSF grants for each service shall be at the current State-approved Drug Medi-Cal (DMC) reimbursement rates, described in Exhibit "H" marked "Drug Medi-Cal (DMC) Reimbursement Rate Schedule Effective January 1, 2008,

¹ **Maximum Billing Rate Detail:** A) If it is determined the client has private insurance that covers the service(s), Subrecipient shall bill the appropriate insurance carrier first as primary insurance carrier. If the client's insurance covers the service at a rate less than the rate set forth in this Agreement, Subrecipient shall only bill the County for the difference. If the client has no insurance for the service, Subrecipient shall bill the County at the rate set forth in this Agreement. B) For individual therapy sessions, Subrecipient shall submit a single monthly invoice for each individual, noting the dates of service, the name of each individual treated, the type of treatment (individual therapy), the number of hours of service for each date, and the rate. C) For family therapy sessions, Subrecipient shall submit a single monthly invoice for each family, noting the dates of service, the names of the family members treated, the type of treatment (family therapy), the number of hours of service for each date, and the per person rate. D) For group therapy sessions, Subrecipient shall submit a separate, single monthly invoice for each group therapy participant for whom the County has requested service, noting the date(s) of service, the name of the individual treated, the type of treatment (group therapy), the number of hours of service for each date, and the rate.

El Dorado County Departments of Human Services and Public Health, Substance Abuse and Other Therapeutic Counseling and Treatment Services” except for the following rates:

<i>SERVICE</i>	<i>MAXIMUM RATE</i>
Bimonthly Client Progress Reports	No Charge
Child Abuse Prevention Education (1.5 hrs per session)	\$74.79 per session
Court Appearances	Current Drug Medi-Cal Reimbursement Rate for Individual Counseling Session upon subpoena by County and for time actually spent in courthouse.
Court Documents	Current Drug Medi-Cal Reimbursement Rate for Individual Counseling Session with a two (2) hour maximum per report.
Family Therapy (1.5 hrs per session)	\$31.56 per family member per session with a maximum twelve family members per session.
Group Parenting Education – in office (1.5 hrs per session)	\$74.79 per session
Individual Parenting Education (1.5 hrs per session)	\$31.56 per client per session with a maximum twelve members per session
Initial Assessment (due within 21 days of client’s initial visit)	No Charge
Multidisciplinary Team Meeting	No Charge
Parent Project	\$200 per class per person

The Subrecipient shall not charge CAPIT or PSSF funds for services that have been paid, or shall be paid, with another funding source or the difference between the amount that has or shall be paid with another funding source and the actual cost of the service. The exception shall be that Subrecipient shall be allowed to charge the difference between the daily cost to house a CPS child at the New Morning Youth and Family Services Shelter and the amount Subrecipient shall receive in foster care funds for the child, to the PSSF grant in the Time Limited Reunification category.

The total amount of this Agreement, as amended, shall not exceed \$377,839.00. This funding consists of \$137,500.00 in CAPIT grant funds and \$234,594.50 in PSSF grant funds. Child Welfare Services Outcome Improvement Project (CWSOIP) funds budgeted for and expended in Fiscal Year (FY) 2006/2007 amounted to \$5,744.20. This funding is contingent upon the availability of these funds from CDSS and the amount may change without notice.

Total funding distribution shall be as follows*:

- \$5,744.20 in CWSOIP funds, which were expended in FY 2006/2007;
- \$137,500.00 in CAPIT funds, of which \$42,500 was expended in FY 2006/07, \$52,500 is budgeted for FY 2007/08, and \$42,500 is anticipated for FY 2008/09; and
- \$234,594.50 in PSSF funds, with a minimum of 30% in each of the three (3) PSSF service component categories as shown below and of which \$85,475 was expended in FY 2006/07, \$74,559.75 is budgeted for FY 2007/08, and \$74,559.75 is anticipated for FY 2008/09:

- Family Preservation
- Family Reunification
- Family Support

*The expenditure of these funds is subject to the audit requirements under the Single Audit Act of 1984 and OMB Circular A-133.

ARTICLE IV

Program Monitoring and Statistical Reporting Responsibilities: County shall conduct on-site visits to the Subrecipient and Providers no less frequently than once a year to review compliance with this Agreement. To evaluate the performance in relation to the scope of work, unannounced site visits may be made to Subrecipient and Providers.

Subrecipient and Providers shall participate as requested by County, at no charge to County, in any research and/or evaluative studies designed to show the effectiveness and/or efficiency of Subrecipient and Providers service and/or to provide information about CAPIT and/or PSSF.

Subrecipient and Providers are responsible to provide any other information that may be requested or required by the Federal, State or County government regarding CAPIT or PSSF grants and services.

The Subrecipient and Providers shall provide each CPS office with clear direction(s) on how to refer under this funding stream within thirty (30) days of Board of Supervisors approval and execution of this Agreement.

When Subrecipient and/or Providers bill CPS for services under another Agreement, Subrecipient and Providers shall respond to any inquiry letters to verify why a said client is not or cannot be served under the funding sources specified under this Agreement.

Monthly, Subrecipient shall provide the following information to County, at no charge to County, regarding clients referred by CPS through the Differential Response Program to the Subrecipient and/or Providers:

- Names of clients provided an initial contact and date(s) of contacts;
- Names of clients offered services and the services offered provided; and
- Names of clients participating in services, the types of services and dates and locations of services.

Monthly, Subrecipient shall submit to County, at no charge to County, the Service Goals and Outcomes Summary, OCAP 150, in accordance with Revised Exhibit "E" marked "CAPIT, CBCAP, PSSF Service Goals and Outcomes Summary", incorporated herein and made by reference a part hereof which includes data on clients served by the Subrecipient and Providers for the previous calendar month. This report is due to County no later than the 15th of the month following the service month.

Quarterly, Subrecipient shall submit to County, at no charge to County, reports on Service Effectiveness containing information on Engagement, Short Term, and Intermediate Outcomes of services provided by Subrecipient and Providers in this Agreement, as outlined in Exhibit “F” marked “Child Abuse Prevention, Intervention & Treatment (CAPIT) Promoting Safe and Stable Families (PSSF) Service Effectiveness”, incorporated herein and made by reference a part hereof. This requirement shall include conducting pre- and post-service tests, as well as client surveys, designed to capture data as required by CDSS.

The Service Effectiveness quarterly reporting schedule is:

Service Period	Due Date
Beginning of Agreement through September 30th	October 31 st
October 1 through December 31	January 31 st
January 1 through March 31	April 30 th
April 1 through June 30	July 31 st

Semi-annually, Subrecipient shall submit to County the Service Goals and Outcomes Summary in accordance with Revised Exhibit “E” which includes data on clients served by Subrecipient and Providers from the date of the execution of this Agreement through December 31 and from January 1 through June 30. These cumulative reports shall be due to County no later than January 31 and July 31.

Annually, Subrecipient shall submit to County a list of all trainings attended during the fiscal year by Subrecipient and Providers staff that provide services under this Agreement. This report shall be due to County no later that July 31.

Subrecipient and Providers shall attend, if at all possible, at their own expense, any relevant state-sponsored training related to CAPIT or PSSF, offered in El Dorado or Sacramento Counties.

ARTICLE XIV

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.

Notices to County shall be addressed as follows:

COUNTY OF EL DORADO
HUMAN SERVICES DEPARTMENT
3057 BRIW ROAD
PLACERVILLE, CA 95667
ATTN: DEANN OSBORN, STAFF SERVICES ANALYST

or to such other location as the County directs.

Notices to Subrecipient shall be addressed as follows:

NEW MORNING YOUTH & FAMILY SERVICES, INC.
6765 GREEN VALLEY ROAD
PLACERVILLE, CA 95667
ATTN: DAVID ASHBY, EXECUTIVE DIRECTOR

or to such other location as the Subrecipient directs.

ARTICLE XXXI

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

ARTICLE XXXVI

Conflict of Interest: Subrecipient 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.

ARTICLE XXXVII

Medi-Cal Screening: Subrecipient shall screen 100% of referred clients for Medi-Cal eligibility. The screening shall include, but not be limited, to:

1. Verifying that the Medi-Cal beneficiary is eligible to receive Medi-Cal services at the time the client is referred for service; and
2. Verifying El Dorado County as the responsible County; and
3. Assessing for valid full scope aid codes; and
4. Monthly verification of client eligibility during the time the services are provided to the client.

ARTICLE XXXVIII

Compliance with All Federal, State and Local Laws and Regulations: Subrecipient 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. Subrecipient 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 Subrecipient from the County Department of Human Services.

Subrecipient 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.

Subrecipient 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 XXXIX


Access to Records: The Subrecipient 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 the Subrecipient which are directly pertinent to this specific Agreement for the purpose of making an audit, examination, excerpts, and transcriptions.

ARTICLE XL

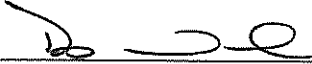
County Business License: It is unlawful for any person to furnish supplies or services, or transact any kind of business in the unincorporated territory of El Dorado County without possessing a County business license unless exempt under County Code Section 5.08.070.

Except as herein amended, all other parts and sections of that Agreement #202-S0711 shall remain unchanged and in full force and effect.

REQUESTING CONTRACT ADMINISTRATOR CONCURRENCE:

By:  Dated: May 13, 2008
DeAnn Osborn
Staff Services Analyst
Human Services Department

REQUESTING DEPARTMENT HEAD CONCURRENCE:

By:  Dated: 5/13/08
Doug Nowka
Director
Human Services Department

IN WITNESS WHEREOF, the parties hereto have executed this Fourth Amendment to that Agreement for Services #202-S0711 on the dates indicated below, the latest of which shall be deemed to be the effective date of this Amendment.

-- COUNTY OF EL DORADO --

Dated: _____

By: _____

Chairman
Board of Supervisors
"County"

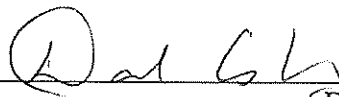
ATTEST:
Cindy Keck
Clerk of the Board of Supervisors

By: _____ Date: _____
Deputy Clerk

-- CONTRACTOR --

Dated: 5/9/08

NEW MORNING YOUTH AND FAMILY SERVICES, INC.,
A CALIFORNIA CORPORATION

By: 
David Ashby
Executive Director
"Subrecipient"

Revised Exhibit "D" to Agreement for Services #202-S0711 Amendment IV

CAPIT/PSSF INVOICE

Important: Only original invoices will be accepted. To help identify an original invoice, we would prefer vendors to use blue ink. White-out corrections will not be accepted. If providing family therapy, please note the names of all individuals seen.

Service Month: _____ Agreement for Services # 202-S0711
 Business/Owner Name: New Morning Youth and Family Services
 Business Address: 6765 Green Valley Road, Placerville, CA 95667
 Telephone #: (530) 622-5551

Providers: NM=New Morning, WC=SLTWC, TY=TYFS
 Service Provided:

IT=Individual Therapy, FT=Family Therapy,
 GT=Group Therapy, AI= Assessment/Intake,
 IPE=Indiv Parent Ed, GPE=Group Parent Ed,
 CE=Child Abuse Prevention Ed,
 CA=Child Abuse Prevention Advertising, SH= Shelter
 CM=Case Management

*Explain in comments

*Re: Total charge for service:

Does the client/participant have insurance that covers all or a portion of the billed rate?
 Is there another funding source to pay all or a portion of this service, e.g., insurance, Medi-Cal, EPSDT, or other grant funding?
 Was this funding source billed? Payment Received?

Was or will any DHS program be billed for this client for this service?

1	2	3	4	5	6	7	8	9	10	11	12				
	Service Date	Provider	Participant ID#	Location of Service	Services Provided	Unit (1) or Intern (2)?	# of Hours/Sessions	Rate/Hour or Session	Total Charge for service*	CAPT	PSSF - 78	PSSF - 79	PSSF - 79	Total Bill to DHS	Comments

Service Date	Provider	Participant IDs	Location of Service	Services Provided	Other #	Lic (1) or Inbarn (2)?	# of Hours/Sessions	Rate/Hour or Session	Total Charge for Service*	CAPT	PSSF - RN	PSSF - TS	PSSF - TP	Total Bill EDC DHS	Comments
Totals															

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

Authorized Signature _____

Send Invoice to:
El Dorado County
Dept. of Human Services
Attn: Accounting Unit
3057 Briw Road
Placerville, CA 95667

For County Use Only
Program Expense Authorization
Vendor ID#: 003231-01 Logged In: ___/___/___ By: ___
Approvals: _____ Date: ___/___/___
DHS Monitor: _____ Date: ___/___/___
Program Manager: _____ Date: ___/___/___

**El Dorado County
CAPIT/PSSF Service Goals and Outcomes Summary**

Report Period: _____

INSTRUCTIONS: Please provide information as requested. Check box designating whether report is for CAPIT or PSSF and complete one form for each. This summary is "service focused". Clients may access multiple services and shall be counted each time a service is provided during the reporting period. Count families only when services are provided to the entire family unit. Reports are due by the 15th of the month following the service month and must contain combined information from all service providers under this agreement. A cumulative report is due by January 31 for July-Dec. A cumulative report is due by July 31 for the fiscal year, July-June

Contractor: **New Morning Youth & Family Services**

Phone: _____ Date: _____ CAPIT

Fax: _____ E-mail: _____ PSSF

Client Centered Services:	Total number of clients receiving services										Re: CAPIT funded services	* Level of Evidence Based Practice, 0 - 4	Amt Spent	
	ages 0 - 5		ages 6 - 18		Adults (19 years - older)		Families							
	without disabilities	with disabilities	without disabilities	with disabilities	without disabilities	with disabilities	without disabilities	with disabilities	without disabilities	with disabilities				
Information and Referral														
Intake/Assessment														
Parent Education and Support														
Home Visiting														
Parent Leadership Training														
Family Therapy														
Group Therapy														
Self Help														
Play Therapy														
Child Development/Therapeutic Day Care														
Respite Care														
Child Care														
Hot Line/ Crisis Line														
Transportation														
Services to/ Prevention of homelessness														
Self Sufficiency/ Life Management Skills														
Educational/ Job Preparation														
Early Childhood Development/ Screening														
Follow-up Consultation/Services														
Other (Specify)														
TOTALS	0 - 5 w/o disability	0 - 5 disability	6 - 18 w/o disability	6 - 18 disability	Adults w/o disability	Adults disability	Adults w/o disability	Adults disability	Adults w/o disability	Adults disability	Families			

* See Exhibit "C", Attachment H/Page 56, All County Information Notice I-23-07 for description of evidence-based practice levels.

Revised Exhibit E

CAPIT

PSSF

**EI Dorado County
CAPIT/PSSF Service Goals and Outcomes Summary**

Client Characteristics:	Total number of clients receiving services								Gender					
	ages 0 - 5		ages 6 - 18		Adults (19 year - older)		Children		Adult		Male		Female	
	without disabilities	with disabilities	without disabilities	with disabilities	without disabilities	with disabilities	without disabilities	with disabilities	Female	Male	Female	Male	Female	Male
White (non-Hispanic)														
Hispanic														
Mexican, Mexican-American														
Cuban														
Puerto Rican														
Spanish, Central or South American														
Black (non Hispanic)														
Asian														
Korean														
Vietnamese														
Cambodian														
Asian-Indian														
Japanese														
Laotian														
Chinese														
Pacific Islander														
Hawaiian														
Samoan														
Guamanian														
Filipino														
Native American														
Other (specify)														
TOTALS														
Agency Centered Activities:	NUMBER OF PARTICIPANTS													
State or Regional Training	Parents (consumer of services)		County agency staff		Private nonprofit staff		Child Abuse Council staff		Other (specify)					
Peer Review														
Evaluation/ Research														
Other (Specify)														

EXHIBIT H

Drug Medi-Cal (DMC) Reimbursement Rate Schedule Effective January 1, 2008 El Dorado County Departments of Human Services and Public Health Substance Abuse and Other Therapeutic Counseling and Treatment Services

NOTE: Any changes to DMC rates by the State will become effective the first day of the month following the month that the State announces the approval of any change(s), i.e. formal adoption of the State budget.

Outpatient Services

Group Session (1.5 hrs)

- \$31.56
- A face-to-face session in which one or more therapists or counselors treat no less than three and no more than twelve clients at the same time, focusing on the needs of the individuals served.

Individual Counseling Session (50 minutes)

- \$74.79
- A face-to-face session between a client and a therapist or counselor.

Perinatal Group Session (1.5 hrs)

- \$63.62
- A face-to-face session in which one or more therapists or counselors treat no less than three and no more than twelve clients at the same time, focusing on the needs of the individuals served. Client must be pregnant and substance using; or parenting and substance using, with a child or children ages birth through 17 years. This includes a woman who is attempting to regain legal custody of her child (ren).
- Reimbursable only thru Perinatal Set-Aside and Perinatal Drug Medi-Cal funding

Perinatal Individual Session (50 minutes)

- \$106.08
- A face-to-face session between a client and a therapist or counselor. Client must be pregnant and substance using; or parenting and substance using, with a child or children ages birth through 17 years. This includes a woman who is attempting to regain legal custody of her child (ren).
- Reimbursable only thru Perinatal set-aside and Perinatal Drug Medi-Cal funding.

Day Care Rehabilitative

- \$67.55
- Substance abuse counseling and rehabilitation services lasting three or more hours, but less than 24 hours, per day, for three or more days per week.

Individual Assessment (50-60 minutes)

- \$74.79
- The evaluation or analysis of the cause or nature of mental, emotional, psychological, behavioral, and substance abuse disorders; the diagnosis of drug abuse disorders; and the assessment of treatment needs to provide medically necessary treatment services.

Intake (50 minutes)

- \$74.79
- The process of admitting a client into substance abuse treatment. Should include medical coverage evaluation, sliding fee scale determination, and other client demographic information.

Treatment Planning (50 minutes)

- \$74.79
- Collaborative session between program staff and client to identify problems, goals, action steps, and target dates as components of an individual's prescribed course of substance abuse treatment.

EXHIBIT H

Discharge (50 minutes)

- \$74.79
- Face-to-face final collaborative session between program staff and client to reinforce newly developed recovery skills and develop a plan to maintain those skills upon conclusion of treatment.

Crisis Intervention (50 minutes)

- \$74.79
- Face-to-face contact between a program staff person and a client in crisis. Services provided must focus on alleviating the crisis problem. Crisis means an unforeseen event or circumstance which presents an imminent threat of relapse, or actual relapse, to the client.

Case Management (50 minutes)

- \$74.79
- Activities involved in the integrating and coordinating of all necessary services to ensure successful treatment and recovery. This involves managing multiple clients and is limited to 4 episodes per month. Not billable per client.

Transitional Housing (per day)

- \$17.50
- A clean and sober living environment meeting the requirements of the California Association of Recovery Homes voluntary certification process. Clients in transitional housing shall be encouraged to actively seek permanent housing, work toward a high school diploma or GED if they do not possess one, and, if unemployed, begin an intensive job search within 72 hours of entering transitional housing.

Inpatient Services

Residential Treatment (per bed day)

- Not to exceed \$92.00. The actual rate will be negotiated between the purchaser and the vendor.
- The delivery of services to males and females in an inpatient setting. Program should consist of group education and counseling, drug screening, individual counseling, treatment planning and introduction to support programs such as AA/NA.

Residential Perinatal Treatment (per bed day)

- \$96.81
- The delivery of services to females who are pregnant or who have children age 17 or under, including women who are attempting to regain legal custody of their child (ren). Program should consist of group education and counseling, drug screening, individual counseling, treatment planning and introduction to support programs such as AA/NA.

Residential Perinatal Drug Medi-Cal (room and board per bed day)

- \$17.00
- Eligible clients must meet Title 22 Drug Medi-Cal requirements and program must be Drug Medi-Cal certified. Program should consist of group education and counseling, drug screening, individual counseling, treatment planning and introduction to support programs such as AA/NA.