

APPENDIX A – SAMPLE WORK ORDER

EXHIBITS

A) STATEMENT OF WORK (SOW)

- 1) SOW Attachment A – Temporary Personnel Classifications
- 2) SOW Attachment B – Fiscal Provisions
- 3) SOW Attachment B-1 Invoice Template
- 4) SOW Attachment C – Temporary Personnel Services Request Form
- 5) SOW Attachment D – Work Order Discrepancy Report
- 6) SOW Attachment E – Work Order Administration

FORMS REQUIRED AT THE TIME OF WORK ORDER EXECUTION

- G) SAFELY SURRENDERED BABY LAW
- H) INTENTIONALLY OMITTED
- I) INTENTIONALLY OMITTED
- J) CHARITABLE CONTRIBUTIONS CERTIFICATION
- K) INFORMATION SECURITY AND PRIVACY REQUIREMENTS

**Appendix A – Sample Work Order 2
SAMHSA EMERGENCY RESPONSE GRANT**

**AS-NEEDED PSYCHIATRY SERVICES MASTER AGREEMENT
MH (insert MA #)**

WORK ORDER NO. XXXX

Project Title: Temporary Personnel Services – SAMHSA Emergency Response Grant (SERG)

Contractor: (Insert Contractor Name)

I. RECITALS

WHEREAS, on (insert effective date of MA) the County of Los Angeles (LAC or County) on behalf of its Department of Mental Health (DMH) and (insert Contractor Name) (Contractor) entered into an As-Needed Psychiatry Services Master Agreement (hereafter Master Agreement) (insert MHXXXXXX); and

WHEREAS, on (insert amendment date) County on behalf of its DMH and (insert Contractor Name) (Contractor) amended Master Agreement (insert MHXXXX) to add temporary personnel classifications; and

WHEREAS, the County has determined that by entering into this Work Order (WO) it is not only able to better provide services for the County's intended target population, but also provide a better system to deliver seamless service to those clientele.

NOW THEREFORE, in consideration of the mutual covenants contained herein, and for good and valuable consideration, the parties agree to the following:

II. WORK

The Contractor will satisfactorily provide Temporary Personnel Services which includes the management of all personnel-related activities such as recruitment, hiring, administering payroll and benefits, acting as a fiscal intermediary and support the staffing requirements set forth in this Temporary Personnel Services – SERG WO.

III. TERM

The WO is effective [date of execution], 20XX through 06/15/2026, unless sooner extended or terminated.

IV. AMENDMENT

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Pursuant to Paragraph 8.1, (Amendments) of the Master Agreement, for any change that affects the SOW, term, payment, or any terms and conditions of the Master Agreement and/or this WO, a written amendment will be prepared and executed by the Contractor and by the Director of LACDMH or her designee.

V. PAYMENT

The County will pay the Contractor for all services provided under this WO in accordance with Sub-Paragraph 5.4, Invoices and Payments, of the Master Agreement and Appendix A (Sample Work Order Exhibits) Attachment B (Fiscal Provisions).

The Contractor's funding amounts will remain firm and fixed for the term of the WO unless otherwise amended by both parties.

Any increase in funding shall be at the County's sole discretion and implemented through a written amendment to this WO.

All invoices under this WO shall be submitted to the following:

Cesar Franco, HPA II
County of Los Angeles – Department of Mental Health
510 S. Vermont Avenue
Los Angeles, CA 90020
E-mail: CFranco@dmh.lacounty.gov

The Contractor must retain receipts and supporting documentation for all expenses included on monthly invoices and make such records available to the County upon request. The Contractor will not be entitled to any compensation whatsoever for any service or other work that is not specified in this WO, and/or goes beyond the expiration date of this WO.

The Contractor will have a cost accounting method that accurately reflects allowable cost allocations for actual services under this WO. The Contractor will reference the Department of Auditor Controller, Contract Accounting and Administration Handbook to establish accounting, internal control, financial reporting and contract administration standards. The handbook can be downloaded at. [AC Contract Accounting and Administration Handbook - June 2021 \(lacounty.gov\)](#)

VI. ADMINISTRATION OF WORK ORDER

See SOW, Attachment E, Work Order Administration

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The Contractor’s signature on this Work Order document confirms the Contractor’s agreement with all provisions of the Work Order. All terms of the Master Agreement shall remain in full force and effect. The terms of the Master Agreement shall govern and take precedence over any conflicting terms and/or conditions in this Work Order, regardless of any oral promise made to the Contractor by any County personnel whatsoever.

<u> [Insert Contractor Name] </u> Contractor	<u> Department of Mental Health </u> County
By: _____ Signature	By: _____ Signature
Name: _____	Name: <u>Lisa H. Wong, Psy.D.</u>
Title: _____	Title: <u>Director</u>
Date: _____	Date: _____