



STATE OF NEW HAMPSHIRE
DEPARTMENT OF MILITARY AFFAIRS AND VETERANS SERVICES

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BUSINESS ADMINISTRATION
STATE MILITARY RESERVATION
4 PEMBROKE ROAD
CONCORD, NEW HAMPSHIRE 03301-5652

David J. Mikolaities, Major General
The Adjutant General

Warren M. Perry
Deputy Adjutant General

Phone: 603-225-1360
Fax: 603-225-1341
TDD Access: 1-800-735-2964

May 15, 2024

His Excellency Governor Christopher T. Sununu
and the Honorable Executive Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Military Affairs and Veterans Services Division of Community Based Military Programs to enter into a contract agreement with Partnership for Public Health Inc. (VC #165635), Laconia, NH in the amount of \$88,000.00 to build, facilitate, and support regional Veteran suicide prevention coalitions across the state effective upon Governor and Council approval through June 30, 2025.
100% General Funds.

Funding is available in account, Veterans Services Mental Health and Social Isolation, as follows:

	<u>FY 2024</u>
02-12-12-120010-32520000-102-500731 – Contracts for Program Services	\$88,000.00

EXPLANATION

Under this contract Partnership for Public Health will provide services to continue efforts to build, support, and facilitate regional suicide prevention coalitions among the thirteen (13) Regional Public Health Networks across the state supporting access to mental health services and increasing awareness on resources and benefits earned across a range of other service and support including facilitating transitioning Service Members, linkages with NH Veteran-Friendly Business, physical well-being, and military skills transfer, licensing, certification and education for NH military, Veterans and family members utilizing a collaborative community-centered approach among community partners and organizations.

The Department of Military Affairs and Veterans Services solicited for services to support New Hampshire's military/Veterans access to mental health services by placing a Request for Proposal on the State of New Hampshire Bureau of Purchase and Property website. Three bids were received prior to the bid closing time, and all were considered qualified. Partnership for Public Health, Inc. was awarded this contract (contingent upon Governor and Council approval) based upon the specific deliverables outlined in its proposal focusing upon Together With Veterans Program guiding principles and suicide prevention best practices approach of

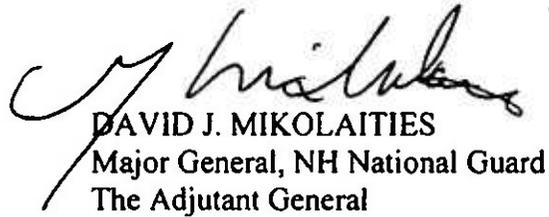
His Excellency, Governor Christopher T. Sununu
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May 15, 2024
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utilizing regional suicide prevention coalitions to support community collaboration, training, and education to strengthen the suicide prevention network for Veterans and to reduce Veteran suicide.

If funding for this contract is not approved by the Governor and Council, the eight (8) active Veteran Suicide Prevention Coalitions will not receive funding and support from Partnership for Public Health, Inc. This will result in the activities of engaging, creating, and supporting Veterans Suicide Prevention Coalitions having limited means to progress with future efforts to support Veteran suicide prevention efforts.

This contract has been approved for form, substance, and execution by the Attorney General's Office.

Respectfully submitted,



DAVID J. MIKOLAITIES
Major General, NH National Guard
The Adjutant General

RFP DMAVS 2024-02 ACCESS TO MENTAL HEALTH SERVICES

Rating Panel Background Information

Rating Panel Members:

Katherine Cox, MSW – Suicide Prevention Coordinator, Division for Behavioral Health, NH Department of Health and Human Services. Coordinates statewide suicide prevention initiatives and evaluator for the state suicide prevention plan. Oversees the NH 988 Lifeline System. 2018-present Member of National Military Family Association, 2018- present Member of Collaborative Family Health Care Association, 2015-present member National Association of Social Work. Master's Degree, Social Work, University of New Hampshire.

Loren Gebo, LICSW - Acting Chief of Mental Health, Manchester VA Medical Center. Has 19 years of post graduate experience working in mental health. Has been employed by the VA since 2009 with a focus on suicide prevention, mental health, justice involved Veterans and has held multiple leadership positions within the VA. Previous to the VA, worked in community mental health. MSW from UNH in 2005.

COL Richard Oberman – is an Army Nurse Corps Officer currently serving as State Surgeon and Deputy Director Joint Staff (J9), NH National Guard, with over 36 years in Army Medicine. He volunteers as a Paramedic with Bow Fire Department and spent over 20 years as the volunteer Chief of the Penacook Rescue Squad. Graduate of the U.S. Naval War College with a Masters in National Security and Strategic Studies, and holds a Bachelor of Science degree in Nursing from Jacksonville University.

Rating Panel Moderator:

Brenton Fraser – Director, Division of Community Based Military Programs, NH Department of Military Affairs and Veterans Services. Graduate of the U.S. Naval War College; Graduate Joint Forces Staff College, National Defense University; Bachelor of Science, Business Administration, University of New Hampshire with over 25 years Active Duty in the Army and 6 plus years as Department of Army Civilian.

SCORECARD: DMAVS RFP 2024-02	Vendor 1 Easterseals NH	Vendor 2 Harbor Care	Vendor 3 Partnership for Public Health NH
Company Profile (15 points) Company Stability (1 pt for each year in business up to 5); Staff Qualifications (training, degrees, 1-5 pts) and mission and value align with purpose of the RFP	13	14	12
Project Understanding (25 points) Overall comprehension of Project Objective (1-5 pts); Understanding of Project Requirements (1-5 pts); overall need for the services proposed (1-5 pts); Understanding of needs of military and veterans in NH (1-5); Experience with similar projects (1-5 pts)	24	19	15
Ability to Meet Deliverables (30 points) Availability (availability to provide services within project timelines receive 10 pts); Optional Deliverables (as outlined, must include "enhance access to mental/behavioral health services - scale 1-10 pts); Required Deliverables (as outlined, data and reports demonstrating outcomes are a required deliverable. 10 pts for ack and identify how/when deliverable will be met)	26	23	19
Implement Plan (25 points) Events and Activities (clearly align with desired outcome and are realistic given funds and timeline, Scale 1-5); Outreach/Enrollment (reasonable effective plan for promoting the services and engaging/enrolling military/Veterans, Scale 1-5); Level of Available Staffing (adequate level of staffing to ensure time completion, Scale 1-5); Community Partnerships (Plan for establishing partnerships to implement program, potentially sustain after contract, Scale 1-5 pts); Sustainability (Consideration for sustainability considered or is clearly and reasonably not applicable, Scale 1-5 pts)	22	18	18
Assessment and Evaluation (20 points) Evaluation Plan (clearly described plan for assessing and evaluating outcomes, Scale 1-10 pts); Reporting (A clear plan for how/when outcomes will be reported to DMAVS, 1-10 pts)	10	18	11
Technical Proposal Maximum Points	95	92	75
Price Proposal Maximum Points	7.167	7.167	10
Total Maximum Points	102.167	99.167	85
RATING OF SELECTED VENDORS	1	3	2

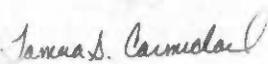
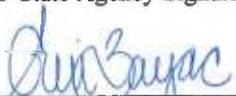
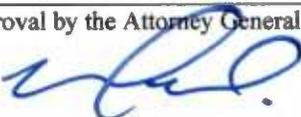
Notice: This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

AGREEMENT

The State of New Hampshire and the Contractor hereby mutually agree as follows:

GENERAL PROVISIONS

1. IDENTIFICATION.

1.1 State Agency Name New Hampshire Department of Military Affairs and Veterans Services		1.2 State Agency Address 4 Pembroke Road Concord, NH 03301	
1.3 Contractor Name Partnership for Public Health		1.4 Contractor Address 67 Water Street, Suite 105 Laconia, NH 03246	
1.5 Contractor Phone Number 603-707-5869	1.6 Account Unit and Class 010-012-32520000-102-500731	1.7 Completion Date 6/30/2025	1.8 Price Limitation Not to Exceed \$88,000.00
1.9 Contracting Officer for State Agency Erin M. Zayac, Administrator of Business Operations		1.10 State Agency Telephone Number (603) 225-1361	
1.11 Contractor Signature  Date: 4.8.2024		1.12 Name and Title of Contractor Signatory Tamera Carmichael, Executive Director	
1.13 State Agency Signature  Date: 4/11/24		1.14 Name and Title of State Agency Signatory Erin M. Zayac, Administrator of Business Operations	
1.15 Approval by the N.H. Department of Administration, Division of Personnel (if applicable) By: _____ Director, On: _____			
1.16 Approval by the Attorney General (Form, Substance and Execution) (if applicable) By:  On: 05/21/2024			
1.17 Approval by the Governor and Executive Council (if applicable) G&C Item number: _____ G&C Meeting Date: _____			

2. SERVICES TO BE PERFORMED. The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT B which is incorporated herein by reference ("Services").

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.13 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed.

3.3 Contractor must complete all Services by the Completion Date specified in block 1.7.

4. CONDITIONAL NATURE OF AGREEMENT.

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds. In no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds by any state or federal legislative or executive action that reduces, eliminates or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope for Services provided in EXHIBIT B, in whole or in part, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to reduce or terminate the Services under this Agreement immediately upon giving the Contractor notice of such reduction or termination. The State shall not be required to transfer funds from any other account or source to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT C which is incorporated herein by reference.

5.2 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8. The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance

hereof, and shall be the only and the complete compensation to the Contractor for the Services.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 The State's liability under this Agreement shall be limited to monetary damages not to exceed the total fees paid. The Contractor agrees that it has an adequate remedy at law for any breach of this Agreement by the State and hereby waives any right to specific performance or other equitable remedies against the State.

6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/EQUAL EMPLOYMENT OPPORTUNITY.

6.1 In connection with the performance of the Services, the Contractor shall comply with all applicable statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal employment opportunity laws and the Governor's order on Respect and Civility in the Workplace, Executive order 2020-01. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of age, sex, sexual orientation, race, color, marital status, physical or mental disability, religious creed, national origin, gender identity, or gender expression, and will take affirmative action to prevent such discrimination, unless exempt by state or federal law. The Contractor shall ensure any subcontractors comply with these nondiscrimination requirements.

6.3 No payments or transfers of value by Contractor or its representatives in connection with this Agreement have or shall be made which have the purpose or effect of public or commercial bribery, or acceptance of or acquiescence in extortion, kickbacks, or other unlawful or improper means of obtaining business.

6.4. The Contractor agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with this Agreement and all rules, regulations and orders pertaining to the covenants, terms and conditions of this Agreement.

7. PERSONNEL.

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 The Contracting Officer specified in block 1.9, or any successor, shall be the State's point of contact pertaining to this Agreement.

8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

8.1.1 failure to perform the Services satisfactorily or on schedule;

8.1.2 failure to submit any report required hereunder; and/or

8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) calendar days from the date of the notice; and if the Event of Default is not timely cured, terminate this Agreement, effective two (2) calendar days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 give the Contractor a written notice specifying the Event of Default and set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 give the Contractor a written notice specifying the Event of Default, treat the Agreement as breached, terminate the Agreement and pursue any of its remedies at law or in equity, or both.

9. TERMINATION.

9.1 Notwithstanding paragraph 8, the State may, at its sole discretion, terminate the Agreement for any reason, in whole or in part, by thirty (30) calendar days written notice to the Contractor that the State is exercising its option to terminate the Agreement.

9.2 In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall, at the State's discretion, deliver to the Contracting Officer, not later than fifteen (15) calendar days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. In addition, at the State's discretion, the Contractor shall, within fifteen (15) calendar days of notice of early termination, develop and submit to the State a transition plan for Services under the Agreement.

10. PROPERTY OWNERSHIP/DISCLOSURE.

10.1 As used in this Agreement, the word "Property" shall mean all data, information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

10.2 All data and any Property which has been received from the State, or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

10.3 Disclosure of data, information and other records shall be governed by N.H. RSA chapter 91-A and/or other applicable law. Disclosure requires prior written approval of the State.

11. **CONTRACTOR'S RELATION TO THE STATE.** In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

12.1 Contractor shall provide the State written notice at least fifteen (15) calendar days before any proposed assignment, delegation, or other transfer of any interest in this Agreement. No such assignment, delegation, or other transfer shall be effective without the written consent of the State.

12.2 For purposes of paragraph 12, a Change of Control shall constitute assignment. "Change of Control" means (a) merger, consolidation, or a transaction or series of related transactions in which a third party, together with its affiliates, becomes the direct or indirect owner of fifty percent (50%) or more of the voting shares or similar equity interests, or combined voting power of the Contractor, or (b) the sale of all or substantially all of the assets of the Contractor.

12.3 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State.

12.4 The State is entitled to copies of all subcontracts and assignment agreements and shall not be bound by any provisions contained in a subcontract or an assignment agreement to which it is not a party.

13. **INDEMNIFICATION.** The Contractor shall indemnify, defend, and hold harmless the State, its officers, and employees from and against all actions, claims, damages, demands, judgments, fines, liabilities, losses, and other expenses, including, without limitation, reasonable attorneys' fees, arising out of or relating to this Agreement directly or indirectly arising from death, personal injury, property damage, intellectual property infringement, or other claims asserted against the State, its officers, or employees caused by the acts or omissions of negligence, reckless or willful misconduct, or fraud by the Contractor, its employees, agents, or subcontractors. The State shall not be liable for any costs incurred by the Contractor arising under this paragraph 13. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the State's sovereign immunity, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

14. INSURANCE.

14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate or excess; and

14.1.2 special cause of loss coverage form covering all Property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the Property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or any successor, a certificate(s) of insurance for all insurance required under this Agreement. At the request of the Contracting Officer, or any successor, the Contractor shall provide certificate(s) of insurance for all renewal(s) of insurance required under this Agreement. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

15. WORKERS' COMPENSATION.

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A ("*Workers' Compensation*").

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. The Contractor shall furnish the Contracting Officer identified in block 1.9, or any successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

16. **WAIVER OF BREACH.** A State's failure to enforce its rights with respect to any single or continuing breach of this Agreement shall not act as a waiver of the right of the State to later enforce any such rights or to enforce any other or any subsequent breach.

17. **NOTICE.** Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

18. **AMENDMENT.** This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no such approval is required under the circumstances pursuant to State law, rule or policy.

19. CHOICE OF LAW AND FORUM.

19.1 This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire except where the Federal supremacy clause requires otherwise. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.

19.2 Any actions arising out of this Agreement, including the breach or alleged breach thereof, may not be submitted to binding arbitration, but must, instead, be brought and maintained in the Merrimack County Superior Court of New Hampshire which shall have exclusive jurisdiction thereof.

20. **CONFLICTING TERMS.** In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and any other portion of this Agreement including any attachments thereto, the terms of the P-37 (as modified in EXHIBIT A) shall control.

21. **THIRD PARTIES.** This Agreement is being entered into for the sole benefit of the parties hereto, and nothing herein, express or implied, is intended to or will confer any legal or equitable right, benefit, or remedy of any nature upon any other person.

22. **HEADINGS.** The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

23. **SPECIAL PROVISIONS.** Additional or modifying provisions set forth in the attached EXHIBIT A are incorporated herein by reference.

24. **FURTHER ASSURANCES.** The Contractor, along with its agents and affiliates, shall, at its own cost and expense, execute any additional documents and take such further actions as may be reasonably required to carry out the provisions of this Agreement and give effect to the transactions contemplated hereby.

25. **SEVERABILITY.** In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

26. **ENTIRE AGREEMENT.** This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties, and supersedes all prior agreements and understandings with respect to the subject matter hereof.

**STATE OF NEW HAMPSHIRE
DEPARTMENT OF MILITARY AFFAIRS AND VETERANS SERVICES**

**EXHIBIT A
SPECIAL PROVISIONS**

SUBJECT: Access to Mental Health Services

The following special provisions modify, change, delete, or add to the General Provisions of the agreement. Where any part of the General Provisions is modified or voided by these Special Provisions, the unaltered provisions for that part shall remain in effect.

1. The term "Contracting Officer" as used in this agreement shall mean the State's Contracting Officer as is specified at item# 1.9 of the General Provisions of this agreement or his/her authorized representative. No individual shall be an authorized representative of the Contracting Officer unless he or she is so appointed in writing by the Contracting Officer, in which case such written appointment shall be provided to the Contractor.
2. The Contractor shall be responsible to correct, at their own cost and expense, defective work, or damaged property when defects and damage are caused by the Contractor's employees, equipment, or supplies. The Contracting Officer may withhold all, or part of, payments due to the Contractor until defective work or damaged property caused by the Contractor, their employees, equipment, or materials, is placed in satisfactory condition.
3. **Provision 10. DATA: ACCESS; CONFIDENTIALITY; PRESERVATION:** Add the following sub-part:
 - a. 10.4 Between the Effective Date and three (3) years after the Completion Date, as often as the State Government shall demand, the Contractor shall make available for audit purposes, all records that pertain to this Agreement. Upon demand, the contractor shall provide copies of such documents which may include invoices, payrolls, records of personnel, and other information relating to all matters covered in this agreement.

**STATE OF NEW HAMPSHIRE
DEPARTMENT OF MILITARY AFFAIRS AND VETERANS SERVICES**

**EXHIBIT B
SCOPE OF SERVICES**

SUBJECT: Access to Mental Health Services

Previous contracting efforts with NH Department of Military Affairs and Veterans Services (DMAVS) and Partnership for Public Health (PPH) New Hampshire allowed for seven (7) NH Veteran Suicide Prevention Coalitions to be stood up utilizing the Together with Veterans Program (TWV). Currently there are eight (8) active Veteran Suicide Prevention Coalitions to support NH Service Members and Veterans that PPH has achieved utilizing the TWV Program. Partnership for Public Health New Hampshire (PPH) is to continue their efforts to build, support, and facilitate regional suicide prevention coalitions among the thirteen (13) Regional Public Health Networks (RPHNs) across the state supporting access to mental health services for NH military and Veterans.

Requirements:

1. Coalitions will receive and appropriately manage program implementation funds.
 - a. Entity can be local public health network / existing organization, or the community may form its own independent organization.
 - b. Entity recognizes and authorizes Steering Committee to make documented determinations about how funds will be used to support programming. This information will be reported to DMAVS to inform the Agency of the regional areas approach to improve access to mental health services and identify potential additional actions/needs to assist military members/Veterans.
2. Coalitions follow the TWV team requirement of membership consisting of Veterans, behavioral health and/or health care partners, and community partners who work with and support Veterans (to include local businesses, higher education institutions, housing and employment services, churches and faith organizations, law enforcement, hospitals, and first responders).
3. All coalition meetings will be facilitated by RPHN or local organization personnel.
4. Build coalition membership and broaden coalition representation by inviting and including appropriate community partners and holding regular scheduled meetings.
 - a. Community partners include: SMVF, first responders, state/local government, behavioral health, healthcare, religious/fraternal organizations, Veterans Affairs Community Based Outpatient Clinics, and other Veteran serving organizations.
5. Invite DMAVS to, at a minimum, one scheduled coalition meeting in each of the RPHNs.
6. Ensure training of TWV Community-Based Suicide Prevention Strategies to coalition teams as defined in TWV Rural Veteran Suicide Prevention Program Toolkit. Together with Veterans Toolkit (va.gov).

7. Utilize assessment results and community-based suicide prevention strategies to develop a Veteran suicide prevention action plan and to review the plan on annual basis to adjust actions/activities as needed.
8. Provide outreach and awareness of Veteran resources and support services through a peer-to-peer model at community events and presentations, focusing on NH's "Strong as Granite" platform, DMAVS resources, U.S. Department of Veterans Affairs resources, and other community resources.
9. Track activities, progress on goals, and reflections on process improvement (what is going well, challenges, next steps, etc.).

PPH will utilize its experience with the TWV Program and support the continued growth of the Veteran Suicide Prevention Coalitions to improve access to mental health services for Veterans and military members.

TWV is funded by the Veterans Administration Office of Rural Health, supported by the Office of Mental Health and Suicide Prevention, and carried out via collaboration between the Rocky Mountain Mental Illness Research, Education and Clinical Center (MIRECC) for Suicide Prevention, the Western Interstate Commission for Higher Education Behavioral Health Program (WICHE BHP), local Veterans, and other community stakeholders.

TWV aligns activities and community strategies with its guiding principles and five suicide prevention best practices:

Guiding Principles of TWV:

Veteran Driven

- Veterans provide permission and work together to implement TWV in their community.
- Veterans provide leadership to guide the TWV process.

Collaborative

- Community partners play a key role in successfully supporting Veterans and their families.
- Informed and educated community partners are better equipped to address the needs of Veterans.
- Collaboration and education will strengthen the suicide prevention network for Veterans, their families, and friends.

Evidence-Informed

- TWV strategies are drawn from well-researched models that have been shown to effectively reduce suicide.

Community-Centered

- TWV partnerships develop a unique suicide prevention action plan based on community strengths and addressing community needs.
- TWV action plans are reviewed and revised as needed to promote success.

TWV aligns community strategies with five suicide prevention best practices:

- *Reduce Stigma and Promote Help-Seeking*
- *Promote Lethal Means Safety*
- *Provide Individual Suicide Prevention Training*

- *Enhance Primary Care Suicide Prevention*
- *Improve Access to Quality Care*

Reporting

PPH will be responsible for submitting monthly reports to DMAVS detailing coalition activities, efforts, and number of military/Veterans participants. Collaborations among the organizations and community partners will be reported, along with any training and/or educational supports/initiatives on behalf of the coalitions.

Monthly Reports to be shared to DMAVS will include the following information:

- a. Meetings:
 - Date/Location/Duration
 - Purpose/Strategies addressed;
 - Attendance by member type;
 - Other attendance by group designation;
 - Materials distributed;
 - Additional notes.
- b. Events held or contributed to by coalition:
 - Event name
 - Event Date/Location/Duration;
 - Strategies Addressed;
 - Other attendance by group designation;
 - Materials distributed.
- c. Training held or coordinated:
 - Name of Training;
 - Training date/location/type/duration;
 - Strategies addressed;
 - Organizations/groups trained;
 - Attendance by member type;
 - Other attendance by group designation;
 - Materials distributed.
- d. Outreach
 - Number of military/Veterans served;
 - Outreach/services provided (i.e. referral type).

Monthly reports will be submitted along with the monthly invoice. PPH will work with Heather Smith, Division of Community Based Military Programs to determine the best format for reporting progress and outcomes.

A final report at the termination of the one-year contact will be submitted providing a comprehensive summary of all activities performed, data collected, and an analysis of the results and impact of the work

completed. The report will also describe how the work will be sustained or further developed in the future (if applicable).

Upon DMAVS approval of the final report, the final installment payment will be processed payable to the Vendor.

The contract term may be extended for up to two (2) one-year renewals based upon satisfactory completion of each contract year, contingent upon Governor and Executive Council approval as well as the availability of State funds.

**STATE OF NEW HAMPSHIRE
DEPARTMENT OF MILITARY AFFAIRS AND VETERANS SERVICES**

**EXHIBIT C
PRICE AND TERMS OF PAYMENT**

SUBJECT: Access to Mental Health Services

SECTION 1: PRICE

A. The Price for this Agreement shall not exceed \$88,000.00 without amendment and the approval of the New Hampshire Governor and Executive Council (G&C).

SECTION 2: METHOD OF PAYMENT

Payment shall be made by mailing a bank draft or electronic funds transfer as established by submitting or updating an Alternate W-9 Form to the State of New Hampshire.

Invoices shall be submitted by the Contractor to:

**Department of Military Affairs and Veterans Services
ATTN: State Business Office
4 Pembroke Road, Bldg. C
Concord, NH 03301**

SECTION 3: TERMS OF PAYMENT

Invoicing shall be based on labor, materials, and other detailed expenses needed to successfully perform the deliverables and project tasks identified in Exhibit B herein. Payments shall be made within 30 days after receipt of proper invoices and only upon the satisfactory completion of identified deliverables and tasks as determined by the Department's Primary Contact. The Contractor shall not invoice the Department for any services not yet rendered.

State of New Hampshire

Department of State

CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that PARTNERSHIP FOR PUBLIC HEALTH, INC. is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on April 21, 2005. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 534847

Certificate Number: 0005775671



IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 11th day of May A.D. 2022.

A handwritten signature in black ink, appearing to read "David M. Scanlan", is written over a faint circular stamp.

David M. Scanlan
Secretary of State

Business Information

Business Details

Business Name:	PARTNERSHIP FOR PUBLIC HEALTH, INC.	Business ID:	534847
Business Type:	Domestic Nonprofit Corporation	Business Status:	Good Standing
Business Creation Date:	04/21/2005	Name in State of Incorporation:	Not Available
Date of Formation in Jurisdiction:	04/21/2005		
Principal Office Address:	67 Water Street Suite # 105, Laconia, NH, 03246, USA	Mailing Address:	67 Water Street Suite # 105, Laconia, NH, 03246, USA
Citizenship / State of Incorporation:	Domestic/New Hampshire		
		Last Nonprofit Report Year:	2020
		Next Report Year:	2025
Duration:	Perpetual		
Business Email:	tcarmichael@ppnh.org	Phone #:	603-524-5852
Notification Email:	tcarmichael@ppnh.org	Fiscal Year End Date:	NONE

Principal Purpose

S.No	NAICS Code	NAICS Subcode
1	OTHER / exclusively for charitable purps& particularly, w/out limiting generality of the foregoing,to provide public svc&edu for purps of improving the health & well being of citizens of Lakes Region through inter-org'l collaboration of existing/future nonprofi	

CERTIFICATE OF AUTHORITY

I, Trish Stafford hereby certify that:

(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Clerk/Secretary/Officer as board President of Partnership For Public Health, Inc.
(Corporation/LLC Name)

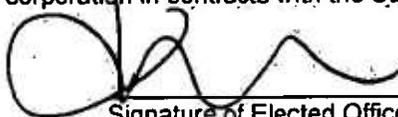
2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on October 22, 2020, at which a quorum of the Directors/shareholders were present and voting.
(Date)

VOTED: That Tamiera Carmichael, Executive Director (may list more than one person);
(Name and Title of Contract Signatory).

is duly authorized on behalf of Partnership for Public Health, Inc. to enter into contracts or agreements with the State of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority remains valid for thirty (30) days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 3.4.2024



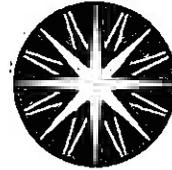
Signature of Elected Officer

Name: Trish Stafford

Title: Board of Directors President

Partnership for Public Health

67 Water Street • Suite 105 • Laconia, NH 03246 • Tel 603.528.2145 • www.PPHNH.org



October 22, 2020

Resolution of the Board of Directors

(Supersedes all prior resolutions for signature authority for checks, withdrawals, and transfers)

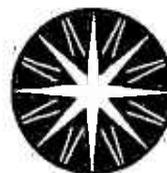
In accordance with the by-laws of the Partnership for Public Health, Inc. the Board of Directors of said organization hereby resolves that as of October 22, 2020:

- 1) Signature authority for checks and withdrawals at Bank of New Hampshire, Franklin Savings Bank, and Meredith Village Savings Bank is hereby granted to Trish Stafford, President of the Board of Directors, Lisa DuPuis, Vice President Board of Directors, Brian Lamontagne, Treasurer Board of Directors, and Tamera Carmichael, Executive Director. Checks and withdrawals to outside parties, greater than \$50,000 require a signature of a minimum of two (2) of the individuals cited herein.
- 2) Signature authority for acceptance and borrowing under the line-of-credit at the Bank of New Hampshire is granted to Trish Stafford, President of the Board of Directors, Lisa DuPuis, Vice President Board of Directors, Brian Lamontagne, Treasurer Board of Directors, and Tamera Carmichael, Executive Director. Line of Credit borrowing requires the signature of a minimum of two (2) of the individuals cited herein.
- 3) Authority given to Brian Lamontagne, Treasurer Board of Directors, and Tamera Carmichael, Executive Director to make transfers of funds between accounts. Transfers greater than \$50,000 requires notification between the Treasurer and the Executive Director. Transfers are limited between accounts held by the Partnership for Public Health.
- 4) In accordance with the by-laws of Partnership for Public Health, Inc., the Board of Directors of said organization hereby resolves that the Executive Director is authorized on behalf of this Agency to enter into any and all contracts with local municipalities, the State of New Hampshire, and the federal government of the United States of America and execute any and all documents, agreements and other instruments, and any amendments, revisions or modifications thereto, as he/she may deem

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necessary.

5) Signature authority for *Certificates of Authority* and *Certificates of Vote* is hereby granted to Trish Stafford, President of the Board of Directors; Lisa DuPuis, Vice President Board of Directors, and Brian Lamontagne, Treasurer Board of Directors as needed for supporting documentation for grants, contracts, and agreements.

This authority will begin on October 22, 2020 and remain in-force until amended by the Board of Directors.

10-22-2020

Dated

Name: Susanne Chisholm

Title: Partnership for Public Health Secretary
Board of Directors

Your Partner for a Safer and Healthier Community



Partnership for Public Health

Board of Directors Meeting

October 22, 2020

Meeting Minutes

Attending: Trish Stafford, Tammy Carmichael, Brian Lamontagne, Lisa Dupuis, Sarah Stanley, Michelle Lennon, Sandi Moore-Beinoras, Suzanne Chisholm, Rich Crocker, Sandra Van Gundy, Marie Tule, and Lisa Garcia (joined later).

Trish Stafford called the meeting to order at 8:04 a.m.

Review of September Meeting Minutes: The only change was to include Lisa Dupuis in the names of people attending. With no other changes, a roll call vote was taken to accept the amended minutes after being moved by Sarah and seconded by Lisa D., all saying “aye” except Sandra Van Gundy and Susanne who abstained.

Financial Update by Brian Lamontagne, Treasurer: Profit and Loss budget summary included a September net income of \$17,000 loss in unrestricted funds and \$11,000 up in restricted, \$29,000 down. The CHSN contract is on target, budgeted for the whole year. Non-administrative is a little high at 39% because the original budget was for 6 months. Some more funds have come in and that program will be extended. VDCHDS – VIP, Veterans Independent program 31% , a little ahead of target because we budgeted for attrition, but 2 new vets have been added. That money is fee for service.

Investments: 41%. CHSN IDN program received extra funds so it accrued more interest.

Expenses: Personnel is a little high due to some positions being front-loaded, and contract services because of higher fees. Subcontract for non-CHSN a little low based on Servicelink sending bills at the end of the quarter. Operations a little low at 18%, less maintenance now as everything is in the Cloud. There will be more expenses when Quick Books actually converts to the Cloud in the next few months. Supplies are at 51%, a little higher due to COVID-related supplies. Office, travel, meetings – 3%. Not much travel is going on right now.

Financial Position (Balance Sheet): Healthy position in cash, some state reimbursements in September. Marie plans to have that all up to date in October. PPH checking: Restricted column coming down, large August receipts of CHSN-IDN restricted funds.

Contract and grant receivables will reduce over the year as contracts come in, most started on July first.

The long-term CD for the CHSN-IDN program will be cashed out as the grant is done in this fiscal year. The CD comes due in October. The PPP loan is still there. We plan this month to come up with final calculations, hoping that most of that is forgiven, on how to handle payback.

Net Asset Summary: Breaks down all restricted items, listed largest to smallest. The Public Health Officer position is the largest. It started in July, and is being spent down. There is also a small amount which represents donations to the ServiceLink program. Marie added the Annual Meeting sponsorship revenue, which was recognized last month.

Trish asked for a motion to accept the financial report, recommended by the Executive Financial Committee on Tuesday. Rich Crocker made the motion to accept, seconded by Sandi Moore-Beinoras. Sarah Stanley mentioned that on other boards she belongs to, the vote is to place on file for audit, with or without changes, not actually a vote to approve. Marie said we have always done it this way, but that she always labels financial records as "Draft" until the audit. Trish said we could run this question by the auditors to see how they would prefer to see it. On roll call, each member present voted "Aye".

PPH Update: Tammy had previously sent out an update. Since then, highlights included a meeting she had with the Town of Belmont and they will flat fund us at \$2500 a year for services, voting on their budget in November. The City of Moultonborough allowed us an increase from \$5300 to \$6000 a year to work with us on Emergency Preparedness even though they are in the Carroll County network. The NH Endowment for Health through DHHS has offered \$25,000 discussing the use of CARES money for substance abuse disorder, for gaps analysis that we may have in our community. We are concerned about whether we can spend that by the end of the year. There is also the grant, Together With Veterans suicide program, that we will administer working with Camp Resilience.

Tammy had also attached the evaluations from the Annual Meeting. They showed that people in the community agreed or strongly agreed that their connection to the Partnership was strengthened by the Annual Meeting's format, and so we plan to keep some of the virtual aspects of this year's meeting such as recording for the web site so people can observe it later on. This will also help us to improve our web site as we see what people are looking at. We had an increase in website use in October.

John has been heavily involved with the school based flu clinics, although some of the schools had to go virtual due to the COVID upsurge and will reschedule. One was a drive-through event, which was good practice for delivery of a vaccine in the future. Of note: John was surprised at the office by the Chamber of Commerce recognizing him with the Community Service Hero Award.

Karin Salome, in her capacity as Public Health Nurse, came to the office to administer flu shots to the staff. Another event is a competition by the staff for Halloween door decorations, and pictures of that can be seen on the Face Book page, where Board members can vote for the winner.

Lisa Garcia said that a related question has come from people who have told her they could not find senior flu shots, meaning the stronger dose available to elderly recipients. Tammy has heard that CVS and other sites have been putting people on a waiting list, due to scarcity of the higher dose, and Sandra Van Gundy said that she has heard of a national shortage of the doses. Lisa suggests that people contact their PCP and ask about this.

Regarding the bank signatory change issue, and that the Certificate of Vote had a 30-day expiration of signature permission, Tammy said that the one she had signed expired and she had to sign an amendment. She found an old resolution in the files here that updates the signatory for new officers voted in September that provides authority for that. She also had a separate resolution related to signature authority - the Certificate of Authority and Certificate of Vote needed to go with amendments and contracts, added as #5 to the resolution for the bank signatory sent to Trish and Brian at the Bank of New Hampshire, as most of our accounts are there. We have to take Karin off and add Trish and Brian. If we approve this, Trish or Brian can sign a Certificate of Vote for Tammy. For a motion to accept this resolution, Lisa D. moved to accept and Sarah seconded. On roll call vote, all responded with "Aye". Related to this was the question of whether or not we might need a new corporate seal, as we had a name change and should check with AG's office. Sandra was not sure whether that is required or not.

In other business, Tammy mentioned a conversation she and Marie had had with Sandra and the status of unrestricted funds at \$11,000 came up. Tammy says she has a goal of \$100,000 and says we are just getting started at fund raising. She has heard from a couple of companies, "Blackbaud" being one. Lisa D. said they don't use them, but that the hospital does. Lisa said they use "Donor Perfect". Sandra asked if we do an annual campaign, and Marie said that we used to, but that the expense made the return negligible.

Michelle asked about who does the grant writing, and Tammy said that she has written 2 or 3 smaller grants. A couple of program managers have written for small grants for their own programs. Shelley had hired a consultant starting in January to write a larger grant. Michelle mentioned a NH Charitable Foundation 3-year unrestricted grant awarded a month ago, and Tammy said she did write for it. When we did not get it, she inquired and was told that we were considered "well-funded" and others were considered needier. State DHHS – we write these, which are pretty much renewable. Now we are doing an application to VISTA to get a person to help with COVID vaccine distribution.

Suzanne and Sarah are working on a letter the Board will be sending out for fund raising. The Board members are asked to submit 10 or more names, either personal or business contacts, to be recipients of the letter when it is ready. This is the first time we have tried this.

We discussed combining the November and December meetings to a date earlier in December, as the meetings would fall on holidays otherwise. It was decided to schedule the Executive Board meeting for December 8 and the Board meeting to December 17th. Lisa Garcia suggested that it would work better if the Zoom link were to be put with the meeting notification and agenda.

Marie made the members aware of the fact that she has a wide variety of gift cards available that we make a small amount from. She will send out lists of them, one next week and one after Thanksgiving. Members can let her know which ones they want to purchase.

Trish asked for a motion to adjourn at 8:55 a.m. Lisa D. made the motion and Suzanne seconded.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/11/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER E & S Insurance Services LLC 21 Meadowbrook Lane P O Box 7425 Gilford, NH 03247-7425	CONTACT NAME: Sidney Stevens PHONE (A/C, No., Ext): (803) 293-2791 E-MAIL ADDRESS: Sidney@esinsurance.net	FAX (A/C, No.): (803) 293-7188
	INSURER(S) AFFORDING COVERAGE	
INSURED Partnership for Public Health, Inc. 67 Water Street, Suite 105 Leconia, NH 03248	INSURER A: Great American Insurance Group	NAIC # GAIG
	INSURER B: Twin City Fire Insurance Co	29459
	INSURER C: United States Fire Insurance Co.	
	INSURER D:	
	INSURER E:	

COVERAGES **CERTIFICATE NUMBER:** 24 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		MAC 5801104 00	03/10/2024	03/10/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COM/PROP AGG \$ 3,000,000
	<input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		MAC 5801104 00	03/10/2024	03/10/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> RETENTION \$ 10,000		UMB 5801105 00	03/10/2024	03/10/2025	<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	04WECRJ0009	01/01/2024	01/01/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Accident Policy		US1859372	03/10/2024	03/10/2025	Accident Medical Expense \$25,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER Department of Military Affairs & Veterans Services 275 Chestnut St Manchester, NH 03101	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

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ATTACHMENT 1

**Partnership for Public Health, Inc.
Formerly known as Lakes Region Partnership for
Public Health, Inc.**

Financial Statements

With Schedule of Expenditures of Federal Awards

June 30, 2022 and 2021

and

Independent Auditor's Report

**Report on Internal Control Over Financial Reporting
and on Compliance and Other Matters Based on an Audit
of Financial Statements Performed in Accordance
With *Government Auditing Standards***

**Report on Compliance for Each Major Federal Program
and Report on Internal Control Over Compliance
Required by the Uniform Guidance**

Schedule of Findings and Questioned Costs

PARTNERSHIP FOR PUBLIC HEALTH, INC.
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH
FINANCIAL STATEMENTS
June 30, 2022 and 2021

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INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of
Partnership for Public Health, Inc.
Formerly known as Lakes Region Partnership for Public Health, Inc.

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of Partnership for Public Health, Inc. (a nonprofit organization), which comprise the statements of financial position as of June 30, 2022 and 2021, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements present fairly, in all material respects, the financial position of Partnership for Public Health, Inc. as of June 30, 2022 and 2021, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Partnership for Public Health, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Partnership for Public Health Inc.'s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Partnership for Public Health Inc.'s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Partnership for Public Health Inc.'s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with

auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated, in all material respects, in relation to the financial statements as a whole.

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated March 31, 2023 on our consideration of Partnership for Public Health, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Partnership for Public Health, Inc.'s internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Partnership for Public Health, Inc.'s internal control over financial reporting and compliance.

Nashon Clukay & Company PC

Manchester, New Hampshire
March 31, 2023

PARTNERSHIP FOR PUBLIC HEALTH, INC.
Formerly known as Lakes Region Partnership for Public Health, Inc.
Statements of Financial Position
June 30, 2022 and 2021

ASSETS	<u>2022</u>	<u>2021</u>
CURRENT ASSETS:		
Cash	\$ 321,050	\$ 278,600
Cash, restricted	206,684	468,763
Contributions receivable	355,207	435,693
Prepaid expenses	13,353	18,468
TOTAL CURRENT ASSETS	<u>896,294</u>	<u>1,201,524</u>
PROPERTY AND EQUIPMENT:		
Leasehold improvements	4,561	4,561
Furniture and equipment	14,510	14,510
	19,071	19,071
Less accumulated depreciation	(18,827)	(18,465)
PROPERTY AND EQUIPMENT, NET	<u>244</u>	<u>606</u>
OTHER NONCURRENT ASSETS:		
Investments	77,416	52,268
Investment in LLC		700
Deposit	2,981	2,981
TOTAL OTHER NONCURRENT ASSETS	<u>80,397</u>	<u>55,949</u>
TOTAL ASSETS	<u>\$ 976,935</u>	<u>\$ 1,258,079</u>
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES:		
Accounts payable	\$ 40,917	\$ 160,626
Accrued payroll	56,354	45,598
Accrued compensated absences	28,571	40,035
Accrued other expenses	27,726	54,458
Refundable advances from grantors	26,850	180,888
Refundable advance from grantor - SBA		159,170
Fiduciary funds	2,120	2,120
Current portion of SBA note payable		57,030
TOTAL CURRENT LIABILITIES	<u>182,538</u>	<u>699,925</u>
TOTAL LIABILITIES	<u>182,538</u>	<u>699,925</u>
NET ASSETS:		
Without donor restrictions:		
Undesignated	609,674	431,525
Board designated	10,000	
With donor restrictions:		
Purpose restrictions	174,723	126,629
TOTAL NET ASSETS	<u>794,397</u>	<u>558,154</u>
TOTAL LIABILITIES AND NET ASSETS	<u>\$ 976,935</u>	<u>\$ 1,258,079</u>

See notes to financial statements

PARTNERSHIP FOR PUBLIC HEALTH, INC.
Formerly known as Lakes Region Partnership for Public Health, Inc.
Statements of Activities
For the Years Ended June 30, 2022 and 2021

	<u>2022</u>	<u>2021</u>
CHANGES IN NET ASSETS WITHOUT DONOR RESTRICTIONS		
SUPPORT AND REVENUE:		
Contributions	\$ 37,435	\$ 9,839
In-kind support	45,174	86,007
Federal funds	1,051,563	1,520,020
State funds	318,105	840,502
Private grants and awards	45,001	114,467
Special events	491	1,069
Agent fees	111,105	141,195
Miscellaneous income	11,622	900
Interest income	1,556	6,647
SBA PPP debt forgiveness	161,204	
Net assets released from donor restrictions	<u>61,807</u>	<u>125,072</u>
TOTAL SUPPORT AND REVENUE WITHOUT DONOR RESTRICTIONS	<u>1,845,063</u>	<u>2,845,718</u>
EXPENSES:		
Program services	1,415,282	2,543,330
Supporting services:		
Management and general	241,632	235,187
Fundraising and development		<u>3,898</u>
Total supporting services	<u>241,632</u>	<u>239,085</u>
TOTAL EXPENSES	<u>1,656,914</u>	<u>2,782,415</u>
INCREASE IN NET ASSETS WITHOUT DONOR RESTRICTIONS	<u>188,149</u>	<u>63,303</u>
CHANGES IN NET ASSETS WITH DONOR RESTRICTIONS		
Contributions	22,450	31,534
Private grants and awards	84,347	20,500
Special events	2,600	2,000
Miscellaneous income	504	
Net assets released from donor restrictions	<u>(61,807)</u>	<u>(125,072)</u>
INCREASE (DECREASE) IN NET ASSETS WITH DONOR RESTRICTIONS	<u>48,094</u>	<u>(71,038)</u>
CHANGE IN NET ASSETS	236,243	(7,735)
NET ASSETS, JULY 1	<u>558,154</u>	<u>565,889</u>
NET ASSETS, JUNE 30	<u>\$ 794,397</u>	<u>\$ 558,154</u>

See notes to financial statements

PARTNERSHIP FOR PUBLIC HEALTH, INC.
Formerly known as Lakes Region Partnership for Public Health, Inc.
Statement of Functional Expenses
For the Year Ended June 30, 2022

	Program Services	Management and General	Total Expenses
SALARIES AND RELATED EXPENSES:			
Salaries	\$ 631,864	\$ 191,332	\$ 823,196
Employee benefits	81,934	13,188	95,122
Payroll taxes	<u>48,122</u>	<u>15,829</u>	<u>63,951</u>
	<u>761,920</u>	<u>220,349</u>	<u>982,269</u>
OTHER EXPENSES:			
Contract services	67,243	2,141	69,384
Contract and grant subcontractors	133,025	3,780	136,805
Discretionary funds	125,000		125,000
Insurance	13,016	1,830	14,846
Occupancy	62,919	1,227	64,146
Operations	82,623	8,171	90,794
Supplies	115,609	1,163	116,772
Travel and meetings	53,244	1,042	54,286
Miscellaneous	683	1,567	2,250
Depreciation		<u>362</u>	<u>362</u>
Total	<u>\$ 1,415,282</u>	<u>\$ 241,632</u>	<u>\$ 1,656,914</u>

See notes to financial statements

PARTNERSHIP FOR PUBLIC HEALTH, INC.
Formerly known as Lakes Region Partnership for Public Health, Inc.
Statement of Functional Expenses
For the Year Ended June 30, 2021

	Program Services	Supporting Services		Total Supporting Services	Total Expenses
		Management and General	Fundraising		
SALARIES AND RELATED EXPENSES:					
Salaries	\$ 718,503	\$ 199,600	\$ 3,598	\$ 203,198	\$ 921,701
Employee benefits	79,116	9,072		9,072	88,188
Payroll taxes	57,394	16,125	278	16,403	73,797
	<u>855,013</u>	<u>224,797</u>	<u>3,876</u>	<u>228,673</u>	<u>1,083,686</u>
OTHER EXPENSES:					
Contract services	88,811	903		903	89,714
Contract and grant subcontractors	1,308,109	75		75	1,308,184
Insurance	10,567	2,026		2,026	12,593
Fundraising	40	-		-	40
Occupancy	64,906	873		873	65,779
Operations	57,439	927	16	943	58,382
Supplies	135,722	1,041		1,041	136,763
Travel and meetings	21,559	522		522	22,081
Miscellaneous	1,164	3,661	6	3,667	4,831
Depreciation		362		362	362
Total	<u>\$ 2,543,330</u>	<u>\$ 235,187</u>	<u>\$ 3,898</u>	<u>\$ 239,085</u>	<u>\$ 2,782,415</u>

See notes to financial statements

PARTNERSHIP FOR PUBLIC HEALTH, INC.
Formerly known as Lakes Region Partnership for Public Health, Inc.
Statements of Cash Flows
For the Years Ended June 30, 2022 and 2021

	<u>2022</u>	<u>2021</u>
CASH FLOWS FROM OPERATING ACTIVITIES:		
Change in net assets	\$ 236,243	\$ (7,735)
Adjustments to Reconcile Change in Net Assets to Net Cash Used by Operating Activities:		
Depreciation	362	362
SBA PPP debt forgiveness	(161,204)	
Change in assets and liabilities:		
Contributions receivable	80,486	(187,962)
Prepaid expenses	5,115	(2,844)
Accounts payable	(119,709)	(112,667)
Accrued payroll	10,756	(1,524)
Accrued compensated absences	(11,464)	5,695
Accrued other expenses	(26,732)	19,090
Refundable advances from grantors	<u>(154,038)</u>	<u>(630,681)</u>
Net Cash Used by Operating Activities	<u>(140,185)</u>	<u>(918,266)</u>
CASH FLOWS FROM INVESTING ACTIVITIES:		
Proceeds from investments	700	235,958
Purchase of investments	<u>(25,148)</u>	<u>(2,151)</u>
Net Cash Provided (Used) by Investing Activities	<u>(24,448)</u>	<u>233,807</u>
CASH FLOWS FROM FINANCING ACTIVITIES:		
Payment of note payable	<u>(54,996)</u>	<u>-</u>
Net Cash Used for Financing Activities	<u>(54,996)</u>	<u>-</u>
 Net Decrease in Cash	 (219,629)	 (684,459)
Cash, beginning of year	<u>747,363</u>	<u>1,431,822</u>
Cash, ending of year	<u>\$ 527,734</u>	<u>\$ 747,363</u>
 Supplemental Disclosures:		
In-kind donations received	\$ 45,174	\$ 86,007
In-kind expenses	<u>(45,174)</u>	<u>(86,007)</u>
	<u>\$ -</u>	<u>\$ -</u>

See notes to financial statements

**PARTNERSHIP FOR PUBLIC HEALTH, INC.
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.
NOTES TO FINANCIAL STATEMENTS
For the Years Ended June 30, 2022 and 2021**

NOTE 1—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization and Purpose

Partnership for Public Health, Inc., formerly known as Lakes Region Partnership for Public Health, Inc., (the Entity) was organized on May 21, 2005 to improve the health and well-being of the Lakes Region through inter-organizational collaboration and community and public health improvement activities.

Accounting Policies

The accounting policies of the Entity conform to accounting principles generally accepted in the United States of America as applicable to nonprofit entities, except as indicated hereafter. The following is a summary of significant accounting policies.

Basis of Presentation

The financial statements have been prepared in accordance with the reporting pronouncements pertaining to Not-for-Profit Entities included within the FASB Accounting Standards Codification. The Entity is required to report information regarding its financial position and activities according to the following net asset classifications:

Net Assets Without Donor Restrictions— Net assets available for use in general operations and not subject to donor or certain grantor restrictions. These net assets may be used at the discretion of management and the Entity's Board of Directors.

Net Assets With Donor Restrictions— Net assets subject to donor or certain grantor imposed restrictions. Some donor imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both.

Basis of Accounting

The financial statements have been prepared on the accrual basis of accounting.

Revenues from program services are recorded when earned. Other miscellaneous revenues are recorded upon receipt.

Recognition of Donor Restrictions

Contributions are recognized when the donor makes a promise to give to the Entity that is, in substance, unconditional. The Entity reports contributions restricted by donors as increases in net assets without donor restrictions if the restrictions expire (that is, when a stipulated time restriction ends or purpose restriction is accomplished) in the reporting period in which the revenue is recognized. All other donor restricted contributions are reported as increases in net assets with donor restrictions, depending on the

PARTNERSHIP FOR PUBLIC HEALTH, INC.
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Years Ended June 30, 2022 and 2021

nature of the restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions.

Cash and Cash Equivalents

Cash and cash equivalents include cash on hand and other cash accounts with a maturity of 90 days or less. For purposes of the Statements of Cash Flows, cash and cash equivalents consist of the following:

	<u>2022</u>	<u>2021</u>
As presented on the Statements of Financial Position -		
Cash	\$ 321,050	\$ 278,600
Cash, restricted	<u>206,684</u>	<u>468,763</u>
	<u>\$ 527,734</u>	<u>\$ 747,363</u>

Restricted Cash

Restricted cash consists of advanced funding received from the State of New Hampshire for the Integrated Delivery Network (IDN), donor restricted contributions, and fiduciary funds.

Investments

Investments, which consist of certificates of deposit with terms of 5 to 12 months, are carried at their approximate market value at June 30, 2022.

Property and Equipment

Property and equipment are stated at cost. Donated property and equipment is recorded at fair value determined as of the date of the donation. The Entity's policy is to capitalize expenditures for equipment and major improvements and to charge to operations currently for expenditures which do not extend the lives of related assets in the period incurred. Depreciation is computed using the straight-line method at rates intended to amortize the cost of related assets over their estimated useful lives as follows:

	<u>Years</u>
Leasehold improvements	10-15
Furniture and equipment	5-15

Depreciation expense was \$362 for both the years ended June 30, 2022 and 2021.

Compensated Absences

Employees of the Entity working full-time, and part-time employees working at least 20 hours per week, are entitled to paid time off (PTO). PTO is earned from the first day of work. A maximum of 160 hours can be earned based on years of service while 80 hours can be carried over and accumulated to the next year. Accumulated PTO is payable upon termination of employment with proper notice. The Entity accrues accumulated PTO wages accordingly. During fiscal year 2021, employees were allowed to carryover any hours in excess of the allowed 80 hours with the provision that the hours had to be used by September 30, 2021.

**PARTNERSHIP FOR PUBLIC HEALTH, INC.
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Years Ended June 30, 2022 and 2021**

Donated Services, Materials and Facilities

The Entity receives significant volunteer time and efforts. The value of these volunteer efforts, while critical to the success of its mission, is not reflected in the financial statements since it does not meet the criteria necessary for recognition according to generally accepted accounting principles.

Donated facilities, supplies, equipment and staff support are recorded as “In-kind” contributions if the services (a) create or enhance nonfinancial assets or (b) require specialized skills, are performed by people with those skills, and would otherwise be purchased by the Entity. Donated goods and professional services are recorded as both revenues and expenses at estimated fair value as of the date such goods or services are received. See Note 10 for additional information.

Functional Allocation of Expenses

The costs of program and supporting services activities have been summarized on a functional basis in the statements of activities. The statement of functional expenses presents the natural classification detail of expenses by function.

The financial statements report certain categories of expenses that are attributed to more than one program or supporting function. Accordingly, certain indirect costs have been allocated among the programs and supporting services benefited, based primarily on percentage allocations calculated based on hours worked (time and effort). The expenses that are allocated include salaries, payroll taxes, employee benefits, office supplies, fundraising, operations, and insurance, which are all allocated on the basis of time and effort, as noted previously. In addition, there are some indirect costs which are allocated based on square footage or as a percentage of total expenses.

Bad Debts

The Entity uses the reserve method for accounting for bad debts. No allowance has been recorded as of June 30, 2022 and 2021, because management of the Entity believes that all outstanding receivables are fully collectible.

Revenue and Revenue Recognition

The Entity recognizes contributions, donations, and miscellaneous revenue when cash is received. Conditional promises to give, that is, those with a measurable performance or other barrier and a right of return, are not recognized until the conditions on which they depend have been met.

The Entity also has revenue derived from cost-reimbursable federal grants, which are conditional upon certain performance requirements and/or incurrent of allowable qualifying expenses. Amounts received are recognized as revenue without donor restrictions when the Entity has met those performance requirements or incurred expenditures in compliance with the specific grant provisions. Amounts received prior to meeting performance requirements or incurring qualifying expenditures are reported as revenue with donor restrictions or refundable advances from grantors, dependent on funding source and right of return, and amounts not yet received, but already awarded are recorded as contributions receivable.

PARTNERSHIP FOR PUBLIC HEALTH, INC.
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Years Ended June 30, 2022 and 2021

Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Income Taxes

The Entity is exempt from Federal income taxes under Section 501(c)(3) of the Internal Revenue Code and is also exempt from State of New Hampshire income taxes and, therefore, has made no provision for Federal or State income taxes. In addition, the Entity has been determined by the Internal Revenue Service not to be a "Private Foundation" within the meaning of Section 509(a) of the Code. The Entity is annually required to file a Return of Organization Exempt from Income Tax (Form 990) with the IRS. FASB Accounting Standards Codification Topic 740 entitled *Accounting for Income Taxes* requires the Entity to report uncertain tax positions for financial reporting purposes. The Entity had no uncertain tax positions as of June 30, 2022 and, accordingly does not have any unrecognized tax benefits that need to be recognized or disclosed in the financial statements.

Fair Value of Financial Instruments

Cash and equivalents, investments, contracts receivable, accounts payable and accrued expenses are carried in the financial statements at amounts which approximate fair value due to the inherently short-term nature of the transactions. The fair values determined for financial instruments are estimates, which for certain accounts may differ significantly from the amounts that could be realized upon immediate liquidation.

Change in Accounting Principle

The Financial Accounting Standards Board (FASB) issued new guidance that created Topic 606, *Revenue from Contracts with Customers*, in the Accounting Standards Codification (ASC). Topic 606 supersedes the revenue recognition requirements in FASB ASC 605, *Revenue Recognition*, and requires the recognition of revenue when promised goods or services are transferred to customers in an amount that reflects the consideration to which an entity expects to be entitled in exchange for those goods or services. The new guidance also added Subtopic 340-40, *Other Assets and Deferred Costs-Contracts with Customers*, to the ASC to require the deferral of incremental costs of obtaining a contract with a customer. Collectively, we refer to the new Topic 606 and Subtopic 340-40 as the "new guidance."

The Entity adopted the requirements of the new guidance as of July 1, 2020, utilizing the modified retrospective method of transition. The new guidance was applied using the practical expedient provided in Topic 606 that allows the guidance to be applied only to contracts that were not complete as of July 1, 2020. Adoption of the new guidance resulted in changes to our accounting policies for revenue recognition, trade receivables, contract costs, contract liabilities, and deferred costs. However, management estimates that the effect of these changes on the amounts that would have been reported under the former guidance to be immaterial. Management has evaluated the impact of the application of this standard and determined any applicability to the Entity is not material.

PARTNERSHIP FOR PUBLIC HEALTH, INC.
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Years Ended June 30, 2022 and 2021

NOTE 2—LIQUIDITY AND AVAILABILITY

The Entity regularly monitors the availability of resources required to meet its operating needs and other contractual commitments. Cash reserves in excess of daily operational needs are invested in certificates of deposit to maximize investment return while maintaining safety and liquidity.

The following table reflects the Entity’s financial assets as of June 30, 2022 and 2021, reduced by amounts that are not available to meet general expenditures within one year of the statement of financial position date because of donor restrictions.

Financial assets available for general expenditure, reduced by donor or other restrictions limiting their use, within one year of the balance sheet date, comprise the following:

	<u>2022</u>	<u>2021</u>
Cash	\$ 527,734	\$ 747,363
Investments	77,416	52,268
Contributions receivable	<u>355,207</u>	<u>435,693</u>
Total Financial Assets	960,357	1,235,324
Less:		
Obligations from contractor restricted funds		(162,776)
Board designated	(10,000)	
Net assets with donor restrictions	(174,723)	(126,629)
Refundable advances from grantors	(26,850)	(180,888)
Fiduciary funds	<u>(2,120)</u>	<u>(2,120)</u>
Financial Assets Available to Meet Cash Needs for General Expenditures Within One Year	<u>\$ 746,664</u>	<u>\$ 762,911</u>

In the event of an unanticipated liquidity need, the Entity also could draw upon \$125,000 of its available line of credit, as further discussed in Note 5.

NOTE 3—CONCENTRATION OF CREDIT RISK

The Entity maintains bank deposits at local financial institutions located in New Hampshire. The Entity’s demand deposits and certificates of deposit are insured by the Federal Deposit Insurance Corporation (FDIC) up to a total of \$250,000. As of June 30, 2022 and 2021, all of the Entity’s bank deposits were fully insured.

NOTE 4—REFUNDABLE ADVANCES FROM GRANTORS

Refundable advances from grantors of \$26,850 and \$180,888 as of June 30, 2022 and 2021, respectively, represents unearned grant revenue on contributions from various funding agencies.

Refundable advance from grantor – SBA of \$159,170 as of June 30, 2021, represents the portion of the SBA note payable to be forgiven in fiscal year 2022. See Note 6 for additional information.

PARTNERSHIP FOR PUBLIC HEALTH, INC.
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Years Ended June 30, 2022 and 2021

NOTE 5—LINE OF CREDIT

The Entity has a \$125,000 line of credit with a local financial institution. The interest rate for the credit line was 6.75% and 5.25% at June 30, 2022 and 2021, respectively. The interest rate is based on the Wall Street Journal Prime Rate as published in the Wall Street Journal. At both June 30, 2022 and 2021, the balance on the line of credit was \$0.

NOTE 6—SBA NOTE PAYABLE

The SBA note payable was obtained under the Paycheck Protection Program in the amount of \$216,200. Under the terms of the agreement, the Entity was eligible to apply for principal forgiveness in whole or in part by the Small Business Administration under the CARES Act, once certain eligibility criteria have been satisfied. During fiscal year 2021, the Entity applied for and in July 2021, received principal forgiveness totaling \$159,170 plus interest of \$2,034. For the year ended June 30, 2021, \$159,170 has been recorded as a refundable advance from grantor and the forgiveness was recognized as revenue in the year ending June 30, 2022, including interest of \$2,034. The remaining note payable balance was paid in full during the year ended June 30, 2022.

NOTE 7—NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions consist of the following donor restricted funding at June 30, 2022 and 2021:

	<u>2022</u>	<u>2021</u>
ServiceLink	\$ 9,269	\$ 8,707
Volunteer CERT	1,477	1,477
Laconia Youth Alliance	18,786	21,544
CERT	22,035	21,586
NH Charitable Foundation	10,285	34,317
DSRIP Incentive	13,065	17,783
IDN - various	65,436	
Gilford Neighbors	14,063	
Other	<u>20,307</u>	<u>21,215</u>
Total Net Assets with Donor Restrictions	<u>\$ 174,723</u>	<u>\$ 126,629</u>

NOTE 8—CONCENTRATION OF REVENUE RISK

The Entity's primary source of revenues is fees and grants received from the State of New Hampshire and directly from the federal government. During the years ended June 30, 2022 and 2021, the Entity recognized revenue of \$1,369,668 (72.4%) and \$2,360,522 (85.1%), respectively, from fees and grants from governmental agencies. Revenue is usually recognized as earned under the terms of the grant contracts and is received on a cost reimbursement basis. Other support originates from other program services, contributions, in-kind donations, and other income.

PARTNERSHIP FOR PUBLIC HEALTH, INC.
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Years Ended June 30, 2022 and 2021

NOTE 9—LEASE COMMITMENTS

The Entity renewed a lease for office space located in Tamworth, NH with monthly lease payments of \$1,068 through June 2022. The lease was renewed through June 30, 2022 with monthly payments at \$1,479. Lease expense for the years ended June 30, 2022 and June 30, 2021 were \$12,822 and \$12,689, respectively.

The Entity also has two leases for office spaces in Laconia, NH. An updated agreement was entered into with required payments of \$2,185 through August 31, 2020. The second lease for additional office space was renewed effective June 1, 2019 reflecting payments of \$795 through May 2020 and was extended at the same terms through May 2021. These agreements were amended into one lease for the units in Laconia, NH, with payments of \$3,110 through June 30, 2022. Lease expense for the years ended June 30, 2022 and June 30, 2021 for these leases was \$37,320 and \$36,054, respectively. This agreement was extended on a month-to-month basis until September 2022 when an agreement was entered into through June 30, 2023 with monthly payments of \$3,110.

The Entity entered into a 60-month equipment lease in November 2020 with monthly lease payments of \$495 through December 2021 with percentage increases in Years 2-5 for maintenance and overages of 5%-10%. Lease expense for the years ended June 30, 2022 and 2021 was \$5,999 and \$3,561, respectively.

The following is a schedule, by years, of the future minimum payments for operating leases:

Year Ended <u>June 30,</u>	Annual <u>Lease Commitments</u>
2023	\$ 61,245
2024	6,430
2025	6,708
2026	<u>3,427</u>
	<u>\$ 77,810</u>

NOTE 10—DONATED SERVICES, MATERIALS AND FACILITIES

The Entity receives various donated services, materials and facilities. For the years ended June 30, 2022 and 2021, there was \$45,174 and \$86,007, respectively, of in-kind donations recognized as revenue. In-kind donations have been included as functional expenses in these financial statements as follows:

	<u>2022</u>	<u>2021</u>
Contract services	\$ 33,152	\$ 41,563
Supplies	1,072	
Operations	10,950	10,950
Contract and grant subcontractors		<u>33,494</u>
	<u>\$ 45,174</u>	<u>\$ 86,007</u>

PARTNERSHIP FOR PUBLIC HEALTH, INC.
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Years Ended June 30, 2022 and 2021

NOTE 11—CONTINGENCIES

The Entity participates in a number of federally assisted grant programs. These programs are subject to financial and compliance audits by the grantors or their representatives. The amounts, if any, of additional expenses which may be disallowed by the granting agency cannot be determined at this time, although the Entity expects such amounts, if any, to be immaterial.

NOTE 12—SUBSEQUENT EVENTS

In March 2023, the Entity entered into a lease agreement for additional office space with monthly payments of \$5,500, through February 29, 2024.

Subsequent events have been evaluated through March 31, 2023 which is the date the financial statements were available to be issued.

NOTE 13—FUTURE ACCOUNTING STANDARDS

FASB has issued ASU 2016-02, *Lease (Topic 842)*, which the Entity is required to implement for the year ending June 30, 2023. Management believes that this update will have a potentially significant impact on the financial statements. The Entity will be required to recognize a right-of-use asset and a lease liability for transactions currently identified as operating leases.

SCHEDULE I
PARTNERSHIP FOR PUBLIC HEALTH, INC.
 Formerly known as Lakes Region Partnership for Public Health, Inc.
 Schedule of Expenditures of Federal Awards
 For the Year Ended June 30, 2022

Federal Grantor / Pass-Through Grantor/Program or Cluster Title	Assistance Listing Number	Pass-Through Entity Identifying Number	Total Federal Expenditures
DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT			
Pass Through Payments from the County of Belknap, New Hampshire <i>CDBG Entitlement Grants Cluster:</i> COVID-19 - Community Development Block Grants/Entitlement Grants <i>Total CDBG Entitlement Grants Cluster</i>	14.218	CDBG-CV	\$ 74,380 <u>74,380</u>
Total Department of Housing and Urban Development			<u>74,380</u>
DEPARTMENT OF THE TREASURY			
Pass Through Payments from the State of New Hampshire Department of Health and Human Services COVID-19 - Coronavirus State and Local Fiscal Recovery Funds	21.027	Unknown	<u>24,817</u>
Total Department of the Treasury			<u>24,817</u>
DEPARTMENT OF HEALTH AND HUMAN SERVICES			
Pass Through Payments from the National Association of County and City Health Officials Medical Reserve Corps Small Grant Program Medical Reserve Corps Small Grant Program	93.008 93.008	#HITEP200045-01-01 #HITEP200045-02-06	9,622 <u>2,173</u> <u>11,795</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services <i>Aging Cluster:</i> Special Programs for the Aging, Title III, Part B, Grants for Supportive Services and Senior Centers	93.044	Unknown	<u>15,000</u>
Pass Through Payments from University of New Hampshire Special Programs for the Aging, Title III, Part B, Grants for Supportive Services and Senior Centers <i>Total Aging Cluster</i>	93.044	Unknown	11,206 <u>26,206</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services Special Programs for the Aging, Title IV, and Title II, Discretionary Projects	93.048	#90MP0176-03-01	17,839
Pass Through Payments from University of New Hampshire Special Programs for the Aging, Title IV, and Title II, Discretionary Projects COVID-19 - Special Programs for the Aging, Title IV, and Title II, Discretionary Projects	93.048 93.048	#2018-ACL-CIP-NWBC-0285 #COVID BEAS-ADRC	7,897 <u>5,500</u> <u>31,236</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services National Family Caregiver Support, Title III, Part E	93.052	#2001-NHOAFC-02	<u>72,090</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services Public Health Emergency Preparedness	93.069	#NU90TP922018	<u>86,750</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services COVID-19 - Environmental Public Health and Emergency Response	93.070	#NUE1EH001357	<u>5,016</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services Medicare Enrollment Assistance Program	93.071	#2001NHMISH-00	<u>6,717</u>

See notes to schedule of expenditures of federal awards

SCHEDULE I
PARTNERSHIP FOR PUBLIC HEALTH, INC.
Formerly known as Lakes Region Partnership for Public Health, Inc.
Schedule of Expenditures of Federal Awards (Continued)
For the Year Ended June 30, 2022

Federal Grantor / Pass-Through Grantor/Program or Cluster Title	Assistance Listing Number	Pass-Through Entity Identifying Number	Total Federal Expenditures
Pass Through Payments from the State of New Hampshire Department of Health and Human Services Childhood Lead Poisoning Prevention Projects, State and Local Childhood Lead Poisoning Prevention and Surveillance of Blood Lead Levels in Children	93.197	#NUE2EH001408	<u>3,831</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services Substance Abuse and Mental Health Services Projects of Regional and National Significance	93.243	#SP020796	<u>80,000</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services Immunization Cooperative Agreements	93.268	#NH23IP922595	<u>15,000</u>
Direct Award Program Drug-Free Communities Support Program Grants	93.276	N/A	<u>137,370</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services State Health Insurance Assistance Program	93.324	#90SA0003-02-03	<u>21,865</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services COVID-19 - Public Health Emergency Response: Cooperative Agreement for Emergency Response: Public Health Crisis Response	93.354	#NU90TP922106	<u>12,494</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services COVID-19 - Activities to Support State, Tribal, Local or Territorial (STLT) Health Department Response to Public Health or Healthcare Crises	93.391	#NH75OT000031	<u>71,328</u>
Pass Through Payments from the National Association of County and City Health Officials COVID-19 - Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health	93.421	#6NU38OT000306-03-06	<u>8,887</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services Social Services Block Grant	93.667	#2021-DLTSS-08-SERVI-05	<u>132,386</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services National Bioterrorism Hospital Preparedness Program	93.889	#U3REP190580	<u>10,000</u>
Pass Through Payments from the State of New Hampshire Department of Health and Human Services Block Grants for Prevention and Treatment of Substance Abuse	93.959	Unknown	44,641
Block Grants for Prevention and Treatment of Substance Abuse	93.959	Unknown	69,367
Block Grants for Prevention and Treatment of Substance Abuse	93.959	Unknown	<u>30,000</u>
			<u>144,008</u>
Total Department of Health and Human Services			<u>876,979</u>
DEPARTMENT OF HOMELAND SECURITY			
Pass Through Payments from the State of New Hampshire Department of Health and Human Services COVID-19 - Disaster Grants - Public Assistance (Presidentially Declared Disasters)	97.036	#4516DRNHP00000001	<u>31,243</u>
Total Department of Homeland Security			<u>31,243</u>
Total Expenditures of Federal Awards			<u>\$ 1,007,419</u>

See notes to schedule of expenditures of federal awards

PARTNERSHIP FOR PUBLIC HEALTH, INC.
Formerly known as Lakes Region Partnership for Public Health, Inc.
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Year Ended June 30, 2022

NOTE 1—BASIS OF PRESENTATION

The accompanying Schedule of Expenditures of Federal Awards (the “Schedule”) includes the federal award activity of Partnership for Public Health, Inc. under programs of the federal government for the year ended June 30, 2022. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of Partnership for Public Health, Inc., it is not intended to and does not present the financial position, changes in net assets, or cash flows of the Partnership for Public Health, Inc.

NOTE 2—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The accompanying Schedule is presented using the accrual basis of accounting, which is described in Note 1 to Partnership for Public Health, Inc.’s financial statements. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursements.

NOTE 3—INDIRECT COST RATE

Partnership for Public Health, Inc. has not elected to use the 10-percent de minimis indirect cost rate allowed under the Uniform Guidance.

**REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING
AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT
OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE
WITH *GOVERNMENT AUDITING STANDARDS***

Independent Auditor's Report

To the Board of Directors
Partnership for Public Health, Inc.
Formerly known as Lakes Region Partnership for Public Health, Inc.

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Partnership for Public Health, Inc. (a nonprofit organization), which comprise the statement of financial position as of June 30, 2022, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated March 31, 2023.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered Partnership for Public Health, Inc.'s internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Partnership for Public Health, Inc.'s internal control. Accordingly, we do not express an opinion on the effectiveness of Partnership for Public Health, Inc.'s internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that were not identified.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether Partnership for Public Health, Inc.'s financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Vaahon Clukay & Company PC

Manchester, New Hampshire
March 31, 2023

**REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM
AND REPORT ON INTERNAL CONTROL OVER COMPLIANCE
REQUIRED BY THE UNIFORM GUIDANCE**

Independent Auditor's Report

To the Board of Directors
Partnership for Public Health, Inc.
Formerly known as Lakes Region Partnership for Public Health, Inc.

Report on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Partnership for Public Health, Inc.'s compliance with the types of compliance requirements identified as subject to audit in the OMB *Compliance Supplement* that could have a direct and material effect on each of Partnership for Public Health, Inc.'s major federal programs for the year ended June 30, 2022. Partnership for Public Health, Inc.'s major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, Partnership for Public Health, Inc. complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2022.

Basis for Opinion on Each Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 *U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of Partnership for Public Health, Inc. and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of Partnership for Public Health, Inc.'s compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to Partnership for Public Health, Inc.'s federal programs.

Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on Partnership for Public Health, Inc.'s compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about Partnership for Public Health, Inc.'s compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding Partnership for Public Health, Inc.'s compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of Partnership for Public Health, Inc.'s internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of Partnership for Public Health, Inc.'s internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Report on Internal Control over Compliance

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Vashon Clukay & Company PC

Manchester, New Hampshire
March 31, 2023

Partnership for Public Health, Inc.
Formerly known as Lakes Region Partnership for Public Health, Inc.
Schedule of Findings and Questioned Costs
For the Year Ended June 30, 2022

Section I--Summary of Auditor's Results

Financial Statements

Type of report the auditor issued on whether the financial statements audited were prepared in accordance with GAAP:

Unmodified

Internal control over financial reporting:

Material weakness(es) identified?

_____ yes X no

Significant deficiency(ies) identified?

_____ yes X none reported

Noncompliance material to financial statements noted?

_____ yes X no

Federal Awards

Internal control over major federal programs:

Material weakness(es) identified?

_____ yes X no

Significant deficiency(ies) identified?

_____ yes X none reported

Type of auditor's report issued on compliance for major federal programs:

Unmodified

Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?

_____ yes X no

Identification of major federal program(s):

<u>Assistance Listing Number(s)</u>	<u>Name of Federal Program or Cluster</u>
93.276	Drug-Free Communities Support Program Grants
93.667	Social Services Block Grant
93.959	Block Grants for Prevention and Treatment of Substance Abuse

Dollar threshold used to distinguish between Type A and Type B programs: \$ 750,000

Auditee qualified as low-risk auditee? _____ yes X no

Section II--Financial Statement Findings

There were no findings relating to the financial statements required to be reported by GAGAS.

Section III--Federal Award Findings and Questioned Costs

There were no findings and questioned costs as defined under 2 CFR 200.516(a).

STATE OF NEW HAMPSHIRE
 DEPARTMENT OF MILITARY AFFAIRS & VETERANS SERVICES
 RESPONSE TO RFP: RFP 2024-02 Access to Mental Health Services

Key Personnel

Resumes available via **Attachment 2**

Name	Title	Annual Salary
Tamera Carmichael	Executive Director	\$97,125.00
Carissa Elphick	Deputy Director	\$61,425.00
Courtney DeVost	Director of Finance & Operations	\$70,512.00
Joseph Vano	Manager, Prevention Programs	\$52,000.00
DMAVS Project Coordinator	TBD	TBD

Board of Directors

Name	Affiliation
Trish Stafford	Town Manager, Sanbornton
Michelle Lennon	Archways
Lisa Garcia	Food Coach LLC
Margaret Franckhauser	JSI/Community Health Institute
Lori Nash	Granite VNA
Brian Lamontagne	Franklin Savings Bank
Carolyn Muller	Concord Hospital Laconia – Franklin
Sarah Stanley	NH Veteran’s Home
Mark Waldner	Westcott Law
Jessica Morton	NH DHHS, Div. of Public Health Services

ATTACHMENT 2

Tamera S. Carmichael

Laconia, NH 03246 | (386) 546-6282 | tcarmichael@ppnh.org | www.linkedin.com/in/tameracarmichael

SUMMARY

A Proven program administrator with 29 years of experience developing effective social support programs. Secured over \$1.4 million in program funding to improve the social determinants of health for underserved families and individuals. Served on over 15 boards and coalitions to establish inter-organizational partnerships and foster community collaboration. Supervised 5 diverse programs with 25 team members to create and implement holistic public policies.

EDUCATION

University of South Florida Tampa, FL
Bachelor of Arts in Sociology 1988

Saint Petersburg College Clearwater, FL
Associate of Arts Degree 1986

PROFESSIONAL EXPERIENCE

Partnership for Public Health Inc. Laconia, NH
Executive Director 2020 - Present

- ☛ Strategic planning; grants/contracts; community relations; and resource development leadership
- ☛ Fiscal Oversight for organization's budget exceeding \$3 million
- ☛ Effective management and development more than 20 diverse employees, interns, and volunteers
- ☛ Administration of Regional Public Health Network: CHIP/CHA development and implementation

State of Florida Department of Health Gainesville, FL
Program Development Administrator 2008 - 2020

- ☛ Responsible for development and management of 5 public health programs whose budgets exceed \$2 million
- ☛ Establish and monitor contracts for North Central Florida Health Department Consortium
- ☛ Effective management and development of 25 diverse employees, interns, and volunteers
- ☛ Over 8 years member of CHIP/CHA Steering Committee and Performance Management Council

Bay Area Bail Bonds & Investigations, Inc. Clearwater, FL
Owner/Operator 2001 - 2008

- ☛ Qualified and wrote more than \$2 million monthly in commercial bail indemnities
- ☛ Managed 9 employees of diverse backgrounds as well as payroll, accounts receivable, and accounts payable
- ☛ Served as Secretary of the Pinellas County Bail Bond Association
- ☛ Used investigation techniques and critical analytical skills to locate and retrieve delinquent sureties

Mease Manor Inc. Dunedin, FL
Social Services Director 1998 - 2001

- ☛ Monitored compliance and documentation per State and Federal Regulations in a long-term care facility
- ☛ Established interdepartmental plans of care for residents and supervised multiple employees of diverse backgrounds and responsibilities
- ☛ Inaugural winner of the Florida Healthcare Association's Social Service Worker of the Year award
- ☛ Established family/caregiver support group
- ☛ Collaborated with community services to provide quality care and ensure psychosocial well-being of residents and responsible parties

Suncoast Hospital

Patient Service Coordinator I

Largo, FL

1993 – 1995

- ☛ Monitored compliance and documentation per State and Federal Regulations in a skilled nursing and acute care facilities
- ☛ Provided individualized discharge planning and interdepartmental coordination for patients
- ☛ On-call rotation as Patient Service Coordinator for all hospital departments (surgery, Maternity, ICU, etc.)

Family Resources, Inc.

Youth Care Worker III

St. Petersburg, FL

1990 – 1993

- ☛ Care and Supervision of children 9-18 years old in a crisis/runaway shelter, phone crisis counsel
- ☛ Supervised staff and volunteers, recruited and trained volunteers, marketing and fund raising
- ☛ Interfaced with law enforcement, child protective services, and victims' advocates
- ☛ Supervised visits with parents and children
- ☛ Completed necessary documentation for a non-profit organization per guidelines

**LICENSURE AND
CERTIFICATIONS**

State of New Hampshire Notary Public

Florida Certified Contract Manager

State Certified Contract Administrator

SKILLS

Soft: Program Development, Employee Recruitment and Empowerment, Community Collaboration, Effective Communication, Public Speaking, Strategic Planning, and Quality Improvement, Leadership

Hard: Microsoft Office Suite, Proprietary Software, Database Management, IS200.b FEMA Emergency Management, Financial Management, Regulatory Compliance, Contract Administration, and Grant Writing

CARISSA ELPHICK

EDUCATION

University of New Hampshire, Durham, New Hampshire

Master of Arts Degree in Justice Studies, (Graduating GPA: 3.92)

September 2013

Saint Joseph's College of Maine, Standish, Maine

Bachelor of Arts Degree in Psychology with Summa Cum Laude Honors (Graduating GPA: 3.90)

May 2011

EXPERIENCE

Partnership for Public Health, Laconia, NH

Director, Human Service Programs

May 2017- Present

- Responsible for all deliverables associated with ServiceLink Resource Center program, a contract of Bureau of Elderly and Adult Services to include Options Counseling, NH Family Caregiver Program, State Health Insurance Assistance Program, and Veteran-Directed Program. Oversight of two locations in both Belknap and Carroll County;
- Direct supervision of seven employees to include designing and facilitating professional development plans;
- Participated in the development of agency strategic plan and serve as agency lead of all activities related to healthy aging on both a local and statewide level;
- Member of the Winnepesaukee Public Health Council and Carroll County Coalition for Public Health and facilitate a regional collaborative of stakeholders responsible for the goals and objectives in the Community Health Improvement Plan relating to healthy aging;
- Facilitate regional NH CarePath meeting, a statewide and regional partnership dedicated to coordinated access for long term supports and services;
- Effective leader and team member willing to stray from the norm to find creative solutions for best outcomes.
- Advocate coalition building and breaking down silos to move partners closer to an integrated model of care.
- Assist with agency strategic marketing, communication, sustainability, and development plans to include grant writing.

Community Health Services Network LLC, Laconia, NH

Executive Director

August 2020 - Present

- Direct an Integrated Delivery Network (IDN) comprised of 31 healthcare and social service agencies via a Medicaid 1115 waiver providing innovative programs and strategies to transform the delivery of care and improve health outcomes for participants faced with mental health and/or substance use disorders.
- Serve as the face of our IDN for all State, County or media activities. Serve as the communications hub and liaison for partners while working closely with organizational leadership, board of directors, network partners and staff to strategically move and affect project outcomes.
- Manage and direct all fiscal operations, including budget oversight, authorizing expenditures, reimbursements, grant tracking, accounting and coordinating financial reporting.
- Provide oversight of six project workgroups by providing leadership, guidance and technical assistance needed to support teams in meeting project deadlines and goals. Workgroups include HIT, Integrated Health, Workforce, Supportive Community Re-Entry, Expansion in Intensive Outpatient Treatment and Enhanced Care Coordination for High Needs Population. Each project has a specific focus of integrating one's behavioral health needs within their primary care, identifying the social determinants of health and connecting to appropriate social services.

Long Term Support Counselor/Care Transitions Specialist

December 2014 - May 2017

- Perform person-centered options counseling to connect individuals to long term supports and services;
- Screen for eligibility and assist consumers with applications for assistance for state benefits, housing, other community resources;
- Certified State Health Insurance Assistance Program (SHIP) Counselor assisting clients with Medicare related questions and enrollments in cost-saving programs to include assisting low-income individuals and those living in rural locations;
- Assistance with discharge planning and provide follow-up after discharge for high risk patients at Lakes Region General Hospital in order to reduce readmission rates;
- Created and facilitate community wrap-around team consisting of mental health, law enforcement, fire/EMS, healthcare, and social services.

CARISSA ELPHICK

Merrimack County Advocacy Center, Concord, New Hampshire
Program Assistant/Forensic Interviewer

May 2013-November 2014

- Coordinate a multidisciplinary team of 29 law enforcement agencies, child protective service workers, crisis center advocates, prosecutors, mental health professionals, and medical professionals to include facilitating team meetings and case review;
- Coordinate, schedule, and conduct forensic interviews of victims of child abuse and adult sexual assault;
- Creation, coordination, and implementation of outreach and prevention projects;
- Assist in agency sustainability through fundraising and community relationship building.

State of New Hampshire Judicial Branch, Franklin, New Hampshire
Court Assistant II

January 2012-July 2012

- Daily docketing of incoming law enforcement complaints and judicial mail;
- Scheduling hearings and case management on all adoptions, name changes, minor guardianships, and trusts

OTHER NOTABLE EXPERIENCE

- **Advisory Council Member, Tri-State Learning Collaborative on Aging** February 2021
- **Founding Member, Gilford Neighbors** January 2021
- **Ambassador Charting the Life Course**
- **Home and Community Based Services Conference** August 26, 2019
Presenter
- **Founding Board Member, Huggins' Hospital Rural Health Network** November 2018
- **ALS Association of Northern New England Annual Conference** November 2018
Presenter
- **Leadership Lakes Region** Class of 2017
- **State Health Insurance Assistance Program - Program Specialist Certification** 2016
NH Public Health Association November 15, 2016
Presenter
- **Person-Centered Thinking and Options Counseling Certifications** September 2016
- **Certified Resource Specialist for Aging/ Disability (CIRS A/D)** May 2015
- **Forensic Interviewer Training**
- **National Children's Alliance** February 2014
- **Team Facilitator Training**
- **Presented by Northeast Regional Children's Advocacy Center** November 2013
- **Forensic Interviewer Training**
- **Presented by Granite State Children's Alliance** May 2013

COURTNEY DEVOST

●●●●●●●●●● NH 03222 | (603)●●●●●● | courtney.devost@outlook.com

Objective

Hard working business administration graduate with proven human resources and organizational leadership skills. I am seeking a long-term partnership with a business that will increase my personal growth while simultaneously aiding in the advancement and longevity of the company.

Education

MASTER'S | MAY 2023 | PLYMOUTH STATE UNIVERSITY

Pursuing: Master's in Business Administration

BACHELOR'S | SEPTEMBER 2021 | SOUTHERN NEW HAMPSHIRE UNIVERSITY

Major: Business Administration

ASSOCIATE'S | MAY 2018 | NEW HAMPSHIRE TECHNICAL INSTITUTE

Major: Business Administration

Skills & Abilities

CORE COMPETENCIES

- EXCELENT TIME-MANAGEMENT SKILLS
- DETAIL-ORIENTED AND ORGANIZED
- VERBAL AND WRITTEN COMMUNICATION
- DEDICATED TEAM MEMBER
- ADEPT IN TECHNOLOGY
- MS OFFICE PROFICIENT; 70 WPM
- NOTARY OF PUBLIC, STATE OF NH

SKILLS

- FINANCE
 - In-depth financial understanding and well experienced in accounting, financial statements, invoicing, billing, federal and state compliance, as well as handling cash flow and all reporting.
 - Assisting and aiding in any and all functions and tasks requested of the Finance Director.
- Human Resources
 - With overly competent communication skills with employees, management, and directors; adaptability to all situations that arise, upmost confidentiality in all situations necessary and able to determine when confidentiality is required.
 - Assisting and coordinating events, employee training, and any technical training of new systems.

Certifications & Involvement

HUMAN RESOURCES MANAGEMENT CERTIFICATE | APRIL 2022 | UNIVERSITY OF NH

Certification requiring 6 core courses that range from 4-8 hours long, and satisfactory involvement met.

BOARD OF DIRECTORS | SEPTEMBER 2021 | TAPPLY-THOMPSON COMMUNITY CENTER

Involvement with voting rights. Deciding party of the Finance Committee and Policy Committee.

HEAD COACH | OCTOBER 2015 | NEWFOUND MEMORIAL MIDDLE SCHOOL

Head coach of the Newfound Memorial Middle School girls' basketball team.

Experience

HR & OPERATIONS MANAGER | PARTNERSHIP FOR PUBLIC HEALTH | DECEMBER 2021 – PRESENT

FINANCE & COMPLIANCE SPECIALIST | SEPTEMBER 2020 – DECEMBER 2021

- Follow all necessary business policies and accounting practices: seek to improve/update the finance department's overall internal control policy and procedure manual.
- Provides coordination and administrative support at coalition meetings, events, activities, and trainings as assigned and needed.
- Produce and maintain all necessary data, records, and reports as necessitated by funder(s).
- Complete all reporting requirements fully, accurately, and in a timely manner as specified.
- Assists with all human resource functions, including organizing New Hire personnel files, processing background checks, implementing and tracking employee benefits, retirement plans, insurance, and personnel-related activities.
- Perform other related duties as directed within the finance, operations, and HR functions.
- Provide training and educational information regarding any and all HR changes and necessary advancements.
- Process biweekly payroll, benefits, and employee reimbursements timely and accurately.
- Ensure proper backup and retention of account records and files.
- Provide technical assistance to staff with payroll, Excel, other software and hardware.
- Assist with all necessary and requested tasks of the Finance Director, as well as related duties as directed by the Executive Director, including but not limited to finance and HR functions of the organization.
- Maintain all finance, business contracts, and reporting.
- Assist in maintaining and coordinating all operational events within the organization.
- Aiding in process and form creation with the organizational leadership.

LEASING ADMINISTRATIVE SPECIALIST | FORT BLISS FAMILY HOMES | JUNE 2018 – MARCH 2019

- Maintain calendars for the leasing team.
- Draft and complete contracts regularly.
- Assist in telecommunications to prospective residents and assist with assignments of available homes.
- Serve as a point of contact between residents and the community.

- Assisted management directly with marketing and communications.
- Regular data entry and configuration.

ADMINISTRATIVE ASSISTANT | COMMUNITY HEALTH SERVICES NETWORK | APRIL 2017 – MAY 2018

- Attend and take minutes at all Board and Finance meetings as well as various project meetings.
- Draft and proofread letters, emails and documents as well as design spreadsheets, invitations and business materials when needed.
- Create and proofread reports for the Executive Director and other superiors to reflect previous implementation and progress.
- Assist with review and submission of payments and reimbursements through Community Health Services Network.
- Assist with human resource duties such as reviewing resumes, drafting emails for interviews, setting up appointment times and assisting in the interview and hiring processes.
- Coordinate and complete preparation of monthly, quarterly and annual meetings.
- Assist with daily operations within the Community Health Services Network office.

Public Service

BOARD OF DIRECTOR'S MEMBERSHIP | TAPPLY-THOMPSON COMMUNITY CENTER | SEPTEMBER 2021 – PRESENT

- Working directly with the Executive Committee and other members to make well executed judgments regarding the organization and any of its key decisions. While on this board, I am also apart of the following committees:
 - Finance Committee
 - Policy Committee

Joseph Vano

Skills

Critical Thinking Complex Problem Solving
Learning Strategies Judgment and Decision Making
Active Listening Social Perceptiveness

Experience

Partnership for Public Health

October 2022 – Present

Prevention Program Manager

Responsible for overseeing all deliverables associated with Suicide and Substance Misuse Prevention program: a contract of Bureau of Drug and Alcohol Services, a Drug Free Communities Grant from the Center of Disease Control, and Veteran Suicide Prevention funding from the NH Department of Military Affairs and Veteran Services.

Direct supervision of two employees to include designing and facilitating professional development plans.

Veteran Directed Care Case Manager/ Caregiver Program Coordinator

Perform person- centered options counseling to connect individuals to long term supports and services.

Screen for eligibility and assist consumers with applications for assistance for state benefits, housing, other community resources.

Manage Veteran's program budgets and in home aid employees.

Manage the budget of participants in Servicelink's Caregiver Program.

Program Coordinator (Forensic Interviewer)

Merrimack County Advocacy Center.

June 2022 – September 2022

Work with County Attorneys and Investigators from local and state police to facilitate and conduct Forensic Interviews.

Coordinate and schedule Forensic Interviews.

Assist Families with local resources and case management.

Engage with community partners for fundraisers and public outreach programs.

Diversion Program Coordinator

Becket Family of Services

January 2022 – June 2022

Facilitate Diversion Adventure Therapy group sessions via telehealth and in person.

Ensure completion of documentation and tracking sheets in compliance with agency/accreditation standards for Diversion cases.

Provide policy and procedural training, guidance, and support for Diversion staff.

Evaluate staff work performance using data analysis to manage adherence to service hours, deadlines, and other documentation/ regulatory requirements.

Build and maintain relationships, ensuring ongoing communication with referral sources, probation department, and any additional collateral team members.

Senior Permanency Coach

Becket Family of Services

May 2021 – January 2022

Coordinate/ Facilitate faculty trainings.

Provide job training to new employees.

Provide oversight and assistance to Permanency Coaches.

Permanency Coach

Becket Family of Services

May 2019 – May 2021

Complete all required clinical documentation within the required time frames, ensuring the use of strength based and Medicaid friendly language.

Build, maintain relationships, collaborate, and meet regularly with DCYF, DJJS and other referring agencies, as well as other collaterals involved in assigned cases.

Serve as family liaisons for referring agency providers, outside service agencies and assist families in navigating the legal system through attending court.

Education

Bachelor's in Criminal Justice

Plymouth State University, Plymouth, NH

Graduated 2019

High School Diploma

Andover High School, Andover, MA

Graduated 2015

STATE OF NEW HAMPSHIRE
 DEPARTMENT OF MILITARY AFFAIRS & VETERANS SERVICES
 RESPONSE TO RFP: RFP 2024-02 Access to Mental Health Services

Proposed Budget Narrative

EIN: 20-2713484

Salary / Wages

Includes the following staff, which are 1.0 FTE with the organization and will be dedicating hours to this specific project. Depending on what portion of the projects are selected, the FTE percentage that will be allocated to the grant will vary accordingly.

Title	Rate	Purpose
Executive Director	\$43.10/hour	To provide supervision to all program staff, contract management oversight, and development/facilitation.
Deputy Director	\$30.23/hour	To provide expertise and management to all program aspects related to the 60+ population.
Director of Finance & Operations	\$26.44/hour	To provide fiscal, budgetary, human resources, and operational expertise and assistance.
Prevention Strategies Manager	\$28.24/hour	To provide expertise and management to all program aspects related to mental health and prevention strategies.
Project Coordinator & Facilitator	\$23/hour	To manage the project and its day-to-day operations.
Marketing Coordinator	\$22/hour	To coordinate and oversee all marketing efforts and strategies regarding community engagement and social media presence.
Office Manager	\$25/hour	To provide resource and event coordination around funding purposes.
IT Support Coordinator	\$18/hour	To provide IT support and software assistance within the program's needs.

Direct: Prevention Program Manager, Project Coordinator, Marketing Coordinator, Office Manager, IT Support Coordinator

Indirect: Executive Director, Deputy Director, Director of Finance & Operations, Accounting Firm and Fees

Employee Benefits

7.65% payroll tax, SUTA taxes, payroll service fees, workers compensation, annually accrued PTO, and employee health, dental, disability, and life insurance benefits for employees eligible and currently on benefit plans.