



AMENDED IN COMMITTEE

12/13/17

FILE NO. 171174

RESOLUTION NO.

1 [Contract Amendment No. 2 - Richmond Area Multi-Services, Inc. - Department of Public  
2 Health - Vocational Rehabilitation Program - Not to Exceed \$20,739,037]

3 **Resolution approving Amendment No. 2 to the Department of Public Health contract for**  
4 **behavioral health services with Richmond Area Multi-Services, Inc., for Vocational**  
5 **Rehabilitation Program, to extend the contract by two years and ten months, for a total**  
6 **term of January 1, 2016, through October 31, 2020, with a corresponding increase of**  
7 **\$11,180,749 for a total amount not to exceed \$20,739,037.**

8  
9 WHEREAS, The mission of the Department of Public Health is to protect and promote  
10 the health of all San Franciscans; and

11 WHEREAS, The Department of Public Health provides health and behavioral health  
12 services through a wide network of approximately 300 Community-Based Organizations and  
13 service providers; and

14 WHEREAS, In 2015, the Department of Public Health selected Richmond Area Multi-  
15 Services, Inc. through a Request For Proposals process to provide behavioral health services  
16 for the period of January 1, 2016, through December 31, 2016, for an initial not to exceed  
17 amount of \$4,382,340; and

18 WHEREAS, The contract was amended once prior to requiring Board of Supervisors  
19 approval, resulting in an increase in term of January 1, 2016, through December 31, 2017, for  
20 a total contract amount not to exceed \$9,558,288; and

21 WHEREAS, The Department of Public Health wishes to extend the term of that  
22 contract in order to allow the continuation of services while Requests For Proposals are  
23 administered to take into account the changes to behavioral health services business needs  
24 related to the Affordable Care Act and the State Department of Health Care Services' 1115  
25

1 Demonstration Waiver pertaining to the delivery of substance abuse Drug Medi-Cal funded  
2 services; and

3 WHEREAS, The San Francisco Charter, Section 9.118, requires that contracts entered  
4 into by a department or commission having a term in excess of ten years, or requiring  
5 anticipated expenditures by the City and County of ten million dollars, to be approved by the  
6 Board of Supervisors; and

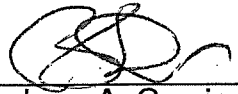
7 WHEREAS, The Department of Public Health requests approval of an amendment to  
8 the Department of Public Health contract for behavioral health services with Richmond Area  
9 Multi-Services, Inc. to extend the contract by two years and ten months, from January 1,  
10 2016, through December 31, 2017, to January 1, 2016, through October 31, 2020, with a  
11 corresponding increase of \$11,180,749 for a total amount not to exceed \$20,739,037; now,  
12 therefore, be it

13 RESOLVED, That the Board of Supervisors hereby authorizes the Director of Health  
14 and the Director of the Office of Contract Administration/Purchaser, on behalf of the City and  
15 County of San Francisco to amend the contract with Richmond Area Multi-Services, Inc.,  
16 extending the term of the contract by two years and ten months, through October 31, 2020,  
17 and increasing the total, not to exceed amount of the contract by \$11,180,749 to \$20,739,037;  
18 and, be it

19 FURTHER RESOLVED, That within thirty (30) days of the contract amendment being  
20 fully executed by all parties, the Director of Health and/or the Director of the Office of Contract  
21 Administration/Purchaser shall provide the final contract to the Clerk of the Board for inclusion  
22 into the official file (File No. 171174).

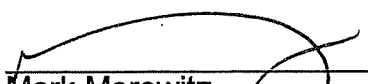
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RECOMMENDED:



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Barbara A. Garcia,  
Director of Health

APPROVED:



\_\_\_\_\_  
Mark Morewitz,  
Health Commission Secretary

<b>Item 6</b> <b>File 17-1174</b>	<b>Department:</b> Department of Public Health (DPH)
<b>EXECUTIVE SUMMARY</b>	
<b>Legislative Objectives</b>	
<ul style="list-style-type: none"> <li>• The proposed resolution would approve Amendment No. 2 to the Department of Public Health behavioral health services contract with Richmond Area Multi-Services, Inc., for the Vocational Rehabilitation Program, extending the contract by two years and ten months, for a total term of four years and ten months from January 1, 2016 through October 31, 2020, with a corresponding increase of \$13,045,642, increasing the total contract not to exceed amount from \$9,558,288 to \$22,603,930.</li> </ul>	
<b>Key Points</b>	
<ul style="list-style-type: none"> <li>• The Vocational Rehabilitation Employment and Training Programs operate under Community Behavioral Health Services under the Department of Public Health (DPH) and provide vocational rehabilitation services for consumers with behavioral health challenges.</li> <li>• In 2015, the Department of Public Health selected Richmond Area Services Inc. to provide five service categories: Peer-to-Peer Vocational Linkage, Clerical and Mailroom, Janitorial, Informational Technology, and Transitional Age Youth from January 1, 2016 through December 31, 2016 for an initial not to exceed amount of \$4,382,340, with four (4) one-year options for renewal at the City's sole discretion.</li> <li>• In July 2016, the Department of Public Health approved Amendment No. 1 to the contract to extend the contract through December 31, 2017 for a new total not to exceed amount of \$9,558,288.</li> </ul>	
<b>Fiscal Impact</b>	
<ul style="list-style-type: none"> <li>• Actual contract expenditures from January 1, 2016 through December 31, 2017 are expected to be \$6,942,158. Budgeted expenditures from January 1, 2018 through October 31, 2020, are \$13,796,879, for a contract total of \$20,739,037.</li> <li>• Approximately 30 percent of contract expenditures are paid by the City's General Fund and 70 percent of contract expenditures are paid by State and Federal funding. The Department of Public Health has sufficient funding in the FY 2017-18 and FY 2018-19 budgets to pay for contract expenditures.</li> </ul>	
<b>Recommendations</b>	
<ul style="list-style-type: none"> <li>• Amend the proposed resolution to reduce the contract not to exceed amount by \$1,864,893, from \$22,603,930 to \$20,739,037.</li> <li>• Approve the proposed resolution as amended.</li> </ul>	

**MANDATE STATEMENT**

City Charter Section 9.118(b) states that any contract entered into by a department, board or commission that has a term of more than ten years, or requires expenditures of \$10 million or more is subject to Board of Supervisors approval.

**BACKGROUND**

The Vocational Rehabilitation Employment and Training Programs operate under Community Behavioral Health Services under the Department of Public Health (DPH) and provide vocational rehabilitation services for consumers with behavioral health challenges. The Department of Public Health, along with four contracted independent agencies, administers 11 programs as part of the vocational services.

In April 2015, the Department of Public Health issued a request for qualifications to meet the needs of eight of the Vocational Rehabilitation Employment and Training Programs for the period of January 1, 2016 through December 31, 2016: (1) Employment Readiness, (2) Peer-to-Peer Vocational Linkage, (3) Clerical and Mailroom, (4) Food and Catering, (5) Janitorial, (6) Informational Technology, (7) Transitional Age Youth, and (8) Landscaping and Horticulture.

The vocational programs were separated into two groups: Group 1 contained all services except for Transitional Age Youth, and Group 2 for Transitional Age Youth services. Group 1 proposals were reviewed by a committee composed of representatives of the Sheriff's Department, Wellness and Peer Advocates, local academic experts, one front-line vocational program manager from DPH Community Behavioral Health Services, a Peer Consumer, and a representative of the Office of Economic and Workforce Development. The committee evaluated Group 1 proposals based on their history of providing the direct services solicited and a proven capacity to conduct programming.

Group 2 proposals (for Transitional Age Youth services) were reviewed by a committee composed of two program managers from different local community-based organizations which serve the target population, a representative of the Department of Children, Youth and Families, a Peer Consumer, a representative of the UCSF Citywide Employment Program, and one manager from DPH Community Behavioral Health Services. The committee evaluated Group 2 proposals based on a history of providing mental health services to transitional age youth, ages 15-25, and a proven understanding and expertise in the developmental needs of youth as opposed to that of young adults.

Richmond Area Multi-Services, Inc. (RAMS) submitted their qualifications and were scored for five of the service categories: (2) Peer-to-Peer Vocational Linkage, (3) Clerical and Mailroom, (5) Janitorial, (6) Informational Technology, and (7) Transitional Age Youth. The scores for the five services, as well as other bidders, are shown in Table 1 below.

**Table 1: Scores based on the Request for Qualifications for Five of the Eight Vocational Rehabilitation Employment and Training Programs**

#	Service Category	Proposer	Score
2	Peer-to-Peer Vocational Linkage Services	RAMS	94.67
2	Peer-to-Peer Vocational Linkage Services	Caminar	87.75
3	Clerical and Mailroom Services	RAMS	94.50
5	Janitorial Services	RAMS	101.42
6	Information Technology Services	RAMS	94.59
7	TAY Vocational Services	RAMS	97.00
7	TAY Vocational Services	Special Services for Groups	94.84
7	TAY Vocational Services	Youth Community Developers*	74.70

In 2015, the Department of Public Health selected Richmond Area Services Inc. to provide the five categories of vocational services for the period of January 1, 2016 through December 31, 2016 for an initial not to exceed amount of \$4,382,340, with four (4) one-year options for renewal at the City's sole discretion.

In July 2016, the Department of Public Health approved Amendment No. 1 to the contract to extend the contract through December 31, 2017 for a new total not to exceed amount of \$9,558,288.

#### DETAILS OF PROPOSED LEGISLATION

The proposed resolution would approve Amendment No. 2 to the Department of Public Health contract of behavioral health services with Richmond Area Multi-Services, Inc., for the Vocational Rehabilitation Program, extending the contract by two years and ten months, for a total term of four years and ten months from January 1, 2016 through October 31, 2020, with a corresponding increase of \$13,045,642, increasing the total contract amount not to exceed from \$9,558,288 to \$22,603,930.

According to Ms. Jacquie Hale, Director of the Department of Public Health Office of Contracts Management and Compliance, the contract term ends October 31, 2020 to correspond to the current duration of the Civil Service Commission's approval.<sup>1</sup> The contract will be changed to reflect this date. However, Ms. Hale expects the Department of Public Health to ask the Civil Service Commission for a third modification to the contract to extend the duration of the contract to December 31, 2020.

<sup>1</sup> Contracting out of professional services require Civil Service Commission approval. According to Ms. Hale, the Civil Service Commission approved contracting out for vocational services from November 1, 2015 through October 31, 2020. The Civil Service Commission typically provides its approval for periods up to five years only, requiring Departments to return for subsequent approvals.

**FISCAL IMPACT**

As shown in Table 2 below, actual contract expenditures from January 1, 2016 through December 31, 2017 are expected to be \$6,942,158. Budgeted expenditures from January 1, 2018 through October 31, 2020, are \$13,796,879, for a contract total of \$20,739,037, as summarized in Table 2 below.

**Table 2: Actual, Budgeted and Projected Expenditures**

<b>Actual and Expected Expenditures</b>	<b>Amount</b>
Actual Expenditures as November 30, 2017	\$6,267,307
Expected Expenditures to December 31, 2017	<u>674,851</u>
Subtotal Actual and Expected Expenditures	\$6,942,158
<b>Budgeted Expenditures under 2nd Amendment</b>	<b>Amount</b>
January 1, 2018 to June 30, 2018	2,173,878
July 1, 2018 to June 30, 2019	4,347,756
July 1, 2019 to June 30, 2020	4,347,756
July 1, 2020 to October 31, 2020	<u>1,449,252</u>
Subtotal, Budgeted Expenditures	12,318,642
12% Contingency	<u>1,478,237</u>
Total Budgeted Expenditures	\$13,796,879
<b>Total Actual and Budgeted Expenditures</b>	<b>\$20,739,037</b>
<b>Recommended Contract Reduction Based on Need</b>	<b>Amount</b>
Total Proposed Not to Exceed Amount	\$22,603,930
Total Needed Contract Amount	<u>20,739,037</u>
<b>Recommended Reduction</b>	<b>\$1,864,893</b>

Approximately 30 percent of contract expenditures are paid by the General Fund and 70 percent of contract expenditures are paid by State and Federal funding, including the State Realignment, Federal Substance Abuse and Mental Health Services Administration Grant and the State Mental Health Services Act. The Department of Public Health has sufficient funding in the FY 2017-18 and FY 2018-19 budget to pay for contract expenditures.

**RECOMMENDATIONS**

1. Amend the proposed resolution to reduce the contract not to exceed amount by \$1,864,893, from \$22,603,930 to \$20,739,037.
2. Approve the proposed resolution as amended.



**City and County of San Francisco  
Office of Contract Administration  
Purchasing Division**

**Second Amendment**

THIS AMENDMENT (this "Amendment") is made as of **July 1, 2017**, in San Francisco, California, by and between **Richmond Area Multi-Services, Inc.** ("Contractor"), and the City and County of San Francisco, a municipal corporation ("City"), acting by and through its Director of the Office of Contract Administration.

**Recitals**

WHEREAS, City and Contractor have entered into the Agreement (as defined below);  
and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to extend the performance period, increase the contract amount; and

WHEREAS, the Agreement was competitively procured as required by San Francisco Administrative Code Chapter 21.1 through **RFQ11-2015** issued **April 16, 2015** and this modification is consistent therewith; and

WHEREAS, approval for this Amendment was obtained when the Civil Service Commission approved Contract number **41068-14/15 on December 21, 2015**;

NOW, THEREFORE, Contractor and the City agree as follows:

**1. Definitions.** The following definitions shall apply to this Amendment:

**1a. Agreement.** The term "Agreement" shall mean the Agreement dated **January 1, 2016** between Contractor and City, as amended by:

First Amendment    dated July 1, 2016 and this second amendment

**1b. Other Terms.** Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Agreement.

**2. Modifications to the Agreement.** The Agreement is hereby modified as follows:

**2a. Section Article 2 - Term of the Agreement of the Agreement currently reads as follows:**

**Article 2 Term of the Agreement**

2.1 The term of this Agreement shall commence on the latter of: (i) January 1, 2016; or (ii) the Effective Date and expire on December 31, 2017, unless earlier terminated as otherwise provided herein.

2.2 The City has three (4) options to renew the Agreement for a period of one year each. The City may extend this Agreement beyond the expiration date by exercising an option at the City’s sole and absolute discretion and by modifying this Agreement as provided in Section 11.5, “Modification of this Agreement.”

- Option 1: 1/01/2017 – 12/31/2017 Exercised
- Option 2: 1/01/2018 – 12/31/2018
- Option 3: 1/01/2019 – 12/31/2019
- Option 4: 1/01/2020 – 12/31/2020

**Such section is hereby amended in its entirety to read as follows:**

**Article 2 Term of the Agreement**

2.3 The term of this Agreement shall commence on the latter of: (i) January 1, 2016; or (ii) the Effective Date and expire on October 31, 2020, unless earlier terminated as otherwise provided herein.

2.4 The City has three (4) options to renew the Agreement for a period of one year each. The City may extend this Agreement beyond the expiration date by exercising an option at the City’s sole and absolute discretion and by modifying this Agreement as provided in Section 11.5, “Modification of this Agreement.”

- Option 1: 1/01/2017 – 12/31/2017 Exercised
- Option 2: 1/01/2018 – 12/31/2018 Exercised
- Option 3: 1/01/2019 – 12/31/2019 Exercised
- Option 4: 1/01/2020 – 12/31/2020 Exercised

**2b. Article 3 Financial Matters, Section 3.3 Compensation, Section 3.3.1 of the Agreement currently reads as follows:**

**Article 3 Financial Matters**

### **3.3 Compensation.**

3.3.1 Payment. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed **Nine Million Five Hundred Fifty-Eight Thousand Two Hundred Eighty Eight Dollars (\$9,558,288)**. The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. In no event shall City be liable for interest or late charges for any late payments.

**Such section is hereby amended in its entirety to read as follows:**

### **Article 3 Financial Matters**

### **3.3 Compensation.**

3.3.1 Payment. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed **Twenty Two Million Six Hundred Three Thousand Nine Hundred Thirty Dollars (\$22,603,930)**. The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. In no event shall City be liable for interest or late charges for any late payments.

2c. The Appendices listed below are amended as follows:

- 1) Add Appendix A-1 through A-5 dated 7/1/2017 for FY 2017/2018 to Agreement as amended.
- 2) Delete Appendix B - Calculation of Charges and replace in its entirety with Appendix B - Calculation of Charges dated 7/1/2017 to Agreement as amended.
- 3) Add Appendix B-1 through B-5 dated 7/1/2017 for FY 2017/2018 to Agreement as amended.
- 4) Delete Appendix E - HIPAA Business Associate Agreement and replace in its entirety with Appendix E - HIPAA Business Associate Agreement dated April 22, 2016 to Agreement as amended.

**3. Effective Date.** Each of the modifications set forth in Section 2 shall be effective on and after July 1, 2017.

**4. Legal Effect.** Except as expressly modified by this Amendment, all of the terms and conditions of the Agreement shall remain unchanged and in full force and effect.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the day first mentioned above.

CITY

CONTRACTOR

Recommended by:

Richmond Area Multi-Services, Inc.

\_\_\_\_\_  
Barbara A. Garcia, MPA / Date  
Director of Health  
Department of Public Health

Approved as to Form:

Dennis J. Herrera  
City Attorney

By \_\_\_\_\_ / Date  
Kathy Murphy  
Deputy City Attorney

Approved:

\_\_\_\_\_  
Jorge Wong / Date  
Chief Executive Officer  
639 14th Avenue  
San Francisco, CA 94118

City vendor number: 15706

\_\_\_\_\_  
Jaci Fong / Date  
Director of the Office of  
Contract Administration, and  
Purchaser

CONTRACTOR NAME: RICHMOND AREA MULTI-Services, Inc.	Appendix A-1
Program Name: Hire-Ability Janitorial Services	Contract Term: 07/01/17-06/30/18

**1. Identifiers:**

Program Name: Hire-Ability Janitorial Services  
 Program Address: 1234 Indiana Street  
 City, State, ZIP: San Francisco, CA 94107  
 Telephone/FAX: (415) 282-9675 (415) 920-6877  
 Website Address: www.ramsinc.org / www.hire-ability.org  
 Contractor Address (if different from above): RAMS Administration, 639 14<sup>th</sup> Avenue  
 City, State, ZIP: San Francisco, CA 94118  
 Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
 Telephone: (415) 800-0699  
 Email Address: angelatang@ramsinc.org  
 Program Code(s) (if applicable): Not Applicable

**2. Nature of Document:**

New  Renewal  Modification

**3. Goal Statement:**

To provide employment and internship opportunities within the janitorial field for qualified and work ready consumers within the community behavioral health system.

To improve the emotional/physical well-being and quality of life, positive community engagement, increase self-sufficiency, and to obtain & retain employment.

**4. Target Population:**

San Francisco residents age 18 and over, adults & older adults including transitional age youth, , , who are currently receiving behavioral health services through BHS. Particular outreach will be made to underserved populations and those interested in the janitorial industry.

**5. Modality(s)/Intervention(s):**

See CBHS Appendix B, CRDC pages.

**6. Methodology:**

A. Outreach, recruitment, promotion, and advertisement as necessary.

RAMS' responsibility and commitment to mental health care quality and education extends beyond its own walls to reach people of all ages and backgrounds in its community through outreach and serving them in their own environments. This philosophy of care has always been central to the agency's approach. RAMS is uniquely well-positioned and has the expertise to outreach, engage, and retain diverse consumers, underrepresented constituents, and community organizations with regards to vocational services & resources and raising awareness about mental health and physical well-being. As an established community services provider, RAMS comes into contact with significant numbers of consumers & families, annually serving about 18,000 adults, children, youth & families at over 90 sites, citywide.

Specifically for Hire-Ability Janitorial Services, the program promotes open janitorial positions within the system of care by outreach and recruitment activities through linkages with BHS community agencies, Department of Rehabilitation (DOR), Co-Operative partners within the BHS

Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-1
Program Name: Hire-Ability Janitorial Services	Contract Term: 07/01/17-06/30/18

Vocational Services system, and to other employment linkages that directly outreach to consumers within BHS. Targeted recruitment for employment also includes participants who have completed the Hire-Ability Vocational Services 4-month long Occupational Skills Training Certificate program in janitorial, funded by Department of Rehabilitation which prepares graduates for competitive employment within the janitorial field. Outreach and recruitment for this program includes community outreach presentations at BHS (and contract) clinics, participating in group presentations with the DOR/BHS vocational co-op, and announcements (emails, flyers) through the DOR/BHS vocational co-op partners. Hire-Ability also holds an open house orientation once per month to introduce services to potential applicants. Graduates of this program are provided employment services assistance, working directly with employment consultants to prepare for competitive employment through a variety of activities such as interview preparation, resume development, and job development and coaching assistance. The employment services program follows the *Individual Placement & Support Model*, which is strengths- and evidenced-based supported employment model that has been successful for individuals with chronic behavioral health issues. Graduates of this program and applicants that meet qualifications for janitorial positions are provided opportunities and assistance to apply and interview for open positions.

B. Admission, enrollment and/or intake criteria and process where applicable.

*Employment:*

The employment portion of Hire-Ability Janitorial Services works in conjunction with the Janitorial Services internship program, Department of Rehabilitation, BHS clinics, and Employment Services partners and linkages to refer qualified participants to open employment positions within this program. The process is equivalent to other competitive employment positions within RAMS which include screening of applicants which may result in face to face interviews and potential employment offers.

*Internship:*

The internship portion of Hire-Ability Janitorial Services accommodates referrals from BHS and other community agencies within the System of Care. All requests for services are directed to the Intake Coordinator, who then provides the individual with the necessary information to apply to the program. The program has an application process by which interested individuals are to submit their completed application packet within the indicated deadline. Application packets include basic demographic information (name, contact information), reference contact information, referral form, and resume. Individuals who qualify under the initial screening (a coordinated effort of review by staff including the Vocational Rehabilitation Services Coordinator, Associate Director of Vocational Services, and internship site manager) are invited for a face-to-face interview with the Vocational Rehabilitation Services Coordinator and Associate Director of Vocational Services. These initial assessments are aimed to determine program eligibility, vocational readiness/interest, suitability of program services, strengths & existing resources, level of functioning & needs in consultation with behavioral health services provider, primary care connection, substance use/abuse, and other services (e.g. residential). If an individual is not accepted into the program based on suitability for these program services, the Vocational Rehabilitation Services Coordinator makes a referral to one of Hire-Ability Programs or to another service provider.

Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-1
Program Name: Hire-Ability Janitorial Services	Contract Term: 07/01/17-06/30/18

- C. Service delivery model, including treatment modalities, phases of treatment, hours of operation, length of stay, locations of service delivery, frequency and duration of service, strategies for service delivery, wrap-around services, residential bed capacity, etc. Include any linkages/coordination with other agencies.

Hire-Ability program hours are Monday to Friday (9:00 am – 5:00 pm); however, on-the-job hours may vary, depending on the job site's needs.

**Employment:**

Janitorial Services employment program provides on-the-job training and supervision to employees within this program. RAMS Management also coordinates coverage for vacancies or absences. Employees are provided with a robust and comprehensive job retention support system with close coordination of supervision and support between the RAMS Janitorial Manager, Administrative Coordinator, Associate Director, and BHS site managers. All employees receive an initial orientation by RAMS human resources department upon hire. The employee is then oriented to their individual position through on-site supervision and time limited job coaching for employees receiving employment services. Employees participate in regular, interactive individual and group supervision meetings. In addition, there are regular quarterly trainings in various areas such as health and safety, ergonomics, blood borne pathogen, and other pertinent trainings such as communication and professionalism, boundaries, and other pertinent work related trainings as well as RAMS sponsored health and wellness retreats. Site specific trainings usually take place on a monthly basis or as needed. Employees may also access and/or be linked to the Employee Assistance Program (EAP) to assist with a variety of life building resources. In addition, starting in 2015, RAMS secured funding (from another source) to operate a peer workforce support services program which offers 24/7 telephonic and online support as well as group and individual support (e.g. monthly drop-in groups, WRAP groups); the services are targeted towards peers and family members with an emphasis on issues relating to work.

To gather information and feedback on janitorial services, RAMS continuously engages CBHS site managers in various methods such as in-person meetings and telephone calls, at least quarterly. The Hire-Ability Janitorial Services fosters a work environment that promotes healthy behaviors, a sense of hope and belonging, responsibility and strengthens roles of consumers through employment and professional development activities.

**Internship:**

The Janitorial Services internship program design includes providing culturally competent, consumer-driven, strengths-based workforce development activities and vocational services including but not limited to: vocational assessments, job skills training, on-site work experience, vocational counseling, and job coaching. The program improves, maintains, or restores personal independence and functioning, consistent with requirements for learning and development, which provides services to a distinct group of beneficiaries.

The internship duration is six to nine months with each intern receiving 10-20 hours per week of paid, on-the-job training with work hours varying, depending on the individual's availability & support needs. Internship components include general office cleaning; floor & carpet care; and restroom cleaning. Each intern is assigned a Vocational Rehabilitation Case Manager, and a Peer Job Coach as needed; and works with the Janitorial Manager and/or Site Supervisor for orientation to the tasks. The Vocational Rehabilitation Case Manager conducts vocational assessments, facilitates vocational orientation & exploration, performs vocational counseling (case management & linkages), supports and identifies strengths & areas of employment interest, and provides job counseling & guidance. The Peer Job Coach and Janitorial Manager and/or Site Supervisor provides job training and coaching,



Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-1
Program Name: Hire-Ability Janitorial Services	Contract Term: 07/01/17-06/30/18

coordinate training and support needs with the Vocational Case Manager and BHS site manager, and provide feedback and vocational support to the intern.

At the start of services and at regular intervals, a vocational assessment is completed with each intern. The vocational assessment is a comprehensive process that systematically utilizes an interview to assist the intern in the identification of goals leading towards vocational development. These areas, as they relate to employment, include: work needs (e.g. reasonable accommodations), identifying community supports (therapists/case managers, support groups, family & friends), cultural and/or language issues, work-related issues (concentration, stress, retention of instruction, safety habits, work behavior), psychiatric functioning (behavioral health condition), appearance & grooming, and external factors (financial concerns, living arrangement, medical care). A written report is developed summarizing the assessment, findings & recommendations, which informs the vocational plan and structure for job skills training.

During the vocational services planning, the Vocational Rehabilitation Case Manager and intern discuss how strengths can be utilized to make changes on their current conditions, to promote & sustain healthy mental health, and obtain and retain employment. The Vocational Rehabilitation Case Manager also gathers relevant information from the intern and other service providers and/or family members, as it relates to employment. An integrated vocational plan for goals is formally developed within the first month of participation and on a quarterly basis thereafter, with ongoing monitoring of progress at each meeting/vocational activity, and formally reviewed at the third month. The assessment/evaluation and plan development includes the intern's input through self-evaluation sections as well as the Vocational Rehabilitation Case Manager's appraisal and feedback from the Peer Job Coach and BHS site manager. RAMS engages BHS site managers in various methods including in-person meetings and telephone calls, at least quarterly. The comprehensive vocational plan also considers the intern's environment and entire support structure as well as specific employment goals, and takes into account collateral information (e.g. behavioral health treatment plan incorporates vocational goals). Staff are also trained to identify signs of psychiatric relapse and, through collaboration with the intern's therapist, implements the appropriate interventions. Together, the Vocational Rehabilitation Case Manager and intern set goals and identify strategies that are attainable & measureable. RAMS also facilitates linkages for support services (e.g. transportation, child care).

Vocational training and skills building is provided through various capacities. The Janitorial Manager and/or Site Supervisor serves as the primary trainer. The Peer Job Coach provides additional assistance as needed and in coordination with the Vocational Rehabilitation Case Manager maintains written evaluations and progress reports on interns' skills and vocational goals. These include, but are not limited to, productivity, work quality, attendance, punctuality, dress & grooming, communication with others, and work endurance. As the primary trainer, the Peer Job Coach is thoroughly familiar with the intern's daily progress and can provide consistent feedback and support. The Vocational Rehabilitation Case Manager observes the intern at the internship site weekly and obtains feedback from the Peer Job Coach and BHS site manager so as to provide consistent feedback and support to the intern.

RAMS is committed to client involvement and community input in all elements of program operations, including planning, implementation, and evaluation. This process ensures quality programming, increases effectiveness, and ensures cultural competency. The best informant for the culturally relevant curriculum and program development is the target population, themselves. Throughout the internship period, the Vocational Rehabilitation Case Manager meets individually with the intern to discuss progress and solicit feedback regarding their experience, and at the end of the internship period interns are given anonymous written satisfaction surveys regarding the intake & admission process, internship structure & activities, support services, and professional development.

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A focus group is also conducted to solicit similar feedback regarding the structure of the program, recruitment process, accessibility, and effectiveness. All feedback is compiled and reviewed (by Hire-Ability management and RAMS executive management), informs the program design (development & adjustments, implementation), and is incorporated, as appropriate.

RAMS recruits and employs staff with relevant educational & employment history and cultural competence for the target population we work with through thorough interviews and reference checks. The process of on-going education and training to ensure staff are providing the standard of services required by RAMS are generally through regular attendance of staff meetings, individual supervisor-supervisee meetings, monthly internal/external trainings, annual cultural competency trainings, and other activities that are program specific. RAMS maintains a philosophy as well as a policy regarding creating a welcoming environment to all, which in turn is displayed through positive and healthy attitudes among staff. Measurement of how effective staff is in providing a high level of service is through client satisfaction surveys, client advisory councils, and feedback from other providers.

RAMS continuously engages with various systems to increase the program trainees' knowledge and networking possibilities regarding jobs/internships, further educational opportunities, etc. Such systems that Hire-Ability specifically works with includes, but is not limited to: BHS and BHS clinics (as these are the primary internship host sites); engaging in the Job Developers Huddle – One Stop Western Addition; Potrero /Dogpatch Merchants Association and ongoing relationship/collaboration with California State Department of Rehabilitation (for which Hire-Ability maintains a separate contract); and involvement in the BHS Co-Operative group (streamlined referral system amongst RAMS Hire-Ability, Caminar, State Department of Rehabilitation, Citywide Forensic Collaborative). Furthermore, the Vocational Rehabilitation Case Manager provides support and coaching into the workforce and connects participants to additional resources (e.g. Department of Rehabilitation, RAMS Hire-Ability Employment Services, educational/training resources, housing).

- D. Discharge Planning and exit criteria and process, i.e., a step-down to less intensive treatment programs, the criteria of a successful program completion, aftercare, transition to another provider, etc.

*Employment:*

For consumers who are employees within this program, employment is at-will and on-going based on employee performance. If an employee resigns or is terminated for any reason, RAMS will take every effort, if applicable, to engage in a process of linkage to Employee Assistance or other helpful resources to ensure the employee is able transition appropriately from their position at RAMS.

*Internship:*

Janitorial Services interns successfully complete the program when: (1) 85% attendance rate, and (2) Vocational Development Plan goals are achieved. Upon discharge, interns will have more competitive skills for today's job market, and referral can be to competitive employment, volunteer internships, additional training, education, college enrollment, or salaried employment. In this pursuit, the Vocational Rehabilitation Case Manager may assist with linkage assistance to job placement programs, employment counseling and guidance, and coordination with other support services to ensure effective transition, as part of post internship case management support. As Hire-Ability offers a full spectrum of vocational services, interns may transition into the Employment Services Program, which is funded through a contract/agreement with the California State Department of Rehabilitation. This program provides a higher level of individualized job preparation using classroom and individual meetings, job development, individualized plans & job placement, and follow-along services to consumers. Hire-Ability also maintains a cooperative agreement with

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California Department of Rehabilitation (since 1998) to connect employers with trained individuals; thus, supporting job placements for program participants with employment.

- E. Program staffing (which staff will be involved in what aspects of the service development and delivery). Indicate if any staff position is not funded by DPH.

See CBHS Appendix B.

## 7. Objectives and Measurements:

### A. Standardized Objectives

All applicable objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS AOA Performance Objectives FY 17-18.

### B. Individualized Objectives

#### *Employment:*

- By the end of the fiscal year, 80% of survey responses from janitorial sites will express satisfaction rating of "3" or above with services, as evidenced by program satisfaction survey which are analyzed by the associate director and reviewed by the program director. Summary of results are shared with RAMS executive leadership and available to stakeholders upon request.
- By the end of the fiscal year, 100% of janitorial employees will be provided with a staff satisfaction survey, as evidenced by distribution memos and announcements.
- By the end of the fiscal year, 80% of janitorial employees will have participated in at least one wellness training and or received wellness training materials. (Topics include community resources, stress management/coping and problem solving). This will be evidenced by training attendance records and sign-off sheets to acknowledge receipt of wellness training materials.
- By the end of the fiscal year, 100% of applicable janitorial employees will have an annual performance evaluation which measures the employee's competence and skills as well as capacity to problem solve and take responsibility and accountability for their own performance. This is evidenced by the annual performance evaluation, which includes the employee and supervisor/program director's ratings.

#### *Internship:*

- By the end of the fiscal year, 65% of program participants eligible to complete the internship cycle within the fiscal year will successfully complete the training or have exited the program early due to obtaining employment, transferring to another training/internship program to further increase readiness for employment, or enrolling in education to continue professional development. Inclusion criteria are only participants having received services for at least three months; the statuses of those who exit the program prior to three months are accounted separately. This will be evidenced by program case closure records and reasons for discharge; the Vocational Rehabilitation Case Manager's termination documents are reviewed and approved by the Associate Director.
- By the end of the fiscal year, 75% of intern graduates will have reported an increased ability to manage symptoms in the workplace, as evidenced by focus group feedback and post-program survey responses.

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- By the end of the fiscal year, 75% of intern graduates will have reported an increase in readiness for additional meaningful activities related to vocational services (e.g. educational program, advanced internship, advanced training program, employment, volunteer work, etc.), as evidenced by focus group feedback and post-program survey responses.

## 8. Continuous Quality Improvement:

### A. Achievement of contract performance objectives and productivity.

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All direct service providers are informed about objectives and the required documentation related to the activities and service outcomes. With regards to management monitoring, the Program Director reports progress/status towards each contract objective in the monthly report to executive management (including Deputy Chief/Director of Clinical Services and Chief Executive Officer). If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action. The data reported in the monthly report is on-goingly collected, with its methodology depending on the type of information. The program director and associate director work directly with human resources to address employee performance needs as well as work collaboratively with BHS operations team to coordinate work flow and operational duties related to our janitorial services employees. Hire-Ability management team and BHS operations teams meet monthly.

In addition, the Program Director monitors vocational service progress (engagement after intake, level of accomplishing vocational goals/objectives), service discharge reasons, and service utilization review. RAMS also conducts various random chart reviews to review adherence to objectives as well as treatment documentation requirements.

### B. Quality of documentation, including a description of the frequency and scope of internal chart audits.

The program director and other members of the Hire-Ability management team meet regular with staff for supervision meetings. Documentation of meetings, trainings, performance evaluations is noted and, as appropriate, may be filed directly in the employees personnel file with human resources. Feedback through surveys from service sites are also analyzed and evaluated and reported to RAMS executive leadership. Information from the outcomes is used for program improvement purposes.

RAMS utilizes various mechanisms to review documentation quality. Chart reviews are conducted by supervisors; based on their review, determinations/recommendations are provided relating to frequency and modality/type of services, and the match to client's progress & vocational/clinical needs. Feedback is provided to direct staff members. Furthermore, supervisors monitor the service documentation of their supervisees; staff meets weekly with their supervisors to review caseload with regard to service strategies, vocational plans & progress, documentation, productivity, etc. Within the first 30 days of admission and after every re-assessment period thereafter, the client's chart is reviewed by the Vocational Case Manager or Associate Director / Program Director, to monitor quality & timeliness. Feedback is provided directly to staff as well as general summaries at staff meetings.

In addition to the program's documentation review, the RAMS Quality Council formally conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy

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Chief/Director of Clinical Services, and another council member (or designee). Feedback is provided directly to staff as well as general summaries at staff meetings.

C. Cultural competency of staff and services.

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by individual supervision (mostly weekly); supervisors and their supervisees' caseload with regard to service strategies, vocational plans & progress, documentation, etc. Furthermore, RAMS annually holds an agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.
- Ongoing review of vocational services indicators is conducted by the Program Director (and reported to executive management) on monthly basis; data collection and analysis of service engagement (referral source; engagement after intake; number of admissions; service discharge reasons; and service utilization review)
- Client's preferred language for services is noted at intake; during the case assignment process, the Program Director matches client with counselor by taking into consideration language, culture, and provider expertise. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- At least annually, aggregated demographic data of clientele and staff/providers is collected and analyzed by management in order to continuously monitor and identify any enhancements needed
- Development of annual objectives based on cultural competency principles; progress on objectives is reported by Program Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action.
- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Satisfaction with services);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Program Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.

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- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters

D. Satisfaction with services.

*Employment:*

RAMS disseminates an annual employee satisfaction survey. RAMS further solicits feedback from other stakeholders including contracted service sites, business customers, and funders through satisfaction surveys as well as face to face meetings. Results of the survey are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. All satisfaction survey methods and feedback results are compiled and reported to executive management along with assessment of suggestion implementation.

*Internship:*

For the Janitorial Service internship program, RAMS adheres to the BHS satisfaction survey protocols which may include dissemination annually or biannually. In addition, Hire-Ability administers its program-developed client satisfaction surveys at case closure or upon request of the client. Furthermore, client feedback is obtained during post-program evaluations, client focus groups, client advisory council meetings, community meetings open to all clients at the vocational services program, individual meetings between direct service staff and clients, and through a confidential telephone hotline. Results of the survey methods are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. All satisfaction survey methods and feedback results are also compiled and reported to executive management along with assessment of suggestion implementation.

E. Timely completion and use of outcome data, including CANS and/or ANSA data or CalOMS.

Not Applicable.

9. Required Language:

Not Applicable.



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**1. Identifiers:**

Program Name: Hire-Ability Clerical & Mailroom Services

Program Address: 1234 Indiana Street

City, State, ZIP: San Francisco, CA 94107

Telephone: (415) 282-9675

Fax: (415) 920-6877

Website Address: www.ramsinc.org / www.hire-ability.org

Contractor Address: RAMS Administration, 639 14<sup>th</sup> Avenue

City, State, ZIP: San Francisco, CA 94118

Person Completing this Narrative: Angela Tang, RAMS Director of Operations

Telephone: (415) 800-0699

Fax: (415) 751-7336

Email Address: angelatang@ramsinc.org

Program Code(s): Not Applicable

**2. Nature of Document:**

New     Renewal     Modification

**3. Goal Statement:**

To provide employment and internship opportunities in the areas of business operations support such as clerical, mailroom, reception, messenger and driving positions for those with personal experience with the community behavioral health system.

To increase work skills, improve emotional/physical well-being and quality of life, positive community engagement, increase self-sufficiency, and obtain & retain employment.

**4. Target Population:**

San Francisco residents who are adults 18 and over including transitional age youth, , who are currently receiving behavioral health services through BHS. Particular outreach will be made to underserved populations and those interested in an administrative field.

**5. Modality(s)/Intervention(s):**

See BHS Appendix B, CRDC pages.

**6. Methodology:**

A. Outreach, recruitment, promotion, and advertisement as necessary.

RAMS' responsibility and commitment to mental health care quality and education extends beyond its own walls to reach people of all ages and backgrounds in its community through outreach and serving them in their own environments. This philosophy of care has always been central to the agency's approach. RAMS is uniquely well-positioned and has the expertise to outreach, engage, and retain diverse consumers, underrepresented constituents,



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and community organizations with regards to vocational services & resources and raising awareness about mental health and physical well-being. As an established community services provider, RAMS comes into contact with significant numbers of consumers & families, annually serving approximately 18,000 adults, children, youth & families at over 90 sites, citywide.

Specifically for Hire-Ability Clerical & Mailroom Services, the program promotes open positions within the system of care by outreach and recruitment activities through linkages with BHS community agencies, Department of Rehabilitation (DOR), Co-Operative partners within the BHS Vocational Services system, and to other employment linkages that directly outreach to consumers within BHS. Targeted recruitment for employment also includes participants who have completed the Clerical & Mailroom Services internship in clerical/administrative support positions. Graduates of this program and applicants that meet qualifications for positions (DOR, Co-Op partners) are provided opportunities and assistance to apply and interview for open positions.

B. Admission, enrollment and/or intake criteria and process where applicable.

*Employment:*

The employment portion of Hire-Ability Clerical & Mailroom Services works in conjunction with the Clerical & Mailroom Services internship program, and referrals for employment opportunities are through RAMS Employment Services Program, Department of Rehabilitation and our Co-Operative contract partners. Positions are competitive in nature and follows RAMS protocol for internal job announcements, recruitment, and hiring.

*Internship:*

The internship portion of Hire-Ability Clerical & Mailroom Services accommodates referrals from BHS and other community agencies within the System of Care. All requests for services are directed to the Intake Coordinator, who then provides the individual with the necessary information to apply to the program. The program has an application process by which interested individuals are to submit their completed application packet within the indicated deadline. Application packets include basic demographic information (name, contact information), reference contact information, referral form, and resume. Individuals who qualify under the initial screening (a coordinated effort of review by staff including the Vocational Rehabilitation Services Coordinator, Associate Director of Vocational Services, and internship site manager) are invited for a face-to-face interview with the Vocational Rehabilitation Services Coordinator and Associate Director of Vocational Services. These initial assessments are aimed to determine program eligibility, vocational readiness/interest, suitability of program services, strengths & existing resources, level of functioning & needs in consultation with behavioral health services provider, primary care connection, substance use/abuse, and other services (e.g. residential). A secondary assessment interview is held with the internship site to determine appropriate match for the site needs. If an individual is not accepted into the program based on suitability for these program services, the Vocational Rehabilitation Services Coordinator makes a referral to one of Hire-Ability Programs or to another service provider.

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C. Service delivery model, including treatment modalities, phases of treatment, hours of operation, length of stay, locations of service delivery, frequency and duration of service, strategies for service delivery, wrap-around services, residential bed capacity, etc. Include any linkages/coordination with other agencies.

Hire-Ability program hours are Monday to Friday (9:00 am – 5:00 pm); however, on-the-job hours may vary, depending on the job site's needs.

*Employment:*

Clerical & Mailroom Services employment program provides on-site training and supervision to employees within this program. RAMS management also coordinates coverage for vacancies or absences. Employees are provided with a robust and comprehensive job retention support system with close coordination of supervision and support between the RAMS Vocational Rehabilitation Coordinator, Associate Director, and with BHS site managers. All employees receive an initial orientation by RAMS human resources department upon hire. The employee is then oriented to their individual position through on-site supervision and time limited job coaching for employees receiving employment services. Regular group and individual supervision meetings are an integral part of the Clerical & Mailroom Services program, continuous engagement as well as professional development activities are provided in a structured manner. Monthly staff meetings as well as quarterly trainings address critical areas needed for successful and meaningful employment which can include topics such as professional communication and boundaries, ergonomics at the work place, handling stress on the job and work life balance, as well as RAMS sponsored health and wellness retreats. Employees may also access and/or be linked to the Employee Assistance Program (EAP) to assist with a variety of life building resources. In addition, starting in 2015, RAMS secured funding (from another source) to operate a peer workforce support services program which offers 24/7 telephone and online support as well as group and individual support (e.g. monthly drop-in groups, WRAP groups); the services are targeted towards peers and family members with an emphasis on issues relating to work.

To gather information and feedback on Clerical & Mailroom Services, RAMS continuously engages BHS site managers in various methods such as in-person meetings and telephone calls, at least quarterly. The Hire-Ability Clerical & Mailroom Services fosters a work environment that promotes healthy behaviors, a sense of hope and belonging, responsibility and strengthens roles of consumers through employment and professional development activities.

*Internship:*

Clerical & Mailroom Services internship program design includes providing culturally competent, consumer-driven, strengths-based workforce development activities and vocational services including but not limited to: vocational assessments, job skills training, on-site work experience, vocational counseling, and job coaching. The program improves, maintains, or restores personal independence and functioning, consistent with requirements for learning and development, which provides services to a distinct group of beneficiaries.

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The internship duration is six to nine months with each intern receiving 10-20 hours per week of paid, on-the-job training with work hours varying, depending on the individual's availability and support needs. Internship components include general office support; customer service; mailroom & distribution; reception functions (answering phones, greeting and assisting visitors); filing, copying/faxing; and light data entry (depending on internship site). Each intern is assigned a Vocational Rehabilitation Case Manager, and a Peer Job Coach as needed. The Vocational Rehabilitation Case Manager conducts vocational assessments, facilitates vocational orientation & exploration, performs vocational counseling (case management & linkages), supports and identifies strengths & areas of employment interest, and provides job counseling & guidance. The Peer Job Coach provides job training and coaching, coordinates training and support needs with the Vocational Case Manager and BHS site manager, and provides feedback and vocational support to the intern.

At the start of services and at regular intervals, a vocational assessment is completed with each intern. The vocational assessment is a comprehensive process that systematically utilizes an interview to assist the intern in the identification of goals leading towards vocational development. These areas, as they relate to employment, include: work needs (e.g. reasonable accommodations), identifying community supports (therapists/case managers, support groups, family & friends), cultural and/or language issues, work-related issues (concentration, stress, retention of instruction, safety habits, work behavior), psychiatric functioning (behavioral health condition), appearance & grooming, and external factors (financial concerns, living arrangement, medical care). A written report is developed summarizing the assessment, findings & recommendations, which informs the vocational plan and structure for job skills training.

During the vocational services planning, the Vocational Rehabilitation Case Manager and intern discuss how strengths can be utilized to make changes on their current conditions, to promote & sustain healthy mental health, and obtain and retain employment. The Vocational Rehabilitation Case Manager also gathers relevant information from the intern and other service providers and/or family members, as it relates to employment. An integrated vocational plan for goals is formally developed within the first month of participation and on a quarterly basis thereafter, with ongoing monitoring of progress at each meeting/vocational activity, and formally reviewed at the third month. The assessment/evaluation and plan development includes the intern's input through self-evaluation sections as well as the Vocational Rehabilitation Case Manager's appraisal and feedback from the Peer Job Coach and BHS site manager. RAMS engages BHS site managers in various methods including in-person meetings and telephone calls, at least quarterly. The comprehensive vocational plan also considers the intern's environment and entire support structure as well as specific employment goals, and takes into account collateral information (e.g. behavioral health treatment plan incorporates vocational goals). Staff are also trained to identify signs of psychiatric relapse and, through collaboration with the intern's therapist, implements the appropriate interventions. Together, the Vocational Rehabilitation Case Manager and intern set goals and identify strategies that are attainable & measureable. RAMS also facilitates linkages for support services (e.g. transportation, child care).

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Vocational training and skills building is provided through various capacities. The Peer Job Coach serves as the primary trainer and in coordination with the Vocational Rehabilitation Case Manager maintains written evaluations and progress reports on interns' skills and vocational goals. These include, but are not limited to, productivity, work quality, attendance, punctuality, dress & grooming, communication with others, and work endurance. As the primary trainer, the Peer Job Coach is thoroughly familiar with the intern's daily progress and can provide consistent feedback and support. The Vocational Rehabilitation Case Manager observes the intern at the internship site weekly and obtains feedback from the Peer Job Coach and BHS site manager so as to provide consistent feedback and support to the intern.

RAMS is committed to client involvement and community input in all elements of program operations, including planning, implementation, and evaluation. This process ensures quality programming, increases effectiveness, and ensures cultural competency. The best informant for the culturally relevant curriculum and program development is the target population, themselves. Throughout the internship period, the Vocational Rehabilitation Case Manager meets individually with the intern to discuss progress and solicit feedback regarding their experience, and at the end of the internship period interns are given anonymous written satisfaction surveys regarding the intake & admission process, internship structure & activities, support services, and professional development. A focus group is also conducted to solicit similar feedback regarding the structure of the program, recruitment process, accessibility, and effectiveness. All feedback is compiled and reviewed (by Hire-Ability management and RAMS executive management), informs the program design (development & adjustments, implementation), and is incorporated, as appropriate.

RAMS recruits and employs staff with relevant educational & employment history and cultural competence for the target population we work with through thorough interviews and reference checks. The process of on-going education and training to ensure staff are providing the standard of services required by RAMS are generally through regular attendance of staff meetings, individual supervisor- supervisee meetings, monthly internal/external trainings, annual cultural competency trainings, and other activities that are program specific. RAMS maintains a philosophy as well as a policy regarding creating a welcoming environment to all, which in turn is displayed through positive and healthy attitudes among staff. Measurement of how effective staff is in providing a high level of service is through client satisfaction surveys, client advisory councils, and feedback from other providers.

RAMS continuously engages with various systems to increase the program trainees' knowledge and networking possibilities regarding jobs/internships, further educational opportunities, etc. Such systems that Hire-Ability specifically works with includes, but is not limited to: BHS and BHS clinics (as these are the primary internship host sites); engaging in Job Developers Huddle – One Stop Western Addition; Potrero/Dogpatch Merchants Association and ongoing relationship/collaboration with California State Department of Rehabilitation (for which Hire-Ability maintains a separate contract); and involvement in the BHS Co-Operative group (streamlined referral system amongst RAMS Hire-Ability, Caminar, State Department of Rehabilitation, Citywide Forensic Collaborative).

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Furthermore, the Vocational Rehabilitation Case Manager provides support and coaching into the workforce and connects participants to additional resources (e.g. Department of Rehabilitation, RAMS Hire-Ability Employment Services, educational/training resources, housing).

- D. Discharge Planning and exit criteria and process, i.e., a step-down to less intensive treatment programs, the criteria of a successful program completion, aftercare, transition to another provider, etc.

As the Clerical & Mailroom Services employment program operates to train, support, and retain employment for consumer-filled positions in Clerical & Mailroom Services, there is not any exit criteria. If an employee resigns or is terminated for any reason, RAMS will take every effort, if applicable, to engage in a process of linkage to Employee Assistance or other helpful resources to ensure the employee is able transition appropriately from their position at RAMS.

Clerical & Mailroom Services interns successfully complete the program when: (1) 85% attendance rate, and (2) Vocational Development Plan goals are achieved. Upon discharge, interns will have more competitive skills for today's job market, and referral can be to competitive employment, volunteer internships, additional training, education, college enrollment, or salaried employment. In this pursuit, the Vocational Rehabilitation Case Manager may assist with linkage assistance to job placement programs, employment counseling and guidance, and coordination with other support services to ensure effective transition, as part of post internship case management support. As Hire-Ability offers a full spectrum of vocational services, interns may transition into the Employment Services Program, which is funded through a contract/agreement with the California State Department of Rehabilitation. This program provides a higher level of individualized job preparation using classroom and individual meetings, job development, individualized plans & job placement, and follow-along services to consumers. Hire-Ability also maintains a cooperative agreement with California Department of Rehabilitation (since 1998) to connect employers with trained individuals; thus, supporting job placements for program participants with employment. Interns may also enter other vocational trainings available through the system of care.

- E. Program staffing (which staff will be involved in what aspects of the service development and delivery). Indicate if any staff position is not funded by DPH.

See CBHS Appendix B.

**7. Objectives and Measurements:**

**A. Standardized Objectives**

All objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS AOA Performance Objectives FY 17-18.

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## B. Individualized Objectives

### *Employment:*

- By the end of the fiscal year, 80% of survey responses from Clerical & Mailroom Services sites will express satisfaction rating of “3” or above with services, as evidenced by program satisfaction survey which are analyzed by the Associate Director and reviewed by the Program Director. Summary of results are shared with RAMS executive leadership and available to stakeholders upon request.
- By the end of the fiscal year, 100% of Clerical & Mailroom Services employees will be provided with a staff satisfaction survey, as evidenced by distribution memos and announcements.
- By the end of the fiscal year, 80% of Clerical & Mailroom Services employees will have participated in at least one wellness training and or received wellness training materials. (Topics such as community resources, stress management/coping, problem solving). This will be evidenced by training attendance records and sign-off sheets to acknowledge receipt of wellness training materials received.
- By the end of the fiscal year, 100% of applicable Clerical & Mailroom Services employees will have an annual performance evaluation which measures the employee’s competence and skills as well as capacity to problem solve and take responsibility and accountability for their own performance. This is evidenced by the annual performance evaluation, which includes the employee and supervisor/program director’s ratings.

### *Internship:*

- By the end of the fiscal year, 65% of program participants eligible to complete the internship cycle within the fiscal year will successfully complete the training or have exited the program early due to obtaining employment, transferring to another training/internship program to further increase readiness for employment, or enrolling in education to continue professional development. Inclusion criteria are only participants having received services for at least three months; the statuses of those who exit the program prior to three months are accounted separately. This will be evidenced by program case closure records and reasons for discharge; the Vocational Rehabilitation Case Manager’s termination documents are reviewed and approved by the Associate Director.
- By the end of the fiscal year, 75% of intern graduates will have reported an increased ability to manage symptoms in the workplace, as evidenced by focus group feedback and post-program survey responses.
- By the end of the fiscal year, 75% of intern graduates will have reported an increase in readiness for additional meaningful activities related to vocational services (e.g. educational program, advanced internship, advanced training program, employment,

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volunteer work, etc.), as evidenced by focus group feedback and post-program survey responses.

## 8. Continuous Quality Improvement:

### A. Achievement of contract performance objectives and productivity.

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All direct service providers are informed about objectives and the required documentation related to the activities and service outcomes. With regards to management monitoring, the Program Director reports progress/status towards each contract objective in the monthly report to executive management (including Deputy Chief/Director of Clinical Services and Chief Executive Officer). If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action. The data reported in the monthly report is on-goingly collected, with its methodology depending on the type of information. The Program Director and Associate Director work directly with human resources to address employee performance needs as well as work collaboratively with BHS operations team to coordinate work flow and operational duties related to our Clerical & Mailroom Services employees. Hire-Ability management team and BHS operations teams meet monthly.

In addition, the Program Director monitors vocational service progress (engagement after intake, level of accomplishing vocational goals/objectives), service discharge reasons, and service utilization review. RAMS also conducts various random chart reviews to review adherence to objectives as well as treatment documentation requirements.

### B. Quality of documentation, including a description of the frequency and scope of internal chart audits.

The Program Director and other members of the Hire-Ability management team meet regular with staff for supervision meetings. Documentation of meetings, trainings, performance evaluations is noted and, as appropriate, may be filed directly in the employees personnel file with human resources. Feedback through surveys from service sites are also analyzed and evaluated and reported to RAMS executive leadership. Information from the outcomes is used for program improvement purposes.

RAMS utilizes various mechanisms to review documentation quality. Chart reviews are conducted by supervisors; based on their review, determinations/recommendations are provided relating to frequency and modality/type of services, and the match to client's progress & vocational/clinical needs. Feedback is provided to direct staff members. Furthermore, supervisors monitor the service documentation of their supervisees; staff meets weekly with their supervisors to review caseload with regard to service strategies, vocational plans & progress, documentation, productivity, etc. Within the first 30 days of admission and after every re-assessment period thereafter, the client's chart is reviewed by the

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Vocational Case Manager or Associate Director/Program Director, to monitor quality & timeliness. Feedback is provided directly to staff as well as general summaries at staff meetings.

In addition to the program's documentation review, the RAMS Quality Council formally conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy Chief/Director of Clinical Services, and another council member (or designee). Feedback is provided directly to staff as well as general summaries at staff meetings.

C. Cultural competency of staff and services.

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by individual supervision (mostly weekly); supervisors and their supervisees' caseload with regard to service strategies, vocational plans & progress, documentation, etc. Furthermore, RAMS annually holds an agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.
- Ongoing review of vocational services indicators is conducted by the Program Director (and reported to executive management) on monthly basis; data collection and analysis of service engagement (referral source; engagement after intake; number of admissions; service discharge reasons; and service utilization review)
- Client's preferred language for services is noted at intake; during the case-assignment process, the Program Director matches client with counselor by taking into consideration language, culture, and provider expertise. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- At least annually, aggregated demographic data of clientele and staff/providers is collected and analyzed by management in order to continuously monitor and identify any enhancements needed
- Development of annual objectives based on cultural competency principles; as applicable, progress towards objectives is reported by Program Director to executive



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management in monthly report. If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action. Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Satisfaction with services);

- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Program Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.
- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters.

D. Satisfaction with services.

*Employment:*

RAMS disseminates an annual employee satisfaction survey. RAMS further solicits feedback from other stakeholders including contracted service sites, business customers, and funders through satisfaction surveys as well as face to face meetings. Results of the survey are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. All satisfaction survey methods and feedback results are compiled and reported to executive management along with assessment of suggestion implementation.

*Internship:*

For the Staffing Service internship program, RAMS adheres to the BHS satisfaction survey protocols which may include dissemination annually or biannually. In addition, Hire-Ability administers its program-developed client satisfaction surveys at case closure or upon request of the client. Furthermore, client feedback is obtained during post-program evaluations, client focus groups, client advisory council meetings, community meetings open to all clients at the vocational services program, individual meetings between direct service staff and clients, and through a confidential telephone hotline. Results of the survey methods are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. All satisfaction survey methods and feedback results are also compiled and reported to executive management along with assessment of suggestion implementation.

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E. Timely completion and use of outcome data, including CANS and/or ANSA data.

Not Applicable.

**9. Required Language:**

Not Applicable.



**1. Identifiers:**

Program Name: Peer-to-Peer Vocational Linkage  
Program Address: 639 14<sup>th</sup> Avenue (administrative address)  
City, State, Zip: San Francisco, CA 94121  
Telephone: (415) 689-5662 Fax: (415) 668-6388  
Website Address: www.ramsinc.org

Contractor Address: RAMS Administration, 639 14th Avenue  
City, State, Zip: San Francisco, CA 94118  
Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
Telephone: (415) 800-0699  
Email Address: angelatang@ramsinc.org

Program Code: Not Applicable

**2. Nature of Document (check one)**

New  Renewal  Modification

**3. Goal Statement**

To support clients at SFDPH BHS sites and assist clinicians by connecting their clients with community services by utilizing peer providers who have identified themselves as consumers (or former consumers) of behavioral health services.

**4. Target Population**

The target population for this program is the adult/older adult clients served by selected SFDPH Behavioral Health Services clinics.

**5. Modality(ies)/Interventions**

See BHS Appendix B, CRDC pages.

RAMS' Peer-to-Peer Vocational Linkage program, which is integrated into the RAMS Division of Peer-Based Services, enhances treatment services by providing supportive case management and resource linkage to clients at contracted SF DPH behavioral health clinics. Services, delivered by Service Coordinators, aim to improve the level of engagement with clients, foster feelings of hope, and to promote the possibility of wellness and recovery.

During the fiscal year, RAMS will conduct the following activities:

- RAMS' Peer-to-Peer Vocational Linkage Program will provide at least 1,000 hours of non-clinical case management, service coordination, referral services and successful linkages to health and social services agencies

- At least 200 unduplicated individuals will receive services through the Peer-to-Peer Vocational Linkage Program

## 6. Methodology

### A. Outreach, recruitment, promotion, and advertisement as necessary.

RAMS' responsibility and commitment to mental health care quality and education extends beyond its own walls to reach people of all ages and backgrounds in its community through outreach and serving them in their own environments. This philosophy of care has always been central to the agency's approach. RAMS is uniquely well-positioned and has the expertise to outreach, engage, and retain diverse consumers, underrepresented constituents, and community organizations with regards to vocational services & resources and raising awareness about mental health and physical well-being. As an established community services provider, RAMS comes into contact with significant numbers of consumers & families, annually serving approximately 18,000 adults, children, youth & families at over 90 sites, citywide.

Specifically for Peer-to-Peer Vocational Linkage, the program promotes open positions ("Service Coordinators") within the system of care by outreach and recruitment activities through linkages to workforce development programs (e.g. RAMS Peer Specialist Mental Health Certificate; City College of SF Mental Health Certificate).

Each Service Coordinator is assigned to a specific SFDPH BHS clinic; they work closely with BHS staff and attend staff meetings at their clinics to maintain visibility of the program.

### B. Admission, enrollment and/or intake criteria and process where applicable

This program provides for Service Coordinators who work at designated BHS clinics/program providing support to clinicians and their clients on identifying community resources, and providing assistance on successfully accessing, utilizing and maximizing these resources. Clients are referred by direct service providers at various BHS clinics, who indicate the service or assistance needed. The Service Coordinator then meets with the referred client to introduce Peer-to-Peer Vocational Linkage, discuss the details of the providers' referral, assess any additional service needs, and provide assistance to address needs; treatment plan of care may be adjusted, as appropriate.

### C. Service delivery model, including treatment modalities, phases of treatment, hours of operation, length of stay, locations of service delivery, frequency and duration of service, strategies for service delivery, wrap-around services, residential bed capacity, etc. Include any linkages/coordination with other agencies.

The Service Coordinator works with the client to support them in the access and utilization of available resources, including advocating for clients' needs in the provision of services and resources. Assistance and services may include but are not limited to:

- *Transportation and Mobility*
- *Affordable Housing*
- *Assistive Technology*
- *Language Interpretation*
- *Government Services and Programs*

- *Cultural Adjustment*
- *Immigration Services*
- *Food Assistance*
- *Women's Services*
- *Medical Assistance*
- *Mental Health Services*
- *Training and Education Programs*
- *Independent Living Skills*
- *Vocational Service*
- *Substance Use services*

The Service Coordinators focus on providing the clients with assistance in: acknowledging the available services; understanding the implications of the services; making an informed decision on selecting services; successfully navigating eligibility and accessing systems; maximizing utilization of resources; following up on service progress, remaining on track with recovery goals, and achieving individual and vocational goals.

Service Coordinators may work with the same client several times regarding different needs and issues; the frequency of service may also vary depending on the service needed and the resources available.

- D. Discharge Planning and exit criteria and process, i.e., a step-down to less intensive treatment programs, the criteria of a successful program completion, aftercare, transition to another provider, etc.

Clients may be discharged from this program when their initial referral and/or other identified needs for service coordination have been met or if clients make the decision that their needs have changed and services are no longer desired or necessary.

- E. Program staffing (which staff will be involved in what aspects of the service development and delivery). Indicate if any staff position is not funded by DPH.

See BHS Appendix B.

## 7. Objectives and Measurements

### A. Standardized Objectives

All applicable objectives, and descriptions of how objectives will be measured, are contained in the BHS Performance Objectives FY17-18.

### B. Individualized Program Objectives

- During the fiscal year, the Division's Director/Manager will conduct at least quarterly site visits to meet with Service Coordinator and Site Supervisors to receive updates regarding Peer-to-Peer Vocational Linkage staff, assess whether Service Coordinators are meeting the needs of the clinic (satisfaction), and address any concerns with the program. Should there be

significant findings as a result of these meetings, a plan of action will be developed and implemented to address any program concerns.

- During the fiscal year, 75% of site/clinic/program satisfaction survey responses will express satisfaction with services. This will be evidenced by program satisfaction surveys.
- During the fiscal year, 75% of the clients receiving Peer-to-Peer Vocational Linkage will express overall satisfaction with services. This will be evidenced by client satisfaction surveys. The Division management will compile, review, and analyze results from the satisfaction survey.
- During the fiscal year, 80% of client satisfaction survey responses will indicate an increased knowledge about the community, health and cultural resources available to them. This will be evidenced by client satisfaction surveys.
- During the fiscal year, 75% of clients receiving Peer-to-Peer Vocational Linkage will report increased ability to manage symptoms and/or achieve desired quality-of-life goals as set by program participants. This will be evidenced by documentation/reports that summarize the service plan outcomes.

## 8. Continuous Quality Improvement

### a. Achievement of contract performance objectives and productivity

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All direct service providers are informed about objectives and the required documentation related to the activities and service outcomes. The Division's Director/Manager monitors service progress by collecting information during regular group supervision meetings, data submission by Service Coordinators, chart reviews, and agency site visits. Furthermore, each Service Coordinator receives regular individual supervision from an on-site supervisor at their assigned clinic. On-site supervisors meet with staff weekly or on an as-needed basis to review caseload with regard to service strategies, service plans & progress, productivity, etc. On a regular basis, the Division's Director/Manager conducts a joint supervision with on-site supervisor to discuss each Service Coordinator's overall performance and their progress in meeting contract objections. Should there be concerns regarding Service Coordinator(s)' ability to fulfill contract requirement based on information gathered from the various sources mentioned above, the Division's Director/Manager will work directly with Service Coordinator(s) and on-site supervisor to develop a plan of action to address concerns.

With regards to management monitoring, the Division Director meets with executive management (including Deputy Chief/Director of Clinical Services and Chief Executive Officer) each month to report progress/status towards each contract objective.

### b. Quality of documentation, including frequency and scope of internal chart audits.

RAMS utilizes various mechanisms to review documentation quality. Chart reviews are conducted by Division Director/Manager on a quarterly basis; based on these reviews, determinations/ recommendations are provided relating to frequency and modality/type of services, and the match to client's progress & clinical needs. Feedback is provided to direct staff members.

In addition to the program's documentation review, the RAMS Quality Council formally conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy Chief/Director of Clinical Services, and another council member (or designee). Feedback is provided directly to staff as well as general summaries at staff meetings.

c. Cultural competency of staff and services

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by regular group supervision. Furthermore, RAMS annually holds agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.
- Ongoing review of services indicators is conducted by the Division Director (and reported to executive management) on monthly basis
- Client's culture, preferred language for services, and provider's expertise are strongly considered during the case assignment process. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- Development of annual objectives based on cultural competency principles; as applicable, progress on objectives is reported by Division Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Division Director identifies barriers and develops a plan of action.
- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Client Satisfaction);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Division Director and, at least annually,



the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.

- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
  - To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters
- d. Satisfaction with services

The Peer-to-Peer Vocational Linkage Program conducts an annual client satisfaction survey at each clinic-site to solicit program feedback. The Division management compiles, analyzes, and presents the results of surveys to staff, each program site-supervisor, RAMS Executive Management, and the RAMS Quality Council. The Division Director also collaborates with RAMS Executive Management, Quality Council, and clinics to develop and implement plans to address issues related to client satisfaction as appropriate.

- e. Timely completion and use of outcome data, including CANS and/or ANSA data

ANSA data is not applicable for this specific contract; however, as described in previous CQI sections, RAMS continuously utilizes available data to inform service delivery to support positive outcomes. As staff are providing services to BHS clients, they work in collaboration with the primary counselors to support positive outcomes and achievement of treatment goals.

## 9. Required Language

Not applicable.

**1. Identifiers:**

Program Name: Hire-Ability Information Technology (i-Ability)  
Program Address: 1234 Indiana Street  
City, State, Zip Code: San Francisco, CA 94107  
Telephone/Fax: (415) 282-9675 / (415) 920-6877  
Website Address: www.ramsinc.org / www.hire-ability.org

Contractor Address: RAMS Administration, 639 14<sup>th</sup> Avenue  
City, State, ZIP: San Francisco, CA 94118  
Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
Telephone: (415) 800-0699  
Email Address: angelatang@ramsinc.org

Program Code(s) (if applicable): Not Applicable

**2. Nature of Document (check one)**

New  Renewal  Modification

**3. Goal Statement**

To (1) provide high quality designated IT support services to CBHS (Avatar Helpdesk; Desktop; Advanced Avatar Helpdesk; Advanced Desktop) and (2) engage consumers for improved emotional/physical well-being and quality of life, positive engagement in the community, increase self-sufficiency, and obtain & retain competitive employment.

**4. Target Population**

San Francisco residents who are adults and older adults 18 and over including transitional age, receiving behavioral health services through BHS. Particular outreach is to consumers who have interest in computer technical support services but minimal work skills and/or work exposure, and may benefit from a structured vocational training program. There is a special focus on APIA communities (Chinese and Tagalog), both immigrants and US-born, a group that is traditionally underserved.

**5. Modality(ies)/Interventions**

This fiscal year represents the continued operations of i-Ability components:

- (a) Avatar Helpdesk (entry): Continued operation
- (b) Desktop (entry): Continued operation
- (c) Advanced Avatar Helpdesk: Continued operation
- (d) Advanced Desktop: Continued operation
- (e) Consumer Portal Help Desk: Initial rollout

**Workforce Development (MHSA Modality)**

- For the Avatar Helpdesk (entry), this contract term includes two cohorts with each cohort enrolling at least eight trainees after the two week visitation period (total 16 trainees)

- For the Desktop Training (entry), this contract term includes two cohorts with each cohort enrolling at least seven trainees after the two week visitation period (total 14 trainees)
- For the Advanced Avatar Helpdesk Training, this contract term includes two cohorts with each enrolling at least five trainees after the two week visitation period (total 10 trainees)
- For the Advanced Desktop, this contract term includes one cohort with two trainees
- For Avatar Helpdesk, Desktop, and Advanced Avatar Helpdesk components, a full cohort's training duration is nine months; for Advanced Desktop component, a full cohort's training duration is one year.
- Trainees/interns engage in workforce development activities (classroom and on-the-job training) intended to develop a diverse and competent workforce; outreach to under-represented communities; provide career exploration opportunities or to develop work readiness skills; or increase the number of consumers and family members in the healthcare information technology workforce.
- Each Avatar Helpdesk, Desktop & Advanced Avatar Helpdesk trainee/intern receives at least 7-16 hours/week of paid, on-the-job workforce development training; work hours vary, according to the individual's availability & support needs.
- There are additional activity hours for program planning, providing individualized and/or group trainee support (Vocational Rehabilitation Counselor and/or IT Trainer), preparing & reviewing/adjusting training materials (per Avatar system updates), etc.

During this fiscal year, there will be the initial implementation of the Consumer Portal Help Desk. The Consumer Portal provides clients of SFDPH-BHS access to selected portions of their clinical record. This help desk will specifically support end users of the Consumer Portal.

## 6. Methodology

- a. Outreach, recruitment, promotion, and advertisement as necessary.

RAMS' responsibility and commitment to mental health care quality and education extends beyond our own walls to reach people of all ages and backgrounds in our community through outreach and serving them in their own environments. This philosophy of care has always been central to the agency's approach. RAMS is uniquely well-positioned and has the expertise to outreach, engage, and retain diverse consumers, underrepresented constituents, and community organizations with regards to Hire-Ability services & resources and raising awareness about mental health and physical well-being. As an established community services provider, RAMS comes into contact with significant numbers of consumers & families with each year serving approximately 18,000 adults, children, youth & families at over 90 sites, citywide. Hire-Ability's primary referral sources are SFDPH outpatient behavioral health services; as such, the program's staff regularly performs outreach activities and coordinates within RAMS programs and other agencies' management.

Hire-Ability also operates Employee Development which primarily includes Production & Fulfillment Services, a workshop setting and on-the-job training in the fulfillment services industry with paid work experience. Hire-Ability is also a partnering program with the State Department of Rehabilitation to provide Employment Services (employment preparation, placement and retention services) to individuals with mental illnesses. Outreach and promotion is routinely conducted to these groups. The program also performs monthly outreach activities independently as well as in coordination with the BHS Vocational Coordinator, to various SFDPH BHS providers (e.g. outpatient clinics & residential facilities within the system-of-care). Outreach is also conducted at system of care provider meetings, Avatar bulletins, BHS Vocational Summit, etc.

b. Admission, enrollment and/or intake criteria and process where applicable.

The program has an application process by which interested individuals are to submit their completed application packet within the indicated deadline. Application packets are distributed to the community, along with informational flyers about the program curriculum and content. Application packets include basic demographic information (name, address, and contact information), reference contact information, and a personal statement. Program orientations/Open Houses are also held, prior to application deadlines and serve as an opportunity for interested individuals and/or community organizations to obtain assistance with application completion and/or inquire more about the program. All completed applications are reviewed by an admission review committee, with all applicants receiving notification about the decision/outcome. Interviews may also be scheduled, as part of the admission review process. Once the cohort begins, there is a more detailed orientation to the program such as completion/graduation guidelines, discussion of expectations (by trainees and program), etc.

- C. Service delivery model, including treatment modalities, phases of treatment, hours of operation, length of stay, locations of service delivery, frequency and duration of service, strategies for service delivery, wrap-around services, residential bed capacity, etc. Include any linkages/coordination with other agencies.

The i-Ability, Vocational IT program has the following components:

- 1) Avatar Helpdesk, a single point of contact for end users of the BHS electronic health record system ("Avatar") to receive support. The initial unpaid classroom training varies from 2-4 weeks in which after, trainees engage in paid, on-the-job training where they gain skills regarding troubleshooting basic user issues, engaging & interacting with end users (customer service), logging & triaging more complicated issues, healthcare confidentiality policies & practices, etc. Each cohort cycle is nine months; cohorts overlap to maintain continuity of helpdesk support.
- 2) Desktop, a single point of contact for end users of BHS computers/hardware to receive support and maintenance within BHS computing environment. The initial unpaid classroom training varies from 2-4 weeks in which after, trainees engage in paid, on-the-job training where trainees gain skills regarding hardware repair and support (break-fix), technical troubleshooting, healthcare confidentiality policies & practices, etc. Each cohort cycle is nine months with no overlap.
- 3) Advanced Avatar Helpdesk, a single point of contact for end users of the BHS electronic health record system ("Avatar") to receive support. Additionally, interns will provide additional support to the Avatar Super User Community. The initial unpaid classroom training varies from 2-4 weeks in which after, trainees engage in paid, on-the-job training where interns increase their skills regarding troubleshooting basic and super user issues, engaging & interacting with end users (customer service), logging & triaging more complicated issues, healthcare confidentiality policies & practices, etc. The interns will assist with mentoring the Helpdesk trainees by shadowing frontline activities and providing structured peer support as facilitated by the trainer of the program. Each cohort cycle is nine months; cohorts overlap to maintain continuity of helpdesk support.
- 4) Advanced Desktop, a single point of contact for end users of BHS computers/hardware to receive support and maintenance within BHS computing environment. Trainees engage in paid, on-the-job training to gain advanced skills regarding hardware repair and support (break-fix), technical troubleshooting, healthcare confidentiality policies & practices, etc. Each cohort cycle is one year with no overlap.

Program operation hours are Monday to Friday (8:00 am – 5:00 pm). Classroom and on-the-job training is primarily provided on-site at BHS (1380 Howard Street, SF, CA 94103) and/or RAMS Hire-Ability Vocational Services (94107).

The program design includes providing culturally competent, consumer-driven, strengths-based vocational services including but not limited to: vocational assessments, job skills training, on-site work experience, vocational counseling & job coaching, and classes/workshops aimed at skills development and building strengths towards employment readiness. The program improves, maintains, or restores personal independence and functioning, consistent with requirements for learning and development, which provides services to a distinct group of beneficiaries.

The IT Trainers (Avatar Helpdesk, Desktop/Advanced Desktop, Advanced Avatar Helpdesk) are the primary staff persons responsible for classroom and on-the-job training, providing direct support and supervision (individual, group) to trainees/interns. The classroom training is primarily provided during the first two to four weeks of the cohort; thereafter, training and support is provided on a regular, ongoing basis (weekly). The IT Trainers may also serve as additional frontline coverage; the IT Manager, along with the Director of Vocational Services/Program Director, provides as needed coverage and oversees quality control & management for the i-Ability program. Furthermore, all trainees/interns are assigned a Vocational Rehabilitation Counselor. The Counselor conducts a comprehensive vocational assessment (job readiness/interest, skills development, other work-related issues), vocational counseling (case management & linkages), supports and identifies strengths & areas of employment interest, job searches, and placement assistance, as well as job coaching, counseling & guidance.

Within the first three months of participation, an integrated vocational plan with specific goals is collaboratively (counselor, trainers, and trainees/interns) and formally developed. There is ongoing monitoring of progress (by trainers and counselor), in relation to the goals; the vocational plan is formally reviewed at the third month of participation. Areas of vocational assessment include, but are not limited to: productivity, work quality, attendance, punctuality, dress & grooming, communication with others, group participation, and work endurance. The comprehensive vocational plan considers the client's environment and entire support structure and takes into account collateral information (e.g. behavioral health plan of care incorporates vocational goals). The plan development and reassessment periods include trainee input through self-evaluation sections as well as the counselor's appraisal. RAMS also facilitates linkages for support services (e.g. childcare, transportation), as needed.

i-Ability also offers structured training/groups (e.g. vocational counseling, training, psycho-education) as a core component of services to clients. Facilitated by the IT Trainers and/or Vocational Rehabilitation Counselors, the trainings/groups provide positive peer support, focus on interpersonal relationships, support network for specific challenges, and can assist individuals to learn about themselves and relate better with other people. Trainings/groups can be jointly run with collaborative partners (e.g. behavioral health counselors, BHS), taking place at RAMS and/or the vendor (BHS, if possible) or partner's site, depending on feedback and offered at various days and times.

Furthermore, this fiscal year includes the initial implementation of the Consumer Portal Help Desk. The Consumer Portal provides clients of SFDPH-BHS access to selected portions of their clinical record. This help desk will specifically support end users of the Consumer Portal. This Portal will consist of Supervisors and Frontline staff, all of which are employee positions.

D. Describe your program's exit criteria and process, e.g. successful completion.

Trainees successfully complete the program when: (1) 85% attendance rate, (2) Vocational Development Plan goals are achieved, and score of 75% or higher on the certificated exams is accomplished or early completion/discharge of the program (at least three months after program start due to gaining employment related to participating in the program). Upon successful completion/discharge, referral can be to competitive employment, volunteer internships, education, college enrollment, or salaried employment including higher wage and skilled jobs in industries which are experiencing shortages such as the healthcare field. In this pursuit, the Vocational Rehabilitation Counselor may assist with job search & placement assistance and provide job coaching, counseling, and guidance. i-Ability is a program of RAMS Hire-Ability Vocational Services which offers a full spectrum of vocational services; as such, trainee graduates may also transition into the Employment Services, which is funded through a contract/agreement with the California State Department of Rehabilitation. This program provides a higher level of individualized job preparation using classroom and individual meetings, job development, individualized plans & job placement, and follow-along services to consumers. Hire-Ability also maintains a cooperative agreement with California Department of Rehabilitation (since 1998) to connect employers with trained individuals; thus, supporting job placements for program participants with employment.

- E. Program staffing (which staff will be involved in what aspects of the service development and delivery). Indicate if any staff position is not funded by DPH.

See CBHS Appendix B.

F. Mental Health Services Act Programs

1. One of the primary MHSA tenets is consumer participation/engagement. Programs must identify how participants and/or families are engaged in the development, implementation and/or evaluation of programs. This can include peer-employees, advisory committees, etc.

RAMS is committed to consumer involvement and community input in all elements of program operations, including planning, implementation, and evaluation. This process ensures quality programming, increases effectiveness, and ensure culturally competency. The best informant for the culturally relevant curriculum & program development is the target population, themselves. Potential applicants/trainees and interested organizations are invited to the program Orientations/Open Houses as well as contact the i-Ability Vocational IT Manager directly. As the cohort is in operation, the IT Trainer regularly meets (approximately weekly) with trainees to solicit feedback; the i-Ability Manager and Vocational Rehabilitation Counselor also regularly solicit feedback from trainees. Furthermore, at the end of each cohort, trainees are given anonymous written program evaluations and satisfaction surveys regarding curriculum, course structure & activities, support services, and professional development. A post-cohort focus group is also conducted to solicit similar feedback regarding the curriculum of the program, recruitment process, accessibility, and effectiveness. All feedback is compiled and reviewed (by Hire-Ability management and RAMS executive management), informs the program design (development & adjustments, implementation), and is incorporated, as appropriate.

During the cohort on-the-job training, all trainees are paid. Furthermore, i-Ability Vocational IT maintains an advisory committee that is multi-disciplinary and reflects the diversity of the community. Membership includes consumer representation, CBHS, and RAMS with involvement from program participants (graduates). This committee schedules to meet quarterly and evaluates program components while advising on its further development and implementation.

2. MHPA Vision: Providers have the attitudes, knowledge and skills needed to understand, communicate with and effectively serve people across cultures.

RAMS recruits employs staff with relevant educational, employment history and cultural competence for the target population we work with through thorough interviews and reference checks. Furthermore, RAMS believes in the principles of Wellness and Recovery in which promotes the engagement of peers through various activities which include employment of peers at all levels of positions. The process of on-going education and training to ensure staff are providing the standard of services required by RAMS are generally through regular attendance of staff meetings, individual supervisor supervisee meetings, monthly internal/external trainings, annual cultural competency trainings, and other activities that are program specific. RAMS maintains a philosophy as well as a policy regarding creating a welcoming environment to all, which in turn is displayed through positive and healthy attitudes among staff. Measurement of how effective staff is in providing a high level of service is through client satisfaction surveys, client advisory councils, and feedback from other providers.

3. MHPA Vision: Collaboration with different systems increases opportunities for jobs, education, housing, etc.

RAMS continuously engages with various systems to increase the program trainees' knowledge and networking possibilities regarding jobs/internships, further educational opportunities, etc. Such systems that Hire-Ability specifically works with includes, but is not limited to: BHS (as the program is primarily providing classroom and on-the-job training, on-site at BHS' location using the BHS system); engaging in the San Francisco's Mayor's Committee on Disabilities (monthly meeting that involves various systems serving/providing vocational services); Job Developers Huddle-One Stop Western Addition, Potrero /Dogpatch Merchants Association and ongoing relationship/ collaboration with California State Department of Rehabilitation (for which Hire-Ability maintains a separate contract); and involvement in the CBHS Co-Operative group (streamlined referral system amongst RAMS Hire-Ability, Caminar, State Department of Rehabilitation, Citywide Forensic Collaborative). Furthermore, the Ability Vocational Rehabilitation Counselor provides support & coaching into the workforce and connects participants to additional resources (e.g. Department of Rehabilitation, RAMS Hire-Ability Employment Services, educational/training resources, housing).

## 7. Objectives and Measurements

### a. Standardized Objectives

All applicable objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS Performance Objectives FY17-18.

### b. Individualized Objectives

- At program completion, 75% of trainee graduates will indicate improvements to their coping abilities; this will be evidenced by post-program evaluations and satisfaction surveys, collected by RAMS staff and analyzed by the Program Director
- For each component, 75% of enrolled trainees will successfully complete (i.e. graduate) the training or have exited the program early due to obtaining employment related to this field, thus increasing readiness for entry-level employment/internship/volunteerism in the information

technology/behavioral health field; this will be evidenced by program completion records that is documented by the Vocational Rehabilitation Counselor

- At program completion, 75% of trainees will express overall satisfaction with the program; this will be evidenced by the post-program satisfaction surveys, collected by RAMS staff and analyzed by the Program Director
- At program completion, at least 75% of trainees will participate in exit interviews through focus groups or one-on-one interview to solicit feedback regarding the curriculum of the program, recruitment process, accessibility, and effectiveness; this will be evidenced by feedback summary notes, collected by BHS IT management and RAMS staff.
- At least 75% of trainee graduates will respond/ participate in the three-month post-program survey to assess the program's impact on work and/or education placements

#### 8. Continuous Quality Improvement

- a. Achievement of contract performance objectives and productivity

RAMS monitors contract performance objectives through several methods such as daily data analysis and monthly review of consumer individual vocational goals/objectives, regular weekly meetings between the Vocational Rehabilitation Counselor and consumer served, regular individual supervision between supervisors and supervisee's to discuss consumer caseload with regard to intervention strategies, vocational plans & progress, documentation, productivity and overall contract objectives. Other significant activities to ensure achievement of contract performance objectives include regular weekly program staff meetings and program management meetings where issues related to overcoming any barriers to achieving performance objectives are discussed.

Monthly reports from each program coordinator to the program director and in turn to the Deputy Chief of RAMS address the ongoing progress and/or barriers towards contract objectives. Corrective action activities are documented which includes the identification of the issue, plan of action and steps and timelines for completion of the plan. RAMS Quality Council which represents a small group of RAMS supervisors, supervisees, consumers and executive leadership staff meet quarterly, is designed to advise on program quality assurance and improvement activities.

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All staff are informed about objectives and the required documentation related to the activities and program outcomes; majority of program objectives are measured by participant scores, program evaluations, and/or post-program surveys. With regards to management monitoring, the Program Director reports progress/ status towards each contract objective to executive management (Deputy Chief/Director of Clinical Services and Chief Executive Officer) in a written monthly report. If the projected progress has not been achieved for the month, the Program Director identifies barriers and develops a plan of action. In addition, the Program Director monitors programming/service progress (level of engagement by participants, level of accomplishing program goals/objectives), program exit reasons, and service/resource utilization. RAMS also conducts various random file/chart reviews to review adherence to objectives as well as service documentation requirements.



b. Quality of documentation, including a description of the frequency and scope of internal chart audits

The program utilizes various mechanisms to review documentation quality. Chart review by supervisors, at the very minimal, is reviewed after the 10 day visitation period and, if enrollment continues, a minimum of every 30 days thereafter and within a week of case closure. Active charts are reviewed quarterly after the vocational re-assessments and plans are conducted. Based on their review, determinations/recommendations are provided relating to service authorizations including frequency and modality/type of services, and the match to client's progress & vocational/clinical needs; feedback is provided to direct staff members. Furthermore, clinical supervisors monitor the service documentation of their supervisees; staffs meet weekly with their supervisors to review caseload with regard to service strategies, vocational plans & progress, documentation, productivity, etc. On a quarterly basis, the Program Director or Manager/

Coordinator conducts a review of randomly selected charts (up to 10 charts, program-wide) to monitor quality & timeliness and provide feedback directly to staff as well as general summaries at staff meetings. The selection is such that each individual provider is reviewed at least annually.

In addition to the program's documentation review, the agency's Quality Council conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy Chief/Director of Clinical Services, and another council member (or designee). Feedback will be provided directly to staff as well as general summaries at staff meetings.

c. Cultural competency of staff and services

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by individual supervision (mostly weekly); supervisors and their supervisees' caseload with regard to service strategies, vocational plans & progress, documentation, etc. Furthermore, RAMS annually holds an agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.
- Ongoing review of vocational services indicators is conducted by the Program Director (and reported to executive management) on monthly basis; data collection and analysis of service engagement (referral source; engagement after intake; number of admissions; service discharge reasons; and service utilization review)
- Client's preferred language for services is noted at intake; during the case assignment process, the Program Director matches client with counselor by taking into consideration language, culture, and provider expertise. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- At least annually, aggregated demographic data of clientele and staff/providers is collected and analyzed by management in order to continuously monitor and identify any enhancements needed

- Development of annual objectives based on cultural competency principles; progress on objectives are reported by Program Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action.
- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Client Satisfaction);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Program Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.
- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters

d. Satisfaction of services

RAMS adheres to the CBHS satisfaction survey protocols which include dissemination annually or biannually. In addition, the Hire-Ability administered its program-developed client satisfaction surveys at case closure or upon request of the client. Furthermore, client feedback is obtained during post-program evaluations, quarterly client advisory council meetings, daily community meetings at the vocational services program, individual meetings between direct service staff and clients, and through a confidential telephone hotline. Results of the survey methods are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. Furthermore, the program facilitates focus groups with clients. All satisfaction survey methods and feedback results are also compiled and reported to executive management along with assessment of suggestion implementation. On an annual to biennial basis, clients attend RAMS Board of Directors meetings to share their experiences and provide feedback.

e. Timely completion and use of outcome data

Not applicable.

9. Required Language

Not applicable.



<b>Contractor Name:</b> Richmond Area Multi-Services, Inc.	<b>Appendix A-5</b>
<b>Program Name:</b> TAY Vocational Services	<b>Contract Term:</b> 07/01/17 – 06/30/18

**1. Identifiers:**

Program Name: TAY Vocational Services  
 Program Address: 1234 Indiana Street  
 City, State, ZIP: San Francisco, CA 94107  
 Telephone/FAX: Tel: (415) 282-9675 Fax: (415) 920-6877  
 Website Address: www.ramsinc.org

Contractor Address: RAMS Administration, 639 14<sup>th</sup> Avenue  
 City, State, ZIP: San Francisco, CA 94118  
 Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
 Telephone: (415) 800-0699  
 Fax: (415) 751-7336  
 Email Address: angelatang@ramsinc.org

Program Code(s) (if applicable): Not Applicable

**2. Nature of Document:**

New     Renewal     Modification

**3. Goal Statement:**

To provide vocational/occupational assessment, time-limited paid internships in order to provide healthy activities, provide entry-level work exploration and experience, and support TAY who are receiving services in the SFDPH-BHS system of care achieve resiliency and maximize recovery.

**4. Target Population:**

San Francisco residents that are transitional age youth, ages 15-18 and TAY young adults, ages 18-25, currently receiving behavioral health services at SFDPH-BHS system of care. Outreach will be made to underserved populations and those who are involved in multiple systems including behavioral health, juvenile justice, human services and the educational system. Particular outreach will be made to all BHS Adult Providers, CYF SOC Providers, organizations that serve transitional aged youth which may include Larkin Street, Huckleberry House, SFUSD Wellness Center, etc.

**5. Modality(s)/Intervention(s)**

See BHS Appendix B, CRDC pages.

**6. Methodology:**

The Hire-Ability TAY Vocational Services Program contains four main components:

- Assessment – Vocational/occupational and interest assessment. The program will provide a developmentally appropriate interactive assessment in order to engage youth in full participation.

<b>Contractor Name:</b> Richmond Area Multi-Services, Inc.	<b>Appendix A-5</b>
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- **Case Management** – The program will provide ongoing case management, including linkage and referral when needed, to support participants in minimizing barriers and maximizing participation and recovery.
- **Group Training** – Three month initial group training which may include soft skills, fieldtrip to potential internship sites, inspirational and career related speakers, group cohesion and learning, etc.; and ongoing group learning activities throughout the program year for each cohort.
- **Internship/Work Experience** – Each participant will be placed at an internship site that best fits his/her interest, ability, availability, and experience, for nine months. Site may be within RAMS and in the community. Internship may range from 4-20 hours/week depending on site availability, participant’s school and other schedule, and program design.

All participants will receive San Francisco minimum wage pay/stipend during program duration. As this is the first cohort and a pilot program, outreach started during FY 2015-16 with focus groups which also served as outreach to the TAY community and their families. Outreach for 2016-17 will take place in July through September; notice of acceptance and program start in October 2016 for the first cohort.

This is a 12-month program with an additional 2-month retention follow-up, which will roll over to the following fiscal year. The second cohort will start in spring 2017. With two cohorts staggered to allow smaller cohorts, yet ability to serve more youth, and be more flexible for youth to start at two different time span.

A mid- and end-program survey will be administered. The mid-program survey is an opportunity to provide more timely feedback to be considered for program improvement.

**7. Objectives and Measurements:**

**A. Standardized Objectives**

Any applicable objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS AOA Performance Objectives FY 17-18.

**B. Individualized Objectives**

RAMS TAY Vocational Services has established the following objectives for FY 2017-18:

- At least 15 TAY youth will be enrolled in the program
- At least 75% of participants will complete the program (e.g. graduate)
- To complete the program, participants must meet a 75% participation rate
- At least 75% of program graduates will indicate, on an exit survey, an increase of readiness for additional meaningful activities related to vocational services. This may be collected in fiscal year 2017-18; however, a mid-program survey will be administered to elicit feedback.
- At least 75% of program graduates will indicate, on an exit survey, overall program satisfaction. This may be collected in fiscal year 2017-18; however, a mid-program survey will be administered to elicit feedback for program improvement.

Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-5
Program Name: TAY Vocational Services	Contract Term: 07/01/17 – 06/30/18

**8. Continuous Quality Improvement:**

**A. Achievement of contract performance objectives and productivity.**

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All staff are informed about objectives and the required documentation related to the activities and program outcomes; majority of program objectives are measured by participant scores, program evaluations, and/or post-program surveys. With regards to management monitoring, the Program Director reports progress/status towards each contract objective to executive management (Deputy Chief/Director of Clinical Services and Chief Executive Officer) in a written monthly report. If the projected progress has not been achieved for the month, the Program Director identifies barriers and develops a plan of action. In addition, the Program Director monitors programming/service progress (level of engagement by participants, level of accomplishing program goals/objectives), program exit reasons, and service/resource utilization. RAMS also conducts various random file/chart reviews to review adherence to objectives as well as service documentation requirements.

**B. Quality of documentation, including a description of the frequency and scope of internal chart audits.**

The program director and other members of the Hire-Ability Vocational Services management team meet regular with staff for supervision meetings. Documentation of meetings, trainings, performance evaluations is noted and, as appropriate, may be filed directly in the employees personnel file with human resources. Feedback through surveys are also analyzed and evaluated and reported to RAMS executive leadership. Information from the outcomes is used for program improvement purposes.

RAMS utilizes various mechanisms to review documentation quality. Chart reviews are conducted by supervisors; based on their review, determinations/recommendations are provided relating to frequency and modality/type of services, and the match to client's progress & vocational/clinical needs. Feedback is provided to direct staff members. Furthermore, supervisors monitor the service documentation of their supervisees; staff meets weekly with their supervisors to review caseload with regard to service strategies, vocational plans & progress, documentation, productivity, etc. Charts are reviewed at regular intervals, to monitor quality & timeliness. Feedback is provided directly to staff as well as general summaries at staff meetings.

In addition to the program's documentation review, the RAMS Quality Council formally conducts a of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy Chief/Director of Clinical Services, and another council member (or designee). Feedback is provided directly to staff as well as general summaries at staff meetings.

**C. Cultural competency of staff and services.**

<b>Contractor Name:</b> Richmond Area Multi-Services, Inc.	<b>Appendix A-5</b>
<b>Program Name:</b> TAY Vocational Services	<b>Contract Term:</b> 07/01/17 – 06/30/18

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by individual supervision (mostly weekly); supervisors and their supervisees' caseload with regard to service strategies, vocational plans & progress, documentation, etc. Furthermore, RAMS annually holds an agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.
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- Client's preferred language for services is noted at intake; during the case assignment process, the Program Director matches client with counselor by taking into consideration language, culture, and provider expertise. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- At least annually, aggregated demographic data of clientele and staff/providers is collected and analyzed by management in order to continuously monitor and identify any enhancements needed
- Development of annual objectives based on cultural competency principles; as applicable, progress on objectives are reported by Program Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action.
- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Satisfaction with services);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Program Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.

<b>Contractor Name:</b> Richmond Area Multi-Services, Inc.	<b>Appendix A-5</b>
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- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters

**D. Satisfaction with services.**

RAMS adheres to the BHS satisfaction survey protocols which include dissemination annually or biannually, as applicable. In addition, the Hire-Ability administered its program-developed client satisfaction surveys. Furthermore, client feedback is obtained during post-program evaluations, client advisory council meetings, community meetings at the vocational services program, individual meetings between direct service staff and clients, and through a confidential telephone hotline. Results of the survey methods are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. Furthermore, the program facilitates focus groups with clients. All satisfaction survey methods and feedback results are also compiled and reported to executive management along with assessment of suggestion implementation. On an annual to biennial basis, clients attend RAMS Board of Directors meetings to share their experiences and provide feedback.

**E. Timely completion and use of outcome data, including CANS and/or ANSA data.**

Not Applicable.

**9. Required Language:**

Not Applicable.





**Appendix B**  
**Calculation of Charges**

**1. Method of Payment**

A. Invoices furnished by CONTRACTOR under this Agreement must be in a form acceptable to the Contract Administrator and the CONTROLLER and must include the Contract Progress Payment Authorization number or Contract Purchase Number. All amounts paid by CITY to CONTRACTOR shall be subject to audit by CITY. The CITY shall make monthly payments as described below. Such payments shall not exceed those amounts stated in and shall be in accordance with the provisions of Section 5, COMPENSATION, of this Agreement.

Compensation for all SERVICES provided by CONTRACTOR shall be paid in the following manner. For the purposes of this Section, "General Fund" shall mean all those funds which are not Work Order or Grant funds. "General Fund Appendices" shall mean all those appendices which include General Fund monies.

(1) Fee For Service0 (Monthly Reimbursement by Certified Units at Budgeted Unit Rates)

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15<sup>th</sup>) calendar day of each month, based upon the number of units of service that were delivered in the preceding month. All deliverables associated with the SERVICES defined in Appendix A times the unit rate as shown in the appendices cited in this paragraph shall be reported on the invoice(s) each month. All charges incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

(2) Cost Reimbursement (Monthly Reimbursement for Actual Expenditures within Budget):

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15<sup>th</sup>) calendar day of each month for reimbursement of the actual costs for SERVICES of the preceding month. All costs associated with the SERVICES shall be reported on the invoice each month. All costs incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

B. Final Closing Invoice

(1) Fee For Service Reimbursement:

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those SERVICES rendered during the referenced period of performance. If SERVICES are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY. CITY'S final reimbursement to the CONTRACTOR at the close of the Agreement period shall be adjusted to conform to actual units certified multiplied by the unit rates identified in Appendix B attached hereto, and shall not exceed the total amount authorized and certified for this Agreement.

(2) Cost Reimbursement:

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those costs incurred during the referenced period of performance. If costs are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY.

C. Payment shall be made by the CITY to CONTRACTOR at the address specified in the section entitled "Notices to Parties."

D. Upon the effective date of this Agreement, contingent upon prior approval by the CITY'S Department of Public Health of an invoice or claim submitted by Contractor, and of each year's revised Appendix A (Description of Services) and each year's revised Appendix B (Program Budget and Cost Reporting Data Collection Form), and within each fiscal year, the CITY agrees to make an initial payment to CONTRACTOR not to exceed twenty-five per cent (25%) of the General Fund and MHSA Fund of the CONTRACTOR'S allocation for the applicable fiscal year.

CONTRACTOR agrees that within that fiscal year, this initial payment shall be recovered by the CITY through a reduction to monthly payments to CONTRACTOR during the period of October 1 through March 31 of the applicable fiscal year, unless and until CONTRACTOR chooses to return to the CITY all or part of the initial payment for that fiscal year. The amount of the initial payment recovered each month shall be calculated by dividing the total initial payment for the fiscal year by the total number of months for recovery. Any termination of this Agreement, whether for cause or for convenience, will result in the total outstanding amount of the initial payment for that fiscal year being due and payable to the CITY within thirty (30) calendar days following written notice of termination from the CITY.

## 2. Program Budgets and Final Invoice

### A. Program Budgets are listed below and are attached hereto.

Budget Summary

Appendix B-1 Hire - Ability Janitorial Services

Appendix B-2 Hire - Ability Clerical & Mailroom Services

Appendix B-3 Peer-to-Peer Vocational Linkage

Appendix B-4 Hire-Ability Information Technology

Appendix B-5 TAY Vocational Services

### B. COMPENSATION

Compensation shall be made in monthly payments on or before the 30<sup>th</sup> day after the DIRECTOR, in his or her sole discretion, has approved the invoice submitted by CONTRACTOR. The breakdown of costs and sources of revenue associated with this Agreement appears in Appendix B, Cost Reporting/Data Collection (CR/DC) and Program Budget, attached hereto and incorporated by reference as though fully set forth herein. The maximum dollar obligation of the CITY under the terms of this Agreement shall not exceed Twenty Two Million Six Hundred Three Thousand Nine Hundred Thirty Dollars (\$22,603,930) for the period of January 1, 2016 through October 31, 2020.

CONTRACTOR understands that, of this maximum dollar obligation \$1,739,102 is included as a contingency amount and is neither to be used in Appendix B, Budget, or available to CONTRACTOR without a modification to this Agreement executed in the same manner as this Agreement or a revision to Appendix B, Budget, which has been approved by the Director of Health. CONTRACTOR further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable CITY and Department of Public Health laws, regulations and policies/procedures and certification as to the availability of funds by the Controller. CONTRACTOR agrees to fully comply with these laws, regulations, and policies/procedures.

(1) For each fiscal year of the term of this Agreement, CONTRACTOR shall submit for approval of the CITY's Department of Public Health a revised Appendix A, Description of Services, and a revised Appendix B, Program Budget and Cost Reporting Data Collection form, based on the CITY's allocation of funding for SERVICES for the appropriate fiscal year. CONTRACTOR shall create these Appendices in compliance with the instructions of the Department of Public Health. These Appendices shall apply only to the fiscal year for which they were created. These Appendices shall become part of this Agreement only upon approval by the CITY.

(2) CONTRACTOR understands that, of the maximum dollar obligation stated above, the total amount to be used in Appendix B, Budget and available to CONTRACTOR for the entire term of the contract is as follows, notwithstanding that for each fiscal year, the amount to be used in Appendix B, Budget and available to CONTRACTOR for that fiscal year shall conform with the Appendix A, Description of Services, and a Appendix B, Program Budget and Cost Reporting Data Collection form, as approved by the CITY's Department of Public Health based on the CITY's allocation of funding for SERVICES for that fiscal year.

<u>Term</u>	<u>Amount</u>
01/01/16 - 06/30/16	2,024,552
07/01/16 - 06/30/17	4,347,756
07/01/17 - 06/30/18	4,347,756
07/01/18 - 06/30/19	4,347,756
07/01/19 - 06/30/20	4,347,756
07/01/20 – 10/31/20	<u>1,449,252</u>
Sub. Total of January 2016 through October 31, 2020	20,864,828
Contingency Available	<u>1,739,102</u>
Total of January 2016 through October 31, 2020	22,603,930

(3) CONTRACTOR understands that the CITY may need to adjust sources of revenue and agrees that these needed adjustments will become part of this Agreement by written modification to CONTRACTOR. In event that such reimbursement is terminated or reduced, this Agreement shall be terminated or proportionately reduced accordingly. In no event will CONTRACTOR be entitled to compensation in excess of these amounts for these periods without there first being a modification of the Agreement or a revision to Appendix B, Budget, as provided for in this section of this Agreement.

C. CONTRACTOR agrees to comply with its Budget as shown in Appendix B in the provision of SERVICES. Changes to the budget that do not increase or reduce the maximum dollar obligation of the CITY are subject to the provisions of the Department of Public Health Policy/Procedure Regarding Contract Budget Changes. CONTRACTOR agrees to comply fully with that policy/procedure.

D. No costs or charges shall be incurred under this Agreement nor shall any payments become due to CONTRACTOR until reports, SERVICES, or both, required under this Agreement are received from CONTRACTOR and approved by the DIRECTOR as being in accordance with this Agreement. CITY may withhold payment to CONTRACTOR in any instance in which CONTRACTOR has failed or refused to satisfy any material obligation provided for under this Agreement.

E. In no event shall the CITY be liable for interest or late charges for any late payments.

F. CONTRACTOR understands and agrees that should the CITY'S maximum dollar obligation under this Agreement include State or Federal Medi-Cal revenues, CONTRACTOR shall expend such revenues in the provision of SERVICES to Medi-Cal eligible clients in accordance with CITY, State, and Federal Medi-Cal regulations. Should CONTRACTOR fail to expend budgeted Medi-Cal revenues herein, the CITY'S maximum dollar obligation to CONTRACTOR shall be proportionally reduced in the amount of such unexpended revenues. In no event shall State/Federal Medi-Cal revenues be used for clients who do not qualify for Medi-Cal reimbursement.

G. CONTRACTOR further understands and agrees that any State or Federal Medi-Cal funding in this Agreement subject to authorized Federal Financial Participation (FFP) is an estimate, and actual amounts will be determined based on actual services and actual costs, subject to the total compensation amount shown in this Agreement."



CBHS BUDGET DOCUMENT

Appendix B - DPH 1: Department of Public Health Contract Budget Summary

DHCS Legal Entity Number (MH) 00343		Summary Page # 1 of 1				
DHCS Legal Entity Name (MH)/Contractor-Name (SA) Richmond Area Multi-Services, Inc.		Fiscal Year 2017-18				
Contract CMS # 7640		Funding Notification Date 07/01/17				
Contract Appendix Number	B-1	B-2	B-3	B-4	B-5	B-#
Provider Number	3894	3894	3894	3894	3894	
Program Name(s)	Janitorial Services	Clean and Mallroom Services	Peer to Peer Voc Linkage	Information Technology	TAY Vocational Services	
Program Code(s)	N/A	N/A	N/A	N/A	N/A	
Funding Term (mm/dd/yy - mm/dd/yy)	07/01/17-06/30/18	07/01/17-06/30/18	07/01/17-06/30/18	07/01/17-06/30/18	07/01/17-06/30/18	TOTAL
<b>FUNDING USES</b>						
Salaries	\$ 622,871	\$ 641,927	\$ 185,750	\$ 825,241	\$ 83,217	\$ 2,359,006
Employee Benefits	\$ 330,122	\$ 288,867	\$ 77,086	\$ 313,592	\$ 32,039	\$ 1,041,706
Subtotal Salaries & Employee Benefits	\$ 952,993	\$ 930,794	\$ 262,836	\$ 1,138,833	\$ 115,256	\$ 3,400,712
Operating Expenses	\$ 177,989	\$ 132,478	\$ 26,845	\$ 55,585	\$ 81,173	\$ 474,070
Capital Expenses						\$ -
Subtotal Direct Expenses	\$ 1,130,982	\$ 1,063,272	\$ 289,681	\$ 1,194,418	\$ 196,429	\$ 3,874,782
Indirect Expenses	\$ 135,718	\$ 127,593	\$ 34,762	\$ 143,330	\$ 23,571	\$ 464,974
Indirect %	12.0%	12.0%	12.0%	12.0%	12.0%	12.0%
<b>TOTAL FUNDING USES</b>	<b>\$ 1,266,700</b>	<b>\$ 1,190,865</b>	<b>\$ 324,443</b>	<b>\$ 1,337,748</b>	<b>\$ 220,000</b>	<b>\$ 4,339,756</b>
						Employee Fringe Benefits % 42.3%
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>						
MH COUNTY Adult - General Fund	\$ 715,430	\$ 581,346				\$ 1,296,776
MH CYF COUNTY General Fund	\$ 2,383	\$ 7,918				\$ 10,301
MH STATE Adult 1991 MH Realignment	\$ 121,669	\$ 344,570				\$ 466,239
MH STATE CYF 1991 Realignment	\$ 3,653	\$ 10,347				\$ 14,000
MH GRANT SAMSHA Adult SOC, CFDA #93.958			\$ 324,443			\$ 324,443
MH MHPA (CSS)	\$ 423,565	\$ 246,684			\$ 220,000	\$ 890,249
MH MHPA (IT) Information Technology				\$ 1,337,748		\$ 1,337,748
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>	<b>\$ 1,266,700</b>	<b>\$ 1,190,865</b>	<b>\$ 324,443</b>	<b>\$ 1,337,748</b>	<b>\$ 220,000</b>	<b>\$ 4,339,756</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>OTHER DPH FUNDING SOURCES</b>						
						\$ -
						\$ -
						\$ -
						\$ -
<b>TOTAL OTHER DPH FUNDING SOURCES</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>TOTAL DPH FUNDING SOURCES</b>	<b>\$ 1,266,700</b>	<b>\$ 1,190,865</b>	<b>\$ 324,443</b>	<b>\$ 1,337,748</b>	<b>\$ 220,000</b>	<b>\$ 4,339,756</b>
<b>NON-DPH FUNDING SOURCES</b>						
						\$ -
<b>TOTAL NON-DPH FUNDING SOURCES</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>	<b>\$ 1,266,700</b>	<b>\$ 1,190,865</b>	<b>\$ 324,443</b>	<b>\$ 1,337,748</b>	<b>\$ 220,000</b>	<b>\$ 4,339,756</b>
Prepared By Ken Chol, Chief Financial Officer		Phone Number 415-800-0699 x205				

Document Date : 7/1/17



CBHS BUDGET DOCUMENT

Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHGS Legal Entity Name (MH)/Contractor Name (SA) 00343		Appendix #				
Provider Name RAMS		B-1				
Provider Number 3894		Page # 1				
		Fiscal Year 2017-16				
		Funding Notification Date 07/01/17				
Program Name	Janitorial Services	Janitorial Services				
Program Code	N/A	N/A				
Mode/SFC (MH) or Modality (SA)	10/30-39	10/30-39				
Service Description	DS-Vocational	DS-Vocational				
Funding Term (mm/dd/yy - mm/dd/yy)	07/01/17-06/30/18	07/01/17-06/30/18				TOTAL
<b>FUNDING USES</b>						
Salaries & Employee Benefits	634,328	318,665				952,993
Operating Expenses	118,471	59,518				177,989
Capital Expenses						
Subtotal Direct Expenses	752,799	378,183				1,130,982
Indirect Expenses	90,336	45,382				135,718
<b>TOTAL FUNDING USES</b>	<b>843,135</b>	<b>423,565</b>				<b>1,266,700</b>
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>						
	Accounting Code (Index Code or Detail)					
MH COUNTY Adult - General Fund	HMHMCC730515	715,430				715,430
MH CYF COUNTY General Fund	HMHMCP751594	2,383				2,383
MH STATE Adult 1991 MH Realignment	HMHMCC730515	121,669				121,669
MH STATE CYF 1991 Realignment	HMHMCP751594	3,653				3,653
MH MRSA (CSS)	PMHS63-1705		423,565			423,565
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>843,135</b>	<b>423,565</b>			<b>1,266,700</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>						
	Accounting Code (Index Code or Detail)					
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>						
<b>OTHER DPH FUNDING SOURCES</b>						
	Accounting Code (Index Code or Detail)					
This row left blank for funding sources not in drop-down list						
<b>TOTAL OTHER DPH FUNDING SOURCES</b>						
<b>TOTAL DPH FUNDING SOURCES</b>		<b>843,135</b>	<b>423,565</b>			<b>1,266,700</b>
<b>NON-DPH FUNDING SOURCES</b>						
	Accounting Code (Index Code or Detail)					
This row left blank for funding sources not in drop-down list						
<b>TOTAL NON-DPH FUNDING SOURCES</b>						
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>843,135</b>	<b>423,565</b>			<b>1,266,700</b>
<b>BHS UNITS OF SERVICE AND UNIT COST</b>						
Number of Beds Purchased (if applicable)						
SA Only - Non-Res 33 - ODF # of Group Sessions (classes)						
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program						
	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	
Payment Method	1,886	948	0	0	0	
DPH Units of Service						
Unit Type	Client Full Day	Client Full Day	0	0	0	
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES ONLY)	\$ 447.00	\$ 447.00	\$ -	\$ -	\$ -	
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 447.00	\$ 447.00	\$ -	\$ -	\$ -	
Published Rate (Medi-Cal Providers Only)						
Unduplicated Clients (UGC)	N/A	N/A				Total UDC N/A

Document Date : 7/1/17





CBHS BUDGET DOCUMENT

Appendix B - DPH 4: Operating Expenses Detail

Program Name: Janitorial-Services  
 Program Code: N/A

Appendix #: B-1  
 Page #: 3  
 Fiscal Year: 2017-18  
 Funding Notification Date: 07/01/17

Expense Categories & Line Items	TOTAL	General Fund (HMHMCC730515, HMHMCP751594, HMHMCC730515, HMHMCP751594)	MH MHA (CSS) (PMHS63-1705)	Accounting Code 3 (Index Code or Detail)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
<b>Term (mm/dd/yy-mm/dd/yy):</b>		07/01/17-06/30/18	07/01/17-06/30/18				
Rent	\$ -	\$ -	\$ -				
Utilities(telephone, electricity, water, gas)	\$ -	\$ -	\$ -				
Building Repair/Maintenance	\$ -	\$ -	\$ -				
<b>Occupancy Total:</b>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office/Program Supplies	\$ 168,166	\$ 105,278	\$ 52,888				
	\$ -	\$ -	\$ -				
	\$ -	\$ -	\$ -				
<b>Materials &amp; Supplies Total:</b>	\$ 168,166	\$ 105,278	\$ 52,888	\$ -	\$ -	\$ -	\$ -
Training/Staff Development	\$ 1,000	\$ 666	\$ 334				
Insurance	\$ 5,500	\$ 3,661	\$ 1,839				
Equipment Lease & Maintenance	\$ -	\$ -	\$ -				
	\$ -	\$ -	\$ -				
	\$ -	\$ -	\$ -				
<b>General Operating Total:</b>	\$ 6,500	\$ 4,327	\$ 2,173	\$ -	\$ -	\$ -	\$ -
Local Travel	\$ 5,000	\$ 3,328	\$ 1,672				
Out-of-Town Travel	\$ -	\$ -	\$ -				
Field Expenses	\$ -	\$ -	\$ -				
<b>Staff Travel Total:</b>	\$ 5,000	\$ 3,328	\$ 1,672	\$ -	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and (add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -	\$ -				
<b>Consultant/Subcontractor Total:</b>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):							
Recruitment & Direct-Staff Expenses	\$ 3,500	\$ 2,330	\$ 1,170				
Client-Related Food	\$ 4,000	\$ 2,662	\$ 1,338				
Client-Related Other Activities	\$ 823	\$ 546	\$ 277				
<b>Other Total:</b>	\$ 8,323	\$ 5,538	\$ 2,785	\$ -	\$ -	\$ -	\$ -
<b>TOTAL OPERATING EXPENSE:</b>	\$ 177,989	\$ 118,471	\$ 59,518	\$ -	\$ -	\$ -	\$ -

Document Date: 7/1/17

CBHS BUDGET DOCUMENT

Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS Legal Entity Name (MH)/Contractor Name (SA) 00343		Appendix #:				
Provider Name: RAMS		B-2				
Provider Number 3894		Page #				
		1				
		Fiscal Year				
		2017-18				
		Funding Notification Date				
		07/01/17				
Program Name	Clerical and Mailroom Services	Clerical and Mailroom Services				
Program Code	N/A	N/A				
Mode/SFC (MH) or Modality (SA)	10/30-39	10/30-39				
Service Description	DS-Vocational	DS-Vocational				
Funding Term (mm/dd/yy - mm/dd/yy)	07/01/17-06/30/18	07/01/17-06/30/18				TOTAL
<b>FUNDING USES</b>						
Salaries & Employee Benefits	737,983	192,811				930,794
Operating Expenses	105,035	27,443				132,478
Capital Expenses						-
<b>Subtotal Direct Expenses</b>	<b>843,018</b>	<b>220,254</b>				<b>1,063,272</b>
Indirect Expenses	101,163	25,430				127,593
<b>TOTAL FUNDING USES</b>	<b>944,181</b>	<b>246,684</b>				<b>1,190,865</b>
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>						
	Accounting Code (Index Code or Detail)					
MH COUNTY Adult - General Fund	HMHMCC730515	581,346				581,346
MH CYF COUNTY General Fund	HMHMCP751594	7,918				7,918
MH STATE Adult 1991 MH Realignment	HMHMCC730515	344,570				344,570
MH STATE CYF 1991 Realignment	HMHMCP751594	10,347				10,347
MH MHS (CSS)	PMHS63-1705		246,684			246,684
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>944,181</b>	<b>246,684</b>			<b>1,190,865</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>						
	Accounting Code (Index Code or Detail)					
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>						
<b>OTHER DPH FUNDING SOURCES</b>						
	Accounting Code (Index Code or Detail)					
This row left blank for funding sources not in drop-down list						
<b>TOTAL OTHER DPH FUNDING SOURCES</b>						
<b>TOTAL DPH FUNDING SOURCES</b>		<b>944,181</b>	<b>246,684</b>			<b>1,190,865</b>
<b>NON-DPH FUNDING SOURCES</b>						
	Accounting Code (Index Code or Detail)					
This row left blank for funding sources not in drop-down list						
<b>TOTAL NON-DPH FUNDING SOURCES</b>						
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>944,181</b>	<b>246,684</b>			<b>1,190,865</b>
<b>BHS UNITS OF SERVICE AND UNIT COST</b>						
Number of Beds Purchased (if applicable)						
SA Only - Non-Res 33 - ODF # of Group Sessions (classes)						
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program						
	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	
Payment Method	2,675	699				
DPH Units of Service						
Unit Type	Client Full Day	Client Full Day				
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES ONLY)	\$ 353.00	\$ 353.00	\$ -	\$ -	\$ -	
Cost Per Unit - Contract Rate (DPH & NON-DPH FUNDING SOURCES)	\$ 353.00	\$ 353.00	\$ -	\$ -	\$ -	
Published Rate (Medi-Cal Providers Only)						<b>Total UDC</b>
Unduplicated Clients (UDC)	N/A	N/A				N/A

Document Date: 7/1/17



CBHS BUDGET DOCUMENT

Appendix B - DPH 4: Operating Expenses Detail

Program Name: Clerical and Mailroom Services  
 Program Code: N/A

Appendix #: B-2  
 Page #: 3  
 Fiscal Year: 2017-18  
 Funding Notification Date: 07/01/17

Expense Categories & Line Items:	TOTAL	General Fund (HMHMCC730515, HMHMCP751594, HMHMCC730515, HMHMCP751594)	MH MSA (CSS) (PMHS63-1705)	Accounting Code 3 (Index Code or Detail)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
Term (mm/dd/yy-mm/dd/yy):		07/01/17-06/30/18	07/01/17-06/30/18				
Rent	\$ 9,500	\$ 7,532	\$ 1,968				
Utilities (telephone, electricity, water, gas)	\$ 12,000	\$ 9,514	\$ 2,486				
Building Repair/Maintenance	\$ 5,000	\$ 3,964	\$ 1,036				
<b>Occupancy Total:</b>	<b>\$ 26,500</b>	<b>\$ 21,010</b>	<b>\$ 5,490</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Office/Program Supplies	\$ 69,078	\$ 54,769	\$ 14,309				
	\$ -	\$ -	\$ -				
	\$ -	\$ -	\$ -				
	\$ -	\$ -	\$ -				
<b>Materials &amp; Supplies Total:</b>	<b>\$ 69,078</b>	<b>\$ 54,769</b>	<b>\$ 14,309</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Training/Staff Development	\$ 5,000	\$ 3,964	\$ 1,036				
Insurance	\$ 4,800	\$ 3,806	\$ 994				
Equipment Lease & Maintenance	\$ -	\$ -	\$ -				
	\$ -	\$ -	\$ -				
	\$ -	\$ -	\$ -				
<b>General Operating Total:</b>	<b>\$ 9,800</b>	<b>\$ 7,770</b>	<b>\$ 2,030</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Local Travel	\$ 3,600	\$ 2,854	\$ 746				
Out-of-Town Travel	\$ -	\$ -	\$ -				
Field Expenses	\$ -	\$ -	\$ -				
<b>Staff Travel Total:</b>	<b>\$ 3,600</b>	<b>\$ 2,854</b>	<b>\$ 746</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and (add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -	\$ -				
<b>Consultant/Subcontractor Total:</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Other (provide detail):							
Recruitment & Direct Staff Expenses	\$ 5,500	\$ 4,361	\$ 1,139				
Client-Related Food	\$ 12,000	\$ 9,514	\$ 2,486				
Client-Related Other Activities	\$ 6,000	\$ 4,757	\$ 1,243				
<b>Other Total:</b>	<b>\$ 23,500</b>	<b>\$ 18,632</b>	<b>\$ 4,868</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 132,478</b>	<b>\$ 105,035</b>	<b>\$ 27,443</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Document Date: 7/1/17

CBHS BUDGET DOCUMENT

Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS Legal Entity Name (MH)/Contractor Name (SA) 00343		Appendix #: B-3				
Provider Name RAMS		Page # 1				
Provider Number 3894		Fiscal Year 2017-18				
		Funding Notification Date 07/01/17				
Program Name	Peer to Peer Voc Linkage					
	N/A					
Mode/SFC (MH) or Modality (SA)	10/30-39					
Service Description	DS-Vocational					
Funding Term (mm/dd/yy - mm/dd/yy)	07/01/17-06/30/18					TOTAL
<b>FUNDING USES</b>						
Salaries & Employee Benefits	262,836					262,836
Operating Expenses	26,845					26,845
Capital Expenses						
Subtotal Direct Expenses	289,681					289,681
Indirect Expenses	34,762					34,762
<b>TOTAL FUNDING USES</b>	<b>324,443</b>					<b>324,443</b>
BHS MENTAL HEALTH FUNDING SOURCES	Accounting Code (Index Code or Detail)					
MH GRANT SAMSHA Adult SOC, CFDA #93.956	HMM007-1701	324,443				324,443
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>324,443</b>				<b>324,443</b>
BHS SUBSTANCE ABUSE FUNDING SOURCES	Accounting Code (Index Code or Detail)					
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>						
OTHER DPH FUNDING SOURCES	Accounting Code (Index Code or Detail)					
This row left blank for funding sources not in drop-down list						
<b>TOTAL OTHER DPH FUNDING SOURCES</b>						
<b>TOTAL DPH FUNDING SOURCES</b>		<b>324,443</b>				<b>324,443</b>
NON-DPH FUNDING SOURCES						
This row left blank for funding sources not in drop-down list						
<b>TOTAL NON-DPH FUNDING SOURCES</b>						
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>324,443</b>				<b>324,443</b>
<b>BHS UNITS OF SERVICE AND UNIT COST</b>						
Number of Beds Purchased (if applicable)						
SA Only - Non-Res 33 - ODF # of Group Sessions (classes)						
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program						
Payment Method	Cost Reimbursement (CR)					
DPH Units of Service	758					
Unit Type	Client/Full Day	0	0	0	0	
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	\$ 428.00	\$ -	\$ -	\$ -	\$ -	
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 428.00	\$ -	\$ -	\$ -	\$ -	
Published Rate (Medi-Cal Providers Only)						
Unduplicated Clients (UDC)	N/A					Total UDC N/A

Document Date: 7/1/17



CBHS BUDGET DOCUMENT

Appendix B - DPH 4: Operating Expenses Detail

Program Name: Peer to Peer Voc Linkage  
 Program Code: N/A

Appendix #: B-3  
 Page #: 3  
 Fiscal Year: 2017-18  
 Funding Notification Date: 07/01/17

Expense Categories & Line Items	TOTAL	MH GRANT SAMSHA ADULT (HMM007-1701)	Accounting Code 2 (Index Code or Detail)	Accounting Code 3 (Index Code or Detail)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
Term (mm/dd/yy-mm/dd/yy):		07/01/17-06/30/18					
Rent	\$ 6,000	\$ 6,000					
Utilities (telephone, electricity, water, gas)	\$ 6,000	\$ 6,000					
Building Repair/Maintenance	\$ 1,000	\$ 1,000					
<b>Occupancy Total:</b>	<b>\$ 13,000</b>	<b>\$ 13,000</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Office/Program Supplies	\$ 1,527	\$ 1,527					
	\$ -	\$ -					
	\$ -	\$ -					
	\$ -	\$ -					
<b>Materials &amp; Supplies Total:</b>	<b>\$ 1,527</b>	<b>\$ 1,527</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Training/Staff Development	\$ 1,500	\$ 1,500					
Insurance	\$ 870	\$ 870					
Equipment Lease & Maintenance	\$ -	\$ -					
	\$ -	\$ -					
	\$ -	\$ -					
<b>General Operating Total:</b>	<b>\$ 2,370</b>	<b>\$ 2,370</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Local Travel	\$ 5,000	\$ 5,000					
Out-of-Town Travel	\$ -	\$ -					
Field Expenses	\$ -	\$ -					
<b>Staff Travel Total:</b>	<b>\$ 5,000</b>	<b>\$ 5,000</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and (add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -					
	\$ -	\$ -					
<b>Consultant/Subcontractor Total:</b>	<b>\$ -</b>	<b>\$ -</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):							
Recruitment & Direct Staff Expenses	\$ 2,000	\$ 2,000					
Client-Related Food	\$ 2,448	\$ 2,448					
Client-Related Other Activities	\$ 500	\$ 500					
<b>Other Total:</b>	<b>\$ 4,948</b>	<b>\$ 4,948</b>	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 26,845</b>	<b>\$ 26,845</b>	\$ -	\$ -	\$ -	\$ -	\$ -

Document Date : 7/1/17



CBHS BUDGET DOCUMENT

Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS Legal Entity Name (MH)/Contractor Name (SA) 00343 Provider Name RAMS Provider Number 3894				Appendix #: B-4 Page #: 1 Fiscal Year: 2017-18 Funding Notification Date: 07/01/17	
Program Name	Information Technology Helpdesk	Information Technology Desktop	Information Technology Advanced Helpdesk/Desktop		
Program Code	N/A	N/A	N/A		
Mode/SFC (MH) or Modality (SA)	10/30-39	10/30-39	10/30-39		
Service Description	DS-Vocational	DS-Vocational	DS-Vocational		
Funding Term (mm/dd/yy - mm/dd/yy)	07/01/17-06/30/18	07/01/17-06/30/18	07/01/17-06/30/18		
					TOTAL
<b>FUNDING USES</b>					
Salaries & Employee Benefits	402,622	374,636	361,575		1,138,833
Operating Expenses	18,528	18,528	18,529		55,585
Capital Expenses					
Subtotal Direct Expenses	421,150	393,164	380,104		1,194,418
Indirect Expenses	50,538	47,180	45,612		143,330
<b>TOTAL FUNDING USES</b>	<b>471,688</b>	<b>440,344</b>	<b>425,716</b>		<b>1,337,748</b>
Accounting Code (Index Code or Detail)					
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>					
MH MSA (IT) Information Technology	PMHS63-1712	471,688	440,344	425,716	1,337,748
This row left blank for funding sources not in drop-down list					
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>471,688</b>	<b>440,344</b>	<b>425,716</b>	<b>1,337,748</b>
Accounting Code (Index Code or Detail)					
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>					
This row left blank for funding sources not in drop-down list					
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>					
Accounting Code (Index Code or Detail)					
<b>OTHER DPH FUNDING SOURCES</b>					
This row left blank for funding sources not in drop-down list					
<b>TOTAL OTHER DPH FUNDING SOURCES</b>					
<b>TOTAL DPH FUNDING SOURCES</b>		<b>471,688</b>	<b>440,344</b>	<b>425,716</b>	<b>1,337,748</b>
<b>NON-DPH FUNDING SOURCES</b>					
This row left blank for funding sources not in drop-down list					
<b>TOTAL NON-DPH FUNDING SOURCES</b>					
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>471,688</b>	<b>440,344</b>	<b>425,716</b>	<b>1,337,748</b>
<b>BHS UNITS OF SERVICE AND UNIT COST</b>					
Number of Beds Purchased (if applicable)					
SA Only - Non-Res 33 - ODF # of Group Sessions (classes)					
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program					
Payment Method		Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	
DPH Units of Service	640	460	380	0	0
Unit Type	Client Full Day	Client Full Day	Client Full Day		
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	\$ 737.01	\$ 957.27	\$ 1,120.31	\$ -	\$ -
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 737.01	\$ 957.27	\$ 1,120.31	\$ -	\$ -
Published Rate (Medi-Cal Providers Only)					Total UDC
Unduplicated Clients (UDC)	16	14	10		40

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CBHS BUDGET DOCUMENT

Appendix B - DPH 4: Operating Expenses Detail

Program Name: Information Technology  
 Program Code: N/A

Appendix #: B-4  
 Page #: 3  
 Fiscal Year: 2017-18  
 Funding Notification Date: 07/01/17

Expense Categories & Line Items	TOTAL	Helpdesk MH MHA (IT) (PMHS63-1712)	Desktop MH MHA (IT) (PMHS63-1712)	Advanced Helpdesk/Desktop MH MHA (IT) (PMHS63-1712)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
Term (mm/dd/yy-mm/dd/yy):		07/01/17-06/30/18	07/01/17-06/30/18	07/01/17-06/30/18			
Rent	\$ 7,600	\$ 2,533	\$ 2,533	\$ 2,534			
Utilities (telephone, electricity, water, gas)	\$ 5,500	\$ 1,833	\$ 1,833	\$ 1,834			
Building Repair/Maintenance	\$ 760	\$ 250	\$ 250	\$ 250			
<b>Occupancy Total:</b>	<b>\$ 13,850</b>	<b>\$ 4,616</b>	<b>\$ 4,616</b>	<b>\$ 4,618</b>	\$ -	\$ -	\$ -
Office/Program Supplies	\$ 25,635	\$ 8,545	\$ 8,545	\$ 8,545			
	\$ -	\$ -	\$ -	\$ -			
	\$ -	\$ -	\$ -	\$ -			
	\$ -	\$ -	\$ -	\$ -			
<b>Materials &amp; Supplies Total:</b>	<b>\$ 25,635</b>	<b>\$ 8,545</b>	<b>\$ 8,545</b>	<b>\$ 8,545</b>	\$ -	\$ -	\$ -
Training/Staff Development	\$ 3,500	\$ 1,167	\$ 1,167	\$ 1,166			
Insurance	\$ 4,100	\$ 1,367	\$ 1,367	\$ 1,366			
Equipment Lease & Maintenance	\$ -	\$ -	\$ -	\$ -			
	\$ -	\$ -	\$ -	\$ -			
	\$ -	\$ -	\$ -	\$ -			
<b>General Operating Total:</b>	<b>\$ 7,600</b>	<b>\$ 2,534</b>	<b>\$ 2,534</b>	<b>\$ 2,532</b>	\$ -	\$ -	\$ -
Local Travel	\$ 1,000	\$ 333	\$ 333	\$ 334			
Out-of-Town Travel	\$ -	\$ -	\$ -	\$ -			
Field Expenses	\$ -	\$ -	\$ -	\$ -			
<b>Staff Travel Total:</b>	<b>\$ 1,000</b>	<b>\$ 333</b>	<b>\$ 333</b>	<b>\$ 334</b>	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and (add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -	\$ -	\$ -			
<b>Consultant/Subcontractor Total:</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	\$ -	\$ -	\$ -
Other (provide detail):							
Recruitment & Direct Staff Expenses	\$ 3,500	\$ 1,167	\$ 1,167	\$ 1,166			
Client-Related Food	\$ 3,000	\$ 1,000	\$ 1,000	\$ 1,000			
Client-Related Other Activities	\$ 1,000	\$ 333	\$ 333	\$ 334			
<b>Other Total:</b>	<b>\$ 7,500</b>	<b>\$ 2,500</b>	<b>\$ 2,500</b>	<b>\$ 2,500</b>	\$ -	\$ -	\$ -
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 55,585</b>	<b>\$ 18,528</b>	<b>\$ 18,528</b>	<b>\$ 18,529</b>	\$ -	\$ -	\$ -

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QBHS BUDGET DOCUMENT

Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS Legal Entity Name (MH)/Contractor Name (SA) 60343		Appendix #:				B-5
Provider Name RAMS		Page #:				1
Provider Number 3894		Fiscal Year:				2017-18
		Funding Notification Date:				07/01/17
Program Name	TAY Vocational Services					
Program Code	N/A					
Mode/SFC (MH) or Modality (SA)	10/30-39					
Service Description	DS-Vocational					
Funding Term (mm/dd/yy - mm/dd/yy)	07/01/17-06/30/18					TOTAL
<b>FUNDING USES</b>						
Salaries & Employee Benefits	115,256					115,256
Operating Expenses	81,173					81,173
Capital Expenses						
Subtotal Direct Expenses	196,429					196,429
Indirect Expenses	23,571					23,571
<b>TOTAL FUNDING USES</b>	<b>220,000</b>					<b>220,000</b>
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>		Accounting Code (Index Code or Detail)				
MH MHSA (CSS)		PMHS63-1704	220,000			220,000
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>			<b>220,000</b>			<b>220,000</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>		Accounting Code (Index Code or Detail)				
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>						
<b>OTHER DPH FUNDING SOURCES</b>		Accounting Code (Index Code or Detail)				
This row left blank for funding sources not in drop-down list						
<b>TOTAL OTHER DPH FUNDING SOURCES</b>						
<b>TOTAL DPH FUNDING SOURCES</b>			<b>220,000</b>			<b>220,000</b>
<b>NON-DPH FUNDING SOURCES</b>						
This row left blank for funding sources not in drop-down list						
<b>TOTAL NON-DPH FUNDING SOURCES</b>						
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>			<b>220,000</b>			<b>220,000</b>
<b>BHS UNITS OF SERVICE AND UNIT COST</b>						
Number of Beds Purchased (if applicable)						
SA Only - Non-Res 33 - ODF # of Group Sessions (classes)						
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program						
Payment Method		Cost Reimbursement (CR)				
DPH Units of Service		594				
Unit Type		Client Full Day	0	0	0	0
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES ONLY)		\$ 370.37	\$	\$	\$	\$
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)		\$ 370.37	\$	\$	\$	\$
Published Rate (Medi-Cal Providers Only)						
Unduplicated Clients (UDC)		15				<b>Total UDC</b> 15

Document Date: 7/1/17



CBHS BUDGET DOCUMENT

Appendix B - DPH 4: Operating Expenses Detail

Program Name: TAY Vocational Services  
 Program Code: N/A

Appendix #: B-5  
 Page #: 3  
 Fiscal Year: 2017-18  
 Funding Notification Date: 07/01/17

Expense Categories & Line Items	TOTAL	MH MSA (CSS) (PMHS63-1604)	Accounting Code 2 (Index Code or Detail)	Accounting Code 3 (Index Code or Detail)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
Term (mm/dd/yy-mm/dd/yy):		07/01/17-06/30/18					
Rent	\$ 4,600	\$ 4,600					
Utilities (telephone, electricity, water, gas)	\$ 4,000	\$ 4,000					
Building Repair/Maintenance	\$ 1,000	\$ 1,000					
<b>Occupancy Total:</b>	<b>\$ 9,600</b>	<b>\$ 9,600</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Office/Program Supplies	\$ 3,000	\$ 3,000					
	\$ -	\$ -					
	\$ -	\$ -					
<b>Materials &amp; Supplies Total:</b>	<b>\$ 3,000</b>	<b>\$ 3,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Training/Staff Development	\$ 500	\$ 500					
Insurance	\$ 850	\$ 850					
Equipment Lease & Maintenance	\$ -	\$ -					
	\$ -	\$ -					
	\$ -	\$ -					
<b>General Operating Total:</b>	<b>\$ 1,350</b>	<b>\$ 1,350</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Local Travel	\$ 1,400	\$ 1,400					
Out-of-Town Travel	\$ -	\$ -					
Field Expenses	\$ -	\$ -					
<b>Staff Travel Total:</b>	<b>\$ 1,400</b>	<b>\$ 1,400</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and (add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -					
<b>Consultant/Subcontractor Total:</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Other (provide detail):							
Recruitment & Direct Staff Expenses	\$ 700	\$ 700					
Client Stipends	\$ 54,123	\$ 54,123					
Client-Related Food	\$ 6,000	\$ 6,000					
Client-Related Other Activities	\$ 5,000	\$ 5,000					
<b>Other Total:</b>	<b>\$ 65,823</b>	<b>\$ 65,823</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 81,173</b>	<b>\$ 81,173</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Document Date: 7/1/17



Appendix E  
San Francisco Department of Public Health  
Business Associate Agreement

This Business Associate Agreement (“Agreement”) supplements and is made a part of the contract (“Contract”) by and between the City and County of San Francisco, the Covered Entity (“CE”), and YMCA of San Francisco (“Contractor”), the Business Associate (“BA”), dated October 1, 2016 (CMS #7884). To the extent that the terms of the Contract are inconsistent with the terms of this Agreement, the terms of this Agreement shall control.

**RECITALS**

A. CE, by and through the San Francisco Department of Public Health (“SFDPH”), wishes to disclose certain information to BA pursuant to the terms of the Contract, some of which may constitute Protected Health Information (“PHI”) (defined below).

B. For purposes of the Contract, SFDPH requires Contractor, even if Contractor is also a covered entity under HIPAA, to comply with the terms and conditions of this Agreement as a BA of CE.

C. CE and BA intend to protect the privacy and provide for the security of PHI disclosed to BA pursuant to the Contract in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 (“HIPAA”), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 (“the HITECH Act”), and regulations promulgated there under by the U.S. Department of Health and Human Services (the “HIPAA Regulations”) and other applicable laws, including, but not limited to, California Civil Code §§ 56, et seq., California Health and Safety Code § 1280.15, California Civil Code §§ 1798, et seq., California Welfare & Institutions Code §§5328, et seq., and the regulations promulgated there under (the “California Regulations”).

D. As part of the HIPAA Regulations, the Privacy Rule and the Security Rule (defined below) require CE to enter into a contract containing specific requirements with BA prior to the disclosure of PHI, as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(a) and (e) and 164.504(e) of the Code of Federal Regulations (“C.F.R.”) and contained in this Agreement.

E. BA enters into agreements with CE that require the CE to disclose certain identifiable health information to BA. The parties desire to enter into this Agreement to permit BA to have access to such information and comply with the BA requirements of HIPAA, the HITECH Act, and the HIPAA Regulations.



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San Francisco Department of Public Health

Business Associate Agreement

In consideration of the mutual promises below and the exchange of information pursuant to this Agreement, the parties agree as follows:

1. **Definitions.**

a. **Breach** means the unauthorized acquisition, access, use, or disclosure of PHI that compromises the security or privacy of such information, except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information, and shall have the meaning given to such term under the HITECH Act and HIPAA Regulations [42 U.S.C. Section 17921 and 45 C.F.R. Section 164.402], as well as California Civil Code Sections 1798.29 and 1798.82.

b. **Breach Notification Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and D.

c. **Business Associate** is a person or entity that performs certain functions or activities that involve the use or disclosure of protected health information received from a covered entity, and shall have the meaning given to such term under the Privacy Rule, the Security Rule, and the HITECH Act, including, but not limited to, 42 U.S.C. Section 17938 and 45 C.F.R. Section 160.103.

d. **Covered Entity** means a health plan, a health care clearinghouse, or a health care provider who transmits any information in electronic form in connection with a transaction covered under HIPAA Regulations, and shall have the meaning given to such term under the Privacy Rule and the Security Rule, including, but not limited to, 45 C.F.R. Section 160.103.

e. **Data Aggregation** means the combining of Protected Information by the BA with the Protected Information received by the BA in its capacity as a BA of another CE, to permit data analyses that relate to the health care operations of the respective covered entities, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

f. **Designated Record Set** means a group of records maintained by or for a CE, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

g. **Electronic Protected Health Information** means Protected Health Information that is maintained in or transmitted by electronic media and shall have the meaning given to such term under HIPAA and the HIPAA Regulations, including, but not limited to, 45 C.F.R. Section





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San Francisco Department of Public Health

Business Associate Agreement

160.103. For the purposes of this Agreement, Electronic PHI includes all computerized data, as defined in California Civil Code Sections 1798.29 and 1798.82.

**h. Electronic Health Record** means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff, and shall have the meaning given to such term under the HITECH Act, including, but not limited to, 42 U.S.C. Section 17921.

**i. Health Care Operations** shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

**j. Privacy Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and E.

**k. Protected Health Information or PHI** means any information, including electronic PHI, whether oral or recorded in any form or medium: (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Sections 160.103 and 164.501. For the purposes of this Agreement, PHI includes all medical information and health insurance information as defined in California Civil Code Sections 56.05 and 1798.82:

**l. Protected Information** shall mean PHI provided by CE to BA or created, maintained, received or transmitted by BA on CE's behalf.

**m. Security Incident** means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system, and shall have the meaning given to such term under the Security Rule, including, but not limited to, 45 C.F.R. Section 164.304.

**n. Security Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and C.

**o. Unsecured PHI** means PHI that is not secured by a technology standard that renders PHI unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National



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## San Francisco Department of Public Health

## Business Associate Agreement

Standards Institute, and shall have the meaning given to such term under the HITECH Act and any guidance issued pursuant to such Act including, but not limited to, 42 U.S.C. Section 17932(h) and 45 C.F.R. Section 164.402.

**2. Obligations of Business Associate.**

**a. Attestations.** The BA will be required to complete and return to CE (and retain in BA's records for a period of seven years) the following forms, incorporated by reference as though fully set forth herein, SFDPH Attestations for Privacy (Attachment 1), Data Security (Attachment 2) and Compliance (Attachment 3) within ninety (90) calendar days from the execution of the Contract. If CE makes changes to any of these forms during the term of the Contract that CE believes are substantial, the BA will be required to complete and return CE's updated forms to CE within ninety (90) calendar days from the date that CE provides BA with written notice of such changes.

**b. User Agreements.** The BA shall maintain proof that it has required all of its employees or agents that will access SFDPH PHI have signed and completed the following forms prior to accessing SFDPH PHI for the first time and annually thereafter during the term of the Contract (and retain in BA's records for a period of seven years): the SFDPH User Agreement for Confidentiality, Data Security and Electronic Signature (Attachment 4) and the SFDPH Code of Conduct (Attachment 5), incorporated by reference as though fully set forth herein.

**c. Permitted Uses.** BA may use, access, and/or disclose PHI only for the purpose of performing BA's obligations for or on behalf of the City and as permitted or required under the Contract [MOU] and Agreement, or as required by law. Further, BA shall not use PHI in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so used by CE. However, BA may use Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE [45 C.F.R. Sections 164.502, 164.504(e)(2), and 164.504(e)(4)(i)].

**d. Permitted Disclosures.** BA shall disclose Protected Information only for the purpose of performing BA's obligations for or on behalf of the City and as permitted or required under the Contract [MOU] and Agreement, or as required by law. BA shall not disclose Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so disclosed by CE. However, BA may disclose Protected Information as necessary (i) for



## Appendix E

## San Francisco Department of Public Health

## Business Associate Agreement

the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE. If BA discloses Protected Information to a third party, BA must obtain, prior to making any such disclosure, (i) reasonable written assurances from such third party that such Protected Information will be held confidential as provided pursuant to this Agreement and used or disclosed only as required by law or for the purposes for which it was disclosed to such third party, and (ii) a written agreement from such third party to immediately notify BA of any breaches, security incidents, or unauthorized uses or disclosures of the Protected Information in accordance with paragraph 2. k. of the Agreement, to the extent it has obtained knowledge of such occurrences [42 U.S.C. Section 17932; 45 C.F.R. Section 164.504(e)]. BA may disclose PHI to a BA that is a subcontractor and may allow the subcontractor to create, receive, maintain, or transmit Protected Information on its behalf, if the BA obtains satisfactory assurances, in accordance with 45 C.F.R. Section 164.504(e)(1), that the subcontractor will appropriately safeguard the information [45 C.F.R. Section 164.502(e)(1)(ii)].

**e. Prohibited Uses and Disclosures.** BA shall not use or disclose PHI other than as permitted or required by the Contract and Agreement, or as required by law. BA shall not use or disclose Protected Information for fundraising or marketing purposes. BA shall not disclose Protected Information to a health plan for payment or health care operations purposes if the patient has requested this special restriction, and has paid out of pocket in full for the health care item or service to which the PHI solely relates [42 U.S.C. Section 17935(a) and 45 C.F.R. Section 164.522(a)(1)(vi)]. BA shall not directly or indirectly receive remuneration in exchange for Protected Information, except with the prior written consent of CE and as permitted by the HITECH Act, 42 U.S.C. Section 17935(d)(2), and the HIPAA regulations, 45 C.F.R. Section 164.502(a)(5)(ii); however, this prohibition shall not affect payment by CE to BA for services provided pursuant to the Contract.

**f. Appropriate Safeguards.** BA shall take the appropriate security measures to protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains, or transmits on behalf of the CE, and shall prevent any use or disclosure of PHI other than as permitted by the Contract or this Agreement, including, but not limited to, administrative, physical and technical safeguards in accordance with the Security Rule, including, but not limited to, 45 C.F.R. Sections 164.306, 164.308, 164.310, 164.312, 164.314, 164.316, and 164.504(e)(2)(ii)(B). BA shall comply with the policies and procedures and documentation requirements of the Security Rule, including, but not limited to, 45 C.F.R. Section 164.316, and 42 U.S.C. Section 17931. BA



## Appendix E

## San Francisco Department of Public Health

## Business Associate Agreement

is responsible for any civil penalties assessed due to an audit or investigation of BA, in accordance with 42 U.S.C. Section 17934(c).

**g. Business Associate's Subcontractors and Agents.** BA shall ensure that any agents and subcontractors that create, receive, maintain or transmit Protected Information on behalf of BA, agree in writing to the same restrictions and conditions that apply to BA with respect to such PHI and implement the safeguards required by paragraph 2.d. above with respect to Electronic PHI [45 C.F.R. Section 164.504(e)(2) through (e)(5); 45 C.F.R. Section 164.308(b)]. BA shall mitigate the effects of any such violation.

**h. Accounting of Disclosures.** Within ten (10) calendar days of a request by CE for an accounting of disclosures of Protected Information or upon any disclosure of Protected Information for which CE is required to account to an individual, BA and its agents and subcontractors shall make available to CE the information required to provide an accounting of disclosures to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.528, and the HITECH Act, including but not limited to 42 U.S.C. Section 17935 (c), as determined by CE. BA agrees to implement a process that allows for an accounting to be collected and maintained by BA and its agents and subcontractors for at least six (6) years prior to the request. However, accounting of disclosures from an Electronic Health Record for treatment, payment or health care operations purposes are required to be collected and maintained for only three (3) years prior to the request, and only to the extent that BA maintains an Electronic Health Record. At a minimum, the information collected and maintained shall include: (i) the date of disclosure; (ii) the name of the entity or person who received Protected Information and, if known, the address of the entity or person; (iii) a brief description of Protected Information disclosed; and (iv) a brief statement of purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure [45 C.F.R. 164.528(b)(2)]. If an individual or an individual's representative submits a request for an accounting directly to BA or its agents or subcontractors, BA shall forward the request to CE in writing within five (5) calendar days.

**i. Access to Protected Information.** BA shall make Protected Information maintained by BA or its agents or subcontractors in Designated Record Sets available to CE for inspection and copying within (5) days of request by CE to enable CE to fulfill its obligations under state law [Health and Safety Code Section 123110] and the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.524 [45 C.F.R. Section 164.504(e)(2)(ii)(E)]. If BA maintains



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Protected Information in electronic format, BA shall provide such information in electronic format as necessary to enable CE to fulfill its obligations under the HITECH Act and HIPAA Regulations, including, but not limited to, 42 U.S.C. Section 17935(e) and 45 C.F.R. 164.524.

**j. Amendment of Protected Information.** Within ten (10) days of a request by CE for an amendment of Protected Information or a record about an individual contained in a Designated Record Set, BA and its agents and subcontractors shall make such Protected Information available to CE for amendment and incorporate any such amendment or other documentation to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.526. If an individual requests an amendment of Protected Information directly from BA or its agents or subcontractors, BA must notify CE in writing within five (5) days of the request and of any approval or denial of amendment of Protected Information maintained by BA or its agents or subcontractors [45 C.F.R. Section 164.504(e)(2)(ii)(F)].

**k. Governmental Access to Records.** BA shall make its internal practices, books and records relating to the use and disclosure of Protected Information available to CE and to the Secretary of the U.S. Department of Health and Human Services (the "Secretary") for purposes of determining BA's compliance with HIPAA [45 C.F.R. Section 164.504(e)(2)(ii)(I)]. BA shall provide CE a copy of any Protected Information and other documents and records that BA provides to the Secretary concurrently with providing such Protected Information to the Secretary.

**l. Minimum Necessary.** BA, its agents and subcontractors shall request, use and disclose only the minimum amount of Protected Information necessary to accomplish the intended purpose of such use, disclosure, or request. [42 U.S.C. Section 17935(b); 45 C.F.R. Section 164.514(d)]. BA understands and agrees that the definition of "minimum necessary" is in flux and shall keep itself informed of guidance issued by the Secretary with respect to what constitutes "minimum necessary" to accomplish the intended purpose in accordance with HIPAA and HIPAA Regulations.

**m. Data Ownership.** BA acknowledges that BA has no ownership rights with respect to the Protected Information.

**n. Notification of Breach.** BA shall notify CE within 5 calendar days of any breach of Protected Information; any use or disclosure of Protected Information not permitted by the Agreement; any Security Incident (except as otherwise provided below) related to Protected Information, and any use or disclosure of data in violation of any applicable federal or state laws



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by BA or its agents or subcontractors. The notification shall include, to the extent possible, the identification of each individual whose unsecured Protected Information has been, or is reasonably believed by the BA to have been, accessed, acquired, used, or disclosed, as well as any other available information that CE is required to include in notification to the individual, the media, the Secretary, and any other entity under the Breach Notification Rule and any other applicable state or federal laws, including, but not limited, to 45 C.F.R. Section 164.404 through 45 C.F.R. Section 164.408, at the time of the notification required by this paragraph or promptly thereafter as information becomes available. BA shall take (i) prompt corrective action to cure any deficiencies and (ii) any action pertaining to unauthorized uses or disclosures required by applicable federal and state laws. [42 U.S.C. Section 17921; 42 U.S.C. Section 17932; 45 C.F.R. 164.410; 45 C.F.R. Section 164.504(e)(2)(ii)(C); 45 C.F.R. Section 164.308(b)]

**o. Breach Pattern or Practice by Business Associate's Subcontractors and Agents.** Pursuant to 42 U.S.C. Section 17934(b) and 45 C.F.R. Section 164.504(e)(1)(iii), if the BA knows of a pattern of activity or practice of a subcontractor or agent that constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this Agreement, the BA must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, the BA must terminate the contractual arrangement with its subcontractor or agent, if feasible. BA shall provide written notice to CE of any pattern of activity or practice of a subcontractor or agent that BA believes constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this Agreement within five (5) calendar days of discovery and shall meet with CE to discuss and attempt to resolve the problem as one of the reasonable steps to cure the breach or end the violation.

**3. Termination.**

**a. Material Breach.** A breach by BA of any provision of this Agreement, as determined by CE, shall constitute a material breach of the Contract and this Agreement and shall provide grounds for immediate termination of the Contract and this Agreement, any provision in the CONTRACT to the contrary notwithstanding. [45 C.F.R. Section 164.504(e)(2)(iii)].

**b. Judicial or Administrative Proceedings.** CE may terminate the Contract and this Agreement, effective immediately, if (i) BA is named as defendant in a criminal proceeding for a violation of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws or (ii) a finding or stipulation that the BA has violated any standard or requirement of HIPAA, the



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HITECH Act, the HIPAA Regulations or other security or privacy laws is made in any administrative or civil proceeding in which the party has been joined.

**c. Effect of Termination.** Upon termination of the Contract and this Agreement for any reason, BA shall, at the option of CE, return or destroy all Protected Information that BA and its agents and subcontractors still maintain in any form, and shall retain no copies of such Protected Information. If return or destruction is not feasible, as determined by CE, BA shall continue to extend the protections and satisfy the obligations of Section 2 of this Agreement to such information, and limit further use and disclosure of such PHI to those purposes that make the return or destruction of the information infeasible [45 C.F.R. Section 164.504(e)(2)(ii)(J)]. If CE elects destruction of the PHI, BA shall certify in writing to CE that such PHI has been destroyed in accordance with the Secretary's guidance regarding proper destruction of PHI.

**d. Civil and Criminal Penalties.** BA understands and agrees that it is subject to civil or criminal penalties applicable to BA for unauthorized use, access or disclosure or Protected Information in accordance with the HIPAA Regulations and the HITECH Act including, but not limited to, 42 U.S.C. 17934 (e).

**e. Disclaimer.** CE makes no warranty or representation that compliance by BA with this Agreement, HIPAA, the HITECH Act, or the HIPAA Regulations or corresponding California law provisions will be adequate or satisfactory for BA's own purposes. BA is solely responsible for all decisions made by BA regarding the safeguarding of PHI.

#### 4. Amendment to Comply with Law.

The parties acknowledge that state and federal laws relating to data security and privacy are rapidly evolving and that amendment of the Contract or this Agreement may be required to provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations and other applicable state or federal laws relating to the security or confidentiality of PHI. The parties understand and agree that CE must receive satisfactory written assurance from BA that BA will adequately safeguard all Protected Information. Upon the request of either party, the other party agrees to promptly enter into negotiations concerning the terms of an amendment to this Agreement embodying written assurances consistent with the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable state or federal laws. CE may terminate the Contract upon



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thirty (30) days written notice in the event (i) BA does not promptly enter into negotiations to amend the Contract or this Agreement when requested by CE pursuant to this section or (ii) BA does not enter into an amendment to the Contract or this Agreement providing assurances regarding the safeguarding of PHI that CE, in its sole discretion, deems sufficient to satisfy the standards and requirements of applicable laws.

**5. Reimbursement for Fines or Penalties:**

In the event that CE pays a fine to a state or federal regulatory agency, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible use or disclosure of PHI by BA or its subcontractors or agents, then BA shall reimburse CE in the amount of such fine or penalties or damages within thirty (30) calendar days.

Attachment 1 – SFDPH Privacy Attestation, version 10/29/15

Attachment 2 – SFDPH Data Security Attestation, version 10/29/15

Attachment 3 – SFDPH Compliance Attestation, version 10/29/15

Attachment 4 – SFDPH User Agreement for Confidentiality, Data Security and Electronic Signature, version 4/23/15

Attachment 5 – SFDPH Code of Conduct, version 6/17/15

Office of Compliance and Privacy Affairs  
San Francisco Department of Public Health  
101 Grove Street, Room 330, San Francisco, CA 94102  
Email: [compliance.privacy@sfdph.org](mailto:compliance.privacy@sfdph.org)  
Hotline (Toll-Free): 1-855-729-6040



Organization Name:	Contractor City	Vendor ID
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**SFDPH PRIVACY ATTESTATION**

This Attestation is to be completed by Contractors and Data Trading Partners that are required to abide by the SFDPH Business Associates Agreement (BAA) in compliance with the Health Information Portability and Accountability Act (HIPAA) and other patient confidentiality laws and regulations. **INSTRUCTIONS:** File and retain completed Attestations for a period of 7 years. Please be prepared to submit your completed Attestations, along with evidence of the following, when and if requested to do so.

Yes	No*	DOES YOUR ORGANIZATION...
A		Have formal Privacy Policies? (use of SFDPH Privacy Policies will suffice for "yes")
B		Have a designated Privacy Officer? The Privacy Officer is your organization's designated person who will authorize your employee's "Systems Access Request (SAR) Form". [Note: SARs will NOT be processed by SFDPH without this person's signature.]
		If yes: Privacy Officer Name Phone # Email:
C		Require Privacy Training for all employees who have access to PHI upon hire and annually thereafter? (Use of SFDPH Privacy/Data Security Training will suffice for "yes"). [Beginning in FY1516, DPH will require document retention for 7 years.]
D		Have proof that employees upon hire, and annually thereafter, have signed the SFDPH "User Confidentiality, Security, and Electronic Signature Form"? [Beginning in FY1516, DPH will require document retention for 7 years.]
E		Have evidence that SFDPH was notified to de-provision employees who have access to SFDPH PHI within 2 business days for regular terminations and within 24 hours for terminations due to cause?
F		Assure that staff who download, create, or transfer PHI offsite (via laptop, USB/thumb-drive, handheld), have prior supervisory authorization to do so AND that PHI is only transferred or created on devices that are encrypted?
G		Have (or will have if/when applicable) BAAs with subcontractors or vendors who create, receive, maintain or transmit SFDPH PHI.

Does your organization serve patients/clients for or on behalf of DPH? If YES, answer h-k. If NO, these questions are not applicable, please go directly to ATTEST.

Yes	No*	DOES YOUR ORGANIZATION...
H		Have evidence in each patient's/client's chart or electronic file that the Privacy Notice was provided in the patient's language (English, Cantonese, Vietnamese, Tagalog, Spanish, Russian forms are available from SFDPH).
I		Have visibly posted the Summary of the Notice of Privacy Practices in all six languages in common patient areas of your treatment facility?
J		Have documented each disclosure of a patient's/client's health information for purposes other than treatment, payment, or operations?
K		When required by law, have proof that signed authorization for disclosure forms (that meet the requirements of the HIPAA Federal Privacy Rule) are obtained PRIOR to releasing a patient's/clients health information?

**ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct.**

ATTESTED by Privacy Officer	Name (print)	Signature	Date
ATTESTED by CEO / Exec Director	Name (print)	Signature	Date
ATTESTED by Chair, Board of Directors / Trustees	Name (print)	Signature	Date

\* EXCEPTIONS: If you have answered "NO" to any question in A-G or H-K (if applicable), please contact OCPA at [compliance.privacy@sfdph.org](mailto:compliance.privacy@sfdph.org) or call 1-855-729-6040 for a consultation. Any "No" answers will need to be reviewed and approved as exceptions by OCPA.

EXCEPTION(S) APPROVED by OCPA	Name (print)	Signature	Date
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Organization Name:	Contractor City	Vendor ID
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**SFPDH DATA SECURITY ATTESTATION**

This Attestation is to be completed by Contractors and Data Trading Partners that are required to abide by the SFPDH Business Associates Agreement in compliance with the Health Information Portability and Accountability Act (HIPAA, ADMINISTRATIVE 45 CFR 164.308(a)(8)), Health Information Technology for Economic and Clinical Health Act (HITECH), and the American Institute of Certified Public Accountants (AICPA) requirements. **INSTRUCTIONS:** File and retain completed Attestations for a period of 7 years. Please be prepared to submit your completed Attestations, along with evidence of the following, when and if requested to do so.

YES	NO*	DOES YOUR ORGANIZATION...
A		Conduct assessments/audits of your data security safeguards to demonstrate and document compliance with your security policies and the requirements of HIPAA/ HITECH at least every two years? [Beginning in FY1516, DPH will require document retention for 7 years.]
B		Use findings from the assessments/audits to identify and mitigate known risks into documented remediation plans? Date of last Data Security Risk Assessment/Audit Name of firm or person(s) who performed the Assessment/Audit and/or authored the final report
C		Have a formal Data Security Awareness Program?
D		Have a designated Security Officer? If yes: IT Security Officer Phone # Email:
E		Require Data Security training for all employees who have access to PHI upon hire and annually thereafter? (Use of SFPDH Privacy/Data Security Training will suffice for "yes".) [Beginning in FY1516, DPH will require document retention for 7 years.]
F		Have policies and procedures to detect, contain, and correct security violations? (Use of SFPDH Privacy Policies will suffice for "yes".)
G		Have (or will have if/when applicable) Business Associate Agreements with subcontractors or vendors who create, receive, maintain or transmit SFPDH PHI.
H		Have (or will have if/when applicable) a diagram (of how SFPDH data flows between your organization and this downstream or 3rd party entity (including named users, access methods, on-premise data hosts, processing systems, etc.)?

**ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct.**

ATTESTED by Data Security Officer	Name (print)	Signature	Date
ATTESTED by CEO / Exec Director	Name (print)	Signature	Date
ATTESTED by Chair, Board of Directors / Trustees	Name (print)	Signature	Date

\* **EXCEPTIONS:** If you have answered "NO" to any question, please contact OCPA at [compliance.privacy@sfdph.org](mailto:compliance.privacy@sfdph.org) or call 1-855-729-6040 for a consultation. Any "No" answers will need to be reviewed and approved as exceptions by OCPA.

EXCEPTION(S) APPROVED by OCPA	Name (print)	Signature	Date
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Organization Name:		Contractor City Vendor ID	
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**SFDPH COMPLIANCE ATTESTATION**

This Attestation is to be completed by Contractors and Data Trading Partners that are required to abide by the SFDPH Business Associates Agreement in compliance with Medicare/Medicaid Conditions of Participation, False Claims Act and other ethics/compliance laws and regulations. **INSTRUCTIONS:** File and retain completed Attestations for a period of 7 years. Please be prepared to submit your completed Attestations, along with evidence of the following, when and if requested to do so.

YES	NO*	DOES YOUR ORGANIZATION...
A		Have a formal Compliance Program?
B		Have a designated Compliance Officer? If yes: Compliance Officer Name Phone # Email:
C		Require all employees who have access to SFDPH Systems or PHI to take Compliance training upon hire and annually thereafter? (Use of SFDPH compliance training will suffice for "yes".) [Beginning in FY1516, DPH will require you to retain these records for 7 years.]
D		Have proof that employees upon hire, and annually thereafter, have signed agreement to the SFDPH "Code of Conduct"? [Beginning in FY1516, DPH will require document retention for 7 years.]
E		Have mechanisms in place to identify and promptly respond to compliance deficiencies and report to the SFDPH all identified compliance deficiencies related to services that were billed by SFDPH or that could jeopardize your organization's continued participation in government health care programs, including Medicare or Medi-Cal funded programs?
F		Publicize and promote the SFDPH Compliance and Privacy Hotline number (1-855-729-6040) or the City's Whistleblower Program including posting a notice of
G		Have a Code of Conduct or Ethics policy that includes a mechanism for staff to confidentially and anonymously report potential compliance concerns as well as a strict non-retaliation policy (Use of SFDPH Compliance policies will suffice for "yes".)?
H		Have mechanisms in place to review the Office of the Inspector General (OIG), General Services Administration (GSA), and the California Department of Health Care Services (DHCS) exclusion lists upon initial hire and monthly thereafter to ensure that no employee, temporary employee, volunteer, consultant, or governing body member responsible for administering or delivering Federal Healthcare Program services is excluded from (may not work in) a federal health care program? [False Claims Act]
I		Require (or will require, if/when applicable) subcontractors/vendors to comply with all requirements in this Attestation?

**ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct.**

ATTESTED by Compliance Officer	Name (print)	Signature	Date
ATTESTED by CEO / Exec Director	Name (print)	Signature	Date
ATTESTED by Chair, Board of Directors / Trustees	Name (print)	Signature	Date

\* **EXCEPTIONS:** If you have answered "NO" to any question, please contact OCPA at [compliance\\_privacy@sfdph.org](mailto:compliance_privacy@sfdph.org) or call 1-855-729-6040 for a consultation. Any "No" answers will need to be reviewed and approved as exceptions by OCPA.

EXCEPTION(S) APPROVED by OCPA	Name (print)	Signature	Date
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City and County of San Francisco Department of Public Health

User Agreement for Confidentiality, Data Security and Electronic Signature

Individuals with access to SFDPH confidential information and data systems have a legal and ethical responsibility to protect the security and confidentiality of personal, medical, financial, personnel and protected health information, and to use that information and those systems only in the performance of their jobs. The following applies to confidential, restricted, or protected SFDPH information and assets that are accessed, received or sent in any format, including digital, paper, voice, facsimile, photos, electronic signatures, etc.

By signing this document, I understand and hereby agree to the following terms and conditions:

1. **Violations:** Non-adherence to this Agreement may result in disciplinary action up to and including termination of employment or contractual relationship with SFDPH. Violation of state and federal laws regarding patient privacy may subject me to substantial monetary penalties and/or make me the subject of a civil or criminal action pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the California Medical Information Act, the LPS Act, the Welfare and Institutions Code Section 14100.2, and other federal and state privacy laws.
2. **Policies:** I have access to and I agree to abide by SFDPH Privacy and Data Security Policies found at <http://www.sfdph.org/DPH/privacy>.
3. **Patient Protections:** I understand that patient information is protected in every form, such as written records and correspondence, oral communications and computer programs, applications and data. I will only access, discuss, or divulge confidential SFDPH information as required for the performance of my job duties. I agree not to use, copy, make notes regarding, remove, release or disclose patient information unless it is permitted by SFDPH policy and local, state, and/or Federal Law.
4. **Releasing Information:** I agree to take all reasonable precautions to assure that SFDPH information or information entrusted to SFDPH by third parties (such as patients) will not be disclosed to unauthorized persons. I understand I am not authorized to use this information for my own purposes, nor am I at liberty to provide this information to third parties without the express written consent of the SFDPH Program Director. I agree not to publish or otherwise make public any information regarding persons receiving services without prior authorization or as required by law. Providers may need to use all of an individual's health information in the provision of patient care.
5. **Accessing Systems:** I agree not to access or attempt to access any system, nor allow access by another person or group, without specific authorization from a local Information System Director. I agree not to demonstrate the operation of systems to anyone without express authorization of a local Information System Director. SFDPH information systems maintain internal logs of applications and data accessed, indicating who viewed, added, edited, printed or deleted information. I may be asked to justify my use of specific information contained in or managed by SFDPH information systems.
6. **Information Assets:** In order to ensure the integrity and security of SFDPH systems, I agree not to disclose any portion of the organization's information assets to any unauthorized person. This includes, but is not limited to, the design, programming techniques, flow charts, source code, screens, documentation or intellectual capital created, licensed or owned by SFDPH. I agree to forward any request for such information to my supervisor and/or the SFDPH Public Information Officer.
7. **Devices:** I will not download or maintain patient information on my privately-owned portable devices. If using a SFDPH- or UCSF-provided and password-protected device, I will delete patient information (and empty it from my device's recycle bin) promptly when it is no longer needed to fulfill my job responsibilities. I understand that the risk of privacy being breached increases with the mobility of that data and I recognize extra precautions must be used when using handheld computers and/or smart phones to store or transmit sensitive information.

~ SFDPH Privacy Toll-free Hotline 1-855-729-6040 ~ SFDPH Compliance Hotline 415-642-5790 ~

~ SFDPH Data Security Office, 415-759-3577 ~

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City and County of San Francisco Department of Public Health

User Agreement for Confidentiality, Data Security and Electronic Signature

8. **User IDs and Passwords:** Individuals requiring access to SFDPH information systems will be given a user ID and password. It is my responsibility to maintain the confidentiality of patient and other information to which I have access. I agree to keep my user IDs and passwords secret and secure by taking reasonable security measures to prevent them from being lost or inappropriately acquired, modified or otherwise compromised, and to prevent unauthorized disclosure of, access to, or use of them, or of any media on which information about them are stored. If I suspect that my user ID or password has been stolen or inappropriately acquired, lost, used by an unauthorized party, or otherwise compromised, I will immediately notify the appropriate Information Systems Help Desk and request that my electronic signature be revoked. I agree to choose a difficult-to-guess password, not to share this password with any other person and not to write this password down as described in SFDPH Data Security Policies.
9. **Property Rights:** The hardware, software, data and outputs of SFDPH information system are the property of the SFDPH and must be appropriately licensed for installation on a SFDPH computer. I will obtain prior authorization from a SFDPH information systems administrator before installing personal software on a SFDPH computer. SFDPH has the right to review and remove personal or unlicensed software and data on any SFDPH computer or information system.
10. **Electronic Signatures:** When my signature or co-signature is required for "a financial, program or medical record" under California or Federal law, California or Federal regulation, or organizational policy or procedure, my user ID and password together shall constitute an electronic signature. For the purposes of authorizing and authenticating electronic health records, my electronic signature has the full force, effect, and responsibility of a signature affixed by hand to a paper document. My electronic signature establishes me as the signer or co-signer of electronic documents. My electronic signature will be valid for the length of time specified in the SFDPH Password Security Policy (or the database administrator, whichever is shorter) from date of issuance, or earlier if it is revoked or terminated per the terms of the user agreement. Prior to the expiration date, I will receive a system alert when my password is due to expire and be given the opportunity to renew it. Setting a new password for my user-ID (electronic signature) renews the terms of this agreement.
11. **Upon Termination:** At the end of my employment or contract with SFDPH, I agree to return to SFDPH all information to which I have had access as a result of my position with SFDPH.
12. **Reporting:** I will report any suspected privacy or data security violations to the Privacy Hotline and any other types of misconduct to the Compliance Hotline.

I understand that looking at patient information without having a business purpose is against the law. I also understand that violation of any of the requirements set forth in this User Agreement may result in termination of my employment, reporting to regulatory bodies, and reporting to my professional board.

USER NAME (PRINT)	USER DEPARTMENT
USER SIGNATURE	DATE SIGNED

NOTE: This form to be signed at time of hire, each time authorization to access a SFDPH data system is given, and annually thereafter. Signed forms are to be retained a minimum of 7 years post de-provisioning the individual's access to a SFDPH data system and/or termination of employment.



City and County of San Francisco  
Edwin M. Lee, Mayor

## San Francisco Department of Public Health Office of Compliance and Privacy Affairs

### San Francisco Department of Public Health Compliance Program - Code of Conduct

#### DPH Compliance Program Mission and Goals

The mission of the DPH Compliance Program is to ensure integrity in DPH clinical and business activities. This mission is carried out through a Compliance Office that is dedicated to the following goals:

- To promote an understanding of and compliance with Medicare, Medi-Cal, and other applicable federal and state laws and regulations;
- To use education and training to improve compliance with billing and reimbursement rules and regulations; and
- To work with providers, managers, and staff to integrate compliance into the daily operations of DPH.

#### Business Ethics

All employees, contractors, and agents must demonstrate integrity in their business practices in order to instill and preserve trust on the part of our patients. Actions which may be construed as violations of our business ethics include the personal possession and/or use of goods or services that were purchased solely for the Department or its divisions.

#### Conflict of Interest

Employees, contractors, and agents must not engage in decisions which may result in a personal or financial interest. All business with patients, payers, vendors, contractors, and customers must be conducted without accepting offers, gifts, favors or other improper invitations in exchange for their influence or assistance. Employees, contractors, and agents must consider and avoid actual conflicts, as well as the appearance of conflicts of interest.

#### Reimbursement Claiming Practices and the False Claims Act

The purpose of documentation is to accurately reflect clinical effort, demonstrate medical necessity, and obtain appropriate reimbursement. Failure to abide by these procedures can lead to criminal and civil liability for the City. As a recipient of Medicare and Medi-Cal funds, and federal and state grants and subventions, DPH has an obligation to comply with all federal and state laws, rules, and regulations.

The principal statute impacting our billing and cost claiming practices is the federal False Claims Act (FCA). Under the Act, it is a felony to make or present a claim for payment, to any United States agency, that is knowingly false, fictitious, or fraudulent.

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Office of Compliance and Privacy Affairs, San Francisco Department of Public Health  
101 Grove Street, Room 330, San Francisco, CA 94102  
Office email: [compliance.privacy@sfdph.org](mailto:compliance.privacy@sfdph.org)  
Confidential Compliance and Privacy Hotline (Toll-Free): 1-855-729-6040

**Actions which may be construed as violations of the FCA, include:**

- The refusal to return/refund money to which DPH or City is not entitled;
- The submission of a claim, invoice, or cost report, for reimbursement for goods or services that were not delivered to the Department, were previously reimbursed under a separate program, or that were expended in violation of applicable federal, state, or private foundation grants, or state subventions awarded to the City.

**Privacy and Security**

All employees, contractors, and agents are required to protect patient health information at all times. Availability to a patient's electronic health record is limited to those who duties require access. Under no circumstances should electronic health record passwords be shared.

**Compliance Hotline**

Every Compliance Program needs to have a method, outside of the line of command, for those times when a person prefers not to, or is unable to approach a supervisor, with a question concerning a policy or activity. For this reason, DPH has established a Compliance Hotline. This hotline is intended to be used to report activity and/or conduct that may be in violation of the Code of Conduct, including but not limited to:

- Billing or reimbursement regulations, fraudulent transactions
- Misuse of federal or state grant funds
- Patient Confidentiality
- Conflict of Interest
- Falsification of documents
- Sharing passwords to access Electronic Health Record
- Misuse of DPH funded or supported property, facilities and equipment

The number for the DPH Compliance Hotline is (855) 729-6040 toll-free.

**Acknowledgement of the Code of Conduct**

My electronic signature and/or my hand-written signature on this Code acknowledges that I have read and understand the standards that are included in this Code.

I agree to comply fully with these standards.

I understand that violations of the principles embodied in this Code may result in disciplinary action, up to and including discharge.

Name: \_\_\_\_\_  
Class # & Job Title: \_\_\_\_\_  
Division: \_\_\_\_\_  
Signature & Date: \_\_\_\_\_



**City and County of San Francisco  
Office of Contract Administration  
Purchasing Division  
City Hall, Room 430  
1 Dr. Carlton B. Goodlett Place  
San Francisco, California 94102-4685**

**Agreement between the City and County of San Francisco and**

**Richmond Area Multi-Services, Inc.**

This Agreement is made this 1<sup>st</sup> day of January, 2016, in the City and County of San Francisco, State of California, by and between **Richmond Area Multi-Services, Inc.** ("Contractor") and City.

**Recitals**

WHEREAS, the Department of Public Health ("Department") wishes to provide Vocational Rehabilitation Training Services; and,

WHEREAS, a Request for Proposal ("RFP") was issued on April 16, 2015, and City selected Contractor as the highest qualified scorer pursuant to the RFP; and

WHEREAS, Contractor represents and warrants that it is qualified to perform the Services required by City as set forth under this Agreement; and

WHEREAS, approval for this Agreement was obtained when the Civil Service Commission approved Contract number 41068-14/15 on December 21, 2015;

Now, THEREFORE, the parties agree as follows:

**Article 1 Definitions**

The following definitions apply to this Agreement:

1.1 "Agreement" means this contract document, including all attached appendices, and all applicable City Ordinances and Mandatory City Requirements which are specifically incorporated into this Agreement by reference as provided herein.

1.2 "City" or "the City" means the City and County of San Francisco, a municipal corporation, acting by and through both its Director of the Office of Contract Administration or the Director's designated agent, hereinafter referred to as "Purchasing" and Department of Public Health."

1.3 "CMD" means the Contract Monitoring Division of the City.

1.4 "Contractor" or "Consultant" means **Richmond Area Multi-Services, Inc.**

1.5 "Deliverables" means Contractor's work product resulting from the Services that are provided by Contractor to City during the course of Contractor's performance of the Agreement, including without limitation, the work product described in the "Scope of Services" attached as Appendix A.

1.6 "Effective Date" means the date upon which the City's Controller certifies the availability of funds for this Agreement as provided in Section 3.1.

1.7 "Mandatory City Requirements" means those City laws set forth in the San Francisco Municipal Code, including the duly authorized rules, regulations, and guidelines implementing such laws, that impose specific duties and obligations upon Contractor.

1.8 "Party" and "Parties" mean the City and Contractor either collectively or individually.

1.9 "Services" means the work performed by Contractor under this Agreement as specifically described in the "Scope of Services" attached as Appendix A, including all services, labor, supervision, materials, equipment, actions and other requirements to be performed and furnished by Contractor under this Agreement.

## **Article 2 Term of the Agreement**

2.1 The term of this Agreement shall commence on the latter of: January 1, 2016 and expire on December 31, 2016, unless earlier terminated as otherwise provided herein.

2.2 The City has four (4) options to renew the Agreement for a period of one year each. The City may extend this Agreement beyond the expiration date by exercising an option at the City's sole and absolute discretion and by modifying this Agreement as provided in Section 11.5, "Modification of this Agreement."

## **Article 3 Financial Matters**

3.1 **Certification of Funds; Budget and Fiscal Provisions; Termination in the Event of Non-Appropriation.** This Agreement is subject to the budget and fiscal provisions of the City's Charter. Charges will accrue only after prior written authorization certified by the Controller, and the amount of City's obligation hereunder shall not at any time exceed the amount certified for the purpose and period stated in such advance authorization. This Agreement will terminate without penalty, liability or expense of any kind to City at the end of any fiscal year if funds are not appropriated for the next succeeding fiscal year. If funds are appropriated for a portion of the fiscal year, this Agreement will terminate, without penalty, liability or expense of any kind at the end of the term for which funds are appropriated. City has no obligation to make appropriations for this Agreement in lieu of appropriations for new or other agreements. City budget decisions are subject to the discretion of the Mayor and the Board of Supervisors. Contractor's assumption of risk of possible non-appropriation is part of the consideration for this Agreement.

**THIS SECTION CONTROLS AGAINST ANY AND ALL OTHER PROVISIONS OF THIS AGREEMENT.**

3.2 **Guaranteed Maximum Costs.** The City's payment obligation to Contractor cannot at any time exceed the amount certified by City's Controller for the purpose and period stated in such certification. Absent an authorized Emergency per the City Charter or applicable Code, no City representative is authorized to offer or promise, nor is the City required to honor, any offered or promised payments to Contractor under this Agreement in excess of the certified maximum amount without the Controller having first certified the additional promised amount and the Parties having modified this Agreement as provided in Section 11.5, "Modification of this Agreement."

### 3.3 Compensation.

3.3.1 **Payment.** Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed **Four Million Three Hundred Eighty Two Thousand Three Hundred Forty Dollars (\$4,382,340)**. The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. In no event shall City be liable for interest or late charges for any late payments.

3.3.2 **Payment Limited to Satisfactory Services.** Contractor is not entitled to any payments from City until Department of Public Health approves Services, including any furnished Deliverables, as satisfying all of the requirements of this Agreement. Payments to Contractor by City shall not excuse Contractor from its obligation to replace unsatisfactory Deliverables, including equipment, components, materials, or Services even if the unsatisfactory character of such Deliverables, equipment, components, materials, or Services may not have been apparent or detected at the time such payment was made. Deliverables, equipment, components, materials and Services that do not conform to the requirements of this Agreement may be rejected by City and in such case must be replaced by Contractor without delay at no cost to the City.

3.3.3 **Withhold Payments.** If Contractor fails to provide Services in accordance with Contractor's obligations under this Agreement, the City may withhold any and all payments due Contractor until such failure to perform is cured, and Contractor shall not stop work as a result of City's withholding of payments as provided herein.

3.3.4 **Invoice Format.** Invoices furnished by Contractor under this Agreement must be in a form acceptable to the Controller and City, and must include a unique invoice number. Payment shall be made by City to Contractor at the address specified in Section 11.1, "Notices to the Parties," or in such alternate manner as the Parties have mutually agreed upon in writing.

#### 3.3.5 Getting paid for goods and/or services from the City.

(a) All City vendors receiving new contracts, contract renewals, or contract extensions must sign up to receive electronic payments through Paymode-X, the City's third party service that provides Automated Clearing House (ACH) payments. Electronic payments are processed every business day and are safe and secure. To sign up for electronic payments, visit [www.sfgov.org/ach](http://www.sfgov.org/ach).

(b) The following information is required to sign up: (i) The enroller must be their company's authorized financial representative, (ii) the company's legal name, main telephone number and all physical and remittance addresses used by the company, (iii) the company's U.S. federal employer identification number (EIN) or Social Security number (if they are a sole proprietor), and (iv) the company's bank account information, including routing and account numbers.

#### 3.3.6 Grant Funded Contracts.

(a) **Disallowance.** If Contractor requests or receives payment from City for Services, reimbursement for which is later disallowed by the State of California or United States Government, Contractor shall promptly refund the disallowed amount to City upon City's request. At its option, City may offset the amount disallowed from any payment due or to become due to Contractor under this Agreement or any other Agreement between Contractor and City.

(b) **Grant Terms.** The funding for this Agreement is provided in full or in part by a Federal or State Grant to the City. As part of the terms of receiving the funds, the City is required to incorporate some of the terms into this Agreement. The incorporated terms may be found in Appendix K, "Grant Terms."

**3.4 Audit and Inspection of Records.** Contractor agrees to maintain and make available to the City, during regular business hours, accurate books and accounting records relating to its Services. Contractor will permit City to audit, examine and make excerpts and transcripts from such books and records, and to make audits of all invoices, materials, payrolls, records or personnel and other data related to all other matters covered by this Agreement, whether funded in whole or in part under this Agreement. Contractor shall maintain such data and records in an accessible location and condition for a period of not fewer than five years after final payment under this Agreement or until after final audit has been resolved, whichever is later. The State of California or any Federal agency having an interest in the subject matter of this Agreement shall have the same rights as conferred upon City by this Section. Contractor shall include the same audit and inspection rights and record retention requirements in all subcontracts.

**3.4.1** Contractor shall annually have its books of accounts audited by a Certified Public Accountant and a copy of said audit report and the associated management letter(s) shall be transmitted to the Director of Public Health or his /her designee within one hundred eighty (180) calendar days following Contractor's fiscal year end date. If Contractor expends \$500,000 or more in Federal funding per year, from any and all Federal awards, said audit shall be conducted in accordance with OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations. Said requirements can be found at the following website address: <http://www.whitehouse.gov/omb/circulars/a133/a133.html>.

If Contractor expends less than \$500,000 a year in Federal awards, Contractor is exempt from the single audit requirements for that year, but records must be available for review or audit by appropriate officials of the Federal Agency, pass-through entity and General Accounting Office. Contractor agrees to reimburse the City any cost adjustments necessitated by this audit report. Any audit report which addresses all or part of the period covered by this Agreement shall treat the service components identified in the detailed descriptions attached to Appendix A and referred to in the Program Budgets of Appendix B as discrete program entities of the Contractor.

**3.4.2** The Director of Public Health or his / her designee may approve of a waiver of the aforementioned audit requirement if the contractual Services are of a consulting or personal services nature, these Services are paid for through fee for service terms which limit the City's risk with such contracts, and it is determined that the work associated with the audit would produce undue burdens or costs and would provide minimal benefits. A written request for a waiver must be submitted to the DIRECTOR ninety (90) calendar days before the end of the Agreement term or Contractor's fiscal year, whichever comes first.

**3.4.3** Any financial adjustments necessitated by this audit report shall be made by Contractor to the City. If Contractor is under contract to the City, the adjustment may be made in the next

subsequent billing by Contractor to the City, or may be made by another written schedule determined solely by the City. In the event Contractor is not under contract to the City, written arrangements shall be made for audit adjustments.

**3.5 Submitting False Claims.** The full text of San Francisco Administrative Code Chapter 21, Section 21.35, including the enforcement and penalty provisions, is incorporated into this Agreement. Pursuant to San Francisco Administrative Code §21.35, any contractor or subcontractor who submits a false claim shall be liable to the City for the statutory penalties set forth in that section. A contractor or subcontractor will be deemed to have submitted a false claim to the City if the contractor or subcontractor: (a) knowingly presents or causes to be presented to an officer or employee of the City a false claim or request for payment or approval; (b) knowingly makes, uses, or causes to be made or used a false record or statement to get a false claim paid or approved by the City; (c) conspires to defraud the City by getting a false claim allowed or paid by the City; (d) knowingly makes, uses, or causes to be made or used a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the City; or (e) is a beneficiary of an inadvertent submission of a false claim to the City, subsequently discovers the falsity of the claim, and fails to disclose the false claim to the City within a reasonable time after discovery of the false claim.

#### **Article 4 Services and Resources**

**4.1 Services Contractor Agrees to Perform.** Contractor agrees to perform the Services provided for in Appendix A, "Scope of Services." Officers and employees of the City are not authorized to request, and the City is not required to reimburse the Contractor for, Services beyond the Scope of Services listed in Appendix A, unless Appendix A is modified as provided in Section 11.5, "Modification of this Agreement."

**4.2 Qualified Personnel.** Contractor shall utilize only competent personnel under the supervision of, and in the employment of, Contractor (or Contractor's authorized subcontractors) to perform the Services. Contractor will comply with City's reasonable requests regarding assignment and/or removal of personnel, but all personnel, including those assigned at City's request, must be supervised by Contractor. Contractor shall commit adequate resources to allow timely completion within the project schedule specified in this Agreement.

**4.3 Subcontracting.** Contractor may subcontract portions of the Services only upon prior written approval of City. Contractor is responsible for its subcontractors throughout the course of the work required to perform the Services. All Subcontracts must incorporate the terms of Article 10 "Additional Requirements Incorporated by Reference" of this Agreement, unless inapplicable. Neither Party shall, on the basis of this Agreement, contract on behalf of, or in the name of, the other Party. Any agreement made in violation of this provision shall be null and void. City's execution of this Agreement constitutes its approval of the subcontractors listed below:

#### **4.4 Independent Contractor; Payment of Employment Taxes and Other Expenses.**

**4.4.1 Independent Contractor.** For the purposes of this Article 4, "Contractor" shall be deemed to include not only Contractor, but also any agent or employee of Contractor. Contractor acknowledges and agrees that at all times, Contractor or any agent or employee of Contractor shall be deemed at all times to be an independent contractor and is wholly responsible for the manner in which it performs the services and work requested by City under this Agreement. Contractor, its agents, and

employees will not represent or hold themselves out to be employees of the City at any time. Contractor or any agent or employee of Contractor shall not have employee status with City, nor be entitled to participate in any plans, arrangements, or distributions by City pertaining to or in connection with any retirement, health or other benefits that City may offer its employees. Contractor or any agent or employee of Contractor is liable for the acts and omissions of itself, its employees and its agents. Contractor shall be responsible for all obligations and payments, whether imposed by federal, state or local law, including, but not limited to, FICA, income tax withholdings, unemployment compensation, insurance, and other similar responsibilities related to Contractor's performing services and work, or any agent or employee of Contractor providing same. Nothing in this Agreement shall be construed as creating an employment or agency relationship between City and Contractor or any agent or employee of Contractor. Any terms in this Agreement referring to direction from City shall be construed as providing for direction as to policy and the result of Contractor's work only, and not as to the means by which such a result is obtained. City does not retain the right to control the means or the method by which Contractor performs work under this Agreement. Contractor agrees to maintain and make available to City, upon request and during regular business hours, accurate books and accounting records demonstrating Contractor's compliance with this section. Should City determine that Contractor, or any agent or employee of Contractor, is not performing in accordance with the requirements of this Agreement, City shall provide Contractor with written notice of such failure. Within five (5) business days of Contractor's receipt of such notice, and in accordance with Contractor policy and procedure, Contractor shall remedy the deficiency. Notwithstanding, if City believes that an action of Contractor, or any agent or employee of Contractor, warrants immediate remedial action by Contractor, City shall contact Contractor and provide Contractor in writing with the reason for requesting such immediate action.

**4.4.2 Payment of Employment Taxes and Other Expenses.** Should City, in its discretion, or a relevant taxing authority such as the Internal Revenue Service or the State Employment Development Division, or both, determine that Contractor is an employee for purposes of collection of any employment taxes, the amounts payable under this Agreement shall be reduced by amounts equal to both the employee and employer portions of the tax due (and offsetting any credits for amounts already paid by Contractor which can be applied against this liability). City shall then forward those amounts to the relevant taxing authority. Should a relevant taxing authority determine a liability for past services performed by Contractor for City, upon notification of such fact by City, Contractor shall promptly remit such amount due or arrange with City to have the amount due withheld from future payments to Contractor under this Agreement (again, offsetting any amounts already paid by Contractor which can be applied as a credit against such liability). A determination of employment status pursuant to the preceding two paragraphs shall be solely for the purposes of the particular tax in question, and for all other purposes of this Agreement, Contractor shall not be considered an employee of City. Notwithstanding the foregoing, Contractor agrees to indemnify and save harmless City and its officers, agents and employees from, and, if requested, shall defend them against any and all claims, losses, costs, damages, and expenses, including attorneys' fees, arising from this section.

**4.5 Assignment.** The Services to be performed by Contractor are personal in character and neither this Agreement nor any duties or obligations hereunder may be assigned or delegated by Contractor unless first approved by City by written instrument executed and approved in the same manner as this Agreement. Any purported assignment made in violation of this provision shall be null and void.

4.6 **Warranty.** Contractor warrants to City that the Services will be performed with the degree of skill and care that is required by current, good and sound professional procedures and practices, and in conformance with generally accepted professional standards prevailing at the time the Services are performed so as to ensure that all Services performed are correct and appropriate for the purposes contemplated in this Agreement.

## **Article 5 Insurance and Indemnity**

### **5.1 Insurance.**

5.1.1 **Required Coverages.** Without in any way limiting Contractor's liability pursuant to the "Indemnification" section of this Agreement, Contractor must maintain in force, during the full term of the Agreement, insurance in the following amounts and coverages:

(a) Workers' Compensation, in statutory amounts, with Employers' Liability Limits not less than \$1,000,000 each accident, injury, or illness; and

(b) Commercial General Liability Insurance with limits not less than \$1,000,000 each occurrence and \$2,000,000 general aggregate for Bodily Injury and Property Damage, including Contractual Liability, Personal Injury, Products and Completed Operations; and

(c) Blanket Fidelity Bond (Commercial Blanket Bond): Limits in the amount of the Initial Payment provided for in the Agreement.

(d) Commercial Automobile Liability Insurance with limits not less than \$1,000,000 each occurrence, "Combined Single Limit" for Bodily Injury and Property Damage, including Owned, Non-Owned and Hired auto coverage, as applicable.

(e) Professional liability insurance, applicable to Contractor's profession, with limits not less than \$1,000,000 each claim with respect to negligent acts, errors or omissions in connection with the Services.

5.1.2 Commercial General Liability and Commercial Automobile Liability Insurance policies must be endorsed to provide:

(a) Name as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees.

(b) That such policies are primary insurance to any other insurance available to the Additional Insureds, with respect to any claims arising out of this Agreement, and that insurance applies separately to each insured against whom claim is made or suit is brought.

5.1.3 All policies shall be endorsed to provide thirty (30) days' advance written notice to the City of cancellation for any reason, intended non-renewal, or reduction in coverages. Notices shall be sent to the City address set forth in Section 11.1, entitled "Notices to the Parties."

5.1.4 Should any of the required insurance be provided under a claims-made form, Contractor shall maintain such coverage continuously throughout the term of this Agreement and, without lapse, for a period of three years beyond the expiration of this Agreement, to the effect that, should occurrences during the contract term give rise to claims made after expiration of the Agreement, such claims shall be covered by such claims-made policies.

5.1.5 Should any required insurance lapse during the term of this Agreement, requests for payments originating after such lapse shall not be processed until the City receives satisfactory evidence of reinstated coverage as required by this Agreement, effective as of the lapse date. If insurance is not reinstated, the City may, at its sole option, terminate this Agreement effective on the date of such lapse of insurance.

5.1.6 Before commencing any Services, Contractor shall furnish to City certificates of insurance and additional insured policy endorsements with insurers with ratings comparable to A-, VIII or higher, that are authorized to do business in the State of California, and that are satisfactory to City, in form evidencing all coverages set forth above. Approval of the insurance by City shall not relieve or decrease Contractor's liability hereunder.

5.1.7 The Workers' Compensation policy(ies) shall be endorsed with a waiver of subrogation in favor of the City for all work performed by the Contractor, its employees, agents and subcontractors.

5.1.8 If Contractor will use any subcontractor(s) to provide Services, Contractor shall require the subcontractor(s) to provide all necessary insurance and to name the City and County of San Francisco, its officers, agents and employees and the Contractor as additional insureds.

5.1.9 Notwithstanding the foregoing, the following insurance requirements are waived or modified in accordance with the terms and conditions stated in Appendix C, Insurance.

5.2 **Indemnification.** Contractor shall indemnify and hold harmless City and its officers, agents and employees from, and, if requested, shall defend them from and against any and all claims, demands, losses, damages, costs, expenses, and liability (legal, contractual, or otherwise) arising from or in any way connected with any: (i) injury to or death of a person, including employees of City or Contractor; (ii) loss of or damage to property; (iii) violation of local, state, or federal common law, statute or regulation, including but not limited to privacy or personally identifiable information, health information, disability and labor laws or regulations; (iv) strict liability imposed by any law or regulation; or (v) losses arising from Contractor's execution of subcontracts not in accordance with the requirements of this Agreement applicable to subcontractors; so long as such injury, violation, loss, or strict liability (as set forth in subsections (i) – (v) above) arises directly or indirectly from Contractor's performance of this Agreement, including, but not limited to, Contractor's use of facilities or equipment provided by City or others, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law, and except where such loss, damage, injury, liability or claim is the result of the active negligence or willful misconduct of City and is not contributed to by any act of, or by any omission to perform some duty imposed by law or agreement on Contractor, its subcontractors, or either's agent or employee. Contractor shall also indemnify, defend and hold City harmless from all suits or claims or administrative proceedings for breaches of federal and/or state law regarding the privacy of health information, electronic records or related topics, arising directly or indirectly from Contractor's performance of this Agreement, except where such breach is the result of the active negligence or willful misconduct of City. The foregoing indemnity shall include, without limitation, reasonable fees of attorneys, consultants and experts and related costs and City's costs of investigating any claims against the City.



In addition to Contractor's obligation to indemnify City, Contractor specifically acknowledges and agrees that it has an immediate and independent obligation to defend City from any claim which actually or potentially falls within this indemnification provision, even if the allegations are or may be groundless, false or fraudulent, which obligation arises at the time such claim is tendered to Contractor by City and continues at all times thereafter.

Contractor shall indemnify and hold City harmless from all loss and liability, including attorneys' fees, court costs and all other litigation expenses for any infringement of the patent rights, copyright, trade secret or any other proprietary right or trademark, and all other intellectual property claims of any person or persons arising directly or indirectly from the receipt by City, or any of its officers or agents, of Contractor's Services.

## **Article 6 Liability of the Parties**

**6.1 Liability of City.** CITY'S PAYMENT OBLIGATIONS UNDER THIS AGREEMENT SHALL BE LIMITED TO THE PAYMENT OF THE COMPENSATION PROVIDED FOR IN SECTION 3.3.1, "PAYMENT," OF THIS AGREEMENT. NOTWITHSTANDING ANY OTHER PROVISION OF THIS AGREEMENT, IN NO EVENT SHALL CITY BE LIABLE, REGARDLESS OF WHETHER ANY CLAIM IS BASED ON CONTRACT OR TORT, FOR ANY SPECIAL, CONSEQUENTIAL, INDIRECT OR INCIDENTAL DAMAGES, INCLUDING, BUT NOT LIMITED TO, LOST PROFITS, ARISING OUT OF OR IN CONNECTION WITH THIS AGREEMENT OR THE SERVICES PERFORMED IN CONNECTION WITH THIS AGREEMENT

**6.2 Liability for Use of Equipment.** City shall not be liable for any damage to persons or property as a result of the use, misuse or failure of any equipment used by Contractor, or any of its subcontractors, or by any of their employees, even though such equipment is furnished, rented or loaned by City.

**6.3 Liability for Incidental and Consequential Damages.** Contractor shall be responsible for incidental and consequential damages resulting in whole or in part from Contractor's acts or omissions.

## **Article 7 Payment of Taxes**

**7.1** Except for any applicable California sales and use taxes charged by Contractor to City, Contractor shall pay all taxes, including possessory interest taxes levied upon or as a result of this Agreement, or the Services delivered pursuant hereto. Contractor shall remit to the State of California any sales or use taxes paid by City to Contractor under this Agreement. Contractor agrees to promptly provide information requested by the City to verify Contractor's compliance with any State requirements for reporting sales and use tax paid by City under this Agreement.

**7.2** Contractor acknowledges that this Agreement may create a "possessory interest" for property tax purposes. Generally, such a possessory interest is not created unless the Agreement entitles the Contractor to possession, occupancy, or use of City property for private gain. If such a possessory interest is created, then the following shall apply:

**7.2.1** Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that Contractor, and any permitted successors and assigns, may be subject to real property tax assessments on the possessory interest.

7.2.2 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that the creation, extension, renewal, or assignment of this Agreement may result in a "change in ownership" for purposes of real property taxes, and therefore may result in a revaluation of any possessory interest created by this Agreement. Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to report on behalf of the City to the County Assessor the information required by Revenue and Taxation Code section 480.5, as amended from time to time, and any successor provision.

7.2.3 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that other events also may cause a change of ownership of the possessory interest and result in the revaluation of the possessory interest. (see, e.g., Rev. & Tax. Code section 64, as amended from time to time). Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to report any change in ownership to the County Assessor, the State Board of Equalization or other public agency as required by law.

7.2.4 Contractor further agrees to provide such other information as may be requested by the City to enable the City to comply with any reporting requirements for possessory interests that are imposed by applicable law.

## **Article 8 Termination and Default**

### **8.1 Termination for Convenience**

8.1.1 City shall have the option, in its sole discretion, to terminate this Agreement, at any time during the term hereof, for convenience and without cause. City shall exercise this option by giving Contractor written notice of termination. The notice shall specify the date on which termination shall become effective.

8.1.2 Upon receipt of the notice of termination, Contractor shall commence and perform, with diligence, all actions necessary on the part of Contractor to effect the termination of this Agreement on the date specified by City and to minimize the liability of Contractor and City to third parties as a result of termination. All such actions shall be subject to the prior approval of City. Such actions shall include, without limitation:

(a) Halting the performance of all Services under this Agreement on the date(s) and in the manner specified by City.

(b) Terminating all existing orders and subcontracts, and not placing any further orders or subcontracts for materials, Services, equipment or other items.

(c) At City's direction, assigning to City any or all of Contractor's right, title, and interest under the orders and subcontracts terminated. Upon such assignment, City shall have the right, in its sole discretion, to settle or pay any or all claims arising out of the termination of such orders and subcontracts.

(d) Subject to City's approval, settling all outstanding liabilities and all claims arising out of the termination of orders and subcontracts.

(e) Completing performance of any Services that City designates to be completed prior to the date of termination specified by City.

(f) Taking such action as may be necessary, or as the City may direct, for the protection and preservation of any property related to this Agreement which is in the possession of Contractor and in which City has or may acquire an interest.

8.1.3 Within 30 days after the specified termination date, Contractor shall submit to City an invoice, which shall set forth each of the following as a separate line item:

(a) The reasonable cost to Contractor, without profit, for all Services prior to the specified termination date, for which Services City has not already tendered payment. Reasonable costs may include a reasonable allowance for actual overhead, not to exceed a total of 10% of Contractor's direct costs for Services. Any overhead allowance shall be separately itemized. Contractor may also recover the reasonable cost of preparing the invoice.

(b) A reasonable allowance for profit on the cost of the Services described in the immediately preceding subsection (a), provided that Contractor can establish, to the satisfaction of City, that Contractor would have made a profit had all Services under this Agreement been completed, and provided further, that the profit allowed shall in no event exceed 5% of such cost.

(c) The reasonable cost to Contractor of handling material or equipment returned to the vendor, delivered to the City or otherwise disposed of as directed by the City.

(d) A deduction for the cost of materials to be retained by Contractor, amounts realized from the sale of materials and not otherwise recovered by or credited to City, and any other appropriate credits to City against the cost of the Services or other work.

8.1.4 In no event shall City be liable for costs incurred by Contractor or any of its subcontractors after the termination date specified by City, except for those costs specifically enumerated and described in Section 8.1.3. Such non-recoverable costs include, but are not limited to, anticipated profits on the Services under this Agreement, post-termination employee salaries, post-termination administrative expenses, post-termination overhead or unabsorbed overhead, attorneys' fees or other costs relating to the prosecution of a claim or lawsuit, prejudgment interest, or any other expense which is not reasonable or authorized under Section 8.1.3.

8.1.5 In arriving at the amount due to Contractor under this Section, City may deduct: (i) all payments previously made by City for Services covered by Contractor's final invoice; (ii) any claim which City may have against Contractor in connection with this Agreement; (iii) any invoiced costs or expenses excluded pursuant to the immediately preceding subsection 8.1.4; and (iv) in instances in which, in the opinion of the City, the cost of any Service performed under this Agreement is excessively high due to costs incurred to remedy or replace defective or rejected Services, the difference between the invoiced amount and City's estimate of the reasonable cost of performing the invoiced Services in compliance with the requirements of this Agreement.

8.1.6 City's payment obligation under this Section shall survive termination of this Agreement.

## 8.2 Termination for Default; Remedies.

8.2.1 Each of the following shall constitute an immediate event of default ("Event of Default") under this Agreement:

(a) Contractor fails or refuses to perform or observe any term, covenant or condition contained in any of the following Sections of this Agreement:

3.5	Submitting False Claims.	10.4	Nondisclosure of Private, Proprietary or Confidential Information
4.5	Assignment	10.10	Alcohol and Drug-Free Workplace
Article 5	Insurance and Indemnity	10.13	Working with Minors
Article 7	Payment of Taxes	11.10	Compliance with Laws
Article 13	Protected Health Information	Item 1 of Appendix D attached to this Agreement	

(b) Contractor fails or refuses to perform or observe any other term, covenant or condition contained in this Agreement, including any obligation imposed by ordinance or statute and incorporated by reference herein, and such default continues for a period of ten days after written notice thereof from City to Contractor.

(c) Contractor (i) is generally not paying its debts as they become due; (ii) files, or consents by answer or otherwise to the filing against it of a petition for relief or reorganization or arrangement or any other petition in bankruptcy or for liquidation or to take advantage of any bankruptcy, insolvency or other debtors' relief law of any jurisdiction; (iii) makes an assignment for the benefit of its creditors; (iv) consents to the appointment of a custodian, receiver, trustee or other officer with similar powers of Contractor or of any substantial part of Contractor's property; or (v) takes action for the purpose of any of the foregoing.

(d) A court or government authority enters an order (i) appointing a custodian, receiver, trustee or other officer with similar powers with respect to Contractor or with respect to any substantial part of Contractor's property, (ii) constituting an order for relief or approving a petition for relief or reorganization or arrangement or any other petition in bankruptcy or for liquidation or to take advantage of any bankruptcy, insolvency or other debtors' relief law of any jurisdiction or (iii) ordering the dissolution, winding-up or liquidation of Contractor.

8.2.2 On and after any Event of Default, City shall have the right to exercise its legal and equitable remedies, including, without limitation, the right to terminate this Agreement or to seek specific performance of all or any part of this Agreement. In addition, where applicable, City shall have the right (but no obligation) to cure (or cause to be cured) on behalf of Contractor any Event of Default; Contractor shall pay to City on demand all costs and expenses incurred by City in effecting such cure, with interest thereon from the date of incurrence at the maximum rate then permitted by law. City shall have the right to offset from any amounts due to Contractor under this Agreement or any other agreement between City and Contractor: (i) all damages, losses, costs or expenses incurred by City as a result of an Event of Default; and (ii) any liquidated damages levied upon Contractor pursuant to the terms of this Agreement; and (iii), any damages imposed by any ordinance or statute that is incorporated into this Agreement by reference, or into any other agreement with the City.

8.2.3 All remedies provided for in this Agreement may be exercised individually or in combination with any other remedy available hereunder or under applicable laws, rules and regulations. The exercise of any remedy shall not preclude or in any way be deemed to waive any other remedy.

Nothing in this Agreement shall constitute a waiver or limitation of any rights that City may have under applicable law.

8.2.4 Any notice of default must be sent by registered mail to the address set forth in Article 11.

8.3 **Non-Waiver of Rights.** The omission by either party at any time to enforce any default or right reserved to it, or to require performance of any of the terms, covenants, or provisions hereof by the other party at the time designated, shall not be a waiver of any such default or right to which the party is entitled, nor shall it in any way affect the right of the party to enforce such provisions thereafter.

8.4 **Rights and Duties upon Termination or Expiration.**

8.4.1 This Section and the following Sections of this Agreement listed below, shall survive termination or expiration of this Agreement:

3.3.2	Payment Limited to Satisfactory Services	9.1	Ownership of Results
3.3.7(a)	Grant Funded Contracts - Disallowance	9.2	Works for Hire
3.4	Audit and Inspection of Records	10.4	Nondisclosure of Private, Proprietary or Confidential Information
3.5	Submitting False Claims	11.6	Dispute Resolution Procedure
Article 5	Insurance and Indemnity	11.7	Agreement Made in California; Venue
6.1	Liability of City	11.8	Construction
6.3	Liability for Incidental and Consequential Damages	11.9	Entire Agreement
Article 7	Payment of Taxes	11.10	Compliance with Laws
8.1.6	Payment Obligation	11.11	Severability
Article 13	Protected Health Information	Item I of Appendix D attached to this Agreement	

8.4.2 Subject to the survival of the Sections identified in Section 8.4.1, above, if this Agreement is terminated prior to expiration of the term specified in Article 2, this Agreement shall be of no further force or effect. Contractor shall transfer title to City, and deliver in the manner, at the times, and to the extent, if any, directed by City, any work in progress, completed work, supplies, equipment, and other materials produced as a part of, or acquired in connection with the performance of this Agreement, and any completed or partially completed work which, if this Agreement had been completed, would have been required to be furnished to City.

**Article 9 Rights In Deliverables**

9.1 **Ownership of Results.** Any interest of Contractor or its subcontractors, in the Deliverables, including any drawings, plans, specifications, blueprints, studies, reports, memoranda, computation sheets, computer files and media or other documents prepared by Contractor or its subcontractors, shall become the property of and will be transmitted to City. However, unless expressly prohibited elsewhere in this Agreement, Contractor may retain and use copies for reference and as documentation of its experience and capabilities.

9.2 **Works for Hire.** If, in connection with Services, Contractor or its subcontractors creates Deliverables including, without limitation, artwork, copy, posters, billboards, photographs, videotapes, audiotapes, systems designs, software, reports, diagrams, surveys, blueprints, source codes, or any other original works of authorship, whether in digital or any other format, such works of authorship shall be works for hire as defined under Title 17 of the United States Code, and all copyrights in such works shall be the property of the City. If any Deliverables created by Contractor or its subcontractor(s) under this Agreement are ever determined not to be works for hire under U.S. law, Contractor hereby assigns all Contractor's copyrights to such Deliverables to the City, agrees to provide any material and execute any documents necessary to effectuate such assignment, and agrees to include a clause in every subcontract imposing the same duties upon subcontractor(s). With City's prior written approval, Contractor and its subcontractor(s) may retain and use copies of such works for reference and as documentation of their respective experience and capabilities.

#### **Article 10 Additional Requirements Incorporated by Reference**

10.1 **Laws Incorporated by Reference.** The full text of the laws listed in this Article 10, including enforcement and penalty provisions, are incorporated by reference into this Agreement. The full text of the San Francisco Municipal Code provisions incorporated by reference in this Article and elsewhere in the Agreement ("Mandatory City Requirements") are available at [www.sfgov.org](http://www.sfgov.org) under "Government."

10.2 **Conflict of Interest.** By executing this Agreement, Contractor certifies that it does not know of any fact which constitutes a violation of Section 15.103 of the City's Charter; Article III, Chapter 2 of City's Campaign and Governmental Conduct Code; Title 9, Chapter 7 of the California Government Code (Section 87100 *et seq.*), or Title 1, Division 4, Chapter 1, Article 4 of the California Government Code (Section 1090 *et seq.*), and further agrees promptly to notify the City if it becomes aware of any such fact during the term of this Agreement.

10.3 **Prohibition on Use of Public Funds for Political Activity.** In performing the Services, Contractor shall comply with San Francisco Administrative Code Chapter 12G, which prohibits funds appropriated by the City for this Agreement from being expended to participate in, support, or attempt to influence any political campaign for a candidate or for a ballot measure. Contractor is subject to the enforcement and penalty provisions in Chapter 12G.

#### **10.4 Nondisclosure of Private, Proprietary or Confidential Information.**

10.4.1 If this Agreement requires City to disclose "Private Information" to Contractor within the meaning of San Francisco Administrative Code Chapter 12M, Contractor and subcontractor shall use such information only in accordance with the restrictions stated in Chapter 12M and in this Agreement and only as necessary in performing the Services. Contractor is subject to the enforcement and penalty provisions in Chapter 12M.

10.4.2 In the performance of Services, Contractor may have access to City's proprietary or confidential information, the disclosure of which to third parties may damage City. If City discloses proprietary or confidential information to Contractor, such information must be held by Contractor in confidence and used only in performing the Agreement. Contractor shall exercise the same standard of care to protect such information as a reasonably prudent contractor would use to protect its own proprietary or confidential information.

## 10.5 Nondiscrimination Requirements

**10.5.1 Non Discrimination in Contracts.** Contractor shall comply with the provisions of Chapters 12B and 12C of the San Francisco Administrative Code. Contractor shall incorporate by reference in all subcontracts the provisions of Sections 12B.2(a), 12B.2(c)-(k), and 12C.3 of the San Francisco Administrative Code and shall require all subcontractors to comply with such provisions. Contractor is subject to the enforcement and penalty provisions in Chapters 12B and 12C.

**10.5.2 Nondiscrimination in the Provision of Employee Benefits.** San Francisco Administrative Code 12B.2. Contractor does not as of the date of this Agreement, and will not during the term of this Agreement, in any of its operations in San Francisco, on real property owned by San Francisco, or where work is being performed for the City elsewhere in the United States, discriminate in the provision of employee benefits between employees with domestic partners and employees with spouses and/or between the domestic partners and spouses of such employees, subject to the conditions set forth in San Francisco Administrative Code Section 12B.2.

**10.6 Local Business Enterprise and Non-Discrimination in Contracting Ordinance.** Contractor shall comply with all applicable provisions of Chapter 14B ("LBE Ordinance"). Contractor is subject to the enforcement and penalty provisions in Chapter 14B.

**10.7 Minimum Compensation Ordinance.** Contractor shall pay covered employees no less than the minimum compensation required by San Francisco Administrative Code Chapter 12P. Contractor is subject to the enforcement and penalty provisions in Chapter 12P. By signing and executing this Agreement, Contractor certifies that it is in compliance with Chapter 12P.

**10.8 Health Care Accountability Ordinance.** Contractor shall comply with San Francisco Administrative Code Chapter 12Q. Contractor shall choose and perform one of the Health Care Accountability options set forth in San Francisco Administrative Code Chapter 12Q.3. Contractor is subject to the enforcement and penalty provisions in Chapter 12Q.

**10.9 First Source Hiring Program.** Contractor must comply with all of the provisions of the First Source Hiring Program, Chapter 83 of the San Francisco Administrative Code, that apply to this Agreement, and Contractor is subject to the enforcement and penalty provisions in Chapter 83.

**10.10 Alcohol and Drug-Free Workplace.** City reserves the right to deny access to, or require Contractor to remove from, City facilities personnel of any Contractor or subcontractor who City has reasonable grounds to believe has engaged in alcohol abuse or illegal drug activity which in any way impairs City's ability to maintain safe work facilities or to protect the health and well-being of City employees and the general public. City shall have the right of final approval for the entry or re-entry of any such person previously denied access to, or removed from, City facilities. Illegal drug activity means possessing, furnishing, selling, offering, purchasing, using or being under the influence of illegal drugs or other controlled substances for which the individual lacks a valid prescription. Alcohol abuse means possessing, furnishing, selling, offering, or using alcoholic beverages, or being under the influence of alcohol.

Contractor agrees in the performance of this Agreement to maintain a drug-free workplace by notifying employees that unlawful drug use is prohibited and specifying what actions will be taken against employees for violations; establishing an on-going drug-free awareness program that includes employee

notification and, as appropriate, rehabilitation. Contractor can comply with this requirement by implementing a drug-free workplace program that complies with the Federal Drug-Free Workplace Act of 1988 (41 U.S.C. § 701) [or California Drug-Free Workplace Act of 1990 Cal. Gov. Code, § 8350 et seq., if state funds involved].

**10.11 Limitations on Contributions.** By executing this Agreement, Contractor acknowledges that it is familiar with section 1.126 of the City's Campaign and Governmental Conduct Code, which prohibits any person who contracts with the City for the rendition of personal services, for the furnishing of any material, supplies or equipment, for the sale or lease of any land or building, or for a grant, loan or loan guarantee, from making any campaign contribution to (1) an individual holding a City elective office if the contract must be approved by the individual, a board on which that individual serves, or the board of a state agency on which an appointee of that individual serves, (2) a candidate for the office held by such individual, or (3) a committee controlled by such individual, at any time from the commencement of negotiations for the contract until the later of either the termination of negotiations for such contract or six months after the date the contract is approved. The prohibition on contributions applies to each prospective party to the contract; each member of Contractor's board of directors; Contractor's chairperson, chief executive officer, chief financial officer and chief operating officer; any person with an ownership interest of more than 20 percent in Contractor; any subcontractor listed in the bid or contract; and any committee that is sponsored or controlled by Contractor. Contractor must inform each such person of the limitation on contributions imposed by Section 1.126 and provide the names of the persons required to be informed to City.

**10.12 Reserved. (Slavery Era Disclosure)**

**10.13 Working with Minors.** In accordance with California Public Resources Code Section 5164, if Contractor, or any subcontractor, is providing services at a City park, playground, recreational center or beach, Contractor shall not hire, and shall prevent its subcontractors from hiring, any person for employment or a volunteer position in a position having supervisory or disciplinary authority over a minor if that person has been convicted of any offense listed in Public Resources Code Section 5164. In addition, if Contractor, or any subcontractor, is providing services to the City involving the supervision or discipline of minors or where Contractor, or any subcontractor, will be working with minors in an unaccompanied setting on more than an incidental or occasional basis, Contractor and any subcontractor shall comply with any and all applicable requirements under federal or state law mandating criminal history screening for such positions and/or prohibiting employment of certain persons including but not limited to California Penal Code Section 290.95. In the event of a conflict between this section and Section 10.14, "Consideration of Criminal History in Hiring and Employment Decisions," of this Agreement, this section shall control.

**10.14 Consideration of Criminal History in Hiring and Employment Decisions**

10.14.1 Contractor agrees to comply fully with and be bound by all of the provisions of Chapter 12T, "City Contractor/Subcontractor Consideration of Criminal History in Hiring and Employment Decisions," of the San Francisco Administrative Code ("Chapter 12T"), including the remedies provided, and implementing regulations, as may be amended from time to time. The provisions of Chapter 12T are incorporated by reference and made a part of this Agreement as though fully set forth herein. The text of the Chapter 12T is available on the web at <http://sfgov.org/olse/fco>. A partial listing of some of Contractor's obligations under Chapter 12T is set forth in this Section. Contractor is required to



comply with all of the applicable provisions of 12T, irrespective of the listing of obligations in this Section. Capitalized terms used in this Section and not defined in this Agreement shall have the meanings assigned to such terms in Chapter 12T.

10.14.2 The requirements of Chapter 12T shall only apply to a Contractor's or Subcontractor's operations to the extent those operations are in furtherance of the performance of this Agreement, shall apply only to applicants and employees who would be or are performing work in furtherance of this Agreement, and shall apply when the physical location of the employment or prospective employment of an individual is wholly or substantially within the City of San Francisco. Chapter 12T shall not apply when the application in a particular context would conflict with federal or state law or with a requirement of a government agency implementing federal or state law.

10.15 **Public Access to Nonprofit Records and Meetings.** If Contractor receives a cumulative total per year of at least \$250,000 in City funds or City-administered funds and is a non-profit organization as defined in Chapter 12L of the San Francisco Administrative Code, Contractor must comply with the City's Public Access to Nonprofit Records and Meetings requirements, as set forth in Chapter 12L of the San Francisco Administrative Code, including the remedies provided therein.

10.16 **Food Service Waste Reduction Requirements.** Contractor shall comply with the Food Service Waste Reduction Ordinance, as set forth in San Francisco Environment Code Chapter 16, including but not limited to the remedies for noncompliance provided therein.

10.17 **Sugar-Sweetened Beverage Prohibition.** Contractor agrees that it will not sell, provide, or otherwise distribute Sugar-Sweetened Beverages, as defined by San Francisco Administrative Code Chapter 101, as part of its performance of this Agreement.

10.18 **Tropical Hardwood and Virgin Redwood Ban.** Pursuant to San Francisco Environment Code Section 804(b), the City urges Contractor not to import, purchase, obtain, or use for any purpose, any tropical hardwood, tropical hardwood wood product, virgin redwood or virgin redwood wood product.

10.19 **Reserved. (Preservative Treated Wood Products)**

## Article 11 General Provisions

11.1 **Notices to the Parties.** Unless otherwise indicated in this Agreement, all written communications sent by the Parties may be by U.S. mail or e-mail, and shall be addressed as follows:

To CITY: Office of Contract Management and  
Compliance  
Department of Public Health

1380 Howard Street Room 419c  
San Francisco, California 94103

FAX: (415) 554-2555  
e-mail: Junko.craft@sfdph.org

And: Charles Mayer  
Director of Mental Health Act  
1380 Howard Street Rm510a  
San Francisco, Ca 94103

FAX: (415) 255-3417  
e-mail: Charles.mayer@sfdph.org

To CONTRACTOR: Kavoos G. Bassiri,

Chief Executive Officer/President

639 14<sup>th</sup> Avenue

San Francisco, Ca 94118

FAX: (415) 751-7336

e-mail: kavoosbassiri@ramsinc.org

Any notice of default must be sent by registered mail. Either Party may change the address to which notice is to be sent by giving written notice thereof to the other Party. If email notification is used, the sender must specify a receipt notice.

**11.2 Compliance with Americans with Disabilities Act.** Contractor shall provide the Services in a manner that complies with the Americans with Disabilities Act (ADA), including but not limited to Title II's program access requirements, and all other applicable federal, state and local disability rights legislation.

**11.3 Reserved. (Payment Card Industry ("PCI") Requirements) Sunshine Ordinance.** Contractor acknowledges that this Agreement and all records related to its formation, Contractor's performance of Services, and City's payment are subject to the California Public Records Act, (California Government Code §6250 et. seq.), and the San Francisco Sunshine Ordinance, (San Francisco Administrative Code Chapter 67). Such records are subject to public inspection and copying unless exempt from disclosure under federal, state or local law.

**11.4 Sunshine Ordinance.** Contractor acknowledges that this Agreement and all records related to its formation, Contractor's performance of Services, and City's payment are subject to the California Public Records Act, (California Government Code §6250 et. seq.), and the San Francisco Sunshine Ordinance, (San Francisco Administrative Code Chapter 67). Such records are subject to public inspection and copying unless exempt from disclosure under federal, state or local law.

**11.5 Modification of this Agreement.** This Agreement may not be modified, nor may compliance with any of its terms be waived, except as noted in Section 11.1, "Notices to Parties," regarding change in personnel or place, and except by written instrument executed and approved in the same manner as this Agreement. Contractor shall cooperate with Department to submit to the Director of CMD any amendment, modification, supplement or change order that would result in a cumulative increase of the original amount of this Agreement by more than 20% (CMD Contract Modification Form).

**11.6 Dispute Resolution Procedure.**

**11.6.1 Negotiation; Alternative Dispute Resolution.** The Parties will attempt in good faith to resolve any dispute or controversy arising out of or relating to the performance of services under this Agreement. If the Parties are unable to resolve the dispute, then, pursuant to San Francisco Administrative Code Section 21.35, Contractor may submit to the Contracting Officer a written request for administrative review and documentation of the Contractor's claim(s). Upon such request, the Contracting Officer shall promptly issue an administrative decision in writing, stating the reasons for the action taken and informing the Contractor of its right to judicial review. If agreed by both Parties in writing, disputes may be resolved by a mutually agreed-upon alternative dispute resolution process. If the

parties do not mutually agree to an alternative dispute resolution process or such efforts do not resolve the dispute, then either Party may pursue any remedy available under California law. The status of any dispute or controversy notwithstanding, Contractor shall proceed diligently with the performance of its obligations under this Agreement in accordance with the Agreement and the written directions of the City. Neither Party will be entitled to legal fees or costs for matters resolved under this section.

**11.6.2 Government Code Claim Requirement.** No suit for money or damages may be brought against the City until a written claim therefor has been presented to and rejected by the City in conformity with the provisions of San Francisco Administrative Code Chapter 10 and California Government Code Section 900, et seq. Nothing set forth in this Agreement shall operate to toll, waive or excuse Contractor's compliance with the California Government Code Claim requirements set forth in San Francisco Administrative Code Chapter 10 and California Government Code Section 900, et seq.

**11.6.3 Health and Human Service Contract Dispute Resolution Procedure.** The Parties shall resolve disputes that have not been resolved administratively by other departmental remedies in accordance with the Dispute Resolution Procedure set forth in Appendix G incorporated herein by this reference.

**11.7 Agreement Made in California; Venue.** The formation, interpretation and performance of this Agreement shall be governed by the laws of the State of California. Venue for all litigation relative to the formation, interpretation and performance of this Agreement shall be in San Francisco.

**11.8 Construction.** All paragraph captions are for reference only and shall not be considered in construing this Agreement.

**11.9 Entire Agreement.** This contract sets forth the entire Agreement between the parties, and supersedes all other oral or written provisions. This Agreement may be modified only as provided in Section 11.5, "Modification of this Agreement."

**11.10 Compliance with Laws.** Contractor shall keep itself fully informed of the City's Charter, codes, ordinances and duly adopted rules and regulations of the City and of all state, and federal laws in any manner affecting the performance of this Agreement, and must at all times comply with such local codes, ordinances, and regulations and all applicable laws as they may be amended from time to time.

**11.11 Severability.** Should the application of any provision of this Agreement to any particular facts or circumstances be found by a court of competent jurisdiction to be invalid or unenforceable, then (a) the validity of other provisions of this Agreement shall not be affected or impaired thereby, and (b) such provision shall be enforced to the maximum extent possible so as to effect the intent of the parties and shall be reformed without further action by the parties to the extent necessary to make such provision valid and enforceable.

**11.12 Cooperative Drafting.** This Agreement has been drafted through a cooperative effort of City and Contractor, and both Parties have had an opportunity to have the Agreement reviewed and revised by legal counsel. No Party shall be considered the drafter of this Agreement, and no presumption or rule that an ambiguity shall be construed against the Party drafting the clause shall apply to the interpretation or enforcement of this Agreement.

**11.13 Order of Precedence.** Contractor agrees to perform the services described below in accordance with the terms and conditions of this Agreement, implementing task orders, the RFP, and

Contractor's proposal dated [Insert Date of Proposal]. The RFP and Contractor's proposal are incorporated by reference as though fully set forth herein. Should there be a conflict of terms or conditions, this Agreement and any implementing task orders shall control over the RFP and the Contractor's proposal.

**11.14 Order of Precedence.** Contractor agrees that in the event of discrepancy, inconsistency, gap, ambiguity, or conflicting language between the City's terms and Contractor's printed terms attached, the City's terms shall take precedence, followed by the procurement issued by the department, Contractor's proposal, and Contractor's printed terms, respectively.

#### **Article 12 MacBride And Signature**

**12.1 MacBride Principles -Northern Ireland.** The provisions of San Francisco Administrative Code §12F are incorporated herein by this reference and made part of this Agreement. By signing this Agreement, Contractor confirms that Contractor has read and understood that the City urges companies doing business in Northern Ireland to resolve employment inequities and to abide by the MacBride Principles, and urges San Francisco companies to do business with corporations that abide by the MacBride Principles.

#### **Article 13 Protected Health Information**

**13.1 Protected Health Information.** Contractor, all subcontractors, all agents and employees of Contractor and any subcontractor shall comply with all federal and state laws regarding the transmission, storage and protection of all private health information disclosed to Contractor by City in the performance of this Agreement. Contractor agrees that any failure of Contractor to comply with the requirements of federal and/or state and/or local privacy laws shall be a material breach of the Contract. In the event that City pays a regulatory fine, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible use or disclosure of protected health information given to Contractor or its subcontractors or agents by City, Contractor shall indemnify City for the amount of such fine or penalties or damages, including costs of notification. In such an event, in addition to any other remedies available to it under equity or law, the City may terminate the Contract.

#### **Article 14 Additional Terms**

**14.1 Additional Terms.** Additional Terms are attached hereto as Appendix D and are incorporated into this Agreement by reference as though fully set forth herein.


IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the day first mentioned above.

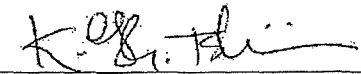
**CITY**

**CONTRACTOR**

Recommended by:

Richmond Area Multi-Services, Inc.

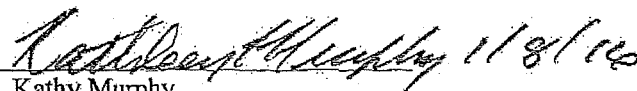
  
Barbara A. Garcia, MPA  
Director of Health  
Department of Public Health

  
Kavos Ghane Bassiri  
President and Chief Executive Officer  
639 14<sup>th</sup> Avenue  
San Francisco, CA 94118

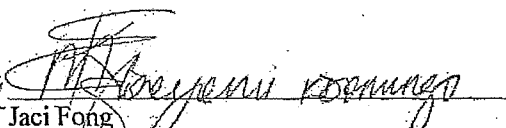
City vendor number: 15706

Approved as to Form:

Dennis J. Herrera  
City Attorney

By:   
Kathy Murphy  
Deputy City Attorney

Approved:

  
Jaci Fong  
Director of the Office of Contract Administration, and  
Purchaser

PURCHASING DEPARTMENT

16 APR 21 PM 1:14

RECEIVED

**Appendix A  
Scope of Services**

**I. Terms**

A. Contract Administrator:

In performing the Services hereunder, Contractor shall report to Charles Mayer, Contract Administrator for the City, or his / her designee.

B. Reports:

Contractor shall submit written reports as requested by the City. The format for the content of such reports shall be determined by the City. The timely submission of all reports is a necessary and material term and condition of this Agreement. All reports, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

C. Evaluation:

Contractor shall participate as requested with the City, State and/or Federal government in evaluative studies designed to show the effectiveness of Contractor's Services. Contractor agrees to meet the requirements of and participate in the evaluation program and management information systems of the City.

For contracts for the provision of services at San Francisco General or Laguna Honda Hospital and Rehabilitation Center, the evaluation program shall include agreed upon performance measures as specified in the Performance Improvement Plan and Performance Measure Grid which is presented in Attachment 1 to Appendix A. Performance measures are reported annually to the San Francisco General Hospital performance improvement committees (PIPS and Quality Council) or the to the Administration Office of Laguna Honda Hospital and Rehabilitation Center.

The City agrees that any final written reports generated through the evaluation program shall be made available to Contractor within thirty (30) working days. Contractor may submit a written response within thirty working days of receipt of any evaluation report and such response will become part of the official report.

D. Possession of Licenses/Permits:

Contractor warrants the possession of all licenses and/or permits required by the laws and regulations of the United States, the State of California, and the City to provide the Services. Failure to maintain these licenses and permits shall constitute a material breach of this Agreement.

E. Adequate Resources:

Contractor agrees that it has secured or shall secure at its own expense all persons, employees and equipment required to perform the Services required under this Agreement, and that all such Services shall be performed by Contractor, or under Contractor's supervision, by persons authorized by law to perform such Services.

F. Infection Control, Health and Safety:

(1) Contractor must have a Bloodborne Pathogen (BBP) Exposure Control plan as defined in the California Code of Regulations, Title 8, Section 5193, Bloodborne Pathogens (<http://www.dir.ca.gov/title8/5193.html>), and demonstrate compliance with all requirements including, but not limited to, exposure determination, training, immunization, use of personal protective equipment and safe needle devices, maintenance of a sharps injury log, post-exposure medical evaluations, and recordkeeping.

(2) Contractor must demonstrate personnel policies/procedures for protection of staff and clients from other communicable diseases prevalent in the population served. Such policies and procedures shall include, but not be limited to, work practices, personal protective equipment, staff/client Tuberculosis (TB) surveillance, training, etc.

(3) Contractor must demonstrate personnel policies/procedures for Tuberculosis (TB) exposure control consistent with the Centers for Disease Control and Prevention (CDC) recommendations for health care facilities and based on the Francis J. Curry National Tuberculosis Center: Template for Clinic Settings, as appropriate.

(4) Contractor is responsible for site conditions, equipment, health and safety of their employees, and all other persons who work or visit the job site.

(5) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as BBP and TB and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(6) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.

(7) Contractor assumes responsibility for procuring all medical equipment and supplies for use by their staff, including safe needle devices, and provides and documents all appropriate training.

(8) Contractor shall demonstrate compliance with all state and local regulations with regard to handling and disposing of medical waste.

G. Aerosol Transmissible Disease Program, Health and Safety:

(1) Contractor must have an Aerosol Transmissible Disease (ATD) Program as defined in the California Code of Regulations, Title 8, Section 5199, Aerosol Transmissible Diseases (<http://www.dir.ca.gov/Title8/5199.html>), and demonstrate compliance with all requirements including, but not limited to, exposure determination, screening procedures, source control measures, use of personal protective equipment, referral procedures, training, immunization, post-exposure medical evaluations/follow-up, and recordkeeping.

(2) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as Aerosol Transmissible Disease and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(3) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.



(4) Contractor assumes responsibility for procuring all medical equipment and supplies for use by their staff, including Personnel Protective Equipment such as respirators, and provides and documents all appropriate training.

H. Acknowledgment of Funding:

Contractor agrees to acknowledge the San Francisco Department of Public Health in any printed material or public announcement describing the San Francisco Department of Public Health-funded Services. Such documents or announcements shall contain a credit substantially as follows: "This program/service/activity/research project was funded through the Department of Public Health, City and County of San Francisco."

**2. Description of Services**

Contractor agrees to perform the following Services:

All written Deliverables, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

Detailed description of services are listed below and are attached hereto

Appendix A-1 Hire-Ability Janitorial Services

Appendix A-2 Hire-Ability Clerical & Mailroom Services

Appendix A-3 Peer-to-Peer Vocational Linkage

Appendix A-4 Hire-Ability Information Technology

Appendix A-5 TAY Vocational Services

**3. Services Provided by Attorneys.** Any services to be provided by a law firm or attorney to the City must be reviewed and approved in writing in advance by the City Attorney. No invoices for services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.



<b>Contractor Name:</b> Richmond Area Multi-Services, Inc.	<b>Appendix A-1</b>
<b>Program Name:</b> Hire-Ability Janitorial Services	<b>Contract Term:</b> 01/01/16-06/30/16

**1. Identifiers:**

Program Name: Hire-Ability Janitorial Services  
 Program Address: 1234 Indiana Street  
 City, State, ZIP: San Francisco, CA 94107  
 Telephone/FAX: (415) 282-9675 (415) 920-6877  
 Website Address: www.ramsinc.org / www.hire-ability.org  
 Contractor Address (if different from above): RAMS Administration, 639 14<sup>th</sup> Avenue  
 City, State, ZIP: San Francisco, CA 94118

Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
 Telephone: (415) 800-0699  
 Email Address: angelatang@ramsinc.org  
 Program Code(s) (if applicable): Not Applicable

**2. Nature of Document:**

New  Renewal  Modification

**3. Goal Statement:**

Janitorial Services provides employment and internship opportunities within the janitorial field for qualified and work ready consumers within the community behavioral health system. Work sites include various BHS clinics and programs.

Program outcomes (long-term) are adults with improved emotional/physical well-being and quality of life, positive community engagement, increased self-sufficiency, and obtain & retain employment. Short-term outcomes are adults with increased work skills & knowledge in the janitorial services industry and retaining & obtaining employment.

**4. Target Population:**

The target populations are San Francisco residents including transitional age youth, adults & older adults, aged 18 and over, who are currently receiving behavioral health services through BHS. Particular outreach will be made to underserved populations and those interested in the janitorial industry.

**5. Modality(s)/Intervention(s):**

See CBHS Appendix B, CRDC pages.

**6. Methodology:**

A. Outreach, recruitment, promotion, and advertisement as necessary.

RAMS' responsibility and commitment to mental health care quality and education extends beyond its own walls to reach people of all ages and backgrounds in its community through  
 CMS#:7540

Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-1
Program Name: Hire-Ability Janitorial Services	Contract Term: 01/01/16 – 06/30/16

outreach and serving them in their own environments. This philosophy of care has always been central to the agency's approach. RAMS is uniquely well-positioned and has the expertise to outreach, engage, and retain diverse consumers, underrepresented constituents, and community organizations with regards to vocational services & resources and raising awareness about mental health and physical well-being. As an established community services provider, RAMS comes into contact with significant numbers of consumers & families, annually serving well over 19,000 adults, children, youth & families at over 90 sites, citywide.

Specifically for Hire-Ability Janitorial Services, the program promotes open janitorial positions within the system of care by outreach and recruitment activities through linkages with BHS community agencies, Department of Rehabilitation (DOR), Co-Operative partners within the BHS Vocational Services system, and to other employment linkages that directly outreach to consumers within BHS. Targeted recruitment for employment also includes participants who have completed the Hire-Ability Vocational Services 4-month long Occupational Skills Training Certificate program in janitorial, funded by Department of Rehabilitation which prepares graduates for competitive employment within the janitorial field. Outreach and recruitment for this program includes community outreach presentations at BHS (and contract) clinics, participating in group presentations with the DOR/BHS vocational co-op, and announcements (emails, flyers) through the DOR/BHS vocational co-op partners. Hire-Ability also holds an open house orientation once per month to introduce services to potential applicants. Graduates of this program are provided employment services assistance, working directly with employment consultants to prepare for competitive employment through a variety of activities such as interview preparation, resume development, and job development and coaching assistance. The employment services program follows the *Individual Placement & Support Model*, which is strengths- and evidenced-based supported employment model that has been successful for individuals with chronic behavioral health issues. Graduates of this program and applicants that meet qualifications for janitorial positions are provided opportunities and assistance to apply and interview for open positions.

B. Admission, enrollment and/or intake criteria and process where applicable.

*Employment:*

The employment portion of Hire-Ability Janitorial Services works in conjunction with the Janitorial Services internship program, Department of Rehabilitation, BHS clinics, and Employment Services partners and linkages to refer qualified participants to open employment positions within this program. The process is equivalent to other competitive employment positions within RAMS which include screening of applicants which may result in face to face interviews and potential employment offers.

*Internship:*

The internship portion of Hire-Ability Janitorial Services accommodates referrals from BHS and other community agencies within the System of Care. All requests for services are directed to the Intake Coordinator, who then provides the individual with the necessary information to apply to the program. The program has an application process by which interested individuals are to submit their completed application packet within the indicated deadline. Application packets include basic demographic information (name, contact information), reference contact information, referral form, and resume. Individuals who qualify under the initial screening (a coordinated effort of review by staff including the

<b>Contractor Name:</b> Richmond Area Multi-Services, Inc.	<b>Appendix A-1</b>
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Vocational Rehabilitation Services Coordinator, Associate Director of Vocational Services, and internship site manager) are invited for a face-to-face interview with the Vocational Rehabilitation Services Coordinator and Associate Director of Vocational Services. These initial assessments are aimed to determine program eligibility, vocational readiness/interest, suitability of program services, strengths & existing resources, level of functioning & needs in consultation with behavioral health services provider, primary care connection, substance use/abuse, and other services (e.g. residential). If an individual is not accepted into the program based on suitability for these program services, the Vocational Rehabilitation Services Coordinator makes a referral to one of Hire-Ability Programs or to another service provider.

- C. Service delivery model, including treatment modalities, phases of treatment, hours of operation, length of stay, locations of service delivery, frequency and duration of service, strategies for service delivery, wrap-around services, residential bed capacity, etc. Include any linkages/coordination with other agencies.

Hire-Ability program hours are Monday to Friday (9:00 am – 5:00 pm); however, on-the-job hours may vary, depending on the job site's needs.

*Employment:*

Janitorial Services employment program provides on-the-job training and supervision to employees within this program. RAMS Management also coordinates coverage for vacancies or absences. Employees are provided with a robust and comprehensive job retention support system with close coordination of supervision and support between the RAMS Janitorial Manager, Administrative Coordinator, Associate Director, and BHS site managers. All employees receive an initial orientation by RAMS human resources department upon hire. The employee is then oriented to their individual position through on-site supervision and time limited job coaching for employees receiving employment services. Employees participate in regular, interactive individual and group supervision meetings. In addition, there are regular quarterly trainings in various areas such as health and safety, ergonomics, blood borne pathogen, and other pertinent trainings such as communication and professionalism, boundaries, and other pertinent work related trainings as well as RAMS sponsored health and wellness retreats. Site specific trainings usually take place on a monthly basis or as needed. Employees may also access and/or be linked to the Employee Assistance Program (EAP) to assist with a variety of life building resources. In addition, starting in 2015, RAMS secured funding (from another source) to operate a peer workforce support services program which offers 24/7 telephone and online support as well as group and individual support (e.g. monthly drop-in groups, WRAP groups); the services are targeted towards peers and family members with an emphasis on issues relating to work.

To gather information and feedback on janitorial services, RAMS continuously engages CBHS site managers in various methods such as in-person meetings and telephone calls, at least quarterly. The Hire-Ability Janitorial Services fosters a work environment that promotes healthy behaviors, a sense of hope and belonging, responsibility and strengthens roles of consumers through employment and professional development activities.

*Internship:*

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The Janitorial Services internship program design includes providing culturally competent, consumer-driven, strengths-based workforce development activities and vocational services including but not limited to; vocational assessments, job skills training, on-site work experience, vocational counseling, and job coaching. The program improves, maintains, or restores personal independence and functioning, consistent with requirements for learning and development, which provides services to a distinct group of beneficiaries.

The internship duration is six to nine months with each intern receiving 10-20 hours per week of paid, on-the-job training with work hours varying, depending on the individual's availability & support needs. Internship components include general office cleaning; floor & carpet care; and restroom cleaning. Each intern is assigned a Vocational Rehabilitation Case Manager, and a Peer Job Coach as needed; and works with a Janitorial Trainer for orientation to the tasks. The Vocational Rehabilitation Case Manager conducts vocational assessments, facilitates vocational orientation & exploration, performs vocational counseling (case management & linkages), supports and identifies strengths & areas of employment interest, and provides job counseling & guidance. The Peer Job Coach and Janitorial Trainer provide job training and coaching, coordinate training and support needs with the Vocational Case Manager and BHS site manager, and provide feedback and vocational support to the intern.

At the start of services and at regular intervals, a vocational assessment is completed with each intern. The vocational assessment is a comprehensive process that systematically utilizes an interview to assist the intern in the identification of goals leading towards vocational development. These areas, as they relate to employment, include: work needs (e.g. reasonable accommodations), identifying community supports (therapists/case managers, support groups, family & friends), cultural and/or language issues, work-related issues (concentration, stress, retention of instruction, safety habits, work behavior), psychiatric functioning (behavioral health condition), appearance & grooming, and external factors (financial concerns, living arrangement, medical care). A written report is developed summarizing the assessment, findings & recommendations, which informs the vocational plan and structure for job skills training.

During the vocational services planning, the Vocational Rehabilitation Case Manager and intern discuss how strengths can be utilized to make changes on their current conditions, to promote & sustain healthy mental health, and obtain and retain employment. The Vocational Rehabilitation Case Manager also gathers relevant information from the intern and other service providers and/or family members, as it relates to employment. An integrated vocational plan for goals is formally developed within the first month of participation and on a quarterly basis thereafter, with ongoing monitoring of progress at each meeting/vocational activity, and formally reviewed at the third month. The assessment/evaluation and plan development includes the intern's input through self-evaluation sections as well as the Vocational Rehabilitation Case Manager's appraisal and feedback from the Peer Job Coach and BHS site manager. RAMS engages BHS site managers in various methods including in-person meetings and telephone calls, at least quarterly. The comprehensive vocational plan also considers the intern's environment and entire support structure as well as specific employment goals, and takes into account collateral information (e.g. behavioral health treatment plan incorporates vocational goals). Staff are also trained to identify signs of psychiatric relapse and, through collaboration with the intern's therapist, implements the

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appropriate interventions. Together, the Vocational Rehabilitation Case Manager and intern set goals and identify strategies that are attainable & measureable. RAMS also facilitates linkages for support services (e.g. transportation, child care).

Vocational training and skills building is provided through various capacities. The Janitorial Trainer serves as the primary trainer. The Peer Job Coach provides additional assistance as needed and in coordination with the Vocational Rehabilitation Case Manager maintains written evaluations and progress reports on interns' skills and vocational goals. These include, but are not limited to, productivity, work quality, attendance, punctuality, dress & grooming, communication with others, and work endurance. As the primary trainer, the Peer Job Coach is thoroughly familiar with the intern's daily progress and can provide consistent feedback and support. The Vocational Rehabilitation Case Manager observes the intern at the internship site weekly and obtains feedback from the Peer Job Coach and BHS site manager so as to provide consistent feedback and support to the intern.

RAMS is committed to client involvement and community input in all elements of program operations, including planning, implementation, and evaluation. This process ensures quality programming, increases effectiveness, and ensures cultural competency. The best informant for the culturally relevant curriculum and program development is the target population, themselves. Throughout the internship period, the Vocational Rehabilitation Case Manager meets individually with the intern to discuss progress and solicit feedback regarding their experience, and at the end of the internship period interns are given anonymous written satisfaction surveys regarding the intake & admission process, internship structure & activities, support services, and professional development. A focus group is also conducted to solicit similar feedback regarding the structure of the program, recruitment process, accessibility, and effectiveness. All feedback is compiled and reviewed (by Hire-Ability management and RAMS executive management), informs the program design (development & adjustments, implementation), and is incorporated, as appropriate.

RAMS recruits and employs staff with relevant educational & employment history and cultural competence for the target population we work with through thorough interviews and reference checks. The process of on-going education and training to ensure staff are providing the standard of services required by RAMS are generally through regular attendance of staff meetings, individual supervisor-supervisee meetings, monthly internal/external trainings, annual cultural competency trainings, and other activities that are program specific. RAMS maintains a philosophy as well as a policy regarding creating a welcoming environment to all, which in turn is displayed through positive and healthy attitudes among staff. Measurement of how effective staff is in providing a high level of service is through client satisfaction surveys, client advisory councils, and feedback from other providers.

RAMS continuously engages with various systems to increase the program trainees' knowledge and networking possibilities regarding jobs/internships, further educational opportunities, etc. Such systems that Hire-Ability specifically works with includes, but is not limited to: BHS and BHS clinics (as these are the primary internship host sites); engaging in the Golden Gate Merchants Association; Job Developers Huddle – One Stop Western Addition; Potrero /Dogpatch Merchants Association and ongoing relationship/collaboration with California State Department of Rehabilitation (for which Hire-Ability maintains a separate contract); and involvement in the BHS Co-Operative group (streamlined referral system amongst RAMS Hire-

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Ability, Caminar, State Department of Rehabilitation, Citywide Forensic Collaborative). Furthermore, the Vocational Rehabilitation Case Manager provides support and coaching into the workforce and connects participants to additional resources (e.g. Department of Rehabilitation, RAMS Hire-Ability Employment Services, educational/training resources, housing).

- D. Discharge Planning and exit criteria and process, i.e., a step-down to less intensive treatment programs, the criteria of a successful program completion, aftercare, transition to another provider, etc.

**Employment:**

For consumers who are employees within this program, employment is at-will and on-going based on employee performance. If an employee resigns or is terminated for any reason, RAMS will take every effort, if applicable, to engage in a process of linkage to Employee Assistance or other helpful resources to ensure the employee is able transition appropriately from their position at RAMS.

**Internship:**

Janitorial Services interns successfully complete the program when: (1) 85% attendance rate, and (2) Vocational Development Plan goals are achieved. Upon discharge, interns will have more competitive skills for today's job market, and referral can be to competitive employment, volunteer internships, additional training, education, college enrollment, or salaried employment. In this pursuit, the Vocational Rehabilitation Case Manager may assist with linkage assistance to job placement programs, employment counseling and guidance, and coordination with other support services to ensure effective transition, as part of post internship case management support. As Hire-Ability offers a full spectrum of vocational services, interns may transition into the Employment Services Program, which is funded through a contract/agreement with the California State Department of Rehabilitation. This program provides a higher level of individualized job preparation using classroom and individual meetings, job development, individualized plans & job placement, and follow-along services to consumers. Hire-Ability also maintains a cooperative agreement with California Department of Rehabilitation (since 1998) to connect employers with trained individuals; thus, supporting job placements for program participants with employment.

- E. Program staffing (which staff will be involved in what aspects of the service development and delivery). Indicate if any staff position is not funded by DPH.

See CBHS Appendix B.

- F. For Indirect Services: Describe how your program will deliver the purchased services.

No indirect services are provided.

**7. Objectives and Measurements:**

- A. Standardized Objectives



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All applicable objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS Performance Objectives FY 15-16.

**B. Individualized Objectives**

**Employment:**

- By the end of the fiscal year, 80% of survey responses from janitorial sites will express satisfaction rating of "3" or above with services, as evidenced by program satisfaction survey which are analyzed by the associate director and reviewed by the program director. Summary of results are shared with RAMS executive leadership and available to stakeholders upon request.
- By the end of the fiscal year, 100% of janitorial employees will be provided with a staff satisfaction survey, as evidenced by distribution memos and announcements.
- By the end of the fiscal year, 60% of janitorial employees will participate in at least one wellness training (topics such as community resources, stress management/coping, problem solving). This will be evidenced by training attendance records.
- By the end of the fiscal year, 100% of applicable janitorial employees will have an annual performance evaluation which measures the employee's competence and skills as well as capacity to problem solve and take responsibility and accountability for their own performance. This is evidenced by the annual performance evaluation, which includes the employee and supervisor/program director's ratings.

**Internship:**

- By the end of the fiscal year, 65% of program participants eligible to complete the internship cycle within the fiscal year will successfully complete the training or have exited the program early due to obtaining employment, transferring to another training/internship program to further increase readiness for employment, or enrolling in education to continue professional development. Inclusion criteria are only participants having received services for at least three months; the statuses of those who exit the program prior to three months are accounted separately. This will be evidenced by program case closure records and reasons for discharge; the Vocational Rehabilitation Case Manager's termination documents are reviewed and approved by the Associate Director.
- By the end of the fiscal year, 75% of intern graduates will have reported an increased ability to manage symptoms in the workplace, as evidenced by focus group feedback and post-program survey responses.

**8. Continuous Quality Improvement:**

**A. Achievement of contract performance objectives and productivity.**

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All direct service providers are informed about objectives and the required documentation

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related to the activities and service outcomes. With regards to management monitoring, the Program Director reports progress/status towards each contract objective in the monthly report to executive management (including Deputy Chief/Director of Clinical Services and Chief Executive Officer). If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action. The data reported in the monthly report is on-goingly collected, with its methodology depending on the type of information. The program director and associate director work directly with human resources to address employee performance needs as well as work collaboratively with BHS operations team to coordinate work flow and operational duties related to our janitorial services employees. Hire-Ability management team and BHS operations teams meet monthly.

In addition, the Program Director monitors vocational service progress (engagement after intake, level of accomplishing vocational goals/objectives), service discharge reasons, and service utilization review. RAMS also conducts various random chart reviews to review adherence to objectives as well as treatment documentation requirements.

**B. Quality of documentation, including a description of the frequency and scope of internal chart audits.**

The program director and other members of the Hire-Ability management team meet regular with staff for supervision meetings. Documentation of meetings, trainings, performance evaluations is noted and, as appropriate, may be filed directly in the employees personnel file with human resources. Feedback through surveys from service sites are also analyzed and evaluated and reported to RAMS executive leadership. Information from the outcomes is used for program improvement purposes.

RAMS utilizes various mechanisms to review documentation quality. Chart reviews are conducted by supervisors; based on their review, determinations/recommendations are provided relating to frequency and modality/type of services, and the match to client's progress & vocational/clinical needs. Feedback is provided to direct staff members. Furthermore, supervisors monitor the service documentation of their supervisees; staff meets weekly with their supervisors to review caseload with regard to service strategies, vocational plans & progress, documentation, productivity, etc. Within the first 30 days of admission and after every re-assessment period thereafter, the client's chart is reviewed by the Vocational Case Manager or Associate Director / Program Director, to monitor quality & timeliness. Feedback is provided directly to staff as well as general summaries at staff meetings.

In addition to the program's documentation review, the RAMS Quality Council formally conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy Chief/Director of Clinical Services, and another council member (or designee). Feedback is provided directly to staff as well as general summaries at staff meetings.

**C. Cultural competency of staff and services.**

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills

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that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by individual supervision (mostly weekly); supervisors and their supervisees' caseload with regard to service strategies, vocational plans & progress, documentation, etc. Furthermore, RAMS annually holds an agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.
- Ongoing review of vocational services indicators is conducted by the Program Director (and reported to executive management) on monthly basis; data collection and analysis of service engagement (referral source; engagement after intake; number of admissions; service discharge reasons; and service utilization review)
- Client's preferred language for services is noted at intake; during the case assignment process, the Program Director matches client with counselor by taking into consideration language, culture, and provider expertise. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- At least annually, aggregated demographic data of clientele and staff/providers is collected and analyzed by management in order to continuously monitor and identify any enhancements needed
- Development of annual objectives based on cultural competency principles; as applicable, progress on objectives are reported by Program Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action.
- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D, Satisfaction with services);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Program Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit

<b>Contractor Name:</b> Richmond Area Mufft-Services, Inc.	<b>Appendix A-1</b>
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interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.

- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters

**D. Satisfaction with services.**

*Employment:*

RAMS disseminates an annual employee satisfaction survey. RAMS further solicits feedback from other stakeholders including contracted service sites, business customers, and funders through satisfaction surveys as well as face to face meetings. Results of the survey are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. All satisfaction survey methods and feedback results are compiled and reported to executive management along with assessment of suggestion implementation.

*Internship:*

For the Janitorial Service internship program, RAMS adheres to the BHS satisfaction survey protocols which may include dissemination annually or biannually. In addition, Hire-Ability administers its program-developed client satisfaction surveys at case closure or upon request of the client. Furthermore, client feedback is obtained during post-program evaluations, client focus groups, client advisory council meetings, community meetings open to all clients at the vocational services program, individual meetings between direct service staff and clients, and through a confidential telephone hotline. Results of the survey methods are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. All satisfaction survey methods and feedback results are also compiled and reported to executive management along with assessment of suggestion implementation.

- E. Timely completion and use of outcome data, including CANS and/or ANSA data or CalOMS.

Not Applicable.

**9. Required Language:**

Not Applicable.

<b>Contractor Name:</b> Richmond Area Multi-Services, Inc.	<b>Appendix A-2</b>
<b>Program Name:</b> Hire-Ability Clerical & Mailroom Services	<b>Contract Term:</b> 01/01/16 – 06/30/16

**1. Identifiers:**

Program Name: Hire-Ability Clerical & Mailroom Services  
 Program Address: 1234 Indiana Street  
 City, State, ZIP: San Francisco, CA 94107  
 Telephone/FAX: (415) 282-9675 (415) 920-6877  
 Website Address: www.ramsinc.org / www.hire-ability.org  
 Contractor Address (if different from above): RAMS Administration, 639 14<sup>th</sup> Avenue  
 City, State, ZIP: San Francisco, CA 94118

Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
 Telephone: (415) 800-0699  
 Email Address: angelatang@ramsinc.org

Program Code(s) (if applicable): Not Applicable

**2. Nature of Document:**

New     Renewal     Modification

**3. Goal Statement:**

Hire-Ability Clerical & Mailroom Services (formerly known as Clerical & Mailroom Services) provides employment and internship opportunities in the areas of business operations support such as clerical, mailroom, reception, messenger and driving positions for those with personal experience with the community behavioral health system. Work sites include various BHS clinics and programs.

Program outcomes (long-term) are adults with improved emotional/physical well-being and quality of life, positive community engagement, increased self-sufficiency, and obtain & retain employment. Short-term outcomes are adults with increased work skills & knowledge in general program support (administrative/ operations assistance, mailroom & distribution services, reception, driver) and retaining obtaining employment.

**4. Target Population:**

The target populations are San Francisco residents including transitional age youth, adults & older adults, aged 18 and over, who are currently receiving behavioral health services through BHS. Particular outreach will be made to underserved populations and those interested in an administrative field.

**5. Modality(s)/Intervention(s):**

See BHS Appendix B, CRDC pages.

**6. Methodology:**

A. Outreach, recruitment, promotion, and advertisement as necessary.

RAMS' responsibility and commitment to mental health care quality and education extends beyond its own walls to reach people of all ages and backgrounds in its community through outreach and serving them in their own environments. This philosophy of care has always

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been central to the agency's approach. RAMS is uniquely well-positioned and has the expertise to outreach, engage, and retain diverse consumers, underrepresented constituents, and community organizations with regards to vocational services & resources and raising awareness about mental health and physical well-being. As an established community services provider, RAMS comes into contact with significant numbers of consumers & families, annually serving well over 19,000 adults, children, youth & families at over 90 sites, citywide.

Specifically for Hire-Ability Clerical & Mailroom Services, the program promotes open positions within the system of care by outreach and recruitment activities through linkages with BHS community agencies, Department of Rehabilitation (DOR), Co-Operative partners within the BHS Vocational Services system, and to other employment linkages that directly outreach to consumers within BHS. Targeted recruitment for employment also includes participants who have completed the Clerical & Mailroom Services internship in clerical/administrative support positions. Graduates of this program and applicants that meet qualifications for positions (DOR, Co-Op partners) are provided opportunities and assistance to apply and interview for open positions.

**B. Admission, enrollment and/or intake criteria and process where applicable.**

*Employment:*

The employment portion of Hire-Ability Clerical & Mailroom Services works in conjunction with the Clerical & Mailroom Services internship program, and referrals for employment opportunities are through RAMS Employment Services Program, Department of Rehabilitation and our Co-Operative contract partners. Positions are competitive in nature and follows RAMS protocol for internal job announcements, recruitment, and hiring.

*Internship:*

The internship portion of Hire-Ability Clerical & Mailroom Services accommodates referrals from BHS and other community agencies within the System of Care. All requests for services are directed to the Intake Coordinator, who then provides the individual with the necessary information to apply to the program. The program has an application process by which interested individuals are to submit their completed application packet within the indicated deadline. Application packets include basic demographic information (name, contact information), reference contact information, referral form, and resume. Individuals who qualify under the initial screening (a coordinated effort of review by staff including the Vocational Rehabilitation Services Coordinator, Associate Director of Vocational Services, and internship site manager) are invited for a face-to-face interview with the Vocational Rehabilitation Services Coordinator and Associate Director of Vocational Services. These initial assessments are aimed to determine program eligibility, vocational readiness/interest, suitability of program services, strengths & existing resources, level of functioning & needs in consultation with behavioral health services provider, primary care connection, substance use/abuse, and other services (e.g. residential). A secondary assessment interview is held with the internship site to determine appropriate match for the site needs. If an individual is not accepted into the program based on suitability for these program services, the Vocational Rehabilitation Services Coordinator makes a referral to one of Hire-Ability Programs or to another service provider.

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- C. Service delivery model, including treatment modalities, phases of treatment, hours of operation, length of stay, locations of service delivery, frequency and duration of service, strategies for service delivery, wrap-around services, residential bed capacity, etc. Include any linkages/coordination with other agencies.

Hire-Ability program hours are Monday to Friday (9:00 am – 5:00 pm); however, on-the-job hours may vary, depending the job site's needs.

*Employment:*

Clerical & Mailroom Services employment program provides on-site training and supervision to employees within this program. RAMS management also coordinates coverage for vacancies or absences. Employees are provided with a robust and comprehensive job retention support system with close coordination of supervision and support between the RAMS Vocational Rehabilitation Coordinator, Associate Director, and with BHS site managers. All employees receive an initial orientation by RAMS human resources department upon hire. The employee is then oriented to their individual position through on-site supervision and time limited job coaching for employees receiving employment services. Regular group and individual supervision meetings are an integral part of the Clerical & Mailroom Services program, continuous engagement as well as professional development activities are provided in a structured manner. Monthly staff meetings as well as quarterly trainings address critical areas needed for successful and meaningful employment which can include topics such as professional communication and boundaries, ergonomics at the work place, handling stress on the job and work life balance, as well as RAMS sponsored health and wellness retreats. Employees may also access and/or be linked to the Employee Assistance Program (EAP) to assist with a variety of life building resources. In addition, starting in 2015, RAMS secured funding (from another source) to operate a peer workforce support services program which offers 24/7 telephone and online support as well as group and individual support (e.g. monthly drop-in groups, WRAP groups); the services are targeted towards peers and family members with an emphasis on issues relating to work.

To gather information and feedback on Clerical & Mailroom Services, RAMS continuously engages BHS site managers in various methods such as in-person meetings and telephone calls, at least quarterly. The Hire-Ability Clerical & Mailroom Services fosters a work environment that promotes healthy behaviors, a sense of hope and belonging, responsibility and strengthens roles of consumers through employment and professional development activities.

*Internship:*

Clerical & Mailroom Services internship program design includes providing culturally competent, consumer-driven, strengths-based workforce development activities and vocational services including but not limited to: vocational assessments, job skills training, on-site work experience, vocational counseling, and job coaching. The program improves, maintains, or restores personal independence and functioning, consistent with requirements for learning and development, which provides services to a distinct group of beneficiaries.

The internship duration is six to nine months with each intern receiving 10-20 hours per week of paid, on-the-job training with work hours varying, depending on the individual's availability and support needs. Internship components include general office support; customer

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service; mailroom & distribution; reception functions (answering phones, greeting and assisting visitors); filing, copying/faxing; and light data entry (depending on internship site). Each intern is assigned a Vocational Rehabilitation Case Manager, and a Peer Job Coach as needed. The Vocational Rehabilitation Case Manager conducts vocational assessments, facilitates vocational orientation & exploration, performs vocational counseling (case management & linkages), supports and identifies strengths & areas of employment interest, and provides job counseling & guidance. The Peer Job Coach provides job training and coaching, coordinates training and support needs with the Vocational Case Manager and BHS site manager, and provides feedback and vocational support to the intern.

At the start of services and at regular intervals, a vocational assessment is completed with each intern. The vocational assessment is a comprehensive process that systematically utilizes an interview to assist the intern in the identification of goals leading towards vocational development. These areas, as they relate to employment, include: work needs (e.g. reasonable accommodations), identifying community supports (therapists/case managers, support groups, family & friends), cultural and/or language issues, work-related issues (concentration, stress, retention of instruction, safety habits, work behavior), psychiatric functioning (behavioral health condition), appearance & grooming, and external factors (financial concerns, living arrangement, medical care). A written report is developed summarizing the assessment, findings & recommendations, which informs the vocational plan and structure for job skills training.

During the vocational services planning, the Vocational Rehabilitation Case Manager and intern discuss how strengths can be utilized to make changes on their current conditions, to promote & sustain healthy mental health, and obtain and retain employment. The Vocational Rehabilitation Case Manager also gathers relevant information from the intern and other service providers and/or family members, as it relates to employment. An integrated vocational plan for goals is formally developed within the first month of participation and on a quarterly basis thereafter, with ongoing monitoring of progress at each meeting/vocational activity, and formally reviewed at the third month. The assessment/evaluation and plan development includes the intern's input through self-evaluation sections as well as the Vocational Rehabilitation Case Manager's appraisal and feedback from the Peer Job Coach and BHS site manager. RAMS engages BHS site managers in various methods including in-person meetings and telephone calls, at least quarterly. The comprehensive vocational plan also considers the intern's environment and entire support structure as well as specific employment goals, and takes into account collateral information (e.g. behavioral health treatment plan incorporates vocational goals). Staff are also trained to identify signs of psychiatric relapse and, through collaboration with the intern's therapist, implements the appropriate interventions. Together, the Vocational Rehabilitation Case Manager and intern set goals and identify strategies that are attainable & measurable. RAMS also facilitates linkages for support services (e.g. transportation, child care).

Vocational training and skills building is provided through various capacities. The Peer Job Coach serves as the primary trainer and in coordination with the Vocational Rehabilitation Case Manager maintains written evaluations and progress reports on interns' skills and vocational goals. These include, but are not limited to, productivity, work quality, attendance, punctuality, dress & grooming, communication with others, and work endurance. As the primary trainer, the Peer Job Coach is thoroughly familiar with the intern's daily progress and



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can provide consistent feedback and support. The Vocational Rehabilitation Case Manager observes the intern at the internship site weekly and obtains feedback from the Peer Job Coach and BHS site manager so as to provide consistent feedback and support to the intern.

RAMS is committed to client involvement and community input in all elements of program operations, including planning, implementation, and evaluation. This process ensures quality programming, increases effectiveness, and ensures cultural competency. The best informant for the culturally relevant curriculum and program development is the target population, themselves. Throughout the internship period, the Vocational Rehabilitation Case Manager meets individually with the intern to discuss progress and solicit feedback regarding their experience, and at the end of the internship period interns are given anonymous written satisfaction surveys regarding the intake & admission process, internship structure & activities, support services, and professional development. A focus group is also conducted to solicit similar feedback regarding the structure of the program, recruitment process, accessibility, and effectiveness. All feedback is compiled and reviewed (by Hire-Ability management and RAMS executive management), informs the program design (development & adjustments, implementation), and is incorporated, as appropriate.

RAMS recruits and employs staff with relevant educational & employment history and cultural competence for the target population we work with through thorough interviews and reference checks. The process of on-going education and training to ensure staff are providing the standard of services required by RAMS are generally through regular attendance of staff meetings, individual supervisor-supervisee meetings, monthly internal/external trainings, annual cultural competency trainings, and other activities that are program specific. RAMS maintains a philosophy as well as a policy regarding creating a welcoming environment to all, which in turn is displayed through positive and healthy attitudes among staff. Measurement of how effective staff is in providing a high level of service is through client satisfaction surveys, client advisory councils, and feedback from other providers.

RAMS continuously engages with various systems to increase the program trainees' knowledge and networking possibilities regarding jobs/internships, further educational opportunities, etc. Such systems that Hire-Ability specifically works with includes, but is not limited to: BHS and BHS clinics (as these are the primary internship host sites); engaging in the Golden Gate Merchants Association; Job Developers Huddle – One Stop Western Addition; Potrero/Dogpatch Merchants Association and ongoing relationship/collaboration with California State Department of Rehabilitation (for which Hire-Ability maintains a separate contract); and involvement in the BHS Co-Operative group (streamlined referral system amongst RAMS Hire-Ability, Caminar, State Department of Rehabilitation, Citywide Forensic Collaborative). Furthermore, the Vocational Rehabilitation Case Manager provides support and coaching into the workforce and connects participants to additional resources (e.g. Department of Rehabilitation, RAMS Hire-Ability Employment Services, educational/training resources, housing).

- D. Discharge Planning and exit criteria and process, i.e., a step-down to less intensive treatment programs, the criteria of a successful program completion, aftercare, transition to another provider, etc.

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As the Clerical & Mailroom Services employment program operates to train, support, and retain employment for consumer-filled positions in Clerical & Mailroom Services, there is not any exit criteria. If an employee resigns or is terminated for any reason, RAMS will take every effort, if applicable, to engage in a process of linkage to Employee Assistance or other helpful resources to ensure the employee is able transition appropriately from their position at RAMS.

Clerical & Mailroom Services interns successfully complete the program when: (1) 85% attendance rate, and (2) Vocational Development Plan goals are achieved. Upon discharge, interns will have more competitive skills for today's job market, and referral can be to competitive employment, volunteer internships, additional training, education, college enrollment, or salaried employment. In this pursuit, the Vocational Rehabilitation Case Manager may assist with linkage assistance to job placement programs, employment counseling and guidance, and coordination with other support services to ensure effective transition, as part of post internship case management support. As Hire-Ability offers a full spectrum of vocational services, interns may transition into the Employment Services Program, which is funded through a contract/agreement with the California State Department of Rehabilitation. This program provides a higher level of individualized job preparation using classroom and individual meetings; job development, individualized plans & job placement, and follow-along services to consumers. Hire-Ability also maintains a cooperative agreement with California Department of Rehabilitation (since 1998) to connect employers with trained individuals; thus, supporting job placements for program participants with employment. Interns may also enter other vocational trainings available through the system of care.

- E. Program staffing (which staff will be involved in what aspects of the service development and delivery). Indicate if any staff position is not funded by DPH:

See CBHS Appendix B.

- F. For Indirect Services: Describe how your program will deliver the purchased services.

No indirect services are provided.

**7. Objectives and Measurements:**

**A. Standardized Objectives**

All objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS AOA Performance Objectives FY 15-16.

**B. Individualized Objectives**

Employment:

- By the end of the fiscal year, 80% of survey responses from Clerical & Mailroom Services sites will express satisfaction rating of "3" or above with services, as evidenced by program satisfaction survey which are analyzed by the Associate Director and reviewed by the Program Director. Summary of results are shared with RAMS executive leadership and available to stakeholders upon request.

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- By the end of the fiscal year, 100% of Clerical & Mailroom Services employees will be provided with a staff satisfaction survey, as evidenced by distribution memos and announcements.
- By the end of the fiscal year, 60% of Clerical & Mailroom Services employees will have participated in at least one wellness training (topic such as community resources, stress management/coping, problem solving). This will be evidenced by training attendance records.
- By the end of the fiscal year, 100% of applicable Clerical & Mailroom Services employees will have an annual performance evaluation which measures the employee's competence and skills as well as capacity to problem solve and take responsibility and accountability for their own performance. This is evidenced by the annual performance evaluation, which includes the employee and supervisor/program director's ratings.

*Internship:*

- By the end of the fiscal year, 65% of program participants eligible to complete the internship cycle within the fiscal year will successfully complete the training or have exited the program early due to obtaining employment, transferring to another training/internship program to further increase readiness for employment, or enrolling in education to continue professional development. Inclusion criteria are only participants having received services for at least three months; the statuses of those who exit the program prior to three months are accounted separately. This will be evidenced by program case closure records and reasons for discharge; the Vocational Rehabilitation Case Manager's termination documents are reviewed and approved by the Associate Director.
- By the end of the fiscal year, 75% of intern graduates will have reported an increased ability to manage symptoms in the workplace, as evidenced by focus group feedback and post-program survey responses.

**8. Continuous Quality Improvement:**

- A. Achievement of contract performance objectives and productivity.

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All direct service providers are informed about objectives and the required documentation related to the activities and service outcomes. With regards to management monitoring, the Program Director reports progress/status towards each contract objective in the monthly report to executive management (including Deputy Chief/Director of Clinical Services and Chief Executive Officer). If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action. The data reported in the monthly report is on-goingly collected, with its methodology depending on the type of information. The Program Director and Associate Director work directly with human resources to address employee performance needs as well as work collaboratively with BHS operations team to coordinate work flow and operational duties related to our Clerical & Mailroom Services employees. Hire-Ability management team and BHS operations teams meet monthly.

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In addition, the Program Director monitors vocational service progress (engagement after intake, level of accomplishing vocational goals/objectives), service discharge reasons, and service utilization review. RAMS also conducts various random chart reviews to review adherence to objectives as well as treatment documentation requirements.

**B. Quality of documentation, including a description of the frequency and scope of internal chart audits.**

The Program Director and other members of the Hire-Ability management team meet regular with staff for supervision meetings. Documentation of meetings, trainings, performance evaluations is noted and, as appropriate, may be filed directly in the employees personnel file with human resources. Feedback through surveys from service sites are also analyzed and evaluated and reported to RAMS executive leadership. Information from the outcomes is used for program improvement purposes.

RAMS utilizes various mechanisms to review documentation quality. Chart reviews are conducted by supervisors; based on their review, determinations/recommendations are provided relating to frequency and modality/type of services, and the match to client's progress & vocational/clinical needs. Feedback is provided to direct staff members. Furthermore, supervisors monitor the service documentation of their supervisees; staff meets weekly with their supervisors to review caseload with regard to service strategies, vocational plans & progress, documentation, productivity, etc. Within the first 30 days of admission and after every re-assessment period thereafter, the client's chart is reviewed by the Vocational Case Manager or Associate Director/Program Director, to monitor quality & timeliness. Feedback is provided directly to staff as well as general summaries at staff meetings.

In addition to the program's documentation review, the RAMS Quality Council formally conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy Chief/Director of Clinical Services, and another council member (or designee). Feedback is provided directly to staff as well as general summaries at staff meetings.

**C. Cultural competency of staff and services.**

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by

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individual supervision (mostly weekly); supervisors and their supervisees' caseload with regard to service strategies, vocational plans & progress, documentation, etc. Furthermore, RAMS annually holds an agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.

- Ongoing review of vocational services indicators is conducted by the Program Director (and reported to executive management) on monthly basis; data collection and analysis of service engagement (referral source; engagement after intake; number of admissions; service discharge reasons; and service utilization review)
- Client's preferred language for services is noted at intake; during the case assignment process, the Program Director matches client with counselor by taking into consideration language, culture, and provider expertise. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- At least annually, aggregated demographic data of clientele and staff/providers is collected and analyzed by management in order to continuously monitor and identify any enhancements needed
- Development of annual objectives based on cultural competency principles; as applicable, progress towards objectives are reported by Program Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action.
- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Satisfaction with services);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Program Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.
- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters.

D. Satisfaction with services.

Employment:

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RAMS disseminates an annual employee satisfaction survey. RAMS further solicits feedback from other stakeholders including contracted service sites, business customers, and funders through satisfaction surveys as well as face to face meetings. Results of the survey are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. All satisfaction survey methods and feedback results are compiled and reported to executive management along with assessment of suggestion implementation.

*Internship:*

For the Staffing Service internship program, RAMS adheres to the BHS satisfaction survey protocols which may include dissemination annually or biannually. In addition, Hire-Ability administers its program-developed client satisfaction surveys at case closure or upon request of the client. Furthermore, client feedback is obtained during post-program evaluations, client focus groups, client advisory council meetings, community meetings open to all clients at the vocational services program, individual meetings between direct service staff and clients, and through a confidential telephone hotline. Results of the survey methods are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. All satisfaction survey methods and feedback results are also compiled and reported to executive management along with assessment of suggestion implementation.

- E. Timely completion and use of outcome data, including CANS and/or ANSA data or CalOMS.

Not Applicable.

**9. Required Language:**

Not Applicable.

**1. Identifiers:**

Program Name: Peer-to-Peer Vocational Linkage  
Program Address: 639 14<sup>th</sup> Avenue (administrative address)  
City, State, Zip: San Francisco, CA 94121  
Telephone: (415) 689-5662 Fax: (415) 668-6388  
Website Address: www.ramsinc.org

Contractor Address: RAMS Administration, 639 14th Avenue  
City, State, Zip: San Francisco, CA 94118

Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
Telephone: (415) 800-0699  
Email Address: angelatang@ramsinc.org

Program Code: Not Applicable

**2. Nature of Document (check one)**

New       Renewal       Modification

**3. Goal Statement**

The goal of the RAMS Peer-to-Peer Vocational Linkage (formerly known as Empowerment Services) is to support SFDPH BHS clinicians by connecting their clients with community services by utilizing peer providers who have identified themselves as consumers or former consumers of behavioral health services. Supported by the Service Coordinators, who are identified as peer providers, clients learn valuable skills and information on how to navigate and access relevant services in the community in order to make progress in their individual recovery – including their vocational goals.

This program aims to accomplish this goal by making available Service Coordinators who work at designated BHS clinics/program providing support to clinicians and their clients on identifying community resources, and providing assistance on successfully accessing, utilizing and maximizing these resources.

**4. Target Population**

The target population for this program is the adult/older adult clients served by selected SFDPH Behavioral Health Services clinics.

**5. Modality(ies)/Interventions**

See BHS Appendix B, CRDC pages.

RAMS' Peer-to-Peer Vocational Linkage Program enhances treatment services by providing supportive case management and resource linkage to clients at contracted SF DPH behavioral health clinics. Services, delivered by Service Coordinators, aim to improve the level of engagement with clients, foster feelings of hope, and to promote the possibility of wellness and recovery.

During the fiscal year (7/1/2015 to 6/30/2016), RAMS will conduct the following activities:

- RAMS' Peer-to-Peer Vocational Linkage Program will provide at least 1,000 hours of non-clinical case management, service coordination, referral services and successful linkages to health and social services agencies
- At least 200 unduplicated individuals will receive services through the Peer-to-Peer Vocational Linkage Program

## 6. Methodology

### A. Outreach, recruitment, promotion, and advertisement as necessary.

RAMS' responsibility and commitment to mental health care quality and education extends beyond its own walls to reach people of all ages and backgrounds in its community through outreach and serving them in their own environments. This philosophy of care has always been central to the agency's approach. RAMS is uniquely well-positioned and has the expertise to outreach, engage, and retain diverse consumers, underrepresented constituents, and community organizations with regards to vocational services & resources and raising awareness about mental health and physical well-being. As an established community services provider, RAMS comes into contact with significant numbers of consumers & families, annually serving well over 18,000 adults, children, youth & families at over 80 sites, citywide.

Specifically for Peer-to-Peer Vocational Linkage, the program promotes open positions ("Service Coordinators") within the system of care by outreach and recruitment activities through linkages to workforce development programs (e.g. RAMS Peer Specialist Mental Health Certificate; City College of SF Mental Health Certificate).

Each Service Coordinator is assigned to a specific SFDPH BHS clinic; they work closely with BHS staff and attend staff meetings at their clinics to maintain visibility of the program.

### B. Admission, enrollment and/or intake criteria and process where applicable

Clients are referred by direct service providers at various BHS clinics, while indicating the service or assistance needed. The Service Coordinator then meets with the referred client to introduce Peer-to-Peer Vocational Linkage, discuss the details of the providers' referral, assess any additional service needs, and provide assistance to address needs; treatment plan of care may be adjusted, as appropriate.



- C. Service delivery model, including treatment modalities, phases of treatment, hours of operation, length of stay, locations of service delivery, frequency and duration of service, strategies for service delivery, wrap-around services, residential bed capacity, etc. Include any linkages/coordination with other agencies.

The Service Coordinator works with the client to support them in the access and utilization of available resources, including advocating for clients' needs in the provision of services and resources. Assistance and services may include but are not limited to:

- *Transportation and Mobility*
- *Affordable Housing*
- *Assistive Technology*
- *Language Interpretation*
- *Government Services and Programs*
- *Cultural Adjustment*
- *Immigration Services*
- *Food Assistance*
- *Women's Services*
- *Medical Assistance*
- *Mental Health Services*
- *Training and Education Programs*
- *Independent Living Skills*
- *Vocational Service*

The Service Coordinators focus on providing the clients with assistance in: acknowledging the available services; understanding the implications of the services; making an informed decision on selecting services; successfully navigating eligibility and accessing systems; maximizing utilization of resources; following up on service progress, remaining on track with recovery goals, and achieving individual and vocational goals.

Service Coordinators may work with the same client several times regarding different needs and issues; the frequency of service may also vary depending on the service needed and the resources available.

- D. Discharge Planning and exit criteria and process, i.e., a step-down to less intensive treatment programs, the criteria of a successful program completion, aftercare, transition to another provider, etc.

Clients may be discharged from this program when their initial, referral and/or other identified needs for service coordination have been met or if clients make the decision that their needs have changed and services are no longer desired or necessary.

- E. Program staffing (which staff will be involved in what aspects of the service development and delivery). Indicate if any staff position is not funded by DPH.

See BHS Appendix B.

## 7. Objectives and Measurements

### A. Standardized Objectives

All applicable objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS Performance Objectives FY15-16.

#### B. Individualized Program Objectives

- By the end of Fiscal Year 2015-16, the Peer-to-Peer Vocational Linkage Program will elicit feedback, on a quarterly basis, to evaluate the overall level of satisfaction from clinics. The Division's Director/Manager will conduct at least quarterly site visits to meet with Service Coordinator and Site Supervisors to receive updates regarding Peer-to-Peer Vocational Linkage Staff, assess whether Service Coordinators are meeting the needs of the clinic, and address any concerns with the program. Should there be significant findings as a result of these meetings, a plan of action will be developed and implemented to address any program concerns.
- By the end of Fiscal Year 2015-16, 75% of site/clinic/program satisfaction survey responses will express satisfaction with services. This will be evidenced by program satisfaction surveys.
- By the end of Fiscal Year 2015-16, the Peer-to-Peer Vocational Linkage Program will administer the written client satisfaction survey to evaluate quality of the program. The Division management will compile, review, and analyze results from the satisfaction survey. This will be documented by client satisfaction survey results, which will also be presented to the staff. Plans of action will be developed and implemented to address programmatic concerns.
- By the end of Fiscal Year 2015-16, 75% of the clients receiving Peer-to-Peer Vocational Linkage will express overall satisfaction with services that they received. This will be evidenced by client satisfaction surveys.
- By the end of Fiscal Year 2015-16, 80% of client satisfaction survey responses will indicate an increased knowledge about the community, health and cultural resources available to them. This will be evidenced by client satisfaction surveys.
- By the end of Fiscal Year 2015-16, 75% of clients receiving Peer-to-Peer Vocational Linkage will report increased ability to manage symptoms and/or achieve desired quality-of-life goals as set by program participants. This will be evidenced by documentation/reports that summarize the service plan outcomes.

#### 8. Continuous Quality Improvement

##### a. Achievement of contract performance objectives and productivity:

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All direct service providers are informed about objectives and the required documentation related to the activities and service outcomes. The Division's Director/Manager monitors service progress by collecting

information during weekly group supervision meetings, data submission by Service Coordinators, chart reviews, and agency site visits. Furthermore, each Service Coordinator receives regular individual supervision from an on-site supervisor at their assigned clinic. On-site supervisors meet with staff weekly or on an as-needed basis to review caseload with regard to service strategies, service plans & progress, productivity, etc. On a quarterly basis, the Division's Director/Manager conducts a joint supervision with on-site supervisor to discuss each Service Coordinator's overall performance and their progress in meeting contract objectives. Should there be concerns regarding Service Coordinator(s)' ability to fulfill contract requirements based on information gathered from the various sources mentioned above, the Division's Director/Manager will work directly with Service Coordinator(s) and on-site supervisor to develop a plan of action to address concerns.

With regards to management monitoring, the Division Director meets with executive management (including Deputy Chief/Director of Clinical Services and Chief Executive Officer) each month to report progress/status towards each contract objective.

b. Quality of documentation, including frequency and scope of internal chart audits.

RAMS utilizes various mechanisms to review documentation quality. Chart reviews are conducted by Division Director/Manager on a quarterly basis; based on these reviews, determinations/recommendations are provided relating to frequency and modality/type of services, and the match to client's progress & clinical needs. Feedback is provided to direct staff members.

In addition to the program's documentation review, the RAMS Quality Council formally conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy Chief/Director of Clinical Services, and another council member (or designee). Feedback is provided directly to staff as well as general summaries at staff meetings.

c. Cultural competency of staff and services

RAMS philosophy of care reflects values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by weekly group supervision. Furthermore, RAMS annually holds an agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.

- Ongoing review of services indicators is conducted by the Division Director (and reported to executive management) on monthly basis
- Client's culture, preferred language for services, and provider's expertise are strongly considered during the case assignment process. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- Development of annual objectives based on cultural competency principles; as applicable, progress on objectives is reported by Division Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Division Director identifies barriers and develops a plan of action.
- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Client Satisfaction);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Division Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.
- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters

d. Satisfaction with services

The Peer-to-Peer Vocational Linkage Program conducts an annual client satisfaction surveys at each clinic-site to solicit program feedback. The Division management compiles, analyzes, and presents the results of surveys to staff, each program site-supervisor, RAMS Executive Management, and the RAMS Quality Council. The Division Director also collaborates with RAMS Executive Management, Quality Council, and clinics to develop and implement plans to address issues related to client satisfaction as appropriate.

e. Timely completion and use of outcome data, including CANS and/or ANSA data

ANSA data is not applicable for this specific contract; however, as described in previous CQI sections, RAMS continuously utilizes available data to inform service delivery to support positive outcomes. As staff are providing services to BHS clients, they work in collaboration with the primary counselors to support positive outcomes and achievement of treatment goals.

Contractor: Richmond Area Multiservices, Inc.  
Program Name: Hire-Ability Information Technology  
CMS#:7540

Appendix A-4  
Contract Term: 01/01/16 through 06/30/16

**1. Identifiers:**

Program Name: Hire-Ability Information Technology (i-Ability)  
Program Address: 1234 Indiana Street  
City, State, Zip Code: San Francisco, CA 94107  
Telephone/Fax: (415) 282-9675 / (415) 920-6877  
Website Address: www.ramsinc.org / www.hire-ability.org

Contractor Address (if different from above): RAMS Administration, 639 14<sup>th</sup> Avenue  
City, State, ZIP: San Francisco, CA 94118

Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
Telephone: (415) 800-0699  
Email Address: angelatang@ramsinc.org  
Program Code(s) (if applicable): Not Applicable

**2. Nature of Document (check one)**

New       Renewal       Modification

**3. Goal Statement**

The primary program goals of the Hire-Ability Information Technology (i-Ability) are to (1) provide high quality designated IT support services to BHS (Avatar Helpdesk; Desktop; Advanced Avatar Helpdesk) and (2) engage consumers for improved emotional/physical well-being and quality of life, positive engagement in the community, increase self-sufficiency, and obtain & retain competitive employment.

i-Ability is a program of the RAMS Hire-Ability Vocational Services which offers a full spectrum of vocational training and employment services.

**4. Target Population**

The target populations are San Francisco residents including transitional age youth, adults & older adults, aged 18 and over, currently receiving behavioral health services through BHS. Particular outreach is to consumers who have interest in computer technical support services but minimal work skills and/or work exposure, and may benefit from a structured vocational training program. There is a special focus on APIA communities (Chinese and Tagalog), both immigrants and US-born, a group that is traditionally underserved.

Training and services are primarily provided on-site at BHS (1380 Howard Street, SF, CA 94103) and/or RAMS Hire-Ability Vocational Services (94107).

## 5. Modality(ies)/Interventions

This fiscal year represents the continued operations of i-Ability components:

- (a) Avatar Helpdesk Project: Continued operation
- (b) Desktop Project: Continued operation
- (c) Advanced Avatar Helpdesk Project: Continued operation

During the contract term, RAMS will provide/conduct the following modality/intervention:

### Workforce Development (MHSA Modality)

- For the Avatar Helpdesk Training component, this contract term includes two cohorts with each cohort enrolling at least eight trainees after the 2 week visitation period (total of at least 16 trainees)
- For the Desktop Training component, this contract term includes two cohorts with each cohort enrolling at least seven trainees after the 2 week visitation period (total of 14 trainees)
- For the Advanced Avatar Helpdesk Training component, this contract term includes two cohorts with each enrolling at least five trainees after the 2 week visitation period (total of at least 10 trainees)
- For Avatar Helpdesk, Desktop, and Advanced Avatar Helpdesk components, a full cohort's training duration is nine months with trainees/interns engaged in workforce development activities (classroom and on-the-job training) intended to develop a diverse and competent workforce; outreach to under-represented communities; provide career exploration opportunities or to develop work readiness skills; or increase the number of consumers and family members in the healthcare information technology workforce.
- Each Avatar Helpdesk, Desktop & Advanced Avatar Helpdesk trainee/intern receives 8-16 hours/week of paid, on-the-job workforce development training; work hours vary, according to the individual's availability & support needs.
- There are additional activity hours for program planning, providing individualized and/or group trainee support (Vocational Rehabilitation Counselor and/or IT Trainer), preparing & reviewing/adjusting training materials (per Avatar system updates), etc.

## 6. Methodology

### *Service Delivery Methodology*

1. Outreach, recruitment, promotion, and advertisement as necessary.

RAMS' responsibility and commitment to mental health care quality and education extends beyond our own walls to reach people of all ages and backgrounds in our community through outreach and serving them in their own environments. This philosophy of care has always been central to the agency's approach. RAMS is uniquely well-positioned and has the expertise to outreach, engage, and retain diverse consumers, underrepresented constituents, and community organizations with regards to Hire-Ability services & resources and raising awareness about mental health and physical well-being. As an established community services provider, RAMS

comes into contact with significant numbers of consumers & families with each year serving well over 18,000 adults, children, youth & families at over 80 sites, citywide. Hire-Ability's primary referral sources are SFDPH outpatient behavioral health services; as such, the program's staff regularly performs outreach activities and coordinates within RAMS programs and other agencies' management.

Hire-Ability also operates Employee Development which primarily includes Production & Fulfillment Services, a workshop setting and on-the-job training in the fulfillment services industry with paid work experience. Hire-Ability is also a partnering program with the State Department of Rehabilitation to provide Employment Services (employment preparation, placement and retention services) to individuals with mental illnesses. Outreach and promotion is routinely conducted to these groups. The program also performs monthly outreach activities independently as well as in coordination with the BHS Vocational Coordinator, to various BHS providers (e.g. outpatient clinics & residential facilities within the system-of-care).

2. Admission, enrollment and/or intake criteria and process where applicable.

The program has an application process by which interested individuals are to submit their completed application packet within the indicated deadline. Application packets are distributed to the community, along with informational flyers about the program curriculum and content. Application packets include basic demographic information (name, address, and contact information), reference contact information, and a personal statement. Program orientations/Open Houses are also held, prior to application deadlines and serve as an opportunity for interested individuals and/or community organizations to obtain assistance with application completion and/or inquire more about the program. All completed applications are reviewed by an admission review committee, with all applicants receiving notification about the decision/outcome. Interviews may also be scheduled, as part of the admission review process. Once the cohort begins, there is a more detailed orientation to the program such as completion/graduation guidelines, discussion of expectations (by trainees and program), etc.

- C. Service delivery model, including treatment modalities, phases of treatment, hours of operation, length of stay, locations of service delivery, frequency and duration of service, strategies for service delivery, wrap-around services, residential bed capacity, etc. Include any linkages/coordination with other agencies.

The i-Ability, Vocational IT program has three components:

- 1) Avatar Helpdesk, a single point of contact for end users of the -BHS electronic health record system ("Avatar") to receive support. The initial unpaid classroom training varies from 2-4 weeks in which after, trainees engage in paid, on-the-job training where they gain skills regarding troubleshooting basic user issues, engaging & interacting with end users (customer service), logging & triaging more complicated issues, healthcare confidentiality policies & practices, etc. Each cohort cycle is nine months; cohorts overlap to maintain continuity of helpdesk support.

- 2) Desktop, a single point of contact for end users of BHS computers/hardware to receive support and maintenance within BHS computing environment. The initial unpaid classroom training varies from 2-4 weeks in which after, trainees engage in paid, on-the-job training where trainees gain skills regarding hardware repair and support (break-fix), technical troubleshooting, healthcare confidentiality policies & practices, etc. Each cohort cycle is nine months with no overlap.
- 3) Advanced Avatar Helpdesk, a single point of contact for end users of the BHS electronic health record system ("Avatar") to receive support. Additionally, interns will provide additional support to the Avatar Super User Community. The initial unpaid classroom training varies from 2-4 weeks in which after, trainees engage in paid, on-the-job training where interns increase their skills regarding troubleshooting basic and super user issues, engaging & interacting with end users (customer service), logging & triaging more complicated issues, healthcare confidentiality policies & practices, etc. The interns will assist with mentoring the Helpdesk trainees by shadowing frontline activities and providing structured peer support as facilitated by the trainer of the program. Each cohort cycle is nine months; cohorts overlap to maintain continuity of helpdesk support.

Program operation hours are Monday to Friday (8:00 am – 5:00 pm). Classroom and on-the-job training is primarily provided on-site at BHS (1380 Howard Street, SF, CA 94103) and/or RAMS Hire-Ability Vocational Services (94107).

The program design includes providing culturally competent, consumer-driven, strengths-based vocational services including but not limited to: vocational assessments, job skills training, on-site work experience, vocational counseling & job coaching, and classes/workshops aimed at skills development and building strengths towards employment readiness. The program improves, maintains, or restores personal independence and functioning, consistent with requirements for learning and development, which provides services to a distinct group of beneficiaries.

The IT Trainers (Avatar Helpdesk, Desktop, and Advanced Avatar Helpdesk) are the primary staff persons responsible for classroom and on-the-job training, providing direct support and supervision (individual, group) to trainees/interns. The classroom training is primarily provided during the first two to four weeks of the cohort; thereafter, training and support is provided on a regular, ongoing basis (weekly). The IT Trainers may also serve as additional frontline coverage; the IT Manager, along with the Director of Vocational Services/Program Director, provides as needed coverage and oversees quality control & management for the i-Ability program. Furthermore, all trainees/interns are assigned a Vocational Rehabilitation Counselor. The Counselor conducts a comprehensive vocational assessment (job readiness/interest, skills development, other work-related issues), vocational counseling (case management & linkages), supports and identifies strengths & areas of employment interest, job searches, and placement assistance, as well as job coaching, counseling & guidance.

Within the first two months of participation, an integrated vocational plan with specific goals is collaboratively (counselor, trainers, and trainees/interns) and formally developed. There is



ongoing monitoring of progress (by trainers and counselor), in relation to the goals; the vocational plan is formally reviewed at the third month of participation. Areas of vocational assessment include, but are not limited to: productivity, work quality, attendance, punctuality, dress & grooming, communication with others, group participation, and work endurance. The comprehensive vocational plan considers the client's environment and entire support structure and takes into account collateral information (e.g. behavioral health plan of care incorporates vocational goals). The plan development and reassessment periods include trainee input through self-evaluation sections as well as the counselor's appraisal. RAMS also facilitates linkages for support services (e.g. childcare, transportation), as needed.

i-Ability also offers structured groups (e.g. vocational counseling, training, psycho-education) as a core component of services to clients. Facilitated by Vocational Rehabilitation Counselors, the groups provide positive peer support & pressure, focus on interpersonal relationships, support network for specific challenges, and can assist individuals to learn about themselves and relate better with other people. Groups can be jointly run with collaborative partners (e.g. behavioral health counselors, BHS), taking place at RAMS and/or the vendor (BHS, if possible) or partner's site, depending on feedback and offered at various days and times.

This contract term incorporates the continued operation of the Helpdesk, Desktop, and Advanced Helpdesk Components. Significant activities are listed below:

Activity	Third Quarter (Jan-Mar 2016)	Fourth Quarter (April-June 2016)
Advisory Committee Meetings		April/May
Helpdesk Recruitment/Open House	Jan	
Helpdesk Applications Due & Selection	Feb/March	
Helpdesk Cohort # 7 ends		April
Helpdesk Cohort # 8 begins		April
Desktop Recruitment/Open House	Feb/Mar	
Desktop Applications Due & Selection	March	April
Desktop Cohort # 5 ends		May
Desktop Cohort # 6 begins	April	May
Advanced Helpdesk Application/Orientation		April
Advanced Helpdesk Applications Due & Selection		April
Advanced Helpdesk #3 ends		May/June
Advanced Helpdesk # 4begins		May

D. Describe your program's exit criteria and process, e.g. successful completion.

Trainees successfully complete the program when: (1) 85% attendance rate, (2) Vocational Development Plan goals are achieved, and score of 75% or higher on the certificated exams is accomplished or early completion/discharge of the program (at least 3 months after start of program) due to gaining employment related to participating in the program. Upon successful completion/discharge, referral can be to competitive employment, volunteer internships, education, college enrollment, or salaried employment including higher wage and skilled jobs in industries which are experiencing shortages such as the healthcare field. In this pursuit, the Vocational Rehabilitation Counselor may assist with job search & placement assistance and provide job coaching, counseling, and guidance. i-Ability is a program of RAMS Hire-Ability Vocational Services which offers a full spectrum of vocational services; as such, trainee graduates may also transition into the Employment Services, which is funded through a contract/agreement with the California State Department of Rehabilitation. This program provides a higher level of individualized job preparation using classroom and individual meetings, job development, individualized plans & job placement, and follow-along services to consumers. Hire-Ability also maintains a cooperative agreement with California Department of Rehabilitation (since 1998) to connect employers with trained individuals; thus, supporting job placements for program participants with employment.

E. Program staffing (which staff will be involved in what aspects of the service development and delivery). Indicate if any staff position is not funded by DPH.

See BHS Appendix B.

F. Mental Health Services Act Programs

- a. One of the primary MHSA tenets is consumer participation/engagement. Programs must identify how participants and/or families are engaged in the development, implementation and/or evaluation of programs. This can include peer-employees, advisory committees, etc.

RAMS is committed to consumer involvement and community input in all elements of program operations, including planning, implementation, and evaluation. This process ensures quality programming, increases effectiveness, and ensure culturally competency. The best informant for the culturally relevant curriculum & program development is the target population, themselves. Potential applicants/trainees and interested organizations are invited to the program Orientations/Open Houses as well as contact the i-Ability Vocational IT Manager directly. As the cohort is in operation, the IT Trainer regularly meets (approximately weekly) with trainees to solicit feedback; the i-Ability Manager and Vocational Rehabilitation Counselor also regularly solicits feedback from trainees. Furthermore, at the end of each cohort, trainees are given anonymous written program evaluations and satisfaction surveys regarding curriculum, course structure & activities, support services, and professional development. A post-cohort focus group is also conducted to solicit similar feedback regarding the curriculum of the program, recruitment process, accessibility, and effectiveness. All feedback is compiled and reviewed (by

Hire-Ability management and RAMS executive management), informs the program design (development & adjustments, implementation), and is incorporated, as appropriate.

During the cohort on-the-job training, all trainees are paid. Furthermore, i-Ability Vocational IT maintains an advisory committee that is multi-disciplinary and reflects the diversity of the community. Membership includes consumer representation, BHS, and RAMS with involvement from program participants (graduates). This committee schedules to meet quarterly and evaluates program components while advising on its further development and implementation.

- b. MHSA Vision: Providers have the attitudes, knowledge and skills needed to understand, communicate with and effectively serve people across cultures.

RAMS recruits employs staff with relevant educational, employment history and cultural competence for the target population we work with through thorough interviews and reference checks. Furthermore, RAMS believes in the principles of Wellness and Recovery in which promotes the engagement of peers through various activities which include employment of peers at all levels of positions. The process of on-going education and training to ensure staff are providing the standard of services required by RAMS are generally through regular attendance of staff meetings, individual supervisor supervisee meetings, monthly internal/external trainings, annual cultural competency trainings, and other activities that are program specific. RAMS maintains a philosophy as well as a policy regarding creating a welcoming environment to all, which in turn is displayed through positive and healthy attitudes among staff. Measurement of how effective staff is in providing a high level of service is through client satisfaction surveys, client advisory councils, and feedback from other providers.

- c. MHSA Vision: Collaboration with different systems increases opportunities for jobs, education, housing, etc.

RAMS continuously engages with various systems to increase the program trainees' knowledge and networking possibilities regarding jobs/internships, further educational opportunities, etc. Such systems that Hire-Ability specifically works with includes, but is not limited to: BHS (as the program is primarily providing classroom and on-the-job training, on-site at BHS' location using the BHS system); engaging in the San Francisco's Mayor's Committee on Disabilities (monthly meeting that involves various systems serving/providing vocational services); Job Developers Huddle-One Stop Western Addition, Golden Gate Merchants Association, Potrero /Dogpatch Merchants Association and ongoing relationship/ collaboration with California State Department of Rehabilitation (for which Hire-Ability maintains a separate contract); and involvement in the BHS Co-Operative group (streamlined referral system amongst RAMS Hire-Ability, Caminar, State Department of Rehabilitation, Citywide Forensic Collaborative). Furthermore, the i-Ability Vocational Rehabilitation Counselor provides support & coaching into the workforce and connects participants to additional resources (e.g. Department of Rehabilitation, RAMS Hire-Ability Employment Services, educational/training resources, housing).

## 7. Objectives and Measurements

### 1. Standardized Objectives

All applicable objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS Performance Objectives FY15-16.

### 2. Individualized Objectives

- At program completion, 75% of trainee graduates will indicate improvements to their coping abilities; this will be evidenced by post-program evaluations and satisfaction surveys, collected by RAMS staff and analyzed by the Program Director
- For each component, 75% of enrolled trainees will successfully complete (i.e. graduate) the training or have exited the program early due to obtaining employment related to this field, thus increasing readiness for entry-level employment/internship/volunteerism in the information technology/behavioral health field; this will be evidenced by program completion records that is documented by the Vocational Rehabilitation Counselor
- At program completion, 75% of trainees will express overall satisfaction with the program; this will be evidenced by the post-program satisfaction surveys, collected by RAMS staff and analyzed by the Program Director
- At program completion, at least 75% of trainees will participate in exit interviews through focus groups or one-on-one interview to solicit feedback regarding the curriculum of the program, recruitment process, accessibility, and effectiveness; this will be evidenced by feedback summary notes, collected by BHS IT management and RAMS staff.
- At least 75% of trainee graduates will respond/ participate in the three-month post-program survey to assess the program's impact on work and/or education placements

## 8. Continuous Quality Improvement

### 1. Achievement of contract performance objectives and productivity

RAMS monitors contract performance objectives through several methods such as daily data analysis and monthly review of consumer individual vocational goals/objectives, regular weekly meetings between the Vocational Rehabilitation Counselor and consumer served, regular individual supervision between supervisors and supervisee's to discuss consumer caseload with regard to intervention strategies, vocational plans & progress, documentation, productivity and overall contract objectives. Other significant activities to ensure achievement of contract performance objectives include regular weekly program staff meetings and program management meetings where issues related to overcoming any barriers to achieving performance objectives are discussed.

Monthly reports from each program coordinator to the program director and in turn to the Deputy Chief of RAMS address the ongoing progress and/or barriers towards contract objectives. Corrective action activities are documented which includes the identification of the issue, plan of action and steps and timelines for completion of the plan. RAMS Quality Council which represents a small group of RAMS supervisors, supervisees, consumers and executive leadership staff meet quarterly, is designed to advise on program quality assurance and improvement activities.

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All staff are informed about objectives and the required documentation related to the activities and program outcomes; majority of program objectives are measured by participant scores, program evaluations, and/or post-program surveys. With regards to management monitoring, the Program Director reports progress/ status towards each contract objective to executive management (Deputy Chief/Director of Clinical Services and Chief Executive Officer) in a written monthly report. If the projected progress has not been achieved for the month, the Program Director identifies barriers and develops a plan of action. In addition, the Program Director monitors programming/service progress (level of engagement by participants, level of accomplishing program goals/objectives), program exit reasons, and service/resource utilization. RAMS also conducts various random file/chart reviews to review adherence to objectives as well as service documentation requirements.

2. Quality of documentation, including a description of the frequency and scope of internal chart audits

The program utilizes various mechanisms to review documentation quality. Chart review by supervisors, at the very minimal, is reviewed after the 10 day visitation period and, if enrollment continues, a minimum of every 30 days thereafter and within a week of case closure. Active charts are reviewed quarterly after the vocational re-assessments and plans are conducted. Based on their review, determinations/recommendations are provided relating to service authorizations including frequency and modality/type of services, and the match to client's progress & vocational/clinical needs; feedback is provided to direct staff members. Furthermore, clinical supervisors monitor the service documentation of their supervisees; staffs meet weekly with their supervisors to review caseload with regard to service strategies, vocational plans & progress, documentation, productivity, etc. On a quarterly basis, the Program Director or Manager/Coordinator conducts a review of randomly selected charts (up to 10 charts, program-wide) to monitor quality & timeliness and provide feedback directly to staff as well as general summaries at staff meetings. The selection is such that each individual provider is reviewed at least annually.

In addition to the program's documentation review, the agency's Quality Council conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations),

Deputy Chief/Director of Clinical Services, and another council member (or designee).  
Feedback will be provided directly to staff as well as general summaries at staff meetings.

### 3. Cultural competency of staff and services

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by individual supervision (mostly weekly); supervisors and their supervisees' caseload with regard to service strategies, vocational plans & progress, documentation, etc. Furthermore, RAMS annually holds an agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.
- Ongoing review of vocational services indicators is conducted by the Program Director (and reported to executive management) on monthly basis; data collection and analysis of service engagement (referral source; engagement after intake; number of admissions; service discharge reasons; and service utilization review)
- Client's preferred language for services is noted at intake; during the case assignment process, the Program Director matches client with counselor by taking into consideration language, culture, and provider expertise. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- At least annually, aggregated demographic data of clientele and staff/providers is collected and analyzed by management in order to continuously monitor and identify any enhancements needed
- Development of annual objectives based on cultural competency principles; progress on objectives are reported by Program Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action.
- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Client Satisfaction);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting

staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Program Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.

- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters

#### 4. Satisfaction of services

RAMS adheres to the BHS satisfaction survey protocols which include dissemination annually or biannually. In addition, the Hire-Ability administered its program-developed client satisfaction surveys at case closure or upon request of the client. Furthermore, client feedback is obtained during post-program evaluations, quarterly client advisory council meetings, daily community meetings at the vocational services program, individual meetings between direct service staff and clients, and through a confidential telephone hotline. Results of the survey methods are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. Furthermore, the program facilitates focus groups with clients. All satisfaction survey methods and feedback results are also compiled and reported to executive management along with assessment of suggestion implementation. On an annual to biennial basis, clients attend RAMS Board of Directors meetings to share their experiences and provide feedback.

#### 5. Timely completion and use of outcome data

Not applicable.





<b>Contractor Name:</b> Richmond Area Multi-Services, Inc.	<b>Appendix A-5</b>
<b>Program Name:</b> TAY Vocational Services	<b>Contract Term:</b> 01/01/16 – 06/30/16

**1. Identifiers:**

Program Name: TAY Vocational Services  
 Program Address: 1234 Indiana Street  
 City, State, ZIP: San Francisco, CA 94107  
 Telephone/FAX: Tel: (415) 282-9675 Fax: (415) 920-6877  
 Website Address: www.ramsinc.org

Contractor Address (if different from above): 639 14<sup>th</sup> Avenue  
 City, State, ZIP: San Francisco, CA 94118

Person Completing this Narrative: Christina Shea  
 Telephone: 415-800-0699  
 Email Address: christinashea@ramsinc.org

Program Code(s) (if applicable): Not Applicable

**2. Nature of Document:**

New  Renewal  Modification

**3. Goal Statement:**

The overall goal of TAY Vocational Services is to provide time-limited paid internships to transitional age youth, ages 15 to 25, in order to provide healthy activities, provide entry-level work experience and help behavioral health TAY consumers achieve resiliency and maximize recovery.

The TAY Vocational Services will be integrated into the RAMS Hire-Ability Vocational Services program. The FY 2015-16 is the start-up/development period whereby RAMS will be conducting a Needs Assessment and work in collaboration with a broad range of stakeholders including TAY consumers, family members, BHS, MHSA, and consultants to design and implement this innovative vocational training program. The objective of the Needs Assessment would be to further determine the vocational needs/interests of the TAY community, the workforce sector interests of this community, and also to work with BHS to determine placement sites and positions that match the needs of the consumers.

**4. Target Population:**

The target population consists of residents of San Francisco that are transitional age youth, ages 15-18 and TAY young adults, ages 18-25, currently receiving behavioral health services at BHS. Particular outreach will be made to underserved populations and those who are involved in multiple systems including behavioral health, juvenile justice, human services and the educational system. Particular outreach will be made to those transitioning out of BHS Child, Youth and Family Services but not yet connected with community providers.

**5. Modality(s)/Intervention(s)**

See BHS Appendix B, CRDC pages.

<b>Contractor Name:</b> Richmond Area Multi-Services, Inc.	<b>Appendix A-5</b>
<b>Program Name:</b> TAY Vocational Services	<b>Contract Term:</b> 01/01/16 – 06/30/16

## 6. Methodology:

**Start up** – First and foremost, RAMS will hire, in January 2016, a qualified Project Coordinator who will conduct needs assessment in collaboration with various stakeholders (described further below) and began program planning and development, with a TAY Vocational work group, in the later part of the contract year May-June 2016.

**Needs assessment** – For most of this contract year (6 months), activities will focus on the needs assessment and program planning. RAMS will start by working with its transitional age youth at vocational services and youth council to set up and pilot the needs assessment questionnaire. The questionnaire may include questions on barriers to employment, career interests, learning support needs, etc. Also, we will conduct survey to local communities and businesses on their hiring needs.

As RAMS currently provides services in over 90 sites throughout San Francisco, the agency is uniquely positioned well and has the expertise to outreach & promote the program to culturally & linguistically diverse consumers, underrepresented constituents, at SFUSD, BHS, Human Services Agency, Juvenile Justice system, and community organizations. RAMS is able to leverage existing resources towards this effort; the agency is the contract provider of behavioral health services for the high school-based Wellness Center (16 public high schools).

**Collaboration for age 15-18 youth and families** – RAMS will build upon its existing partnerships with Wellness Centers, schools' administration & student bodies as well as collaborate with SFUSD and partner agencies to conduct needs assessments. Other partner agencies may include youth organizations (Horizons Unlimited, Vietnamese Youth Development Center, Samoan Community Development Center, CYC, YMCA Urban Services, etc.), and government agencies may include Juvenile Justice System (including SF-TRACK), Department of Public Health-BHS, youth task force, and other community behavioral health providers who serve youth up to 18 years old.

**Collaboration for age 19-25 young adults and families** – RAMS will collaborate with DPH-BHS and community organizations (TAY-SF, YYDC, Horizons, Larkin Youth, etc.) that serve young adults to conduct focus groups to assess their needs and interest in vocational services.

**Program planning and development** – After conducting all the focus groups with youth and young adults, and surveys with communities and businesses, we will form a TAY work group to support us in complying the information, and start program planning, design and development (in May-June 2016).

**Planning and partners for age 15-18 youth** – RAMS will recruit representatives from youth age 15-18 and their families in reviewing our surveys and information collected from our focus groups, and start designing a vocational training program. Since most youth will still be in high school, we will work with SFUSD in compliance to the educational requirements, (GPA requirement, hours of work during school year, etc.) and also explore possibilities of vocational training meeting a high school course internship/educational requirement.

**Planning and partners for age 18-25 young adults** – RAMS will recruit representatives from young adults again 18-25 and their families in reviewing our surveys and information collected from our focus groups, and start designing a vocational training program.

RAMS will work closely with DPH-BHS as well as RAMS Hire-Ability Vocational Services and RAMS Division of Peer Based Services in exploring how TAY Vocational Services can leverage existing training, vocational services, and employment services (including DOR contractor's like OTTP).

## 7. Objectives and Measurements:

RAMS adheres to any applicable annual BHS Performance Objectives. During the "start-up" needs assessment, program design and development year stage, the primary activities include community engagement & feedback to be obtained regarding TAY vocational needs/interests, community and business hiring needs, as well as existing vocational /employment services for TAY in the community.

Such needs assessment/ program development activities include:

- During Fiscal Year 2015-16, RAMS will recruit and hire the Project Coordinator
- During Fiscal Year 2015-16, RAMS shall research and document evidence- and practice-based practices and models for effective program design structures
- During Fiscal Year 2015-16, RAMS shall hold at least two meetings with BHS to collaborate on vocational/employment services planning, as evidenced by meeting minutes and notes
- During Fiscal Year 2015-16, RAMS shall hold at least three Focus Group Meetings (students) at SFUSD Wellness Centers as evidenced by meeting minutes and notes
- During Fiscal Year 2015-16, RAMS shall hold at least three Focus Group Meetings (young adults) at community programs (both BHS and CBO's) as evidenced by meeting minutes and notes
- During Fiscal Year 2015-16, RAMS shall hold at least three Focus Group Meetings (families) at community programs (both BHS and CBO's) as evidenced by meeting minutes and notes
- During Fiscal Year 2015-16, RAMS shall conduct surveys to community and businesses on their hiring needs as evidence by a summary of the surveys
- During Fiscal Year 2015-16, RAMS will develop and distribute promotional material (e.g. flyers, etc.) and engage in at least two outreach activities/events promoting the program, particularly in outreaching to target population communities (SFUSD, TAY-SF, etc.)
- During Fiscal Year 2015-16, RAMS shall write program design outline and develop recommended reference materials (readers/books), as evidenced by a summary document/report

## 8. Continuous Quality Improvement:

A. Achievement of contract performance objectives and productivity.

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All staff are informed about objectives and the required documentation related to the activities and program outcomes; majority of program objectives are measured by participant scores, program evaluations, and/or post-program surveys. With regards to management monitoring, the Program Director reports progress/ status towards each contract objective to executive

Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-5
Program Name: TAY Vocational Services	Contract Term: 01/01/16 – 06/30/16

management (Deputy Chief/Director of Clinical Services and Chief Executive Officer) in a written monthly report. If the projected progress has not been achieved for the month, the Program Director identifies barriers and develops a plan of action. In addition, the Program Director monitors programming/service progress (level of engagement by participants, level of accomplishing program goals/objectives), program exit reasons, and service/resource utilization. RAMS also conducts various random file/chart reviews to review adherence to objectives as well as service documentation requirements.

**B. Quality of documentation, including a description of the frequency and scope of internal chart audits.**

The program director and other members of the Hire-Ability Vocational Services management team meet regular with staff for supervision meetings. Documentation of meetings, trainings, performance evaluations is noted and, as appropriate, may be filed directly in the employees personnel file with human resources. Feedback through surveys are also analyzed and evaluated and reported to RAMS executive leadership. Information from the outcomes is used for program improvement purposes.

RAMS utilizes various mechanisms to review documentation quality. Chart reviews are conducted by supervisors; based on their review, determinations/recommendations are provided relating to frequency and modality/type of services, and the match to client's progress & vocational/clinical needs. Feedback is provided to direct staff members. Furthermore, supervisors monitor the service documentation of their supervisees; staff meets weekly with their supervisors to review caseload with regard to service strategies, vocational plans & progress, documentation, productivity, etc. Charts are reviewed at regular intervals, to monitor quality & timeliness. Feedback is provided directly to staff as well as general summaries at staff meetings.

In addition to the program's documentation review, the RAMS Quality Council formally conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy Chief/Director of Clinical Services, and another council member (or designee). Feedback is provided directly to staff as well as general summaries at staff meetings.

**C. Cultural competency of staff and services.**

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by individual supervision (mostly weekly); supervisors and their supervisees' caseload with

Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-5
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regard to service strategies, vocational plans & progress, documentation, etc. Furthermore, RAMS annually holds an agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.

- Ongoing review of vocational services indicators is conducted by the Program Director (and reported to executive management) on monthly basis; data collection and analysis of service engagement (referral source; engagement after intake; number of admissions; service discharge reasons; and service utilization review)
- Client's preferred language for services is noted at intake; during the case assignment process, the Program Director matches client with counselor by taking into consideration language, culture, and provider expertise. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- At least annually, aggregated demographic data of clientele and staff/providers is collected and analyzed by management in order to continuously monitor and identify any enhancements needed
- Development of annual objectives based on cultural competency principles; as applicable, progress on objectives are reported by Program Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action.
- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Satisfaction with services);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Program Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.
- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters

#### D. Satisfaction with services.

RAMS adheres to the CBHS satisfaction survey protocols which include dissemination annually or biannually. In addition, the Hire-Ability administered its program-developed client satisfaction surveys. Furthermore, client feedback is obtained during post-program evaluations, quarterly client advisory council meetings, daily community meetings at the vocational services program, individual meetings between direct service staff and clients, and through a confidential telephone hotline. Results of the survey methods are shared at staff meetings, reviewed by the RAMS

<b>Contractor Name:</b> Richmond Area Multi-Services, Inc.	<b>Appendix A-5</b>
<b>Program Name:</b> TAY Vocational Services	<b>Contract Term:</b> 01/01/16 – 06/30/16

Quality Council, and reported to executive management. Furthermore, the program facilitates focus groups with clients. All satisfaction survey methods and feedback results are also compiled and reported to executive management along with assessment of suggestion implementation. On an annual to biennial basis, clients attend RAMS Board of Directors meetings to share their experiences and provide feedback.

- E. Timely completion and use of outcome data, including CANS and/or ANSA data or CalOMS.

Not Applicable.

**9. Required Language:**

Not Applicable.

**Appendix B**  
**Calculation of Charges**

**1. Method of Payment**

A. Invoices furnished by CONTRACTOR under this Agreement must be in a form acceptable to the Contract Administrator and the CONTROLLER and must include the Contract Progress Payment Authorization number or Contract Purchase Number. All amounts paid by CITY to CONTRACTOR shall be subject to audit by CITY. The CITY shall make monthly payments as described below. Such payments shall not exceed those amounts stated in and shall be in accordance with the provisions of Section 5, COMPENSATION, of this Agreement.

Compensation for all SERVICES provided by CONTRACTOR shall be paid in the following manner. For the purposes of this Section, "General Fund" shall mean all those funds which are not Work Order or Grant funds. "General Fund Appendices" shall mean all those appendices which include General Fund monies.

(2) Cost Reimbursement (Monthly Reimbursement for Actual Expenditures within Budget):

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15<sup>th</sup>) calendar day of each month for reimbursement of the actual costs for SERVICES of the preceding month. All costs associated with the SERVICES shall be reported on the invoice each month. All costs incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

B. Final Closing Invoice:

(2) Cost Reimbursement:

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those costs incurred during the referenced period of performance. If costs are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY.

C. Payment shall be made by the CITY to CONTRACTOR at the address specified in the section entitled "Notices to Parties."

D. Upon the effective date of this Agreement, contingent upon prior approval by the CITY'S Department of Public Health of an invoice or claim submitted by Contractor, and of each year's revised Appendix A (Description of Services) and each year's revised Appendix B (Program Budget and Cost Reporting Data Collection Form), and within each fiscal year, the CITY agrees to make an initial payment to CONTRACTOR not to exceed \$446,820 (25%) of the General Fund and Prop 63 portion of the CONTRACTOR'S allocation for the applicable fiscal year.

CONTRACTOR agrees that within that fiscal year, this initial payment shall be recovered by the CITY through a reduction to monthly payments to CONTRACTOR during the period of October 1 through March 31 of the applicable fiscal year, unless and until CONTRACTOR chooses to return to the

CITY all or part of the initial payment for that fiscal year. The amount of the initial payment recovered each month shall be calculated by dividing the total initial payment for the fiscal year by the total number of months for recovery. Any termination of this Agreement, whether for cause or for convenience, will result in the total outstanding amount of the initial payment for that fiscal year being due and payable to the CITY within thirty (30) calendar days following written notice of termination from the CITY.

**2. Program Budgets and Final Invoice**

A. Program Budgets are listed below and are attached hereto.

**Budget Summary**

Appendix B-1 Hire-Ability Janitorial Services

Appendix B-2 Hire-Ability Clerical & Mailroom Services

Appendix B-3 Peer-to-Peer Vocational Linkage

Appendix B-4 Hire-Ability Information Technology

Appendix B-5 TAY Vocational Services

**B. COMPENSATION**

Compensation shall be made in monthly payments on or before the 30<sup>th</sup> day after the DIRECTOR, in his or her sole discretion, has approved the invoice submitted by CONTRACTOR. The breakdown of costs and sources of revenue associated with this Agreement appears in Appendix B, Cost Reporting/Data Collection (CR/DC) and Program Budget, attached hereto and incorporated by reference as though fully set forth herein. The maximum dollar obligation of the CITY under the terms of this Agreement shall not exceed Four Million Three Hundred Eighty Two Thousand Three Hundred Forty Dollars (\$4,382,340 for the period of July 1, 2010 through December 31, 2017.

CONTRACTOR understands that, of this maximum dollar obligation, \$401,386 is included as a contingency amount and is neither to be used in Appendix B, Budget, or available to CONTRACTOR without a modification to this Agreement executed in the same manner as this Agreement or a revision to Appendix B, Budget, which has been approved by the Director of Health. CONTRACTOR further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable CITY and Department of Public Health laws, regulations and policies/procedures and certification as to the availability of funds by the Controller. CONTRACTOR agrees to fully comply with these laws, regulations, and policies/procedures.

(1) For each fiscal year of the term of this Agreement, CONTRACTOR shall submit for approval of the CITY's Department of Public Health a revised Appendix A, Description of Services, and a revised Appendix B, Program Budget and Cost Reporting Data Collection form, based on the CITY's allocation of funding for SERVICES for the appropriate fiscal year. CONTRACTOR shall create these Appendices in compliance with the instructions of the Department of Public Health. These Appendices shall apply only to the fiscal year for which they



were created. These Appendices shall become part of this Agreement only upon approval by the CITY.

(2) CONTRACTOR understands that, of the maximum dollar obligation stated above, the total amount to be used in Appendix B, Budget and available to CONTRACTOR for the entire term of the contract is as follows, notwithstanding that for each fiscal year, the amount to be used in Appendix B, Budget and available to CONTRACTOR for that fiscal year shall conform with the Appendix A, Description of Services, and a Appendix B, Program Budget and Cost Reporting Data Collection form, as approved by the CITY's Department of Public Health based on the CITY's allocation of funding for SERVICES for that fiscal year.

Term	Amount
1/1/16-6/30/16	\$2,024,552
7/1/16-12/31/16	\$1,956,402
1/1/16-12/31/16	\$3,980,954
Contingency	\$401,386
Total:	\$4,382,340

(3) CONTRACTOR understands that the CITY may need to adjust sources of revenue and agrees that these needed adjustments will become part of this Agreement by written modification to CONTRACTOR. In event that such reimbursement is terminated or reduced, this Agreement shall be terminated or proportionately reduced accordingly. In no event will CONTRACTOR be entitled to compensation in excess of these amounts for these periods without there first being a modification of the Agreement or a revision to Appendix B, Budget, as provided for in this section of this Agreement.

C. CONTRACTOR agrees to comply with its Budget as shown in Appendix B in the provision of SERVICES. Changes to the budget that do not increase or reduce the maximum dollar obligation of the CITY are subject to the provisions of the Department of Public Health Policy/Procedure Regarding Contract Budget Changes. CONTRACTOR agrees to comply fully with that policy/procedure.

D. No costs or charges shall be incurred under this Agreement nor shall any payments become due to CONTRACTOR until reports, SERVICES, or both, required under this Agreement are received from CONTRACTOR and approved by the DIRECTOR as being in accordance with this Agreement. CITY may withhold payment to CONTRACTOR in any instance in which CONTRACTOR has failed or refused to satisfy any material obligation provided for under this Agreement.

E. In no event shall the CITY be liable for interest or late charges for any late payments.

F. CONTRACTOR understands and agrees that should the CITY'S maximum dollar obligation under this Agreement include State or Federal Medi-Cal revenues, CONTRACTOR shall expend such revenues in the provision of SERVICES to Medi-Cal eligible clients in accordance with CITY, State, and Federal Medi-Cal regulations. Should CONTRACTOR fail to expend budgeted Medi-Cal revenues herein, the CITY'S maximum dollar obligation to CONTRACTOR shall be proportionally

reduced in the amount of such unexpended revenues. In no event shall State/Federal Medi-Cal revenues be used for clients who do not qualify for Medi-Cal reimbursement.

3. No invoices for Services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

**Appendix B - DPH 1: Department of Public Health Contract Budget Summary**

DHCS Legal Entity Number (MH) 00343							Page #	B page 5
DHCS Legal Entity Name (MH)/Contractor Name (SA) Richmond Area Multi-Services, Inc.							Fiscal Year	2015-2016
Contract CMS # 7640								01/01/16
Contract Appendix Number	B-1	B-2	B-3	B-4	B-5	B-#		
Provider Number	3894	3894	3894	3894	3894			
Program Name(s)	Janitorial Services	Clerical and Mailroom Services	Peer to Peer Voc Linkage	Information Technology	TAY Vocational Services			
Program Code(s)	N/A	N/A	N/A	N/A	N/A			
Funding Term (mm/dd/yy - mm/dd/yy)	01/01/2016-06/30/2016	01/01/2016-06/30/2016	01/01/2016-06/30/2016	01/01/2016-06/30/2016	01/01/2016-06/30/2016		<b>TOTAL</b>	
<b>FUNDING USES</b>								
Salaries	\$ 283,369	\$ 284,766	\$ 93,165	\$ 349,658	\$ 52,500		\$ 1,063,458	
Employee Benefits	\$ 168,606	\$ 158,570	\$ 37,590	\$ 141,610	\$ 16,328		\$ 522,704	
<b>Subtotal Salaries &amp; Employee Benefits</b>	<b>\$ 451,975</b>	<b>\$ 443,356</b>	<b>\$ 130,755</b>	<b>\$ 491,268</b>	<b>\$ 68,828</b>		<b>\$ 1,586,182</b>	
Operating Expenses	\$ 88,360	\$ 65,212	\$ 14,086	\$ 33,337	\$ 20,458		\$ 221,453	
Capital Expenses							\$ -	
<b>Subtotal Direct Expenses</b>	<b>\$ 540,335</b>	<b>\$ 508,568</b>	<b>\$ 144,841</b>	<b>\$ 524,605</b>	<b>\$ 89,286</b>		<b>\$ 1,807,63</b>	
Indirect Expenses	\$ 64,840	\$ 61,029	\$ 17,381	\$ 62,953	\$ 10,714		\$ 216,917	
Indirect %	12.0%	12.0%	12.0%	12.0%	12.0%	0.0%	12.0%	
<b>TOTAL FUNDING USES</b>	<b>\$ 605,175</b>	<b>\$ 569,597</b>	<b>\$ 162,222</b>	<b>\$ 587,558</b>	<b>\$ 100,000</b>		<b>\$ 2,024,552</b>	
						Employee Fringe Benefits %	46.7%	
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>								
MH COUNTY Adult - General Fund	\$ 446,057	\$ 435,882					\$ 881,939	
MH CYF COUNTY General Fund	\$ 1,192	\$ 1,018					\$ 2,210	
MH STATE Adult 1991 MH Realignment	\$ 60,834	\$ 37,222					\$ 98,056	
MH STATE CYF 1991 Realignment	\$ 1,827	\$ 1,118					\$ 2,945	
MH GRANT SAMSHA Adult SOC, CFDA #93.958			\$ 162,222				\$ 162,222	
MH MHSA (CSS)	\$ 95,265	\$ 94,357			\$ 100,000		\$ 289,622	
MH MHSA (IT) Information Technology				\$ 587,558			\$ 587,558	
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>	<b>\$ 605,175</b>	<b>\$ 569,597</b>	<b>\$ 162,222</b>	<b>\$ 587,558</b>	<b>\$ 100,000</b>		<b>\$ 2,024,552</b>	
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>								
							\$ -	
							\$ -	
							\$ -	
							\$ -	
							\$ -	
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	
<b>OTHER DPH FUNDING SOURCES</b>								
							\$ -	
							\$ -	
							\$ -	
							\$ -	
<b>TOTAL OTHER DPH FUNDING SOURCES</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	
<b>TOTAL DPH FUNDING SOURCES</b>	<b>\$ 605,175</b>	<b>\$ 569,597</b>	<b>\$ 162,222</b>	<b>\$ 587,558</b>	<b>\$ 100,000</b>		<b>\$ 2,024,552</b>	
<b>NON-DPH FUNDING SOURCES</b>								
							\$ -	
<b>TOTAL NON-DPH FUNDING SOURCES</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>	<b>\$ 605,175</b>	<b>\$ 569,597</b>	<b>\$ 162,222</b>	<b>\$ 587,558</b>	<b>\$ 100,000</b>		<b>\$ 2,024,552</b>	

Prepared By: Ken Choi, Chief Financial Officer

Phone Number: 415-800-0699 x205

**Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)**

DHCS Legal Entity Name (MH)/Contractor Name (SA) 00943		Appendix # B-1				
Provider Name RAMS		Page # 1				
Provider Number 3894		Fiscal Year 2015-2016				
		Funding Notification Date 01/01/16				
Program Name	Janitorial Services	Janitorial Services				
Program Code	N/A	N/A				
Mode/SFC (Mf) or Modality (SA)	10/30-39	10/30-39				
Service Description	DS-Vocational	DS-Vocational				
Funding Term (mm/dd/yy - mm/dd/yy)	01/01/2016-06/30/2016	01/01/2016-06/30/2016				TOTAL
<b>FUNDING USES</b>						
Salaries & Employee Benefits	380,825	71,150				451,975
Operating Expenses	74,452	13,908				88,360
Capital Expenses						
Subtotal Direct Expenses	455,277	85,058				540,335
Indirect Expenses	54,833	10,207				64,840
<b>TOTAL FUNDING USES</b>	<b>509,910</b>	<b>95,265</b>				<b>605,175</b>
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>	<b>Accounting Code (Index Code or Detail)</b>					
MH COUNTY Adult - General Fund	HMHMCC730515	446,057				446,057
MH CYF COUNTY General Fund	HMHMCP751594	1,192				1,192
MH STATE Adult 1991 MH Realignment	HMHMCC730515	60,834				60,834
MH STATE CYF 1991 Realignment	HMHMCP751594	1,827				1,827
MH MHSA (CSS)	PMHS63-1605		95,265			95,265
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>509,910</b>	<b>95,265</b>			<b>605,175</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>	<b>Accounting Code (Index Code or Detail)</b>					
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>						
<b>OTHER DPH FUNDING SOURCES</b>	<b>Accounting Code (Index Code or Detail)</b>					
This row left blank for funding sources not in drop-down list						
<b>TOTAL OTHER DPH FUNDING SOURCES</b>						
<b>TOTAL DPH FUNDING SOURCES</b>		<b>509,910</b>	<b>95,265</b>			<b>605,175</b>
<b>NON-DPH FUNDING SOURCES</b>						
This row left blank for funding sources not in drop-down list						
<b>TOTAL NON-DPH FUNDING SOURCES</b>						
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>509,910</b>	<b>95,265</b>			<b>605,175</b>
<b>BHS UNITS OF SERVICE AND UNIT COST</b>	<b>Number of Beds Purchased (if applicable)</b>					
	SA Only - Non-Res 33 - ODF # of Group Sessions (classes)					
	SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program					
<b>Payment Method</b>	<b>Cost Reimbursement (CR)</b>	<b>Cost Reimbursement (CR)</b>	<b>Cost Reimbursement (CR)</b>	<b>Cost Reimbursement (CR)</b>	<b>Cost Reimbursement (CR)</b>	
DPH Units of Service	1,170	218				
Unit Type	Client Full Day	Client Full Day	0	0	0	
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES ONLY)	\$ 436.00	\$ 436.00	\$	\$	\$	
Cost Per Unit - Contract Rate (DPH & NON-DPH FUNDING SOURCES)	\$ 436.00	\$ 436.00	\$	\$	\$	
Published Rate (Medi-Cal Providers Only)						<b>Total UDC</b>
Unduplicated Clients (UDC)	N/A	N/A				N/A

Revised 7/1/2015



Appendix B - DPH 4: Operating Expenses Detail

Program Name: Janitorial Services  
 Program Code: N/A

Appendix #: B-1  
 Page #: 3  
 Fiscal Year: 2015-2016  
 Funding Notification Date: 01/01/16

Expense Categories & Line Items	TOTAL	General Fund (HMHMCC730515, HMHMCP751594, HMHMCC730515, HMHMCP751594)	MH MSA (CSS) (PMHS63-1605)	Accounting Code 3 (Index Code or Detail)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
Term (mm/dd/yy-mm/dd/yy):		01/01/16-06/30/16	01/01/16-06/30/16	01/01/16-06/30/16	01/01/16-06/30/16	01/01/16-06/30/16	
Rent	\$ -	\$ -	\$ -				
Utilities (telephone, electricity, water, gas)	\$ -	\$ -	\$ -				
Building Repair/Maintenance	\$ -	\$ -	\$ -				
Occupancy Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office Supplies	\$ -	\$ -	\$ -				
Photocopying	\$ -	\$ -	\$ -				
Program Supplies	\$ 80,362	\$ 67,712	\$ 12,650				
Computer Hardware/Software	\$ -	\$ -	\$ -				
Materials & Supplies Total:	\$ 80,362	\$ 67,712	\$ 12,650	\$ -	\$ -	\$ -	\$ -
Training/Staff Development	\$ 3,000	\$ 2,528	\$ 472				
Insurance	\$ 1,002	\$ 844	\$ 158				
Professional License	\$ -	\$ -	\$ -				
Permits	\$ -	\$ -	\$ -				
Equipment Lease & Maintenance	\$ -	\$ -	\$ -				
General Operating Total:	\$ 4,002	\$ 3,372	\$ 630	\$ -	\$ -	\$ -	\$ -
Local Travel	\$ 1,998	\$ 1,683	\$ 315				
Out-of-Town Travel	\$ -	\$ -	\$ -				
Field Expenses	\$ -	\$ -	\$ -				
Staff Travel Total:	\$ 1,998	\$ 1,683	\$ 315	\$ -	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and Amounts)	\$ -	\$ -	\$ -				
(add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -	\$ -				
Consultant/Subcontractor Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):							
Recruitment & Direct Staff Expenses	\$ 1,998	\$ 1,685	\$ 313				
	\$ -	\$ -	\$ -				
Other Total:	\$ 1,998	\$ 1,685	\$ 313	\$ -	\$ -	\$ -	\$ -
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 88,360</b>	<b>\$ 74,452</b>	<b>\$ 13,908</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Revised 7/1/2015

**Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)**

DHCS Legal Entity Name (MH)/Contractor Name (SA) 00343		Appendix # B-2				
Provider Name RAMS		Page # 1				
Provider Number 3894		Fiscal Year 2015-2016				
		Funding Notification Date 01/01/16				
Program Name	Clerical and Mailroom Services	Clerical and Mailroom Services				
Program Code	N/A	N/A				
Mode/SFC (MH) or Modality (SA)	10/30-39	10/30-39				
Service Description	DS-Vocational	DS-Vocational				
Funding Term (mm/dd/yy - mm/dd/yy)	01/01/16-06/30/16	01/01/16-06/30/16				TOTAL
<b>FUNDING USES</b>						
Salaries & Employee Benefits	369,912	73,444				443,356
Operating Expenses	54,409	10,803				65,212
Capital Expenses						
Subtotal Direct Expenses	424,321	84,247				508,568
Indirect Expenses	50,919	10,110				61,029
<b>TOTAL FUNDING USES</b>	<b>475,240</b>	<b>94,357</b>				<b>569,597</b>
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>						
	Accounting Code (Index Code or Detail)					
MH COUNTY Adult - General Fund	HMHMCC730515	435,882				435,882
MH CYF COUNTY General Fund	HMHMCP751594	1,018				1,018
MH STATE Adult 1991 MH Realignment	HMHMCC730515	37,222				37,222
MH STATE CYF 1991 Realignment	HMHMCP751594	1,118				1,118
MH MHSA (CSS)	PMHS63-1605		94,357			94,357
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>475,240</b>	<b>94,357</b>			<b>569,597</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>						
	Accounting Code (Index Code or Detail)					
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>						
<b>OTHER DPH FUNDING SOURCES</b>						
	Accounting Code (Index Code or Detail)					
This row left blank for funding sources not in drop-down list						
<b>TOTAL OTHER DPH FUNDING SOURCES</b>						
<b>TOTAL DPH FUNDING SOURCES</b>		<b>475,240</b>	<b>94,357</b>			<b>569,597</b>
<b>NON-DPH FUNDING SOURCES</b>						
This row left blank for funding sources not in drop-down list						
<b>TOTAL NON-DPH FUNDING SOURCES</b>						
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>475,240</b>	<b>94,357</b>			<b>569,597</b>
<b>BHS UNITS OF SERVICE AND UNIT COST</b>						
	Number of Beds Purchased (if applicable)					
	SA Only - Non-Res 33 - ODF # of Group Sessions (classes)					
	SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program					
	Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)
	DPH Units of Service	1,382	274			
	Unit Type	Client Full Day	Client Full Day	0	0	0
	Cost Per Unit - DPH Rate (DPH FUNDING SOURCES ONLY)	\$ 344.00	\$ 344.00	\$ -	\$ -	\$ -
	Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 344.00	\$ 344.00	\$ -	\$ -	\$ -
	Published Rate (Medi-Cal Providers Only)					
	Unduplicated Clients (UDC)	N/A	N/A			Total UDC

Appendix B - DPH 3: Salaries & Benefits Detail

Program Name: Clerical and Mailroom Services  
 Program Code: N/A

Appendix #: B-2  
 Page #: 2  
 Fiscal Year: 2015-2016  
 Funding Notification Date: 01/01/16

Term (mm/dd/yy-mm/dd/yy)	TOTAL		General Fund (HMHMCG730515, HMHMCP751594, HMHMCG730515, HMHMCP751594)		MH MSHA (CSS) (PMHS63-1605)		Accounting Code 3 (Index Code or Detail)		Accounting Code 4 (Index Code or Detail)		Accounting Code 5 (Index Code or Detail)		Accounting Code 6 (Index Code or Detail)	
	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries
Administrative Assistant/Receptionist	2.29	\$ 60,000	1.91	\$ 50,061	0.38	\$ 9,939								
Messenger/Driver	1.80	\$ 47,239	1.50	\$ 39,414	0.30	\$ 7,825								
Operations Assistant	0.50	\$ 18,000	0.42	\$ 15,018	0.08	\$ 2,982								
Project Team Leader	0.50	\$ 19,282	0.42	\$ 16,088	0.08	\$ 3,194								
Job-Related Training Position (Clients)	3.00	\$ 76,440	2.50	\$ 63,777	0.50	\$ 12,663								
Vocational Rehabilitation Services Coordinator	0.50	\$ 23,175	0.42	\$ 19,338	0.08	\$ 3,839								
Peer Job Coach	0.50	\$ 15,000	0.42	\$ 12,515	0.08	\$ 2,485								
Associate Director of Vocational Services	0.25	\$ 17,150	0.21	\$ 14,309	0.04	\$ 2,841								
Director of Vocational Services	0.10	\$ 8,900	0.08	\$ 7,092	0.02	\$ 1,408								
Totals:	9.44	\$ 284,786	7.88	\$ 237,610	1.56	\$ 47,176	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -
Employee Fringe Benefits:	55.7%	\$ 158,570	55.68%	\$ 132,302	55.68%	\$ 26,268	0.00%	\$ -	0.00%	\$ -	0.00%	\$ -	0.00%	\$ -
<b>TOTAL SALARIES &amp; BENEFITS</b>		<b>\$ 443,356</b>		<b>\$ 369,912</b>		<b>\$ 73,444</b>		<b>\$ -</b>		<b>\$ -</b>		<b>\$ -</b>		<b>\$ -</b>

Revised 7/1/2015



Appendix B - DPH 4: Operating Expenses Detail

Program Name: Clerical and Mailroom Services  
 Program Code: N/A

Appendix #: B-2  
 Page #: 3  
 Fiscal Year: 2015-2016  
 Funding Notification Date: 01/01/16

Expense Categories & Line Items	TOTAL	General Fund	MH MSA (CSS)	Accounting Code 3	Accounting Code 4	Accounting Code 5	Accounting Code 6
		(HMHMCC730515, HMHMCP751594, HMHMCC730515, HMHMCP751594)	(PMHS63-1605)	(Index Code or Detail)	(Index Code or Detail)	(Index Code or Detail)	(Index Code or Detail)
Term (mm/dd/yy-mm/dd/yy):		01/01/16-06/30/16	01/01/16-06/30/16	01/01/16-06/30/16	01/01/16-06/30/16	01/01/16-06/30/16	
Rent	\$ 6,000	\$ 5,006	\$ 994				
Utilities (telephone, electricity, water, gas)	\$ 3,000	\$ 2,503	\$ 497				
Building Repair/Maintenance	\$ 1,000	\$ 834	\$ 166				
<b>Occupancy Total:</b>	<b>\$ 10,000</b>	<b>\$ 8,343</b>	<b>\$ 1,657</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Office Supplies	\$ -	\$ -	\$ -				
Photocopying	\$ -	\$ -	\$ -				
Program Supplies	\$ 33,210	\$ 27,709	\$ 5,501				
Computer Hardware/Software	\$ -	\$ -	\$ -				
<b>Materials &amp; Supplies Total:</b>	<b>\$ 33,210</b>	<b>\$ 27,709</b>	<b>\$ 5,501</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Training/Staff Development	\$ 6,000	\$ 5,006	\$ 994				
Insurance	\$ 6,000	\$ 5,006	\$ 994				
Professional License	\$ -	\$ -	\$ -				
Permits	\$ -	\$ -	\$ -				
Equipment Lease & Maintenance	\$ -	\$ -	\$ -				
<b>General Operating Total:</b>	<b>\$ 12,000</b>	<b>\$ 10,012</b>	<b>\$ 1,988</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Local Travel	\$ 6,000	\$ 5,006	\$ 994				
Out-of-Town Travel	\$ -	\$ -	\$ -				
Field Expenses	\$ -	\$ -	\$ -				
<b>Staff Travel Total:</b>	<b>\$ 6,000</b>	<b>\$ 5,006</b>	<b>\$ 994</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and Amounts)	\$ -	\$ -	\$ -				
(add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -	\$ -				
<b>Consultant/Subcontractor Total:</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Other (provide detail):							
Recruitment & Direct staff Expenses	\$ 4,002	\$ 3,339	\$ 663				
	\$ -	\$ -	\$ -				
<b>Other Total:</b>	<b>\$ 4,002</b>	<b>\$ 3,339</b>	<b>\$ 663</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 65,212</b>	<b>\$ 54,409</b>	<b>\$ 10,803</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Revised 7/1/2015

**Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)**

DHCS Legal Entity Name (MH)/Contractor Name (SA) 00343						Appendix #	B-3
Provider Name RAMS						Page #	1
Provider Number 3894						Fiscal Year	2015-2016
						Funding Notification Date	01/01/16
Program Name	Peer to Peer Voa						
Program Code	Linkage:						
Mode/SFC (MH) or Modality (SA)	N/A						
Service Description	10/30-39						
Funding Term (mm/dd/yy - mm/dd/yy)	DS-Vocational						
	01/01/16-06/30/16						<b>TOTAL</b>
<b>FUNDING USES</b>							
Salaries & Employee Benefits	130,755						130,755
Operating Expenses	14,086						14,086
Capital Expenses							
Subtotal Direct Expenses	144,841						144,841
Indirect Expenses	17,381						17,381
<b>TOTAL FUNDING USES</b>	<b>162,222</b>						<b>162,222</b>
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>	<b>Accounting Code (Index Code or Detail)</b>						
MH GRANT SAMSHA Adult SOC, CFDA #93.958	HMM007-1601	162,222					162,222
This row left blank for funding sources not in drop-down list							
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>162,222</b>					<b>162,222</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>	<b>Accounting Code (Index Code or Detail)</b>						
This row left blank for funding sources not in drop-down list							
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>							
<b>OTHER DPH FUNDING SOURCES</b>	<b>Accounting Code (Index Code or Detail)</b>						
This row left blank for funding sources not in drop-down list							
<b>TOTAL OTHER DPH FUNDING SOURCES</b>							
<b>TOTAL DPH FUNDING SOURCES</b>		<b>162,222</b>					<b>162,222</b>
<b>NON-DPH FUNDING SOURCES</b>							
This row left blank for funding sources not in drop-down list							
<b>TOTAL NON-DPH FUNDING SOURCES</b>							
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>162,222</b>					<b>162,222</b>
<b>BHS UNITS OF SERVICE AND UNIT COST</b>							
Number of Beds Purchased (if applicable)							
SA Only - Non-Res 33 - ODF # of Group Sessions (classes)							
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program							
Payment Method	Cost Reimbursement (CR)						
DPH Units of Service	Client Full Day	388					
Unit Type							
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)		\$ 418.00	\$		\$		
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)		\$ 418.00	\$		\$		
Published Rate (Medi-Cal Providers Only)							<b>Total UDC</b>
Unduplicated Clients (UDC)		N/A					N/A

Revised 7/1/2015

Appendix B - DPH 3: Salaries & Benefits Detail

Program Name: Peer to Peer Voc Linkage  
 Program Code: N/A

Appendix #: B-3  
 Page #: 2  
 Fiscal Year: 2015-2016  
 Funding Notification Date: 01/07/16

Term (mm/dd/yy-mm/dd/yy):	TOTAL		MH GRANT SAMSHA ADULT (HMM007-1601)		Accounting Code 2 (Index Code or Detail)		Accounting Code 3 (Index Code or Detail)		Accounting Code 4 (Index Code or Detail)		Accounting Code 5 (Index Code or Detail)		Accounting Code 6 (Index Code or Detail)	
	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries
01/01/16-06/30/16														
Position Title														
Director/Manager	0.03	\$ 2,112	0.03	\$ 2,112										
Service Coordinator	2.50	\$ 91,053	2.50	\$ 91,053										
Totals:	2.53	\$ 93,165	2.53	\$ 93,165	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -
Employee Fringe Benefits:	40.3%	\$ 37,590	40.35%	\$ 37,590	0.00%		0.00%		0.00%		0.00%		0.00%	
<b>TOTAL SALARIES &amp; BENEFITS</b>		<b>\$ 130,755</b>		<b>\$ 130,755</b>		<b>\$ -</b>		<b>\$ -</b>		<b>\$ -</b>		<b>\$ -</b>		<b>\$ -</b>

Appendix B - DPH 4: Operating Expenses Detail

Program Name: Peer to Peer Voc Linkage  
 Program Code: N/A

Appendix #: B-3  
 Page #: 3  
 Fiscal Year: 2015-2016  
 Funding Notification Date: 01/01/16

Expense Categories & Line Items	TOTAL	MH GRANT SAMSHA ADULT (HMM007-1601)	Accounting Code 2 (Index Code or Detail)	Accounting Code 3 (Index Code or Detail)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
Term (mm/dd/yy-mm/dd/yy):		01/01/16-06/30/16					
Rent	\$ 3,000	\$ 3,000					
Utilities(telephone, electricity, water, gas)	\$ 2,736	\$ 2,736					
Building Repair/Maintenance	\$ 250	\$ 250					
Occupancy Total:	\$ 5,986	\$ 5,986	\$ -	\$ -	\$ -	\$ -	\$ -
Office Supplies	\$ -	\$ -					
Photocopying	\$ -	\$ -					
Program Supplies	\$ 3,892	\$ 3,892					
Computer Hardware/Software	\$ -	\$ -					
Materials & Supplies Total:	\$ 3,892	\$ 3,892	\$ -	\$ -	\$ -	\$ -	\$ -
Training/Staff Development	\$ 500	\$ 500					
Insurance	\$ 600	\$ 600					
Professional License	\$ -	\$ -					
Permits	\$ -	\$ -					
Equipment Lease & Maintenance	\$ 96	\$ 96					
General Operating Total:	\$ 1,196	\$ 1,196	\$ -	\$ -	\$ -	\$ -	\$ -
Local Travel	\$ 2,256	\$ 2,256					
Out-of-Town Travel	\$ -	\$ -					
Field Expenses	\$ -	\$ -					
Staff Travel Total:	\$ 2,256	\$ 2,256	\$ -	\$ -	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and Amounts) (add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -					
Consultant/Subcontractor Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):							
#REF!	\$ 504	\$ 504					
#REF!	\$ 252	\$ 252					
Other Total:	\$ 756	\$ 756	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 14,086</b>	<b>\$ 14,086</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Revised 7/1/2015

Appendix B - DPH 2: Department of Public Health Cost Reporting Data Collection (CRDC)

DHCS Legal Entity Name (MH)/Contractor Name (SA) 00343		Appendix # B-4		
Provider Name RAMS		Page # 1		
Provider Number 3894		Fiscal Year 2015-2016		
		Funding Notification Date 01/01/16		
Program Name	Information Technology Helpdesk	Information Technology Desktop	Information Technology Advanced Helpdesk	
Program Code	N/A	N/A	N/A	
Mode/SFC (MH) or Modality (SA)	10/30-39	10/30-39	10/30-39	
Service Description	DS-Vocational	DS-Vocational	DS-Vocational	
Funding Term (mm/dd/yy - mm/dd/yy)	01/01/16-06/30/16	01/01/16-06/30/16	01/01/16-06/30/16	
				TOTAL
<b>FUNDING USES</b>				
Salaries & Employee Benefits	188,463	137,114	166,691	492,268
Operating Expenses	23,114	5,114	5,109	33,337
Capital Expenses				
Subtotal Direct Expenses	211,577	142,228	171,800	525,605
Indirect Expenses	25,389	17,067	20,617	63,073
<b>TOTAL FUNDING USES</b>	<b>236,966</b>	<b>159,295</b>	<b>192,417</b>	<b>588,678</b>
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>				
MH MESA (IT) Information Technology	PMHS63-1612	236,966	159,295	191,297
This row left blank for funding sources not in drop-down list				
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>236,966</b>	<b>159,295</b>	<b>191,297</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>				
This row left blank for funding sources not in drop-down list				
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>				
<b>OTHER DPH FUNDING SOURCES</b>				
This row left blank for funding sources not in drop-down list				
<b>TOTAL OTHER DPH FUNDING SOURCES</b>				
<b>TOTAL DPH FUNDING SOURCES</b>		<b>236,966</b>	<b>159,295</b>	<b>191,297</b>
<b>NON-DPH FUNDING SOURCES</b>				
This row left blank for funding sources not in drop-down list				
<b>TOTAL NON-DPH FUNDING SOURCES</b>				
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>236,966</b>	<b>159,295</b>	<b>191,297</b>
<b>BHS UNITS OF SERVICE AND UNITS COST</b>				
Number of Beds Purchased (if applicable)				
SA Only - Non-Res 33 - ODF # of Group Sessions (classes)				
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program				
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	
DPH Units of Service	226	172	157	
Unit Type	Client Full Day	Client Full Day	Client Full Day	0
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	\$ 1,048.52	\$ 926.13	\$ 1,218.45	
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 1,048.52	\$ 926.13	\$ 1,218.45	
Published Rate (Medi-Cal Providers Only)				
Unduplicated Clients (UDC)	15	10	9	34

Revised 7/1/2015

Appendix B - DPH 3; Salaries & Benefits Detail

Program Name: Information Technology  
 Program Code: N/A

Appendix #: B-4  
 Page #: 2  
 Fiscal Year: 2015-2016  
 Funding Notification Date: 01/01/16

Term (mm/dd/yy-mm/dd/yy)	TOTAL		Helpdesk MH MHSA (IT) (PMH563-1612)		Desktop MH MHSA (IT) (PMH563-1612)		Advanced Helpdesk MH MHSA (IT) (PMH563-1612)		Accounting Code 4 (Index Code or Detail)		Accounting Code 5 (Index Code or Detail)		Accounting Code 6 (Index Code or Detail)	
	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries
Director of Vocational Services	0.08	\$ 6,375	0.04	\$ 2,125	0.03	\$ 2,125	0.01	\$ 2,125						
Manager of Vocational IT Services	0.50	\$ 30,900	0.25	\$ 10,300	0.17	\$ 10,300	0.08	\$ 10,300						
Vocational Rehab Counselor/IT Trainer	0.50	\$ 20,800	0.25	\$ 6,867	0.17	\$ 6,867	0.08	\$ 6,868						
IT trainer	1.83	\$ 99,508	1.08	\$ 53,501	0.50	\$ 23,004	0.25	\$ 23,003						
Helpdesk/Desktop/Advanced/IT Helpdesk Trainee	3.17	\$ 80,860	0.95	\$ 24,206	0.72	\$ 18,155	1.51	\$ 38,499						
Application/Desktop Support/Admin Assistant (Client)	2.81	\$ 6,149	1.41	\$ 2,050	0.94	\$ 2,050	0.47	\$ 2,049						
Admin Coordinator/Assistant	0.13	\$ 105,268	0.07	\$ 35,089	0.04	\$ 35,089	0.02	\$ 35,088						
Totals:	9.03	\$ 348,658	4.04	\$ 134,138	2.56	\$ 97,590	2.43	\$ 117,930	0.00	\$ -	0.00	\$ -	0.00	\$ -
Employee Fringe Benefits:	40.5%	\$ 141,610	40.50%	\$ 54,325	40.50%	\$ 39,524	40.50%	\$ 47,761	0.00%	\$ -	0.00%	\$ -	0.00%	\$ -
<b>TOTAL SALARIES &amp; BENEFITS</b>		<b>\$ 491,268</b>		<b>\$ 188,463</b>		<b>\$ 137,114</b>		<b>\$ 165,691</b>		<b>\$ -</b>		<b>\$ -</b>		<b>\$ -</b>

Revised 7/1/2015

Appendix B - DPH 4: Operating Expenses Detail

Program Name: Information Technology  
 Program Code: N/A

Appendix #: B-4  
 Page #: 3  
 Fiscal Year: 2015-2016  
 Funding Notification Date: 01/01/16

Expense Categories & Line Items	TOTAL	Helpdesk MH MHSA (IT) (PMHS63-1612)	Desktop MH MHSA (IT) (PMHS63-1612)	Advanced Helpdesk MH MHSA (IT) (PMHS63-1612)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
Term (mm/dd/yy-mm/dd/yy):		01/01/16-06/30/16	01/01/16-06/30/16	01/01/16-06/30/16			
Rent	\$ 3,780	\$ 1,260	\$ 1,280	\$ 1,260			
Utilities(telephone, electricity, water, gas)	\$ 2,750	\$ 917	\$ 917	\$ 916			
Building Repair/Maintenance	\$ 500	\$ 167	\$ 167	\$ 166			
<b>Occupancy Total:</b>	<b>\$ 7,030</b>	<b>\$ 2,344</b>	<b>\$ 2,344</b>	<b>\$ 2,342</b>	\$ -	\$ -	\$ -
Office Supplies	\$ -	\$ -	\$ -	\$ -			
Photocopying	\$ -	\$ -	\$ -	\$ -			
Program Supplies	\$ 21,207	\$ 19,069	\$ 1,089	\$ 1,089			
Computer Hardware/Software	\$ -	\$ -	\$ -	\$ -			
<b>Materials &amp; Supplies Total:</b>	<b>\$ 21,207</b>	<b>\$ 19,069</b>	<b>\$ 1,069</b>	<b>\$ 1,069</b>	\$ -	\$ -	\$ -
Training/Staff Development	\$ 500	\$ 167	\$ 167	\$ 166			
Insurance	\$ 2,000	\$ 667	\$ 667	\$ 666			
Professional License	\$ -	\$ -	\$ -	\$ -			
Permits	\$ -	\$ -	\$ -	\$ -			
Equipment Lease & Maintenance	\$ -	\$ -	\$ -	\$ -			
<b>General Operating Total:</b>	<b>\$ 2,500</b>	<b>\$ 834</b>	<b>\$ 834</b>	<b>\$ 832</b>	\$ -	\$ -	\$ -
Local Travel	\$ 600	\$ 200	\$ 200	\$ 200			
Out-of-Town Travel	\$ -	\$ -	\$ -	\$ -			
Field Expenses	\$ -	\$ -	\$ -	\$ -			
<b>Staff Travel Total:</b>	<b>\$ 600</b>	<b>\$ 200</b>	<b>\$ 200</b>	<b>\$ 200</b>	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and Amounts)	\$ -	\$ -	\$ -	\$ -			
(add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -	\$ -	\$ -			
<b>Consultant/Subcontractor Total:</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	\$ -	\$ -	\$ -
Other (provide detail):							
Recruitment & Direct Staff Expenses	\$ 1,500	\$ 500	\$ 500	\$ 500			
Client-Related Food	\$ 500	\$ 167	\$ 167	\$ 166			
<b>Other Total:</b>	<b>\$ 2,000</b>	<b>\$ 667</b>	<b>\$ 667</b>	<b>\$ 666</b>	\$ -	\$ -	\$ -
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 33,337</b>	<b>\$ 23,114</b>	<b>\$ 5,114</b>	<b>\$ 5,109</b>	\$ -	\$ -	\$ -

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**Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)**

DHCS Legal Entity Name (MH)/Contractor Name (SA) 00343						Appendix #	B-5
Provider Name RAMS						Page #	1
Provider Number 3894						Fiscal Year	2015-2016
						Funding Notification Date	01/01/16
Program Name	TAY Vocational Services						
Program Code	N/A						
Mode/SFC (MH) or Modality (SA)	1030-39						
Service Description	US-Vocational						
Funding Term (mm/dd/yy - mm/dd/yy)	01/01/16-06/30/16						<b>TOTAL</b>
<b>FUNDING USES</b>							
Salaries & Employee Benefits	68,828						68,828
Operating Expenses	20,458						20,458
Capital Expenses	-						-
Subtotal Direct Expenses	89,286						89,286
Indirect Expenses	10,714						10,714
<b>TOTAL FUNDING USES</b>	<b>100,000</b>						<b>100,000</b>
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>	Accounting Code (Index Code or Detail)						
MH MSA (CSS)	PMHS63-1604	100,000					100,000
This row left blank for funding sources not in drop-down list							
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>100,000</b>					<b>100,000</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>	Accounting Code (Index Code or Detail)						
This row left blank for funding sources not in drop-down list							
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>							
<b>OTHER DPH FUNDING SOURCES</b>	Accounting Code (Index Code or Detail)						
This row left blank for funding sources not in drop-down list							
<b>TOTAL OTHER DPH FUNDING SOURCES</b>							
<b>TOTAL DPH FUNDING SOURCES</b>		<b>100,000</b>					<b>100,000</b>
<b>NON-DPH FUNDING SOURCES</b>							
This row left blank for funding sources not in drop-down list							
<b>TOTAL NON-DPH FUNDING SOURCES</b>							
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>100,000</b>					<b>100,000</b>
<b>BHS UNITS OF SERVICE AND UNIT COSTS</b>							
Number of Beds Purchased (if applicable)							
SA Only - Non-Res 33 - ODF # of Group Sessions (classes)							
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program							
Payment Method	Cost Reimbursement (CR)						
DPH Units of Service	Client Full Day	182					
Unit Type		0	0	0	0		
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)		\$ 549.45	\$ -	\$ -	\$ -	\$ -	
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)		\$ 549.45	\$ -	\$ -	\$ -	\$ -	
Published Rate (Medi-Cal Providers Only)							
Unduplicated Clients (UDC)	N/A						Total UDC N/A

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Appendix B - DPH 3: Salaries & Benefits Detail

Program Name: TAY Vocational Services  
 Program Code: N/A

Appendix #: B-5  
 Page #: 2  
 Fiscal Year: 2015-2016  
 Funding Notification Date: 01/01/16

Term (mm/dd/yy-mm/dd/yy):	TOTAL		MH MESA (CSS) (PRR1583-1804)		Accounting Code 2 (Index Code or Detail)		Accounting Code 3 (Index Code or Detail)		Accounting Code 4 (Index Code or Detail)		Accounting Code 5 (Index Code or Detail)		Accounting Code 6 (Index Code or Detail)	
	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries
01/01/16-06/30/16														
TAY Vocational Services Coordinator	0.50	\$ 30,000	0.50	\$ 30,000										
Program Assistant	0.50	\$ 22,500	0.50	\$ 22,500										
Totals:	1.00	\$ 52,500	1.00	\$ 52,500	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -
Employee Fringe Benefits:	31.1%	\$ 16,328	31.10%	\$ 16,328	0.00%		0.00%		0.00%		0.00%		0.00%	
<b>TOTAL SALARIES &amp; BENEFITS</b>		<b>\$ 68,828</b>		<b>\$ 68,828</b>		<b>\$ -</b>		<b>\$ -</b>		<b>\$ -</b>		<b>\$ -</b>		<b>\$ -</b>

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**Appendix B - DPH 4: Operating Expenses Detail**

Program Name: TAY Vocational Services  
 Program Code: N/A

Appendix #: B-5  
 Page #: 3  
 Fiscal Year: 2015-2016  
 Funding Notification Date: 01/01/16

Expense Categories & Line Items	TOTAL	MH MSA (CSS) (PMHS63-1604)	Accounting Code 2 (Index Code or Detail)	Accounting Code 3 (Index Code or Detail)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
<b>Term (mm/dd/yy-mm/dd/yy):</b>		01/01/16-06/30/16					
Rent	\$ 1,200	\$ 1,200					
Utilities(telephone, electricity, water, gas)	\$ 240	\$ 240					
Building Repair/Maintenance	\$ 60	\$ 60					
<b>Occupancy Total:</b>	<b>\$ 1,500</b>	<b>\$ 1,500</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Office Supplies	\$ -	\$ -					
Photocopying	\$ -	\$ -					
Program Supplies	\$ 3,560	\$ 3,560					
Computer Hardware/Software	\$ -	\$ -					
<b>Materials &amp; Supplies Total:</b>	<b>\$ 3,560</b>	<b>\$ 3,560</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Training/Staff Development	\$ 800	\$ 800					
Insurance	\$ 498	\$ 498					
Professional License	\$ -	\$ -					
Permits	\$ -	\$ -					
Equipment Lease & Maintenance	\$ -	\$ -					
<b>General Operating Total:</b>	<b>\$ 1,298</b>	<b>\$ 1,298</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Local Travel	\$ 1,200	\$ 1,200					
Out-of-Town Travel	\$ -	\$ -					
Field Expenses	\$ -	\$ -					
<b>Staff Travel Total:</b>	<b>\$ 1,200</b>	<b>\$ 1,200</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and Amounts) (add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -					
<b>Consultant/Subcontractor Total:</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Other (provide detail):							
#REF!	\$ 300	\$ 300					
#REF!	\$ 9,600	\$ 9,600					
#REF!	\$ 3,000	\$ 3,000					
<b>Other Total:</b>	<b>\$ 12,900</b>	<b>\$ 12,900</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 20,458</b>	<b>\$ 20,458</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Revised 7/1/2015



**Appendix C  
Insurance Waiver**

Reserved

**Appendix D  
Additional Terms**

**I. PROTECTED HEALTH INFORMATION AND BAA**

The parties acknowledge that CITY is a Covered Entity as defined in the Healthcare Insurance Portability and Accountability Act of 1996 ("HIPAA") and is required to comply with the HIPAA Privacy Rule governing the access, transmission, and storage of health information.

The parties acknowledge that CONTRACTOR is one of the following:

- CONTRACTOR will render services under this contract that include possession or knowledge of identifiable Protected Health Information (PHI), such as health status, health care history, or payment for health care history obtained from CITY. Specifically, CONTRACTOR will:
- Create PHI
  - Receive PHI
  - Maintain PHI
  - Transmit PHI and/or
  - Access PHI

**The Business Associate Agreement (BAA) in Appendix E is required. Please note that BAA requires attachments to be completed.**

- CONTRACTOR will not have knowledge of, create, receive, maintain, transmit, or have access to any Protected Health Information (PHI), such as health status, health care history, or payment for health care history obtained from CITY.

**2. THIRD PARTY BENEFICIARIES**

No third parties are intended by the parties hereto to be third party beneficiaries under this Agreement, and no action to enforce the terms of this Agreement may be brought against either party by any person who is not a party hereto.

Use this section if the Agreement involves any federal funds:

**3. CERTIFICATION REGARDING LOBBYING**

CONTRACTOR certifies to the best of its knowledge and belief that:

A. No federally appropriated funds have been paid or will be paid, by or on behalf of CONTRACTOR to any persons for influencing or attempting to influence an officer or an employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the entering into of any federal cooperative agreement, or the extension, continuation, renewal, amendment, or modification of a federal contract, grant, loan or cooperative agreement.

B. If any funds other than federally appropriated funds have been paid or will be paid to any persons for influencing or attempting to influence an officer or employee of an agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan or cooperative agreement, CONTRACTOR shall complete and submit Standard Form -111, "Disclosure Form to Report Lobbying," in accordance with the form's instructions.

C. CONTRACTOR shall require the language of this certification be included in the award documents for all subawards at all tiers, (including subcontracts, subgrants, and contracts under grants, loans and cooperation agreements) and that all subrecipients shall certify and disclose accordingly.

D. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

**4. EMERGENCY RESPONSE**

CONTRACTOR will develop and maintain an Agency Disaster and Emergency Response Plan containing Site Specific Emergency Response Plan(s) for each of its service sites. The agency-wide plan should address disaster coordination between and among service sites. CONTRACTOR will update the Agency/site(s) plan as needed and CONTRACTOR will train all employees regarding the provisions of the plan for their Agency/site(s). CONTRACTOR will attest on its annual Community Programs' Contractor Declaration of Compliance whether it has developed and maintained an Agency Disaster and Emergency Response Plan, including a site specific emergency response plan for each of its service site. CONTRACTOR is advised that Community Programs Contract Compliance Section staff will review these plans during a compliance site review. Information should be kept in an Agency/Program

Administrative Binder, along with other contractual documentation requirements for easy accessibility and inspection.

In a declared emergency, CONTRACTOR'S employees shall become emergency workers and participate in the emergency response of Community Programs, Department of Public Health. Contractors are required to identify and keep Community Programs staff informed as to which two staff members will serve as CONTRACTOR'S prime contacts with Community Programs in the event of a declared emergency.





## Appendix E



### San Francisco Department of Public Health Business Associate Agreement

This Business Associate Agreement ("Agreement") supplements and is made a part of the contract or Memorandum of Understanding ("CONTRACT") by and between the City and County of San Francisco, Covered Entity ("CE") and Contractor, Business Associate ("BA"). To the extent that the terms of the Contract are inconsistent with the terms of this Agreement, the terms of this Agreement shall control.

#### RECITALS

- A. CE wishes to disclose certain information to BA pursuant to the terms of the Contract, some of which may constitute Protected Health Information ("PHI") (defined below).
- B. CE and BA intend to protect the privacy and provide for the security of PHI disclosed to BA pursuant to the CONTRACT in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 ("HIPAA"), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 ("the HITECH Act"), and regulations promulgated there under by the U.S. Department of Health and Human Services (the "HIPAA Regulations") and other applicable laws, including, but not limited to, California Civil Code §§ 56, et seq., California Health and Safety Code § 1280.15, California Civil Code §§ 1798, et seq., California Welfare & Institutions Code §§ 5328, et seq., and the regulations promulgated there under (the "California Regulations").
- C. As part of the HIPAA Regulations, the Privacy Rule and the Security Rule (defined below) require CE to enter into a contract containing specific requirements with BA prior to the disclosure of PHI, as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(a) and (e) and 164.504(e) of the Code of Federal Regulations ("C.F.R.") and contained in this Agreement.
- D. BA enters into agreements with CE that require the CE to disclose certain identifiable health information to BA. The parties desire to enter into this Agreement to permit BA to have access to such information and comply with the BA requirements of HIPAA, the HITECH Act, and the HIPAA Regulations.

In consideration of the mutual promises below and the exchange of information pursuant to this Agreement, the parties agree as follows:

#### 1. Definitions.

- a. **Breach** means the unauthorized acquisition, access, use, or disclosure of PHI that compromises the security or privacy of such information, except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information, and shall have the meaning given to such term under the HITECH Act and HIPAA Regulations [42 U.S.C. Section 17921 and 45 C.F.R. Section 164.402], as well as California Civil Code Sections 1798.29 and 1798.82.
- b. **Breach Notification Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and D.
- c. **Business Associate** is a person or entity that performs certain functions or activities that involve the use or disclosure of protected health information received from a covered entity, and shall have the meaning given to such term under the Privacy Rule, the Security Rule, and the HITECH Act, including, but not limited to, 42 U.S.C. Section 17938 and 45 C.F.R. Section 160.103.
- d. **Covered Entity** means a health plan, a health care clearinghouse, or a health care provider who transmits any information in electronic form in connection with a transaction covered under HIPAA Regulations, and shall have the meaning given



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- to such term under the Privacy Rule and the Security Rule, including, but not limited to, 45 C.F.R. Section 160.103.
- e. **Data Aggregation** means the combining of Protected Information by the BA with the Protected Information received by the BA in its capacity as a BA of another CE, to permit data analyses that relate to the health care operations of the respective covered entities, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.
  - f. **Designated Record Set** means a group of records maintained by or for a CE, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.
  - g. **Electronic Protected Health Information** means Protected Health Information that is maintained in or transmitted by electronic media and shall have the meaning given to such term under HIPAA and the HIPAA Regulations, including, but not limited to, 45 C.F.R. Section 160.103. For the purposes of this Agreement, Electronic PHI includes all computerized data, as defined in California Civil Code Sections 1798.29 and 1798.82.
  - h. **Electronic Health Record** means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff, and shall have the meaning given to such term under the HITECT Act, including, but not limited to, 42 U.S.C. Section 17921.
  - i. **Health Care Operations** means any of the following activities: i) conducting quality assessment and improvement activities; ii) reviewing the competence or qualifications of health care professionals; iii) underwriting, enrollment, premium rating, and other activities related to the creation, renewal, or replacement of a contract of health insurance or health benefits; iv) conducting or arranging for medical review, legal services, and auditing functions; v) business planning development; vi) business management and general administrative activities of the entity. This shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.
  - j. **Privacy Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and E.
  - k. **Protected Health Information or PHI** means any information, including electronic PHI, whether oral or recorded in any form or medium; (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Sections 160.103 and 164.501. For the purposes of this Agreement, PHI includes all medical information and health insurance information as defined in California Civil Code Sections 56.05 and 1798.82.
  - l. **Protected Information** shall mean PHI provided by CE to BA or created, maintained, received or transmitted by BA on CE's behalf.
  - m. **Security Incident** means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system, and shall have the meaning given to such term under the Security Rule, including, but not limited to, 45 C.F.R. Section 164.304.
  - n. **Security Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and C.
  - o. **Unsecured PHI** means PHI that is not secured by a technology standard that renders PHI unusable, unreadable, or indecipherable to unauthorized individuals



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and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute, and shall have the meaning given to such term under the HITECH Act and any guidance issued pursuant to such Act including, but not limited to, 42 U.S.C. Section 17932(h) and 45 C.F.R. Section 164.402.

**2. Obligations of Business Associate.**

- a. **Permitted Uses.** BA may use, access, and/or disclose PHI only for the purpose of performing BA's obligations for or on behalf of the City and as permitted or required under the Contract [MOU] and Agreement, or as required by law. Further, BA shall not use PHI in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so used by CE. However, BA may use Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE [45 C.F.R. Sections 164.502, 164.504(e)(2), and 164.504(e)(4)(i)].
- b. **Permitted Disclosures.** BA shall disclose Protected Information only for the purpose of performing BA's obligations for or on behalf of the City and as permitted or required under the Contract [MOU] and Agreement, or as required by law. BA shall not disclose Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so disclosed by CE. However, BA may disclose Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE. If BA discloses Protected Information to a third party, BA must obtain, prior to making any such disclosure, (i) reasonable written assurances from such third party that such Protected Information will be held confidential as provided pursuant to this Agreement and used or disclosed only as required by law or for the purposes for which it was disclosed to such third party, and (ii) a written agreement from such third party to immediately notify BA of any breaches, security incidents, or unauthorized uses or disclosures of the Protected Information in accordance with paragraph 2. k. of the Agreement, to the extent it has obtained knowledge of such occurrences [42 U.S.C. Section 17932; 45 C.F.R. Section 164.504(e)]. BA may disclose PHI to a BA that is a subcontractor and may allow the subcontractor to create, receive, maintain, or transmit Protected Information on its behalf, if the BA obtains satisfactory assurances, in accordance with 45 C.F.R. Section 164.504(e)(1), that the subcontractor will appropriately safeguard the information [45 C.F.R. Section 164.502(e)(1)(ii)].
- c. **Prohibited Uses and Disclosures.** BA shall not use or disclose PHI other than as permitted or required by the Contract and Agreement, or as required by law. BA shall not use or disclose Protected Information for fundraising or marketing purposes. BA shall not disclose Protected Information to a health plan for payment or health care operations purposes if the patient has requested this special restriction, and has paid out of pocket in full for the health care item or service to which the PHI solely relates [42 U.S.C. Section 17935(a) and 45 C.F.R. Section 164.522(a)(1)(vi)]. BA shall not directly or indirectly receive remuneration in exchange for Protected Information, except with the prior written consent of CE and as permitted by the HITECH Act, 42 U.S.C. Section 17935(d)(2), and the HIPAA regulations, 45 C.F.R. Section 164.502(a)(5)(ii); however, this prohibition shall not affect payment by CE to BA for services provided pursuant to the Contract.



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- d. **Appropriate Safeguards.** BA shall take the appropriate security measures to protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains, or transmits on behalf of the CE, and shall prevent any use or disclosure of PHI other than as permitted by the Contract or this Agreement, including, but not limited to, administrative, physical and technical safeguards in accordance with the Security Rule, including, but not limited to, 45 C.F.R. Sections 164.306, 164.308, 164.310, 164.312, 164.314, 164.316, and 164.504(e)(2)(ii)(B). BA shall comply with the policies and procedures and documentation requirements of the Security Rule, including, but not limited to, 45 C.F.R. Section 164.316, and 42 U.S.C. Section 17931. BA is responsible for any civil penalties assessed due to an audit or investigation of BA, in accordance with 42 U.S.C. Section 17934(c).
- e. **Business Associate's Subcontractors and Agents.** BA shall ensure that any agents and subcontractors that create, receive, maintain or transmit Protected Information on behalf of BA, agree in writing to the same restrictions and conditions that apply to BA with respect to such PHI and implement the safeguards required by paragraph 2.d. above with respect to Electronic PHI [45 C.F.R. Section 164.504(e)(2) through (e)(5); 45 C.F.R. Section 164.308(b)]. BA shall mitigate the effects of any such violation.
- f. **Accounting of Disclosures.** Within ten (10) calendar days of a request by CE for an accounting of disclosures of Protected Information or upon any disclosure of Protected Information for which CE is required to account to an individual, BA and its agents and subcontractors shall make available to CE the information required to provide an accounting of disclosures to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.528, and the HITECH Act, including, but not limited to 42 U.S.C. Section 17935 (c), as determined by CE. BA agrees to implement a process that allows for an accounting to be collected and maintained by BA and its agents and subcontractors for at least six (6) years prior to the request. However, accounting of disclosures from an Electronic Health Record for treatment, payment or health care operations purposes are required to be collected and maintained for only three (3) years prior to the request, and only to the extent that BA maintains an Electronic Health Record. At a minimum, the information collected and maintained shall include: (i) the date of disclosure; (ii) the name of the entity or person who received Protected Information and, if known, the address of the entity or person; (iii) a brief description of Protected Information disclosed; and (iv) a brief statement of purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure [45 C.F.R. 164.528(b)(2)]. If an individual or an individual's representative submits a request for an accounting directly to BA or its agents or subcontractors, BA shall forward the request to CE in writing within five (5) calendar days.
- g. **Access to Protected Information.** BA shall make Protected Information maintained by BA or its agents or subcontractors in Designated Record Sets available to CE for inspection and copying within (5) days of request by CE to enable CE to fulfill its obligations under state law [Health and Safety Code Section 123110] and the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.524 [45 C.F.R. Section 164.504(e)(2)(ii)(E)]. If BA maintains Protected Information in electronic format, BA shall provide such information in electronic format as necessary to enable CE to fulfill its obligations under the HITECH Act and HIPAA Regulations, including, but not limited to, 42 U.S.C. Section 17935(e) and 45 C.F.R. 164.524.



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- h. **Amendment of Protected Information.** Within ten (10) days of a request by CE for an amendment of Protected Information or a record about an individual contained in a Designated Record Set, BA and its agents and subcontractors shall make such Protected Information available to CE for amendment and incorporate any such amendment or other documentation to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.526. If an individual requests an amendment of Protected Information directly from BA or its agents or subcontractors, BA must notify CE in writing within five (5) days of the request and of any approval or denial of amendment of Protected Information maintained by BA or its agents or subcontractors [45 C.F.R. Section 164.504(e)(2)(ii)(F)].
- i. **Governmental Access to Records.** BA shall make its internal practices, books and records relating to the use and disclosure of Protected Information available to CE and to the Secretary of the U.S. Department of Health and Human Services (the "Secretary") for purposes of determining BA's compliance with HIPAA [45 C.F.R. Section 164.504(e)(2)(ii)(D)]. BA shall provide CE a copy of any Protected Information and other documents and records that BA provides to the Secretary concurrently with providing such Protected Information to the Secretary.
- j. **Minimum Necessary.** BA, its agents and subcontractors shall request, use and disclose only the minimum amount of Protected Information necessary to accomplish the intended purpose of such use, disclosure, or request. [42 U.S.C. Section 17935(b); 45 C.F.R. Section 164.514(d)]. BA understands and agrees that the definition of "minimum necessary" is in flux and shall keep itself informed of guidance issued by the Secretary with respect to what constitutes "minimum necessary" to accomplish the intended purpose in accordance with HIPAA and HIPAA Regulations.
- k. **Data Ownership.** BA acknowledges that BA has no ownership rights with respect to the Protected Information.
- l. **Notification of Breach.** BA shall notify CE within 5 calendar days of any breach of Protected Information; any use or disclosure of Protected Information not permitted by the Agreement; any Security Incident (except as otherwise provided below) related to Protected Information, and any use or disclosure of data in violation of any applicable federal or state laws by BA or its agents or subcontractors. The notification shall include, to the extent possible, the identification of each individual whose unsecured Protected Information has been, or is reasonably believed by the BA to have been, accessed, acquired, used, or disclosed, as well as any other available information that CE is required to include in notification to the individual, the media, the Secretary, and any other entity under the Breach Notification Rule and any other applicable state or federal laws, including, but not limited to, 45 C.F.R. Section 164.404 through 45 C.F.R. Section 164.408, at the time of the notification required by this paragraph or promptly thereafter as information becomes available. BA shall take (i) prompt corrective action to cure any deficiencies and (ii) any action pertaining to unauthorized uses or disclosures required by applicable federal and state laws. [42 U.S.C. Section 17921; 42 U.S.C. Section 17932; 45 C.F.R. 164.410; 45 C.F.R. Section 164.504(e)(2)(ii)(C); 45 C.F.R. Section 164.308(b)]
- m. **Breach Pattern or Practice by Business Associate's Subcontractors and Agents.** Pursuant to 42 U.S.C. Section 17934(b) and 45 C.F.R. Section 164.504(e)(1)(iii), if the BA knows of a pattern of activity or practice of a subcontractor or agent that constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this Agreement, the BA must take reasonable steps to cure the breach or end the violation. If the steps are



San Francisco Department of Public Health  
Business Associate Agreement

unsuccessful, the BA must terminate the contractual arrangement with its subcontractor or agent, if feasible. BA shall provide written notice to CE of any pattern of activity or practice of a subcontractor or agent that BA believes constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this Agreement within five (5) calendar days of discovery and shall meet with CE to discuss and attempt to resolve the problem as one of the reasonable steps to cure the breach or end the violation.

3. Termination.

- a. **Material Breach.** A breach by BA of any provision of this Agreement, as determined by CE, shall constitute a material breach of the CONTRACT and this Agreement and shall provide grounds for immediate termination of the CONTRACT and this Agreement, any provision in the CONTRACT to the contrary notwithstanding. [45 C.F.R. Section 164.504(e)(2)(iii)].
- b. **Judicial or Administrative Proceedings.** CE may terminate the CONTRACT and this Agreement, effective immediately, if (i) BA is named as defendant in a criminal proceeding for a violation of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws or (ii) a finding or stipulation that the BA has violated any standard or requirement of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws is made in any administrative or civil proceeding in which the party has been joined.
- c. **Effect of Termination.** Upon termination of the CONTRACT and this Agreement for any reason, BA shall, at the option of CE, return or destroy all Protected Information that BA and its agents and subcontractors still maintain in any form, and shall retain no copies of such Protected Information. If return or destruction is not feasible, as determined by CE, BA shall continue to extend the protections and satisfy the obligations of Section 2 of this Agreement to such information, and limit further use and disclosure of such PHI to those purposes that make the return or destruction of the information infeasible [45 C.F.R. Section 164.504(e)(2)(ii)(J)]. If CE elects destruction of the PHI, BA shall certify in writing to CE that such PHI has been destroyed in accordance with the Secretary's guidance regarding proper destruction of PHI.
- d. **Civil and Criminal Penalties.** BA understands and agrees that it is subject to civil or criminal penalties applicable to BA for unauthorized use, access or disclosure or Protected Information in accordance with the HIPAA Regulations and the HITECH Act including, but not limited to, 42 U.S.C. 17934 (c).
- e. **Disclaimer.** CE makes no warranty or representation that compliance by BA with this Agreement, HIPAA, the HITECH Act, or the HIPAA Regulations or corresponding California law provisions will be adequate or satisfactory for BA's own purposes. BA is solely responsible for all decisions made by BA regarding the safeguarding of PHI.

4. Amendment to Comply with Law.

The parties acknowledge that state and federal laws relating to data security and privacy are rapidly evolving and that amendment of the CONTRACT or this Agreement may be required to provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations and other applicable state or federal laws relating to the security or confidentiality of PHI. The parties understand and agree that CE must receive satisfactory written assurance



San Francisco Department of Public Health  
Business Associate Agreement

from BA that BA will adequately safeguard all Protected Information. Upon the request of either party, the other party agrees to promptly enter into negotiations concerning the terms of an amendment to this Agreement embodying written assurances consistent with the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable state or federal laws. CE may terminate the Contract upon thirty (30) days written notice in the event (i) BA does not promptly enter into negotiations to amend the CONTRACT or this Agreement when requested by CE pursuant to this section or (ii) BA does not enter into an amendment to the Contract or this Agreement providing assurances regarding the safeguarding of PHI that CE, in its sole discretion, deems sufficient to satisfy the standards and requirements of applicable laws.

**5. Reimbursement for Fines or Penalties.**

In the event that CE pays a fine to a state or federal regulatory agency, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible use or disclosure of PHI by BA or its subcontractors or agents, then BA shall reimburse CE in the amount of such fine or penalties or damages within thirty (30) calendar days.

Office of Compliance and Privacy Affairs  
San Francisco Department of Public Health  
101 Grove Street, Room 330, San Francisco, CA 94102  
Email: [compliance.privacy@sfdph.org](mailto:compliance.privacy@sfdph.org)  
Hotline (Toll-Free): 1-855-729-6040





Appendix F



**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

\_\_\_\_\_

Contractor: Richmond Area Multi-Services, Inc.- Voc Rehab-Janitorial

Address: 639 14th Avenue, San Francisco, CA 94118

Tel No.: (415) 668-5955  
Fax No.: (415) 668-0246



Funding Term: 01/01/2016 - 06/30/2016

PHP Division: Community Behavioral Health Services

INVOICE NUMBER: M33 JA 16

Ct. Blanket No.: BPHM TBD

Ct. PO No.: POHM TBD

Fund Source: General Fund

Invoice Period: January 2016

Final Invoice: (Check if Yes)

ACE Control Number: \_\_\_\_\_

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-1 Janitorial Services - HMMCC730515 ✓												
10/ 30 - 39 DS-Vocational	1,170						0%	#DIV/0!	1,170		100%	#DIV/0!

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 238,760.00	\$ -	\$ -	0.00%	\$ 238,760.00
Fringe Benefits	\$ 142,065.00	\$ -	\$ -	0.00%	\$ 142,065.00
<b>Total Personnel Expenses</b>	<b>\$ 380,825.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 380,825.00</b>
<b>Operating Expenses</b>					
Occupancy	\$ -	\$ -	\$ -	0.00%	\$ -
Materials and Supplies	\$ 67,712.00	\$ -	\$ -	0.00%	\$ 67,712.00
General Operating	\$ 3,372.00	\$ -	\$ -	0.00%	\$ 3,372.00
Staff Travel	\$ 1,683.00	\$ -	\$ -	0.00%	\$ 1,683.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses	\$ 1,685.00	\$ -	\$ -	0.00%	\$ 1,685.00
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 74,452.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 74,452.00</b>
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 455,277.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 455,277.00</b>
Indirect Expenses	\$ 54,633.00	\$ -	\$ -	0.00%	\$ 54,633.00
<b>TOTAL EXPENSES</b>	<b>\$ 509,910.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 509,910.00</b>
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		<b>\$ -</b>			

NOTES:  
HMMCC730515 - \$508,891.00  
HMMCP751594 - \$3,019.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Date: \_\_\_\_\_  
Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

\_\_\_\_\_

Contractor: **Richmond Area Multi-Services, Inc.- Voc Rehab-Janitorial**

Address: 639 14th Avenue, San Francisco, CA 94118

Tel No.: (415) 668-5955  
Fax No.: (415) 668-0246



Funding Term: 01/01/2016 - 06/30/2016

PHP Division: Community Behavioral Health Services

INVOICE NUMBER: M37 JA 16

Cl. Blanket No.: BPHM TBD

Cl. PO No.: POHM TBD

Fund Source: MH MHS A (CSS)

Invoice Period: January 2016

Final Invoice: \_\_\_\_\_ (Check if Yes)

ACE Control Number: \_\_\_\_\_

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-1 Janitorial Services - HMHMPROP63-PMHS63-1605 Y												
10/ 30 - 39 DS-Vocational	218				-	-	0%	#DIV/0!	218	-	100%	#DIV/0!

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 44,609.00	\$ -	\$ -	0.00%	\$ 44,609.00
Fringe Benefits	\$ 26,541.00	\$ -	\$ -	0.00%	\$ 26,541.00
<b>Total Personnel Expenses</b>	<b>\$ 71,150.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 71,150.00</b>
<b>Operating Expenses</b>					
Occupancy	\$ -	\$ -	\$ -	0.00%	\$ -
Materials and Supplies	\$ 12,650.00	\$ -	\$ -	0.00%	\$ 12,650.00
General Operating	\$ 630.00	\$ -	\$ -	0.00%	\$ 630.00
Staff Travel	\$ 315.00	\$ -	\$ -	0.00%	\$ 315.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses	\$ 313.00	\$ -	\$ -	0.00%	\$ 313.00
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 13,908.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 13,908.00</b>
<b>Capital Expenditures</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ -</b>
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 85,058.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 85,058.00</b>
Indirect Expenses	\$ 10,207.00	\$ -	\$ -	0.00%	\$ 10,207.00
<b>TOTAL EXPENSES</b>	<b>\$ 95,265.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 95,265.00</b>

Less: Initial Payment Recovery		NOTES:
Other Adjustments (DPH use only)		
<b>REIMBURSEMENT</b>	\$ -	

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Date: \_\_\_\_\_  
Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

\_\_\_\_\_

**Contractor: Richmond Area Multi-Services, Inc.- Voc Rehab-Janitorial**  
Address: 639 14th Avenue, San Francisco, CA 94118  
Tel No.: (415) 668-5955  
Fax No.: (415) 668-0246

**BHS**

INVOICE NUMBER: M38 JA 16  
Ct. Blanket No.: BPHM TBD  
Ct. PO No.: POHM TBD  
Fund Source: General Fund  
Invoice Period: January 2016  
Final Invoice: (Check if Yes)  
ACE Control Number: \_\_\_\_\_

Funding Term: 01/01/2016 - 06/30/2016

PHP Division: Community Behavioral Health Services

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
<b>B-2 Clerical and Mailroom Services - HMMCC730515</b>												
10/30 - 39 DS-Vocational	1,382						0%	#DIV/0!	1,382		100%	#DIV/0!

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 237,610.00	\$ -	\$ -	0.00%	\$ 237,610.00
Fringe Benefits	\$ 132,302.00	\$ -	\$ -	0.00%	\$ 132,302.00
<b>Total Personnel Expenses</b>	<b>\$ 369,912.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 369,912.00</b>
<b>Operating Expenses</b>					
Occupancy	\$ 8,343.00	\$ -	\$ -	0.00%	\$ 8,343.00
Materials and Supplies	\$ 27,709.00	\$ -	\$ -	0.00%	\$ 27,709.00
General Operating	\$ 10,012.00	\$ -	\$ -	0.00%	\$ 10,012.00
Staff Travel	\$ 5,006.00	\$ -	\$ -	0.00%	\$ 5,006.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses	\$ 3,339.00	\$ -	\$ -	0.00%	\$ 3,339.00
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 54,409.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 54,409.00</b>
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 424,321.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 424,321.00</b>
Indirect Expenses	\$ 50,919.00	\$ -	\$ -	0.00%	\$ 50,919.00
<b>TOTAL EXPENSES</b>	<b>\$ 475,240.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 475,240.00</b>
<b>Less: Initial Payment Recovery</b>					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		\$ -			

NOTES:  
HMMCC730515 - \$473,104.00  
HMMCP751594 - \$2,136.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

\_\_\_\_\_

Contractor: Richmond Area Multi-Services, Inc.- Voc Rehab-Clerical

Address: 639 14th Avenue, San Francisco, CA 94118

Tel No.: (415) 668-5955  
Fax No.: (415) 668-0246



Funding Term: 01/01/2016 - 06/30/2016

PHP Division: Community Behavioral Health Services

INVOICE NUMBER: M39 JA 16

Ct. Blanket No.: BPHM TBD

Ct. PO No.: POHM TBD

Fund Source: MH MSA (CSS)

Invoice Period: January 2016

Final Invoice: (Check if Yes)

ACE Control Number: \_\_\_\_\_

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-2 Clerical and Mailroom Services - HMHMPROP63-PMHS63-1605												
10/30 - 39 DS-Vocational	274						0%	#DIV/0!	274		100%	#DIV/0!

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 47,176.00	\$ -	\$ -	0.00%	\$ 47,176.00
Fringe Benefits	\$ 26,268.00	\$ -	\$ -	0.00%	\$ 26,268.00
<b>Total Personnel Expenses</b>	<b>\$ 73,444.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 73,444.00</b>
<b>Operating Expenses</b>					
Occupancy	\$ 1,657.00	\$ -	\$ -	0.00%	\$ 1,657.00
Materials and Supplies	\$ 5,501.00	\$ -	\$ -	0.00%	\$ 5,501.00
General Operating	\$ 1,988.00	\$ -	\$ -	0.00%	\$ 1,988.00
Staff Travel	\$ 994.00	\$ -	\$ -	0.00%	\$ 994.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses	\$ 663.00	\$ -	\$ -	0.00%	\$ 663.00
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 10,803.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 10,803.00</b>
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 84,247.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 84,247.00</b>
Indirect Expenses	\$ 10,110.00	\$ -	\$ -	0.00%	\$ 10,110.00
<b>TOTAL EXPENSES</b>	<b>\$ 94,357.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 94,357.00</b>

Less: Initial Payment Recovery	
Other Adjustments (DPH use only)	
<b>REIMBURSEMENT</b>	<b>\$ -</b>

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

\_\_\_\_\_

INVOICE NUMBER:	M40 JA 16
CL Blanket No.: BPHM	TBD
	User Cd
CL PO No.: POHM	TBD
Fund Source:	MH Grant - SAMSHA Adult SOC
Invoice Period:	January 2016
Final Invoice:	(Check if Yes)
ACE Control Number:	

Contractor: Richmond Area Multi-Services, Inc.- Voc Rehab-Peer-Peer

Address: 639 14th Avenue, San Francisco, CA 94118

Tel No.: (415) 668-5955  
Fax No.: (415) 668-0246



Funding Term: 01/01/2016 - 06/30/2016

PHP Division: Community Behavioral Health Services

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-3 Peer to Peer Vocational Linkage - HMHMRGRANTS -HMM007-1601												
10/ 30 - 39 DS-Vocational	388						0%	#DIV/0!	388		100%	#DIV/0!

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 93,165.00	\$ -	\$ -	0.00%	\$ 93,165.0
Fringe Benefits	\$ 37,590.00	\$ -	\$ -	0.00%	\$ 37,590.0
<b>Total Personnel Expenses</b>	<b>\$ 130,755.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 130,755.0</b>
<b>Operating Expenses</b>					
Occupancy	\$ 5,986.00	\$ -	\$ -	0.00%	\$ 5,986.0
Materials and Supplies	\$ 3,892.00	\$ -	\$ -	0.00%	\$ 3,892.0
General Operating	\$ 1,196.00	\$ -	\$ -	0.00%	\$ 1,196.0
Staff Travel	\$ 2,256.00	\$ -	\$ -	0.00%	\$ 2,256.0
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses, Client	\$ 756.00	\$ -	\$ -	0.00%	\$ 756.0
Related Food	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 14,086.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 14,086.0</b>
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 144,841.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 144,841.0</b>
Indirect Expenses	\$ 17,381.00	\$ -	\$ -	0.00%	\$ 17,381.0
<b>TOTAL EXPENSES</b>	<b>\$ 162,222.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 162,222.0</b>
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		<b>\$ -</b>			

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Date: \_\_\_\_\_  
Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

\_\_\_\_\_

Contractor: Richmond Area Multi-Services, Inc.- Voc Rehab-IT HelpDesk

Address: 639 14th Avenue, San Francisco, CA 94118

Tel No.: (415) 668-5955  
Fax No.: (415) 668-0246

**BHS**

Funding Term: 01/01/2016 - 06/30/2016.

PHP Division: Community Behavioral Health Services

INVOICE NUMBER:	M41 JA 16
Ct. Blanket No.: BPHM	TBD
Ct. PO No.: POHM	TBD
Fund Source:	MH MSA (IT) Information Technolog
Invoice Period:	January 2016
Final Invoice:	(Check if Yes)
ACE Control Number:	

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
<b>B-4 Information Technology Helpdesk - HMHMPROP63-PMHS63-1612</b>												
10/ 30 - 39 DS-Vocational	226	15					0%	0%	226	15	100%	

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 134,138.00	\$ -	\$ -	0.00%	\$ 134,138.00
Fringe Benefits	\$ 54,325.00	\$ -	\$ -	0.00%	\$ 54,325.00
<b>Total Personnel Expenses</b>	<b>\$ 188,463.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 188,463.00</b>
<b>Operating Expenses</b>					
Occupancy	\$ 2,344.00	\$ -	\$ -	0.00%	\$ 2,344.00
Materials and Supplies	\$ 19,069.00	\$ -	\$ -	0.00%	\$ 19,069.00
General Operating	\$ 834.00	\$ -	\$ -	0.00%	\$ 834.00
Staff Travel	\$ 200.00	\$ -	\$ -	0.00%	\$ 200.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses, Client Related Food	\$ 667.00	\$ -	\$ -	0.00%	\$ 667.00
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 23,114.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 23,114.00</b>
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 211,577.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 211,577.00</b>
Indirect Expenses	\$ 25,389.00	\$ -	\$ -	0.00%	\$ 25,389.00
<b>TOTAL EXPENSES</b>	<b>\$ 236,966.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 236,966.00</b>
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		\$ -			

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Date: \_\_\_\_\_  
Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date



**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number  
\_\_\_\_\_

Contractor: **Richmond Area Multi-Services, Inc.- Voc Rehab-IT HelpDesk**

Address: 639.14th Avenue, San Francisco, CA 94118

Tel No.: (415) 668-5955  
Fax No.: (415) 668-0246



Funding Term: 01/01/2016 - 06/30/2016

PHP Division: Community Behavioral Health Services

INVOICE NUMBER: M42 JA 16  
 Ct. Blanket No.: BPHM TBD  
 Ct. PO No.: POHM TBD  
 Fund Source: MH MHSa (IT) Information Technology  
 Invoice Period: January 2016  
 Final Invoice: (Check If Yes)  
 ACE Control Number: \_\_\_\_\_

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-4 Information Technology Desktop - HMHPROP63-PMHS63-1612												
10/30 - 39 DS-Vocational	172	10					0%	0%	172	10	100%	10

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 97,590.00	\$ -	\$ -	0.00%	\$ 97,590.00
Fringe Benefits	\$ 39,524.00	\$ -	\$ -	0.00%	\$ 39,524.00
<b>Total Personnel Expenses</b>	<b>\$ 137,114.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 137,114.00</b>
<b>Operating Expenses</b>					
Occupancy	\$ 2,344.00	\$ -	\$ -	0.00%	\$ 2,344.00
Materials and Supplies	\$ 1,069.00	\$ -	\$ -	0.00%	\$ 1,069.00
General Operating	\$ 834.00	\$ -	\$ -	0.00%	\$ 834.00
Staff Travel	\$ 200.00	\$ -	\$ -	0.00%	\$ 200.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses, Client	\$ 667.00	\$ -	\$ -	0.00%	\$ 667.00
Related Food	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 5,114.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 5,114.00</b>
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 142,228.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 142,228.00</b>
Indirect Expenses	\$ 17,067.00	\$ -	\$ -	0.00%	\$ 17,067.00
<b>TOTAL EXPENSES</b>	<b>\$ 159,295.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 159,295.00</b>
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		\$ -			

NOTES:  
 \_\_\_\_\_  
 \_\_\_\_\_

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_  
 Title: \_\_\_\_\_

Date: \_\_\_\_\_  
 Phone: \_\_\_\_\_

Send to:  
 Behavioral Health Services-Budget/Invoice Analyst  
 1380 Howard St., 4th Floor  
 San Francisco, CA 94103

DPH Authorization for Payment  
 \_\_\_\_\_  
 Authorized Signatory \_\_\_\_\_ Date \_\_\_\_\_

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

\_\_\_\_\_

INVOICE NUMBER:	M43 JA 16
Cl. Blanket No.: BPHM	TBD
	User Cd
Cl. PO No.: POHM	TBD
Fund Source:	MH MHA (IT) Information Technology
Invoice Period:	January 2016
Final Invoice:	(Check if Yes)
ACE Control Number:	

Contractor: Richmond Area Multi-Services, Inc.- Voc Rehab-IT HelpDesk

Address: 639 14th Avenue, San Francisco, CA 94118

Tel No.: (415) 668-5955  
Fax No.: (415) 668-0246



Funding Term: 01/01/2016 - 06/30/2016

PHP Division: Community Behavioral Health Services

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-4 Information Technology Advanced Helpdesk - HMMHPROP63-PMHS63-1612												
10/30 - 39 DS-Vocational	157	9					0%	0%	157	9	100%	100

Unduplicated Counts for AIDS Use Only:

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 117,930.00	\$ -	\$ -	0.00%	\$ 117,930.00
Fringe Benefits	\$ 47,761.00	\$ -	\$ -	0.00%	\$ 47,761.00
<b>Total Personnel Expenses</b>	<b>\$ 165,691.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 165,691.00</b>
<b>Operating Expenses</b>					
Occupancy	\$ 2,342.00	\$ -	\$ -	0.00%	\$ 2,342.00
Materials and Supplies	\$ 1,069.00	\$ -	\$ -	0.00%	\$ 1,069.00
General Operating	\$ 832.00	\$ -	\$ -	0.00%	\$ 832.00
Staff Travel	\$ 200.00	\$ -	\$ -	0.00%	\$ 200.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses, Client	\$ 666.00	\$ -	\$ -	0.00%	\$ 666.00
Related Food	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 5,109.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 5,109.00</b>
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 170,800.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 170,800.00</b>
Indirect Expenses	\$ 20,497.00	\$ -	\$ -	0.00%	\$ 20,497.00
<b>TOTAL EXPENSES</b>	<b>\$ 191,297.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 191,297.00</b>
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		<b>\$ -</b>			

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Date: \_\_\_\_\_  
Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment.

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

INVOICE NUMBER: M44 JA 16

Cl. Blanket No.: BPHM TBD

Cl. PO No.: POHM TBD

Fund Source: MH MHA (CSS)

Invoice Period: January 2016

Final Invoice:  (Check if Yes)

ACE Control Number:

Contractor: **Richmond Area Multi-Services, Inc.- Voc Rehab-IT HelpDesk**

Address: 639 14th Avenue, San Francisco, CA 94118

Tel No.: (415) 668-5955  
Fax No.: (415) 668-0246



Funding Term: 01/01/2016 - 06/30/2016

PHP Division: Community Behavioral Health Services

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-5 TAY Vocational Services - HMHMPROP63-PMHS63-1604/10/30 - 39 DS-Vocational	182						0%	#DIV/0!	182		100%	#DIV/0!

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 52,500.00	\$ -	\$ -	0.00%	\$ 52,500.00
Fringe Benefits	\$ 16,328.00	\$ -	\$ -	0.00%	\$ 16,328.00
<b>Total Personnel Expenses</b>	<b>\$ 68,828.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 68,828.00</b>
<b>Operating Expenses</b>					
Occupancy	\$ 1,500.00	\$ -	\$ -	0.00%	\$ 1,500.00
Materials and Supplies	\$ 3,560.00	\$ -	\$ -	0.00%	\$ 3,560.00
General Operating	\$ 1,298.00	\$ -	\$ -	0.00%	\$ 1,298.00
Staff Travel	\$ 1,200.00	\$ -	\$ -	0.00%	\$ 1,200.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses, Client Related Food, Client Stipends	\$ 12,900.00	\$ -	\$ -	0.00%	\$ 12,900.00
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 20,458.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 20,458.00</b>
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 89,286.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 89,286.00</b>
Indirect Expenses	\$ 10,714.00	\$ -	\$ -	0.00%	\$ 10,714.00
<b>TOTAL EXPENSES</b>	<b>\$ 100,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 100,000.00</b>
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		\$ -			

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date



## Appendix G

### Dispute Resolution Procedure For Health and Human Services Nonprofit Contractors 9-06

#### Introduction

The City Nonprofit Contracting Task Force submitted its final report to the Board of Supervisors in June 2003. The report contains thirteen recommendations to streamline the City's contracting and monitoring process with health and human services nonprofits. These recommendations include: (1) consolidate contracts, (2) streamline contract approvals, (3) make timely payment, (4) create review/appellate process, (5) eliminate unnecessary requirements, (6) develop electronic processing, (7) create standardized and simplified forms, (8) establish accounting standards, (9) coordinate joint program monitoring, (10) develop standard monitoring protocols, (11) provide training for personnel, (12) conduct tiered assessments, and (13) fund cost of living increases. The report is available on the Task Force's website at [http://www.sfgov.org/site/npcontractingtf\\_index.asp?id=1270](http://www.sfgov.org/site/npcontractingtf_index.asp?id=1270). The Board adopted the recommendations in February 2004. The Office of Contract Administration created a Review/Appellate Panel ("Panel") to oversee implementation of the report recommendations in January 2005.

The Board of Supervisors strongly recommends that departments establish a Dispute Resolution Procedure to address issues that have not been resolved administratively by other departmental remedies. The Panel has adopted the following procedure for City departments that have professional service grants and contracts with nonprofit health and human service providers. The Panel recommends that departments adopt this procedure as written (modified if necessary to reflect each department's structure and titles) and include it or make a reference to it in the contract. The Panel also recommends that departments distribute the finalized procedure to their nonprofit contractors. Any questions or concerns about this Dispute Resolution Procedure should be addressed to [purchasing@sfgov.org](mailto:purchasing@sfgov.org).

#### Dispute Resolution Procedure

The following Dispute Resolution Procedure provides a process to resolve any disputes or concerns relating to the administration of an awarded professional services grant or contract between the City and County of San Francisco and nonprofit health and human services contractors.

Contractors and City staff should first attempt to come to resolution informally through discussion and negotiation with the designated contact person in the department.

If informal discussion has failed to resolve the problem, contractors and departments should employ the following steps:

- Step 1 The contractor will submit a written statement of the concern or dispute addressed to the Contract/Program Manager who oversees the agreement in question. The writing should describe the nature of the concern or dispute, i.e., program, reporting, monitoring, budget, compliance or other concern. The Contract/Program Manager will investigate the concern with the appropriate department staff that are involved with the nonprofit agency's program, and will either convene a meeting with the contractor or provide a written response to the contractor within 10 working days.
- Step 2 Should the dispute or concern remain unresolved after the completion of Step 1, the contractor may request review by the Division or Department Head who supervises the Contract/Program Manager. This request shall be in writing and should describe why the concern is still unresolved and propose a solution that is satisfactory to the contractor. The Division or Department Head will

consult with other Department and City staff as appropriate, and will provide a written determination of the resolution to the dispute or concern within 10 working days.

- Step 3 Should Steps 1 and 2 above not result in a determination of mutual agreement, the contractor may forward the dispute to the Executive Director of the Department or their designee. This dispute shall be in writing and describe both the nature of the dispute or concern and why the steps taken to date are not satisfactory to the contractor. The Department will respond in writing within 10 working days.

In addition to the above process, contractors have an additional forum available only for disputes that concern implementation of the thirteen policies and procedures recommended by the Nonprofit Contracting Task Force and adopted by the Board of Supervisors. These recommendations are designed to improve and streamline contracting, invoicing and monitoring procedures. For more information about the Task Force's recommendations, see the June 2003 report at [http://www.sfgov.org/site/npcontractingtf\\_index.asp?id=1270](http://www.sfgov.org/site/npcontractingtf_index.asp?id=1270).

The Review/Appellate Panel oversees the implementation of the Task Force report. The Panel is composed of both City and nonprofit representatives. The Panel invites contractors to submit concerns about a department's implementation of the policies and procedures. Contractors can notify the Panel after Step 2. However, the Panel will not review the request until all three steps are exhausted. This review is limited to a concern regarding a department's implementation of the policies and procedures in a manner which does not improve and streamline the contracting process. This review is not intended to resolve substantive disputes under the contract such as change orders, scope, term, etc. The contractor must submit the request in writing to [purchasing@sfgov.org](mailto:purchasing@sfgov.org). This request shall describe both the nature of the concern and why the process to date is not satisfactory to the contractor. Once all steps are exhausted and upon receipt of the written request, the Panel will review and make recommendations regarding any necessary changes to the policies and procedures or to a department's administration of policies and procedures.

## Appendix H

### San Francisco Department of Public Health Privacy Policy Compliance Standards

As part of this Agreement, Contractor acknowledges and agrees to comply with the following:

In City's Fiscal Year 2003/04, a DPH Privacy Policy was developed and contractors advised that they would need to comply with this policy as of July 1, 2005.

As of July 1, 2004, contractors were subject to audits to determine their compliance with the DPH Privacy Policy using the six compliance standards listed below. Audit findings and corrective actions identified in City's Fiscal year 2004/05 were to be considered informational, to establish a baseline for the following year.

Beginning in City's Fiscal Year 2005/06, findings of compliance or non-compliance and corrective actions were to be integrated into the contractor's monitoring report.

**Item #1: DPH Privacy Policy is integrated in the program's governing policies and procedures regarding patient privacy and confidentiality.**

As Measured by: Existence of adopted/approved policy and procedure that abides by the rules outlined in the DPH Privacy Policy

**Item #2: All staff who handle patient health information are oriented (new hires) and trained in the program's privacy/confidentiality policies and procedures.**

As Measured by: Documentation showing individual was trained exists

**Item #3: A Privacy Notice that meets the requirements of the Federal Privacy Rule (HIPAA) is written and provided to all patients/clients served in their threshold and other languages. If document is not available in the patient's/client's relevant language, verbal translation is provided.**

As Measured by: Evidence in patient's/client's chart or electronic file that patient was "noticed." (Examples in English, Cantonese, Vietnamese, Tagalog, Spanish, Russian will be provided.)

**Item #4: A Summary of the above Privacy Notice is posted and visible in registration and common areas of treatment facility.**

As Measured by: Presence and visibility of posting in said areas. (Examples in English, Cantonese, Vietnamese, Tagalog, Spanish, Russian will be provided.)

**Item #5: Each disclosure of a patient's/client's health information for purposes other than treatment, payment, or operations is documented.**

As Measured by: Documentation exists.

**Item #6: Authorization for disclosure of a patient's/client's health information is obtained prior to release (1) to non-treatment providers or (2) from a substance abuse program.**

As Measured by: An authorization form that meets the requirements of the Federal Privacy Rule (HIPAA) is available to program staff and, when randomly asked, staff are aware of circumstances when authorization form is needed.





Appendix I

Emergency Response

CONTRACTOR will develop and maintain an Agency Disaster and Emergency Response Plan containing Site Specific Emergency Response Plan(s) for each of its service sites. The agency-wide plan should address disaster coordination between and among service sites. CONTRACTOR will update the Agency/site(s) plan as needed and CONTRACTOR will train all employees regarding the provisions of the plan for their Agency/site(s). CONTRACTOR will attest on its annual Community Programs' Contractor Declaration of Compliance whether it has developed and maintained an Agency Disaster and Emergency Response Plan, including a site specific emergency response plan for each of its service sites. CONTRACTOR is advised that Community Programs Contract Compliance Section staff will review these plans during a compliance site review. Information should be kept in an Agency/Program Administrative Binder, along with other contractual documentation requirements for easy accessibility and inspection.

In a declared emergency, CONTRACTOR'S employees shall become emergency workers and participate in the emergency response of Community Programs, Department of Public Health. Contractors are required to identify and keep Community Programs staff informed as to which two staff members will serve as CONTRACTOR'S prime contacts with Community Programs in the event of a declared emergency.



**Appendix J**

**THE DECLARATION OF COMPLIANCE**

Each Fiscal Year, CONTRACTOR attests with a Declaration of Compliance that each program site has an Administrative Binder that contains all of the forms, policies, statements, and documentation required by Community Behavioral Health Services (CBHS). The Declaration of Compliance also lists requirements for site postings of public and client information, and client chart compliance if client charts are maintained. CONTRACTOR understands that the Community Programs Business Office of Contract Compliance may visit a program site at any time to ensure compliance with all items of the Declaration of Compliance.



**Appendix K**  
**Grant Term**





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## STANDARD TERMS AND CONDITIONS (COOPERATIVE AGREEMENT)

### COOPERATIVE AGREEMENT:

This cooperative agreement funds and sets out the terms and conditions governing a collaborative effort between the (Grantee Organization Name) and the Center for Substance Abuse Treatment (CSAT), Center for Substance Abuse Prevention (CSAP), Center for Mental Health Services (CMHS), Substance Abuse and Mental Health Services Administration (SAMHSA).

While the responsibility for conducting these activities lies primarily with (Grantee Organization Name), the Center for Substance Abuse Treatment (CSAT), Center for Substance Abuse Prevention (CSAP), Center for Mental Health Services (CMHS), Substance Abuse and Mental Health Services Administration (SAMHSA), through its designated representatives shall provide continuing technical assistance, consultation, and coordination in the conduct of the project during the period of this agreement. In addition to these terms and conditions and the applicable statutes and regulations, grantees are bound by the HHS Grants Policy Statement and all requirements in the Request for Applications (RFA) document.

### ROLE OF GRANTEE:

Grantees must:

- (1) Comply with terms and conditions of the cooperative agreement award.
- (2) Collaborate with CSAT/CSAP/CMHS staff in project implementation and monitoring.

### ROLE OF GOVERNMENT PROJECT OFFICER:

The Government Project Officer (GPO) will have overall responsibility for monitoring the conduct and progress of Grantee Sites, including conducting site visits. The GPO will provide substantial input, in collaboration with the grantees, both in the planning and implementation of the program and in evaluation activities, and will make recommendations regarding program continuance. Likewise, GPOs will participate in the publication of results and packaging and dissemination of products and materials in order to make the findings available to the field. CSAT/CSAP/CMHS/SAMHSA staff will receive authorship/co-authorship credit on all publications to which they have made substantial contributions.

## **ROLE OF THE GRANTS MANAGEMENT OFFICER:**

The Grants Management Officer (GMO) is responsible for all business management aspects of negotiation, award, and financial and administrative aspects of the cooperative agreement. The GMO utilizes information from site visits, reviews of expenditure and audit reports, and other appropriate means to assure that the project is operated in compliance with all applicable Federal laws, regulations, guidelines, and the terms and conditions of award. Questions concerning the applicability of regulations and policies to this cooperative agreement, and all requests for required prior approvals such as requests for permission to expend funds for certain items should be directed to the GMO. Required approvals must be provided in writing and the GMO is the only person, except for the SAMHSA Administrator, who may grant such required approvals. Written approvals granted by other officials are not binding on the government. All changes in the terms of the cooperative agreement award must be issued in writing by the GMO.

## **SPECIAL TERM OF AWARD:**

Your organization may be permitted to automatically carryover, without prior approval from SAMHSA, an unobligated balance of funds to the second budget period (FY 2015) up to 10 percent of the Federal share; however, SAMHSA reserves the right to suspend this practice.

## **STANDARD TERMS OF AWARD:**

1. As required by the Federal Funding Accountability and Transparency Act of 2006, this new award is subject to the subaward and executive compensation reporting requirement of 2 CFR Part 170. Although the full text of this regulation is attached, you may access the language online at <http://www.samhsa.gov/grants/subaward.aspx>.

The following SAMHSA Term of Award is applicable to all (Type 1) new SAMHSA grants which start on or after Oct. 1, 2010. At this time, Type 2s (competing renewals) and Type 3s (competing supplements) are not included, but may be subject to this requirement in the future:

### **Reporting Subawards and Executive Compensation**

#### **a. Reporting of first-tier subawards.**

1. **Applicability.** Unless you are exempt as provided in paragraph d. of this award term, you must report each action that obligates \$25,000 or more in Federal funds that does not include Recovery funds (as defined in section 1512(a)(2) of the American Recovery and Reinvestment Act of 2009, Pub. L. 111-5) for a subaward to an entity (see definitions in paragraph e. of this award term).

2. **Where and when to report.**



i. You must report each obligating action described in paragraph a.1. of this award term to <http://www.fsrs.gov>.

ii. For subaward information, report no later than the end of the month following the month in which the obligation was made. (For example, if the obligation was made on November 7, 2010, the obligation must be reported by no later than December 31, 2010.)

3. What to report. You must report the information about each obligating action that the submission instructions posted at <http://www.fsrs.gov> specify.

**b. Reporting Total Compensation of Recipient Executives.**

1. Applicability and what to report. You must report total compensation for each of your five most highly compensated executives for the preceding completed fiscal year, if:

i. the total Federal funding authorized to date under this award is \$25,000 or more;

ii. in the preceding fiscal year, you received:

(A) 80 percent or more of your annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and

(B) \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and

iii. The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/excomp.htm>.)

2. Where and when to report. You must report executive total compensation described in paragraph b.1. of this award term:

i. As part of your registration profile, you must access the System for Award Management (SAM) at: <https://www.sam.gov/portal/public/SAM/>.

ii. By the end of the month following the month in which this award is made, and annually thereafter.

**c. Reporting of Total Compensation of Subrecipient Executives.**

1. Applicability and what to report. Unless you are exempt as provided in paragraph d. of this award term, for each first-tier subrecipient under this award, you shall report the names and

total compensation of each of the subrecipient's five most highly compensated executives for the subrecipient's preceding completed fiscal year, if-

i. In the subrecipient's preceding fiscal year, the subrecipient received-

(A) 80 percent or more of its annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and

(B) \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts), and Federal financial assistance subject to the Transparency Act (and subawards); and

ii. The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/excomp.htm>.)

2. Where and when to report. You must report subrecipient executive total compensation described in paragraph c.1. of this award term:

i. To the recipient:

ii. By the end of the month following the month during which you make the subaward. For example, if a subaward is obligated on any date during the month of October of a given year (i.e., between October 1 and 31), you must report any required compensation information of the subrecipient by November 30 of that year.

d. Exemptions

If, in the previous tax year, you had gross income, from all sources, under \$300,000, you are exempt from the requirements to report:

i. Subawards, and

ii. The total compensation of the five most highly compensated executives of any subrecipient.

e. Definitions. For purposes of this award term:

1. Entity means all of the following, as defined in 2 CFR part 25:

i. A Governmental organization, which is a State, local government, or Indian tribe;

ii. A foreign public entity;

iii. A domestic or foreign nonprofit organization;

iv. A domestic or foreign for-profit organization;

v. A Federal agency, but only as a subrecipient under an award or subaward to a non-Federal entity.

2. Executive means officers, managing partners, or any other employees in management positions.

3. Subaward:

i. This term means a legal instrument to provide support for the performance of any portion of the substantive project or program for which you received this award and that you as the recipient award to an eligible subrecipient.

ii. The term does not include your procurement of property and services needed to carry out the project or program (for further explanation, see Sec. II.210 of the attachment to OMB Circular A-133, "Audits of States, Local Governments, and Non-Profit Organizations").

iii. A subaward may be provided through any legal agreement, including an agreement that you or a subrecipient considers a contract.

4. Subrecipient means an entity that:

i. Receives a subaward from you (the recipient) under this award; and

ii. Is accountable to you for the use of the Federal funds provided by the subaward.

5. Total compensation means the cash and noncash dollar value earned by the executive during the recipient's or subrecipient's preceding fiscal year and includes the following (for more information see 17 CFR 229.402(c)(2)):

i. Salary and bonus.

ii. Awards of stock, stock options, and stock appreciation rights. Use the dollar amount recognized for financial statement reporting purposes with respect to the fiscal year in accordance with the Statement of Financial Accounting Standards No. 123 (Revised 2004) (FAS 123R), Shared Based Payments.

iii. Earnings for services under non-equity incentive plans. This does not include group life, health, hospitalization or medical reimbursement plans that do not discriminate in favor of executives, and are available generally to all salaried employees.

iv. Change in pension value. This is the change in present value of defined benefit and actuarial pension plans.

v. Above-market earnings on deferred compensation which is not tax-qualified.

vi. Other compensation, if the aggregate value of all such other compensation (e.g. severance, termination payments, value of life insurance paid on behalf of the employee, perquisites or property) for the executive exceeds \$10,000.

2) The Division of Grants Management created a Public Assistance (P) Account in Payment Management Services to provide a separate accounting of federal funds per SAMHSA grant. When discussing your account with the Payment Management Services Account Representative, provide the document number identified on Page 2 of the Notice of Award (NoA) under Section I - AWARD DATA, Fiscal Information.

3) As the grantee organization, you acknowledge acceptance of the grant terms and conditions by drawing down or otherwise obtaining funds from the Payment Management Services. In doing so, your organization must ensure that you exercise prudent stewardship over Federal funds and that all costs are allowable, allocable and reasonable.

4) Grantees must adhere to all applicable requirements of the Fiscal Year 2012 Consolidated Appropriations Act provisions in PL 112-74 for the Department of Labor, Health and Human Services, and Education and the Department of Interior and Related Agencies and from the Consolidated and Further Continuing Appropriations Act, Fiscal Year 2012, Public Law 112-55 for the United States Department of Agriculture, and Related Agencies.

5) This grant is subject to the terms and conditions as stated in Section III (Terms and Conditions) of the NoA. Refer to the "order of precedence" that explains the laws and regulations that govern the award.

6) The grantee organization is legally and financially responsible for all aspects of this grant, including funds provided to sub-recipients.

7) The Department of Health and Human Services' (HHS), Office of General Counsel (OGC) has provided guidance on how the lobbying restrictions in the Fiscal Year 2012 Consolidated Appropriations Act (CAA, 2012) will affect HHS programs. Section 503 of the Labor, HHS, and Education Appropriation Act (Division F of the CAA, 2012) is the most comprehensive provision focused on lobbying restrictions. Recent changes to this section may have implications for SAMHSA and its grantees. Language provided by OGC, below provides specific guidance on: agency actions; grantee lobbying; tax increases and other restrictions on legal consumer products; and clarification of Internal Revenue Code provisions.

#### SEC. 503.- Agency Actions

a) No part of any appropriation contained in this Act or transferred pursuant to section 4002 of Public Law 111-148 shall be used, other than for normal and recognized executive-legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication,

electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation to the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government, except in presentation to the executive branch of any State or local government itself.

**Section 503(b) - Grantee and Contractor Lobbying**

- b) No part of any appropriation contained in this Act or transferred pursuant to section 4002 of Public Law 111-148 shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government.
  - c) The prohibitions in subsections (a) and (b) shall include any activity to advocate or promote any proposed, pending or future Federal, State or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control.
- 8) Grant funds cannot be used to supplant current funding of existing activities. Under the HHS Grants Policy Directives, 1.02 General – Definition: Supplant is to replace funding of a recipient's existing program with funds from a Federal grant.
- 9) The recommended future support as indicated on the NoA reflects TOTAL costs (direct plus indirect). Funding is subject to the availability of Federal funds, and that matching funds, (if applicable); is verifiable, progress of the grant is documented and acceptable.
- 10) For FY 2014, the Consolidated Appropriations Act, 2014 (Public Law 113-76) signed into law on January 17, 2014, restricts the amount of direct salary to Executive Level II of the Federal Executive Pay scale. The Executive Level II salary is \$181,500 annually.
- 11) "Confidentiality of Alcohol and Drug Abuse Patient Records" regulations (42 CFR 2) are applicable to any information about alcohol and other drug abuse patients obtained by a "program" (42 CFR 2.11), if the program is federally assisted in any manner (42 CFR 2.12b).

Accordingly, all project patient records are confidential and may be disclosed and used only

in accordance with (42 CFR 2). The grantee is responsible for assuring compliance with these regulations and principles, including responsibility for assuring the security and confidentiality of all electronically transmitted patient material.

- 12) Accounting Records and Disclosure - Awardees and sub-recipients must maintain records which adequately identify the source and application of funds provided for financially assisted activities. These records must contain information pertaining to grant or subgrant awards and authorizations, obligations, unobligated balances, assets, liabilities, outlays or expenditures, and income. The awardee, and all its sub-recipients, should expect that SAMHSA, or its designee, may conduct a financial compliance audit and on-site program review of grants with significant amounts of Federal funding.
- 13) Per (2 CFR Part 215, 45 CFR 74.36 and 45 CFR 92.34) and the HHS Grants Policy Statement, any copyrighted or copyrightable works developed under this cooperative agreement/grant shall be subject to a royalty-free, nonexclusive and irrevocable license to the government to reproduce, publish, or otherwise use them and to authorize others to do so for Federal Government purposes. Income earned from any copyrightable work developed under this grant must be used a program income.
- 14) A notice in response to the President's Welfare-to-Work Initiative was published in the Federal Register on May 16, 1997. This initiative is designed to facilitate and encourage grantees and their sub-recipients to hire welfare recipients and to provide additional needed training and/or mentoring as needed. The text of the notice is available electronically on the OMB home page at <http://www.whitehouse.gov/omb/fedreg/omb-not.html>.
- 15) Program income accrued under the award must be accounted for in accordance with (2 CFR Part 215 and 45 CFR 74.24) or (45 CFR 92.25) as applicable. Program income must be reported on the Federal Financial Report, Standard Form 425.

Program income accrued under this award may be used in accordance with the additional costs alternative described in (45 CFR 74.24(b)(1)) or (45 CFR 92.25(g)(2)) as applicable. Program income must be used to further the grant objectives and shall only be used for allowable costs as set forth in the applicable OMB Circulars A-102 ("Grants and Cooperative Agreements with State and Local Governments") and A-110 ("Uniform Administrative Requirements for Grants and Agreements With Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations").

- 16) Actions that require prior approval must be submitted in writing to the Grants Management Officer (GMO), SAMHSA. The request must bear the signature of an authorized business official of the grantee organization as well as the project director. Approval of the request may only be granted by the GMO and will be in writing. No other written or oral approval should be accepted and will not be binding with SAMHSA. Post Award requirements and instructions may be found at [www.samhsa.gov](http://www.samhsa.gov), then click on "grants", then "grants

management<sup>2</sup>.

- 17) The recipient is required to notify the Government Program Official (GPO) in writing if the Project Director (PD) or key personnel specifically named in the NoA will withdraw from the project entirely, be absent from the project during any continuous period of 3 months or more, or reduce time devoted to the project by 25 percent or more from the level that was approved at the time of award (for example, a proposed change from 40 percent effort to 30 percent or less effort). SAMHSA must approve any alternate arrangement proposed by the recipient, including any replacement of the PD or key personnel named in the NoA.

The request for approval of a substitute PD/key person should include a justification for the change, the biographical sketch of the individual proposed, other sources of support (if applicable), and any budget changes resulting from the proposed change. If the arrangements proposed by the recipient, including the qualifications of any proposed replacement, are not acceptable to SAMHSA, the grant may be suspended or terminated. If the recipient wants to terminate the project because it cannot make suitable alternate arrangements, it must notify the GMO, in writing, of its wish to terminate, and the GMO will forward closeout instructions.

Key staff (or key staff positions, if staff has not been selected) are listed below:

Joe Smith, Project Director @ (i.e., 10%) level of effort

Name, Evaluator @ unstated level of effort

All changes in key staff including level of effort must be sent electronically to the GPO including a biographical sketch and other documentation and information as stated above who will make a recommendation for approval or disapproval to the assigned Grants Management Specialist. Only the GMO, SAMHSA may approve Key Staff Changes.

- 18) Refer to the NoA under Section II (Payment/Hotline Information) regarding the Payment Management Services and the HHS Inspector General's Hotline concerning fraud, waste or abuse.

19) No HHS funds may be paid as profit (fees) per (45 CFR Parts 74.81 and 92.22(2)).

- 20) Where a conference is funded by a grant or cooperative agreement the recipient must include the following statement on all conference materials (including promotional materials, agenda, and Internet sites):

Funding for this conference was made possible (in part) by (insert grant or cooperative agreement award number) from SAMHSA. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade

names, commercial practices, or organizations imply endorsement by the U.S. Government.

- 21) If federal funds are used by the grantee to attend a meeting, conference, etc. and meal(s) are provided as part of the program, then the per diem applied to the Federal travel costs (M&IE allowance) must be reduced by the allotted meal cost(s).
- 22) This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to <http://samhsa.gov/grants/trafficking.aspx>.
- 23) Grantees must comply with the requirements of the National Historical Preservation Act and EO 13287, Preserve America. The HHS Grants Policy Statement provides clarification and uniform guidance regarding preservation issues and requirements (pages I-20, "Preservation of Cultural and Historical Resources"). Questions concerning historical preservation, please contact SAMHSA's Office of Program Services, Building, Logistics and Telecommunications Branch at 240-276-1001.
- 24) Executive Order 13410: Promoting Quality and Efficient Health Care in Federal Government Administered or Sponsored Health Care Programs promotes efficient delivery of quality health care through the use of health information technology, transparency regarding health care quality and price, and incentives to promote the widespread adoption of health information technology and quality of care. Accordingly, all grantees that electronically exchange patient level health information to external entities where national standards exist must:

- a) Use recognized health information interoperability standards at the time of any HIT system update, acquisition, or implementation, in all relevant information technology systems supported, in whole or in part, through this agreement/contract. Please consult <http://www.hhs.gov/healthit> for more information, and
- b) Use Electronic Health Record systems (EHRs) that are certified by agencies authorized by the Office of the National Coordinator for Health Information Technology (ONC), or that will be certified during the life of the grant. For additional information contact: Jim Kretz at 240-276-1755 or [Jim.Kretz@samhsa.hhs.gov](mailto:Jim.Kretz@samhsa.hhs.gov); Kathryn Wetherby at 240-276-2899 or [Kathryn.Wetherby@samhsa.hhs.gov](mailto:Kathryn.Wetherby@samhsa.hhs.gov). Questions and issues may be raised on SAMHSA's HIT Forum at <http://cmhbbs.samhsa.gov/>.

- 25) By signing the Application for Federal Assistance (SF-424) Item #21, the Authorized Representative (AR) certifies (1) to the statements contained in the list of certifications and (2) provides the required assurances and checking the "I AGREE" box provides SAMHSA with the AR's agreement of compliance. It is not necessary to submit signed copies of these documents, but should be retained for your records. Assurance and Certification pages can



be located at the following link: <http://www.samhsa.gov/Grants/ApplicationKit.aspx> or contained within the Request for Applications (RFA).

**REPORTING REQUIREMENTS:**

- 1) **Federal Financial Report (FFR) – (Standard Form 424) is required on an annual basis and must be submitted no later than 90 days after the end of the budget period.**
  - a) **SINGLE GRANT REPORTING IS REQUIRED FOR EACH SAMHSA PROJECT AS STATED ON THE FFR (#10 d-o). Do not include any amount in Line 10f that has been reported in Line 10e. If applicable, include the required match on this form under Recipient Share (#10 i-k) and Program Income (l-o) in order for SAMHSA to determine whether matching is being provided and the rate of expenditure is appropriate. Adjustments to the award amount, if necessary, will be made if the grantee fails to meet the match.**
  - b) **The FFR must be prepared on a cumulative basis and all program income must be reported.**
  - c) **If your organization intends to automatically carryover an unobligated balance of funds from the prior year(s) up to 10 percent of the federal share as reflected in the current Notice of Award, it must be stated in the Remarks section (#12) of the FFR. The subsequent FFR must reflect the actual carryover amount in the Remarks section (#12) also. If the actual carryover amount exceeds the 10 percent threshold, the excess grant funds must be returned. SAMHSA reserves the right to change and/or suspend the practice of permitting grantees to automatically carryover unobligated balances of funds without prior approval.**
  - d) **When submitting the FFR to SAMHSA, the amounts reported under Transactions (#10 a-c) to the (DPM), must equal or be reconciled with the Federal Expenditures and Unobligated Balance reported in (#10d-h). The FFR may be accessed from the following website at [http://www.whitehouse.gov/omb/grants\\_forms](http://www.whitehouse.gov/omb/grants_forms) including Instructions. The data can be entered directly on the form and the system will calculate the figures, then it can be printed and mailed to this office.**
- 2) **Submission of a Programmatic (annual, semi-annual or quarterly) Report is due no later than the dates (i.e., January 1, 2014, January 1, 2015, etc.) as follows:**

1st Report -	, XXXX
2nd Report -	, XXXX
3rd Report -	, XXXX
4th Report -	, XXXX
- 3) **The grantee must comply with the GPRA requirements that include the collection and periodic reporting of performance data as specified in the RFA or by the Program Official. This**

information is needed in order to comply with PL 102-62 which requires that SAMHSA report evaluation data to ensure the effectiveness and efficiency of its programs.

4) Audit requirements for Federal award recipients are detailed at [http://www.whitehouse.gov/sites/default/files/omb/assets/a133/a133\\_revised\\_2007.pdf](http://www.whitehouse.gov/sites/default/files/omb/assets/a133/a133_revised_2007.pdf). Specifically, non-Federal entities that expend a total of \$500,000 or more in Federal awards, during each Fiscal Year, are required to have an audit completed in accordance with OMB Circular A-133. The Circular defines Federal awards as Federal financial assistance (grants) and Federal cost-reimbursement (contracts) received both directly from a Federal awarding agency as well as indirectly from a pass-through entity and requires entities submit, to the Federal Audit Clearinghouse (FAC), a completed Data Collection Form (SF-SAC) along with the Audit Report, within the earlier of 30 days after receipt of the report or 9 months after the fiscal year end.

The Data Collection Forms and Audit Reports MUST be submitted to the FAC electronically at <http://harvester.census.gov/fac/collect/ddeindex.html>. For questions and information concerning the submission process, please visit <http://harvester.census.gov/sac/> or call the FAC 1-800-253-0696.

#### **INDIRECT COSTS:**

If the grantee chooses to establish an indirect cost rate agreement, it is required to submit an indirect cost rate proposal to the appropriate office within 90 days from the start date of the project period. For additional information, please refer to HHS Grants Policy Statement Section J, pages 23-24.

SAMHSA will not accept a research indirect cost rate. The grantee must use other-sponsored program rate or lowest rate available.

Please contact the appropriate office of the Division of Cost Allocation to begin the process for establishing an indirect cost rate. To find a list of HHS Division of Cost Allocation Regional Offices, go to: <https://rates.psc.gov/fms/dca/map1.html>.

Failure to comply with the above stated terms and conditions may result in suspension, classification as High Risk status, termination of this award or denial of funding in the future.

All responses to special terms and conditions of award and post award requests must be electronically mailed to the Division of Grants Management Specialist and to the Government Program Official as identified on your Notice of Award.

It is essential that the Grant Number be included in the SUBJECT line of the email.

# Search Results

Current Search Terms: richmond\* Area\* Multi-Services Inc.\*

Your search for "Richmond\* Area\* Multi-Services\*Inc.\*" returned the following results...

Notice: This printed document represents only the first page of your SAM search results. More results may be available. To print your complete search results, you can download the PDF and print it.

Entity	RICHMOND AREA MULTI-SERVICES, INC.	Status: Active
DUNS: 093436301	CAGE Code: 5Y028	<a href="#">View Details...</a>
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 10/29/2016	Delinquent Federal Debt? No	
Purpose of Registration: All Awards		

Glossary

[Search Results](#)

[Entity](#)

[Exclusion](#)

[Search Filters](#)

[By Record Status](#)

[By Functional Area - Entity Management](#)

[By Functional Area - Performance Information](#)

SAM | System for Award Management 1.0

IBM v1.P.40.20151201-1827

Note to all Users: This is a Federal Government computer system. Use of this system constitutes consent to monitoring at all times.





CONTRACT PURCHASE ORDER RELEASE  
COMMUNITY MENTAL HEALTH SYSTEM

PO NUMBER: DPHM17000226  
PO AMOUNT: \$4,339,756.00

TO: RICHMOND AREA MULTI-SERVICES INC  
3626 BALBOA ST  
SAN FRANCISCO CA 94121-2604

PO PRINT DATE: 01/18/2017

CONTACT: KAVOOS G. BASSIRI,  
PHONE : 415-668-5955 319  
VENDOR ID: 15706

TERMS: NET  
FOB : DEST

ISSUE DATE : 08/18/2016

BPO # : BPHM16000021 <<  
EFF. DATE : 01/01/2016  
EXP. DATE : 12/31/2017

DELIVER TO: 1380 HOWARD ST 4TH FLOOR  
SAN FRANCISCO CA 94103-0000

AUTHORIZED SIGNATURE:

DATE : 1/18/2017  
PHONE :

ORIGINAL ORDER MUST BE SIGNED TO BE VALID

INVOICE TO: SUBSTANCE ABUSE & FORENSICS (HMI01)  
1380 HOWARD ST - RM 444  
SAN FRANCISCO CA 94103-0000

TERMS:

THIS CONTRACT PURCHASE ORDER AND THE ACCOMPANYING SIGNED CONTRACT  
AUTHORIZE YOU TO BEGIN PERFORMING THE CONTRACT AND INVOICING THE  
CITY. THIS IS SUBJECT TO THE TERMS AND CONDITIONS IN THE CONTRACT. ANY  
TERMS AND CONDITIONS ON THE REVERSE OF THIS DOCUMENT DO NOT APPLY.

YOU MUST INCLUDE THE CONTRACT PURCHASE ORDER NUMBER ON ALL INVOICES.



CONTRACT PURCHASE ORDER RELEASE  
 COMMUNITY MENTAL HEALTH SYSTEM

PO NUMBER: DPHM17000226  
 PO AMOUNT: \$4,339,756.00

ITEM	COMMODITY ID	UOM TAX	QUANTITY	UNIT PRICE	TOTAL PRICE
NAME/SPECS					

1	7400-20	EA N	1.00	1,763,015.0000	1,763,015.00
SVC, MED/HLTH; CMH (COMMUNITY MENTAL HEALTH)					

CONTRACTOR: RICHMOND AREA MULTI-SERVICES, INC  
 CONTRACT TERM: 01/01/2016-12/31/2016  
 COMPENSATION: \$4,382,340  
 RAMS VOCATIONAL REHAB PROGRAM PROVIDE EMPLOYMENT AND INTERNSHIP OPPORTUNITIES TO CONSUMERS WITHIN THE COMMUNITY BEHAVIORAL HEALTH SYSTEM.

2	7400-20	EA N	1.00	324,443.0000	324,443.00
SVC, MED/HLTH; CMH (COMMUNITY MENTAL HEALTH)					

CONTRACTOR: RICHMOND AREA MULTI-SERVICES, INC  
 CONTRACT TERM: 01/01/2016-12/31/2016  
 COMPENSATION: \$4,382,340  
 RAMS VOCATIONAL REHAB PROGRAM PROVIDE EMPLOYMENT AND INTERNSHIP OPPORTUNITIES TO CONSUMERS WITHIN THE COMMUNITY BEHAVIORAL HEALTH SYSTEM.

3	7400-20	EA N	1.00	220,000.0000	220,000.00
SVC, MED/HLTH; CMH (COMMUNITY MENTAL HEALTH)					

CONTRACTOR: RICHMOND AREA MULTI-SERVICES, INC  
 CONTRACT TERM: 01/01/2016-12/31/2016  
 COMPENSATION: \$4,382,340  
 RAMS VOCATIONAL REHAB PROGRAM PROVIDE EMPLOYMENT AND INTERNSHIP OPPORTUNITIES TO CONSUMERS WITHIN THE COMMUNITY BEHAVIORAL HEALTH SYSTEM.

4	7400-20	EA N	1.00	670,249.0000	670,249.00
SVC, MED/HLTH; CMH (COMMUNITY MENTAL HEALTH)					

CONTRACTOR: RICHMOND AREA MULTI-SERVICES, INC  
 CONTRACT TERM: 01/01/2016-12/31/2016  
 COMPENSATION: \$4,382,340  
 RAMS VOCATIONAL REHAB PROGRAM PROVIDE EMPLOYMENT AND INTERNSHIP OPPORTUNITIES TO CONSUMERS WITHIN THE COMMUNITY BEHAVIORAL HEALTH SYSTEM.

5	7400-20	EA N	1.00	1,337,748.0000	1,337,748.00
SVC, MED/HLTH; CMH (COMMUNITY MENTAL HEALTH)					

CONTRACTOR: RICHMOND AREA MULTI-SERVICES, INC  
 CONTRACT TERM: 01/01/2016-12/31/2016  
 COMPENSATION: \$4,382,340  
 RAMS VOCATIONAL REHAB PROGRAM PROVIDE EMPLOYMENT AND INTERNSHIP



CONTRACT PURCHASE ORDER RELEASE  
 COMMUNITY MENTAL HEALTH SYSTEM

PO NUMBER: DPHM17000226  
 PO AMOUNT: \$4,339,756.00

ITEM	COMMODITY ID	UOM	TAX	QUANTITY	UNIT PRICE	TOTAL PRICE
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OPPORTUNITIES TO CONSUMERS WITHIN THE COMMUNITY BEHAVIORAL HEALTH SYSTEM,

6	7400-20	EA	N	1.00	24,301.0000	24,301.00
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SVC, MED/HLTH; CMH (COMMUNITY MENTAL HEALTH)

CONTRACTOR: RICHMOND AREA MULTI-SERVICES, INC  
 CONTRACT TERM: 01/01/2016-12/31/2016  
 COMPENSATION: \$4,382,340  
 RAMS VOCATIONAL REHAB PROGRAM PROVIDE EMPLOYMENT AND INTERNSHIP OPPORTUNITIES TO CONSUMERS WITHIN THE COMMUNITY BEHAVIORAL HEALTH SYSTEM.

TOTAL ITEMS AMOUNT	\$4,339,756.00
SALES TAX	\$ .00
INVOICE AMOUNT	\$4,339,756.00



CONTRACT PURCHASE ORDER RELEASE  
 COMMUNITY MENTAL HEALTH SYSTEM

PO NUMBER: DPHM17000226  
 PO AMOUNT: \$4,339,756.00

SFX INDEX	SUBOBJ	USERCODE	PROJCT	PRJDTL	GRANT	GRNTDTL	AMOUNT
01	HMHMCC730515	02799					1,763,015.00
02	HMHMRCGRANTS	02799			HMM007	1701	324,443.00
03	HMHMPROP63	02799	PMHS63	1704			220,000.00
04	HMHMPROP63	02799	PMHS63	1705			670,249.00
05	HMHMPROP63	02799	PMHS63	1712			1,337,748.00
06	HMHMCP751594	02799					24,301.00
							4,339,756.00



CONTRACT PURCHASE ORDER RELEASE  
COMMUNITY MENTAL HEALTH SYSTEM

PO NUMBER: DPHM17000226  
PO AMOUNT: \$2,416,490.00

TO: RICHMOND AREA MULTI-SERVICES INC  
3626 BALBOA ST  
SAN FRANCISCO CA 94121-2604

PO PRINT DATE: 12/29/2016  
CONTACT: KAVOOS G. BASSIRI,  
PHONE: 415-668-5955 319  
VENDOR ID: 15706

TERMS: NET  
FOB : DEST

ISSUE DATE : 08/18/2016

BPO # : BPHM16000021 <<  
EFF. DATE : 01/01/2016  
EXP. DATE : 12/31/2016

DELIVER TO: 1380 HOWARD ST 4TH FLOOR  
SAN FRANCISCO CA 94103-0000

AUTHORIZED SIGNATURE:

DATE : 12/29/2016  
PHONE:

ORIGINAL ORDER MUST BE SIGNED TO BE VALID

INVOICE TO: SUBSTANCE ABUSE & FORENSICS (HMI01)  
1380 HOWARD ST - RM 444  
SAN FRANCISCO CA 94103-0000

TERMS:

THIS CONTRACT PURCHASE ORDER AND THE ACCOMPANYING SIGNED CONTRACT  
AUTHORIZE YOU TO BEGIN PERFORMING THE CONTRACT AND INVOICING THE  
CITY. THIS IS SUBJECT TO THE TERMS AND CONDITIONS IN THE CONTRACT. ANY  
TERMS AND CONDITIONS ON THE REVERSE OF THIS DOCUMENT DO NOT APPLY.

YOU MUST INCLUDE THE CONTRACT PURCHASE ORDER NUMBER ON ALL INVOICES.





CONTRACT PURCHASE ORDER RELEASE  
 COMMUNITY MENTAL HEALTH SYSTEM

PO NUMBER: DPHM17000226  
 PO AMOUNT: \$2,416,490.00

ITEM	COMMODITY ID	UOM	TAX	QUANTITY	UNIT PRICE	TOTAL PRICE
NAME/SPECS						

1	7400-20	EA	N	1.00	1,501,008.0000	1,501,008.00
SVC, MED/HLTH; CMH (COMMUNITY MENTAL HEALTH)						

CONTRACTOR: RICHMOND AREA MULTI-SERVICES, INC  
 CONTRACT TERM: 01/01/2016-12/31/2016  
 COMPENSATION: \$4,382,340  
 RAMS VOCATIONAL REHAB PROGRAM PROVIDE EMPLOYMENT AND INTERNSHIP OPPORTUNITIES TO CONSUMERS WITHIN THE COMMUNITY BEHAVIORAL HEALTH SYSTEM.

2	7400-20	EA	N	1.00	162,222.0000	162,222.00
SVC, MED/HLTH; CMH (COMMUNITY MENTAL HEALTH)						

CONTRACTOR: RICHMOND AREA MULTI-SERVICES, INC  
 CONTRACT TERM: 01/01/2016-12/31/2016  
 COMPENSATION: \$4,382,340  
 RAMS VOCATIONAL REHAB PROGRAM PROVIDE EMPLOYMENT AND INTERNSHIP OPPORTUNITIES TO CONSUMERS WITHIN THE COMMUNITY BEHAVIORAL HEALTH SYSTEM.

3	7400-20	EA	N	1.00	50,000.0000	50,000.00
SVC, MED/HLTH; CMH (COMMUNITY MENTAL HEALTH)						

CONTRACTOR: RICHMOND AREA MULTI-SERVICES, INC  
 CONTRACT TERM: 01/01/2016-12/31/2016  
 COMPENSATION: \$4,382,340  
 RAMS VOCATIONAL REHAB PROGRAM PROVIDE EMPLOYMENT AND INTERNSHIP OPPORTUNITIES TO CONSUMERS WITHIN THE COMMUNITY BEHAVIORAL HEALTH SYSTEM.

4	7400-20	EA	N	1.00	189,622.0000	189,622.00
SVC, MED/HLTH; CMH (COMMUNITY MENTAL HEALTH)						

CONTRACTOR: RICHMOND AREA MULTI-SERVICES, INC  
 CONTRACT TERM: 01/01/2016-12/31/2016  
 COMPENSATION: \$4,382,340  
 RAMS VOCATIONAL REHAB PROGRAM PROVIDE EMPLOYMENT AND INTERNSHIP OPPORTUNITIES TO CONSUMERS WITHIN THE COMMUNITY BEHAVIORAL HEALTH SYSTEM.

5	7400-20	EA	N	1.00	508,483.0000	508,483.00
SVC, MED/HLTH; CMH (COMMUNITY MENTAL HEALTH)						

CONTRACTOR: RICHMOND AREA MULTI-SERVICES, INC  
 CONTRACT TERM: 01/01/2016-12/31/2016  
 COMPENSATION: \$4,382,340  
 RAMS VOCATIONAL REHAB PROGRAM PROVIDE EMPLOYMENT AND INTERNSHIP



CONTRACT PURCHASE ORDER RELEASE  
 COMMUNITY MENTAL HEALTH SYSTEM

PO NUMBER: DPHM17000228  
 PO AMOUNT: \$2,416,490.00

ITEM	COMMODITY ID	UOM	TAX	QUANTITY	UNIT PRICE	TOTAL PRICE
NAME/SPECS						

OPPORTUNITIES TO CONSUMERS WITHIN THE COMMUNITY BEHAVIORAL HEALTH SYSTEM.

6	7400-20	EA	N	1.00	5,155.0000	5,155.00
SVC, MED/HLTH; CMH (COMMUNITY MENTAL HEALTH)						

CONTRACTOR: RICHMOND AREA MULTI-SERVICES, INC  
 CONTRACT TERM: 01/01/2016-12/31/2016  
 COMPENSATION: \$4,382,340  
 RAMS VOCATIONAL REHAB PROGRAM PROVIDE EMPLOYMENT AND INTERNSHIP  
 OPPORTUNITIES TO CONSUMERS WITHIN THE COMMUNITY BEHAVIORAL HEALTH  
 SYSTEM.

TOTAL ITEMS AMOUNT	\$2,416,490.00
SALES TAX	\$ .00
INVOICE AMOUNT	\$2,416,490.00



CONTRACT PURCHASE ORDER RELEASE  
COMMUNITY MENTAL HEALTH SYSTEM

PO NUMBER: DPHM17000226  
PO AMOUNT: \$2,416,490.00

SFX INDEX	SUBOBJ	USERCODE	PROJECT	PRJDTL	GRANT	GRNTDTL	AMOUNT
01	HMHMCC730515	02799					1,501,008.00
02	HMHMRCGRANTS	02799			HMM007	1701	162,222.00
03	HMHMPROP63	02799	PMHS63	1704			50,000.00
04	HMHMPROP63	02799	PMHS63	1705			189,622.00
05	HMHMPROP63	02799	PMHS63	1712			508,483.00
06	HMHMCP751594	02799					5,155.00
							2,416,490.00

CITY/COUNTY OF SAN FRANCISCO INTERNAL USE ONLY - Please Type or Print

<b>16/17</b> <b>CITY/COUNTY OF SAN FRANCISCO</b> <b>CONTRACT PURCHASE ORDER INPUT FORM</b>		Original Modified/Increased Decrease Data Change Only		DOCUMENT NUMBER <del>COMMITTEE</del> <b>COMMITTEE</b>		DEPARTMENT <b>82 Mental Health &amp; Substance Abuse</b> DEPARTMENT CONTROL NO. <b>HM-0-06128-MH/SA</b>							
Complete for Contract Order type Agreements and Contracts AMOUNT OF THIS ENCUMBRANCE <b>\$2,564,265</b>				TOTAL APPROVED CONTRACT \$ <b>9,558,288</b>		DATE <b>12/13/16</b> PAGE <b>1</b> of <b>1</b>							
ORIGINAL CONTRACT NUMBER <b>BPHM1600021</b> <b>DPHM16000450</b> <b>DPHM17000226</b>				PERIOD COVERED FROM <b>7/1/16</b> TO <b>6/30/17</b>		CONTRACT # <b>7640</b> 41088-14/16							
CONTRACTOR <b>Richmond Area Multi-Services Inc.</b> (Voc Rehab) 639 14th Avenue San Francisco, CA 94118		VENDOR NO. <b>15706</b> OFFICE <b>01</b> VENDOR REF. <b>23-7389438</b> PHONE # <b>(415) 800-0699 FAX (415) 751-7336</b>		DELIVER TO Same		SEND CHECKS TO (Inter-Office) <b>PH&amp;P Accounting Office</b> 1380 Howard St., Rm. 447 San Francisco, CA 94103							
TERMS OF PAYMENT <b>Monthly</b>		RETAINAGE REQUIRED IF YES, AMOUNT OR %		YES/NO: <b>NO</b>		INSURANCE REQUIRED AMOUNT DATE ATTACH							
COMMODITY OR SERVICE CODE # <b>7400-18 (CSAS)</b> <b>7400-20 (CMRS)</b> <b>PROFSERV - BID</b> <b>RFQ 11-2015</b>		DETAILED DESCRIPTION OF SERVICES AND PRODUCTS <b>FY16-17 MOD-1 per Funding Notification #1, dated 9/12/16</b>											
		CONTRACT TERM: <b>1/1/16-12/31/2017</b>		ORIGINAL AWARD: <b>\$2,024,652</b>		CONTINGENCY APPROVED: CONTINGENCY USED: ENCUMBRANCE TOTAL: CONTINGENCY SHIF AVAILABLE: BLANKET TOTAL: <b>Total contract \$8,534,186 \$ 1,024,102 \$ - \$ - \$ 1,024,102 \$9,558,288</b>							
		15/16 Prev Encumb <b>\$2,024,652</b> 16/17 Prev Encumb <b>\$1,775,490</b> 16/17 This Encumb <b>\$2,564,265</b> 17/18 To Be Encumb <b>\$2,169,878</b>				WORKERS COMP <b>\$1,000,000</b> 07/01/17 <input checked="" type="checkbox"/> GOMP, GEN. LIABILITY <b>\$1,000,000</b> 07/01/17 <input checked="" type="checkbox"/> AUTOMOBILE <b>\$1,000,000</b> 07/01/17 <input checked="" type="checkbox"/> UMBRELLA Crime (- Initial pmt) <b>Fidelity Bond</b> 07/01/17 <input checked="" type="checkbox"/> OTHER INSURANCE ATTACHMENTS - Please identify by file or description:							
PREPARED BY (P) (S) <b>Junko Craft</b> Senior Administrative Analyst Phone # <b>255-3543</b> Fax # <b>252-3088</b>		APPROVALS BOARD OR COMMISSION REAL PROPERTY LEASER AGENT - DIRECTOR OF PROPERTY CONTROLLER											
APPROVED BY (S) (S) (Signature) (Print Name)		SYSTEM USE											
Line No. Document Number No. Number Suffix		Amount 903,007 00 162,221 00 170,000 00 480,627 00 829,265 00 19,146 00 Total		Index Code HMMCC730515 HMMRCGRANTS HMMHMPROP63 HMMHMPROP63 HMMHMPROP63 HMMHMP751594		Sub-Object 02789 02789 02789 02789 02789 02789		User Code MH 12/14/16 HPL 12/14/16 MH 12/14/16		Project Project Detail Grant Grant Detail PMHS63 1704 PMHS63 1705 PMHS63 1712		ADDENDUM ATTACHED No. of Pages 12/13/17	

printed 12/13/2016 11:20 AM

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**City and County of San Francisco  
Office of Contract Administration  
Purchasing Division**

**First Amendment**

THIS AMENDMENT (this "Amendment") is made as of July 1, 2016, in San Francisco, California, by and between **Richmond Area Multi-Services, Inc.** ("Contractor"), and the City and County of San Francisco, a municipal corporation ("City"), acting by and through its Director of the Office of Contract Administration.

**Recitals**

WHEREAS, City and Contractor have entered into the Agreement (as defined below); and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to extend the performance period, increase the contract amount; and

WHEREAS, the Agreement was competitively procured as required by San Francisco Administrative Code Chapter 21.1 through RFQ11-2015 issued April 16, 2015 and this modification is consistent therewith; and

WHEREAS, approval for this Amendment was obtained when the Civil Service Commission approved Contract number 41068-14/15 on December 21, 2015;

NOW, THEREFORE, Contractor and the City agree as follows:

**1. Definitions.** The following definitions shall apply to this Amendment:

**1a. Agreement.** The term "Agreement" shall mean the Agreement dated **January 1, 2016** between Contractor and City, as amended by this:

First Amendment,                      dated July 1, 2016

**1b. Other Terms.** Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Agreement.

**2. Modifications to the Agreement.** The Agreement is hereby modified as follows:

2a. Section Article 2 - Term of the Agreement of the Agreement currently reads as follows:

**Article 2 Term of the Agreement**

2.1 The term of this Agreement shall commence on the latter of: January 1, 2016 and expire on December 31, 2016, unless earlier terminated as otherwise provided herein.

2.2 The City has four (4) options to renew the Agreement for a period of one year each. The City may extend this Agreement beyond the expiration date by exercising an option at the City's sole and absolute discretion and by modifying this Agreement as provided in Section 11.5, "Modification of this Agreement."

Such section is hereby amended in its entirety to read as follows:

**Article 2 Term of the Agreement**

2.1 The term of this Agreement shall commence on the latter of: (i) January 1, 2016; or (ii) the Effective Date and expire on December 31, 2017, unless earlier terminated as otherwise provided herein.

2.2 The City has three (4) options to renew the Agreement for a period of one year each. The City may extend this Agreement beyond the expiration date by exercising an option at the City's sole and absolute discretion and by modifying this Agreement as provided in Section 11.5, "Modification of this Agreement."

Option 1:	1/01/2017 – 12/31/2017	Exercised.
Option 2:	1/01/2018 – 12/31/2018	
Option 3:	1/01/2019 – 12/31/2019	
Option 4:	1/01/2020 – 12/31/2020	

2b. Article 3 Financial Matters, Section 3.3 Compensation, Section 3.3.1 of the Agreement currently reads as follows:

**Article 3 Financial Matters**

**3.3 Compensation.**

3.3.1 Payment. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment

shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed **Four Million Three Hundred Eighty Two Thousand Three Hundred Forty Dollars (\$4,382,340)** The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. In no event shall City be liable for interest or late charges for any late payments.

**Such section is hereby amended in its entirety to read as follows:**

### **Article 3 Financial Matters**

#### **3.3 Compensation.**

3.3.1 **Payment.** Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed **Nine Million Five Hundred Fifty-Eight Thousand Two Hundred Eighty Eight Dollars (\$9,558,288)**. The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. In no event shall City be liable for interest or late charges for any late payments.

2c. The Appendices listed below are amended as follows:

- 1) Add Appendix A-1 through A-5 dated 7/1/2016 for FY 2016/2017 to Agreement as amended.
- 2) Delete Appendix B - Calculation of Charges and replace in its entirety with Appendix B - Calculation of Charges dated 7/1/2016 to Agreement as amended.
- 3) Add Appendix B-1 through B-5 dated 7/1/2016 for FY 2016/2017 to Agreement as amended.
- 4) Delete Appendix E - HIPAA Business Associate Agreement and replace in its entirety with Appendix E - HIPAA Business Associate Agreement dated April 22, 2016 to Agreement as amended.
- 5) Add Appendix F - Invoice Templates for the funding term 7/1/16 - 6/30/17.

3. **Effective Date.** Each of the modifications set forth in Section 2 shall be effective on and after July 1, 2016.



4. **Legal Effect.** Except as expressly modified by this Amendment, all of the terms and conditions of the Agreement shall remain unchanged and in full force and effect.





Contractor Name: Richmond, Ca Multi-Services, Inc.	Appendix A-1
Program Name: Hire-Ability Janitorial Services	Contract Term: 07/01/16 - 06/30/17

**1. Identifiers:**

Program Name: Hire-Ability Janitorial Services  
 Program Address: 1234 Indiana Street  
 City, State, ZIP: San Francisco, CA 94107  
 Telephone/FAX: (415) 282-9675 (415) 920-6877  
 Website Address: www.ramsinc.org / www.hire-ability.org  
 Contractor Address (if different from above): RAMS Administration, 639 14<sup>th</sup> Avenue  
 City, State, ZIP: San Francisco, CA 94118  
 Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
 Telephone: (415) 800-0699  
 Email Address: angelatang@ramsinc.org  
 Program Code(s) (if applicable): Not Applicable

**2. Nature of Document:**

New  Renewal  Modification

**3. Goal Statement:**

To provide employment and internship opportunities within the janitorial field for qualified and work ready consumers within the community behavioral health system.

To improve the emotional/physical well-being and quality of life, positive community engagement, increase self-sufficiency, and to obtain & retain employment.

**4. Target Population:**

San Francisco residents age 18 and over, adults & older adults including transitional age youth, who are currently receiving behavioral health services through BHS. Particular outreach will be made to underserved populations and those interested in the janitorial industry.

**5. Modality(s)/Intervention(s):**

See CBHS Appendix B, CRDC pages.

**6. Methodology:**

A. Outreach, recruitment, promotion, and advertisement as necessary.

RAMS' responsibility and commitment to mental health care quality and education extends beyond its own walls to reach people of all ages and backgrounds in its community through outreach and serving them in their own environments. This philosophy of care has always been central to the agency's approach. RAMS is uniquely well-positioned and has the expertise to outreach, engage, and retain diverse consumers, underrepresented constituents, and community organizations with regards to vocational services & resources and raising awareness about mental health and physical well-being. As an established community services provider, RAMS comes into contact with significant numbers of consumers & families, annually serving about 18,000 adults, children, youth & families at over 90 sites, citywide.

Specifically for Hire-Ability Janitorial Services, the program promotes open janitorial positions within the system of care by outreach and recruitment activities through linkages with BHS community agencies, Department of Rehabilitation (DOR), Co-Operative partners within the BHS

Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-1
Program Name: Hire-Ability Janitorial Services	Contract Term: 07/01/16 – 06/30/17

Vocational Services system, and to other employment linkages that directly outreach to consumers within BHS. Targeted recruitment for employment also includes participants who have completed the Hire-Ability Vocational Services 4-month long Occupational Skills Training Certificate program in janitorial, funded by Department of Rehabilitation which prepares graduates for competitive employment within the janitorial field. Outreach and recruitment for this program includes community outreach presentations at BHS (and contract) clinics, participating in group presentations with the DOR/BHS vocational co-op, and announcements (emails, flyers) through the DOR/BHS vocational co-op partners. Hire-Ability also holds an open house orientation once per month to introduce services to potential applicants. Graduates of this program are provided employment services assistance, working directly with employment consultants to prepare for competitive employment through a variety of activities such as interview preparation, resume development, and job development and coaching assistance. The employment services program follows the *Individual Placement & Support Model*, which is strengths- and evidenced-based supported employment model that has been successful for individuals with chronic behavioral health issues. Graduates of this program and applicants that meet qualifications for janitorial positions are provided opportunities and assistance to apply and interview for open positions.

B. Admission, enrollment and/or intake criteria and process where applicable.

*Employment:*

The employment portion of Hire-Ability Janitorial Services works in conjunction with the Janitorial Services internship program, Department of Rehabilitation, BHS clinics, and Employment Services partners and linkages to refer qualified participants to open employment positions within this program. The process is equivalent to other competitive employment positions within RAMS which include screening of applicants which may result in face to face interviews and potential employment offers:

*Internship:*

The internship portion of Hire-Ability Janitorial Services accommodates referrals from BHS and other community agencies within the System of Care. All requests for services are directed to the Intake Coordinator, who then provides the individual with the necessary information to apply to the program. The program has an application process by which interested individuals are to submit their completed application packet within the indicated deadline. Application packets include basic demographic information (name, contact information), reference contact information, referral form, and resume. Individuals who qualify under the initial screening (a coordinated effort of review by staff including the Vocational Rehabilitation Services Coordinator, Associate Director of Vocational Services, and internship site manager) are invited for a face-to-face interview with the Vocational Rehabilitation Services Coordinator and Associate Director of Vocational Services. These initial assessments are aimed to determine program eligibility, vocational readiness/interest, suitability of program services, strengths & existing resources, level of functioning & needs in consultation with behavioral health services provider, primary care connection, substance use/abuse, and other services (e.g. residential). If an individual is not accepted into the program based on suitability for these program services, the Vocational Rehabilitation Services Coordinator makes a referral to one of Hire-Ability Programs or to another service provider.

Program Name: Hire-Ability Janitorial Services	Appendix A-1 Contract Term: 07/01/16 – 06/30/17
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- C. Service delivery model, including treatment modalities, phases of treatment, hours of operation, length of stay, locations of service delivery, frequency and duration of service, strategies for service delivery, wrap-around services, residential bed capacity, etc. Include any linkages/coordination with other agencies.

Hire-Ability program hours are Monday to Friday (9:00 am – 5:00 pm); however, on-the-job hours may vary, depending on the job site's needs.

*Employment:*

Janitorial Services employment program provides on-the-job training and supervision to employees within this program. RAMS Management also coordinates coverage for vacancies or absences. Employees are provided with a robust and comprehensive job retention support system with close coordination of supervision and support between the RAMS Janitorial Manager, Administrative Coordinator, Associate Director, and BHS site managers. All employees receive an initial orientation by RAMS human resources department upon hire. The employee is then oriented to their individual position through on-site supervision and time limited job coaching for employees receiving employment services. Employees participate in regular, interactive individual and group supervision meetings. In addition, there are regular quarterly trainings in various areas such as health and safety, ergonomics, blood borne pathogen, and other pertinent trainings such as communication and professionalism, boundaries, and other pertinent work related trainings as well as RAMS sponsored health and wellness retreats. Site specific trainings usually take place on a monthly basis or as needed. Employees may also access and/or be linked to the Employee Assistance Program (EAP) to assist with a variety of life building resources. In addition, starting in 2015, RAMS secured funding (from another source) to operate a peer workforce support services program which offers 24/7 telephone and online support as well as group and individual support (e.g. monthly drop-in groups, WRAP groups); the services are targeted towards peers and family members with an emphasis on issues relating to work.

To gather information and feedback on janitorial services, RAMS continuously engages CBHS site managers in various methods such as in-person meetings and telephone calls, at least quarterly. The Hire-Ability Janitorial Services fosters a work environment that promotes healthy behaviors, a sense of hope and belonging, responsibility and strengthens roles of consumers through employment and professional development activities.

*Internship:*

The Janitorial Services internship program design includes providing culturally competent, consumer-driven, strengths-based workforce development activities and vocational services including but not limited to: vocational assessments, job skills training, on-site work experience, vocational counseling, and job coaching. The program improves, maintains, or restores personal independence and functioning, consistent with requirements for learning and development, which provides services to a distinct group of beneficiaries.

The internship duration is six to nine months with each intern receiving 10-20 hours per week of paid, on-the-job training with work hours varying, depending on the individual's availability & support needs. Internship components include general office cleaning; floor & carpet care; and restroom cleaning. Each intern is assigned a Vocational Rehabilitation Case Manager, and a Peer Job Coach as needed; and works with the Janitorial Manager and/or Site Supervisor for orientation to the tasks. The Vocational Rehabilitation Case Manager conducts vocational assessments, facilitates vocational orientation & exploration, performs vocational counseling (case management & linkages), supports and identifies strengths & areas of employment interest, and provides job counseling & guidance. The Peer Job Coach and Janitorial Manager and/or Site Supervisor provides job training and coaching,

Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-1
Program Name: Hire-Ability Janitorial Services	Contract Term: 07/01/16 – 06/30/17

coordinate training and support needs with the Vocational Case Manager and BHS site manager, and provide feedback and vocational support to the intern.

At the start of services and at regular intervals, a vocational assessment is completed with each intern. The vocational assessment is a comprehensive process that systematically utilizes an interview to assist the intern in the identification of goals leading towards vocational development. These areas, as they relate to employment, include: work needs (e.g. reasonable accommodations), identifying community supports (therapists/case managers, support groups, family & friends), cultural and/or language issues, work-related issues (concentration, stress, retention of instruction, safety habits, work behavior), psychiatric functioning (behavioral health condition), appearance & grooming, and external factors (financial concerns, living arrangement, medical care). A written report is developed summarizing the assessment, findings & recommendations, which informs the vocational plan and structure for job skills training.

During the vocational services planning, the Vocational Rehabilitation Case Manager and intern discuss how strengths can be utilized to make changes on their current conditions, to promote & sustain healthy mental health, and obtain and retain employment. The Vocational Rehabilitation Case Manager also gathers relevant information from the intern and other service providers and/or family members, as it relates to employment. An integrated vocational plan for goals is formally developed within the first month of participation and on a quarterly basis thereafter, with ongoing monitoring of progress at each meeting/vocational activity, and formally reviewed at the third month. The assessment/evaluation and plan development includes the intern's input through self-evaluation sections as well as the Vocational Rehabilitation Case Manager's appraisal and feedback from the Peer Job Coach and BHS site manager. RAMS engages BHS site managers in various methods including in-person meetings and telephone calls, at least quarterly. The comprehensive vocational plan also considers the intern's environment and entire support structure as well as specific employment goals, and takes into account collateral information (e.g. behavioral health treatment plan incorporates vocational goals). Staff are also trained to identify signs of psychiatric relapse and, through collaboration with the intern's therapist, implements the appropriate interventions. Together, the Vocational Rehabilitation Case Manager and intern set goals and identify strategies that are attainable & measureable. RAMS also facilitates linkages for support services (e.g. transportation, child care).

Vocational training and skills building is provided through various capacities. The Janitorial Manager and/or Site Supervisor serves as the primary trainer. The Peer Job Coach provides additional assistance as needed and in coordination with the Vocational Rehabilitation Case Manager maintains written evaluations and progress reports on interns' skills and vocational goals. These include, but are not limited to, productivity, work quality, attendance, punctuality, dress & grooming, communication with others, and work endurance. As the primary trainer, the Peer Job Coach is thoroughly familiar with the intern's daily progress and can provide consistent feedback and support. The Vocational Rehabilitation Case Manager observes the intern at the internship site weekly and obtains feedback from the Peer Job Coach and BHS site manager so as to provide consistent feedback and support to the intern.

RAMS is committed to client involvement and community input in all elements of program operations, including planning, implementation, and evaluation. This process ensures quality programming, increases effectiveness, and ensures cultural competency. The best informant for the culturally relevant curriculum and program development is the target population, themselves. Throughout the internship period, the Vocational Rehabilitation Case Manager meets individually with the intern to discuss progress and solicit feedback regarding their experience, and at the end of the internship period interns are given anonymous written satisfaction surveys regarding the intake & admission process, internship structure & activities, support services, and professional development.

Contract Name: Richmond Area Multi-Services, Inc.	Appendix A-1
Program Name: Hire-Ability Janitorial Services	Contract Term: 07/01/16 – 06/30/17

A focus group is also conducted to solicit similar feedback regarding the structure of the program, recruitment process, accessibility, and effectiveness. All feedback is compiled and reviewed (by Hire-Ability management and RAMS executive management), informs the program design (development & adjustments, implementation), and is incorporated, as appropriate.

RAMS recruits and employs staff with relevant educational & employment history and cultural competence for the target population we work with through thorough interviews and reference checks. The process of on-going education and training to ensure staff are providing the standard of services required by RAMS are generally through regular attendance of staff meetings, individual supervisor-supervisee meetings, monthly internal/external trainings, annual cultural competency trainings, and other activities that are program specific. RAMS maintains a philosophy as well as a policy regarding creating a welcoming environment to all, which in turn is displayed through positive and healthy attitudes among staff. Measurement of how effective staff is in providing a high level of service is through client satisfaction surveys, client advisory councils, and feedback from other providers.

RAMS continuously engages with various systems to increase the program trainees' knowledge and networking possibilities regarding jobs/internships, further educational opportunities, etc. Such systems that Hire-Ability specifically works with includes, but is not limited to: BHS and BHS clinics (as these are the primary internship host sites); engaging in the Job Developers Huddle – One Stop Western Addition; Potrero /Dogpatch Merchants Association and ongoing relationship/ collaboration with California State Department of Rehabilitation (for which Hire-Ability maintains a separate contract); and involvement in the BHS Co-Operative group (streamlined referral system amongst RAMS Hire-Ability, Caminar, State Department of Rehabilitation, Citywide Forensic Collaborative). Furthermore, the Vocational Rehabilitation Case Manager provides support and coaching into the workforce and connects participants to additional resources (e.g. Department of Rehabilitation, RAMS Hire-Ability Employment Services, educational/training resources, housing).

- D. Discharge Planning and exit criteria and process, i.e., a step-down to less intensive treatment programs, the criteria of a successful program completion, aftercare, transition to another provider, etc.

*Employment:*

For consumers who are employees within this program, employment is at-will and on-going based on employee performance. If an employee resigns or is terminated for any reason, RAMS will take every effort, if applicable, to engage in a process of linkage to Employee Assistance or other helpful resources to ensure the employee is able transition appropriately from their position at RAMS.

*Internship:*

Janitorial Services interns successfully complete the program when: (1) 85% attendance rate, and (2) Vocational Development Plan goals are achieved. Upon discharge, interns will have more competitive skills for today's job market, and referral can be to competitive employment, volunteer internships, additional training, education, college enrollment, or salaried employment. In this pursuit, the Vocational Rehabilitation Case Manager may assist with linkage assistance to job placement programs, employment counseling and guidance, and coordination with other support services to ensure effective transition, as part of post internship case management support. As Hire-Ability offers a full spectrum of vocational services, interns may transition into the Employment Services Program, which is funded through a contract/agreement with the California State Department of Rehabilitation. This program provides a higher level of individualized job preparation using classroom and individual meetings, job development, individualized plans & job placement, and follow-along services to consumers. Hire-Ability also maintains a cooperative agreement with



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California Department of Rehabilitation (since 1998) to connect employers with trained individuals; thus, supporting job placements for program participants with employment.

- E. Program staffing (which staff will be involved in what aspects of the service development and delivery). Indicate if any staff position is not funded by DPH.

See CBHS Appendix B.

## 7. Objectives and Measurements:

### A. Standardized Objectives

All applicable objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS AOA Performance Objectives FY 16-17.

### B. Individualized Objectives

#### *Employment:*

- By the end of the fiscal year, 80% of survey responses from janitorial sites will express satisfaction rating of “3” or above with services, as evidenced by program satisfaction survey which are analyzed by the associate director and reviewed by the program director. Summary of results are shared with RAMS executive leadership and available to stakeholders upon request.
- By the end of the fiscal year, 100% of janitorial employees will be provided with a staff satisfaction survey, as evidenced by distribution memos and announcements.
- By the end of the fiscal year, 80% of janitorial employees will have participated in at least one wellness training and or received wellness training materials. (Topics include community resources, stress management/coping and problem solving). This will be evidenced by training attendance records and sign – off sheets to acknowledge receipt of wellness training materials.
- By the end of the fiscal year, 100% of applicable janitorial employees will have an annual performance evaluation which measures the employee’s competence and skills as well as capacity to problem solve and take responsibility and accountability for their own performance. This is evidenced by the annual performance evaluation, which includes the employee and supervisor/program director’s ratings.

#### *Internship:*

- By the end of the fiscal year, 65% of program participants eligible to complete the internship cycle within the fiscal year will successfully complete the training or have exited the program early due to obtaining employment, transferring to another training/internship program to further increase readiness for employment, or enrolling in education to continue professional development. Inclusion criteria are only participants having received services for at least three months; the statuses of those who exit the program prior to three months are accounted separately. This will be evidenced by program case closure records and reasons for discharge; the Vocational Rehabilitation Case Manager’s termination documents are reviewed and approved by the Associate Director.
- By the end of the fiscal year, 75% of intern graduates will have reported an increased ability to manage symptoms in the workplace, as evidenced by focus group feedback and post-program survey responses.

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## 8. Continuous Quality Improvement:

### A. Achievement of contract performance objectives and productivity.

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All direct service providers are informed about objectives and the required documentation related to the activities and service outcomes. With regards to management monitoring, the Program Director reports progress/status towards each contract objective in the monthly report to executive management (including Deputy Chief/Director of Clinical Services and Chief Executive Officer). If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action. The data reported in the monthly report is on-going collected, with its methodology depending on the type of information. The program director and associate director work directly with human resources to address employee performance needs as well as work collaboratively with BHS operations team to coordinate work flow and operational duties related to our janitorial services employees. Hire-Ability management team and BHS operations teams meet monthly.

In addition, the Program Director monitors vocational service progress (engagement after intake, level of accomplishing vocational goals/objectives), service discharge reasons, and service utilization review. RAMS also conducts various random chart reviews to review adherence to objectives as well as treatment documentation requirements.

### B. Quality of documentation, including a description of the frequency and scope of internal-chart audits.

The program director and other members of the Hire-Ability management team meet regular with staff for supervision meetings. Documentation of meetings, trainings, performance evaluations is noted and, as appropriate, may be filed directly in the employees personnel file with human resources. Feedback through surveys from service sites are also analyzed and evaluated and reported to RAMS executive leadership. Information from the outcomes is used for program improvement purposes.

RAMS utilizes various mechanisms to review documentation quality. Chart reviews are conducted by supervisors; based on their review, determinations/recommendations are provided relating to frequency and modality/type of services, and the match to client's progress & vocational/clinical needs. Feedback is provided to direct staff members. Furthermore, supervisors monitor the service documentation of their supervisees; staff meets weekly with their supervisors to review caseload with regard to service strategies, vocational plans & progress, documentation, productivity, etc. Within the first 30 days of admission and after every re-assessment period thereafter, the client's chart is reviewed by the Vocational Case Manager or Associate Director / Program Director, to monitor quality & timeliness. Feedback is provided directly to staff as well as general summaries at staff meetings.

In addition to the program's documentation review, the RAMS Quality Council formally conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy

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Chief/Director of Clinical Services, and another council member (or designee). Feedback is provided directly to staff as well as general summaries at staff meetings.

C. Cultural competency of staff and services.

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by individual supervision (mostly weekly); supervisors and their supervisees' caseload with regard to service strategies, vocational plans & progress, documentation, etc. Furthermore, RAMS annually holds an agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.
- Ongoing review of vocational services indicators is conducted by the Program Director (and reported to executive management) on monthly basis; data collection and analysis of service engagement (referral source; engagement after intake; number of admissions; service discharge reasons; and service utilization review).
- Client's preferred language for services is noted at intake; during the case assignment process, the Program Director matches client with counselor by taking into consideration language, culture, and provider expertise. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- At least annually, aggregated demographic data of clientele and staff/providers is collected and analyzed by management in order to continuously monitor and identify any enhancements needed.
- Development of annual objectives based on cultural competency principles; progress on objectives is reported by Program Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action.
- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Satisfaction with services);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Program Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.

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- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters

D. Satisfaction with services.

*Employment:*

RAMS disseminates an annual employee satisfaction survey. RAMS further solicits feedback from other stakeholders including contracted service sites, business customers, and funders through satisfaction surveys as well as face to face meetings. Results of the survey are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. All satisfaction survey methods and feedback results are compiled and reported to executive management along with assessment of suggestion implementation.

*Internship:*

For the Janitorial Service internship program, RAMS adheres to the BHS satisfaction survey protocols which may include dissemination annually or biannually. In addition, Hire-Ability administers its program-developed client satisfaction surveys at case closure or upon request of the client. Furthermore, client feedback is obtained during post-program evaluations, client focus groups, client advisory council meetings, community meetings open to all clients at the vocational services program, individual meetings between direct service staff and clients, and through a confidential telephone hotline. Results of the survey methods are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. All satisfaction survey methods and feedback results are also compiled and reported to executive management along with assessment of suggestion implementation.

E. Timely completion and use of outcome data, including CANS and/or ANSA data or CalOMS.

Not Applicable.

**9. Required Language:**

Not Applicable.



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**1. Identifiers:**

Program Name: Hire-Ability Clerical & Mailroom Services  
 Program Address: 1234 Indiana Street  
 City, State, ZIP: San Francisco, CA 94107  
 Telephone: (415) 282-9675  
 Fax: (415) 920-6877  
 Website Address: www.ramsinc.org / www.hire-ability.org  
 Contractor Address: RAMS Administration, 639 14<sup>th</sup> Avenue  
 City, State, ZIP: San Francisco, CA 94118  
 Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
 Telephone: (415) 800-0699  
 Fax: (415) 751-7336  
 Email Address: angelatang@ramsinc.org  
 Program Code(s): Not Applicable

**2. Nature of Document:**

New     Renewal     Modification

**3. Goal Statement:**

To provide employment and internship opportunities in the areas of business operations support such as clerical, mailroom, reception, messenger and driving positions for those with personal experience with the community behavioral health system.

To increase work skills, improve emotional/physical well-being and quality of life, positive community engagement, increase self-sufficiency, and obtain & retain employment.

**4. Target Population:**

San Francisco residents who are adults 18 and over including transitional age youth, who are currently receiving behavioral health services through BHS. Particular outreach will be made to underserved populations and those interested in an administrative field.

**5. Modality(s)/Intervention(s):**

See BHS Appendix B, CRDC pages.

**6. Methodology:**

A. Outreach, recruitment, promotion, and advertisement as necessary.

RAMS' responsibility and commitment to mental health care quality and education extends beyond its own walls to reach people of all ages and backgrounds in its community through outreach and serving them in their own environments. This philosophy of care has always been central to the agency's approach. RAMS is uniquely well-positioned and has the expertise to outreach, engage, and retain diverse consumers, underrepresented constituents, and community organizations with regards to vocational services & resources and raising awareness about mental health and physical well-being. As an established community services provider, RAMS comes into contact with significant numbers of consumers &

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families, annually serving approximately 18,000 adults, children, youth & families at over 90 sites, citywide.

Specifically for Hire-Ability Clerical & Mailroom Services, the program promotes open positions within the system of care by outreach and recruitment activities through linkages with BHS community agencies, Department of Rehabilitation (DOR), Co-Operative partners within the BHS Vocational Services system, and to other employment linkages that directly outreach to consumers within BHS. Targeted recruitment for employment also includes participants who have completed the Clerical & Mailroom Services internship in clerical/administrative support positions. Graduates of this program and applicants that meet qualifications for positions (DOR, Co-Op partners) are provided opportunities and assistance to apply and interview for open positions.

B. Admission, enrollment and/or intake criteria and process where applicable.

*Employment:*

The employment portion of Hire-Ability Clerical & Mailroom Services works in conjunction with the Clerical & Mailroom Services internship program, and referrals for employment opportunities are through RAMS Employment Services Program, Department of Rehabilitation and our Co-Operative contract partners. Positions are competitive in nature and follows RAMS protocol for internal job announcements, recruitment, and hiring.

*Internship:*

The internship portion of Hire-Ability Clerical & Mailroom Services accommodates referrals from BHS and other community agencies within the System of Care. All requests for services are directed to the Intake Coordinator, who then provides the individual with the necessary information to apply to the program. The program has an application process by which interested individuals are to submit their completed application packet within the indicated deadline. Application packets include basic demographic information (name, contact information), reference contact information, referral form, and resume. Individuals who qualify under the initial screening (a coordinated effort of review by staff including the Vocational Rehabilitation Services Coordinator, Associate Director of Vocational Services, and internship site manager) are invited for a face-to-face interview with the Vocational Rehabilitation Services Coordinator and Associate Director of Vocational Services. These initial assessments are aimed to determine program eligibility, vocational readiness/interest, suitability of program services, strengths & existing resources, level of functioning & needs in consultation with behavioral health services provider, primary care connection, substance use/abuse, and other services (e.g. residential). A secondary assessment interview is held with the internship site to determine appropriate match for the site needs. If an individual is not accepted into the program based on suitability for these program services, the Vocational Rehabilitation Services Coordinator makes a referral to one of Hire-Ability Programs or to another service provider.

C. Service delivery model, including treatment modalities, phases of treatment, hours of operation, length of stay, locations of service delivery, frequency and duration of service, strategies for service delivery, wrap-around services, residential bed capacity, etc. Include any linkages/coordination with other agencies.

Hire-Ability program hours are Monday to Friday (9:00 am – 5:00 pm); however, on-the-job hours may vary, depending on the job site's needs.

#### *Employment:*

Clerical & Mailroom Services employment program provides on-site training and supervision to employees within this program. RAMS management also coordinates coverage for vacancies or absences. Employees are provided with a robust and comprehensive job retention support system with close coordination of supervision and support between the RAMS Vocational Rehabilitation Coordinator, Associate Director, and with BHS site managers. All employees receive an initial orientation by RAMS human resources department upon hire. The employee is then oriented to their individual position through on-site supervision and time limited job coaching for employees receiving employment services. Regular group and individual supervision meetings are an integral part of the Clerical & Mailroom Services program, continuous engagement as well as professional development activities are provided in a structured manner. Monthly staff meetings as well as quarterly trainings address critical areas needed for successful and meaningful employment which can include topics such as professional communication and boundaries, ergonomics at the work place, handling stress on the job and work life balance, as well as RAMS sponsored health and wellness retreats. Employees may also access and/or be linked to the Employee Assistance Program (EAP) to assist with a variety of life building resources. In addition, starting in 2015, RAMS secured funding (from another source) to operate a peer workforce support services program which offers 24/7 telephone and online support as well as group and individual support (e.g. monthly drop-in groups, WRAP groups); the services are targeted towards peers and family members with an emphasis on issues relating to work.

To gather information and feedback on Clerical & Mailroom Services, RAMS continuously engages BHS site managers in various methods such as in-person meetings and telephone calls, at least quarterly. The Hire-Ability Clerical & Mailroom Services fosters a work environment that promotes healthy behaviors, a sense of hope and belonging, responsibility and strengthens roles of consumers through employment and professional development activities.

#### *Internship:*

Clerical & Mailroom Services internship program design includes providing culturally competent, consumer-driven, strengths-based workforce development activities and vocational services including but not limited to: vocational assessments, job skills training, on-site work experience, vocational counseling, and job coaching. The program improves, maintains, or restores personal independence and functioning, consistent with requirements for learning and development, which provides services to a distinct group of beneficiaries.

The internship duration is six to nine months with each intern receiving 10-20 hours per week of paid, on-the-job training with work hours varying, depending on the individual's availability and support needs. Internship components include general office support; customer service; mailroom & distribution; reception functions (answering phones, greeting and assisting visitors); filing, copying/faxing; and light data entry (depending on internship site). Each intern is assigned a Vocational Rehabilitation Case Manager, and a Peer Job Coach as needed. The Vocational Rehabilitation Case Manager conducts vocational assessments, facilitates vocational orientation & exploration, performs vocational counseling



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(case management & linkages), supports and identifies strengths & areas of employment interest, and provides job counseling & guidance. The Peer Job Coach provides job training and coaching, coordinates training and support needs with the Vocational Case Manager and BHS site manager, and provides feedback and vocational support to the intern.

At the start of services and at regular intervals, a vocational assessment is completed with each intern. The vocational assessment is a comprehensive process that systematically utilizes an interview to assist the intern in the identification of goals leading towards vocational development. These areas, as they relate to employment, include: work needs (e.g. reasonable accommodations); identifying community supports (therapists/case managers, support groups, family & friends), cultural and/or language issues, work-related issues (concentration, stress, retention of instruction, safety habits, work behavior), psychiatric functioning (behavioral health condition), appearance & grooming, and external factors (financial concerns, living arrangement, medical care). A written report is developed summarizing the assessment, findings & recommendations, which informs the vocational plan and structure for job skills training.

During the vocational services planning, the Vocational Rehabilitation Case Manager and intern discuss how strengths can be utilized to make changes on their current conditions, to promote & sustain healthy mental health, and obtain and retain employment. The Vocational Rehabilitation Case Manager also gathers relevant information from the intern and other service providers and/or family members, as it relates to employment. An integrated vocational plan for goals is formally developed within the first month of participation and on a quarterly basis thereafter, with ongoing monitoring of progress at each meeting/vocational activity, and formally reviewed at the third month. The assessment/evaluation and plan development includes the intern's input through self-evaluation sections as well as the Vocational Rehabilitation Case Manager's appraisal and feedback from the Peer Job Coach and BHS site manager. RAMS engages BHS site managers in various methods including in-person meetings and telephone calls, at least quarterly. The comprehensive vocational plan also considers the intern's environment and entire support structure as well as specific employment goals, and takes into account collateral information (e.g. behavioral health treatment plan incorporates vocational goals). Staff are also trained to identify signs of psychiatric relapse and, through collaboration with the intern's therapist, implements the appropriate interventions. Together, the Vocational Rehabilitation Case Manager and intern set goals and identify strategies that are attainable & measureable. RAMS also facilitates linkages for support services (e.g. transportation, child care).

Vocational training and skills building is provided through various capacities. The Peer Job Coach serves as the primary trainer and in coordination with the Vocational Rehabilitation Case Manager maintains written evaluations and progress reports on interns' skills and vocational goals. These include, but are not limited to, productivity, work quality, attendance, punctuality, dress & grooming, communication with others, and work endurance. As the primary trainer, the Peer Job Coach is thoroughly familiar with the intern's daily progress and can provide consistent feedback and support. The Vocational Rehabilitation Case Manager observes the intern at the internship site weekly and obtains feedback from the Peer Job Coach and BHS site manager so as to provide consistent feedback and support to the intern.

RAMS is committed to client involvement and community input in all elements of program operations, including planning, implementation, and evaluation. This process ensures quality programming, increases effectiveness, and ensures cultural competency. The best informant for the culturally relevant curriculum and program development is the target population, themselves. Throughout the internship period, the Vocational Rehabilitation Case Manager meets individually with the intern to discuss progress and solicit feedback regarding their experience, and at the end of the internship period interns are given anonymous written satisfaction surveys regarding the intake & admission process, internship structure & activities, support services, and professional development. A focus group is also conducted to solicit similar feedback regarding the structure of the program, recruitment process, accessibility, and effectiveness. All feedback is compiled and reviewed (by Hire-Ability management and RAMS executive management), informs the program design (development & adjustments, implementation), and is incorporated, as appropriate.

RAMS recruits and employs staff with relevant educational & employment history and cultural competence for the target population we work with through thorough interviews and reference checks. The process of on-going education and training to ensure staff are providing the standard of services required by RAMS are generally through regular attendance of staff meetings, individual supervisor- supervisee meetings, monthly internal/external trainings, annual cultural competency trainings, and other activities that are program specific. RAMS maintains a philosophy as well as a policy regarding creating a welcoming environment to all, which in turn is displayed through positive and healthy attitudes among staff. Measurement of how effective staff is in providing a high level of service is through client satisfaction surveys, client advisory councils, and feedback from other providers.

RAMS continuously engages with various systems to increase the program trainees' knowledge and networking possibilities regarding jobs/internships, further educational opportunities, etc. Such systems that Hire-Ability specifically works with includes, but is not limited to: BHS and BHS clinics (as these are the primary internship host sites); engaging in Job Developers Huddle – One Stop Western Addition; Potrero/Dogpatch Merchants Association and ongoing relationship/collaboration with California State Department of Rehabilitation (for which Hire-Ability maintains a separate contract); and involvement in the BHS Co-Operative group (streamlined referral system amongst RAMS Hire-Ability, Caminar, State Department of Rehabilitation, Citywide Forensic Collaborative). Furthermore, the Vocational Rehabilitation Case Manager provides support and coaching into the workforce and connects participants to additional resources (e.g. Department of Rehabilitation, RAMS Hire-Ability Employment Services, educational/training resources, housing).

D. Discharge Planning and exit criteria and process, i.e., a step-down to less intensive treatment programs, the criteria of a successful program completion, aftercare, transition to another provider, etc.

As the Clerical & Mailroom Services employment program operates to train, support, and retain employment for consumer-filled positions in Clerical & Mailroom Services, there is not any exit criteria. If an employee resigns or is terminated for any reason, RAMS will take every effort, if applicable, to engage in a process of linkage to Employee Assistance or other

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helpful resources to ensure the employee is able transition appropriately from their position at RAMS.

Clerical & Mailroom Services interns successfully complete the program when: (1) 85% attendance rate, and (2) Vocational Development Plan goals are achieved. Upon discharge, interns will have more competitive skills for today's job market, and referral can be to competitive employment, volunteer internships, additional training, education, college enrollment, or salaried employment. In this pursuit, the Vocational Rehabilitation Case Manager may assist with linkage assistance to job placement programs, employment counseling and guidance, and coordination with other support services to ensure effective transition, as part of post internship case management support. As Hire-Ability offers a full spectrum of vocational services, interns may transition into the Employment Services Program, which is funded through a contract/agreement with the California State Department of Rehabilitation. This program provides a higher level of individualized job preparation using classroom and individual meetings, job development, individualized plans & job placement, and follow-along services to consumers. Hire-Ability also maintains a cooperative agreement with California Department of Rehabilitation (since 1998) to connect employers with trained individuals; thus, supporting job placements for program participants with employment. Interns may also enter other vocational trainings available through the system of care.

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## 7. Objectives and Measurements:

### A. Standardized Objectives

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This will be evidenced by training attendance records and sign-off sheets to acknowledge receipt of wellness training materials received.

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Clerical & Mailroom Services employees. Hire-Ability management team and BHS operations teams meet monthly.

In addition, the Program Director monitors vocational service progress (engagement after intake, level of accomplishing vocational goals/objectives), service discharge reasons, and service utilization review. RAMS also conducts various random chart reviews to review adherence to objectives as well as treatment documentation requirements.

B. Quality of documentation, including a description of the frequency and scope of internal chart audits.

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In addition to the program's documentation review, the RAMS Quality Council formally conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy Chief/Director of Clinical Services, and another council member (or designee). Feedback is provided directly to staff as well as general summaries at staff meetings.

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RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic

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& complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by individual supervision (mostly weekly); supervisors and their supervisees' caseload with regard to service strategies, vocational plans & progress, documentation, etc. Furthermore, RAMS annually holds an agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.

- Ongoing review of vocational services indicators is conducted by the Program Director (and reported to executive management) on monthly basis; data collection and analysis of service engagement (referral source; engagement after intake; number of admissions; service discharge reasons; and service utilization review)
- Client's preferred language for services is noted at intake; during the case assignment process, the Program Director matches client with counselor by taking into consideration language, culture, and provider expertise. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- At least annually, aggregated demographic data of clientele and staff/providers is collected and analyzed by management in order to continuously monitor and identify any enhancements needed
- Development of annual objectives based on cultural competency principles; as applicable, progress towards objectives is reported by Program Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action. Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Satisfaction with services);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Program Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.
- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters.

#### D. Satisfaction with services.

Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-2
Program Name: Hire-Ability Clerical & Mailroom Services	Contract Term: 07/01/16 – 06/30/17

*Employment:*

RAMS disseminates an annual employee satisfaction survey. RAMS further solicits feedback from other stakeholders including contracted service sites, business customers, and funders through satisfaction surveys as well as face to face meetings. Results of the survey are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. All satisfaction survey methods and feedback results are compiled and reported to executive management along with assessment of suggestion implementation.

*Internship:*

For the Staffing Service internship program, RAMS adheres to the BHS satisfaction survey protocols which may include dissemination annually or biannually. In addition, Hire-Ability administers its program-developed client satisfaction surveys at case closure or upon request of the client. Furthermore, client feedback is obtained during post-program evaluations, client focus groups, client advisory council meetings, community meetings open to all clients at the vocational services program, individual meetings between direct service staff and clients, and through a confidential telephone hotline. Results of the survey methods are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. All satisfaction survey methods and feedback results are also compiled and reported to executive management along with assessment of suggestion implementation.

E. Timely completion and use of outcome data, including CANS and/or ANSA data.

Not Applicable.

**9. Required Language:**

Not Applicable.

**1. Identifiers:**

Program Name: Peer-to-Peer Vocational Linkage  
Program Address: 639 14<sup>th</sup> Avenue (administrative address)  
City, State, Zip: San Francisco, CA 94121  
Telephone: (415) 689-5662 Fax: (415) 668-6388  
Website Address: www.ramsinc.org

Contractor Address: RAMS Administration, 639 14th Avenue  
City, State, Zip: San Francisco, CA 94118  
Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
Telephone: (415) 800-0699  
Email Address: angelatang@ramsinc.org

Program Code: Not Applicable

**2. Nature of Document (check one)**

New  Renewal  Modification

**3. Goal Statement**

To support clients at SFDPH BHS sites and assist clinicians by connecting their clients with community services by utilizing peer providers who have identified themselves as consumers (or former consumers) of behavioral health services.

**4. Target Population**

The target population for this program is the adult/older adult clients served by selected SFDPH Behavioral Health Services clinics.

**5. Modality(ies)/Interventions**

See BHS Appendix B, CRDC pages.

RAMS' Peer-to-Peer Vocational Linkage program, which is integrated into the RAMS Division of Peer-Based Services, enhances treatment services by providing supportive case management and resource linkage to clients at contracted SF DPH behavioral health clinics. Services, delivered by Service Coordinators, aim to improve the level of engagement with clients, foster feelings of hope, and to promote the possibility of wellness and recovery.

During the fiscal year, RAMS will conduct the following activities:

- RAMS' Peer-to-Peer Vocational Linkage Program will provide at least 1,000 hours of non-clinical case management, service coordination, referral services and successful linkages to health and social services agencies



- At least 200 unduplicated individuals will receive services through the Peer-to-Peer Vocational Linkage Program

## 6. Methodology

### A. Outreach, recruitment, promotion, and advertisement as necessary.

RAMS' responsibility and commitment to mental health care quality and education extends beyond its own walls to reach people of all ages and backgrounds in its community through outreach and serving them in their own environments. This philosophy of care has always been central to the agency's approach. RAMS is uniquely well-positioned and has the expertise to outreach, engage, and retain diverse consumers, underrepresented constituents, and community organizations with regards to vocational services & resources and raising awareness about mental health and physical well-being. As an established community services provider, RAMS comes into contact with significant numbers of consumers & families, annually serving approximately 18,000 adults, children, youth & families at over 90 sites, citywide.

Specifically for Peer-to-Peer Vocational Linkage, the program promotes open positions ("Service Coordinators") within the system of care by outreach and recruitment activities through linkages to workforce development programs (e.g. RAMS Peer Specialist Mental Health Certificate; City College of SF Mental Health Certificate).

Each Service Coordinator is assigned to a specific SFDPH BHS clinic; they work closely with BHS staff and attend staff meetings at their clinics to maintain visibility of the program.

### B. Admission, enrollment and/or intake criteria and process where applicable

This program provides for Service Coordinators who work at designated BHS clinics/program providing support to clinicians and their clients on identifying community resources, and providing assistance on successfully accessing, utilizing and maximizing these resources. Clients are referred by direct service providers at various BHS clinics, who indicate the service or assistance needed. The Service Coordinator then meets with the referred client to introduce Peer-to-Peer Vocational Linkage, discuss the details of the providers' referral, assess any additional service needs, and provide assistance to address needs; treatment plan of care may be adjusted, as appropriate.

### C. Service delivery model, including treatment modalities, phases of treatment, hours of operation, length of stay, locations of service delivery, frequency and duration of service, strategies for service delivery, wrap-around services, residential bed capacity, etc. Include any linkages/coordination with other agencies.

The Service Coordinator works with the client to support them in the access and utilization of available resources, including advocating for clients' needs in the provision of services and resources. Assistance and services may include but are not limited to:

- *Transportation and Mobility*
- *Affordable Housing*

- *Assistive Technology*
  - *Language Interpretation*
  - *Government Services and Programs*
  - *Cultural Adjustment*
  - *Immigration Services*
  - *Food Assistance*
  - *Medical Assistance*
  - *Mental Health Services*
  - *Training and Education Programs*
  - *Independent Living Skills*
  - *Vocational Service*
  - *Substance Use services*
- *Women's Services*

The Service Coordinators focus on providing the clients with assistance in: acknowledging the available services; understanding the implications of the services; making an informed decision on selecting services; successfully navigating eligibility and accessing systems; maximizing utilization of resources; following up on service progress, remaining on track with recovery goals, and achieving individual and vocational goals.

Service Coordinators may work with the same client several times regarding different needs and issues; the frequency of service may also vary depending on the service needed and the resources available.

- D. Discharge Planning and exit criteria and process, i.e., a step-down to less intensive treatment programs, the criteria of a successful program completion, aftercare, transition to another provider, etc.

Clients may be discharged from this program when their initial referral and/or other identified needs for service coordination have been met or if clients make the decision that their needs have changed and services are no longer desired or necessary.

- E. Program staffing (which staff will be involved in what aspects of the service development and delivery). Indicate if any staff position is not funded by DPH.

See BHS Appendix B.

## 7. Objectives and Measurements

### A. Standardized Objectives

All applicable objectives, and descriptions of how objectives will be measured, are contained in the BHS Performance Objectives FY16-17.

### B. Individualized Program Objectives

- During the fiscal year, the Division's Director/Manager will conduct at least quarterly site visits to meet with Service Coordinator and Site Supervisors to receive updates regarding

Peer-to-Peer Vocational Linkage staff, assess whether Service Coordinators are meeting the needs of the clinic (satisfaction), and address any concerns with the program. Should there be significant findings as a result of these meetings, a plan of action will be developed and implemented to address any program concerns.

- During the fiscal year, 75% of site/clinic/program satisfaction survey responses will express satisfaction with services. This will be evidenced by program satisfaction surveys.
- During the fiscal year, 75% of the clients receiving Peer-to-Peer Vocational Linkage will express overall satisfaction with services. This will be evidenced by client satisfaction surveys. The Division management will compile, review, and analyze results from the satisfaction survey.
- During the fiscal year, 80% of client satisfaction survey responses will indicate an increased knowledge about the community, health and cultural resources available to them. This will be evidenced by client satisfaction surveys.
- During the fiscal year, 75% of clients receiving Peer-to-Peer Vocational Linkage will report increased ability to manage symptoms and/or achieve desired quality-of-life goals as set by program participants. This will be evidenced by documentation/reports that summarize the service plan outcomes.

## 8. Continuous Quality Improvement

### a. Achievement of contract performance objectives and productivity

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All direct service providers are informed about objectives and the required documentation related to the activities and service outcomes. The Division's Director/Manager monitors service progress by collecting information during regular group supervision meetings, data submission by Service Coordinators, chart reviews, and agency site visits. Furthermore, each Service Coordinator receives regular individual supervision from an on-site supervisor at their assigned clinic. On-site supervisors meet with staff weekly or on an as-needed basis to review caseload with regard to service strategies, service plans & progress, productivity, etc. On a regular basis, the Division's Director/Manager conducts a joint supervision with on-site supervisor to discuss each Service Coordinator's overall performance and their progress in meeting contract objections. Should there be concerns regarding Service Coordinator(s)' ability to fulfill contract requirements based on information gathered from the various sources mentioned above, the Division's Director/Manager will work directly with Service Coordinator(s) and on-site supervisor to develop a plan of action to address concerns.

With regards to management monitoring, the Division Director meets with executive management (including Deputy Chief/Director of Clinical Services and Chief Executive Officer) each month to report progress/status towards each contract objective.

b. Quality of documentation, including frequency and scope of internal chart audits.

RAMS utilizes various mechanisms to review documentation quality. Chart reviews are conducted by Division Director/Manager on a quarterly basis; based on these reviews, determinations/ recommendations are provided relating to frequency and modality/type of services, and the match to client's progress & clinical needs. Feedback is provided to direct staff members.

In addition to the program's documentation review, the RAMS Quality Council formally conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy Chief/Director of Clinical Services, and another council member (or designee). Feedback is provided directly to staff as well as general summaries at staff meetings.

c. Cultural competency of staff and services

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by regular group supervision. Furthermore, RAMS annually holds agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.
- Ongoing review of services indicators is conducted by the Division Director (and reported to executive management) on monthly basis
- Client's culture, preferred language for services, and provider's expertise are strongly considered during the case assignment process. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- Development of annual objectives based on cultural competency principles; as applicable, progress on objectives is reported by Division Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Division Director identifies barriers and develops a plan of action.
- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Client Satisfaction);

- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Division Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.
- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters

d. Satisfaction with services

The Peer-to-Peer Vocational Linkage Program conducts an annual client satisfaction survey at each clinic-site to solicit program feedback. The Division management compiles, analyzes, and presents the results of surveys to staff, each program site-supervisor, RAMS Executive Management, and the RAMS Quality Council. The Division Director also collaborates with RAMS Executive Management, Quality Council, and clinics to develop and implement plans to address issues related to client satisfaction as appropriate.

e. Timely completion and use of outcome data, including CANS and/or ANSA data

ANSA data is not applicable for this specific contract; however, as described in previous CQI sections, RAMS continuously utilizes available data to inform service delivery to support positive outcomes. As staff are providing services to BHS clients, they work in collaboration with the primary counselors to support positive outcomes and achievement of treatment goals.

9. Required Language

Not applicable.

**1. Identifiers:**

Program Name: Hire-Ability Information Technology (i-Ability)  
Program Address: 1234 Indiana Street  
City, State, Zip Code: San Francisco, CA 94107  
Telephone/Fax: (415) 282-9675 / (415) 920-6877  
Website Address: www.ramsinc.org / www.hire-ability.org

Contractor Address: RAMS Administration, 639 14<sup>th</sup> Avenue  
City, State, ZIP: San Francisco, CA 94118  
Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
Telephone: (415) 800-0699  
Email Address: angelatang@ramsinc.org

Program Code(s) (if applicable): Not Applicable

**2. Nature of Document (check one)**

New       Renewal       Modification

**3. Goal Statement**

To (1) provide high quality designated IT support services to CBHS (Avatar Helpdesk; Desktop; Advanced Avatar Helpdesk; Advanced Desktop) and (2) engage consumers for improved emotional/physical well-being and quality of life, positive engagement in the community, increase self-sufficiency, and obtain & retain competitive employment.

**4. Target Population**

San Francisco residents who are adults and older adults 18 and over including transitional age, receiving behavioral health services through BHS. Particular outreach is to consumers who have interest in computer-technical support services but minimal work skills and/or work exposure, and may benefit from a structured vocational training program. There is a special focus on APIA communities (Chinese and Tagalog), both immigrants and US-born, a group that is traditionally underserved.

**5. Modality(ies)/Interventions**

This fiscal year represents the continued operations of i-Ability components:

- (a) Avatar Helpdesk (entry): Continued operation
- (b) Desktop (entry): Continued operation
- (c) Advanced Avatar Helpdesk: Continued operation
- (d) Advanced Desktop: Continued operation
- (e) Consumer Portal Help Desk: Initial rollout

**Workforce Development (MESA Modality)**

- For the Avatar Helpdesk (entry), this contract term includes two cohorts with each cohort enrolling at least eight trainees after the two week visitation period (total 16 trainees)
- For the Desktop Training (entry), this contract term includes two cohorts with each cohort enrolling at least seven trainees after the two week visitation period (total 14 trainees)

- For the Advanced Avatar Helpdesk Training, this contract term includes two cohorts with each enrolling at least five trainees after the two week visitation period (total 10 trainees)
- For the Advanced Desktop, this contract term includes one cohort with two trainees
- For Avatar Helpdesk, Desktop, and Advanced Avatar Helpdesk components, a full cohort's training duration is nine months; for Advanced Desktop component, a full cohort's training duration is one year.
- Trainees/interns engage in workforce development activities (classroom and on-the-job training) intended to develop a diverse and competent workforce; outreach to under-represented communities; provide career exploration opportunities or to develop work readiness skills; or increase the number of consumers and family members in the healthcare information technology workforce.
- Each Avatar Helpdesk, Desktop & Advanced Avatar Helpdesk trainee/intern receives at least 7-16 hours/week of paid, on-the-job workforce development training; work hours vary, according to the individual's availability & support needs.
- There are additional activity hours for program planning, providing individualized and/or group trainee support (Vocational Rehabilitation Counselor and/or IT Trainer), preparing & reviewing/adjusting training materials (per Avatar system updates), etc.

During this fiscal year, there will be the initial implementation of the Consumer Portal Help Desk. The Consumer Portal is provides clients of SFDPH-BHS access to selected portions of their clinical record. This help desk will specifically support end users of the Consumer Portal.

## 6. Methodology

- a. Outreach, recruitment, promotion, and advertisement as necessary.

RAMS' responsibility and commitment to mental health care quality and education extends beyond our own walls to reach people of all ages and backgrounds in our community through outreach and serving them in their own environments. This philosophy of care has always been central to the agency's approach. RAMS is uniquely well-positioned and has the expertise to outreach, engage, and retain diverse consumers, underrepresented constituents, and community organizations with regards to Hire-Ability services & resources and raising awareness about mental health and physical well-being. As an established community services provider, RAMS comes into contact with significant numbers of consumers & families with each year serving approximately 18,000 adults, children, youth & families at over 90 sites, citywide. Hire-Ability's primary referral sources are SFDPH outpatient behavioral health services; as such, the program's staff regularly performs outreach activities and coordinates within RAMS programs and other agencies' management.

Hire-Ability also operates Employee Development which primarily includes Production & Fulfillment Services, a workshop setting and on-the-job training in the fulfillment services industry with paid work experience. Hire-Ability is also a partnering program with the State Department of Rehabilitation to provide Employment Services (employment preparation, placement and retention services) to individuals with mental illnesses. Outreach and promotion is routinely conducted to these groups. The program also performs monthly outreach activities independently as well as in coordination with the BHS Vocational Coordinator, to various SFDPH BHS providers (e.g. outpatient clinics & residential facilities within the system-of-care). Outreach is also conducted at system of care provider meetings, Avatar bulletins, BHS Vocational Summit, etc.

- b. Admission, enrollment and/or intake criteria and process where applicable.

The program has an application process by which interested individuals are to submit their completed application packet within the indicated deadline. Application packets are distributed to the community, along with informational flyers about the program curriculum and content. Application packets include basic demographic information (name, address, and contact information), reference contact information, and a personal statement. Program orientations/Open Houses are also held, prior to application deadlines and serve as an opportunity for interested individuals and/or community organizations to obtain assistance with application completion and/or inquire more about the program. All completed applications are reviewed by an admission review committee, with all applicants receiving notification about the decision/outcome. Interviews may also be scheduled, as part of the admission review process. Once the cohort begins, there is a more detailed orientation to the program such as completion/graduation guidelines, discussion of expectations (by trainees and program), etc.

- C. Service delivery model, including treatment modalities, phases of treatment, hours of operation, length of stay, locations of service delivery, frequency and duration of service, strategies for service delivery, wrap-around services, residential bed capacity, etc. Include any linkages/coordination with other agencies.

The i-Ability, Vocational IT program has the following components:

- 1) Avatar Helpdesk, a single point of contact for end users of the BHS electronic health record system ("Avatar") to receive support. The initial unpaid classroom training varies from 2-4 weeks in which after, trainees engage in paid, on-the-job training where they gain skills regarding troubleshooting basic user issues, engaging & interacting with end users (customer service), logging & triaging more complicated issues, healthcare confidentiality policies & practices, etc. Each cohort cycle is nine months; cohorts overlap to maintain continuity of helpdesk support.
- 2) Desktop, a single point of contact for end users of BHS computers/hardware to receive support and maintenance within BHS computing environment. The initial unpaid classroom training varies from 2-4 weeks in which after, trainees engage in paid, on-the-job training where trainees gain skills regarding hardware repair and support (break-fix), technical troubleshooting, healthcare confidentiality policies & practices, etc. Each cohort cycle is nine months with no overlap.
- 3) Advanced Avatar Helpdesk, a single point of contact for end users of the BHS electronic health record system ("Avatar") to receive support. Additionally, interns will provide additional support to the Avatar Super User Community. The initial unpaid classroom training varies from 2-4 weeks in which after, trainees engage in paid, on-the-job training where interns increase their skills regarding troubleshooting basic and super user issues, engaging & interacting with end users (customer service), logging & triaging more complicated issues, healthcare confidentiality policies & practices, etc. The interns will assist with mentoring the Helpdesk trainees by shadowing frontline activities and providing structured peer support as facilitated by the trainer of the program. Each cohort cycle is nine months; cohorts overlap to maintain continuity of helpdesk support.
- 4) Advanced Desktop, a single point of contact for end users of BHS computers/hardware to receive support and maintenance within BHS computing environment. Trainees engage in paid, on-the-job training to gain advanced skills regarding hardware repair and support (break-fix), technical troubleshooting, healthcare confidentiality policies & practices, etc. Each cohort cycle is one year with no overlap.

Program operation hours are Monday to Friday (8:00 am – 5:00 pm). Classroom and on-the-job training is primarily provided on-site at BHS (1380 Howard Street, SF, CA 94103) and/or RAMS Hire-Ability Vocational Services (94107).



The program design includes providing culturally competent, consumer-driven, strengths-based vocational services including but not limited to: vocational assessments, job skills training, on-site work experience, vocational counseling & job coaching, and classes/workshops aimed at skills development and building strengths towards employment readiness. The program improves, maintains, or restores personal independence and functioning, consistent with requirements for learning and development, which provides services to a distinct group of beneficiaries.

The IT Trainers (Avatar Helpdesk, Desktop/Advanced Desktop, Advanced Avatar Helpdesk) are the primary staff persons responsible for classroom and on-the-job training, providing direct support and supervision (individual, group) to trainees/interns. The classroom training is primarily provided during the first two to four weeks of the cohort; thereafter, training and support is provided on a regular, ongoing basis (weekly). The IT Trainers may also serve as additional frontline coverage; the IT Manager, along with the Director of Vocational Services/Program Director, provides as needed coverage and oversees quality control & management for the i-Ability program. Furthermore, all trainees/interns are assigned a Vocational Rehabilitation Counselor. The Counselor conducts a comprehensive vocational assessment (job readiness/interest, skills development, other work-related issues), vocational counseling (case management & linkages), supports and identifies strengths & areas of employment interest, job searches, and placement assistance, as well as job coaching, counseling & guidance.

Within the first three months of participation, an integrated vocational plan with specific goals is collaboratively (counselor, trainers, and trainees/interns) and formally developed. There is ongoing monitoring of progress (by trainers and counselor), in relation to the goals; the vocational plan is formally reviewed at the third month of participation. Areas of vocational assessment include, but are not limited to: productivity, work quality, attendance, punctuality, dress & grooming, communication with others, group participation, and work endurance. The comprehensive vocational plan considers the client's environment and entire support structure and takes into account collateral information (e.g. behavioral health plan of care incorporates vocational goals). The plan development and reassessment periods include trainee input through self-evaluation sections as well as the counselor's appraisal. RAMS also facilitates linkages for support services (e.g. childcare, transportation), as needed.

i-Ability also offers structured training/groups (e.g. vocational counseling, training, psycho-education) as a core component of services to clients. Facilitated by the IT Trainers and/or Vocational Rehabilitation Counselors, the trainings/groups provide positive peer support, focus on interpersonal relationships, support network for specific challenges, and can assist individuals to learn about themselves and relate better with other people. Trainings/groups can be jointly run with collaborative partners (e.g. behavioral health counselors, BHS), taking place at RAMS and/or the vendor (BHS, if possible) or partner's site, depending on feedback and offered at various days and times.

Furthermore, this fiscal year includes the initial implementation of the Consumer Portal Help Desk. The Consumer Portal is provides clients of SFDPH-BHS access to selected portions of their clinical record. This help desk will specifically support end users of the Consumer Portal. This Portal will consist of Supervisors and Frontline staff, all of which are employee positions.

D. Describe your program's exit criteria and process, e.g. successful completion.

Trainees successfully complete the program when: (1) 85% attendance rate, (2) Vocational Development Plan goals are achieved, and score of 75% or higher on the certificated exams is accomplished or early completion/discharge of the program (at least three months after program start due to gaining employment

related to participating in the program. Upon successful completion/discharge, referral can be to competitive employment, volunteer internships, education, college enrollment, or salaried employment including higher wage and skilled jobs in industries which are experiencing shortages such as the healthcare field. In this pursuit, the Vocational Rehabilitation Counselor may assist with job search & placement assistance and provide job coaching, counseling, and guidance. i-Ability is a program of RAMS Hire-Ability Vocational Services which offers a full spectrum of vocational services; as such, trainee graduates may also transition into the Employment Services, which is funded through a contract/agreement with the California State Department of Rehabilitation. This program provides a higher level of individualized job preparation using classroom and individual meetings, job development, individualized plans & job placement, and follow-along services to consumers. Hire-Ability also maintains a cooperative agreement with California Department of Rehabilitation (since 1998) to connect employers with trained individuals; thus, supporting job placements for program participants with employment.

- E. Program staffing (which staff will be involved in what aspects of the service development and delivery). Indicate if any staff position is not funded by DPH.

See CBHS Appendix B.

F. Mental Health Services Act Programs

1. One of the primary MHSA tenets is consumer participation/engagement. Programs must identify how participants and/or families are engaged in the development, implementation and/or evaluation of programs. This can include peer-employees, advisory committees, etc.

RAMS is committed to consumer involvement and community input in all elements of program operations, including planning, implementation, and evaluation. This process ensures quality programming, increases effectiveness, and ensure culturally competency. The best informant for the culturally relevant curriculum & program development is the target population, themselves. Potential applicants/trainees and interested organizations are invited to the program Orientations/Open Houses as well as contact the i-Ability Vocational IT Manager directly. As the cohort is in operation, the IT Trainer regularly meets (approximately weekly) with trainees to solicit feedback; the i-Ability Manager and Vocational Rehabilitation Counselor also regularly solicit feedback from trainees. Furthermore, at the end of each cohort, trainees are given anonymous written program evaluations and satisfaction surveys regarding curriculum, course structure & activities, support services, and professional development. A post-cohort focus group is also conducted to solicit similar feedback regarding the curriculum of the program, recruitment process, accessibility, and effectiveness. All feedback is compiled and reviewed (by Hire-Ability management and RAMS executive management), informs the program design (development & adjustments, implementation), and is incorporated, as appropriate.

During the cohort on-the-job training, all trainees are paid. Furthermore, i-Ability Vocational IT maintains an advisory committee that is multi-disciplinary and reflects the diversity of the community. Membership includes consumer representation, CBHS, and RAMS with involvement from program participants (graduates). This committee schedules to meet quarterly and evaluates program components while advising on its further development and implementation.

2. MHSA Vision: Providers have the attitudes, knowledge and skills needed to understand, communicate with and effectively serve people across cultures.

RAMS recruits employs staff with relevant educational, employment history and cultural competence for the target population we work with through thorough interviews and reference checks. Furthermore, RAMS believes in the principles of Wellness and Recovery in which promotes the engagement of peers through various activities which include employment of peers at all levels of positions. The process of ongoing education and training to ensure staff are providing the standard of services required by RAMS are generally through regular attendance of staff meetings, individual supervisor supervisee meetings, monthly internal/external trainings, annual cultural competency trainings, and other activities that are program specific. RAMS maintains a philosophy as well as a policy regarding creating a welcoming environment to all, which in turn is displayed through positive and healthy attitudes among staff. Measurement of how effective staff is in providing a high level of service is through client satisfaction surveys, client advisory councils, and feedback from other providers.

3. MHS Vision: Collaboration with different systems increases opportunities for jobs, education, housing, etc.

RAMS continuously engages with various systems to increase the program trainees' knowledge and networking possibilities regarding jobs/internships, further educational opportunities, etc. Such systems that Hire-Ability specifically works with includes, but is not limited to: BHS (as the program is primarily providing classroom and on-the-job training, on-site at BHS' location using the BHS system); engaging in the San Francisco's Mayor's Committee on Disabilities (monthly meeting that involves various systems serving/providing vocational services); Job Developers Huddle-One Stop Western Addition, Potrero /Dogpatch Merchants Association and ongoing relationship/ collaboration with California State Department of Rehabilitation (for which Hire-Ability maintains a separate contract); and involvement in the CBHS Co-Operative group (streamlined referral system amongst RAMS Hire-Ability, Caminar, State Department of Rehabilitation, Citywide Forensic Collaborative). Furthermore, the i-Ability Vocational Rehabilitation Counselor provides support & coaching into the workforce and connects participants to additional resources (e.g. Department of Rehabilitation, RAMS Hire-Ability Employment Services, educational/training resources, housing).

## 7. Objectives and Measurements

### a. Standardized Objectives

All applicable objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS Performance Objectives FY16-17.

### b. Individualized Objectives

- At program completion, 75% of trainee graduates will indicate improvements to their coping abilities; this will be evidenced by post-program evaluations and satisfaction surveys, collected by RAMS staff and analyzed by the Program Director
- For each component, 75% of enrolled trainees will successfully complete (i.e. graduate) the training or have exited the program early due to obtaining employment related to this field, thus increasing readiness for entry-level employment/internship/volunteerism in the information technology/behavioral health field; this will be evidenced by program completion records that is documented by the Vocational Rehabilitation Counselor

- At program completion, 75% of trainees will express overall satisfaction with the program; this will be evidenced by the post-program satisfaction surveys, collected by RAMS staff and analyzed by the Program Director
- At program completion, at least 75% of trainees will participate in exit interviews through focus groups or one-on-one interview to solicit feedback regarding the curriculum of the program, recruitment process, accessibility, and effectiveness; this will be evidenced by feedback summary notes, collected by BHS IT management and RAMS staff.
- At least 75% of trainee graduates will respond/ participate in the three-month post-program survey to assess the program's impact on work and/or education placements

## 8. Continuous Quality Improvement

### a. Achievement of contract performance objectives and productivity

RAMS monitors contract performance objectives through several methods such as daily data analysis and monthly review of consumer individual vocational goals/objectives, regular weekly meetings between the Vocational Rehabilitation Counselor and consumer served, regular individual supervision between supervisors and supervisee's to discuss consumer caseload with regard to intervention strategies, vocational plans & progress, documentation, productivity and overall contract objectives. Other significant activities to ensure achievement of contract performance objectives include regular weekly program staff meetings and program management meetings where issues related to overcoming any barriers to achieving performance objectives are discussed.

Monthly reports from each program coordinator to the program director and in turn to the Deputy Chief of RAMS address the ongoing progress and/or barriers towards contract objectives. Corrective action activities are documented which includes the identification of the issue, plan of action and steps and timelines for completion of the plan. RAMS Quality Council which represents a small group of RAMS supervisors, supervisees, consumers and executive leadership staff meet quarterly, is designed to advise on program quality assurance and improvement activities.

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All staff are informed about objectives and the required documentation related to the activities and program outcomes; majority of program objectives are measured by participant scores, program evaluations, and/or post-program surveys. With regards to management monitoring, the Program Director reports progress/ status towards each contract objective to executive management (Deputy Chief/Director of Clinical Services and Chief Executive Officer) in a written monthly report. If the projected progress has not been achieved for the month, the Program Director identifies barriers and develops a plan of action. In addition, the Program Director monitors programming/service progress (level of engagement by participants, level of accomplishing program goals/objectives), program exit reasons, and service/resource utilization. RAMS also conducts various random file/chart reviews to review adherence to objectives as well as service documentation requirements.

### b. Quality of documentation, including a description of the frequency and scope of internal chart audits

The program utilizes various mechanisms to review documentation quality. Chart review by supervisors, at the very minimal, is reviewed after the 10 day visitation period and, if enrollment continues, a minimum of every 30 days thereafter and within a week of case closure. Active charts are reviewed quarterly after the vocational re-assessments and plans are conducted. Based on their review, determinations/recommendations are provided relating to service authorizations including frequency and modality/type of services, and the match to client's progress & vocational/clinical needs; feedback is provided to direct staff members. Furthermore, clinical supervisors monitor the service documentation of their supervisees; staffs meet weekly with their supervisors to review caseload with regard to service strategies, vocational plans & progress, documentation, productivity, etc. On a quarterly basis, the Program Director or Manager/

Coordinator conducts a review of randomly selected charts (up to 10 charts, program-wide) to monitor quality & timeliness and provide feedback directly to staff as well as general summaries at staff meetings. The selection is such that each individual provider is reviewed at least annually.

In addition to the program's documentation review, the agency's Quality Council conducts an annual review of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy Chief/Director of Clinical Services, and another council member (or designee). Feedback will be provided directly to staff as well as general summaries at staff meetings.

c. Cultural competency of staff and services

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

- Ongoing professional development and enhancement of cultural competency practices are facilitated through a regular training schedule, which includes in-service trainings on various aspects of cultural competency/humility and service delivery (including holistic & complementary health practices, wellness and recovery principles). Trainings are from field experts on various topics. Professional development is further supported by individual supervision (mostly weekly); supervisors and their supervisees' caseload with regard to service strategies, vocational plans & progress, documentation, etc. Furthermore, RAMS annually holds an agency-wide cultural competency training. Training topics are identified through various methods, primarily from direct service staff suggestions and pertinent community issues.
- Ongoing review of vocational services indicators is conducted by the Program Director (and reported to executive management) on monthly basis; data collection and analysis of service engagement (referral source; engagement after intake; number of admissions; service discharge reasons; and service utilization review)
- Client's preferred language for services is noted at intake; during the case assignment process, the Program Director matches client with counselor by taking into consideration language, culture, and provider expertise. RAMS also maintains policies on Client Language Access to Services; Client Nondiscrimination and Equal Access; and Welcoming and Access.
- At least annually, aggregated demographic data of clientele and staff/providers is collected and analyzed by management in order to continuously monitor and identify any enhancements needed
- Development of annual objectives based on cultural competency principles; progress on objectives are reported by Program Director to executive management in monthly report. If the

projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action.

- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Client Satisfaction);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Program Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.
- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters.

d. Satisfaction of services

RAMS adheres to the CBHS satisfaction survey protocols which include dissemination annually or biannually. In addition, the Hire-Ability administered its program-developed client satisfaction surveys at case closure or upon request of the client. Furthermore, client feedback is obtained during post-program evaluations, quarterly client advisory council meetings, daily community meetings at the vocational services program, individual meetings between direct service staff and clients, and through a confidential telephone hotline. Results of the survey methods are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. Furthermore, the program facilitates focus groups with clients. All satisfaction survey methods and feedback results are also compiled and reported to executive management along with assessment of suggestion implementation. On an annual to biennial basis, clients attend RAMS Board of Directors meetings to share their experiences and provide feedback.

e. Timely completion and use of outcome data

Not applicable.

9. Required Language

Not applicable.



<b>Contractor Name:</b> Richmond Area Multi-Services, Inc.	<b>Appendix A-5</b>
<b>Program Name:</b> TAY Vocational Services	<b>Contract Term:</b> 07/01/16 – 06/30/17

**1. Identifiers:**

Program Name: TAY Vocational Services  
 Program Address: 1234 Indiana Street  
 City, State, ZIP: San Francisco, CA 94107  
 Telephone/FAX: Tel: (415) 282-9675 Fax: (415) 920-6877  
 Website Address: www.ramsinc.org

Contractor Address: RAMS Administration, 639 14<sup>th</sup> Avenue  
 City, State, ZIP: San Francisco, CA 94118  
 Person Completing this Narrative: Angela Tang, RAMS Director of Operations  
 Telephone: (415) 800-0699  
 Fax: (415) 751-7336  
 Email Address: angelatang@ramsinc.org

Program Code(s) (if applicable): Not Applicable

**2. Nature of Document:**

New  Renewal  Modification

**3. Goal Statement:**

To provide vocational/occupational assessment, time-limited paid internships in order to provide healthy activities, provide entry-level work exploration and experience, and support TAY who are receiving services in the SFDPH-BHS system of care achieve resiliency and maximize recovery.

**4. Target Population:**

San Francisco residents that are transitional age youth, ages 15-18 and TAY young adults, ages 18-25, currently receiving behavioral health services at SFDPH-BHS system of care. Outreach will be made to underserved populations and those who are involved in multiple systems including behavioral health, juvenile justice, human services and the educational system. Particular outreach will be made to all BHS Adult Providers, CYF SOC Providers, organizations that serve transitional aged youth which may include Larkin Street, Huckleberry House, SFUSD Wellness Center, etc.

**5. Modality(s)/Intervention(s)**

See BHS Appendix B, CRDC pages.

**6. Methodology:**

The Hire-Ability TAY Vocational Services Program contains four main components:

- Assessment – Vocational/occupational and interest assessment. The program will provide a developmentally appropriate interactive assessment in order to engage youth in full participation.



Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-5
Program Name: TAY Vocational Services	Contract Term: 07/01/16 – 06/30/17

- Case Management – The program will provide ongoing case management, including linkage and referral when needed, to support participants in minimizing barriers and maximizing participation and recovery.
- Group Training – Three month initial group training which may include soft skills, fieldtrip to potential internship sites, inspirational and career related speakers, group cohesion and learning, etc.; and ongoing group learning activities throughout the program year for each cohort.
- Internship/Work Experience – Each participant will be placed at an internship site that best fits his/her interest, ability, availability, and experience, for nine months. Site may be within RAMS and in the community. Internship may range from 4-20 hours/week depending on site availability, participant’s school and other schedule, and program design.

All participants will receive San Francisco minimum wage pay/stipend during program duration.

As this is the first cohort and a pilot program, outreach started during FY 2015-16 with focus groups which also served as outreach to the TAY community and their families. Outreach for 2016-17 will take place in July through September; notice of acceptance and program start in October 2016 for the first cohort.

This is a 12-month program with an additional 2-month retention follow-up, which will roll over to the following fiscal year. The second cohort will start in spring 2017. With two cohorts staggered to allow smaller cohorts, yet ability to serve more youth, and be more flexible for youth to start at two different time span.

A mid- and end-program survey will be administered. The mid-program survey is an opportunity to provide more timely feedback to be considered for program improvement.

## 7. Objectives and Measurements:

### A. Standardized Objectives

Any applicable objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS AOA Performance Objectives FY 16-17.

### B. Individualized Objectives

RAMS TAY Vocational Services has established the following objectives for FY 2016-2017:

- At least 15 TAY youth will be enrolled in the program
- At least 75% of participants will complete the program (e.g. graduate)
- To complete the program, participants must meet a 75% participation rate
- At least 75% of program graduates will indicate, on an exit survey, an increase of readiness for additional meaningful activities related to vocational services. This may be collected in fiscal year 2017-18; however, a mid-program survey will be administered to elicit feedback.
- At least 75% of program graduates will indicate, on an exit survey, overall program satisfaction. This may be collected in fiscal year 2017-18; however, a mid-program survey will be administered to elicit feedback for program improvement.

Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-5
Program Name: TAY Vocational Services	Contract Term: 07/01/16 - 06/30/17

### 8. Continuous Quality Improvement:

#### A. Achievement of contract performance objectives and productivity.

RAMS continuously monitors progress towards contract performance objectives and has established information dissemination and reporting mechanisms to support achievement. All staff are informed about objectives and the required documentation related to the activities and program outcomes; majority of program objectives are measured by participant scores, program evaluations, and/or post-program surveys. With regards to management monitoring, the Program Director reports progress/status towards each contract objective to executive management (Deputy Chief/Director of Clinical Services and Chief Executive Officer) in a written monthly report. If the projected progress has not been achieved for the month, the Program Director identifies barriers and develops a plan of action. In addition, the Program Director monitors programming/service progress (level of engagement by participants, level of accomplishing program goals/objectives), program exit reasons, and service/resource utilization. RAMS also conducts various random file/chart reviews to review adherence to objectives as well as service documentation requirements.

#### B. Quality of documentation, including a description of the frequency and scope of internal chart audits.

The program director and other members of the Hire-Ability Vocational Services management team meet regular with staff for supervision meetings. Documentation of meetings, trainings, performance evaluations is noted and, as appropriate, may be filed directly in the employees personnel file with human resources. Feedback through surveys are also analyzed and evaluated and reported to RAMS executive leadership. Information from the outcomes is used for program improvement purposes.

RAMS utilizes various mechanisms to review documentation quality. Chart reviews are conducted by supervisors; based on their review, determinations/recommendations are provided relating to frequency and modality/type of services, and the match to client's progress & vocational/clinical needs. Feedback is provided to direct staff members. Furthermore, supervisors monitor the service documentation of their supervisees; staff meets weekly with their supervisors to review caseload with regard to service strategies, vocational plans & progress, documentation, productivity, etc. Charts are reviewed at regular intervals, to monitor quality & timeliness. Feedback is provided directly to staff as well as general summaries at staff meetings.

In addition to the program's documentation review, the RAMS Quality Council formally conducts a of randomly selected charts to monitor adherence to documentation standards and protocols. The review committee includes the Council Chair (RAMS Director of Operations), Deputy Chief/Director of Clinical Services, and another council member (or designee). Feedback is provided directly to staff as well as general summaries at staff meetings.

#### C. Cultural competency of staff and services.

Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-5
Program Name: TAY Vocational Services	Contract Term: 07/01/16 – 06/30/17

RAMS philosophy of care reflect values that recovery & rehabilitation are more likely to occur where the mental health systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers and their families and communities, at large. The agency upholds the Culturally and Linguistically Appropriate Services (CLAS) standards. The following is how RAMS monitors, enhances, and improves service quality:

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- At least annually, aggregated demographic data of clientele and staff/providers is collected and analyzed by management in order to continuously monitor and identify any enhancements needed
- Development of annual objectives based on cultural competency principles; as applicable, progress on objectives are reported by Program Director to executive management in monthly report. If the projected progress has not been achieved for the given month, the Program Director identifies barriers and develops a plan of action.
- Strengthening and empowering the roles of consumers and their families by soliciting feedback on service delivery and identifying areas for improvement (see Section D. Satisfaction with services);
- RAMS maintains policies and procedures to recruit, retain, and promote at all levels a diverse staff and leadership (including Board of Directors) that reflect the multi-cultural, multi-lingual diversity of the community. Other retention strategies include soliciting staff feedback on agency/programmatic improvements (service delivery, staffing resources); this is continuously solicited by the Program Director and, at least annually, the CEO meets with each program to solicit feedback for this purpose. Human Resources also conduct exit interviews with departing staff. All information is gathered and management explores implementation, if deemed appropriate; this also informs the agency's strategic plan.

Contractor Name: Richmond Area Multi-Services, Inc.	Appendix A-5
Program Name: TAY Vocational Services	Contract Term: 07/01/16 - 06/30/17

- RAMS Quality Council meets quarterly and is designed to advise on program quality assurance and improvement activities; chaired by the RAMS Director of Operations, the membership includes an administrator, director, clinical supervisor, peer counselor, and direct services staff. Programs may also present to this council to gain additional feedback on quality assurance activities and improvement.
- To ensure accountability at all levels, the RAMS CEO submits a monthly written report to RAMS Board of Directors on agency and programs' activities and matters

D. Satisfaction with services.

RAMS adheres to the BHS satisfaction survey protocols which include dissemination annually or biannually, as applicable. In addition, the Hire-Ability administered its program-developed client satisfaction surveys. Furthermore, client feedback is obtained during post-program evaluations, client advisory council meetings, community meetings at the vocational services program, individual meetings between direct service staff and clients, and through a confidential telephone hotline. Results of the survey methods are shared at staff meetings, reviewed by the RAMS Quality Council, and reported to executive management. Furthermore, the program facilitates focus groups with clients. All satisfaction survey methods and feedback results are also compiled and reported to executive management along with assessment of suggestion implementation. On an annual to biennial basis, clients attend RAMS Board of Directors meetings to share their experiences and provide feedback.

E. Timely completion and use of outcome data, including CANS and/or ANSA data.

Not Applicable.

9. Required Language:

Not Applicable.



**Appendix B**  
**Calculation of Charges**

**1. Method of Payment**

A. Invoices furnished by CONTRACTOR under this Agreement must be in a form acceptable to the Contract Administrator and the CONTROLLER and must include the Contract Progress Payment Authorization number or Contract Purchase Number. All amounts paid by CITY to CONTRACTOR shall be subject to audit by CITY. The CITY shall make monthly payments as described below. Such payments shall not exceed those amounts stated in and shall be in accordance with the provisions of Section 5, COMPENSATION, of this Agreement.

Compensation for all SERVICES provided by CONTRACTOR shall be paid in the following manner. For the purposes of this Section, "General Fund" shall mean all those funds which are not Work Order or Grant funds, "General Fund Appendices" shall mean all those appendices which include General Fund monies.

**(1) Fee For Service (Monthly Reimbursement by Certified Units at Budgeted Unit Rates):**

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15<sup>th</sup>) calendar day of each month, based upon the number of units of service that were delivered in the preceding month. All deliverables associated with the SERVICES defined in Appendix A times the unit rate as shown in the appendices cited in this paragraph shall be reported on the invoice(s) each month. All charges incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

**B. Final Closing Invoice**

**(1) Fee For Service Reimbursement:**

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those SERVICES rendered during the referenced period of performance. If SERVICES are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY. CITY'S final reimbursement to the CONTRACTOR at the close of the Agreement period shall be adjusted to conform to actual units certified multiplied by the unit rates identified in Appendix B attached hereto, and shall not exceed the total amount authorized and certified for this Agreement.

C. Payment shall be made by the CITY to CONTRACTOR at the address specified in the section entitled "Notices to Parties."

D. Upon the effective date of this Agreement, contingent upon prior approval by the CITY'S Department of Public Health of an invoice or claim submitted by Contractor, and of each year's revised Appendix A (Description of Services) and each year's revised Appendix B (Program Budget and Cost Reporting Data Collection Form), and within each fiscal year, the CITY agrees to make an initial payment to CONTRACTOR not to exceed 25% of the General Fund and Prop 63 portion of the CONTRACTOR'S allocation for the applicable fiscal year.

CONTRACTOR agrees that within that fiscal year, this initial payment shall be recovered by the CITY through a reduction to monthly payments to CONTRACTOR during the period of March 1 through June 30 of the applicable fiscal year, unless and until CONTRACTOR chooses to return to the CITY all or part of the initial payment for that fiscal year. The amount of the initial payment recovered each month shall be calculated by dividing the total initial payment for the fiscal year by the total number of months for recovery. Any termination of this Agreement, whether for cause or for convenience, will result in the total outstanding amount of the initial payment for that fiscal year being due and payable to the CITY within thirty (30) calendar days following written notice of termination from the CITY.

**2. Program Budgets and Final Invoice**

A. Program Budgets are listed below and are attached hereto:

Budget Summary

- Appendix B-1 Hire - Ability Janitorial Services
- Appendix B-2 Hire - Ability Clerical & Mailroom Services
- Appendix B-3 Peer-to-Peer Vocational Linkage
- Appendix B-4 Hire-Ability Information Technology
- Appendix B-5 TAY Vocational Services

**B. COMPENSATION**

Compensation shall be made in monthly payments on or before the 30<sup>th</sup> day after the DIRECTOR, in his or her sole discretion, has approved the invoice submitted by CONTRACTOR. The breakdown of costs and sources of revenue associated with this Agreement appears in Appendix B, Cost Reporting/Data Collection (CR/DC) and Program Budget, attached hereto and incorporated by reference as though fully set forth herein. The maximum dollar obligation of the CITY under the terms of this Agreement shall not exceed **Nine Million Five Hundred Fifty-Eight Thousand Two Hundred Eighty Eight Dollars (\$9,558,288)** for the period of January 1, 2016 through December 31, 2017.

CONTRACTOR understands that, of this maximum dollar obligation **\$1,024,102** is included as a contingency amount and is neither to be used in Appendix B, Budget, or available to CONTRACTOR without a modification to this Agreement executed in the same manner as this Agreement or a revision to Appendix B, Budget, which has been approved by the Director of Health. CONTRACTOR further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable CITY and Department of Public Health laws, regulations and policies/procedures and certification as to the availability of funds by the Controller. CONTRACTOR agrees to fully comply with these laws, regulations, and policies/procedures.

(1) For each fiscal year of the term of this Agreement, CONTRACTOR shall submit for approval of the CITY's Department of Public Health a revised Appendix A, Description of Services, and a revised Appendix B, Program Budget and Cost Reporting Data Collection form, based on the CITY's allocation of funding for SERVICES for the appropriate fiscal year. CONTRACTOR shall create these Appendices in compliance with the instructions of the Department of Public Health. These Appendices shall apply only to the fiscal year for which they were created. These Appendices shall become part of this Agreement only upon approval by the CITY.

(2) CONTRACTOR understands that, of the maximum dollar obligation stated above, the total amount to be used in Appendix B, Budget and available to CONTRACTOR for the entire term of the contract is as follows, not withstanding that for each fiscal year, the amount to be used in Appendix B, Budget and available to CONTRACTOR for that fiscal year shall conform with the Appendix A, Description of Services, and a Appendix B, Program Budget and Cost Reporting Data Collection form, as approved by the CITY's Department of Public Health based on the CITY's allocation of funding for SERVICES for that fiscal year.

<u>Term</u>	<u>Amount</u>
1/1/16-6/30/16	\$2,024,552
7/1/16-6/30/17	\$4,339,756
7/1/17-12/31/17	\$2,169,878
Sub. Total	\$8,534,186
Contingency	\$1,024,102
Total:	\$9,558,288

(3) CONTRACTOR understands that the CITY may need to adjust sources of revenue and agrees that these needed adjustments will become part of this Agreement by written modification to CONTRACTOR. In event that such reimbursement is terminated or reduced, this Agreement shall be terminated or proportionately reduced accordingly. In no event will CONTRACTOR be entitled to compensation in excess of these amounts for these periods without there

first being a modification of the Agreement or a revision to Appendix B, Budget, as provided for in this section of this Agreement.

C. CONTRACTOR agrees to comply with its Budget as shown in Appendix B in the provision of SERVICES. Changes to the budget that do not increase or reduce the maximum dollar obligation of the CITY are subject to the provisions of the Department of Public Health Policy/Procedure Regarding Contract Budget Changes. CONTRACTOR agrees to comply fully with that policy/procedure.

D. No costs or charges shall be incurred under this Agreement nor shall any payments become due to CONTRACTOR until reports, SERVICES, or both, required under this Agreement are received from CONTRACTOR and approved by the DIRECTOR as being in accordance with this Agreement. CITY may withhold payment to CONTRACTOR in any instance in which CONTRACTOR has failed or refused to satisfy any material obligation provided for under this Agreement.

E. In no event shall the CITY be liable for interest or late charges for any late payments.

F. CONTRACTOR understands and agrees that should the CITY'S maximum dollar obligation under this Agreement include State or Federal Medi-Cal revenues, CONTRACTOR shall expend such revenues in the provision of SERVICES to Medi-Cal eligible clients in accordance with CITY, State, and Federal Medi-Cal regulations. Should CONTRACTOR fail to expend budgeted Medi-Cal revenues herein, the CITY'S maximum dollar obligation to CONTRACTOR shall be proportionally reduced in the amount of such unexpended revenues. In no event shall State/Federal Medi-Cal revenues be used for clients who do not qualify for Medi-Cal reimbursement.





**Appendix B - DPH 1: Department of Public Health Contract Budget Summary**

DHCS Legal Entity Number (MH) 00343		DHCS Legal Entity Name (MH)/Contractor Name (SA) <b>Richmond Area Multi-Services, Inc.</b>					Page # Summary 1 of 1	
Contract CMS # 7640		Funding Notification Date 09/12/16					Fiscal Year 2016-2017	
Contract Appendix Number	B-1	B-2	B-3	B-4	B-5	B-#		
Provider Number	3894	3894	3894	3894	3894			
Program Name(s)	Janitorial Services	Clerical and Mailroom Services	Peer to Peer Voo Linkage	Information Technology	TAY Vocational Services			
Program Code(s)	N/A	N/A	N/A	N/A	N/A			
Funding Term (mm/dd/yy - mm/dd/yy)	07/01/16-06/30/17	07/01/16-06/30/17	07/01/16-06/30/17	07/01/16-06/30/17	07/01/16-06/30/17		<b>TOTAL</b>	
<b>FUNDING USES</b>								
Salaries	\$ 622,871	\$ 641,927	\$ 185,750	\$ 825,241	\$ 83,217		\$ 2,359,006	
Employee Benefits	\$ 330,122	\$ 288,867	\$ 77,088	\$ 313,592	\$ 32,039		\$ 1,041,706	
<b>Subtotal Salaries &amp; Employee Benefits</b>	<b>\$ 952,993</b>	<b>\$ 930,794</b>	<b>\$ 262,838</b>	<b>\$ 1,138,833</b>	<b>\$ 115,256</b>		<b>\$ 3,400,712</b>	
Operating Expenses	\$ 177,989	\$ 132,478	\$ 26,846	\$ 55,585	\$ 81,173		\$ 474,070	
Capital Expenses								
<b>Subtotal Direct Expenses</b>	<b>\$ 1,130,982</b>	<b>\$ 1,063,272</b>	<b>\$ 289,684</b>	<b>\$ 1,194,418</b>	<b>\$ 196,429</b>		<b>\$ 3,874,782</b>	
Indirect Expenses	\$ 135,718	\$ 127,593	\$ 34,764	\$ 143,330	\$ 23,571		\$ 464,974	
Indirect %	12.0%	12.0%	12.0%	12.0%	12.0%	0.0%	12.0%	
<b>TOTAL FUNDING USES</b>	<b>\$ 1,266,700</b>	<b>\$ 1,190,865</b>	<b>\$ 324,443</b>	<b>\$ 1,337,748</b>	<b>\$ 220,000</b>		<b>\$ 4,339,756</b>	
						Employee Fringe Benefits %	42.3%	
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>								
MH COUNTY Adult - General Fund	\$ 715,430	\$ 581,348					\$ 1,296,778	
MH CYF COUNTY General Fund	\$ 2,383	\$ 7,918					\$ 10,301	
MH STATE Adult 1991 MH Realignment	\$ 121,669	\$ 344,570					\$ 466,239	
MH STATE CYF 1991 Realignment	\$ 3,653	\$ 10,347					\$ 14,000	
MH GRANT SAMSHA Adult SOC, CFDA #93.958			\$ 324,443				\$ 324,443	
MH MHSA (CSS)	\$ 423,565	\$ 246,684			\$ 220,000		\$ 890,249	
MH MHSA (IT) Information Technology				\$ 1,337,748			\$ 1,337,748	
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>	<b>\$ 1,266,700</b>	<b>\$ 1,190,865</b>	<b>\$ 324,443</b>	<b>\$ 1,337,748</b>	<b>\$ 220,000</b>		<b>\$ 4,339,756</b>	
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>								
							\$ -	
							\$ -	
							\$ -	
							\$ -	
							\$ -	
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	
<b>OTHER DPH FUNDING SOURCES</b>								
							\$ -	
							\$ -	
							\$ -	
							\$ -	
<b>TOTAL OTHER DPH FUNDING SOURCES</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	
<b>TOTAL DPH FUNDING SOURCES</b>	<b>\$ 1,266,700</b>	<b>\$ 1,190,865</b>	<b>\$ 324,443</b>	<b>\$ 1,337,748</b>	<b>\$ 220,000</b>		<b>\$ 4,339,756</b>	
<b>NON-DPH FUNDING SOURCES</b>								
<b>TOTAL NON-DPH FUNDING SOURCES</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>	<b>\$ 1,266,700</b>	<b>\$ 1,190,865</b>	<b>\$ 324,443</b>	<b>\$ 1,337,748</b>	<b>\$ 220,000</b>		<b>\$ 4,339,756</b>	

Prepared By Ken Choi, Chief Financial Officer Phone Number 415-800-0699 x205



**Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)**

DHCS Legal Entity Name (MH)/Contractor Name (SA) 00343		Appendix # B-1				
Provider Name RAMS		Page # 1				
Provider Number 3894		Fiscal Year 2018-2017				
		Funding Notification Date 09/12/16				
Program Name	Janitorial Services	Janitorial Services				
Program Code	N/A	N/A				
Mode/SFC (MH) or Modality (SA)	10/30-39	10/30-39				
Service Description	DS-Vocational	DS-Vocational				
Funding Term (mm/dd/yy - mm/dd/yy)	07/01/16-06/30/17	07/01/16-06/30/17				<b>TOTAL</b>
<b>FUNDING USES</b>						
Salaries & Employee Benefits	634,328	318,665				952,993
Operating Expenses	118,471	69,518				177,989
Capital Expenses						
Subtotal Direct Expenses	752,799	378,183				1,130,982
Indirect Expenses	90,336	45,382				135,718
<b>TOTAL FUNDING USES</b>	<b>843,135</b>	<b>423,565</b>				<b>1,266,700</b>
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>						
MH COUNTY Adult - General Fund	HMH-MCC730515	715,430				715,430
MH CYF COUNTY General Fund	HMH-MCP751594	2,383				2,383
MH STATE Adult 1991 MH Realignment	HMH-MCC730515	121,669				121,669
MH STATE CYF 1991 Realignment	HMH-MCP751594	3,653				3,653
MH MHSA (CSS)	PAH-563-1705		423,565			423,565
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>843,135</b>	<b>423,565</b>			<b>1,266,700</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>						
This row left blank for funding sources not in drop-down list						
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>						
<b>OTHER DPH FUNDING SOURCES</b>						
This row left blank for funding sources not in drop-down list						
<b>TOTAL OTHER DPH FUNDING SOURCES</b>						
<b>TOTAL DPH FUNDING SOURCES</b>		<b>843,135</b>	<b>423,565</b>			<b>1,266,700</b>
<b>NON-DPH FUNDING SOURCES</b>						
This row left blank for funding sources not in drop-down list						
<b>TOTAL NON-DPH FUNDING SOURCES</b>						
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>843,135</b>	<b>423,565</b>			<b>1,266,700</b>
<b>BHS UNITS OF SERVICE AND UNIT COSTS</b>						
Number of Beds Purchased (if applicable)						
SA Only - Non-Res 33 - ODE # of Group Sessions (classes)						
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program						
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	
DPH Units of Service	1,886	948				
Unit Type	Client Full Day	Client Full Day	0	0	0	
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES ONLY)	\$ 447.00	\$ 447.00	\$ -	\$ -	\$ -	
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 447.00	\$ 447.00	\$ -	\$ -	\$ -	
Published Rate (Medi-Cal Providers Only)						Total UDC
Unduplicated Clients (UDC)	N/A	N/A				N/A



**Appendix B - DPH 4: Operating Expenses Detail**

Program Name: Janitorial Services  
 Program Code: N/A

Appendix #: B-1  
 Page #: 3  
 Fiscal Year: 2016-2017  
 Funding Notification Date: 09/12/16

Expense Categories & Line Items	TOTAL	General Fund (HMHMCC730515, HMHMCP751594, HMHMCC730515, HMHMGP751594)		MR MHA (CSS) (RMH563-1705)	Accounting Code 3 (Index Code or Detail)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
		07/01/16-06/30/17	07/01/16-06/30/17					
Term (mm/dd/yy-mm/dd/yy):								
Rent	\$ -	\$ -	\$ -	\$ -				
Utilities (telephone, electricity, water, gas)	\$ -	\$ -	\$ -	\$ -				
Building Repair/Maintenance	\$ -	\$ -	\$ -	\$ -				
Occupancy Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office/Program Supplies	\$ 158,166	\$ 105,278	\$ 52,888					
Materials & Supplies Total:	\$ 158,166	\$ 105,278	\$ 52,888	\$ -	\$ -	\$ -	\$ -	\$ -
Training/Staff Development	\$ 1,000	\$ 666	\$ 334					
Insurance	\$ 6,500	\$ 3,661	\$ 1,839					
Equipment Lease & Maintenance	\$ -	\$ -	\$ -					
General Operating Total:	\$ 6,500	\$ 4,327	\$ 2,173	\$ -	\$ -	\$ -	\$ -	\$ -
Local Travel	\$ 5,000	\$ 3,328	\$ 1,672					
Out-of-Town Travel	\$ -	\$ -	\$ -					
Field Expenses	\$ -	\$ -	\$ -					
Staff Travel Total:	\$ 5,000	\$ 3,328	\$ 1,672	\$ -	\$ -	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and (add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -	\$ -					
Consultant/Subcontractor Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):								
Recruitment & Direct Staff Expenses	\$ 3,500	\$ 2,330	\$ 1,170					
Client-Related Food	\$ 4,000	\$ 2,662	\$ 1,338					
Client-Related Other Activities	\$ 823	\$ 546	\$ 277					
Other Total:	\$ 8,323	\$ 5,538	\$ 2,785	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 177,989</b>	<b>\$ 118,471</b>	<b>\$ 59,518</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Document Date: 7/1/2016

Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS' Legal Entity Name (MH)/Contractor Name (SA) 00343		Provider Name RAMS		Provider Number 3894		Appendix #	B-2
						Page #	1
						Fiscal Year	2016-2017
						Funding Notification Date	09/12/16
Program Name	Client and Mailroom Services	Client and Mailroom Services					
Program Code	N/A	N/A					
Mode/SFC (MH) or Modality (SA)	10/30-39	10/30-39					
Service Description	DS-Vocational	DS-Vocational					
Funding Term (mm/dd/yy - mm/dd/yy)	07/01/16-06/30/17	07/01/16-06/30/17					TOTAL
<b>FUNDING USES</b>							
Salaries & Employee Benefits	737,983	192,811					930,794
Operating Expenses	105,035	27,443					132,478
Capital Expenses							
Subtotal Direct Expenses	843,018	220,254					1,063,272
Indirect Expenses	101,163	26,430					127,593
<b>TOTAL FUNDING USES</b>	<b>944,181</b>	<b>246,684</b>					<b>1,190,865</b>
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>							
MH COUNTY Adult - General Fund	HMHMCC730515	581,346					581,346
MH CYF COUNTY General Fund	HMHMCP751594	7,918					7,918
MH STATE Adult 1991 MH Realignment	HMHMCC730515	344,570					344,570
MH STATE CYF 1991 Realignment	HMHMCP751594	10,347					10,347
MH MHSA (CSS)	PMH563-1705		246,684				246,684
This row left blank for funding sources not in drop-down list							
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>944,181</b>	<b>246,684</b>				<b>1,190,865</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>							
This row left blank for funding sources not in drop-down list							
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>							
<b>OTHER DPH FUNDING SOURCES</b>							
This row left blank for funding sources not in drop-down list							
<b>TOTAL OTHER DPH FUNDING SOURCES</b>							
<b>TOTAL DPH FUNDING SOURCES</b>		<b>944,181</b>	<b>246,684</b>				<b>1,190,865</b>
<b>NON-DPH FUNDING SOURCES</b>							
This row left blank for funding sources not in drop-down list							
<b>TOTAL NON-DPH FUNDING SOURCES</b>							
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>944,181</b>	<b>246,684</b>				<b>1,190,865</b>
<b>BHS UNITS OF SERVICE AND UNIT COST</b>							
Number of Beds Purchased (if applicable)							
SA Only - Non-Res 33 - ODF # of Group Sessions (classes)							
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program							
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	
DPH Units of Service	2,675	699					
Unit Type	Client-Full Day	Client-Full Day					
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	\$ 353.00	\$ 353.00	\$ -	\$ -	\$ -	\$ -	
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 353.00	\$ 353.00	\$ -	\$ -	\$ -	\$ -	
Published Rate (Medi-Cal Providers Only)							
Unduplicated Clients (UDC)	N/A	N/A					Total UDC N/A





Appendix B - DPH 4: Operating Expenses Detail

Program Name: Clerical and Maitroom Services  
 Program Code: N/A

Appendix #: B-2  
 Page #: 3  
 Fiscal Year: 2016-2017  
 Funding Notification Date: 09/12/16

Expense Categories & Line Items	TOTAL	General Fund (HMHCC730515, HMHMCP751594, HMHCC730515, HMHMCP751594)		MHMSA (CSS) (PMHS43-1705)	Accounting Code 3 (Index Code or Detail)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
		07/01/16-06/30/17	07/01/16-06/30/17					
Term (mm/dd/yy-mm/dd/yy):		07/01/16-06/30/17	07/01/16-06/30/17	07/01/16-06/30/17	07/01/16-06/30/17	07/01/16-06/30/17	07/01/16-06/30/17	
Rent	\$ 9,500	\$ 7,532	\$ 1,968					
Utilities (telephone, electricity, water, gas)	\$ 12,000	\$ 9,514	\$ 2,486					
Building Repair/Maintenance	\$ 5,000	\$ 3,964	\$ 1,036					
<b>Occupancy Total:</b>	<b>\$ 26,500</b>	<b>\$ 21,010</b>	<b>\$ 5,490</b>					
Office/Program Supplies	\$ 69,078	\$ 54,769	\$ 14,309					
	\$ -	\$ -	\$ -					
	\$ -	\$ -	\$ -					
	\$ -	\$ -	\$ -					
<b>Materials &amp; Supplies Total:</b>	<b>\$ 69,078</b>	<b>\$ 54,769</b>	<b>\$ 14,309</b>					
Training/Staff Development	\$ 5,000	\$ 3,954	\$ 1,036					
Insurance	\$ 4,800	\$ 3,806	\$ 994					
Equipment Lease & Maintenance	\$ -	\$ -	\$ -					
	\$ -	\$ -	\$ -					
	\$ -	\$ -	\$ -					
<b>General Operating Total:</b>	<b>\$ 9,800</b>	<b>\$ 7,770</b>	<b>\$ 2,030</b>					
Local Travel	\$ 3,600	\$ 2,854	\$ 746					
Out-of-Town Travel	\$ -	\$ -	\$ -					
Field Expenses	\$ -	\$ -	\$ -					
<b>Staff Travel Total:</b>	<b>\$ 3,600</b>	<b>\$ 2,854</b>	<b>\$ 746</b>					
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and (add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -	\$ -					
<b>Consultant/Subcontractor Total:</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>					
Other (provide detail):								
Recruitment & Direct Staff Expenses	\$ 5,500	\$ 4,361	\$ 1,139					
Client-Related Food	\$ 12,000	\$ 9,514	\$ 2,486					
Client-Related Other Activities	\$ 6,000	\$ 4,757	\$ 1,243					
<b>Other Total:</b>	<b>\$ 23,500</b>	<b>\$ 18,632</b>	<b>\$ 4,868</b>					
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 132,478</b>	<b>\$ 105,035</b>	<b>\$ 27,443</b>					

**Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)**

DHCS Legal Entity Name (MH)/Contractor Name (SA) 00343		Appendix # B-3			
Provider Name RAMS		Page # 1			
Provider Number 3894		Fiscal Year 2016-2017			
		Funding Notification Date 09/12/16			
Program Name	Peer to Peer Voc				
Program Code	N/A				
Mode/SFC (MH) or Modality (SA)	10/30-39				
Service Description	DS-Vocational				
Funding Term (mm/dd/yy - mm/dd/yy)	07/01/16-06/30/17				<b>TOTAL</b>
<b>FUNDING USES</b>					
Salaries & Employee Benefits	262,836				262,836
Operating Expenses	26,845				26,845
Capital Expenses					
Subtotal Direct Expenses	289,681				289,681
Indirect Expenses	34,762				34,762
<b>TOTAL FUNDING USES</b>	<b>324,443</b>				<b>324,443</b>
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>	<b>Accounting Code (Index Code or Detail)</b>				
MH GRANT SAMSHA Adult SOC, CfDA #93.958	HMM007-1701	324,443			324,443
This row left blank for funding sources not in drop-down list.					
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>324,443</b>			<b>324,443</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>	<b>Accounting Code (Index Code or Detail)</b>				
This row left blank for funding sources not in drop-down list.					
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>					
<b>OTHER DPH FUNDING SOURCES</b>	<b>Accounting Code (Index Code or Detail)</b>				
This row left blank for funding sources not in drop-down list.					
<b>TOTAL OTHER DPH FUNDING SOURCES</b>					
<b>TOTAL DPH FUNDING SOURCES</b>		<b>324,443</b>			<b>324,443</b>
<b>NON-DPH FUNDING SOURCES</b>					
This row left blank for funding sources not in drop-down list.					
<b>TOTAL NON-DPH FUNDING SOURCES</b>					
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>324,443</b>			<b>324,443</b>
<b>BHS UNITS OF SERVICE AND ONLY COST</b>					
Number of Beds Purchased (if applicable)					
SA Only - Non-Res 33 - ODF # of Group Sessions (classes)					
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program					
Payment Method	Client Full Day	768			
DPH Units of Service					
Unit Type					
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES ONLY)		\$ 428.00	\$ -	\$ -	\$ -
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)		\$ 428.00	\$ -	\$ -	\$ -
Published Rate (Medi-Cal Providers Only)					
Unduplicated Clients (UDC)	N/A				Total UDC N/A

Document Date: 7/1/2016



**Appendix B - DPH 4; Operating Expenses Detail**

Program Name: Peer to Peer Voc Linkage  
 Program Code: N/A

Appendix #: B-3  
 Page #: 3  
 Fiscal Year: 2016-2017  
 Funding Notification Date: 09/12/16

Expense Categories & Line Items	TOTAL	MH GRANT SAMSHA ADULT (HMM007-1701)	Accounting Code 2 (Index Code or Detail)	Accounting Code 3 (Index Code or Detail)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
<b>Term (mm/dd/yy-mm/dd/yy):</b>		<b>07/01/16-06/30/17</b>					
Rent	\$ 6,000	\$ 6,000					
Utilities (telephone, electricity, water, gas)	\$ 6,000	\$ 6,000					
Building Repair/Maintenance	\$ 1,000	\$ 1,000					
<b>Occupancy Total:</b>	<b>\$ 13,000</b>	<b>\$ 13,000</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Office/Program Supplies	\$ 1,527	\$ 1,527					
	\$ -	\$ -					
	\$ -	\$ -					
<b>Materials &amp; Supplies Total:</b>	<b>\$ 1,527</b>	<b>\$ 1,527</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Training/Staff Development	\$ 1,500	\$ 1,500					
Insurance	\$ 870	\$ 870					
Equipment Lease & Maintenance	\$ -	\$ -					
	\$ -	\$ -					
<b>General Operating Total:</b>	<b>\$ 2,370</b>	<b>\$ 2,370</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Local Travel	\$ 5,000	\$ 5,000					
Out-of-Town Travel	\$ -	\$ -					
Field Expenses	\$ -	\$ -					
<b>Staff Travel Total:</b>	<b>\$ 5,000</b>	<b>\$ 5,000</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and (add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -					
<b>Consultant/Subcontractor Total:</b>	<b>\$ -</b>	<b>\$ -</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):							
Recruitment & Direct Staff Expenses	\$ 2,000	\$ 2,000					
Client-Related Food	\$ 2,448	\$ 2,448					
Client-Related Other Activities	\$ 500	\$ 500					
<b>Other Total:</b>	<b>\$ 4,948</b>	<b>\$ 4,948</b>	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 26,845</b>	<b>\$ 26,845</b>	\$ -	\$ -	\$ -	\$ -	\$ -

Document Date: 7/1/2016

**Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)**

DHCS Legal Entity Name (MH)/Contractor Name (SA) 00343		Appendix # B-4			
Provider Name RAMS		Page # 7			
Provider Number 3894		Fiscal Year 2016-2017			
		Funding Notification Date 09/12/16			
Program Name	Information Technology Helpdesk	Information Technology Desktop	Information Technology Advanced Helpdesk/Desktop		
Program Code	N/A	N/A	N/A		
Mode/SFC (MH) or Modality (SA)	10/30-39	10/30-39	10/30-39		
Service Description	DS-Vocational	DS-Vocational	DS-Vocational		
Funding Term (mm/dd/yy - mm/dd/yy)	07/01/16-06/30/17	07/01/16-06/30/17	07/01/16-06/30/17	<b>TOTAL</b>	
<b>FUNDING USES</b>					
Salaries & Employee Benefits	402,822	374,636	361,575	1,138,833	
Operating Expenses	18,528	18,528	18,529	55,585	
Capital Expenses					
Subtotal Direct Expenses	421,350	393,164	380,104	1,194,618	
Indirect Expenses	50,536	47,180	45,612	143,330	
<b>TOTAL FUNDING USES</b>	<b>471,886</b>	<b>440,344</b>	<b>425,716</b>	<b>1,337,748</b>	
<b>BHS-MENTAL HEALTH FUNDING SOURCES</b>					
MH MHSA (IT) Information Technology	PMHS3-1712	471,888	440,344	425,716	1,337,748
This row left blank for funding sources not in drop-down list					
<b>TOTAL BHS-MENTAL HEALTH FUNDING SOURCES</b>		<b>471,888</b>	<b>440,344</b>	<b>425,716</b>	<b>1,337,748</b>
<b>BHS-SUBSTANCE ABUSE FUNDING SOURCES</b>					
This row left blank for funding sources not in drop-down list					
<b>TOTAL BHS-SUBSTANCE ABUSE FUNDING SOURCES</b>					
<b>OTHER DPH FUNDING SOURCES</b>					
This row left blank for funding sources not in drop-down list					
<b>TOTAL OTHER DPH FUNDING SOURCES</b>					
<b>TOTAL DPH FUNDING SOURCES</b>		<b>471,888</b>	<b>440,344</b>	<b>425,716</b>	<b>1,337,748</b>
<b>NON-DPH FUNDING SOURCES</b>					
This row left blank for funding sources not in drop-down list					
<b>TOTAL NON-DPH FUNDING SOURCES</b>					
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>471,888</b>	<b>440,344</b>	<b>425,716</b>	<b>1,337,748</b>
<b>BHS UNITS OF SERVICE AND UNIT COSTS</b>					
Number of Beds Purchased (if applicable)					
SA Only - Non-Res 33 - ODF # of Group Sessions (classes)					
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program					
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)		
DPH Units of Service	640	480	380		
Unit Type	Client Full Day	Client Full Day	Client Full Day	0	
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	\$ 737.01	\$ 957.27	\$ 1,120.31	\$ -	
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 737.01	\$ 957.27	\$ 1,120.31	\$ -	
Published Rate (Medi-Cal Providers Only)				<b>Total UDC</b>	
Unduplicated Clients (UDC)	16	14	10	40	

Document Date: 7/1/2016



Appendix B - DPH 4: Operating Expenses Detail

Program Name: Information Technology  
 Program Code: N/A

Appendix #: B-4  
 Page #: 3  
 Fiscal Year: 2016-2017  
 Funding Notification Date: 09/12/16

Expense Categories & Line Items	TOTAL	Helpdesk MH MSA (IT) (PMHS63-1712)	Desktop MH MSA (IT) (PMHS63-1712)	Advanced Helpdesk/Desktop MH MSA (IT) (PMHS63-1712)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
Term (mm/dd/yy-mm/dd/yy):		07/01/16-06/30/17	07/01/16-06/30/17	07/01/16-06/30/17			
Rent	\$ 7,600	\$ 2,533	\$ 2,533	\$ 2,534			
Utilities (telephone, electricity, water, gas)	\$ 5,500	\$ 1,833	\$ 1,833	\$ 1,834			
Building Repair/Maintenance	\$ 750	\$ 250	\$ 250	\$ 250			
Occupancy Total:	\$ 13,850	\$ 4,616	\$ 4,616	\$ 4,618	\$ -	\$ -	\$ -
Office/Program Supplies	\$ 25,635	\$ 8,545	\$ 8,545	\$ 8,545			
	\$ -	\$ -	\$ -	\$ -			
	\$ -	\$ -	\$ -	\$ -			
Materials & Supplies Total:	\$ 25,635	\$ 8,545	\$ 8,545	\$ 8,545	\$ -	\$ -	\$ -
Training/Staff Development	\$ 3,500	\$ 1,167	\$ 1,167	\$ 1,166			
Insurance	\$ 4,100	\$ 1,367	\$ 1,367	\$ 1,366			
Equipment Lease & Maintenance	\$ -	\$ -	\$ -	\$ -			
	\$ -	\$ -	\$ -	\$ -			
General Operating Total:	\$ 7,600	\$ 2,534	\$ 2,534	\$ 2,532	\$ -	\$ -	\$ -
Local Travel	\$ 1,000	\$ 333	\$ 333	\$ 334			
Out-of-Town Travel	\$ -	\$ -	\$ -	\$ -			
Field Expenses	\$ -	\$ -	\$ -	\$ -			
Staff Travel Total:	\$ 1,000	\$ 333	\$ 333	\$ 334	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and (add more Consultant/Subcontractor lines as necessary)	\$ -	\$ -	\$ -	\$ -			
Consultant/Subcontractor Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):							
Recruitment & Direct Staff Expenses	\$ 3,500	\$ 1,167	\$ 1,167	\$ 1,166			
Client-Related Food	\$ 3,000	\$ 1,000	\$ 1,000	\$ 1,000			
Client-Related Other Activities	\$ 1,000	\$ 333	\$ 333	\$ 334			
Other Total:	\$ 7,500	\$ 2,500	\$ 2,500	\$ 2,500	\$ -	\$ -	\$ -
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 55,585</b>	<b>\$ 18,528</b>	<b>\$ 18,528</b>	<b>\$ 18,529</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Document Date: 7/1/2016

**Appendix B - DPH Z: Department of Public Health Cost Reporting/Data Collection (CRDC)**

DHCS Legal Entity Name (MH)/Contractor Name (SA) 00343		Appendix # B-3	
Provider Name RAMS		Page # 1	
Provider Number 3894		Fiscal Year 2016-2017	
		Funding Notification Date 08/12/16	
Program Name	TAY Vocational Services		
Program Code	N/A		
Mode/SFC (MH) or Modality (SA)	10/30-39		
Service Description	DS-Vocational		
Funding Term (mm/dd/yy - mm/dd/yy)	07/01/16-06/30/17		<b>TOTAL</b>
<b>FUNDING USES</b>			
Salaries & Employee Benefits	115,256		115,256
Operating Expenses	81,173		81,173
Capital Expenses			
Subtotal Direct Expenses	196,429		196,429
Indirect Expenses	23,571		23,571
<b>TOTAL FUNDING USES</b>	<b>220,000</b>		<b>220,000</b>
<b>BHS MENTAL HEALTH FUNDING SOURCES</b>			
Accounting Code (Index Code or Detail)			
MH MESA (CSS)	PMHS63-1704	220,000	220,000
This row left blank for funding sources not in drop-down list			
<b>TOTAL BHS MENTAL HEALTH FUNDING SOURCES</b>		<b>220,000</b>	<b>220,000</b>
<b>BHS SUBSTANCE ABUSE FUNDING SOURCES</b>			
Accounting Code (Index Code or Detail)			
This row left blank for funding sources not in drop-down list			
<b>TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES</b>			
<b>OTHER DPH FUNDING SOURCES</b>			
Accounting Code (Index Code or Detail)			
This row left blank for funding sources not in drop-down list			
<b>TOTAL OTHER DPH FUNDING SOURCES</b>			
<b>TOTAL DPH FUNDING SOURCES</b>		<b>220,000</b>	<b>220,000</b>
<b>NON-DPH FUNDING SOURCES</b>			
This row left blank for funding sources not in drop-down list			
<b>TOTAL NON-DPH FUNDING SOURCES</b>			
<b>TOTAL FUNDING SOURCES (DPH AND NON-DPH)</b>		<b>220,000</b>	<b>220,000</b>
<b>BHS UNITS OF SERVICE AND UNIT COST</b>			
Number of Beds Purchased (if applicable)			
SA Only - Non-Res 33 - ODF # of Group Sessions (classes)			
SA Only - Licensed Capacity for Medi-Cal Provider with Narcotic Tx Program			
Payment Method	Client Full Day	0	0
DPH Units of Service	594		
Unit Type	Client Full Day	0	0
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	\$ 370.37	\$ -	\$ -
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 370.37	\$ -	\$ -
Published Rate (Medi-Cal Providers Only)			
Unduplicated Clients (UDC)	15		15





**Appendix B - DPH 4: Operating Expenses Detail**

Program Name: TAY Vocational Services  
 Program Code: N/A

Appendix #: B-5  
 Page #: 3  
 Fiscal Year: 2016-2017  
 Funding Notification Date: 09/12/16

Expense Categories & Line Items	TOTAL	MH MISA (CSS) (PMHS63-1604)	Accounting Code 2 (Index Code or Detail)	Accounting Code 3 (Index Code or Detail)	Accounting Code 4 (Index Code or Detail)	Accounting Code 5 (Index Code or Detail)	Accounting Code 6 (Index Code or Detail)
Term (mm/dd/yy-mm/dd/yy):		07/01/16-06/30/17					
Rent	\$ 4,600	\$ 4,600					
Utilities (telephone, electricity, water, gas)	\$ 4,000	\$ 4,000					
Building Repair/Maintenance	\$ 1,000	\$ 1,000					
<b>Occupancy Total:</b>	<b>\$ 9,600</b>	<b>\$ 9,600</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Office/Program Supplies	\$ 3,000	\$ 3,000					
	\$ -	\$ -					
	\$ -	\$ -					
<b>Materials &amp; Supplies Total:</b>	<b>\$ 3,000</b>	<b>\$ 3,000</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Training/Staff Development	\$ 500	\$ 500					
Insurance	\$ 850	\$ 850					
Equipment Lease & Maintenance	\$ -	\$ -					
	\$ -	\$ -					
<b>General Operating Total:</b>	<b>\$ 1,350</b>	<b>\$ 1,350</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Local Travel	\$ 1,400	\$ 1,400					
Out-of-Town Travel	\$ -	\$ -					
Field Expenses	\$ -	\$ -					
<b>Staff Travel Total:</b>	<b>\$ 1,400</b>	<b>\$ 1,400</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and (add more Consultant/Subcontractor lines as necessary))	\$ -	\$ -					
<b>Consultant/Subcontractor Total:</b>	<b>\$ -</b>	<b>\$ -</b>	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):							
Recruitment & Direct Staff Expenses	\$ 700	\$ 700					
Client Stipends	\$ 54,123	\$ 54,123					
Client-Related Food	\$ 6,000	\$ 6,000					
Client-Related Other Activities	\$ 5,000	\$ 5,000					
<b>Other Total:</b>	<b>\$ 65,823</b>	<b>\$ 65,823</b>	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL OPERATING EXPENSE</b>	<b>\$ 81,173</b>	<b>\$ 81,173</b>	\$ -	\$ -	\$ -	\$ -	\$ -

Document Date: 7/1/2016





San Francisco Department of Public Health  
Business Associate Agreement

This Business Associate Agreement ("Agreement") supplements and is made a part of the contract ("Contract") by and between the City and County of San Francisco, the Covered Entity ("CE"), and Richmond Area Multi-Services, Inc ("Contractor"), the Business Associate ("BA"), dated July 1, 2016, (CMS #7640). To the extent that the terms of the Contract are inconsistent with the terms of this Agreement, the terms of this Agreement shall control.

#### RECITALS

A. CE, by and through the San Francisco Department of Public Health ("SFDPH"), wishes to disclose certain information to BA pursuant to the terms of the Contract, some of which may constitute Protected Health Information ("PHI") (defined below).

B. For purposes of the Contract, SFDPH requires Contractor, even if Contractor is also a covered entity under HIPAA, to comply with the terms and conditions of this Agreement as a BA of CE.

C. CE and BA intend to protect the privacy and provide for the security of PHI disclosed to BA pursuant to the Contract in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 ("HIPAA"), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 ("the HITECH Act"), and regulations promulgated there under by the U.S. Department of Health and Human Services (the "HIPAA Regulations") and other applicable laws, including, but not limited to, California Civil Code §§ 56, et seq., California Health and Safety Code § 1280.15, California Civil Code §§ 1798, et seq., California Welfare & Institutions Code §§5328, et seq., and the regulations promulgated there under (the "California Regulations").

D. As part of the HIPAA Regulations, the Privacy Rule and the Security Rule (defined below) require CE to enter into a contract containing specific requirements with BA prior to the disclosure of PHI, as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(a) and (e) and 164.504(e) of the Code of Federal Regulations ("C.F.R.") and contained in this Agreement.

E. BA enters into agreements with CE that require the CE to disclose certain identifiable health information to BA. The parties desire to enter into this Agreement to permit BA to have access to such information and comply with the BA requirements of HIPAA, the HITECH Act, and the HIPAA Regulations.

In consideration of the mutual promises below and the exchange of information pursuant to this Agreement, the parties agree as follows:

#### 1. Definitions.



San Francisco Department of Public Health  
Business Associate Agreement

a. **Breach** means the unauthorized acquisition, access, use, or disclosure of PHI that compromises the security or privacy of such information, except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information, and shall have the meaning given to such term under the HITECH Act and HIPAA Regulations [42 U.S.C. Section 17921 and 45 C.F.R. Section 164.402], as well as California Civil Code Sections 1798.29 and 1798.82.

b. **Breach Notification Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and D.

c. **Business Associate** is a person or entity that performs certain functions or activities that involve the use or disclosure of protected health information received from a covered entity, and shall have the meaning given to such term under the Privacy Rule, the Security Rule, and the HITECH Act, including, but not limited to, 42 U.S.C. Section 17938 and 45 C.F.R. Section 160.103.

d. **Covered Entity** means a health plan, a health care clearinghouse, or a health care provider who transmits any information in electronic form in connection with a transaction covered under HIPAA Regulations, and shall have the meaning given to such term under the Privacy Rule and the Security Rule, including, but not limited to, 45 C.F.R. Section 160.103.

e. **Data Aggregation** means the combining of Protected Information by the BA with the Protected Information received by the BA in its capacity as a BA of another CE, to permit data analyses that relate to the health care operations of the respective covered entities, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

f. **Designated Record Set** means a group of records maintained by or for a CE, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

g. **Electronic Protected Health Information** means Protected Health Information that is maintained in or transmitted by electronic media and shall have the meaning given to such term under HIPAA and the HIPAA Regulations, including, but not limited to, 45 C.F.R. Section 160.103. For the purposes of this Agreement, Electronic PHI includes all computerized data, as defined in California Civil Code Sections 1798.29 and 1798.82.

h. **Electronic Health Record** means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health



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Business Associate Agreement

care clinicians and staff, and shall have the meaning given to such term under the HITECH Act, including, but not limited to, 42 U.S.C. Section 17921.

**i. Health Care Operations** shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

**j. Privacy Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and E.

**k. Protected Health Information or PHI** means any information, including electronic PHI, whether oral or recorded in any form or medium: (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Sections 160.103 and 164.501. For the purposes of this Agreement, PHI includes all medical information and health insurance information as defined in California Civil Code Sections 56.05 and 1798.82.

**l. Protected Information** shall mean PHI provided by CE to BA or created, maintained, received or transmitted by BA on CE's behalf.

**m. Security Incident** means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system, and shall have the meaning given to such term under the Security Rule, including, but not limited to, 45 C.F.R. Section 164.304.

**n. Security Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and C.

**o. Unsecured PHI** means PHI that is not secured by a technology standard that renders PHI unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute, and shall have the meaning given to such term under the HITECH Act and any guidance issued pursuant to such Act including, but not limited to, 42 U.S.C. Section 17932(h) and 45 C.F.R. Section 164.402.

**2. Obligations of Business Associate.**

**a. Attestations.** The BA will be required to complete and return to CE (and retain in BA's records for a period of seven years) the following forms, incorporated by reference as though



San Francisco Department of Public Health  
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fully set forth herein, SFDPH Attestations for Privacy (Attachment 1), Data Security (Attachment 2) and Compliance (Attachment 3) within ninety (90) calendar days from the execution of the Contract. If CE makes changes to any of these forms during the term of the Contract that CE believes are substantial, the BA will be required to complete and return CE's updated forms to CE within ninety (90) calendar days from the date that CE provides BA with written notice of such changes.

**b. User Agreements.** The BA shall maintain proof that it has required all of its employees or agents that will access SFDPH PHI have signed and completed the following forms prior to accessing SFDPH PHI for the first time and annually thereafter during the term of the Contract (and retain in BA's records for a period of seven years): the SFDPH User Agreement for Confidentiality, Data Security and Electronic Signature (Attachment 4) and the SFDPH Code of Conduct (Attachment 5), incorporated by reference as though fully set forth herein.

**c. Permitted Uses.** BA may use, access, and/or disclose PHI only for the purpose of performing BA's obligations for or on behalf of the City and as permitted or required under the Contract [MOU] and Agreement, or as required by law. Further, BA shall not use PHI in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so used by CE. However, BA may use Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE [45 C.F.R. Sections 164.502, 164.504(e)(2), and 164.504(e)(4)(i)].

**d. Permitted Disclosures.** BA shall disclose Protected Information only for the purpose of performing BA's obligations for or on behalf of the City and as permitted or required under the Contract [MOU] and Agreement, or as required by law. BA shall not disclose Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so disclosed by CE. However, BA may disclose Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE. If BA discloses Protected Information to a third party, BA must obtain, prior to making any such disclosure, (i) reasonable written assurances from such third party that such Protected Information will be held confidential as provided pursuant to this Agreement and used or disclosed only as required by law or for the purposes for which it was disclosed to such third party, and (ii) a written agreement from such third party to immediately notify BA of any breaches, security incidents, or unauthorized uses or disclosures of the Protected Information in accordance with paragraph 2. k. of the Agreement, to the extent it has obtained knowledge of such occurrences



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[42 U.S.C. Section 17932; 45 C.F.R. Section 164.504(e)]. BA may disclose PHI to a BA that is a subcontractor and may allow the subcontractor to create, receive, maintain, or transmit Protected Information on its behalf, if the BA obtains satisfactory assurances, in accordance with 45 C.F.R. Section 164.504(e)(1), that the subcontractor will appropriately safeguard the information [45 C.F.R. Section 164.502(e)(1)(ii)].

**e. Prohibited Uses and Disclosures.** BA shall not use or disclose PHI other than as permitted or required by the Contract and Agreement, or as required by law. BA shall not use or disclose Protected Information for fundraising or marketing purposes. BA shall not disclose Protected Information to a health plan for payment or health care operations purposes if the patient has requested this special restriction, and has paid out of pocket in full for the health care item or service to which the PHI solely relates [42 U.S.C. Section 17935(a) and 45 C.F.R. Section 164.522(a)(1)(vi)]. BA shall not directly or indirectly receive remuneration in exchange for Protected Information, except with the prior written consent of CE and as permitted by the HITECH Act, 42 U.S.C. Section 17935(d)(2), and the HIPAA regulations, 45 C.F.R. Section 164.502(a)(5)(ii); however, this prohibition shall not affect payment by CE to BA for services provided pursuant to the Contract.

**f. Appropriate Safeguards.** BA shall take the appropriate security measures to protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains, or transmits on behalf of the CE, and shall prevent any use or disclosure of PHI other than as permitted by the Contract or this Agreement, including, but not limited to, administrative, physical and technical safeguards in accordance with the Security Rule, including, but not limited to, 45 C.F.R. Sections 164.306, 164.308, 164.310, 164.312, 164.314, 164.316, and 164.504(e)(2)(ii)(B). BA shall comply with the policies and procedures and documentation requirements of the Security Rule, including, but not limited to, 45 C.F.R. Section 164.316, and 42 U.S.C. Section 17931. BA is responsible for any civil penalties assessed due to an audit or investigation of BA, in accordance with 42 U.S.C. Section 17934(c).

**g. Business Associate's Subcontractors and Agents.** BA shall ensure that any agents and subcontractors that create, receive, maintain or transmit Protected Information on behalf of BA, agree in writing to the same restrictions and conditions that apply to BA with respect to such PHI and implement the safeguards required by paragraph 2.d. above with respect to Electronic PHI [45 C.F.R. Section 164.504(e)(2) through (e)(5); 45 C.F.R. Section 164.308(b)]. BA shall mitigate the effects of any such violation.

**h. Accounting of Disclosures.** Within ten (10) calendar days of a request by CE for an accounting of disclosures of Protected Information or upon any disclosure of Protected





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Information for which CE is required to account to an individual, BA and its agents and subcontractors shall make available to CE the information required to provide an accounting of disclosures to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.528, and the HITECH Act, including but not limited to 42 U.S.C. Section 17935 (c), as determined by CE. BA agrees to implement a process that allows for an accounting to be collected and maintained by BA and its agents and subcontractors for at least six (6) years prior to the request. However, accounting of disclosures from an Electronic Health Record for treatment, payment or health care operations purposes are required to be collected and maintained for only three (3) years prior to the request, and only to the extent that BA maintains an Electronic Health Record. At a minimum, the information collected and maintained shall include: (i) the date of disclosure; (ii) the name of the entity or person who received Protected Information and, if known, the address of the entity or person; (iii) a brief description of Protected Information disclosed; and (iv) a brief statement of purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure [45 C.F.R. 164.528(b)(2)]. If an individual or an individual's representative submits a request for an accounting directly to BA or its agents or subcontractors, BA shall forward the request to CE in writing within five (5) calendar days.

**i. Access to Protected Information.** BA shall make Protected Information maintained by BA or its agents or subcontractors in Designated Record Sets available to CE for inspection and copying within (5) days of request by CE to enable CE to fulfill its obligations under state law [Health and Safety Code Section 123110] and the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.524 [45 C.F.R. Section 164.504(e)(2)(ii)(E)]. If BA maintains Protected Information in electronic format, BA shall provide such information in electronic format as necessary to enable CE to fulfill its obligations under the HITECH Act and HIPAA Regulations, including, but not limited to, 42 U.S.C. Section 17935(e) and 45 C.F.R. 164.524.

**j. Amendment of Protected Information.** Within ten (10) days of a request by CE for an amendment of Protected Information or a record about an individual contained in a Designated Record Set, BA and its agents and subcontractors shall make such Protected Information available to CE for amendment and incorporate any such amendment or other documentation to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.526. If an individual requests an amendment of Protected Information directly from BA or its agents or subcontractors, BA must notify CE in writing within five (5) days of the request and of any approval or denial of amendment of Protected Information maintained by BA or its agents or subcontractors [45 C.F.R. Section 164.504(e)(2)(i)(F)].



San Francisco Department of Public Health  
Business Associate Agreement

**k. Governmental Access to Records.** BA shall make its internal practices, books and records relating to the use and disclosure of Protected Information available to CE and to the Secretary of the U.S. Department of Health and Human Services (the "Secretary") for purposes of determining BA's compliance with HIPAA [45 C.F.R. Section 164.504(e)(2)(i)(F)]. BA shall provide CE a copy of any Protected Information and other documents and records that BA provides to the Secretary concurrently with providing such Protected Information to the Secretary.

**l. Minimum Necessary.** BA, its agents and subcontractors shall request, use and disclose only the minimum amount of Protected Information necessary to accomplish the intended purpose of such use, disclosure, or request. [42 U.S.C. Section 17935(b); 45 C.F.R. Section 164.514(d)]. BA understands and agrees that the definition of "minimum necessary" is in flux and shall keep itself informed of guidance issued by the Secretary with respect to what constitutes "minimum necessary" to accomplish the intended purpose in accordance with HIPAA and HIPAA Regulations.

**m. Data Ownership.** BA acknowledges that BA has no ownership rights with respect to the Protected Information.

**n. Notification of Breach.** BA shall notify CE within 5 calendar days of any breach of Protected Information; any use or disclosure of Protected Information not permitted by the Agreement; any Security Incident (except as otherwise provided below) related to Protected Information, and any use or disclosure of data in violation of any applicable federal or state laws by BA or its agents or subcontractors. The notification shall include, to the extent possible, the identification of each individual whose unsecured Protected Information has been, or is reasonably believed by the BA to have been, accessed, acquired, used, or disclosed, as well as any other available information that CE is required to include in notification to the individual, the media, the Secretary, and any other entity under the Breach Notification Rule and any other applicable state or federal laws, including, but not limited, to 45 C.F.R. Section 164.404 through 45 C.F.R. Section 164.408, at the time of the notification required by this paragraph or promptly thereafter as information becomes available. BA shall take (i) prompt corrective action to cure any deficiencies and (ii) any action pertaining to unauthorized uses or disclosures required by applicable federal and state laws. [42 U.S.C. Section 17921; 42 U.S.C. Section 17932; 45 C.F.R. 164.410; 45 C.F.R. Section 164.504(e)(2)(ii)(C); 45 C.F.R. Section 164.308(b)]

**o. Breach Pattern or Practice by Business Associate's Subcontractors and Agents.** Pursuant to 42 U.S.C. Section 17934(b) and 45 C.F.R. Section 164.504(e)(1)(iii), if the BA knows of a pattern of activity or practice of a subcontractor or agent that constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this



San Francisco Department of Public Health  
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Agreement, the BA must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, the BA must terminate the contractual arrangement with its subcontractor or agent, if feasible. BA shall provide written notice to CE of any pattern of activity or practice of a subcontractor or agent that BA believes constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this Agreement within five (5) calendar days of discovery and shall meet with CE to discuss and attempt to resolve the problem as one of the reasonable steps to cure the breach or end the violation.

**3. Termination.**

**a. Material Breach.** A breach by BA of any provision of this Agreement, as determined by CE, shall constitute a material breach of the Contract and this Agreement and shall provide grounds for immediate termination of the Contract and this Agreement, any provision in the CONTRACT to the contrary notwithstanding. [45 C.F.R. Section 164.504(e)(2)(iii)].

**b. Judicial or Administrative Proceedings.** CE may terminate the Contract and this Agreement, effective immediately, if (i) BA is named as defendant in a criminal proceeding for a violation of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws or (ii) a finding or stipulation that the BA has violated any standard or requirement of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws is made in any administrative or civil proceeding in which the party has been joined.

**c. Effect of Termination.** Upon termination of the Contract and this Agreement for any reason, BA shall, at the option of CE, return or destroy all Protected Information that BA and its agents and subcontractors still maintain in any form, and shall retain no copies of such Protected Information. If return or destruction is not feasible, as determined by CE, BA shall continue to extend the protections and satisfy the obligations of Section 2 of this Agreement to such information, and limit further use and disclosure of such PHI to those purposes that make the return or destruction of the information infeasible [45 C.F.R. Section 164.504(e)(2)(ii)(J)]. If CE elects destruction of the PHI, BA shall certify in writing to CE that such PHI has been destroyed in accordance with the Secretary's guidance regarding proper destruction of PHI.

**d. Civil and Criminal Penalties.** BA understands and agrees that it is subject to civil or criminal penalties applicable to BA for unauthorized use, access or disclosure of Protected Information in accordance with the HIPAA Regulations and the HITECH Act including, but not limited to, 42 U.S.C. 17934 (c).

**e. Disclaimer.** CE makes no warranty or representation that compliance by BA with this Agreement, HIPAA, the HITECH Act, or the HIPAA Regulations or corresponding California



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law provisions will be adequate or satisfactory for BA's own purposes. BA is solely responsible for all decisions made by BA regarding the safeguarding of PHI.

**4. Amendment to Comply with Law.**

The parties acknowledge that state and federal laws relating to data security and privacy are rapidly evolving and that amendment of the Contract or this Agreement may be required to provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations and other applicable state or federal laws relating to the security or confidentiality of PHI. The parties understand and agree that CE must receive satisfactory written assurance from BA that BA will adequately safeguard all Protected Information. Upon the request of either party, the other party agrees to promptly enter into negotiations concerning the terms of an amendment to this Agreement embodying written assurances consistent with the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable state or federal laws. CE may terminate the Contract upon thirty (30) days written notice in the event (i) BA does not promptly enter into negotiations to amend the Contract or this Agreement when requested by CE pursuant to this section or (ii) BA does not enter into an amendment to the Contract or this Agreement providing assurances regarding the safeguarding of PHI that CE, in its sole discretion, deems sufficient to satisfy the standards and requirements of applicable laws.

**5. Reimbursement for Fines or Penalties.**

In the event that CE pays a fine to a state or federal regulatory agency, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible use or disclosure of PHI by BA or its subcontractors or agents, then BA shall reimburse CE in the amount of such fine or penalties or damages within thirty (30) calendar days.

Attachment 1 – SFDPH Privacy Attestation, version 10/29/15

Attachment 2 – SFDPH Data Security Attestation, version 10/29/15

Attachment 3 – SFDPH Compliance Attestation, version 10/29/15

Attachment 4 – SFDPH User Agreement for Confidentiality, Data Security and Electronic  
Signature, version 4/23/15

Attachment 5 – SFDPH Code of Conduct, version 6/17/15

Office of Compliance and Privacy Affairs



San Francisco Department of Public Health  
Business Associate Agreement

San Francisco Department of Public Health  
101 Grove Street, Room 330, San Francisco, CA 94102  
Email: [compliance.privacy@sfdph.org](mailto:compliance.privacy@sfdph.org)  
Hotline (Toll-Free): 1-855-729-6040

Appendix F  
Invoices



**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

\_\_\_\_\_

Contractor: Richmond Area Multi-Services, Inc.- Voc Rehab-Janitorial

Address: 639 14th Avenue, San Francisco, CA 94118

Tel No.: (415) 668-5955

Fax No.: (415) 668-0246



Funding Term: 07/01/2016 - 06/30/2017

PHP Division: Behavioral Health Services

INVOICE NUMBER: M33 JL 16

Cl. Blanket No.: BPHM TBD

Cl. PO No.: POHM TBD

Fund Source: MH County Adult/ CYF - General Fund  
MH State Adult - 1991 MH Realignment  
MH State CYF - 1991 Realignment

Invoice Period: July 2016

Final Invoice: (Check if Yes)

ACE Control Number: \_\_\_\_\_

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-1 Janitorial Services												
10/30-39 DS-Vocational	1,886						0%	#DIV/0!	1,886		100%	#DIV/0!

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 414,594.00	\$ -	\$ -	0.00%	\$ 414,594.00
Fringe Benefits	\$ 219,734.00	\$ -	\$ -	0.00%	\$ 219,734.00
<b>Total Personnel Expenses</b>	<b>\$ 634,328.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 634,328.00</b>
<b>Operating Expenses</b>					
Occupancy	\$ -	\$ -	\$ -	0.00%	\$ -
Materials and Supplies	\$ 105,278.00	\$ -	\$ -	0.00%	\$ 105,278.00
General Operating	\$ 4,327.00	\$ -	\$ -	0.00%	\$ 4,327.00
Staff Travel	\$ 3,328.00	\$ -	\$ -	0.00%	\$ 3,328.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other Recruitment/ Direct Staff Expenses	\$ 5,538.00	\$ -	\$ -	0.00%	\$ 5,538.00
Client-Related Food, Client-Related Other Activities	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 118,471.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 118,471.00</b>
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 752,799.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 752,799.00</b>
Indirect Expenses	\$ 90,336.00	\$ -	\$ -	0.00%	\$ 90,336.00
<b>TOTAL EXPENSES</b>	<b>\$ 843,135.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 843,135.00</b>
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		\$ -			

NOTES:  
HMHMCC730515 - \$837,099.00  
HMHMCP751594 - \$6,036.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Date: \_\_\_\_\_  
Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date



**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

\_\_\_\_\_

INVOICE NUMBER: **M37 JL 16**

Ct. Blanket No.: BPHM **TBD**

Ct. PO No.: POHM **TBD**

Fund Source: **MH MSA (CSS)**

Invoice Period: **July 2016**

Final Invoice:  (Check if Yes)

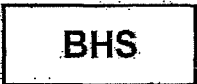
ACE Control Number: \_\_\_\_\_

Contractor: **Richmond Area Multi-Services, Inc.- Voc Rehab-Janitorial**

Address: **639 14th Avenue, San Francisco, CA 94118**

Tel No.: **(415) 668-5955**

Fax No.: **(415) 668-0246**



Funding Term: **07/01/2016 - 06/30/2017**

PHP Division: **Behavioral Health Services**

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-1 Janitorial Services - HHMPROP63-PMHS63-1705												
10/ 30 - 39 DS-Vocational	948						0%	#DIV/0!	948		100%	#DIV/0!

Unduplicated Counts for AIDS Use Only:

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 208,277.00	\$ -	\$ -	0.00%	\$ 208,277.00
Fringe Benefits	\$ 110,388.00	\$ -	\$ -	0.00%	\$ 110,388.00
<b>Total Personnel Expenses</b>	<b>\$ 318,665.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 318,665.00</b>
<b>Operating Expenses:</b>					
Occupancy	\$ -	\$ -	\$ -	0.00%	\$ -
Materials and Supplies	\$ 52,888.00	\$ -	\$ -	0.00%	\$ 52,888.00
General Operating	\$ 2,173.00	\$ -	\$ -	0.00%	\$ 2,173.00
Staff Travel	\$ 1,672.00	\$ -	\$ -	0.00%	\$ 1,672.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses	\$ 2,785.00	\$ -	\$ -	0.00%	\$ 2,785.00
Client-Related Food, Client-Related	\$ -	\$ -	\$ -	0.00%	\$ -
Other Activities	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 59,518.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 59,518.00</b>
<b>Capital Expenditures</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ -</b>
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 378,183.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 378,183.00</b>
Indirect Expenses	\$ 45,382.00	\$ -	\$ -	0.00%	\$ 45,382.00
<b>TOTAL EXPENSES</b>	<b>\$ 423,565.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 423,565.00</b>
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		<b>\$ -</b>			

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

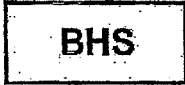
Control Number

\_\_\_\_\_

Contractor: **Richmond Area Multi-Services, Inc.- Voc Rehab-Janitorial**

Address: **639 14th Avenue, San Francisco, CA 94118**

Tel No.: (415) 668-5955  
Fax No.: (415) 668-0246



INVOICE NUMBER: **M38 JL 16**

Ct. Blanket No.: BPHM **TBD**

Ct. PO No.: POHM **TBD**

Fund Source: **MH County Adult/ CYF - General Fund  
MH State Adult - 1991 MH Realignment  
MH State CYF - 1991 Realignment**

Invoice Period: **July 2016**

Final Invoice: \_\_\_\_\_ (Check if Yes)

Funding Term: **07/01/2016 - 06/30/2017**

PHP Division: **Behavioral Health Services**

ACE Control Number: \_\_\_\_\_

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-2 Clerical and Mailroom Services 10/30 - 39 DS-Vocational	2,675						0%	#DIV/0!	2,675		100%	#DIV/0!

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 508,954.00	\$ -	\$ -	0.00%	\$ 508,954.00
Fringe Benefits	\$ 229,029.00	\$ -	\$ -	0.00%	\$ 229,029.00
<b>Total Personnel Expenses</b>	<b>\$ 737,983.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 737,983.00</b>
<b>Operating Expenses</b>					
Occupancy	\$ 21,010.00	\$ -	\$ -	0.00%	\$ 21,010.00
Materials and Supplies	\$ 54,769.00	\$ -	\$ -	0.00%	\$ 54,769.00
General Operating	\$ 7,770.00	\$ -	\$ -	0.00%	\$ 7,770.00
Staff Travel	\$ 2,854.00	\$ -	\$ -	0.00%	\$ 2,854.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses	\$ 18,632.00	\$ -	\$ -	0.00%	\$ 18,632.00
Client-Related Food, Client Related Other Activities	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 105,035.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 105,035.00</b>
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 843,018.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 843,018.00</b>
Indirect Expenses	\$ 101,163.00	\$ -	\$ -	0.00%	\$ 101,163.00
<b>TOTAL EXPENSES</b>	<b>\$ 944,181.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 944,181.00</b>
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		<b>\$ -</b>			

NOTES:  
HMHMCC730515 - \$925,916.00  
HMHMCP751594 - \$18,265.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Date: \_\_\_\_\_  
Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

\_\_\_\_\_

Contractor: **Richmond Area Multi-Services, Inc.- Voc Rehab-Clerical**

Address: **639 14th Avenue, San Francisco, CA 94118**

Tel.No.: **(415) 668-5955**  
Fax.No.: **(415) 668-0246**

**BHS**

Funding Term: **07/01/2016 - 06/30/2017**

PHP Division: **Behavioral Health Services**

INVOICE NUMBER: **M39 JL 16**

CL Blanket No.: **BPHM** User Cd

CL PO No.: **POHM**

Fund Source: **MH MHSA (CSS)**

Invoice Period: **July 2016**

Final Invoice:  (Check if Yes)

ACE Control Number: \_\_\_\_\_

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
<b>B-2 Clerical and Mailroom Services - HMHMPROP63-PMHS63-1705</b>												
10/ 30 - 39 DS-Vocational	699						0%	#DIV/0!	699		100%	#DIV/0!

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 132,973.00	\$ -	\$ -	0.00%	\$ 132,973.00
Fringe Benefits	\$ 59,838.00	\$ -	\$ -	0.00%	\$ 59,838.00
<b>Total Personnel Expenses</b>	<b>\$ 192,811.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 192,811.00</b>
<b>Operating Expenses</b>					
Occupancy	\$ 5,490.00	\$ -	\$ -	0.00%	\$ 5,490.00
Materials and Supplies	\$ 14,309.00	\$ -	\$ -	0.00%	\$ 14,309.00
General Operating	\$ 2,030.00	\$ -	\$ -	0.00%	\$ 2,030.00
Staff Travel	\$ 746.00	\$ -	\$ -	0.00%	\$ 746.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses	\$ 4,868.00	\$ -	\$ -	0.00%	\$ 4,868.00
Client-Related Food, Client-Related Other	\$ -	\$ -	\$ -	0.00%	\$ -
Activities	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 27,443.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 27,443.00</b>
<b>Capital Expenditures</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ -</b>
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 220,254.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 220,254.00</b>
Indirect Expenses	\$ 26,430.00	\$ -	\$ -	0.00%	\$ 26,430.00
<b>TOTAL EXPENSES</b>	<b>\$ 246,684.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 246,684.00</b>
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		<b>\$ -</b>			

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

\_\_\_\_\_

INVOICE NUMBER: M40 JL 16

Cl. Blanket No.: BPHM TBD

Cl. PO No.: POHM TBD

Fund Source: MH Grant - SAMSHA Adult SOC

Invoice Period: July 2016

Final Invoice: \_\_\_\_\_ (Check if Yes)

ACE Control Number: \_\_\_\_\_

Contractor: Richmond Area Multi-Services, Inc.- Voc Rehab-Peer-Peer

Address: 639 14th Avenue, San Francisco, CA 94118

Tel No.: (415) 668-5955

Fax No.: (415) 668-0246



Funding Term: 07/01/2016 - 06/30/2017

PHP Division: Behavioral Health Services

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
<b>B-3 Peer to Peer Vocational Linkage - HMHMRGRANTS -HMM007-1701</b>												
10/ 30 - 39 DS-Vocational	758						0%	#DIV/0!	758		100%	#DIV/0!

Unduplicated Counts for AIDS Use Only:

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 185,750.00	\$ -	\$ -	0.00%	\$ 185,750.00
Fringe Benefits	\$ 77,086.00	\$ -	\$ -	0.00%	\$ 77,086.00
<b>Total Personnel Expenses</b>	\$ 262,836.00	\$ -	\$ -	0.00%	\$ 262,836.00
<b>Operating Expenses</b>					
Occupancy	\$ 13,000.00	\$ -	\$ -	0.00%	\$ 13,000.00
Materials and Supplies	\$ 1,527.00	\$ -	\$ -	0.00%	\$ 1,527.00
General Operating	\$ 2,370.00	\$ -	\$ -	0.00%	\$ 2,370.00
Staff Travel	\$ 5,000.00	\$ -	\$ -	0.00%	\$ 5,000.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses	\$ 4,948.00	\$ -	\$ -	0.00%	\$ 4,948.00
Client-Related Food, Client-Related Activities	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	\$ 26,845.00	\$ -	\$ -	0.00%	\$ 26,845.00
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	\$ 289,681.00	\$ -	\$ -	0.00%	\$ 289,681.00
Indirect Expenses	\$ 34,762.00	\$ -	\$ -	0.00%	\$ 34,762.00
<b>TOTAL EXPENSES</b>	\$ 324,443.00	\$ -	\$ -	0.00%	\$ 324,443.00
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		\$ -			

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A.

Control Number

\_\_\_\_\_

Contractor: **Richmond Area Multi-Services, Inc.- Voc Rehab-IT HelpDesk**

Address: **639 14th Avenue, San Francisco, CA 94118**

Tel No.: **(415) 668-5955**

Fax No.: **(415) 668-0245**

**BHS**

Funding Term: **07/01/2016 - 06/30/2017**

PHP Division: **Behavioral Health Services**

INVOICE NUMBER: **M41 JL 16**

CL Blanket No.: **BPHM TBD**

User Cd

CL PO No.: **POHM TBD**

Fund Source: **MH MESA (IT) Information Technology**

Invoice Period: **July 2016**

Final Invoice: \_\_\_\_\_ (Check if Yes)

ACE Control Number: \_\_\_\_\_

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
<b>B-4 Information Technology - HMHMPROP63-PMHS63-1612</b>												
10/30 - 39 DS-Vocational - Helpdesk	640	16			-	-	0%	0%	640	16	100%	100%
10/30 - 39 DS-Vocational - Desktop	460	14			-	-	0%	0%	460	14	100%	100%
10/30 - 39 DS-Vocational - Advanced Helpdesk	380	10			-	-	0%	0%	380	10	100%	100%

Unduplicated Counts for AIDS Use Only:

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 825,241.00	\$ -	\$ -	0.00%	\$ 825,241.00
Fringe Benefits	\$ 313,592.00	\$ -	\$ -	0.00%	\$ 313,592.00
<b>Total Personnel Expenses</b>	<b>\$ 1,138,833.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 1,138,833.00</b>
Operating Expenses					
Occupancy	\$ 13,850.00	\$ -	\$ -	0.00%	\$ 13,850.00
Materials and Supplies	\$ 25,635.00	\$ -	\$ -	0.00%	\$ 25,635.00
General Operating	\$ 7,600.00	\$ -	\$ -	0.00%	\$ 7,600.00
Staff Travel	\$ 1,000.00	\$ -	\$ -	0.00%	\$ 1,000.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses, Client Related Food	\$ 7,500.00	\$ -	\$ -	0.00%	\$ 7,500.00
Client-Related Other Activities	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 55,585.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 55,585.00</b>
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 1,194,418.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 1,194,418.00</b>
Indirect Expenses	\$ 143,330.00	\$ -	\$ -	0.00%	\$ 143,330.00
<b>TOTAL EXPENSES</b>	<b>\$ 1,337,748.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 1,337,748.00</b>
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		\$ -			

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103.

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR  
COST REIMBURSEMENT INVOICE**

Appendix F  
PAGE A

Control Number

INVOICE NUMBER: M44 JL 16

Contractor: Richmond Area Multi-Services, Inc.-Voc Rehab-IT HelpDesk

Cl. Blanket No.: BPHM TBD

Address: 639 14th Avenue, San Francisco, CA 94118

Cl. PO No.: POHM TBD

Tel No.: (415) 668-5955  
Fax No.: (415) 668-0246



Fund Source: MH MSA (CSS)

Invoice Period: July 2016

Final Invoice: (Check if Yes)

Funding Term: 07/01/2016 - 06/30/2017

ACE Control Number: [REDACTED]

PHP Division: Behavioral Health Services

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDG	UOS	UDG	UOS	UDG	UOS	UDG	UOS	UDG	UOS	UDG
B-5 TAY Vocational Services - HMHMPROP83-PMHS63-1704												
10/ 30 - 39 DS-Vocational	594						0%	#DIV/0!	594		100%	#DIV/0!

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 83,217.00	\$ -	\$ -	0.00%	\$ 83,217.00
Fringe Benefits	\$ 32,039.00	\$ -	\$ -	0.00%	\$ 32,039.00
<b>Total Personnel Expenses</b>	<b>\$ 115,256.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 115,256.00</b>
<b>Operating Expenses</b>					
Occupancy	\$ 9,600.00	\$ -	\$ -	0.00%	\$ 9,600.00
Materials and Supplies	\$ 3,000.00	\$ -	\$ -	0.00%	\$ 3,000.00
General Operating	\$ 1,350.00	\$ -	\$ -	0.00%	\$ 1,350.00
Staff Travel	\$ 1,400.00	\$ -	\$ -	0.00%	\$ 1,400.00
Consultant/Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other: Recruitment/ Direct Staff Expenses, Client	\$ 65,823.00	\$ -	\$ -	0.00%	\$ 65,823.00
Stipends, Client-Related Food, Client-Related	\$ -	\$ -	\$ -	0.00%	\$ -
Other Activities	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
<b>Total Operating Expenses</b>	<b>\$ 81,173.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 81,173.00</b>
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 196,429.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 196,429.00</b>
Indirect Expenses	\$ 23,571.00	\$ -	\$ -	0.00%	\$ 23,571.00
<b>TOTAL EXPENSES</b>	<b>\$ 220,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>	<b>\$ 220,000.00</b>
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
<b>REIMBURSEMENT</b>		\$ -			

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Date: \_\_\_\_\_  
Phone: \_\_\_\_\_

Send to:  
Behavioral Health Services-Budget/Invoice Analyst  
1380 Howard St., 4th Floor  
San Francisco, CA 94103

DPH Authorization for Payment

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/16/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

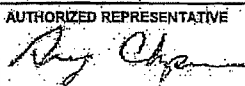
<b>PRODUCER</b> Arthur J. Gallagher & Co. Insurance Brokers of CA, Inc. LIC # 0726293 505 N Brand Blvd, Suite 600 Glendale CA 91203	<b>CONTACT NAME:</b> Michelle González <b>PHONE (Inc, Ho, Ext):</b> 818-539-2300 <b>E-MAIL ADDRESS:</b> Michelle.Bielen@ajg.com	<b>FAX (AG, No):</b> 818-539-2301
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> Richmond Area Multi Service dba: RAMS, Inc. 639 14th Avenue San Francisco CA 94118	<b>INSURER A:</b> Quality Comp Inc	
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES**      **CERTIFICATE NUMBER:** 1266200063      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED, NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GENL. AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED. EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMPROP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY-AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED:    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	0150580714	1/1/2017	1/1/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Evidence Only.

<b>CERTIFICATE HOLDER</b>  City & County of San Francisco Dept of Public Health Comm. Behavioral Health Svcs. 1380 Howard Street San Francisco CA 94103 USA	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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RE: Quality Comp, Inc. - Group Workers' Compensation Program

To Whom It May Concern:

As proof of workers' compensation coverage, I would like to provide you with the attached Certificate of Consent to Self-Insure issued to Quality Comp, Inc. by the Department of Industrial Relations, Office of Self-Insurance Plans. This Certificate carries an effective date of December 1, 2004 and does not have an expiration date. The Quality Comp, Inc. program has excess insurance coverage with NY Marine & General Insurance Company (NY-MAGIC). NY-MAGIC is a fully licensed and admitted writer of Excess Workers' Compensation Insurance in the State of California. The company is rated "A" Category "VIII" by A.M. Best & Company (NAIC#16608).

**Specific Excess Insurance**

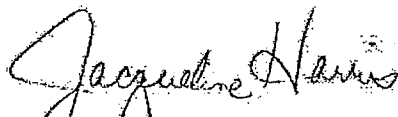
Excess Workers' Compensation: Statutory per occurrence excess of \$500,000  
Employers Liability: \$1,000,000 Limit

**Term of Coverage**

Effective Date: January 1, 2017  
Expiration: January 1, 2018

Please contact me if you should have any questions or require additional information. Thank you.

Sincerely,

  
Jacqueline Harris  
Director of Underwriting



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
6/30/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

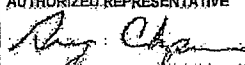
<b>PRODUCER</b> Arthur J. Gallagher & Co. Insurance Brokers of CA, Inc. LIC # 0726293 505 N Brand Blvd, Suite 600 Glendale CA 91203	<b>CONTACT NAME:</b> Michelle Gonzalez <b>PHONE (A/C No., Ext.):</b> 818-539-2300 <b>FAX (A/C No.):</b> 818-539-2301 <b>E-MAIL ADDRESS:</b> Michelle_Bielen@ajg.com													
	<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: Scottsdale Insurance Company</td> <td>41297</td> </tr> <tr> <td>INSURER B: Riverport Insurance Company</td> <td>36684</td> </tr> <tr> <td>INSURER C: Quality Comp Inc</td> <td></td> </tr> <tr> <td>INSURER D: Zurich American Insurance Company</td> <td>16535</td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Scottsdale Insurance Company	41297	INSURER B: Riverport Insurance Company	36684	INSURER C: Quality Comp Inc		INSURER D: Zurich American Insurance Company	16535	INSURER E:		INSURER F:
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INSURER C: Quality Comp Inc														
INSURER D: Zurich American Insurance Company	16535													
INSURER E:														
INSURER F:														
<b>INSURED</b> Richmond Area Multi Services 639 14th Avenue San Francisco, CA 94118														

**COVERAGES**      **CERTIFICATE NUMBER: 273124352**      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	OPS0068346	7/1/2016	7/1/2017	EACH OCCURRENCE \$3,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$3,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000 Abuse Liab: \$250k/1m
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS  <input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$		HHN852534510	7/1/2016	7/1/2017	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A	0165589746	1/1/2016	1/1/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
D A	Crime Professional Liab.		MPL576139701 OPS0068346	7/1/2016 7/1/2016	7/1/2019 7/1/2017	Limit Per Occurrence \$3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
City & County of San Francisco, its Officers, Agents & Employees named as additional insured but only insofar as the operations under contract are concerned. Such policies are primary insurance to any other insurance available to the additional insureds with respect to any claims arising out of the agreement. Insurance applies separate to each insured. Workers Compensation coverage is excluded. Evidence Only.

<b>CERTIFICATE HOLDER</b>  City & County of San Francisco Dept of Public Health Comm. Behavioral Health Svcs. 1380 Howard Street San Francisco CA 94103 USA	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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SCOTTSDALE INSURANCE COMPANY®

ENDORSEMENT  
NO. 1

ATTACHED TO AND FORMING A PART OF POLICY NUMBER	ENDORSEMENT EFFECTIVE DATE (12:01 A.M. STANDARD TIME)	NAMED INSURED	AGENT NO.
OPS0068346	07/01/2016	Richmond Area Multi-Services, Inc. (RAMS)	Negley Associates 29518

In consideration of the premium charged the following is added to form CG 20 26 07 04:

City and County of San Francisco  
 Dept. of Public Health, Comm. MH Services (CMHS)  
 1380 Howard St, 4th Floor  
 San Francisco, CA 94103

State Department of Rehabilitation/State of CA  
 its Officers, Employees, Agents & Servants  
 721 Capital Mall  
 Sacramento, CA 95814

The San Francisco Children & Families Commission  
 1390 Market Street, Suite 318  
 San Francisco, CA 94102

\*\*San Francisco Unified School District  
 135 Van Ness Ave., Room #102  
 San Francisco, CA 94102  
 \*\* San Francisco Unified School District, its Board,  
 Officers, and Employees are named as Additional  
 Insureds, but only insofar as the operations under  
 contract are concerned.  
 Department of Human Services  
 1235 Mission St  
 San Francisco, CA 94103

San Francisco Community College District  
 Its Officers, Agents and Employees  
 33 Gough Street  
 San Francisco, CA 94103

# RIVERPORT INSURANCE COMPANY

THIS ENDORSEMENT CHANGES YOUR POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED - AUTOMOBILE

This endorsement modifies coverage under your:

### BUSINESS AUTO COVERAGE PART

SECTION II - LIABILITY COVERAGE, Paragraph A. COVERAGE, Item 1. WHO IS AN INSURED is amended to include the person or organization named below, but only with respect to acts or actions of the named insured, that is, acts arising out of occurrences with respect to vehicles hired or used by the named insured, and not to acts or actions of the following named additional insured(s), its or their employees, agents or representatives.

<u>NAME OF PERSON OR ORGANIZATION</u>	<u>DESCRIPTION OF AUTOMOBILE</u>
CITY & COUNTY OF SAN FRANCISCO DEPT OF PUBLIC HEALTH 101 GROVE STREET #307 SAN FRANCISCO CA 94102	AS THEIR INTEREST MAY APPEAR
CITY & COUNTY OF SAN FRANCISCO HUMAN SERVICES AGENCY, OFFICE OF GRANT MANAGEMENT SAN FRANCISCO CA 94120	AS THEIR INTEREST MAY APPEAR
STATE OF CALIFORNIA STATE DEPT OF REHABILITATION 721 CAPITOL MALL SACRAMENTO CA 95814	AS THEIR INTEREST MAY APPEAR
STATE OF CALIFORNIA STATE DEPT OF VOCATIONL REHAB 301 HOWARD ST., 7TH FLR SAN FRANCISCO CA 94105	AS THEIR INTEREST MAY APPEAR

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.





**WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS**

Quality Comp, Inc. is a Group Self-Insurance Program authorized by the Office of Self-Insurance Plans to provide workers' compensation to approved members. The Board of Directors of Quality Comp, Inc. has authorized the Program Administrator to waive rights of subrogation in certain instances.

This change in coverage, effective 12:01 AM January 1, 2017, forms part of the member's coverage in Self-Insurance Group No. 4515. Policy Number: 0150580714

Issued to Richmond Area Multi-Services, Inc.

By Quality Comp, Inc.

The Program has the right to recover our payments from anyone liable for an injury covered by this employer. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

The additional premium for this change shall be \$250.00.

**Schedule**

**Person or Organization**

City & County of San Francisco  
Dept of Public Health/Behavioral Health Services  
1380 Howard Street  
San Francisco, CA 94103

**Job Description**

Administrative employees and behavioral health/vocational rehab/peer counselors

Countersigned by *Samantha McCullough*  
Samantha McCullough, Program Administrator, Authorized Representative





City and County of San Francisco

# San Francisco Department of Public Health

Barbara A. Garcia, MPA  
Director of Health

November 6, 2017

Angela Calvillo, Clerk of the Board  
Board of Supervisors  
1 Dr. Carlton B. Goodlett Place, Room 244  
San Francisco, CA 94102-4689

RECEIVED  
BOARD OF SUPERVISORS  
SAN FRANCISCO  
2017 NOV -5 AM 11:55  
AK

Dear Ms. Calvillo:

Please find attached a proposed resolution for Board of Supervisors approval of amendment number two to a contract agreement with Richmond Area Multi-Services, Inc., for its Vocational Rehabilitation Program, to extend the contract by two years and ten months.

This contract amendment requires Board of Supervisors approval under San Francisco Charter Section 9.118.

The following is a list of accompanying documents:

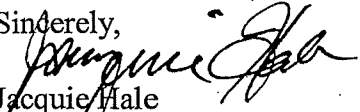
- o Resolution for the second amendment
- o Copy of first amendment
- o Copy of original agreement
- o Forms SFEC-126 for the Board of Supervisors and Mayor

For questions on this matter, please contact:

Michelle Ruggels, Director  
Business Office  
Department of Public Health  
(415) 255-3404  
[Michelle.Ruggels@SFDPH.org](mailto:Michelle.Ruggels@SFDPH.org)

Jacque Hale, Director  
Office of Contract Management and Compliance  
Business Office  
Department of Public Health  
(415) 554-2609/255-3508  
[Jacque.Hale@SFDPH.org](mailto:Jacque.Hale@SFDPH.org)

Thank you for your time and consideration.

Sincerely,  
  
Jacquie Hale  
Director, Office of Contracts Management and Compliance  
DPH Business Office

---

The mission of the San Francisco Department of Public Health is to protect and promote the health of all San Franciscans.

We shall ~ Assess and research the health of the community ~ Develop and enforce health policy ~ Prevent disease and injury ~

~ Educate the public and train health care providers ~ Provide quality, comprehensive, culturally-proficient health services ~ Ensure equal access to all ~

[Jacquie.hale@sfdph.org](mailto:Jacquie.hale@sfdph.org) – office 415-554-2509 fax 415 554-2555

101 Grove Street, Room 307, San Francisco, CA 94102



**FORM SFEC-126:  
NOTIFICATION OF CONTRACT APPROVAL**  
(S.F. Campaign and Governmental Conduct Code § 1.126)

<b>City Elective Officer Information</b> <i>(Please print clearly.)</i>	
Name of City elective officer(s): Members, Board of Supervisors	City elective office(s) held: Members, Board of Supervisors

<b>Contractor Information</b> <i>(Please print clearly.)</i>	
Richmond Area Multi-Services, Inc.	
<p><i>Please list the names of (1) members of the contractor's board of directors; (2) the contractor's chief executive officer, chief financial officer and chief operating officer; (3) any person who has an ownership of 20 percent or more in the contractor; (4) any subcontractor listed in the bid or contract; and (5) any political committee sponsored or controlled by the contractor. Use additional pages as necessary.</i></p> <p>1. Please see list of members of Board of Directors attached.                  2. Chief Executive Officer: Jorge Wong, Chief Financial Officer: Ken Choi                  3. Persons with more than 20% ownership: N/A                  4. Subcontractors listed in contract: N/A                  5. Political committees sponsored or controlled by contractor: N/A</p>	
Contractor address: 639 14 <sup>th</sup> Avenue, San Francisco, CA 94118	
Date that contract was approved:	Amount of contract: \$20,739,037
Describe the nature of the contract that was approved: Work development, training, and placement services for mental health consumers	
Comments:	

This contract was approved by (check applicable):

the City elective officer(s) identified on this form

a board on which the City elective officer(s) serves San Francisco Board of Supervisors  
 Print Name of Board

the board of a state agency (Health Authority, Housing Authority Commission, Industrial Development Authority Board, Parking Authority, Redevelopment Agency Commission, Relocation Appeals Board, Treasure Island Development Authority) on which an appointee of the City elective officer(s) identified on this form sits

\_\_\_\_\_  
 Print Name of Board

<b>Filer Information</b> <i>(Please print clearly.)</i>	
Name of filer: Angela Calvillo, Clerk of the Board	Contact telephone number: (415) 554-5184
Address: City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102	E-mail: Board.of.Supervisors@sfgov.org

\_\_\_\_\_  
 Signature of City Elective Officer (if submitted by City elective officer)

\_\_\_\_\_  
 Date Signed

\_\_\_\_\_  
 Signature of Board Secretary or Clerk (if submitted by Board Secretary or Clerk)

\_\_\_\_\_  
 Date Signed

Name	Since	Affiliation
Alvin N. Alvarez, Ph.D. Strategic Planning Committee	4/2006	Dean, San Francisco State University, College of Health & Social Sciences Past President, Asian American Psychological Association
Anoshua Chaudhuri, Ph.D. Treasurer, Finance Committee	9/2008	Professor, San Francisco State University, Dept. of Economics
Cynthia Huie Chair, Fundraising & Development Committee	2/2014	Co-Owner, Seedstore Business Manager, Michael Y. Chan, DDS President, Clement St. Merchants Association
Loren Krane, Ph.D. Vice Chair, Personnel Committee, Strategic Planning Committee	12/1991	Clinical Psychologist Clinical Professor, University of California San Francisco
Irina Mandelboym Fundraising & Development Committee, Personnel Committee	6/2015	Administrative Management Specialist
Walter M. Stella Secretary, Personnel Committee	5/2014	Shareholder, Miller Law Group
William Wong, M.D. Fundraising & Development Committee	11/2006	Psychiatrist, Kaiser Permanente
C. Kitty Wu, PhD Finance Committee	10/2009	Associate Director, Genentech Inc