

**AMENDMENT TO AGREEMENT BETWEEN THE COUNTY OF SAN MATEO AND
RESOURCE DEVELOPMENT ASSOCIATES**

THIS AMENDMENT TO THE AGREEMENT, entered into this ____ day of _____, 2022, by and between the COUNTY OF SAN MATEO, hereinafter called "County," and RESOURCE DEVELOPMENT ASSOCIATES, hereinafter called "Contractor";

W I T N E S S E T H:

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

WHEREAS, the parties entered into an Agreement on June 29, 2021 for mental health services act evaluation and technical assistance services for the term July 1, 2021 through June 30, 2024, in the amount of \$383,105; and

WHEREAS, on September 29, 2021 our Director of Behavioral Health and Recovery Services approved the first amendment to the Agreement extending the term of the Agreement for Technical Assistance: Carino Project (Coastside Multi-Cultural Wellness Program) Data Capacity Support and PEI Data Support through December 31, 2021 with no change to the maximum amount or to the term of the agreement.

WHEREAS, on November 9, 2021, our Director of Behavioral Health and Recovery Services approved the second amendment to the Agreement extending the term of the Agreement for Technical Assistance: Prevention and Early Intervention Three-Year Evaluation Report through January 31, 2022, increasing the agreement amount by \$25,000 to an amount not to exceed \$408,105 and with no change to the term of the agreement.

WHEREAS, the parties wish to amend the Agreement for Technical Assistance: Prevention and Early Intervention Three-Year Evaluation Report through June 30, 2022; add Evaluation Services: Adult Mental Health First Aid (AMHFA), Youth Mental Health First Aid (YMHFA) and Parent Project (PP) services through June 30, 2024; increasing the maximum by \$241,630 to an amount not to exceed \$649,735 and with no change to the term of the agreement.

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

1. Exhibit A-2 and B-2 is hereby deleted and replaced with Exhibit A-3 and B-3 attached hereto.
2. All other terms and conditions of the agreement dated November 9, 2021 between the County and Contractor shall remain in full force and effect.

*** SIGNATURE PAGE TO FOLLOW ***

In witness of and in agreement with this Agreement's terms, the parties, by their duly authorized representatives, affix their respective signatures:

COUNTY OF SAN MATEO

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

Date: _____

ATTEST:

By: _____
Clerk of the Board of Supervisor, San Mateo County

RESOURCE DEVELOPMENT ASSOCIATES



Contractor's Signature

Date: July 22, 2022

Exhibit A-3

In consideration of the payments set forth in Exhibit B-3, Contractor shall provide the following services:

I. DESCRIPTION OF SERVICES TO BE PERFORMED BY CONTRACTOR

A. Introduction

Contractor shall provide evaluation, planning and reporting technical assistance to Mental Health Services Act (MHSA) administration and evaluation and reporting of the Innovation (INN) component of MHSA.

The following description of services is a proposal that may change based on emerging needs and circumstances, including evaluation plan development and data availability.

B. Description of Services

1. Evaluation Services: Pride Center INN Project Extension, 7/1/2020 – 12/30/2021

a. Contractor will focus the evaluation on local implementation and outcomes of online mental health applications (“apps”) to understand if the apps will improve access to mental health services and supports for youth and older adults experiencing isolation; and improve wellness and recovery outcomes for those who engage with the mobile apps. Locally-defined learning goals include

b. Data Collection

i. Contractor will focus on measuring progress in implementation of the Extension Goals proposed

- a) Strengthening internal/external collaboration efforts;
- b) Clinical outcomes of clients with severe mental illness;
- c) Developing a replicable best practices model.

- 1) Contractor will continue to work closely with Pride Center staff to support providers in collecting evaluation -related data directly (e.g., pre/post scales administered during clinical encounters, administrative data collected and reported in the Center’s database).
- 2) Contractor will keep a record of training and technical assistance materials to provide the Center for ongoing use.

- ii. Qualitative Data Collection
 - a) Pride Center: Contractor will co-facilitate with local community-based organizations and/or stakeholder partners; as needed and determined during the ongoing meetings between Pride Center and the Contractor.
- iii. Quantitative Data Collection
 - a) Contractor will request administrative data on the services delivered to clients as a part of the INN programs. The data will include the numbers of clients served (including participants in outreach, social, and community services), the services received by each client, and any referrals or linkages made for clients.
 - b) Pride Center: Contractor will request client clinical progress data including;
 - 1) Adult Needs and Strengths Assessment (ANSA);
 - 2) Child and Adolescent Needs and Strengths (CANS);
 - 3) Client questionnaire self-administer at intake and at regular points throughout their treatment.

c. Data Analysis

- i. Contractor will synthesize the quantitative and qualitative data gathered.
- ii. Quantitative Data Analysis - to analyze quantitative data gathered from client pre/post scales, satisfaction surveys, service delivery, and other outcome measures, the Contractor will utilize Microsoft Excel and SPSS to describe the numbers served, demographics, and changes in percentages from baseline to follow-up survey results.
- iii. Qualitative Data Analysis - Contractor will undertake a three-step process to analyze qualitative data from focus groups, interviews, and other evaluation meetings:
 - a) First, Contractor will conduct exploratory analyses by reviewing the transcripts to identify key themes that address specific research questions. Contractor will utilize both deductive and inductive approaches to this process. Deductively, Contractor will begin by outlining themes as pertinent to the research questions. Inductively, Contractor will allow additional themes to

emerge from their exploratory and in-depth analyses of the data.

b) Second, Contractor will organize all coded pieces of data by themes as well as by intersections of multiple themes and/or subcategories.

c) Third, Contractor will triangulate quantitative and qualitative data, making connections between qualitative themes and the results of the quantitative data analysis, to produce a holistic and comprehensive understanding of the program outcomes, as defined in the program specific evaluation plans as well as areas for improvement.

d. Data Interpretation and Findings Development

i. Contractor will work with stakeholders from the Pride Center, will facilitate an interactive exercise and discussion to validate the data, identify any gaps or inaccuracies in the data, highlight key findings, and brainstorm recommendations based on the findings.

ii. Contractor will use the findings and recommendations when preparing the annual evaluation report.

e. Final Report

i. Contractor will produce a final report as required by MHSAs regulations that include a description of the evaluation activities, numbers and demographics of clients served, and evaluation findings based on the learning goals and domains of interest for each project. Contractor will submit a draft report to BHRS and Pride Center staff for review and feedback before submitting a final report.

ii. Per the MHSAs Innovation Guidelines, the final report will include:

a) A description of the issue addressed.

b) A description of the project including the purpose(s) and expected outcome.

c) An analysis of the effectiveness of the project using the data that was collected and including the perspective of the project participants, including: any changes or modifications made during implementation; how it affected those who used it; what was learned; whether the project would be recommended for others to replicate, including any lessons learned in

implementation, with a comment about its cost effectiveness; and whether the project will be continued under a different funding source.

d) Contractor will submit the final report by December 31, 2021.

f. Ongoing Plan for Data Collection and Reporting

i. Contractor will work with the MHSA Manager and Pride Center staff to develop a plan for ongoing annual data collection and reporting post INN funding term.

ii. The reporting will be aligned with the San Mateo County MHSA Reporting template, attached.

g. Pride Center Best Practice Model/Tool

i. Develop a shareable best practice model document/tool to support replicability of the Pride Center model statewide and nationally.

ii. Contractor will work with Pride Center staff and advisory boards to determine key information to include in the development of this resource.

2. Evaluation Services: Help@Hand (TechSuite) INN Project, 7/1/2021 – 12/30/2022

a. Contractor will focus the evaluation on local implementation and outcomes of online mental health applications (“apps”) to understand if the apps will improve access to mental health services and supports for youth and older adults experiencing isolation; and improve wellness and recovery outcomes for those who engage with the mobile apps. Locally-defined learning goals include:

i. Does the availability and implementation of technology-based mental health apps connect transition age youth and isolated older adults?

a) Demographics of app users who do or do not connect with in-person services

b) Reasons why app users do or do not connect with in-person services

ii. Does engaging with the apps promote access to mental health services and supports?

- a) Successes and challenges in implementation and rollout of the app
 - b) Successes and challenges in outreaching to potential app users
 - c) Who is being reached through app outreach efforts
 - d) How are consumers are using the app, and how much
 - iii. Does engaging with the apps effectively promote wellness and recovery?
 - a) How mental health consumers define “success” of the app
 - b) What users perceive as the benefits and drawbacks of the app
- b. Evaluation Planning
 - i. Contractor will finalize an evaluation plan in collaboration with the BHRS Manager and project staff.
 - ii. Contractor will meet in person and virtually with BHRS staff to plan for the qualitative data collection activities as well as the meetings that the Contractor will facilitate with the Help@Hand Advisory Committee.
 - iii. Contractor will assist BHRS with revising any outreach forms so that the forms have the necessary information for Help@Hand-specific outreach and the focus group tools to be used for qualitative data collection.
- c. Evaluation Meetings and Coordination
 - i. Contractor will attend online Help@Hand Advisory Committee meetings over the course of the evaluation. Two meetings will focus on annual reporting of preliminary findings and gathering input from the Advisory Committee about the progress of Help@Hand.
 - ii. Contractor will participate in communication, as needed, with the BHRS staff and the UCI evaluation team in order to stay apprised of their evaluation activities and priorities, identify areas of synergy between the statewide and local evaluations.
- d. Qualitative Data Collection

- i. Contractor will conduct focus groups and app explorations with app testers to support selection of an appropriate app for youth, older adults, and BHRS consumers.
 - ii. Contractor will conduct focus groups with youth app users and older adult app users for a total of up to five focus groups. BHRS will provide stipends to focus group participants.
 - iii. Contractor will conduct one focus group with BHRS consumers. BHRS will provide stipends to focus group participants.
 - iv. Contractor will conduct app explorations with youth, older adult, and BHRS consumer app users for a total of up to three explorations. BHRS will provide stipends to exploration activity participants.
 - v. Contractor will conduct interviews and/or a focus group twice a year with representatives from LCBHS, the Advisory Committee, Youth Leadership Institute (YLI), and Peninsula Family Service (PFS). YLI and PFS are contracted to carry out Help@Hand outreach for the transition-age youth and older adult populations, respectively.
- e. Quantitative Data Collection
- i. Contractor will administer pre, post, and demographic surveys to app testers.
 - ii. Contractor will administer pre and demographic surveys once per year at pilot start. Contractor will administer post surveys once per year upon pilot completion.
- f. Analysis and Reporting
- i. Contractor will prepare summary briefs annually that synthesize findings from the pilot period, including key themes, outcomes, and recommendations to be presented by BHRS staff to the MHSA Steering Committee during the evaluation period to report on preliminary findings.
 - ii. Contractor will prepare two evaluation reports by December 30th of each reporting year, 2021-2022. The final reports will summarize the evaluation methods, key findings related to local Help@Hand implementation and

outcomes, and any recommendations for future technology-related interventions.

g. Project Management and Communication

- i. Contractor will plan to lead monthly phone calls with the BHRS staff leading the Help@Hand project. These calls will offer a chance to check in about the progress of the evaluation, troubleshoot any challenges, plan for upcoming data collection and reporting, and address administrative or contracting issues.
- ii. Contractor will conduct internal meetings and project management to ensure that the evaluation is carried out on time and within budget.

3. Technical Assistance: Cariño Project (Coastside Multi-Cultural Wellness Program) Data Capacity Support, 7/1/2021 – 12/31/2021

- a. Finalize Data Collection Tools: contractor will finalize data collection tools, which may include but not limited to:
 - i. Participant Event Survey
 - ii. Clinical Survey
 - iii. Case Management Survey
 - iv. Annual Participant Survey
 - v. Demographic Surveys
 - vi. Collaboration Survey
- b. Develop Database: contractor will develop a mechanism to enter data electronically.
 - i. In collaboration with BHRS and the provider, this may include a Microsoft Access database for participant and service data, and Google Forms or Survey Gizmo for participant surveys.
- c. Develop Annual Reporting Form: contractor will develop a simple form that the provider can use to report aggregate data on an annual basis.
 - i. In collaboration with BHRS and the provider, this may include an Excel document with formulas to automatically aggregate data from the database.
- d. Contractor will facilitate communication as needed with the contracted service provider to:
 - i. Refine data collection tools

- ii. Provide training and capacity building to the Data Tracker

4. Technical Assistance: Prevention and Early Intervention (PEI) Data Support, 7/1/2021 – 6/30/2022

- a. Contractor will provide Mental Health Services Act (MHSA) PEI outcome data planning and technical assistance in order to support required ongoing PEI reporting and evaluation for ten (10) PEI programs.
- b. PEI data planning meetings:
 - i. Conduct up to 2 follow-up meetings with MHSA Manager and the ten (10) PEI programs to support PEI data reporting capacity, depending on each program's specific needs.
 - a) Follow-up Meeting 1: Identify/review outcomes and indicators for ongoing PEI reporting and support selection of and/or refinement of appropriate data collection tools.
 - b) Follow-up Meeting 2: Crosswalk outcome indicators and data collection with Avatar database.
 - ii. Develop ten (10) one-page PEI program outcome indicator crosswalks for each PEI program.
- c. Common PEI Outcome Indicator Exploration:
 - i. Review PEI data collection and outcome indicators to explore feasibility of identifying and tracking common outcome indicators across PEI programs overall and/or PEI categories.
 - ii. Support identification of and/or refinement of data collection tools to track common indicators, if feasible and appropriate.
 - iii. Crosswalk common PEI indicators with current data collection and Avatar database, if feasible and appropriate.
- d. Finalization of Program Crosswalks and Reporting Templates:
 - i. Review submitted program crosswalks and meet with the PEI programs (up to 11 meetings) to clarify any outstanding questions.

- ii. Support BHRS with outstanding questions from programs, including planning of outcome measures.
 - iii. Finalize Program Crosswalks and PEI Annual Reporting Templates based on feedback and discussions with BHRS and programs, share documents with each program.
- e. Additional PEI Program support meetings and data collection plan:
 - i. Provide in-depth support through additional meetings and guidance on their crosswalk for two (2) additional PEI programs, the Pride Center and Health Ambassador Program (up to 2 meetings per program).
 - ii. Develop Crosswalks for the two additional PEI programs that contain additional details and comments to support clear understanding of reporting requirements and data measures.
- f. PEI template review meetings with BHRS MHSA Manager and additional PEI programs:
 - i. Conduct up to 4 meetings with additional PEI programs (e.g., MBSAT) to support their understanding of the PEI annual reporting process and templates.
 - ii. Provide a simplified version of the PEI Annual Reporting Templates that will meet the needs of programs who do not have a program crosswalk.
- g. Project Presentation PowerPoint:
 - i. Develop a PowerPoint presentation for BHRS to deliver about the project and steps taken to support PEI outcome reporting across multiple programs.
 - ii. Incorporate feedback from BHRS and finalize presentation.

- h. Contractor will meet with MHSA Manager monthly to share project and progress updates and discuss and troubleshoot challenges.

5. Evaluation Services: New INN Projects, 7/1/2021 – 6/30/2024

- a. Contractor will evaluate three new projects approved by the Mental Health Services Oversight and Accountability Commission (MHSOAC) to examine the learning objectives outlined in each INN project, fulfill required demographic INN reporting requirements, and produce annual and final evaluation reports for submission to BHRS and the MHSOAC. The three MHSA INN projects are as follows:

- i. Co-location of Prevention and Early Intervention (PEI) Services in Low-Income Housing
- ii. Pacific Islanders Organizing, Nurturing and Empowering Everyone to Rise and Serve (PIONEERS) Program
- iii. Cultural Arts and Wellness Social Enterprise Cafe for Filipino/a/x Youth (Social Enterprise Cafe)

b. Evaluation Planning – Year 1

- i. For each INN project, Contractor will carry out evaluation planning meetings to introduce the evaluation to the key stakeholders and gather input about methods and measures to assess the identified learning goals for each project.
- ii. Contractor will conduct an initial planning call with BHRS covering evaluation planning for all three projects.
- iii. Contractor will hold the following sessions for each project:
 - a) Co-location of PEI Services in Low-Income Housing
 - 1) One session with BHRS and provider
 - 2) One session with Young Adult Youth Advisory Board
 - b) PIONEERS Program
 - 1) One session with BHRS and provider
 - 2) One session with Youth Advisory Circle
 - c) Social Enterprise Cafe

- 1) One session with BHRS and provider
 - 2) One session with Youth Advisory Group
- iv. Based on input from the planning sessions, Contractor will develop a data collection plan for each project. The data collection plan will outline the methods selected to measure each learning goal and the anticipated schedule, roles, and responsibilities all agencies involved in data collection and reporting.
- c. Data Tool Development – Year 1
- i. Contractor will work with BHRS and INN project staff to ensure that each project has the necessary data collection tools to collect the required data for the evaluation.
 - a) The development of data collection tools may change based on the needs of the project so long as they fall within the estimated number of hours for data tool development.
 - b) Contractor will provide the tools to BHRS and INN project staff in advance to review before they are finalized.
 - c) INN project staff may gather input from project advisory groups as necessary on the development of survey questions.
 - d) The data collection tools may include, but not limited to, the following:
 - 1) Co-location of PEI Services in Low-Income Housing
 - i) Log of services provided, number of youth served, and referrals/linkages made
 - ii) Pre/post, satisfaction, and demographic survey of youth who access services
 - iii) Interview tool for service provider
 - iv) Interview tool for housing managers
 - v) Focus group tool for youth participants
 - 2) PIONEERS
 - i) Log of youth who access services
 - ii) Pre/post, satisfaction, and demographic survey of youth participants
 - iii) Interview tool for service provider
 - iv) Focus group tool for youth participants
 - 3) Social Enterprise Café
 - i) Log of youth who access services
 - ii) Demographic form for youth participants

- iii) Pre/post and satisfaction survey of youth participants
- iv) Interview tool for lead agency
- v) Focus group tool for youth participants

d. Data Collection – Annually

- i. On an annual basis, Contractor will collect data for each project.
 - a) Activities may be adjusted based on the needs of the project so long as they fall within the estimated number of hours for data collection.
 - b) Data collection activities may include, but not limited to, the following:
 - 1) Co-location of PEI in Low-Income Housing
 - i) Collect youth survey
 - ii) Conduct up to two focus groups with youth participants
 - iii) Conduct one interview or focus group with PEI service provider(s)
 - iv) Conduct one group interview with low-income housing managers
 - 2) PIONEERS
 - i) Collect youth survey
 - ii) Conduct up to two focus groups with youth participants
 - iii) Conduct up to two interviews with service provider
 - 3) Social Enterprise Café
 - i) Collect youth survey
 - ii) Conduct up to four focus groups with youth participants
 - iii) Conduct up to four interviews with service providers and stakeholders

e. Analysis and Reporting – Annually

- i. Contactor will complete annual reporting for each project due December 31st of each year.
 - a) For all projects there will be two annual reports (due December 31, 2022 and December 31, 2023)
 - b) Annual Reports will include:
 - 1) Name and description of project.
 - 2) Any changes made during the reporting period and reasons for the change.

- 3) Available evaluation data, including outcomes of the Innovative Project and information about which elements of the Project are contributing to outcomes.
- 4) Program information collected during the reporting period, including required demographic reporting for Innovative Projects that serve individuals.

f. Project Management & Communication - Annually

- i. The Contractor's project management structure for the INN evaluations will consist of the following:
 - a) Project Director, who will provide oversight and coordination across the projects to ensure consistency and adherence to project timelines.
 - b) Project Manager for each project, who will oversee and coordinate the successful completion of each project's workplan.
 - 1) The Project Director will hold regular calls with BHRS to review the overall progress of each evaluation
 - 2) Each Project Manager will hold regular calls with the designated project leads from each contracted provider.
 - 3) Progress calls will occur monthly during the start-up phase of the evaluation, and bi-monthly thereafter.

6. Technical Assistance: Three-Year Prevention and Early Intervention (PEI) Report, 11/1/2021 – 1/31/2022

- a. Contractor will provide support with preparing the MHSA Prevention and Early Intervention (PEI) Three-Year Evaluation Report.
- b. Contractor will review all PEI Program Annual Reports submitted to BHRS in Fiscal Year's (FY) 2018-19, 2019-20, and 2020-21 and compile the available data from each report. Data for each PEI program may include, but is not limited to:
 - i. Total Clients/Families/Participants Served
 - ii. Client Demographics (age, race/ethnicity, gender, primary language, sexual orientation, etc.)
 - iii. Client Outcomes
 - iv. Successes and Challenges

- c. Contractor will draft a report using the BHRS PEI Three-Year Evaluation Report template, that covers all three FY's 2018-20 data. Activities to draft the report includes, but is not limited to:
 - i. Updating each program's quantitative data and program narratives.
 - ii. Creating data visualizations for demographic, outcome, and client data.
 - iii. Developing an Executive Summary for the full report.
 - iv. Developing summaries by PEI component, including the strategies addressed and program highlights.
 - v. Providing broad recommendations for PEI improvements.
- d. Contractor will finalize the BHRS Three-Year Evaluation Report based on BHRS staff feedback.
- e. Contractor will maintain regular communication with BHRS to troubleshoot challenges and at minimum, hold monthly progress calls.

7. Evaluation Services – Adult Mental Health First Aid (AMHFA), Youth Mental Health First Aid (YMHFA) and Parent Project (PP), 4/1/22 – 6/30/24

- a. Contractor will provide evaluation services for AMHFA, YMHFA and PP including but not limited to:
 - i. Participant database management
 - ii. Outreach to curriculum participants
 - iii. Online and paper surveying
 - iv. Data analysis
 - v. Findings reporting
 - vi. Project Management
- b. From April 1, 2022 - June 30, 2022, Contractor will provide the following evaluation start-up deliverables:
 - i. Project Launch
 - a) Meet with program staff for an orientation to and transition of the project evaluation activities for AMHFA, YMHFA and PP.
 - b) Review evaluation documents and templates provided by BHRS.
 - ii. Database Management
 - a) Upload three semesters (Spring 2021, Fall 2021, Spring 2022) of PP applications and pre- and post-survey data collected electronically and into a comprehensive excel database, provided.

- b) Upload three fiscal years (since Spring 2020) of AMHFA applications and pre- and post- survey data collected electronically and into a comprehensive excel database, provided.
 - c) Upload three fiscal years (since Spring 2020) of YMHFA applications and pre- and post- survey data collected electronically and into a comprehensive excel database, provided.
 - d) Support data tracking including notifying program staff of any missing data.
 - e) Review and adjust the excel database to make it more accessible and user-friendly.
- iii. 6-month Survey Launch
- a) Distribute 6-month follow up surveys, via email to three survey groups due for follow-up
 - 1) PP course graduates
 - 2) AMHFA class graduates
 - 3) YMHFA class graduates
 - b) 6-month follow up surveys to be sent quarterly on the 1st of the month to classes that ended 6-9 months prior to the 1st and closed 15th of the month
 - 1) E.g., June 1, 2022 follow-up will end June 15th and include classes that ended between September 1 2021 and December 1, 2021
 - i) For PP only, June 1st follow-up to include all Fall 2021 (even if the class ended after December 1st), in order to include this cohort in the fiscal year annual report
 - c) Track 6-month survey responses and send at minimum one reminder to all PP, AMHFA and YMHFA participants.
 - 1) Reminder to be sent 7th of the month
 - 2) PP target goal is 60% participation rate
 - d) Enter 6-month data into the comprehensive excel database.
 - e) Purchase, raffle and distribute \$25 gift cards to one participant per PP course (12-week course) due for follow-up. There are 2 PP courses that need follow-up.
 - f) Purchase, raffle and distribute 15-20 \$20 gift cards to a participant per AMHFA/YMHFA class (1-day class) due for follow-up. There are 4 AMHFA/YMFA classes that need follow-up
 - g) Keep a gift card log with recipient information per raffle.

- iv. Project Management and Communication
 - a) Contractor will provide project management and communication with BHRS to support start-up activities and troubleshoot challenges, including but not limited to:
 - 1) monthly progress calls
 - 2) adhoc meetings and email communications
- c. From July 1, 2022 - June 30, 2024, Contractor will provide the following ongoing deliverables:
 - i. Annual Reports
 - a) Analyze data to inform program impact, including BHRS and Board of Supervisor indicators for PP and YMHFA
 - b) Prepare PP Annual Report, due July 15th of each fiscal year.
 - c) Prepare YMHFA Annual Report, due July 15th each fiscal year.
 - d) Prepare AMHFA Annual Report, due August 30th of each fiscal year.
 - ii. 6-month Surveys
 - a) Distribute 6-month follow up surveys, via email to three survey groups due for follow-up
 - 1) PP course graduates
 - 2) AMHFA class graduates
 - 3) YMHFA class graduates
 - b) 6-month follow up surveys to be sent quarterly on the 1st of the month to classes that ended 6-9 months prior to the 1st and closed 15th of the month
 - 1) 9/1/2022 follow-up: classes that ended between 12/1/2021 and 3/1/2022
 - 2) 12/1/2022 follow-up: classes that ended between 3/1/2022 and 6/1/2022
 - 3) 3/1/2023 follow-up: classes that ended between 6/1/2022 and 9/1/2022
 - 4) 6/1/2023 follow-up: classes that ended between 9/1/2022 and 12/1/2022
 - i) For PP only, June 1st follow-up to include all Fall 2022 (even if the class ended after December 1st), in order to include this cohort in the fiscal year annual report
 - 5) 9/1/2023 follow-up: classes that ended between 12/1/2022 and 3/1/2023

- 6) 12/1/2023 follow-up: classes that ended between 3/1/2023 and 6/1/2023
 - 7) 3/1/2024 follow-up: classes that ended between 6/1/2023 and 9/1/2023
 - 8) 6/1/2024 follow-up: classes that ended between 9/1/2023 and 12/1/2023
 - i) For PP only, June 1st follow-up to include all Fall 2023 (even if the class ended after December 1st), in order to include this cohort in the fiscal year annual report
 - c) Track 6-month survey responses and send at minimum one reminder to all PP, AMHFA and YMHFA participants.
 - 1) Reminder to be sent quarterly on the 7th of the month
 - 2) PP target goal is 60% participation rate
 - d) Enter 6-month data into the comprehensive excel database.
 - e) Purchase, raffle and distribute \$25 gift cards to one participant per PP course (12-week course) due for follow-up. There are 8-10 PP courses expected per year.
 - f) Purchase, raffle and distribute \$20 gift cards to one participant per AMHFA/YMHFA class (1-day class) due for follow-up. There are up to 200 classes expected per year.
 - g) Keep a gift card log with recipient information per raffle.
- iii. Project Management and Communication
- a) Contractor will provide ongoing data management of all future PP and AMHFA/YMHFA courses/classes.
 - b) Contractor will maintain ongoing project management and communication with BHRS to troubleshoot challenges, including but not limited to:
 - 1) monthly progress calls
 - 2) ad-hoc meetings and email communications

C. Health Order Compliance

1. Health Order Compliance Requirements

Contractor shall comply with all current health orders issued by the State Department of Health and the County Health Officer until such orders are lifted or deemed no longer necessary for health reasons

by the State Department of Health and/or the San Mateo County Health Officer. Current health orders can be found at: <https://covid19.ca.gov/> and at <https://covid19.ca.gov/safer-economy/> for statewide information and at: <https://www.smchealth.org/health-officer-updates/orders-health-officer-quarantine-isolation> for County information.

At a minimum, Contractor will ensure the following:

- a. All clients, staff and volunteers are required to wear face coverings, exceptions can be made for the children served as allowed under state and County health guidelines.
- b. Contractor will create and implement protocols for personal protective equipment (PPE) use, handwashing, isolation for clients who test positive for COVID-19, and visitor protocols (if allowed under the current health order and in compliance with health order requirements (mass testing, which can be met by participating in the BHRS Surveillance Program).
- c. The requirements and protocols mentioned in items a and b above, as well as all the identified strategies related to the pandemic, should be organized into a basic COVID-19 Plan. The plan should identify what impacts and hazards the pandemic poses for your organization, your response to mitigate these impacts and hazards, thresholds that balance workforce location between telework to in office to face to face services for clients, for example. This simple, living document, should reflect what is important to your organization and how you will manage during the pandemic,

2. Service Delivery During Health Order Restrictions

Contractor will create and implement alternate options for service delivery; such as using the telephone and/or online sessions via a virtual platform (such as Zoom, Teams, etc.), in the event that services cannot be performed face-to-face. The virtual platform selected by the Contractor must have security protocols that ensure health information and the identity of clients is protected.

In the event that the Contractor cannot transition from face-to-face services to a virtual format, or other contracted work cannot be performed, Contractor will notify the BHRS Program Manager to develop alternatives to providing deliverables and/or cancelation of services if a solution cannot be reached. In the event that services

are canceled or cannot be performed, funding shall be reduced commiserate with the reduction of services.

II. ADMINISTRATIVE REQUIREMENTS

Compliance with HIPAA, Confidentiality Laws, and PHI Security

- a. Contractor must implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of Protected Health Information (PHI), including electronic PHI that it creates, receives, maintains, uses or transmits, in compliance with 45 C.F.R and to prevent use or disclosure of PHI other than as provided for by this Agreement. Contractor shall implement reasonable and appropriate policies and procedures to comply with the standards. Contractor is required to report any security incident or breach of confidential PHI to BHRS Quality Management within twenty-four (24) hours.
- b. Contractor will develop and maintain a written Privacy and Security Program that includes administrative, technical and physical safeguards appropriate to the size and complexity of the Contractor's operations and the nature and scope of its activities.
- c. Contractor agrees to comply with the provisions of 42 C.F.R. Part 2 as described below if records contain or contract possesses any PHI covered under 42 C.F.R Part 2:
 - 1) Acknowledge that in receiving, storing, processing, or otherwise using any information from BHRS about the clients in the program, it is fully bound by the provisions of the federal regulations governing Confidentiality of Behavioral Health and Recovery Services Patient Records, 42 C.F.R. Part 2;
 - 2) Undertake to resist in judicial proceedings any effort to obtain access to information pertaining to clients otherwise than as expressly provided for in the federal confidentiality regulations, 42 C.F.R. Part 2; and
 - 3) Agree to use appropriate safeguards to prevent the unauthorized use or disclosure of the protected information.
- d. Confidentiality Training

Contractor is required to conduct, complete and maintain record of annual confidentiality training by all staff serving or accessing PHI of BHRS clients.

Contractor may utilize BHRS Confidentiality trainings located at <http://smchealth.org/bhrs/providers/ontrain>.

III. GOALS AND OBJECTIVES

Contractor shall ensure that the following outcome objectives are pursued throughout the term of this Agreement:

Goal 1: Provide timely evaluation services to BHRS.

Objective 1: 100% of reports, surveys, and other deliverables will be produced by the deadlines agreed upon.

Goal 2: Provide analysis and documentation of all data collected.

Objective 2: 100% of quantitative and qualitative data collected through surveys, input sessions, focus groups, key interviews and other means will be tracked, analyzed and submitted to BHRS by deadlines agreed upon

End of Exhibit A-3

Exhibit B-3

In consideration of the services provided by Contractor described in Exhibit A-3 and subject to the terms of the Agreement, County shall pay Contractor based on the following fee schedule and terms:

I. PAYMENTS

A. Maximum Obligation

The maximum amount that County shall be obligated to pay for all services provided under this Agreement shall not exceed SIX HUNDRED FORTY NINE THOUSAND SEVEN HUNDRED THIRTY-FIVE DOLLARS (\$649,735). Furthermore, County shall not pay or be obligated to pay more than the amounts listed below for each component of service required under this Agreement.

B. Rates

Payments for services described in Paragraph I. of this Exhibit A-3 shall be on a deliverable-based payment schedule as listed below for each component of service required under this Agreement.

1. Evaluation Services: Pride Center INN Project Extension

For FY 2021-2022 (July 1, 2021 through December 31, 2021) for the services described in Paragraph B.1. of Exhibit A-3, County shall pay up to a maximum of FORTY-FIVE THOUSAND THREE HUNDRED FIFTY-FIVE DOLLARS (\$45,355) as per the following deliverable-based payment schedule:

Activity	Deliverable	Delivery Date	Cost
Data Collection and Analysis	Completion of data collection and analysis	9/30/2021	\$9,000
Data Interpretation and Findings Development	Completion of data interpretation and findings development meeting	11/30/2021	\$8,000
Final Report	Completion of final INN report	12/31/2021	\$20,355

Ongoing Plan for Data Collection and Reporting	Completion of an ongoing data collection plan for Pride Center staff	12/31/2021	\$3,000
Pride Center Best Practice Model/Tool	Completion of resource for replicability of the Pride Center model	12/31/2021	\$5,000
	TOTAL		\$45,355

The payment schedule is inclusive of all personnel, fringe benefit, materials, travel, equipment, insurance, communications, indirect, facilities, and administrative costs that will be incurred over the course of the proposed project.

2. Evaluation Services: Help@Hand (Tech Suite) INN Project

For the Help@Hand INN Project as described in Paragraph B.2. of Exhibit A-3, County shall pay up to a maximum of EIGHTY THOUSAND DOLLARS (\$80,000).

b. FY 2021 – 2022

For FY 2021-2022, the total amount County shall be obligated to pay shall not exceed FOURTY-ONE THOUSAND FIVE HUNDRED DOLLARS (\$41,500) as per the following deliverable-based payment schedule:

Activity	Deliverable	Delivery Date	Cost
Collect and Analyze Pilot Data	Completion of collection and analysis of client pilot data	8/31/2021	\$16,500
Public Pilot Semi-Annual Highlight	Completion of public pilot semi-annual highlight	9/30/2021	\$6,000
Client Pilot Evaluation Plan	Completion of client pilot evaluation plan	11/30/2021	\$6,000
INN Annual Report	Completion of annual INN report	12/31/2021	\$13,000
		Total	\$41,500

c. FY 2022 – 2023 (July 1, 2022 through December 31, 2022)

For FY 2022-2023, the total amount County shall be obligated to pay shall not exceed THIRTY-EIGHT THOUSAND FIVE HUNDRED DOLLARS (\$38,500) as per the following deliverable-based payment schedule:

Activity	Deliverable	Delivery Date	Cost
Collect and Analyze Client Pilot Data	Completion of collection and analysis of client pilot data	7/1/2022	\$14,600
Client Pilot Semi-Annual Highlight	Completion of client pilot semi-annual highlight	7/31/2022	\$7,700
Data Collection for Final Report	Completion of data collection for final report	9/31/2022	\$3,600
INN Final Report	Completion of final annual INN report	12/31/2022	\$12,600
Total			\$38,500

The payment schedule is inclusive of all personnel, fringe benefit, materials, travel, equipment, insurance, communications, indirect, facilities, and administrative costs that will be incurred over the course of the proposed project.

3. Technical Assistance: Cariño Project (Coastside Multi-Cultural Wellness Program) Data Capacity Support

For the term of July 1, 2021 through December 31, 2021

For the services described in Paragraph B.3. of Exhibit A-3, County shall pay up to a maximum of TWENTY-FOUR THOUSAND SEVEN HUNDRED FIFTY DOLLARS (\$24,750) as per the following deliverable-based payment schedule:

Activity	Deliverable	Cost
Develop Data Collection Tools	Completion of at least three data collection tools	\$13,000
Develop Database	Completion of database	\$3,700
Develop Annual Reporting Form	Completion of annual reporting form	\$8,050
Total		\$24,750

The payment schedule is inclusive of all personnel, fringe benefit, materials, travel, equipment, insurance, communications, indirect, facilities, and administrative costs that will be incurred over the course of the proposed project.

4. Technical Assistance: PEI Data Support

For the term of July 1, 2021 through June 30, 2022

For the services described in Paragraph B.4. of Exhibit A-3, County shall pay up to a maximum of FIFTY-NINE THOUSAND DOLLARS (\$59,000) as per the following deliverable-based payment schedule:

Activity	Deliverable	Total Cost
Avatar PEI Form & Database Review	Completion of documentation and database review	\$1,000
PEI Data Planning Meetings	Draft PEI outcome reporting crosswalks (10 programs)	\$27,000
Common PEI Outcome Indicator Exploration	Completion of common PEI program indicator exploration	\$2,000
Final Program Meetings, Program Crosswalks, and Reporting Templates	Completion of program crosswalks (11 programs) and reporting templates (2 documents)	\$11,000
Additional Technical Support	Completion of detailed crosswalks (2 programs)	\$6,000
Additional Technical Support	Completion of data collection tools to support HAP (up to 3 tools)	\$3,000
PEI Reporting Template Review Meetings	Completion of simplified reporting template (1 document)	\$4,000
Project Presentation PowerPoint	Completion of PowerPoint	\$2,000
PEI Data Collection and Reporting Framework	Completion of PEI data collection and reporting framework (1 document)	\$3,000
Total		\$59,000

The payment schedule is inclusive of all personnel, fringe benefit, materials, travel, equipment, insurance, communications, indirect, facilities, and administrative costs that will be incurred over the course of the proposed project.

5. Evaluation Services: New INN Projects

For the New INN Projects as described in Paragraph B.5. of Exhibit A-3 County shall pay up to a maximum of TWO HUNDRED FOUR THOUSAND DOLLARS (\$204,000).

a. FY 2021 – 2022

For FY 2021-2022, the total amount County shall be obligated to pay shall not exceed THIRTY THOUSAND DOLLARS (\$30,000) as per the following deliverable-based payment schedule:

Deliverable	Delivery Date	Cost for Co-location of PEI in Low-Income Housing	Cost for PIONEERS Program	Cost for Social Enterprise Cafe	TOTAL
Completion of Evaluation Plan	8/31/21	\$2,500	\$2,500	\$7,500	\$12,500
Completion of data tools development	9/30/21	\$4,000	\$4,000	\$6,500	\$14,500
Completion of annual data collection plan	4/30/22	\$1,000	\$1,000	\$1,000	\$3,000
Total		\$7,500	\$7,500	\$15,000	\$30,000

b. FY 2022 – 2023

For FY 2022-2023, the total amount County shall be obligated to pay shall not exceed EIGHTY-SEVEN THOUSAND DOLLARS (\$87,000) as per the following deliverable-based payment schedule:

Deliverable	Delivery Date	Cost for Co-location of PEI in Low-Income Housing	Cost for PIONEERS Program	Cost for Social Enterprise Cafe	TOTAL
Completion of annual data collection activities	8/31/22	\$5,500	\$5,500	\$17,000	\$28,000
Completion of Annual INN Evaluation Reports	12/31/21	\$12,000	\$12,000	\$30,000	\$54,000
Completion of annual data collection plan	3/31/23	\$1,000	\$1,000	\$3,000	\$5,000
Total		\$18,500	\$8,500	\$50,000	\$87,000

c. FY 2023 – 2024

For FY 2023-2024, the total amount County shall be obligated to pay shall not exceed EIGHTY-SEVEN THOUSAND DOLLARS (\$87,000) as per the following deliverable-based payment schedule:

Deliverable	Delivery Date	Cost for Co-location of PEI in Low-Income Housing	Cost for PIONEERS Program	Cost for Social Enterprise Cafe	TOTAL
Completion of annual data collection activities	8/31/23	\$5,500	\$5,500	\$17,000	\$28,000
Completion of Annual INN Evaluation Reports	12/31/23	\$12,000	\$12,000	\$30,000	\$54,000
Completion of annual data collection plan	3/31/24	\$1,000	\$1,000	\$3,000	\$5,000
Total		\$18,500	\$8,500	\$50,000	\$87,000

6. Technical Assistance: PEI Three-Year Evaluation Report

For the term of October 1, 2021 through January 31, 2022

For the services described in Paragraph B.6. of Exhibit A-3, County shall pay up to a maximum of TWENTY-FIVE THOUSAND DOLLARS (\$25,000) as per the following deliverable-based payment schedule:

Activity	Deliverable	Time Frame	Cost
PEI Program Annual Reports Review and Compiling Data	Completion of data compiling and review	October-November	\$5,000
Draft Three-Year PEI Evaluation Report	Completion of draft report for BHRS review	November-December	\$15,000
Final Three-Year PEI Evaluation Report	Completion of edits and final PEI report	Mid-January	\$5,000
Grand Total			\$25,000

7. Evaluation Services: Adult Mental Health First Aid (AMHFA), Youth Mental Health First Aid (YMHFA) and Parent Project (PP)

For the evaluation of AMHFA, YMHFA and PP as described in Paragraph B.7. of Exhibit A County shall pay up to a maximum of TWO HUNDRED ELEVEN THOUSAND SIX HUNDRED THIRTY DOLLARS (\$211,630).

a. FY 2021 – 2022

For the term of April 1, 2022 through June 30, 2022, the total amount County shall be obligated to pay shall not exceed TWENTY-SEVEN THOUSAND ONE HUNDRED THIRTY DOLLARS (\$27,130) as per the following deliverable-based payment schedule:

Activity	Deliverable	Time Frame	Cost
Project Launch	Completion of project launch meeting and material review	April 2022	\$5,000
Database Management	Completion of excel database review and data consolidation for AMHFA, YMHFA, and PP	June 2022	\$9,000
6-Month Survey Launch	Completion of 6-month survey delivery and raffle for AMHFA, YMHFA, and PP	June 2022	\$10,000
	Mailing and incentive costs <ul style="list-style-type: none"> • PP: \$50 total (2 courses at \$25 per course) • AMHFA: \$60 total (3 classes at \$20 per class) • YMHFA: \$20 total (1 class at \$20 per class) 	June 2022	\$130
Start-Up Management and Communication	Completion of monthly check-in meetings and other ad-hoc needs	June 2022	\$3,000
Grand Total			\$27,130

The payment schedule is inclusive of all personnel, fringe benefit, materials, travel, equipment, insurance, communications, indirect, facilities, and administrative costs that will be incurred over the course of the proposed project.

b. FY 2022 – 2023

For FY 2022-23, the total amount County shall be obligated to pay shall not exceed NINETY-TWO THOUSAND TWO HUNDRED FIFTY DOLLARS (\$92,250) as per the following deliverable-based payment schedule:

Activity	Deliverable	Time Frame	Cost
PP Annual Report	Completion of FY21-22 annual report	July 2022	\$10,000
YMHFA Annual Report	Completion of FY21-22 annual report	July 2022	\$10,000
AMHFA	Completion of FY21-22 annual report	August 2022	\$10,000
6-Month Surveys	Completion of 6-month survey delivery and raffle for AMHFA, YMHFA, and PP (\$10,000/quarter)	September 2022 December 2022 March 2023 June 2023	\$40,000
	Mailing and incentive costs <ul style="list-style-type: none"> • PP: \$250 per year (up to 10 courses/ \$25 per course) • AMHFA/YMHFA: \$4,000 per year (up to 200 classes/\$20 per 	September 2022 December 2022 March 2023 June 2023	\$4,250
Database Management	Completion of excel database review and data consolidation for AMHFA, YMHFA, and PP	June 2023	\$6,000
Ongoing Project Management and Communication	Completion of monthly check-in meetings and other ad-hoc needs (\$1,000/month)	July 2022 – June 2023	\$12,000
Grand Total			\$92,250

The payment schedule is inclusive of all personnel, fringe benefit, materials, travel, equipment, insurance, communications, indirect, facilities, and administrative costs that will be incurred over the course of the proposed project.

c. FY 2023 – 2024

For FY 2023-24, the total amount County shall be obligated to pay shall not exceed NINETY-TWO THOUSAND TWO HUNDRED FIFTY DOLLARS (\$92,250) as per the following deliverable-based payment schedule:

Activity	Deliverable	Time Frame	Cost
PP Annual Report	Completion of FY22-23 annual report	July 2023	\$10,000
YMHFA Annual Report	Completion of FY22-23 annual report	July 2023	\$10,000
AMHFA	Completion of FY22-23 annual report	August 2023	\$10,000
6-Month Surveys	Completion of 6-month survey delivery and raffle for AMHFA, YMHFA, and PP (\$10,000/quarter)	September 2023 December 2023 March 2024 June 2024	\$40,000
	Mailing and incentive costs <ul style="list-style-type: none"> PP: \$250 Per year (up to 10 courses/ \$25 per course) AMHFA/YMHFA: \$4,000 per year (up to 200 classes/\$20 per class) 	September 2023 December 2023 March 2024 June 2024	\$4,250
Database Management	Completion of excel database review and data consolidation for AMHFA, YMHFA, and PP	June 2024	\$6,000
Ongoing Project Management and Communication	Completion of monthly check-in meetings and other adhoc needs (\$1,000/mth)	July 2023 – June 2024	\$12,000
Total			\$92,250

The payment schedule is inclusive of all personnel, fringe benefit, materials, travel, equipment, insurance, communications, indirect, facilities, and administrative costs that will be incurred over the course of the proposed project.

- C. Modifications to the allocations in Paragraph A of this Exhibit B-3 may be approved by the Chief of the Health System or designee, subject to the maximum amount set forth in Paragraph 3 of this Agreement.
- D. In the event this Agreement is terminated prior to June 30, 2024, Contractor shall be paid on a prorated basis for only that portion of the contract term during which Contractor provided services pursuant to this Agreement. Such billing shall be subject to the approval of the Chief of the Health System or designee.

E. Monthly Invoices and Payment

- 1. Payment by County to Contractor shall be monthly. Claims that are received after the tenth (10th) working day of the month are considered to be late submissions and may be subject to a delay in payment. Claims submitted more than 90 days after the date or service are considered late claims. County reserves the right to deny payment for invoices with late claims or claims for which completed service reporting forms or electronic service files are not received. Claims and reports are to be sent to:

County of San Mateo
Behavioral Health and Recovery Services
Attn: Contract Unit
2000 Alameda de Las Pulgas, Suite 280
San Mateo, CA 94403

- 2. County reserves the right to modify the description of services as the County deems necessary.

F. Revenue and Performance

County anticipates revenues from various sources to be used to fund services provided by Contractor through this Agreement. Should actual revenues be less than the amounts anticipated for any period of this Agreement, the maximum payment obligation and/or payment obligations for specific services may be reduced at the discretion of the Chief of the Health System or designee.

G. Inadequate Performance

If County or Contractor finds that performance is inadequate, at the County's discretion, a meeting may be called to discuss the causes for the performance problem, to review documentation, billing and/or other reports, and to take appropriate corrective action, as needed, to resolve any identified discrepancies. This Agreement may be renegotiated, allowed to continue to end of term, or terminated pursuant to Paragraph 4 of this Agreement. Any unspent monies due to performance failure may reduce the following year's agreement, if any.

H. Claims Certification and Program Integrity

Anytime Contractor submits a claim to the County for reimbursement for services provided under Exhibit A of this Agreement, Contractor shall certify by signature that the claim is true and accurate by stating the claim is submitted under the penalty of perjury under the laws of the State of California.

The claim must include the following language and signature line at the bottom of the form(s) and/or cover letter used to report the claim.

"Under the penalty of perjury under the laws of the State of California, I hereby certify that this claim for services complies with all terms and conditions referenced in the Agreement with San Mateo County.

Executed at _____ California, on _____ 20____

Signed _____ Title _____

Agency _____ "

End of Exhibit B-3