

BARBARA FERRER, Ph.D., M.P.H., M.Ed.

MUNTU DAVIS, M.D., M.P.H.

ANISH P. MAHAJAN, M.D., M.S., M.P.H.

313 North Figueroa Street, Suite 806 Los Angeles, CA 90012 TEL (213) 288-8117 • FAX (213) 975-1273

www.publichealth.lacounty.gov

May 06, 2025

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

Dear Supervisors:



Holly J. Mitchell Second District Lindsey P. Horvo Third District Janice Hahn

APPROVAL TO EXECUTE AMENDMENTS TO THREE SOLE SOURCE BLACK INFANT HEALTH SERVICES CONTRACTS TO EXTEND THE TERM THROUGH JUNE 30, 2026 (SUPERVISORIAL DISTRICTS 2, 4 and 5) (3 VOTES)

SUBJECT

Request approval to execute amendments to three sole source Black Infant Health services contracts to extend the term effective July 1, 2025, through June 30, 2026, and delegate authority to extend the term up to one year, as needed, through

June 30, 2027, as well as provide an increase or decrease in funding up to 10% above or below the annual base maximum obligation, and update the statement of work, and/or scope of work, as necessary.

IT IS RECOMMENDED THAT THE BOARD:

- 1. Approve and instruct the Director of the Department of Public Health (Public Health), or designee, to execute contract amendments, substantially similar to Exhibit I, to three sole source contracts for the continued provision of Black Infant Health (BIH) services, effective July 1, 2025, through June 30, 2026, at a total maximum obligation of \$3,050,000 as follows: a) Contract Number PH-003175 with The Children's Collective, Inc. (TCC) for \$1,142,000, b) Contract Number PH-003173 with All For Kids Organization (AFK) formerly known as Children's Bureau of Southern California for \$904,000, and, c) Contract Number PH-002924 with City of Pasadena (COP) for \$1,004,000; all fully funded by State General Funds, Federal Title V, Assistance Listing Number (ALN) 93.994 and Federal Title XIX, ALN 93.778, awarded by the California Department of Public Health (CDPH).
- 2. Delegate authority to the Director of Public Health, or designee, to execute amendments that: a)

extend the term up to one additional year through

June 30, 2027, at amounts to be determined by the Director of Public Health based on funding availability; b) provide an increase or decrease in funding up to 10% above or below the annual base maximum obligation effective upon execution or beginning of applicable funding period; c) update the statement of work and/or scope of work, as necessary; and/or correct errors or omissions in the contract's terms and conditions, subject to review and approval by County Counsel, and notification to your Board and the Chief Executive Office (CEO).

- 3. Delegate authority to the Director of Public Health, or designee, to execute change notices to the contracts that authorize modifications to the budget with corresponding modifications to the statement of work and/or scope of work, that are within the same scope of services, as necessary, and changes to hours of operation and/or service locations.
- 4. Delegate authority to the Director of Public Health, or designee, to immediately suspend or terminate the contracts upon issuing a written notice if contractors fail to perform and/or fully comply with contract requirements; and to terminate contracts for convenience by providing a 30-calendar day advance written notice to contractors.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Public Health's BIH program utilizes the California Department of Public Health (CDPH) BIH Program Model to provide services to African American mothers/birthing people who are 18 years of age and older, less than 30 weeks pregnant or up to six months postpartum. The program is a 20-session group intervention (10 sessions prenatally and 10 sessions postpartum) with complementary one-on-one support (case management) designed to be culturally relevant and to help women develop life skills, learn strategies for reducing stress, and build social support. The BIH program aims to improve health among African American mothers and babies and to reduce Black-White disparities by empowering pregnant and parenting African American women and connecting them to important social support programs. This program supports mothers to make healthy choices for themselves, their families, and their communities.

Public Health currently has three contracts to provide BIH services in high priority areas, as follows: a) AFK for services in Los Angeles County (LAC) Service Planning Area (SPA) 1; b) TCC for services in SPA 6; and c) COP for services in SPA 3.

Approval of Recommendation 1 will allow Public Health to execute amendments to extend the term of three sole source BIH contracts to continue the provision of BIH program services to address the problem of poor birth outcomes and health disparities that affect African American mothers/birthing people and their babies.

Approval of Recommendation 2 will allow Public Health to execute amendments to the contracts to extend and increase or decrease funding up to 10% above or below the annual base maximum obligation; update the statement of work and/or scope of work; and/or correct errors or omissions in the contract's terms and conditions, as necessary to meet Public Health, County, and/or, CDPH requirements. Such amendments will only be executed if there is an unanticipated extension of the term of the applicable grant funding. This authority is being requested to enhance Public Health's efforts to expeditiously maximize grant revenue, consistent with Board Policy 4.070: Full Utilization of Grant Funds.

Extension of the three BIH contracts will allow these agencies to continue to provide needed services as Public Health works to release a solicitation for expanded BIH services that align with the revised CDPH mandates for the BIH program. Furthermore, CDPH's allocation for subsequent FYs will be determined by Public Health's ability to reach more African American birthing people.

Approval of Recommendation 3 will allow Public Health to execute change notices to the contracts that authorize budget modifications and corresponding service adjustments, and as necessary, changes to hours of operation and/or service locations.

Approval of Recommendation 4 will allow Public Health to immediately suspend or terminate contracts with contractors who fail to perform and/or fully comply with contract requirements, to terminate contracts for convenience by providing 30-calendar days' advance written termination notice to contractors.

Implementation of Strategic Plan Goals

The recommended actions support North Star 1 of the County's Strategic Plan with focus on Healthy Individuals and Families.

FISCAL IMPACT/FINANCING

The total estimated cost for the three recommended contract extensions for the period effective July 1, 2025, through June 30, 2026, is \$3,050,000, fully offset by State General Funds, Federal Title V, and Federal Title XIX, awarded by CDPH.

There is no net County cost associated with this action.

Funding is included in Public Health's Recommended Budget for fiscal year (FY) 2025-26 and will be included in future FYs, as necessary.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The statewide BIH program began in 1989 to address the alarming number of black infant deaths in the state of California. Even now, health disparities are prevalent in African American communities in LAC. Since 1993, Public Health has contracted with community-based organizations to provide BIH services using the CDPH BIH Program model. Data compiled by the Public Health Maternal, Child and Adolescent Health Division in 2012 demonstrated that the infant mortality rate for African American babies in LAC was twice as high as the overall County rate and that of white babies. Data from 2022 showed that African American babies' infant mortality rate (9.4) remained at over two times the rate of the overall County rate (3.9) and varied greatly across SPAs (13.2 in SPA 1, 7.1 in SPA 6 and 8.7 in SPA 8). Based on an analysis of selected perinatal indicators, high-need priority areas were identified as SPA 1, 6, and 8.

In 2014, CDPH notified all local health jurisdictions (LHJ) that the distribution of BIH funding for the state-wide program would be recalculated to reflect the latest data on African American deaths. As a result, CDPH determined that COP was no longer eligible to directly receive State BIH funds. It was also determined that LAC should include COP as a County contractor to allow for the continued provision of BIH services in Pasadena and the surrounding areas in SPA 3.

In 2022, CDPH began a beta test process related to the BIH group services curriculum that resulted in a revision to the CDPH BIH curriculum that the contractors rolled out in the targeted SPAs as they increased enrollment into the LAC BIH program. This increased services in SPAs 1, 3 and 6, while eliminating services in SPA 8. CDPH allocated BIH services in SPA 8 directly to the City of Long Beach.

In the 2023 CDPH BIH Request for Supplemental Information, LHJs receiving BIH funding were required to expand BIH services to more African American mothers/birthing people. Public Health's expansion plan included establishing a new BIH program site in SPA 2 and increasing the number of program sites from four to six.

As required by Board Policy 5.100, your Board was notified on January 21, 2025, of Public Health's intent to request approval to extend the term of three BIH services contracts as sole source contracts.

County Counsel has reviewed and approved Exhibit I as to use. Attachment A is the Sole Source Checklist signed by the CEO.

CONTRACTING PROCESS

On March 8, 2016, Public Health released an Invitation for Bids (IFB) to solicit BIH services. On August 23, 2016, your Board approved contracts for BIH services in SPA 1, 6 and 8.

For several years, your Board has approved contracting with various entities to provide BIH services in high priority areas in LAC.

On June 6, 2023, the Board approved the extension of Public Health contracts with three agencies to provide BIH services in high priority areas as follows: a) AFK under Contract Number PH-003173 for services in LAC SPA 1; b) TCC under Contract Number PH-003175 for services in SPA 6; and c) COP under Contract Number PH-002924 for services in SPA 3. These contracts are scheduled to end on June 30, 2025.

Public Health is planning to release a solicitation by the year 2026 to align with the BIH program services expansion plan and revised CDPH BIH program requirements. In the meantime, the extension of the three BIH contracts will allow for the continued provision of needed services until new contracts are executed. Furthermore, CDPH's allocation for subsequent FYs will be determined by Public Health's ability to reach this underserved population.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommended actions will allow Public Health to continue the provision of BIH program services in LAC to address the problem of poor birth outcomes and health disparities that affect African American women and their babies.

Respectfully submitted,

Barbara Ferrer, PhD, MPH, MEd

Basa Jene

Director

BF:cv #08059

Enclosures

c: Chief Executive Officer County Counsel Executive Officer, Board of Supervisors

SOLE SOURCE CHECKLIST

Departm	nent i	name:	_ Children's Bureau of Southern California (CB
	New	Sole Source Contract	The Children's Collective, Inc. (TCC) City of Pasadena (COP)
		Source Amendment to Existing Contract Existing Contract First Approved:	for CBS and TCC
	2410	z zwewig comact wet/ pp.orea.	5/19/2015 for COP
Check		JUSTIFICATION FOR SOLE SOURCE	CONTRACTS AND AMENDMENTS
(✓)		Identify applicable justification and provide	documentation for each checked item.
	A	Only one bona fide source (monopoly) for the competition are not available. A monopoly is service in a given market. If more than one sides not exist."	an "Exclusive control of the supply of any
	>	Compliance with applicable statutory and/or	regulatory provisions.
	>	Compliance with State and/or federal progra	mmatic requirements.
	>	Services provided by other public or County-	related entities.
	>	Services are needed to address an emergen	t or related time-sensitive need.
	A	The service provider(s) is required under the requirement.	provisions of a grant or regulatory
	\	Services are needed during the time period replacement services; provided services are expiration of an existing contract which has re-	needed for no more than 12 months from the
	→	Maintenance and support services are needed time to complete a solicitation for a new replacement of the services are needed for no more than 24 more maintenance and support contract which has	acement solution/system; provided the nthe nthe expiration of an existing
	\	Maintenance service agreements exist on ed original equipment manufacturer or an authoriginal equipment manufactur	
	\(\rightarrow\)	It is more cost-effective to obtain services by contract.	exercising an option under an existing
		It is in the best economic interest of the Cour an existing system or infrastructure, adminis learning curve for a new service provider, etc demonstrate due diligence in qualifying the count with the best economic interest of the Count	c.). In such cases, departments must ost-savings or cost-avoidance associated
		<i>Tika Bonilla</i> Chief Executive Office	Date

Amendment No. ___

DEPARTMENT OF PUBLIC HEALTH BLACK INFANT HEALTH SERVICES CONTRACT

THIS AMENDMENT is made and entered into on,						
by and between	COUNTY OF LOS ANGELES (hereafter "County"),					
and	CONTRACTOR NAME (hereafter "Contractor").					

WHEREAS, reference is made to that certain document entitled "BLACK INFANT HEALTH SERVICES CONTRACT", dated_______, and further identified as Contract No. PH-00###, and any Amendments thereto (all hereafter "Contract"); and WHEREAS, on Month XX, 2025, the Board of Supervisors authorized the Director of Public Health, or designee, to execute amendments to the Contract; and WHEREAS, it is the intent of the parties hereto to amend Contract to extend the term of the Contract for one additional year, increase the maximum obligation of County, and make other hereafter designated changes; and

WHEREAS, County has been allocated funds from the State General Funds;

Title V, Maternal and Child Health Services Block Grant, Assistance Listing Number

(ALN) 93.994, and Title XIX, Medical Assistance Program Funds, ALN 93.778, of which a portion has been allocated to the Contract to support the Black Infant Health (BIH) program services; and

WHEREAS, said Contract provides that changes may be made in the form of a written amendment which is formally approved and executed by the parties; and MCAH BIH PH-00####-##

WHEREAS, Contractor warrants that it continues to possess the competence, expertise, and personnel necessary to provide services consistent with the requirements of this Contract.

NOW, THEREFORE, the parties hereto agree as follows:

- 1. This Amendment is hereby incorporated into the original Contract, and all of its terms and conditions, including capitalized terms defined therein, are given full force and effect as if fully set forth herein.
 - 2. This Amendment is effective July 1, 2025.
- 3. Paragraph 2, <u>DESCRIPTION OF SERVICES</u>, Subparagraph A, is deleted in its entirety and replaced as follows:
 - "A. Contractor will provide services in the manner described in Exhibits B -1, B-2, B-3, B-4, B-5, B-6, B-7, B-8, B-9, B-10, B-11.1, B-12, and B-13 (Scopes of Work); attached hereto and incorporated herein by reference."
- 4. Paragraph 2, <u>DESCRIPTION OF SERVICES</u>, Subparagraph D, is deleted in its entirety and replaced as follows:
 - "D. Federal Award Information for this Contract is detailed in Exhibits K, K-1, and K-3, Notice of Federal Subaward Information, attached hereto and incorporated herein by reference."
- 5. Paragraph 3, <u>TERM OF CONTRACT</u>, first Subparagraph, is deleted in its entirety and replaced as follows:

"The term of this Contract is effective September 1, 2016, and continues in full force and effect through June 30, 2026, unless sooner terminated or extended, in whole or in part, as provided in this Contract."

- 6. Paragraph 4, <u>MAXIMUM OBLIGATION OF COUNTY</u>, Subparagraph M, is added to the contract as follows:
 - "M. For the period of July 1, 2025, through June 30, 2026, the maximum obligation of County for all services provided hereunder will not exceed AMOUNT(\$) as set forth in Exhibit C-13, attached hereto and incorporated herein by reference."
- 7. Paragraph 9, <u>CONFIDENTIALITY</u>, Subparagraph A, is deleted in its entirety and replaced as follows:
 - "A. Contractor must maintain the confidentiality of all records and information in accordance with all applicable federal, State, and local laws, rules, regulations, ordinances, directives, guidelines, policies, and procedures relating to confidentiality, including, without limitation, County policies concerning information technology security and the protection of confidential records and information. In the event of a breach, suspected breach, or unlawful use or disclosure of confidential records, Contractor must immediately, no later than 24 hours after discovery, notify the County's Project Manager.
- 8. Exhibit B-13, Scope of Work, attached hereto and incorporated herein by reference, is added to the Contract.
- 9. Exhibit C-13, Budget, attached hereto and incorporated herein by reference, is added to the Contract.
- 10. Exhibit K-3, Notice of Federal Subaward Information, attached hereto and incorporated herein by reference, is added to the Contract.

11. Except for the changes set forth hereinabove, Contract will not be changed in any other respect by this Amendment.

/

/

/

/

/

/

/

/

/

/

/

/

/

/

/

/

/

,

/

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by its Director of Public Health, or designee, and Contractor has caused this Amendment to be subscribed in its behalf by its duly authorized officer, the month, day and year first above written.

By Barbara Ferrer, Ph.D., M.P.H., M.Ed. Director Contractor By Signature Printed Name Title ______ DUNSEL

APPROVED AS TO FORM BY THE OFFICE OF THE COUNTY COUNSEL DAWYN R. HARRISON County Counsel

APPROVED AS TO CONTRACT ADMINISTRATION:

Department of Public Health

By	/ <u> </u>				
-	Contracts	and	Grants	Division	Management

#08059:cv

BIH Scope of Work Description

The Scope of Work (SOW) is a very important document because it contains the deliverables of the contract for which **CONTRACTOR NAME** (**Contractor**) is responsible. The SOW functions as a master plan for the program. The Contractor should become intensely familiar with the SOW to establish, maintain, and implement a thriving BIH Program. The Contractor is encouraged to be creative in the development of their program, which may result in the creation of additional goals and objectives not described herein.

The SOW contains broad statements that describe the objectives of the program, activities that will lead to achieving the objectives, a timeline for accomplishing activities, and methods of evaluation that determine and measure a Contractor's success in establishing a BIH Program. The SOW is organized with the goals at the top, the measurable objectives in the first column, the implementation activities in the second column, the timeline in the third column, and the methods of evaluation in the fourth column. The implementation activities, timeline, and methods of evaluation all support the measurable objective.

- Goals A description of the desired outcomes of the program.
- * Measurable Objectives The process and outcome activities (stated in measurable terms) by which the goals will be accomplished.
- ❖ Implementation Activities The essential actions/steps needed to achieve the objectives.
- Timeline The due date(s) to accomplish each implementation activity.
- Method(s) of Evaluation A description of how the objective will be documented to determine successful achievement of the objective.

The BIH staff and subcontractor(s)/consultant(s) implementing program services are instrumental in managing the SOW objectives and are responsible for the performance of the implementation activities. The SOW is a part of the final contract with the Los Angeles County Department of Public Health and will be monitored for compliance.

The term 'Program Fidelity' is used within the document and it refers to how well an intervention is implemented in comparison with the original program design. Fidelity criteria are necessary to maintain the original program design, and to ensure the program services being implemented are the same across sites. Consequently, the Contractor must ensure all staff and subcontractor(s)/consultant(s) performing BIH services receive a copy of the SOW and become thoroughly familiar with its content.

CDPH reserves the right to modify, reduce or rescind any stated awards if there are eliminations or reductions by the State Budget and/or Federal Title XIX or if the LHJ is unable to implement or meet stated objectives within specified time periods. Allocations will be final only after the Budget Act for each fiscal year is signed as budget appropriations can change each year. All state appropriations are subject to modification or elimination. If the appropriation amount is modified in any fiscal year, the awards will be increased, reduced or eliminated to reflect subsequent changes.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan that is comprised of implementation activities, a timeline and methods of evaluation. Implementation activities are to be completed according to the timeline and are to be documented/evaluated as specified.

Goals

- Empower African American women, build resilience and reduce stress
- Promote healthy behaviors to support health, wellness and relationships
- Promote healthy relationships and enhance bonding and parenting skills
- Connect women with medical, social, economic and mental health services
- Engage African American communities to raise awareness and mobilize community action to support BIH efforts and improve conditions for African American women and their families

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
1.1 The Contractor will maintain qualified staff to conduct a community-based Black Infant Health (BIH) Program that is relevant to African American women, culturally competent and honors the unique history/traditions of people of African American descent. BIH Fidelity Core Element Are efforts made to continually ensure quality staffing of the BIH program?	1.1a Maintain culturally competent staff to perform program services. The staff must possess knowledge, understanding and respect for the values and beliefs of the African American community, and support the BIH governing concepts of: culturally relevant; participant-centered; strength-based; cognitive skill-building.	07/01/25 – 06/30/26	1.1a Maintain on file for each position: current duty statement; recruitment ad/bulletin/flyer(s); employment applications; resumes; rated/scored interview tools; documentation of the position minimum requirements and supporting documents (e.g., I9 Employment Eligibility; Letter of Support (LOS); diploma/official transcript/certificate; a valid CA driver license and auto insurance that remains current while performing program tasks/activities, etc.).
A working definition of cultural competence is "Cultural and linguistic competence is a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations. 'Culture' refers to integrated patterns of human behavior that include the language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups. 'Competence' implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities."	Staff REQUIRED to perform BIH services: Mental Health Specialist (MHS) (2.0 Full Time Equivalent (FTE) – Two (2) staff are responsible for Participant Enrollment and Mental Health Services. Duties include and are not limited to: conducting program orientation in-take; obtaining consent; initiating the first Prenatal and first Postpartum assessments; conducting the EPDS screening; disseminating the GIS to new participants; assigning participants to a FHA; co-leading monthly case conferences; identifying needed mental health resources for participants; conducting quarterly inservice presentations for BIH staff; coordinating duties/tasks with other BIH staff to establish	Hire within 3 months of vacancy	Position Minimum Requirements MHS – Minimum of a Master's Degree in one of the following fields: a) social work, b) counseling, or c) psychology with an emphasis on the family and/or women/children; three (3) years of experience providing direct services to the target population; socio-cultural experience(s) compatible for the target population; excellent oral and written communications; interpersonal skills; critical thinking and problem-solving skills.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	Implementation activities are to be completed according to the timeli IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	interconnected roles that support participants and foster teamwork.		
	Community Outreach Liaison (COL) (2.0 (FTE) – Two (2) staff are responsible for program Outreach, Recruitment and Collaboration activities in the service area. Duties include and are not limited to: developing and implementing a Recruitment Plan (RP) for the service area; designing and executing outreach activities that increase program enrollment, inform the community about Black birth disparities and BIH services; creating a referral network; updating the resource directory; coordinating duties/tasks with other BIH staff to establish interconnected roles that support participants and foster teamwork.	Hire within 3 months of vacancy	COL – Minimum of a Bachelor's Degree in one of the following fields: a) public relations, b) marketing, or c) communications; three (3) years of experience providing information/making presentations to the target population/community; excellent oral and written communications; interpersonal skills; critical thinking and problem-solving skills.
	Group Facilitator (GF) (4.0 FTE) – Four (4) staff are responsible for implementation of Group Services. Duties include and are not limited to: creating the Group Intervention Schedule (GIS); managing logistics for group sessions; co-facilitating the Prenatal (PN) and Postpartum (PP) Group series; documenting participants' engagement in group sessions; researching perinatal/other relevant subjects to enhance group session content and participants' knowledge; distributing client support materials to active group participants, which includes ensuring participants receive a case (qty. 120+) of diapers for completing 7+ PN and/or PP sessions; participating in case conferences to share insights observed during group sessions/individual interactions with participants; coordinating duties/tasks with other BIH staff to establish	Hire within 3 months of vacancy	GF – Minimum of a Bachelor's Degree in one of the following fields: a) women/maternal, child/infant health, b) social work, c) health education, or d) African American Studies; three (3) years of experience providing direct services to the target population; socio-cultural experience(s) compatible for the target population; excellent oral and written communications; interpersonal skills; critical thinking and problem-solving skills.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	interconnected roles that support participants and foster teamwork. Family Health Advocate (FHA) (5.0 FTE) - Five (5) staff are responsible for One-on-One Support Services. Duties include and are not limited to: assisting participants to create goals and develop a Life Plan; initiating follow-up assessments; maintaining monthly contact with participants; making appropriate medical/family supportive	Hire within 3 months of vacancy	FHA – Minimum of a Bachelor's Degree in one of the following fields: a) women/maternal, child/infant health, b) social work, c) health education, or d) human services; three (3) years of experience providing direct services to the target population; socio-cultural experience(s) compatible for the target population; excellent oral and written communications; interpersonal skills; critical thinking and problem-solving skills.
	referrals and following-up to ensure services are accessed; documenting participants' engagement in 1:1 services and program activities; conducting home visits; coordinating duties/tasks with other BIH staff to establish interconnected roles that support participants and foster teamwork. Data Entry Lead (DEL) (1.0 FTE) – One (1) staff is	Hire within 3	DEL – Minimum of an Associate of Arts degree in one of the
	responsible for the ETO Data Management and Administrative/Clerical Activities. Duties include and are not limited to: serving as the data liaison for CDPH BIH EPI and Public Health AA; maintaining accurate logs/documentation for participant transportation, equipment, program supplies and client support materials; word processing; answering phones, maintaining filing systems; coordinating duties/tasks with other BIH staff to establish interconnected roles that support participants and foster teamwork.	months of vacancy	following fields: a) information systems, b) database management, or c) office technology; three (3) years of experience performing data entry/retrieval tasks; three (3) years of experience performing general office duties; excellent communication and interpersonal skills; critical thinking and problem-solving skills.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	Implementation activities are to be completed according to the timeli IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
WILAGONABLE OBJECTIVES			. ,
	Care Giver/Outreach Assistant (CGOA) (2.0 FTE) – Two (2) staff are responsible for implementing Child Watch services and conducting community outreach. Duties include and are not limited to: collaborating with the GFs to establish a safe, sanitized and appropriate room/space for conducting child watch activities; reading books, showing videos and playing music; supervising playtime; recruiting eligible pregnant and postpartum women with the COLs; coordinating duties/tasks with other BIH staff to establish interconnected roles that support participants and foster teamwork.	Hire within 3 months of vacancy	CGOA - Minimum of an Associate of Arts Degree/Certificate in early childhood education; three (3) years of professional child care experience (infants, toddlers, preschoolers); cheerful and friendly personality; ability to build rapport with new parents; patient and empathetic; organized and familiar with childcare best practices including infant care; socio-cultural experience(s) compatible for the target population; excellent communication and interpersonal skills; critical thinking and problem solving skills.
	OPTIONAL additional staff position(s):		
	Program Supervisor (PS) – One (1) staff person will supervise the full implementation of the CDPH BIH Program Group Intervention, One-on-One Support Services and the Efforts to Outcome (ETO) Data System. Duties include and are not limited to: serving as the liaison for CDPH BIH (Program Consultant (PC); Research Analyst (RA)), Public Health BIH & PEI (County Coordinator (CC); PHN; Contract Program Auditor (CPA); Administrative Assistant (AA); Fatherhood Coordinator (FC)); employing leadership skills to cultivate an interconnected team that seamlessly supports BIH participants and works collaboratively together; performing programmatic, administrative and fiscal tasks; hiring/on-boarding qualified staff to fill required staff roles; synthesizing information, analyzing data, writing reports and making presentations; conducting bi-weekly team meetings; developing and	Hire within 3 months of vacancy	PS – Minimum of a Bachelor's Degree in one of the following fields: a) women/maternal, child/infant health, b) public/business administration, or c) a closely related health/social science field; five (5) years management experience including the supervision of 8+ employees; sociocultural experience(s) compatible for the target population; excellent oral and written communications; interpersonal skills; critical thinking and problem-solving skills. Maintain Public Health approval on file.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	. Implementation activities are to be completed according to the timel IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	implementing a BCC to support program goals; collaborating with other organizations/programs to enhance program services and support participants' perinatal experiences.		
	Requirement - The Contractor must obtain approval from the CC and PC before hiring a Program Supervisor.		
	PS Hiring Process The Contractor will submit to the CC a copy of the interview tool that will be used to evaluate applicants for the PS position. The CC will review the tool, provide feedback and approve the tool.		
	After conducting PS interviews, the Contractor will submit to the CC a rated/scored interview tool, a resume, a writing sample (1-page maximum) and a LOS for the candidate they want to hire. The LOS should succinctly detail information the Contractor learned about the candidate during the interview, summarize the top strengths and indicate any challenge(s) that the Contractor will prioritize for staff development/training if the candidate is hired. Additionally, it is strongly recommended that the Contractor conduct reference checks to validate the candidate's job history, experience, knowledge and skills. The CC will review the candidate's information and confer with the Contractor for clarification and/or to request additional information.		
	The CC will forward the candidate's documents/information to the PC to facilitate final approval/denial of the PS candidate.		

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

a timeline and methods of evaluation MEASURABLE OBJECTIVES	n. Implementation activities are to be completed according to the time IMPLEMENTATION ACTIVITIES	ine and are to be docui	nented/evaluated as specified. METHOD(S) OF EVALUATION
MEASURABLE OBJECTIVES	If a PS position is not included in the program budget, the PS duties and position minimum requirements must be fully assumed within the MHS positions, and only one (1) MHS can serve as the Program Supervisor. Project Assistant (PA) – One (1) staff person will assist the PS with program operations, and	Hire within 3 months of	PA – Minimum of a Bachelor's Degree in one of the following fields: a) women/maternal, child/infant health, b) public/business administration or c) marketing; five (5) years
	specifically supervise and implement Outreach, Recruitment and Collaboration activities. Duties include and are not limited to: developing and implementing a RP with the COLs; monitoring and tracking outreach efforts to ensure service goals are achieved; participating regularly as an active member of the AAIMM / SLASB CAT Planning Team; making monthly community presentations in the service area; cultivating, maintaining and documenting collaborative partnerships for resource sharing; designing and executing outreach activities that increase community awareness of Black birth	vacancy	b) publicipusiness administration or c; marketing; five (5) years management experience including the supervision of 4 or more employees; socio-cultural experience(s) compatible for the target population; excellent oral and written communications; interpersonal skills; critical thinking and problem-solving skills.
	disparities and BIH services; and coordinating duties/tasks with other BIH staff to establish interconnected roles that support participants and foster teamwork. If a PA position is not included in the program budget, the duties must be fully assumed by the PS.		

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

	MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
2.1	The Contractor will ensure the Fiscal Manager (FM) and all BIH staff and subcontractor(s) performing program implementation activities are trained on the CDPH-mandated Federal	2.1a Staff/subcontractor(s)/FM will attend the CDPH FFP Program and/or Public Health Time Study training(s).	As scheduled	2.1a Maintain training certificate/documentation in staff/subcontractor(s) personnel files.
	Financial Participation (FFP) Program and the Public Health Automated Time Study Procedures, Health Insurance Portability and Accountability Act (HIPAA) and Title 42 of the Code of Federal Regulations Part 2, as it relates to substance use disorder treatment.	2.1b Contractor will use the CDPH and Public Health training materials to train new staff/subcontractor(s)/FM about the FFP Program and Time Study procedures within the first two (2) weeks of employment.	As needed	2.1b Maintain on file current copies of the CDPH and Public Health training materials. Maintain training certificate/documentation in staff/subcontractor(s) personnel files.
		2.1c As required by Public Health, staff/subcontractor(s) will complete quarterly time study forms for July and October 2025, and January and April 2026. Original forms (signed in blue ink), a staffing roster and time card records for July, October, January and April will be delivered (email, overnight mail or hand delivery) to the CPA no later than the 10 th workday of the following month.	08/14/25 11/14/25 02/13/26 05/14/26	2.1c Maintain on file copies of mail/delivery receipts.
		CPA will review original Time Study forms and return forms to the Contractor for correction. Staff/subcontractor(s) will correct and resubmit forms to the CPA no later than seven (7) calendar days from receipt.	08/31/25 – 06/30/26	Maintain on file copies of corrected quarterly time studies and delivery receipts.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
2.2 The Contractor will ensure all BIH staff/subcontractor(s) performing program implementation activities are trained on the CDPH-mandated Recruitment Procedures,	2.2a Staff/subcontractor(s) will attend CDPH BIH Recruitment, Group Curriculums, 1:1 Support Services and ETO trainings.	As scheduled	2.2a Maintain training certificate/documentation in staff/subcontractor(s) personnel files.
Group Curriculums, One-on-One Support Services and the ETO Data System. Public Health CC will coordinate core intervention training with the CDPH BIH Program Office.	2.2b PS will use the CDPH BIH recruitment strategy, group curriculums, 1:1 support protocol and ETO guidelines to train new staff/subcontractor(s) to deliver BIH services. PS will develop a training schedule for each new hire within the first two (2) weeks of employment to ensure staff/subcontractor(s) are consistently acclimated to BIH Program services, job duties and responsibilities. The training plan will be submitted to the CC for review.	As needed	2.2b Maintain on file current copies of the CDPH BIH group curriculums, 1:1 support services protocol, ETO guidelines, recruitment procedures and Public Health Acknowledgment of Receipt. Maintain training certificate/documentation in staff/subcontractor(s) personnel files.
	PS will complete on-boarding new staff/subcontractor(s) within the first sixty (60) days of their employment. 2.2c Quarterly, the PS will observe the PA, COLs, MHSs, FHAs, DEL and CGOAs in their roles and provide feedback to support staff development. Submit copies of the completed/signed feedback forms to the CC for review.	By 09/15/25 By 12/15/25 By 03/15/26 By 06/05/26	Maintain on file completed performance feedback forms and Public Health Acknowledgment of Receipt.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
2.3 The Contractor will ensure all BIH staff/subcontractor(s) performing program implementation activities attend or receive appropriate staff development/training. Public Health CC will coordinate SIDS and Safe Sleep for Infants Training and Immunizations Training.	2.3a Contractor will ensure staff/subcontractor(s) receive on-going training on perinatal health subjects (e.g., stages of pregnancy; effects of drugs, alcohol and tobacco on pregnancy; postpartum depression; family planning; child safety; nutrition and physical activity; etc.) and other topics (e.g., time management; self-care; intimate partner violence; active listening; basic counseling skills; etc.) that will improve their knowledge, skills and ability to perform program services competently with participants.	As scheduled 2	2.3a Maintain training certificate/documentation in staff/subcontractor(s) personnel files.
	2.3b Staff/subcontractor(s) will attend the Public Health SIDS and Safe Sleep Training.	As scheduled 2	2.3b Maintain on file current Public Health SIDS and Safe Sleep training materials. Maintain training certificate/documentation in staff/subcontractor(s) personnel files.
	2.3c PS will review the SIDS and Safe Sleep Education Form to ensure the form is suitable for documenting 1:1 SIDS education with participants and that FHAs are adept at using the form. Submit form to the Public Health CC for review and approval.	08/01/25 2	2.3c Maintain Public Health approval on file.
	2.3d During 1:1 support, FHAs will educate participants about SIDS and Safe Sleep at the following intervals: during a home visit within two (2) weeks of the infant's birth; during a home visit when the infant is 7 months old.	07/01/25 – 06/30/26	2.3d Maintain an up-to-date/completed SIDS and Safe Sleep Education Form in the participant's file. During the Annual Program Review participant records will be reviewed for compliance.
	At each SIDS and Safe Sleep visit, FHAs will observe the infant's sleeping area and sleeping position to provide the parents/other		

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	care-givers appropriate feedback to reinforce SIDS and Safe Sleep messages, and will document the observations on the participant's SIDS and Safe Sleep Education Form.		
	2.3e PHN will use the Public Health SIDS and Safe Sleep training materials to train new staff/subcontractor(s) within the first sixty (60) days of employment.	As needed	2.3e Maintain training certificate/documentation in staff/subcontractor(s) personnel files.
	2.3f PHN will educate staff/subcontractor(s) and participants about the importance of immunizations.	As needed	2.3f Maintain training certificate/documentation in staff/subcontractor(s) personnel files and participant records.
	2.3g PHN will educate staff/subcontractor(s) and participants about the impact of tobacco use/exposure during the perinatal period.	As needed	2.3g Maintain training certificate/documentation in staff/subcontractor(s) personnel files.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
3.1 The Contractor will increase awareness about African American birth outcomes and BIH Program services by conducting community engagement activities in the service area.	3.1a PA and COLs will review the Recruitment Plan (RP) to ensure it is sufficient for establishing linkages and engagement with African American communities in SA 6. Submit a RP bi-annually to the CC for review and approval. At a minimum include in the RP: 1) a	08/01/25 - 02/06/26	3.1a Maintain on file a Recruitment Plan Binder that contains the Recruitment Plan and Public Health approval.
*CDPH BIH-defined Service Area is the same as Public Health service planning area (SPA) 6. *All flyers/educational materials purchased with BIH funding must have the CDPH BIH logo and include a funding tag line that reads: "Funded by the California Department of Public Health and the Los Angeles County Department of Public Health." *BIH Fidelity Core Element* Are efforts made to establish and maintain community linkages?	description of the way community engagement will be conducted within the service area including guidelines for staff to conduct street/provider/media outreach to recruit eligible women into groups; 2) an elevator speech that contains standardized messages about adverse health outcomes for African American women and babies, a narrative about BIH's emphasis to empower black women and a program description that will attract women to enroll; 3) a policy to follow-up referrals within 48 hours, and making three attempts to contact; 4) a policy to distribute culturally appropriate program brochures, flyers and educational materials; 5) a policy to develop and maintain an up-to-date resource directory/file for staff use; 6) a policy to use the BIH Recruitment Form and the Recruitment Form for Referring Partners.		
	3.1b PA, COLs and CGOAs will implement the RP, enroll African American women in the BIH Recruitment Program and create a participant record (paper/electronic).	07/01/25 – 06/30/26	3.1b Maintain on file participant records (paper/electronic). At the Annual Program Review, participant records will be reviewed to ensure Recruitment Program standards are progressing/achieved.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	Implementation activities are to be completed according to the timel	TIMELINE	METHOD(S) OF EVALUATION
MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	THRELINE	METHOD(S) OF EVALUATION
	3.1c PA and COLs will make a minimum of 5 (minimum) unduplicated community presentations each month in the service area to cultivate and maintain working relationships with the community and collaborative partners.	07/01/25– 06/30/26	3.1c Maintain on file in the Recruitment Plan Binder (by month/year), a synopsis of the community presentation (name of presenter(s); location of the presentation; list of attendees; info presented/topics discussed; follow-up needed; etc.)
	3.1d PA and COLs will create informal and formal partnerships with other programs, agencies and entities to support BIH participants and program services.	07/01/25– 06/30/26	3.1d Maintain on file in the Recruitment Plan Binder, descriptions of informal partnerships and current (within the past two fiscal years) Memorandums of Agreement for formal partnerships.
	3.1e COLs will post program events/activities on the CDPH BIH and AAIMM websites.	07/01/25– 06/30/26	3.1e Maintain on file in the Recruitment Plan Binder copies of emails for posting requests submitted to CDPH BIH and Public Health.
	3.1f PA and COLs will schedule and participate in community engagement activities (e.g., collaborative meetings; community events; etc.) that benefit the participants living in the service area.	07/01/25 – 06/30/26	3.1f Maintain on file in the Recruitment Plan Binder (by month/year), a description of the community engagement activity/event including required documentation.
	Document the staff/subcontractor(s) participating in the activity, the address where the activity takes place and if appropriate, record community participation via signin/attendance sheets or registration list with contact information (phone number or email address or work/home address including zip code).		
	3.1g PS will ensure/solicit a cross-section of 11 community members to serve as BIH Community Council (BCC) members. (BIH	07/01/25 - 06/30/26	3.1g Maintain in the Recruitment Plan Binder, a current BCC roster with contact information (name, organizational affiliation, title, address, phone

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	staff cannot be included in this count.)		number) for each council member.
	3.1h PS will conduct quarterly (minimum) BCC meetings to obtain input and support for program activities, and to work collaboratively to improve African American birth outcomes and family health in the service area.	07/01/25 – 06/30/26	3.1h Maintain in the Recruitment Plan Binder, BCC meeting notices, agendas and minutes.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
4.1 The Contractor will conduct 18 Prenatal and 8 Postpartum Group/One-on-One Support series to serve a minimum of 208 participants (140 women via prenatal group; 68 women via postpartum group).	4.1a MHSs will review the written standardized In-take Procedure and make necessary updates to program/services information. Submit the In-take Procedure to the CC for review.	08/01/25	Maintain on file an up-to-date In-take Procedure and Public Health Acknowledgment of Receipt.
Also, the Contractor can provide 1:1 Support Services for up to 112 (maximum) participants. In total, 320 participants will be served via BIH services.	4.1b MHSs conduct an initial assessment with all new participants and complete required ETO forms. The purpose of the assessment is used to identify the participant's strengths and needs. MHSs will assign a FHA to a participant.	07/01/25 – 06/30/26	4.1b Maintain assessments in the participants' file (paper/electronic). At the Annual Program Review, participant records will be reviewed to ensure established Data Standards are achieved.
BIH Fidelity Core Elements Do participants meet eligibility requirements? Does staff follow enrollment guidelines? Do participants participate in the full intervention? Do group sessions meet structural standards? Do group sessions meet quality of delivery standards? Are efforts made to continue working on quality assurance?	4.1c DEL will enroll eligible African American women into the BIH Services Program. Participant records (paper/electronic) must be arranged/maintained in identical order, contain completed required forms and clearly show regular and consistent interaction with participants. The Contractor must use record-keeping systems that maintain participant information/data confidentially and securely.	07/01/25 – 06/30/26	4.1c Maintain on file up-to-date participant records (paper/electronic). At the Annual Program Review, participant records will be reviewed to ensure the established Services Program Standards are achieved.
	4.1d GFs will create a GIS and submit it quarterly to the AA for review.	07/15/25 10/15/25 01/15/26 04/15/26	4.1d Maintain on file the GISs and Public Health Acknowledgment of Receipt.
	4.1e GFs will implement the group series following the standards set forth in the BIH Group Curriculums, Program Standards, ETO Data Manual and Public Health Scope of Work.	07/01/25 – 06/30/26	4.1e Maintain on file up-to-date participant records, current copies of the BIH Group Curriculums, BIH Program Standards, BIH ETO Data Manual and Public Health Scope of Work. At the Annual Program Review, participant and program records

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	Contractor can hold groups at the program site, and must also secure two (2) other viable meeting locations in the service area to make sure participants have additional accessibility to group services and to ensure the minimum number of groups are implemented. Groups must be held in culturally affirming/aesthetic spaces that comfortably hold 8-12 participants and have dedicated space for child watch. The meeting space must be safe for staff and participants to access and meet regularly. CGOAs will conduct child watch service following professional child care standards. This includes and is not limited to: set-up/clean-up of the designated space for infants and other children; diapering/toileting; at an age appropriate level reading books, showing videos, playing music; supervising playtime and naptime. MHSs and PHN will participate in CDPH BIH-selected group sessions to provide perinatal mental health/medical information. Staff/subcontractor(s) and PHN will encourage participants to attend and to participate fully in group sessions.		will be reviewed to ensure compliance.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	4.1f PS will participate in the Public Health Group Observation Visits (GOV). The CC will observe eight (8) prenatal group sessions and four (4) postpartum group sessions and provide the Contractor feedback to support BIH fidelity efforts.	As scheduled	4.1f Maintain on file by month/year Public Health Group Observation Feedback Forms.
	4.1g With guidance from the PC and/or CC, the Contractor and PS will develop Performance Improvement Plans (PIP) and participate in PIP conference calls with the PC and CC.	As required	4.1g Maintain on file completed PIPs, PC and/or CC Feedback, and Public Health Acknowledgement of Receipt.
	Additionally, Contractor and PS will conduct a mid-year <i>Participant Satisfaction Survey</i> to obtain direct feedback about their experiences receiving BIH Program services. Contractor/PS will develop an action plan to implement new strategies that address participants' expectations and concerns. Submit the action plan to the CC for review.	02/01/26	
4.2 The Contractor will provide One-on-One Support services for all participants.	4.2a FHAs will work collaboratively with participants to assist them to create a Life Plan. The intent of the Life Plan is to help the participant create personal goals that include specific activities/steps for reaching their goals.	07/01/25 – 06/30/26	4.2a Maintain on file participant records (paper/electronic). At the Annual Program Review, participant records will be reviewed to ensure established Program Standards are achieved.
BIH Fidelity Core Elements ➤ Does case management meet structural standards? ➤ Does case management meet quality of delivery standards?	4.2b FHAs one-on-one support includes but is not limited to: coordinating with the GFs to reinforce the weekly group session topic; conducting 1:1 discussions in spaces that provide privacy/confidentiality for the participant; ensuring participants have prenatal/postpartum/pediatric health care;	07/01/25 – 06/30/26	4.2b Maintain on file participant records (paper/electronic) that document the delivery of one-on-one support services. At the Annual Program Review, participant records will be reviewed to ensure established Program Standards are achieved.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	distributing health education literature; providing cessation referrals to participants that smoke; ensuring participants have health insurance; updating the Life Plan; writing case/progress notes; conducting a home visit quarterly; participating in case conferences to share insights from 1:1 interactions; documenting/entering ETO forms; distributing support materials, including doorto-door transportation assistance; coaching participants in-home to complete a safety checklist; assisting participants to create a Birth Plan.		
	4.2c Staff/subcontractor(s) and PHN will provide participants with appropriate referrals that help expand and strengthen the participants' support system. Staff/subcontractor(s) and PHN will document the referrals and follow-up with participants to ensure services are accessed.	07/01/25 – 06/30/26	4.2c Maintain on file participant records (paper/electronic) that document the referrals given to each participant. At the Annual Program Review, participant records will be reviewed.
	4.2d Staff/subcontractor(s) and PHN will refer the participant's husband/partner to the FC (Expecting Fathers Group) and other resources for dads. As applicable, the father's referral(s) will be documented in the participant's file. Staff/subcontractor(s) and PHN will document the fathers' referral(s) in the same location in all participant files.	07/01/25 – 06/30/26	4.2d Maintain on file participant records (paper/electronic) that document the father's referral(s). At the Annual Program Review, participant records will be reviewed.
	4.2e Staff/subcontractor(s) and PHN will refer participants who use illicit drugs, alcohol and/or tobacco products to appropriate treatment programs.	07/01/25 – 06/30/26	4.2e Maintain on file participant records (paper/electronic) that document the referral(s) given to affected participants. At the Annual Program Review, participant records will be

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

	Implementation activities are to be completed according to the time		
MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	Staff/subcontractor(s) and PHN will monitor the participant's effort to eliminate/reduce the risky behavior, provide harm reduction messages, encourage the participant and supply appropriate health education literature. Staff/subcontractor(s) and PHN will document the referrals and follow-up with participants to		reviewed.
	ensure services are accessed. 4.2f As a team, staff will conduct quarterly participant-centered program activities (e.g., workshop; event; etc.) that address one of the following subjects: a) personal development; b) family-strengthening; c) mental health; d) physical health.	By 08/31/25 By 11/30/25 By 02/28/26 By 05/31/26	4.2f Maintain on file by month/year Public Health Acknowledgement of Receipt, activity plans and documentation that identifies the staff who participated in the activity, an activity flyer, pictures of the activity and registration list(s) and sign-in sheet(s).
	PS will submit an activity plan (including costs) to the CPA for review 30 days (minimum) prior to the executing the event.		
4.3 The Contractor will ensure BIH participants have access to mental health resources.	4.3a MHSs will assess participants' EPDS screening, and throughout the participant's enrollment will make appropriate mental health service recommendations/referrals.	07/01/25 – 06/30/26	4.3a Maintain on file participant records (paper/electronic) that document the mental health referral(s) given to affected participants. At the Annual Program Review, participant records will be reviewed.
	4.3b MHSs will conduct short-term basic counseling services and document the participant's file for participants who report/present MILD cases of: non-coping responses to life events; persistent family discord; continual experiences of loss.	07/01/25 – 06/30/26	4.3b Maintain on file participant records (paper/electronic) that document the mental health basic counseling services provided to affected participants. At the Annual Program Review, participant records will be reviewed.

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE METHOD(S) OF EVALUATION
		\ ',
5.1 The Contractor will use the BIH ETO System and enter all participant data for evaluation purposes.	5.1a Contractor will install all necessary computer equipment and software to meet CDPH BIH specifications.	As needed 5.1a At the Contractor's BIH Program site, computer equipment and software is installed and meets the required CDPH specifications.
The Contractor is responsible for submitting program information and data in the format required/requested by CDPH BIH and Public Health. Public Health will provide a format for the monthly Invoice and Program Narrative/Data	DEL/staff/subcontractor(s)/PHN will enter, update and maintain participant data ONLY in the ETO data system.	07/01/25 – 06/30/26 5.1b At the Annual Program Review, data entered in ETO will be reviewed and compared to data collected from the participant (paper record) to ensure accuracy and completeness.
format for the monthly Invoice and Program Narrative/Data Report.	5.1c As specified by Public Health, no later than the 15th of the month Contractor will submit the monthly Program Narrative/Data Report and monthly Invoice (reimbursement claim).	

Exhibit B-##

Black Infant Health Program (BIH) Program Services Scope of Work July 1, 2025 through June 30, 2026

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
6.1 Throughout the term of this agreement, Maintain communication and program coordination with Public Health, CDPH BIH Program Office and other stakeholders to maximize program effectiveness and to ensure fidelity in the BIH Program.	6.1a PS and PA will attend the monthly Public Health PS Team Meeting hosted by the CC, and in rotation, host a meeting at BIH's Contractor's program site. (In the absence of the PS or PA, a MHS will be the proxy.) The Contractor will ensure the PS and PA attend 80% of the scheduled Team Meetings.	08/01/25 – 05/31/26	6.1a At the time of the Annual Program Review, the PS Team Meeting sign-in sheets/minutes will be reviewed to ensure compliance with attendance/participation in PS Team Meetings.
	6.1b Contractor will ensure all budgeted BIH staff/subcontractor(s) attend other CDPH and Public Health BIH mandatory/required trainings and meetings (e.g., BIH Annual Meeting; PAC activities (Black Joy Parade; KJLH Women's Health Expo); program/role-specific training; conference calls; focus groups; listening sessions; etc.).	07/01/25 – 06/30/26	6.1b Meeting registration, sign-in sheets and minutes will be reviewed to ensure compliance.

BUDGET

CONTRACTOR BLACK INFANT HEALTH SERVICES

	Budget Period July 1, 2025 through June 30, 2026
Full-Time Salaries	\$
Employee Benefits @ %	\$
Total Full-Time Salaries and Employee Benefits	\$
Part-Time Salaries	\$
Employee Benefits @ %	\$
Total Part-Time Salaries and Employee Benefits	\$
Total Salaries and Employee Benefits	\$
Operating Expenses	\$
Other	\$
Indirect Cost @ % of Salaries	\$
TOTAL PROGRAM BUDGET	\$