APPENDIX B

IFB STATEMENT OF WORK

For

TRANSITION AGE YOUTH DROP-IN CENTERS
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STATEMENT OF WORK (SOW)

1.0 SCOPE OF WORK

Drop-In Centers are designed to be an entry points to the mental health system for Seriously Emotionally Disturbed (SED) and Severe and Persistently Mentally Ill (SPMI) Transition-Age Youth (TAY), ages 16-25, who may be homeless or in unstable living situations. TAY are often experiencing complex trauma as victims of abuse in their homes, streets, and in their communities. The complex trauma may manifest in TAY’s inability to maintain relationships, keep jobs, or stay in school, often putting them at risk of unemployment, school dropouts, incarceration, and homelessness. Without early intervention, TAY are at risk of experiencing mental disorders that may impair their daily activities and functioning.

Drop-In Centers engage and outreach to TAY that are unserved and underserved and provide an environment in which TAY can find temporary safety and basic supports e.g. (showers, meals, clothing, access to computers, social activities, referrals, etc.).

Drop-In Centers will serve TAY that may be exposed to traumatic events or co-occurring disorders in their communities. In order to engage TAY, a trained licensed clinical professional/licensed waivered clinician shall deliver Seeking Safety (SS) groups. These groups will give TAY an opportunity to address risk factors including trauma, alcohol/drug use, rejection from peers/family, and interpersonal conflict/stress. SS groups will target to reduce aforementioned risk factors and increase protective factors of developing safe coping skills, positive peer/family relationships, and community supports.

TAY accessing Drop-In Centers have an opportunity to build trusting relationships with staff, and when ready and willing, connect to needed services and supports to best meet their goals toward stability/recovery.

2.0 ADDITION AND/OR DELETION OF FACILITIES, SPECIFIC TASKS AND/OR WORK HOURS

2.1 Any deviation from the MHSA Master Agreement hereafter referred to as Contract would require written notification from Contractor and shall be subject to written prior approval of DMH Director or his designee.

2.2 All changes must be made in accordance with Section 8.1, Amendments of the Contract.

3.0 QUALITY CONTROL

The Contractor shall establish and utilize a comprehensive Quality Control Plan to assure the County a consistently high level of service throughout the term of the Contract. The Plan shall be submitted to the County Contract Lead for review. The plan shall include, but may not be limited to the following:
3.1 Method of monitoring to ensure that Contract requirements are being met.

3.1.1 Contractor must identify staff responsible for monitoring Contractor’s compliance with all contract terms and performance standards per this Statement of Work.

3.2 A record of all inspections conducted by the Contractor, any corrective action taken, the time a problem was first identified, a clear description of the problem, and the time elapsed between identification and completed corrective action, shall be provided to the County upon request.

3.3 Contractor also agrees to provide access to and the right to monitor all work performed under this Contract, evaluate the quality, ensure, appropriateness and timeliness of services performed, submission of monthly reports and Drop-In Center Services Cost Invoice.

4.0 QUALITY ASSURANCE PLAN

The County will evaluate the Contractor’s performance under this Contract using the quality assurance procedures as defined in the MHSA Master Agreement, Paragraph 8, Standard Terms and Conditions, Paragraph 8.15, County’s Quality Assurance Plan.

4.1 Monitoring Site Visits

Contractor is required to be present during the County or its agent to evaluate Contractor’s performance under this Contract. Such evaluation will include assessing Contractor’s compliance with all terms and performance standards set forth in this Contract.

4.1.1 Contractor MUST identify staff responsible for overseeing and maintaining accurate and complete records of all services provided.

4.2 Data Collection

Contractor shall establish and implement a comprehensive plan to ensure the organization monitors, documents, and reports on required program services provided and that identified measurable performance outcomes according to Exhibit 2 are attained.

4.2.1 Contractor shall meet requirements for the timeliness, accuracy, completeness and consistency.

4.2.2 Contractor must complete and submit the following items to the County Monitoring Manager and his/her designee no later than the 10th of each month following the service month.

4.2.2.1 Appendix C-Attachment I (Monthly Staff Roster)

4.2.2.2 Appendix C-Attachment II (Monthly Program Information and Demographics)
4.2.2.3 Appendix C-Attachment III (Monthly Attendance Names)

4.2.2.4 Appendix C-Attachment IV (Peer Advocate Tracking Log)

4.2.2.5 Appendix C-Attachment V (Employment Specialist Tracking Log)

4.2.2.6 Appendix C-Attachment VI (Seeking Safety Staff Tracking Log)

4.2.2.7 Appendix C-Attachment VII (Seeking Safety Client Tracking Log)

4.3 **Contract Discrepancy Report (SOW Exhibit 1 of Appendix B)**

Verbal notification of a Contract discrepancy will be made to the County’s Monitoring Manager or Contract Lead as soon as possible whenever a Contract discrepancy is identified.

The County Monitoring Manager or Contract Lead will determine whether a formal Contract Discrepancy Report shall be issued. Upon receipt of this document, the Contractor is required to respond in writing to the County Monitoring Manager or Contract Lead within ten (10) workdays, acknowledging the reported discrepancies or presenting contrary evidence. A plan for correction of all deficiencies identified in the Contract Discrepancy Report shall be submitted to the County Monitoring Manager or Contract Lead within ten (10) workdays.

Contractor will further be required to correct the deficiency within 30 calendar days following service of the notice of deficiency, unless the County Monitoring Manager or Contract Lead determines that the deficiency cannot be completely corrected within 30 calendar days. If the date of correcting the deficiency is more than 30 calendar days following the service of the notice of deficiency, Contractor will work with the County Monitoring Manager or Contract Lead to develop a plan that identifies corrective action beginning and completion dates. The problem shall be resolved within a time period mutually agreed upon by the County and the Contractor.

4.4 **County Observations**

In addition to departmental contracting staff, other County personnel may observe performance, activities, and review documents relevant to this Contract at any time during normal business hours. However, these personnel may not unreasonably interfere with the Contractor’s performance.

5.0 **DEFINITIONS**

5.1 CSS- means Community Services and Supports Plan.

5.2 Extended Hours- means in addition to, not in lieu of, agency’s normal business hours funded by non-County funds. Extended hours of access and operation shall include evening and weekends and should total at a minimum of eighteen (18) hours Monday through Friday and a minimum of twelve (12) hours Saturday through Sunday.
5.3 MHSA-means Mental Health Services Act.

5.4 Normal business hours-means at a minimum equal to twenty (20) hours of operation of the Drop-In Center (Monday - Friday). Contractor shall sustain non County resources to fund the Drop-In Center normal business hours.

5.5 O&E- means Outreach and Engagement.

5.6 SA- means Service Area.

5.7 Seeking Safety-means a manualized, present-focused coping skills therapy to help people attain safety from trauma and/or substance abuse.

5.8 Transition Age Youth- means someone between the ages of sixteen and twenty-five.

5.9 Weekday- means Monday through Friday.

5.10 Weekend means Saturday and Sunday.

6.0 RESPONSIBILITIES

The County’s and the Contractor’s responsibilities are as follows:

COUNTY

6.1 Personnel

The County will administer the Contract according to the Contract, Paragraph 6.0, Administration of Contract - County. Specific duties will include:

6.1.1 Monitoring the Contractor’s performance in the daily operation of this Contract.

6.1.2 Providing direction to the Contractor in areas relating to policy, information and procedural requirements.

6.1.3 Preparing Amendments in accordance with the Contract, Paragraph 8. Standard Terms and Conditions, Sub-paragraph 8.1 Amendments.

CONTRACTOR

6.2 Project Manager

6.2.1 Contractor shall provide a full-time Project Manager and designated alternate. County must have access to the Contractor’s Project Manager during regular business hours. Contractor shall provide a telephone number where the Project Manager and alternate may be reached between the hours of 8:00 a.m. and 5:00 p.m., Monday through Friday. The Project Manager or designated alternate shall respond to all contract-related inquiries within twenty-four (24) hours or the next business day.

6.2.2 Project Manager shall act as a central point of contact with the County.
6.2.3 Project Manager and alternate shall have full authority to act for Contractor on all matters relating to the daily operation of the Contract. Project Manager and alternate shall be able to effectively communicate, in English, both orally and in writing.

6.3 Personnel

6.3.1 Contractor shall assign a minimum of five (5) full-time equivalent (FTE) staff in total required during extended hours as defined in Section 5.2, which shall include professionals, paraprofessionals, counselors, mental health workers, and volunteers. Of the five (5) FTE staff:

6.3.1.1 One (1.0 FTE) Peer Support Specialist is required during extended hours to assist TAY, including, but not limited to the following: provide outreach and engagement, accessing services to medical, mental health, economic, legal. In addition, teach basic life skills, coping skills and self-help strategies; and performs related duties as required.

6.3.1.2 One (1.0 FTE) Employment Specialist is required during extended hours to assist TAY with career development/placement, job search, resume preparation, interview coaching; and performs related duties as required.

6.3.1.3 One and half (1.5 FTE) Mental Health clinician and/or Licensed-Waiver professional is required during extended hours to provide SS groups that address and reduce risk factors while increasing skills and supports that promote healthy behaviors and decrease the likelihood that the youth will develop a mental illness.

6.3.1.3.1 Mental Health Clinician and/or Licensed-Waiver professional must be certified and trained to deliver SS.

6.3.1.3.2 Mental Health Clinician and/or Licensed-Waiver professional shall provide (1) one hour of SS groups during Extended Hours.

6.3.1.3.3 Licensed-Waivered professional must be registered by the California Board of Behavioral Science and must be supervised by licensed clinical staff.

6.3.1.3.4 One (1) clinical staff shall be available to respond to clinical urgencies, provide
case management to secure resources for client, family and significant others, during all hours of extended operation.

6.3.2 Contractor shall be required to background check their employees as set forth in sub-paragraph 7.5 – Background and Security Investigations, of the Contract.

6.3.3 Contractor shall ensure their employee are appropriately identified asset for as set forth in sub paragraph 7.4 – Contractor’s Staff Identification, of the Contract.

6.3.4 Contractor shall ensure staff providing services have similar cultural and linguistic backgrounds to those clients being served.

6.4 Materials and Equipment

The purchase of all materials/equipment to provide the needed services is the responsibility of the Contractor. Contractor shall use materials and equipment that are safe for the environment and safe for use by the employee.

6.5 Training

6.5.1 Contractor shall provide training programs for all new employees and continuing in-service training for all employees.

6.5.2 Contractor shall provide mandatory training for all staff as required by Federal and State law, including but not limited to, Health Insurance Portability and Accountability Act (HIPAA) and Sexual Harassment.

6.5.3 Contractor shall ensure that all of Contractors’ staff, including clerical, administrative management, and clinical practitioners receive annual cultural competence training.

6.5.4 Contractor shall document and make available upon request by the Federal, State and/or County the type and number of hours of training provided to employees.

6.5.5 Contractor shall ensure staff be trained and accredited in order to implement Seeking Safety, an Evidence Based Practice. For staff that has had prior training, but may not have been actively practicing the service shall be required to attend a refresher course.

6.6 Contractor’s Office

Contractor shall maintain an administrative office with a telephone in the company’s name where Contractor conducts business when/if different from the proposed Drop In Center site. The office shall be staffed by at least one employee who can respond to inquiries which may be received about the Contractor’s performance of the Contract. When the office is closed, an answering service shall be provided to
6.7 Emergency Medical Treatment

Contractor shall establish and post written procedures describing appropriate action to be taken in the event of a medical emergency. Clients who are provided services hereunder and who require emergency medical care for physical illness or accident shall be transported to an appropriate medical facility. The cost of such transportation as well as the cost of any emergency medical care shall not be a charge to nor reimbursable under this Contract. Contractor shall notify County Monitoring Manager, or his/her designee, within 48 hours concerning the circumstances and status of any client under this Contract receiving emergency medical treatment.

6.8 Disaster and Mass Casualty Plan

Contractor shall post and maintain a Disaster and Mass Casualty Plan of Action in accordance with the California Code of Regulations (CCR) Title 22, Section 80023. Such plan and procedures shall be submitted to DMH’s Contracts Development and Administration Division at least ten days prior to the commencement of services under this Contract.

6.9 Notification of Clinical Events

Contractor shall immediately notify County Monitoring Manager, or his/her designee, upon becoming aware of any clinical event of client provided services hereunder. Notice shall be made by Contractor immediately by telephone and in writing via company letterhead upon learning of such clinical event. The verbal and written notice shall include the name of the client, the client’s identification number, the date of clinical event, a summary of the circumstances thereof, and the name(s) of all Contractor staff with knowledge of the circumstances.

Finally, notification shall be followed by submitting a written Clinical Event Report (CER)/(Notification), Appendix C-Exhibit XI, within 48 hours of the event (DMH Policy No. 303.05) and mail specific report pages as instructed in the CER to the attention of the Medical Director. Managers of the Drop-In Centers shall mail complete CER to Clinical Risk Management (CRM) unit within 30 calendar days of the event.

Clinical events include, but are not limited to:

- Death – Unknown Cause;
- Death – Suspected or Known Cause Other Than Suicide;
- Death – Suspected or Known Suicide;
- Suspected or Known Suicide Attempt Requiring Emergency Medical Treatment (EMT);
- Client Self-Injury Requiring EMT (Not Suicide Attempt);
- Client Injured Another Person Who required EMT;
- Suspected or Alleged Homicide by Client;
- Medication Error;
- Suspected or Alleged Inappropriate Interpersonal Relationship with Client by
Staff;
j. Threat of Legal Action;
k. Client Assault by another Client Requiring EMT;
l. Adverse Drug Reaction Requiring EMT;
m. Alleged Assault by Staff Member to Client; or
n. Inaccurate or Absent Laboratory Data Resulting in a Client Requiring EMT.

CERs or information regarding CERs shall not be emailed or faxed in order to preserve confidentiality and protect relevant privileges.

7.0 HOURS/DAY OF WORK

7.1 Contractor shall provide extended hours of operation for Drop-In Center services. For the purposes of this Contract and SOW, “extended hours” shall mean hours of operation of the Drop-In Center services that are in addition to, not in lieu of, Contractor's normal business hours. Contractor shall have non County funds and resources to sustain the Drop In Center’s normal business hours. Contractor's “Normal Business hours” shall at a minimum equal twenty (20) hours Monday through Friday. Contractors' extended hours of access and operation shall total a minimum eighteen (18) hours Monday through Friday and a minimum of twelve (12) hours Saturday through Sunday. Any deviation from the required minimum extended hours must be requested and explained in writing and will require written approval from the County Monitoring Manager or his/her designee.

7.1.1 The normal and extended hours must be predefined and/or agreed upon with DMH, and be implemented on a consistent basis. Any deviation from the established normal business and minimum required extended hours will require DMH approval.

7.2 Contractor shall not be required to provide services during County recognized holidays.

8.0 WORK SCHEDULES

8.1 Contractor shall complete and submit Appendix C-Attachment X (Hours of Operation Schedule).

8.1.1 Contractor shall adhere to their Drop-In Center's normal business hours and the agreed upon minimum required extended hours work schedule for each facility indicated in Appendix C-Attachment X.

8.1.2 Said work schedules shall be set on an annual calendar identifying both normal business hours and extended hours. Failure to adhere to the agreed upon schedule may constitute a material breach of this Contract, in the sole discretion of the County, upon which the County may suspend or terminate this Contract.
8.2 Contractor shall submit revised schedules when actual performance differs substantially from planned performance. Said revisions shall be submitted to the County Monitoring Manager for review and approval within ten (10) working days prior to changes made to hours. If approved, an Amendment to Contractor’s contract will follow with revised Drop-In Center’s hours of operation.

9.0 UNSCHEDULED WORK

9.1 The County Monitoring Manager or his/her designee may authorize the Contractor to perform unscheduled work, including, but not limited to, repairs and replacements when the need for such work arises out of extraordinary incidents such as vandalism.

9.2 Prior to performing any unscheduled work, the Contractor shall prepare and submit a written description of the work with an estimate of labor and materials. If the unscheduled work exceeds the Contractor’s estimate, the County Monitoring Manager or his/her designee must approve the excess cost. In any case, no unscheduled work shall commence without written authorization.

9.3 When a condition exists wherein there is imminent danger of injury to the public or damage to property, Contractor shall contact County’s Monitoring Manager for approval before beginning the work. A written estimate shall be sent within twenty-four (24) hours for approval. Contractor shall submit an invoice to County’s Monitoring Manager within five (5) working days after completion of the work.

9.4 All unscheduled work shall commence on the established specified date. Contractor shall proceed diligently to complete said work within the time allotted.

10.0 SPECIFIC WORK REQUIREMENTS

10.1 Contractor shall provide services in a Drop-In Center that shall have extended hours of operation:

10.1.1 Contractor shall provide a safe, welcoming and pleasant environment.

10.1.2 Contractor shall provide a facility that meets applicable licensing, community standards, and/or zoning requirements.

10.1.3 Contractor shall provide the following services and supports directly or through linkage, when appropriate, to ensure that youth risk factors are addressed and protective factors strengthened:

1. Youth shall receive a range of basic support services, including but not limited to, clothing, health, showers (warm showers), laundry services, meals, clothing, transportation, life-skills groups, resources on employment, education, housing, legal services, and health; A minimum of 400 unduplicated youth shall receive basic support services per fiscal year.
2. Youth who report mental health symptoms shall be referred and/or linked for mental health assessment and/or appropriate level of care.

3. Youth who report substance abuse shall be referred and/or linked to substance abuse services in order to reduce their alcohol, substance use, and/or risky-behavior.

4. Youth who report being homeless/at-risk of homeless shall be referred and/or linked to permanent, stable, and/or transitional housing.

5. Youth who report being unemployed shall be referred and/or linked to employment services (GAIN, GROW, job readiness training, mock interview, clothing, etc.).

6. Youth who report homeless/at-risk of homeless shall be referred and/or linked to government benefits programs (SSI/SSDI, Cal-Fresh, Cash Assistance Program for Immigrants (CAPI), CalWORKs, General Relief (GR), etc.).

7. Youth who seek supportive services shall be referred and/or linked to peer supports and community resources (peer support specialist to provide, but not limited to: outreach and engagement, advocacy peer support, mentoring, leadership programs, strengthen of interpersonal skills, improve communication skills and self-confidence).

8. Youth who report peer relationship issues shall be referred and/or linked to peer advocacy services.

9. Youth who report experiencing complex trauma shall be referred and/or linked to SS services in order to help attain safety from trauma and/or substance abuse.

10.1.3.1 These services and supports are to include, but are not limited to, basic support services, mental health screenings, counseling, and clinical interventions; community linkages including, but not limited to, accessing physical health care, education, employment (job readiness training), peer supports, counseling centers, substance abuse services, cultural/ethnic and faith-based resources, mentoring and leadership programs;

10.1.4 Contractor shall refer Clients requiring longer term or more intensive interventions to specialty mental health services.
10.1.5 Contractor's Drop-In Center service delivery site shall include a full bathroom (must include shower, toilet and sink with cosmetics) and a washer and dryer available to TAY for their use at no charge during extended hours.

10.1.5.1 Contractor shall provide laundry detergent.

10.1.6 Contractor shall have staff prepare and serve, at minimum one (1) nutritional meal during “extended hours”, Monday through Friday, and, at minimum two (2) nutritional meals on Saturday and Sunday. Meals must meet United States Department of Agriculture (USDA) dietary guidelines.

10.1.6.1 Contractor shall maintain a valid and current Food Manager Certificate and Food Handler card. Contractor shall also ensure that all staff involved in the preparation, storage or service of food at the Drop-In Center must obtain a food handler card.

10.1.7 Contractor shall provide outreach and engagement services to a minimum of five (5) non-branded mental health settings each month. Examples of “non-branded” mental health settings include, but are not limited to: libraries; colleges; schools; faith-based organizations; and other community organizations.

10.1.8 Contractor shall provide all goods and services as described in this Appendix B, SOW at no cost to clients;

10.1.9 Contractor shall Collaborate with DMH TAY Navigation team to ensure that TAY are being linked to the appropriate level of care and ongoing services to meet their specific needs.

11.0 GREEN INITIATIVES

11.1 Contractor shall use reasonable efforts to initiate “green” practices for environmental and energy conservation benefits.

11.2 Contractor shall notify County’s Monitoring Manager of Contractor’s new green initiatives prior to the contract commencement.

12.0 PERFORMANCE REQUIREMENTS SUMMARY

Contractor’s performance will be monitored by County at least once annually during the term of this Contract according to Exhibit 2 (Performance Requirements Summary (PRS) Chart) of Appendix C.

All listings of services used in the Performance Requirements Summary (PRS) are intended to be completely consistent with the Contract and the SOW, and are not meant in any case to create, extend, revise, or expand any obligation of Contractor beyond that defined in the
Contract and the SOW. In any case of apparent inconsistency between services as stated in the Contract and the SOW and this PRS, the meaning apparent in the Contract and the SOW will prevail. If any service seems to be created in this PRS which is not clearly and forthrightly set forth in the Contract and the SOW, that apparent service will be null and void and place no requirement on Contractor.