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Lori A. Weaver
Commissioner

Iain N. Watt
Director

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH SERVICES

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April 14, 2025

Her Excellency, Governor Kelly A. Ayotte
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into **Sole Source** amendments to existing contracts with the Contractors listed below to add funding for increased home visiting services, by increasing the total price limitation by $2,424,233 from $26,700,325 to $29,124,558 with no change to the contract completion dates of September 30, 2028, effective upon Governor and Council approval. 100% Federal Funds.

The individual contracts were approved by Governor and Council as specified in the table below.

Contractor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
Community Action Partnership of Stafford County Dover, NH	177200-B004	Rochester Catchment Area	$3,356,414	$327,844	$3,684,258	O:2/8/23 Item #39; A1:9/25/24 Item #16
Granite VNA, Inc. Concord, NH	174069-R001	Conway and Laconia Catchment Areas	$3,033,556	$292,159	$3,325,715	O:2/8/23 Item #39; A1:6/14/23 Item #26; A2:5/1/24 Item #18 A3:9/25/24 Item #16
The Family Resource Center at Gorham Gorham, NH	162412-B001	Berlin and Littleton Catchment Areas	$4,749,651	$630,478	$5,380,129	O:2/8/23 Item #39 A1:6/14/23 Item #27 A2:5/1/24 Item #18 A3:9/25/24 Item #16
Waypoint Manchester, NH	177166-B002	Concord, Manchester, Seacoast and Southern Catchment Areas	$15,560,704	$1,173,752	$16,734,456	O:2/8/23 Item #39 A1: 5/1/24 Item #18 A2: 9/25/24 Item #16

		Total:	$26,700,325	$2,424,233	$29,124,558	

Funds are available in the following accounts for State Fiscal Year 2025, and are anticipated to be available in State Fiscal Years 2026, 2027, 2028 and 2029, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details.

EXPLANATION

This request is **Sole Source** because the Department is amending the scope of services and adding funding to support additional families with home visiting services. The contracts were originally competitively bid in State Fiscal Year 2023 using a Request for Proposals. Each Contractor was the only qualified applicant for their service region and has delivered services effectively to date. The Contractors are also the only Healthy Families America accredited organizations serving the Rochester, Laconia, Conway, Berlin, Littleton, Seacoast, Southern, Manchester and Concord Regions, which is a requirement to program implementation.

The purpose of this request is to allow the Contractors to continue providing voluntary home visiting services to pregnant women and families with children up to five (5) years of age within the designated Division for Child, Youth, and Families (DCYF) catchment areas.

The Contractors provide voluntary home visiting services utilizing the Healthy Families America (HFA) evidence-based home visiting model, its Child Welfare Protocols, and an approved Registered Nurse (RN) home visit model enhancement. The HFA model has shown to improve positive parenting practices, maternal and child health, school readiness, and economic self-sufficiency and parental educational attainment. In addition, families who participate in the HFA model experience less child maltreatment and family violence and fewer referrals into the child welfare system than their non-HFA counterparts.

Approximately 328 families will be served by the program annually. An additional 82 families will be served with the increase in funds.

Should the Governor and Executive Council not authorize this request, eligible families will experience a lapse in home visiting services that prevent child abuse and neglect, family violence, and poor maternal and child health outcomes.

Source of Federal Funds: Assistance Listing Number (ALN) 93.870, FAIN X10MC50315; ALN 93.658, FAIN 2301NHFOST.

Respectfully submitted,

for Lori A. Weaver
Commissioner

Fiscal Detail Sheet
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: PUBLIC-HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, HOME VISITING FORMULA GNT
94% Federal Funds 6% General Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$192,620.00	$0.00	$192,620.00
2023	102-500731	Contracts for Program Services	90083208	$16,995.00	$0.00	$16,995.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$317,640.00	$0.00	$317,640.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$79,410.00	$0.00	$79,410.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$238,230.00	$0.00	$238,230.00
2025	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$83,867.00	$83,867.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$60,598.00	$0.00	$60,598.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$181,793.00	$0.00	$181,793.00
2026	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$62,900.00	$62,900.00
2026	102-500731	Contracts for Program Svcs	90005896	$52,456.00	$0.00	$52,456.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$54,327.00	$0.00	$54,327.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$162,981.00	$0.00	$162,981.00
2027	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$84,383.00	$84,383.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$54,327.00	$0.00	$54,327.00
2028	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$91,139.00	$91,139.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$162,981.00	$0.00	$162,981.00
2028	102-500731	Contracts for Program Svcs	90005896	$45,028.00	$0.00	$45,028.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$54,327.00	$0.00	$54,327.00
2029	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$25,555.00	$25,555.00
			SUBTOTAL:	$1,673,713.00	$327,844.00	$2,001,557.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$692,250.00	$0.00	$692,250.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$950,000.00	$0.00	$950,000.00
2024	102-500731	Contracts for Program Services	90005896	$54,682.00	$0.00	$54,682.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$237,500.00	$0.00	$237,500.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$712,500.00	$0.00	$712,500.00
2025	102-500731	Contracts for Program Services	90005896	$27,341.00	$0.00	$27,341.00
2025	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$279,605.00	$279,605.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$230,356.00	$0.00	$230,356.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$691,068.00	$0.00	$691,068.00
2026	102-500731	Contracts for Program Services	90005896	$167,050.00	$0.00	$167,050.00
2026	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$209,704.00	$209,704.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$227,975.00	$0.00	$227,975.00

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2027	074-500589	Grants for Pub Asst and Rel	90083213	$683,924.00	$0.00	$683,924.00
2027	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$236,568.00	$236,568.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$227,975.00	$0.00	$227,975.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$683,924.00	$0.00	$683,924.00
2028	102-500731	Contracts for Program Services	90005896	$172,818.00	$0.00	$172,818.00
2028	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$349,795.00	$349,795.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$227,975.00	0.00	$227,975.00
2029	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	98,080.00	$98,080.00
			SUBTOTAL:	$5,987,338.00	$1,173,752.00	$7,161,090.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$80,533.00	$0.00	$80,533.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$340,529.00	$0.00	$340,529.00
2024	102-500731	Contracts for Program Services	90005896	$6,667	$0.00	$6,667.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$85,311.00	$0.00	85,311.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$252,640.00	$3,293.00	255,933.00
2025	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$72,969.00	72,969.00
2025	102-500731	Contracts for Program Services	90005896	$3,333.00	$0.00	$3,333.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$60,326.00	$0.00	$60,326.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$180,976.00	$0.00	$180,976.00
2026	102-500731	Contracts for Program Services	90005896	$34,869.00	$0.00	$34,869.00
2026	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$54,522.00	$54,522.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$51,997.00	$0.00	$51,997.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$155,991.00	$0.00	$155,991.00
2027	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$56,984.00	$56,984.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$51,997.00	$0.00	$51,997.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$155,991.00	$0.00	$155,991.00
2028	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$81,527.00	$81,527.00
2028	102-500731	Contracts for Program Services	90005896	$40,243.00	$0.00	$40,243.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$51,997.00	$0.00	$51,997.00
2029	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$22,864.00	$22,864.00
			SUBTOTAL:	$1,553,400.00	$292,159.00	1,845,559.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$269,729.00	$0.00	$269,729.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$378,354.00	$0.00	$378,354.00
2024	102-500731	Contracts for Program Svcs	90005896	$33,571	$0.00	$33,571.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$92,583.00	$0.00	$92,583.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$277,749.00	$0.00	$277,749.00
2025	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$153,577.00	$153,577.00
2025	102-500731	Contracts for Program Svcs	90005896	$25,179	$0.00	$25,179.00

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2026	074-500589	Grants for Pub Asst and Rel	90083211	$117,573.00	$0.00	$117,573.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$352,718.00	$0.00	$352,718.00
2026	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$115,183.00	$115,183.00
2026	102-500731	Contracts for Program Svcs	90005896	$57,079.00	$0.00	$57,079.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$125,903.00	$0.00	$125,903.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$377,707.00	$0.00	$377,707.00
2027	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$126,085.00	$126,085.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$125,903.00	$0.00	$125,903.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$377,707.00	$0.00	$377,707.00
2028	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$184,032.00	$184,032.00
2028	102-500731	Contracts for Program Svcs	90005896	$90,920.00	$0.00	$90,920.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$125,903.00	$0.00	$125,903.00
2029	074-500589	Grants for Pub Asst and Rel	TBD	$0.00	$51,601.00	$51,601.00
			SUBTOTAL:	$2,828,578.00	$630,478.00	3,459,056.00
			Total:	$12,043,029.00	$2,424,233.00	$14,467,262.00

05-95-92-920510-3382 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIVISION, BUREAU OF DRUG & ALCOHOL SVCS, GOVERNOR COMMISSION FUNDS
100% Other Funds

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	92057502	$108,000.00	$0.00	$108,000.00
			SUBTOTAL:	$108,000.00	$0.00	$108,000.00
			TOTAL:	$108,000.00	$0.00	$108,000.00

05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, MATERNAL - CHILD HEALTH,
100% General Funds

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	102-500731	Contracts for Program Svcs	90004019	$56,250.00	$0.00	$56,250.00
2024	102-500731	Contracts for Program Svcs	90004019	$75,000.00	$0.00	$75,000.00
2025	102-500731	Contracts for Program Svcs	90004019	$0.00		$0.00
			SUBTOTAL:	$131,250.00	$0.00	$131,250.00
			TOTAL:	$131,250.00	$0.00	$131,250.00

05-95-09-901010-5771 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF HEALTHCARE ACCESS, EQUITY & POLICY, COVID-19 HEALTH DISPARITIES
100% Federal Funds

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577160	$105,000.00	$0.00	$105,000.00
2023	074-500589	Grants for Pub Asst and Relief	90577150	$157,500.00	$0.00	$157,500.00
			SUBTOTAL:	$262,500.00	$0.00	$ 262,500.00

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577150	$15,000.00	$0.00	$15,000.00
2023	074-500589	Grants for Pub Asst and Relief	90577150	$101,512.00	$0.00	$101,512.00

Fiscal Detail Sheet
Home Visiting Services
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2024	074-500589	Grants for Pub Asst and Relief	90577150	$85,000.00	$0.00	$85,000.00
2024	074-500589	Grants for Pub Asst and Relief	90577150	$100,000.00	$0.00	100,000.00
			SUBTOTAL:	$301,512.00	$0.00	301,512.00
			TOTAL:	$564,012.00	$0.00	$564,012.00

05-95-90-902010-2451-HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, ARP - MIEC HOME VISITING
100% Federal Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$17,532.00	$0.00	$17,532.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$54,231.00	$0.00	$54,231.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$13,558.00	$0.00	$13,558.00
			SUBTOTAL:	$85,321.00	$0.00	$85,321.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$114,064.00	$0.00	$114,064.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$125,000.00	$0.00	$125,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$142,350.00	$0.00	$142,350.00
			SUBTOTAL:	$381,414.00	$0.00	381,414.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class / Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$72,591.00	$0.00	$72,591.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$8504.00	$0.00	$8,504.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$2130.00	$0.00	$2,130.00
			SUBTOTAL:	$83,225.00	$0.00	$83,225.00

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$68,714.00	$0.00	$68,714.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$50,000.00	$0.00	$50,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$56,532.00	$0.00	$56,532.00
			SUBTOTAL:	$175,246.00	$0.00	$175,246.00
			TOTAL:	$725,206.00	$0.00	$725,206.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-29580000, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD – FAMILY SERVICES
50% Federal Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$199,673.00	$0.00	$199,673.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00	$0.00	$266,230.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00	$0.00	$266,230.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$266,230.00	$0.00	$266,230.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$266,230.00	$0.00	$266,230.00

Fiscal Detail Sheet
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2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$266,230.00	$0.00	$266,230.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$66,557.00	$0.00	$66,557.00
			SUBTOTAL:	$1,597,380.00	$0.00	$1,597,380.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$125,960.00	$0.00	$125,960.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$271,746.00	$0.00	$271,746.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$232,822.00	$0.00	$232,822.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$232,822.00	$0.00	$232,822.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$232,822.00	$0.00	$232,822.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$232,822.00	$0.00	$232,822.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$67,937.00	$0.00	$67,937.00
			SUBTOTAL:	$1,396,931.00	$0.00	$1,396,931.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$164,133.00	$0.00	$164,133.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,845.00	$0.00	$218,845.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,844.00	$0.00	$218,844.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$218,844.00	$0.00	$218,844.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$218,844.00	$0.00	$218,844.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$218,844.00	$0.00	$218,844.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$54,711.00	$0.00	$54,711.00
			SUBTOTAL:	$1,313,065.00	$0.00	$1,313,065.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,102,682.00	$0.00	$1,102,682.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00	$0.00	$1,470,242.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00	$0.00	$1,470,242.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$1,470,242.00	$0.00	$1,470,242.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$1,470,242.00	$0.00	$1,470,242.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$1,470,242.00	$0.00	$1,470,242.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$367,560.00	$0.00	$367,560.00
			SUBTOTAL:	$8,821,452.00	$0.00	$8,821,452.00
			TOTAL:	$13,128,828.00	$0.00	$13,128,828.00
			GRAND TOTAL:	$26,700,325.00	$2,424,233.00	$29,124,558.00

State of New Hampshire
Department of Health and Human Services
Amendment #2

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Community Action Partnership of Strafford County ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item #39), as amended on September 25, 2024 (Item #16), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8., Price Limitation, to read:

   $3,684,258

2. Modify Exhibit B, Scope of Services, Section 3.7.2., to read:

   3.7.2. Utilize evidence-based curricula to support prenatal individuals and newly parenting families including but not limited to:

   3.7.2.1. Parents as Teachers (PAT), as an annually trained "Approved user"; or

   3.7.2.2. Growing Great Kids (GGK) with certification of training.

3. Modify Exhibit C, Payment Terms; Section 1, to read:

   1. This Agreement is funded by:

      1.1. 75.68% Federal funds from:

         1.1.1. 51.68% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the DHHS Health Resources and Services Administration (HRSA), Assistance Listing Number (ALN) 93.870, FAIN X10MC43595; and as awarded on September 2, 2022, FAIN X10MC46878; and as awarded on August 29, 2023, FAIN X10MC50315; and as awarded on August 27, 2024, FAIN X10MC53631.

         1.1.2. 21.68% Foster Care Title IV-E, as awarded on October 1, 2022, by the Administration of Children Youth & Families (ACF), ALN 93.658, FAIN (FFPSA) 2301NHFOST and FAIN 2201NHFOST.

         1.1.3. 2.32% American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the DHHS HRSA, ALN 93.870, FAIN X11MC41935; and as awarded on October 28, 2021, FAIN X11MC45263.

      1.2. 24.32% General funds.

4. Modify Exhibit C, Payment Terms, Section 7, to read:

   7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement and shall be in accordance with the approved line items as specified in Exhibit C-1, Budget Sheet SFY 2023 through Exhibit C-12, Budget Sheet SFY 2029 – Amendment #2.

Contractor Initials DS BAP
Date 4/3/2025

5. Modify Exhibit C-3, Budget Sheet, SFY 2025 – Amendment #1, by replacing it in its entirety with Exhibit C-3, Budget Sheet, SFY 2025 – Amendment #2, which is attached hereto and incorporated by reference herein.
6. Modify Exhibit C-9, Budget Sheet SFY 2026 – Amendment #1, by replacing it in its entirety with Exhibit C-9, Budget Sheet, SFY 2026 – Amendment #2, which is attached hereto and incorporated by reference herein.
7. Modify Exhibit C-10, Budget Sheet SFY 2027 – Amendment #1, by replacing it in its entirety with Exhibit C-10, Budget Sheet, SFY 2027 – Amendment #2, which is attached hereto and incorporated by reference herein.
8. Modify Exhibit C-11, Budget Sheet SFY 2028 – Amendment #1, by replacing it in its entirety with Exhibit C-11, Budget Sheet, SFY 2028 – Amendment #2, which is attached hereto and incorporated by reference herein.
9. Modify Exhibit C-12, Budget Sheet SFY 2029 – Amendment #1, by replacing it in its entirety with Exhibit C-12, Budget Sheet, SFY 2029 – Amendment #2, which is attached hereto and incorporated by reference herein.

Contractor Initials BAP
Date 4/3/2025

All terms and conditions of the Contract and prior amendments not modified by this Amendment remain in full force and effect. This Amendment shall be effective upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

4/7/2025
Date

DocuSigned by:
Iain Watt
B7708BC3E0704C7...
Name: Iain Watt
Title: Director - DPHS

Community Action Partnership of Strafford County

4/3/2025
Date

DocuSigned by:
Betsey Andrews Parker
8519SADCCB0648E...
Name: Betsey Andrews Parker
Title: CEO

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

4/16/2025
Date

DocuSigned by:
Robyn Guarino
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Exhibit C-3 Budget Sheet, SFY 2025 - Amendment #2

New Hampshire Department of Health and Human Services	
Contractor Name:	*Community Action Partnership of Strafford County*
Budget Request for:	*Home Visiting Services*
Budget Period	*SFY 2025 (G&C Approval Date - 6/30/25)*
Indirect Cost Rate (if applicable)	15.9%
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$283,061.48
2. Fringe Benefits	$23,795.03
3. Consultants	$2,250.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$1,500.00
5.(a) Supplies - Educational	$1,900.00
5.(b) Supplies - Lab	
5.(c) Supplies - Pharmacy	
5.(d) Supplies - Medical	
5.(e) Supplies Office	$654.00
6. Travel	$3,500.00
7. Software	
8. (a) Other - Marketing/ Communications	$223.19
8. (b) Other - Education and Training	$2,908.40
8. (c) Other - Other (specify below) -	
Subscriptions	$1,900.00
Insurance	$1,088.63
postage	$90.00
telephone/internet	$10,550.00
Occupancy	$14,300.00
9. Subrecipient Contracts	$0.00
Total Direct Costs	$347,720.73
Total Indirect Costs	$53,786.27
TOTAL	**$401,507.00**

Contractor Initials: BAP (DS)

Date: 4/3/2025

Exhibit C-9, Budget Sheet SFY 2026 - Amendment #2

New Hampshire Department of Health and Human Services		
Contractor Name:	Community Action Partnership of Strafford County	
Budget Request for:	Home Visiting Services - Home Visiting Services Grant	
Budget Period	SFY 26 (7/1/25 - 6/30/26)	
Indirect Cost Rate (if applicable)	15.9%	
Line Item	**Program Cost - Funded by DHHS**	
1. Salary & Wages		$217,979.22
2. Fringe Benefits		$41,416.04
3. Consultants		$2,400.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.		$1,500.00
5.(a) Supplies - Educational		$1,137.00
5.(b) Supplies - Lab		
5.(c) Supplies - Pharmacy		
5.(d) Supplies - Medical		
5.(e) Supplies - Office		$750.00
6. Travel		$4,600.00
7. Software		$0.00
8. (a) Other - Marketing/ Communications		$289.57
8. (b) Other - Education and Training		$6,100.00
8. (c) Other - Other (occupancy)		$14,400.00
Other (phone/internet)		$16,800.00
Other (postage)		$110.00
Other (subscriptions)		$600.00
Other (audit and legal)		
Other (insurance)		$1,308.00
9. Subrecipient Contracts		$0.00
Total Direct Costs		$309,389.83
Total Indirect Costs		$48,357.17
TOTAL		$357,747.00

Contractor Initials: BAP (DS)

Date: 4/3/2025

Exhibit C-10, Budget Sheet SFY 2027 - Amendment #2

New Hampshire Department of Health and Human Services	
Contractor Name:	Community Action Partnership of Strafford County
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	SFY 27 (7/1/26 - 6/30/27)
Indirect Cost Rate (if applicable)	15.9%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$165,286.24
2. Fringe Benefits	$31,404.38
3. Consultants	$2,400.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	
5.(a) Supplies - Educational	$1,175.00
5.(b) Supplies - Lab	$0.00
5.(c) Supplies - Pharmacy	$0.00
5.(d) Supplies - Medical	$0.00
5.(e) Supplies - Office	$750.00
6. Travel	$4,800.00
7. Software	$0.00
8. (a) Other - Marketing/ Communications	$298.53
8. (b) Other - Education and Training	$3,807.70
8. (c) Other - Other (occupancy)	$14,400.00
Other (phone/internet)	$16,800.00
Other (postage)	$120.00
Other (subscriptions)	$600.00
Other (insurance)	$1,308.00
9. Subrecipient Contracts	$0.00
Total Direct Costs	$243,149.85
Total Indirect Costs	$38,541.15
TOTAL	$281,691.00

Contractor Initials: BAP (DS)

Date: 4/3/2025

Exhibit C-11, Budget Sheet SFY 2028 - Amendment #2

New Hampshire Department of Health and Human Services	
Contractor Name:	Community Action Partnership of Strafford County
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	SFY 28 (7/1/27 - 6/30/28)
Indirect Cost Rate (if applicable)	15.9%
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$217,185.49
2. Fringe Benefits	$41,265.24
3. Consultants	$2,400.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0.00
5.(a) Supplies - Educational	$2,275.00
5.(b) Supplies - Lab	$0.00
5.(c) Supplies - Pharmacy	$0.00
5.(d) Supplies - Medical	$0.00
5.(e) Supplies - Office	$750.00
6. Travel	$3,000.00
7. Software	$0.00
8. (a) Other - Marketing/ Communications	$300.00
8. (b) Other - Education and Training	$5,321.88
8. (c) Other - Other (occupancy)	$14,400.00
Other (phone/internet)	$16,800.00
Other (postage)	$120.00
Other (subscriptions)	$600.00
Other (insurance)	$1,308.00
9. Subrecipient Contracts	$0.00
Total Direct Costs	$305,725.61
Total Indirect Costs	$47,749.39
TOTAL	$353,475.00

Contractor Initials: BAP (DS)

Date: 4/3/2025

Exhibit C-12, Budget Sheet SFY 2029 - Amendment #2

New Hampshire Department of Health and Human Services	
Contractor Name:	Community Action Partnership of Strafford County
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	SFY 29 (7/1/28 - 9/30/28)
Indirect Cost Rate (if applicable)	15.9%
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$49,217.70
2. Fringe Benefits	$9,351.36
3. Consultants	$750.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0.00
5.(a) Supplies - Educational	$57.97
5.(b) Supplies - Lab	$0.00
5.(c) Supplies - Pharmacy	$0.00
5.(d) Supplies - Medical	$0.00
5.(e) Supplies - Office	$0.00
6. Travel	$900.00
7. Software	$0.00
8. (a) Other - Marketing/ Communications	$0.00
8. (b) Other - Education and Training	$500.00
8. (c) Other - Other (occupancy)	$3,600.00
Other (phone/internet)	$4,200.00
Other (postage)	$20.00
Other (audit and legal)	$0.00
Other (insurance)	$326.01
9. Subrecipient Contracts	$0.00
Total Direct Costs	$68,923.04
Total Indirect Costs	$10,958.96
TOTAL	$79,882.00

Contractor Initials: BAP (DS)

Date: 4/3/2025

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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 COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on May 25, 1965. 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: **65583**

Certificate Number: **0007125680**

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 27th day of March A.D. 2025.

David M. Scanlan
Secretary of State

Docusign Envelope ID: 7E4F00AF-FDE1-4B0F-A85C-CE09698120E8

CERTIFICATE OF AUTHORITY

I, **Sarah Kuhl**, hereby certify that:

1. I am a duly elected Clerk/Secretary/Officer of **Community Action Partnership of Strafford County**.

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 **November 20, 2024**, at which a quorum of the Directors/shareholders were present and voting.

VOTED: That **Betsey Andrews Parker, CEO, Leslie Craigen, CFO, Jamie Swan, CPO and John Moynihan, CAO** (may list more than one person)

are duly authorized on behalf of **Strafford Community Action Partnership of Strafford County** 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 affect 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 was valid thirty (30) days prior to and 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: 4/4/25

Sarah Kuhl
Signature of Elected Officer

Name: Sarah Kuhl

Title: Secretary, CAPSC Board of Director

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 02/11/2025

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	CONTACT NAME: Teri Davis	
CGI Insurance, Inc. 5 Dartmouth Drive Auburn NH 03032	PHONE (A/C, No, Ext): (877) 562-8954	FAX (A/C, No): (866) 574-2443
	E-MAIL ADDRESS: TDavis@CGIBusinessInsurance.com	

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Hanover Insurance Company	22292
INSURER B:	Eastern Alliance	10724
INSURER C:	Philadelphia Indemnity	23850
INSURER D:		
INSURER E:		
INSURER F:		

INSURED
Community Action Partnership of Strafford County
DBA: Strafford CAP
577 Central St, Ste 10
Dover 03820

COVERAGES **CERTIFICATE NUMBER:** 24-25 Master **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	[X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR [X] Abuse Liability: $1M GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [ ] PRO-JECT [X] LOC [ ] OTHER:			ZHVA192135 11	07/01/2024	07/01/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG Professional Liability	$ 1,000,000 $ 100,000 $ 10,000 $ 1,000,000 $ 3,000,000 $ Included $ 1,000,000
A	AUTOMOBILE LIABILITY [X] ANY AUTO [ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS [X] HIRED AUTOS ONLY [X] NON-OWNED AUTOS ONLY			AWVA156930	07/01/2024	07/01/2025	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) Uninsured motorist	$ 1,000,000 $ $ $ $ 1,000,000
A	[X] UMBRELLA LIAB [X] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [X] RETENTION $ 0			UHVA192136	07/01/2024	07/01/2025	EACH OCCURRENCE AGGREGATE	$ 4,000,000 $ 4,000,000 $
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N [N] If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		01000011379-2024A	07/01/2024	07/01/2025	[X] PER STATUTE [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ 1,000,000 $ 1,000,000 $ 1,000,000
C	Directors & Officers EPLI with Crime			PHSD1807749-007	07/01/2024	07/01/2025	Aggregate Per Claim Crime Aggregate	$8,000,000 $3,000,000 $1,000,000

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

Workers Comp 3A State: NH

CERTIFICATE HOLDER

State of NH, Dept of Health and Human Services
129 Pleasant St
Concord NJ 03301

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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community Action PARTNERSHIP of Strafford County

Administrative Office:
577 Central Avenue, Suite 10
Dover, NH 03820
603-435-2500

Early Childhood Education Centers:
577 Central Avenue, Suite 50
Dover, NH 03820
603-285-9460

120 Main Street
Farmington, NH 03835
603-755-2883

150 Wakefield St, Suite 117
Rochester, NH 03867
603-285-9461

46 Stackpole Road
Somersworth, NH 03878
603-817-5458

Family Resource Centers:
577 Central Ave, Suite 50
Dover, NH 03820
603-435-2500

10 Cold Spring Manor
Rochester, NH 03867
603-435-2500

Outreach Office:
577 Central Avenue, Suite 20
Dover, NH 03820
603-435-2500

10 Cold Spring Manor
Rochester, NH 03867
603-435-2500

Food Pantries:
577 Central Avenue, Suite 10
Dover, NH 03820
603-435-2500

10 Cold Spring Manor
Rochester, NH 03867
603-435-2500

MISSION

Our mission is to reduce barriers to help clients improve their economic stability and well-being through education, advocacy, and partnerships.

community Action PARTNERSHIP of Strafford County

VISION

To eliminate poverty.

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Financial Statements

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEARS ENDED
DECEMBER 31, 2023 AND 2022
AND
INDEPENDENT AUDITORS' REPORTS AND REPORTS ON COMPLIANCE AND INTERNAL CONTROL

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022

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Leone, McDonnell & Roberts
PROFESSIONAL ASSOCIATION
CERTIFIED PUBLIC ACCOUNTANTS
DOVER • WOLFEBORO
NORTH CONWAY

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
Community Action Partnership of Strafford County and Affiliate

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying consolidated financial statements of Community Action Partnership of Strafford County (a New Hampshire nonprofit organization) and Affiliate, which comprise the consolidated statements of financial position as of December 31, 2023 and 2022, and the related consolidated statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the consolidated financial statements.

In our opinion, based on our audits and the report of the other auditors, the consolidated financial statements present fairly, in all material respects, the financial position of Community Action Partnership of Strafford County and Affiliate as of December 31, 2023 and 2022, 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.

We did not audit the financial statements of Academy Street Family Housing, LLC a wholly owned subsidiary, for the year ended December 31, 2023, which statements reflect total assets constituting 8.45 percent of consolidated total assets at December 31, 2023, and total revenues constituting 0.31 percent of consolidated total revenues for the year then ended. Those statements were audited by other auditors, whose report has been furnished to us, and our opinion, insofar as it relates to the amounts included for Academy Street Family Housing, LLC, is based solely on the report of the other auditors.

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 Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Community Action Partnership of Strafford County and Affiliate and to meet our other ethical responsibilities, in accordance with the 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 audit opinions.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the consolidated 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 consolidated financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the consolidated financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Community Action Partnership of Strafford County and Affiliate's ability to continue as a going concern within one year after the date that the consolidated financial statements are available to be issued.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the consolidated financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' 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 consolidated 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 consolidated 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 consolidated 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 Community Action Partnership of Strafford County and Affiliate'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 consolidated financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Community Action Partnership of Strafford County and Affiliate'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.

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Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the consolidated 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 consolidated 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 consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated 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 consolidated 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 June 5, 2024, on our consideration of Community Action Partnership of Strafford County'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 solely 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 Community Action Partnership of Strafford County'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 Community Action Partnership of Strafford County's internal control over financial reporting and compliance.

Vealey, McDonnell & Roberts
Professional Association

Dover, New Hampshire
June 5, 2024

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED STATEMENTS OF FINANCIAL POSITION
DECEMBER 31, 2023 AND 2022

ASSETS

	2023	2022
CURRENT ASSETS		
Cash and cash equivalents	$ 1,806,373	$ 1,355,108
Accounts receivable	1,875,336	2,556,852
Contributions receivable	20,000	30,000
Due from Gafney Home, L.P.	519,890	-
Inventory	413,604	501,752
Prepaid expenses	11,972	52,046
Total current assets	4,647,175	4,495,758
NONCURRENT ASSETS		
Restricted cash	36,215	29,455
Contributions receivable	-	20,000
Security deposits	8,375	8,427
Property, net of accumulated depreciation	6,374,340	5,804,619
Other noncurrent assets	25,503	25,503
Right of use asset	81,312	146,825
Total noncurrent assets	6,525,745	6,034,829
TOTAL ASSETS	$ 11,172,920	$ 10,530,587

LIABILITIES AND NET ASSETS

CURRENT LIABILITIES		
Current portion of long term debt	$ 99,121	$ 95,690
Accounts payable	1,295,505	445,958
Accrued payroll and related taxes	128,546	129,018
Accrued compensated absences	193,093	205,528
Refundable advances	849,145	1,581,774
Other current liabilities	36,309	73,462
Current portion of right of use liability	36,264	65,513
Total current liabilities	2,637,983	2,596,943
NONCURRENT LIABILITIES		
Long term debt, less current portion shown above	3,057,976	2,908,484
Security deposits	2,853	3,201
Right of use liability, less current portion shown above	45,048	81,312
Total noncurrent liabilities	3,105,877	2,992,997
Total liabilities	5,743,860	5,589,940
NET ASSETS		
Without donor restrictions	5,253,075	4,634,862
With donor restrictions	175,985	305,785
Total net assets	5,429,060	4,940,647
TOTAL LIABILITIES AND NET ASSETS	$ 11,172,920	$ 10,530,587

See Notes to Financial Statements

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2023

	Without Donor Restrictions	With Donor Restrictions	Total
CHANGE IN NET ASSETS			
REVENUES AND OTHER SUPPORT			
Grant revenue	$ 16,787,565	$ -	$ 16,787,565
Fees for service	3,030,181	-	3,030,181
Rent revenue	65,397	-	65,397
Public support	329,618	31,514	361,132
In-kind donations	767,224	-	767,224
Interest	1,089	-	1,089
Fundraising	227,539	-	227,539
Other revenue	31,951	-	31,951
Loss on disposal of property	(79,338)	-	(79,338)
Total revenues and other support	21,161,226	31,514	21,192,740
NET ASSETS RELEASED FROM RESTRICTIONS	161,314	(161,314)	-
Total revenues, other support, and net assets released from restrictions	21,322,540	(129,800)	21,192,740
EXPENSES			
Program services			
Child services	5,618,514	-	5,618,514
Community services	1,213,031	-	1,213,031
Energy assistance	4,088,771	-	4,088,771
Housing	5,475,141	-	5,475,141
Weatherization	3,309,103	-	3,309,103
Total program services	19,704,560	-	19,704,560
Supporting activities			
Management and general	1,522,812	-	1,522,812
Fundraising	197,469	-	197,469
Total expenses	21,424,841	-	21,424,841
CHANGE IN NET ASSETS BEFORE ACQUISITION OF PROPERTY AND LAND	(102,301)	(129,800)	(232,101)
ACQUISITION OF PROPERTY AND LAND	720,514	-	720,514
CHANGE IN NET ASSETS	618,213	(129,800)	488,413
NET ASSETS, BEGINNING OF YEAR	4,634,862	305,785	4,940,647
NET ASSETS, END OF YEAR	$ 5,253,075	$ 175,985	$ 5,429,060

See Notes to Financial Statements

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2022

	Without Donor Restrictions	With Donor Restrictions	Total
CHANGE IN NET ASSETS			
REVENUES AND OTHER SUPPORT			
Grant revenue	$ 42,329,510	$ -	$ 42,329,510
Fees for service	1,976,344	-	1,976,344
Rent revenue	58,600	-	58,600
Public support	514,628	113,717	628,345
In-kind donations	988,080	-	988,080
Interest	402	-	402
Fundraising	167,764	-	167,764
Other revenue	1,216	-	1,216
Gain on disposal of property	27,491	-	27,491
Total revenues and other support	46,064,035	113,717	46,177,752
NET ASSETS RELEASED FROM RESTRICTIONS	166,561	(166,561)	-
Total revenues, other support, and net assets released from restrictions	46,230,596	(52,844)	46,177,752
EXPENSES			
Program services			
Child services	5,120,775	-	5,120,775
Community services	2,123,402	-	2,123,402
Energy assistance	4,158,324	-	4,158,324
Housing	31,536,296	-	31,536,296
Weatherization	1,791,979	-	1,791,979
Total program services	44,730,776	-	44,730,776
Supporting activities			
Management and general	1,179,649	-	1,179,649
Fundraising	219,246	-	219,246
Total expenses	46,129,671	-	46,129,671
CHANGE IN NET ASSETS	100,925	(52,844)	48,081
NET ASSETS, BEGINNING OF YEAR	4,533,937	358,629	4,892,566
NET ASSETS, END OF YEAR	$ 4,634,862	$ 305,785	$ 4,940,647

See Notes to Financial Statements

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2023

	Child Services	Community Services	Energy Assistance	Housing	Weatherization	Total Program Services	Intermediate (Allocation) Pools	Management and General	Fundraising	Total
Payroll	$ 3,562,846	$ 276,618	$ 503,425	$ 628,100	$ 220,327	$ 5,191,316	$ 24,927	$) 854,406	$ 79,711	$ 6,150,360
Payroll taxes	293,123	23,014	41,585	51,302	17,595	426,619	2,305	40,988	6,452	476,364
Fringe benefits	233,618	18,544	42,468	49,182	23,018	366,828	-	63,255	5,369	435,452
Retirement	16,331	1,769	2,362	5,463	1,837	27,762	274	4,914	291	33,241
Weatherization material, fuel and client assistance	29,635	32,082	3,413,724	4,394,593	2,977,588	10,847,622	-	-	-	10,847,622
In-kind expenses	167,453	565,933	-	19,827	500	753,713	-	-	13,511	767,224
Consultants and contract labor	58,298	6,383	151	41,791	336	106,959	77,946	167,622	19,414	371,941
Consumable supplies	223,160	154,240	5,563	39,621	4,738	427,322	51,654	18,436	4,875	502,287
Occupancy	700,964	46,498	55,377	130,160	21,160	954,159	(621,635)	84,260	11,291	428,075
Repairs and maintenance	52,295	9,782	5,971	17,494	1,133	86,675	400,030	5,810	1,675	494,190
Insurance	33,359	3,256	1,325	8,559	955	47,454	15,170	56,416	185	119,225
Training and conferences	86,945	12,467	5,012	21,405	19,194	145,023	62	66,709	41,212	253,006
Depreciation	76,962	42,021	391	37,528	4,328	161,230	-	87,399	-	248,629
Travel and transportation	44,974	4,203	224	16,382	6,491	72,274	(12,307)	6,983	894	67,844
Printing and postage	1,074	3,098	2,051	60	19	6,302	-	6,091	10,295	22,688
Equipment and computer	6,952	728	-	2,525	6,628	16,833	16,357	3,458	60	36,708
Interest expense	17,629	6,819	9,144	11,149	3,256	47,997	2,834	42,163	1,280	94,274
Other program support	12,896	5,576	-	-	-	18,472	42,383	13,902	954	75,711
Total expenses	$ 5,618,514	$ 1,213,031	$ 4,088,771	$ 5,475,141	$ 3,309,103	$ 19,704,560	$ -	$ 1,522,812	$ 197,469	$ 21,424,841

See Notes to Financial Statements

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2022

	Child Services	Community Services	Energy Assistance	Housing	Weatherization	Total Program Services	Intermediate (Allocation) Pools	Management and General	Fundraising	Total
Payroll	$ 2,951,365	$ 644,816	$ 388,986	$ 920,193	$ 164,650	$ 5,070,010	$ 73,067	$ 681,722	$ 121,545	$ 5,946,344
Payroll taxes	247,208	57,069	32,974	75,584	12,672	425,507	6,311	63,162	9,833	504,813
Fringe benefits	205,921	34,528	30,366	72,552	19,799	363,166	82	37,953	5,220	406,421
Retirement	14,995	2,162	1,569	6,445	761	25,932	752	5,767	75	32,526
Weatherization material, fuel and client assistance	119,381	20,588	3,606,402	29,909,257	1,514,988	35,170,616	-	-	-	35,170,616
In-kind expenses	14,772	968,268	-	-	-	983,040	-	-	5,040	988,080
Consultants and contract labor	166,829	14,565	2,692	212,431	1,597	398,114	99,599	139,998	12,755	650,466
Consumable supplies	206,399	205,366	9,582	35,892	8,549	465,788	42,120	18,091	3,958	529,957
Occupancy	704,886	70,467	41,243	141,580	18,043	976,219	(670,668)	69,769	6,201	381,521
Repairs and maintenance	39,766	23,938	7,541	10,406	2,763	84,414	440,423	660	2,194	527,691
Insurance	71,667	11,150	1,610	22,841	2,431	109,699	25,811	52,785	259	188,554
Training and conferences	80,246	5,551	2,526	7,834	17,205	113,362	119	26,440	41,454	181,375
Depreciation	80,133	34,099	391	34,641	4,328	153,592	-	85,443	-	239,035
Travel and transportation	42,327	4,808	89	11,836	6,722	65,782	(12,356)	4,699	769	58,894
Printing and postage	3,723	55	10,850	348	96	15,072	-	11,043	5,576	31,691
Equipment and computer	-	-	6,588	24,285	10,544	41,417	29,326	-	1,310	72,053
Interest expense	-	10,658	10,141	12,037	3,070	35,906	5,982	81,815	1,438	125,141
Indirect	105,441	-	-	-	-	105,441	-	(105,441)	-	-
Other program support	65,716	15,314	4,774	38,134	3,761	127,699	(40,568)	5,743	1,619	94,493
Total expenses	$ 5,120,775	$ 2,123,402	$ 4,158,324	$ 31,536,296	$ 1,791,979	$ 44,730,776	$ -	$ 1,179,649	$ 219,246	$ 46,129,671

See Notes to Financial Statements

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022

	2023	2022
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	$ 488,413	$ 48,081
Adjustment to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	248,629	239,035
Amortization of debt issuance costs	3,376	3,376
Acquisition of property and land	(945,514)	-
Acquisition of long term debt	225,000	-
Transfer of property to Gafney Home, L.P.	129,397	-
Loss (gain) on disposal of property	79,338	(27,491)
Decrease (increase) in assets:		
Accounts receivable	681,516	(426,641)
Contributions receivable	30,000	(37,400)
Due from Gafney Home, L.P.	(519,890)	-
Inventory	88,148	9,780
Prepaid expenses	40,074	(15,380)
Other noncurrent assets	-	1,334
Security deposits	52	42
Increase (decrease) in liabilities:		
Accounts payable	849,547	(475,081)
Accrued payroll and related taxes	(472)	(7,229)
Accrued compensated absences	(12,435)	60,294
Refundable advances	(732,629)	630,909
Other current liabilities	(37,153)	73,462
Security deposits	(348)	-
NET CASH PROVIDED BY OPERATING ACTIVITIES	615,049	77,091
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of property	(100,594)	(506,141)
Proceeds on sale of property	19,023	600,000
NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES	(81,571)	93,859
CASH FLOWS FROM FINANCING ACTIVITIES		
Payments made on long term debt	(75,453)	(355,915)
NET CASH USED IN FINANCING ACTIVITIES	(75,453)	(355,915)
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	458,025	(184,965)
CASH AND RESTRICTED CASH, BEGINNING OF YEAR	1,384,563	1,569,528
CASH AND RESTRICTED CASH, END OF YEAR	$ 1,842,588	$ 1,384,563
CASH AND RESTRICTED CASH		
Cash	$ 1,806,373	$ 1,355,108
Restricted cash:		
Insurance escrow	13,477	9,193
Tax escrow	5,931	5,952
Replacement reserves	6,580	4,363
Operating reserve	10,227	9,947
Total cash and restricted cash	$ 1,842,588	$ 1,384,563
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION		
Cash paid during the year for interest	$ 90,898	$ 121,765
SUPPLEMENTAL DISCLOSURE OF NONCASH INVESTING AND AND FINANCING ACTIVITIES		
Acquired property and land	$ 945,514	$ -
Acquired long term debt	$ 225,000	$ -

See Notes to Financial Statements

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022

NOTE 1. ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Organization and Principles of Consolidation

Community Action Partnership of Strafford County (the Agency) is a 501(c)(3) private New Hampshire non-profit organization established under the provisions of the Equal Opportunity Act of 1964. Without services provided by the Agency, many local residents would be without a means to provide for their basic needs, including food, education, child care, utilities assistance, transportation, housing, emergency shelter and access to other services. The mission of the Agency is to educate, advocate and assist people in Strafford County to help meet their basic needs and promote self-sufficiency. The vision of the Agency is to eliminate poverty in Strafford County through compassion, education, self-sufficiency, transparency, accountability, team work, client focus and professionalism.

Academy Street Family Housing, LLC (Academy Street) is a limited liability company which is consolidated because the Agency is the sole member of Academy Street. All significant intercompany items and transactions have been eliminated from the consolidated financial statements.

In addition to the Agency's administrative office located in Dover, the Agency maintains its outreach capacity by operating program offices in Farmington, Milton, Rochester, Dover and Somersworth. The Agency is funded by Federal, state, county and local funds, as well as United Way grants, public utilities, foundation and charitable grant funds, fees for service, private business donations, and donations from individuals. The Agency is governed by a tripartite board of directors made up of elected officials, community leaders from for-profit and non-profit organizations and residents who are low income. The board is responsible for assuring that the Agency continues to assess and respond to the causes and conditions of poverty in its community, achieve anticipated family and community outcomes, and remain administratively and fiscally sound. The Agency administers a wide range of coordinated programs to more than 15,000 people annually, and the programs are designed to have a measurable impact on poverty and health status among the most vulnerable residents: those under the age of 6, the elderly and those living in poverty. This coordinated approach is accomplished by providing a broad array of services that are locally defined, planned and managed with community agencies.

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Basis of Accounting

The consolidated financial statements have been prepared using the accrual basis of accounting in accordance with Generally Accepted Accounting Principles (GAAP) of the United States.

Financial Statement Presentation

The consolidated financial statements have been prepared in accordance with U.S. generally accepted accounting principles (US GAAP), which require the Agency to report information regarding its financial position and activities according to the following net asset classifications:

Net assets without donor restrictions: Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Agency. These net assets may be used at the discretion of the Agency's management and board of directors.

Net assets with donor restrictions: Net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Agency or by passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity.

Donor restricted contributions are reported as increases in net assets with donor restrictions. When restriction expires, net assets are reclassified from net assets with donor restrictions to net assets without donor restrictions in the statement of activities.

At December 31, 2023 and 2022, the Agency had net assets without donor and with donor restrictions.

Refundable Advances

Grants received in advance are recorded as refundable advances and recognized as revenue in the period in which the related services are performed or expenditures are incurred.

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Contributions
All contributions are considered to be available for unrestricted use unless specifically restricted by the donor. Amounts received that are restricted by the donor for future periods or for specific purposes are reported as temporarily restricted or permanently restricted support, depending on the nature of the restriction. However, if a restriction is fulfilled in the same period in which the contribution is received, the Agency reports the support as unrestricted.

Contributed Services
Donated services are recognized as contributions in accordance with FASB ASC No. 958, *Accounting for Contributions Received and Contributions Made,* if the services (a) create or enhance non-financial assets or (b) require specialized skills and would otherwise be purchased by the Agency.

Volunteers provided various services throughout the year that are not recognized as contributions in the financial statements since the recognition criteria under FASB ASC No. 958 were not met.

Fair Value of Financial Instruments
Unless otherwise indicated, fair values of all reported assets and liabilities that are financial instruments approximate the carrying values of such amounts.

Inventory
Inventory materials are fixtures for installation and recorded at cost or net realizable value or if donated, at approximate fair value at date of donation, using the first-in, first-out method.

Property and Depreciation
Property and equipment, which have a cost greater than $5,000, are capitalized at cost or, if donated, at the approximate fair value at the date of donation. Specific grants and awards may have a threshold lower than this amount and that program will abide by those guidelines. Assets are depreciated over their estimated useful lives using the straight-line method as follows:

Buildings and improvements	15 - 40 years
Furniture, equipment and machinery	3 - 10 years
Vehicles	5 - 7 years

Depreciation expense aggregated $248,629 and $239,035 for the years ended December 31, 2023 and 2022, respectively.

Accrued Earned Time
The Agency has accrued a liability of $193,093 and $205,528 at December 31, 2023 and 2022, respectively, for future compensated leave time that its employees have earned and which is vested with the employee.

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Income Taxes

The Agency is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. The Internal Revenue Service has determined the Agency to be other than a private foundation. The Agency is also exempt from the New Hampshire Business Enterprise Tax.

Accounting Standard Codification No. 740, "Accounting for Income Taxes", establishes the minimum threshold for recognizing, and a system for measuring, the benefits of tax return positions in financial statements. Management has analyzed the Agency's tax position taken on its information returns for the previous three tax years and has concluded that no additional provision for income taxes is necessary in the Agency's financial statements.

Cash and Cash Equivalents

The Agency considers all highly liquid financial instruments with original maturities of three months or less to be cash equivalents.

Revenue Recognition Policy

The Agency derives revenue from grants, fees for services, donations, public support, and fundraising. Revenues are recognized when control of these services are transferred to customers, in an amount that reflects the consideration the Agency expects to be entitled to in exchange for those services. Cost incurred to obtain a contract will be expensed as incurred when the amortization period is less than a year.

Academy Street derives revenue from the rental of apartment units. Revenues are recognized as income, monthly, when rents become due and control of the apartment units is transferred to the lessees. Control of the leased units is transferred to the lessee in an exchange for the leased units. The cost incurred to obtain a lease will be expensed as incurred.

Use of Estimates

The presentation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Advertising Expenses

The Agency expenses advertising costs as they are incurred. Total advertising costs for the years ended December 31, 2023 and 2022 amounted to $10,426 and $72,759, respectively.

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Debt Issuance Costs

As required under FASB Accounting Standards Update No. 2015-03, amortization expense for the years ended December 31, 2023 and 2022 amounted to $3,376 and has been included with interest expense in the consolidated statement of activities for each year. The unamortized deferred financing costs have been included as a reduction of the long term debt (see Note 10).

In-kind Donations

The Agency pays below-market rent for the use of certain facilities. In accordance with generally accepted accounting principles, the difference between amounts paid for the use of the facilities and the fair value of the rental space has been recorded as an in-kind donation and as an in-kind expense in the accompanying consolidated financial statements. The estimated fair value of the donation was determined to be $103,356 and $14,772 for the years ended December 31, 2023 and 2022, respectively.

The Agency also receives contributed food commodities and other goods that are required to be recorded in accordance with FASB ASC No. 958. The estimated fair value of these food commodities and goods was determined to be $457,049 and $116,368, respectively, for the year ended December 31, 2023. For the year ended December 31, 2022, the estimated fair value of these food commodities and goods was determined to be $968,268 and $5,040, respectively.

The Agency also receives contributed professional services and volunteer time that are required to be recorded in accordance with FASB ASC No. 958. The estimated fair value of these services was determined to be $90,451 for the year ended December 31, 2023. There were no contributed professional services for the year ended December 31, 2022.

Functional Allocation of Expenses

The costs of providing the various programs and other activities have been summarized on a functional basis. Accordingly, costs have been allocated among the program services and supporting activities benefited. Occupancy costs have been grouped and allocated to the programs as a line item. Such allocations have been determined by management on an equitable basis.

The expenses that are allocated include the following:

Expense	Method of allocation
Salaries and benefits	Time and effort
Occupancy	Square footage/revenues
Depreciation	Square footage
All other expenses	Approved indirect rate

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New Accounting Pronouncement

At the beginning of 2023, the Organization adopted FASB ASU 2016-13, *Financial Instruments–Credit Losses (Topic 326): Measurement of Credit Losses on Financial Instruments*, as amended, which modifies the measurement of expected credit losses on certain financial instruments. The Agency adopted this new guidance utilizing the modified retrospective transition method. The adoption of this Standard did not have a material impact on the Agency's financial statements.

NOTE 2. PROPERTY

As of December 31, 2023 and 2022, property consisted of the following:

	2023	2022
Land, buildings and improvements	$ 6,900,857	$ 6,181,672
Furniture, equipment and machinery	418,949	398,645
Vehicles	315,682	350,136
Total	7,635,488	6,930,453
Less accumulated depreciation	1,261,148	1,125,834
Net property	$ 6,374,340	$ 5,804,619

NOTE 3. RESTRICTED CASH BALANCES

Certain cash accounts have been established and are being funded in accordance with a regulatory agreement entered into between Academy Street and New Hampshire Housing as discussed below. All reserves are required to be held in qualified New Hampshire financial institutions that are insured by the FDIC.

Operating Reserve

Under the regulatory agreement, Academy Street is required to establish an operating reserve. The operating reserve was funded properly during the years ended December 31, 2023 and 2022.

Replacement Reserve

Under the regulatory agreement, Academy Street is required to set aside amounts for the replacement of property and other expenditures approved by New Hampshire Housing. Additionally, Academy Street is required to make monthly payments to the reserve. The reserve was properly funded during 2023 and 2022.

Insurance and Real Estate Tax Escrows

Academy Street is required to establish a reserve to fund tax and insurance payments in the project. Amounts are to be deposited on a monthly basis to accrue a sufficient balance to pay future tax and insurance bills of the project. As of December 31, 2023 and 2022, the balance in the reserves for tax and insurance escrows was properly funded.

NOTE 4. LIQUIDITY AND AVAILABILITY

The following represents the Agency's financial assets as of December 31, 2023 and 2022:

	2023	2022
Financial assets at year end:		
Cash and cash equivalents	$ 1,806,373	$ 1,355,108
Accounts receivable	1,875,336	2,556,852
Contributions receivable	20,000	50,000
Due from Gafney Home, L.P.	519,890	-
Restricted cash	36,215	29,455
Total financial assets	4,254,814	3,991,415
Less amounts not available to be used within one year:		
Restricted cash	36,215	29,455
Board designated funds	-	307,315
Financial assets available to meet general expenditures over the next twelve months	$ 4,221,599	$ 3,654,645

The Agency's goal is generally to maintain financial assets to meet 30 days of operating expenses. As part of its liquidity plan, excess cash is invested in short-term investments, including money market accounts.

NOTE 5. ACCOUNTS RECEIVABLE

Accounts receivable are stated at the amount management expects to collect from balances outstanding at year end. Balances that are still outstanding after management has used reasonable collection efforts are written off through a charge to the valuation allowance and a credit to accounts receivable. The Agency uses historical loss information based on the aging of receivables as the basis to determine expected credit losses for receivables and believes that the composition of receivables at year-end is consistent with historical conditions.

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The allowance for uncollectible accounts was estimated to be zero at December 31, 2023 and 2022. The Agency has no policy for charging interest on overdue accounts.

NOTE 6. CONTRIBUTIONS RECEIVABLE

Contributions receivable represent promises to give, which have been made by donors but have not yet been received by the Agency. The Agency considers contributions receivable to be fully collectible; accordingly, no allowance for contributions receivable has been recorded.

Total unconditional promises to give were as follows at December 31, 2023 and 2022:

	2023	2022
Within one year	$ 20,000	$ 30,000
In two to five years	-	20,000
	$ 20,000	$ 50,000

NOTE 7. DUE FROM GAFNEY HOME, L.P.

Gafney Home, L.P. (Gafney) is a low-income housing tax credit property. The general partner (0.01%) of Gafney is 100% owned by the Agency. The $519,890 included in due from Gafney Home, L.P. on the consolidated statement of financial position for the year ended December 31, 2023 represents amounts that the Agency has paid on behalf of Gafney for the construction that is underway.

NOTE 8. PLEDGED ASSETS

As described in **Note 9**, all assets of the Agency are pledged as collateral under the Agency's demand note payable agreement. As described in **Note 10**, the building of the Agency is pledged as collateral under the Agency's mortgage note payable agreement.

NOTE 9. DEMAND NOTE PAYABLE

The Agency has available a revolving line of credit with a bank in the amount of $750,000. Prior to November 2023, $250,000 was the amount available on the revolving line of credit. The note is payable upon demand. Interest is stated at the prime rate plus 1% which resulted in an interest rate of 9.50% at December 31, 2023 and 8.50% at December 31, 2022. The note is collateralized by all the assets of the Agency. There was no outstanding balance on the demand note payable as of December 31, 2023 and 2022.

NOTE 10. LONG TERM DEBT

The long term debt at December 31, 2023 and 2022 consisted of the following:

	2023	2022
Mortgage payable to Kennebunk Savings Bank which had interest only payments for 36 months followed by principal and interest payments for 264 months. During the year ended December 31, 2022 the note was refinanced to a fixed interest rate of 4.25% for the first ten years resulting in monthly principal and interest payments of $11,170. On April 26, 2032, and on that date every year thereafter, principal and interest payments will adjust to 1.50% above the highest U.S Prime Rate as published in the Wall Street Journal on the applicable change date, with a floor rate of 4%. The note matures in 2043. The mortgage payable is secured by real estate.	$ 1,790,164	$ 1,846,509
5.00% notes payable to the New Hampshire Community Loan Fund with monthly principal and interest payments of $3,251, maturing October 2037. The notes are secured by real estate.	387,745	406,854
Note payable to New Hampshire Housing Finance Authority. The note is not subject to interest or principal amortization and will be forgiven in 2028 provided that the property is used for transitional housing. The note is secured by real estate.	225,000	-
Non-interest bearing note payable to New Hampshire Housing deferred until April 21, 2060 or until the project is sold, refinanced or surplus cash is available. The note is secured by real estate.	785,889	785,889

	2023	2022
Non-interest bearing note payable to New Hampshire Housing deferred until July 1, 2051 or until the project is sold, refinanced or surplus cash is available. The note is secured by real estate.	25,755	25,755
Total long term debt before current portion of long term debt and unamortized debt issuance costs	3,214,553	3,065,007
Current portion of long term debt	(99,121)	(95,690)
Unamortized debt issuance costs	(57,457)	(60,833)
Total long term debt	$ 3,057,975	$ 2,908,484

The schedule of maturities of long term debt at December 31, 2023 is as follows:

Year Ended December 31	Amount
2024	$ 99,121
2025	82,809
2026	86,562
2027	90,488
2028	319,591
Thereafter	2,535,982
Total	$ 3,214,553

NOTE 11. NET ASSETS

At December 31, 2023 and 2022, net assets with donor restrictions consisted of the following:

	2023	2022
Whole family	$ 39,286	$ 42,755
COVID related	-	120,546
Fuel assistance	136,699	142,484
Total	$ 175,985	$ 305,785

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At December 31, 2023 and 2022, net assets without donor restrictions consisted of the following:

	2023	2022
Undesignated	$ 5,253,075	$ 4,327,547
Board designated	-	307,315
Total net assets without donor restrictions	$ 5,253,075	$ 4,634,862

NOTE 12. OPERATING LEASES

Facilities occupied by the Agency for its community service programs are rented under the terms of various leases with expiration dates through 2032. For the years ended December 31, 2023 and 2022, the annual lease/rent expense for the leased facilities was $69,901 and $90,501, respectively.

The Agency accounts for its operating leases under ASU 2016-02, *Leases (Topic 842)*. As such, the right of use (ROU) assets represent the Agency's right to use underlying assets for the lease term, and the lease liabilities represent the Agency's obligation to make lease payments arising from these leases. The ROU assets and lease liabilities, all of which arise from operating leases, were calculated based on the present value of future lease payments over the lease terms. The discount rate related to the Agency's lease liability as of December 31, 2023 was 3.75%, which is based upon the risk-free borrowing rates commensurate with the lease terms. At December 31, 2023, the ROU asset and lease liability is $81,312. At December 31, 2022, the ROU asset and lease liability is $146,825.

The weighted average lease term at December 31, 2023 is 5.44 years. The weighted average discount rate at December 31, 2023 is 3.75%.

Common expenses, classified as occupancy costs in the accompanying consolidated financial statements, are considered a non-lease component under FASB ASC 842 and are recognized as costs as incurred.

Academy Street leases property from the Agency under a lease agreement for an annual rent amount of $1. The lease expires during April 2045. Unless either party serves the other with a 180 day written notice prior to the expiration of the initial term, at the end of the initial term, the lease shall be automatically extended for an additional 25 year term.

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Lease liability maturities as of December 31, 2023 is as follows:

Year Ending December 31	Amount
2024	$ 38,401
2025	6,901
2026	6,901
2027	6,901
2028	6,901
Thereafter	24,144
Total undiscounted lease liability	90,149
Less imputed interest	(8,837)
Total lease liability	$ 81,312

NOTE 13. RETIREMENT PLAN

The Agency maintains a 403(b) Plan and Trust (the Plan) covering substantially all employees. Employee contributions to the Plan are made at predetermined rates elected by employees. Additionally, the Agency provides a matching contribution equal to 25% of the employee's contribution up to 5% of the employee's compensation. Effective April 1, 2016, the Agency instituted an auto enrollment feature mandating a minimum 1% employee contribution; however, employees reserve the right to decline the auto enrollment. Employer matching contributions for the years ended December 31, 2023 and 2022 totaled $33,241 and $32,526, respectively.

NOTE 14. CONCENTRATION OF RISK

The Agency receives a majority of its support from federal and state governments. For the years ended December 31, 2023 and 2022, approximately 89% and 96%, respectively, of the Agency's total revenue was received from federal and state governments. If a significant reduction in the level of support were to occur, it would have a significant effect on the Agency's programs and activities.

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NOTE 15. CONCENTRATION OF CREDIT RISK

The Agency maintains its cash balances at several financial institutions in New Hampshire. The balances are insured by the Federal Deposit Insurance Corporation up to $250,000. The Agency maintains an agreement with its primary financial institution to collateralize the balances in excess of $250,000.

NOTE 16. CONTINGENCIES

The Agency receives grant funding from various sources. Under the terms of these agreements, the Agency is required to use the funds within a certain period and for purposes specified by the governing laws and regulations. If expenditures were found not to have been made in compliance with the laws and regulations, the Agency might be required to repay the funds. No provisions have been made for this contingency because specific amounts, if any, have not been determined or assessed as of December 31, 2023 and 2022.

NOTE 17. RENTAL INCOME RECEIVABLE

During the year ended December 31, 2023, and subsequent to year end, Academy Street entered into four separate rental agreements for use of their four apartments. The rental agreements have differing expirations ranging from April 2024 through April 2025. Monthly payments for the agreements ranged from $1,168 to $1,394 and are due the first day of each month. At December 31, 2023 and 2022, $2,587 and $1,412, respectively, is outstanding from tenants for rent and is included in accounts receivable in the accompanying consolidated statements of financial position.

The approximate future rental payments owed on the above leases are as follows:

Year Ended December 31	Amount
2024	$ 51,598
2025	15,824
Total	$ 67,422

NOTE 18. ACQUISITION OF PROPERTY AND LAND

During the year ended December 31, 2023, the Agency acquired property and land relating to a transitional housing program from another nonprofit organization. The value of the building and land received in the acquisition totaled $675,570 and $269,944, respectively.

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As part of the acquisition of the property and land, the Agency also acquired the related note payable of $225,000, payable to New Hampshire Housing Finance Authority (see **Note 10**). The Agency has been running the operations of the transitional housing program since the acquisition.

NOTE 19. SUBSEQUENT EVENTS

Subsequent events are events or transactions that occur after the statement of financial position date, but before financial statements are available to be issued. Recognized subsequent events are events or transactions that provide additional evidence about conditions that existed at the statement of financial position date, including the estimates inherent in the process of preparing financial statements. Nonrecognized subsequent events are events that provide evidence about conditions that did not exist at the statement of financial position date but arose after that date. Management has evaluated subsequent events through June 5, 2024, the date the consolidated financial statements were available for issuance.

Subsequent to year end, on May 1, 2024, the Agency acquired the Home for Now Shelter, which is a homeless center in Strafford County, from another nonprofit organization. The value of the property acquired totaled $1,502,600. The Agency will acquire all other remaining assets from the nonprofit organization once their dissolution is finalized.

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATING STATEMENT OF FINANCIAL POSITION
DECEMBER 31, 2023

	Community Action Partnership of Strafford County	Academy Street Family Housing, LLC	Total	Consolidating Adjustments	Consolidated
ASSETS					
CURRENT ASSETS					
Cash and cash equivalents	$ 1,742,370	$ 64,003	$ 1,806,373	$ -	$ 1,806,373
Accounts receivable	1,872,749	2,587	1,875,336	-	1,875,336
Contributions receivable	20,000	-	20,000	-	20,000
Due from affiliate	5,065	-	5,065	(5,065)	-
Due from Gafney Home, L.P.	519,890	-	519,890	-	519,890
Inventory	413,604	-	413,604	-	413,604
Prepaid expenses	11,972	-	11,972	-	11,972
Total current assets	4,585,650	66,590	4,652,240	(5,065)	4,647,175
NONCURRENT ASSETS					
Restricted cash	-	36,215	36,215	-	36,215
Security deposits	5,172	3,203	8,375	-	8,375
Property, net of accumulated depreciation	5,536,103	838,237	6,374,340	-	6,374,340
Other noncurrent assets	25,503	-	25,503	-	25,503
Right of use asset	81,312	-	81,312	-	81,312
Total noncurrent assets	5,648,090	877,655	6,525,745	-	6,525,745
TOTAL ASSETS	$ 10,233,740	$ 944,245	$ 11,177,985	$ (5,065)	$ 11,172,920
LIABILITIES AND NET ASSETS					
CURRENT LIABILITIES					
Current portion of long term debt	$ 79,216	$ 19,905	$ 99,121	$ -	$ 99,121
Accounts payable	1,290,169	5,336	1,295,505	-	1,295,505
Accrued payroll and related taxes	128,546	-	128,546	-	128,546
Accrued compensated absences	193,093	-	193,093	-	193,093
Due to affiliate	-	5,065	5,065	(5,065)	-
Refundable advances	849,145	-	849,145	-	849,145
Other current liabilities	36,292	17	36,309	-	36,309
Current portion of right of use liability	36,264	-	36,264	-	36,264
Total current liabilities	2,612,725	30,323	2,643,048	(5,065)	2,637,983
NONCURRENT LIABILITIES					
Long term debt, less current portion shown above	2,281,290	776,686	3,057,976	-	3,057,976
Security deposits	-	2,853	2,853	-	2,853
Right of use liability, less current portion shown above	45,048	-	45,048	-	45,048
Total noncurrent liabilities	2,326,338	779,539	3,105,877	-	3,105,877
Total liabilities	4,939,063	809,862	5,748,925	(5,065)	5,743,860
NET ASSETS					
Without donor restrictions	5,118,692	134,383	5,253,075	-	5,253,075
With donor restrictions	175,985	-	175,985	-	175,985
Total net assets	5,294,677	134,383	5,429,060	-	5,429,060
TOTAL LIABILITIES AND NET ASSETS	$ 10,233,740	$ 944,245	$ 11,177,985	$ (5,065)	$ 11,172,920

See Notes to Financial Statements

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATING STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2023

	Community Action Partnership of Strafford County	Academy Street Family Housing, LLC	Consolidated
CHANGE IN NET ASSETS			
REVENUES AND OTHER SUPPORT			
Grant revenue	$ 16,787,565	$ -	$ 16,787,565
Fees for service	3,030,181	-	3,030,181
Rent revenue	-	65,397	65,397
Public support	361,132	-	361,132
In-kind donations	767,224	-	767,224
Interest	235	854	1,089
Fundraising	227,539	-	227,539
Other revenue	31,951	-	31,951
Loss on disposal of property	(79,338)	-	(79,338)
Total revenues and other support	21,126,489	66,251	21,192,740
EXPENSES			
Program services			
Child services	5,618,514	-	5,618,514
Community services	1,213,031	-	1,213,031
Energy assistance	4,088,771	-	4,088,771
Housing	5,392,053	83,088	5,475,141
Weatherization	3,309,103	-	3,309,103
Total program services	19,621,472	83,088	19,704,560
Supporting activities			
Management and general	1,522,812	-	1,522,812
Fundraising	197,469	-	197,469
Total expenses	21,341,753	83,088	21,424,841
CHANGE IN NET ASSETS BEFORE ACQUISITION OF PROPERTY AND LAND	(215,264)	(16,837)	(232,101)
ACQUISITION OF PROPERTY AND LAND	720,514	-	720,514
CHANGE IN NET ASSETS	505,250	(16,837)	488,413
NET ASSETS, BEGINNING OF YEAR	4,789,427	151,220	4,940,647
NET ASSETS, END OF YEAR	$ 5,294,677	$ 134,383	$ 5,429,060

See Notes to Financial Statements

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED DECEMBER 31, 2023

FEDERAL GRANTOR/ PASS-THROUGH GRANTOR/PROGRAM TITLE	ASSISTANCE LISTING NUMBER	PASS-THROUGH GRANTOR'S NAME	GRANTOR'S NUMBER	FEDERAL EXPENDITURES	
U.S. Department of Agriculture					
Child and Adult Care Food Program	10.558	State of New Hampshire Department of Education	4300-ZZZ		$ 124,548
Child Nutrition Cluster					
Summer Food Service Program for Children	10.559	State of New Hampshire Department of Education	4300-ZZZ	$ 96,893	
National School Lunch Program	10.555	State of New Hampshire Department of Education	At-Risk After School Care Centers	42,223	139,116
Food Distribution Cluster					
Emergency Food Assistance Program	10.569	Belknap-Merrimack Community Action Partnership	None	1,000	
Emergency Food Assistance Program (Food Commodities)	10.569	Belknap-Merrimack Community Action Partnership	None	457,049	458,049
Total U.S. Department of Agriculture					$ 721,711
U.S. Department of Housing and Urban Development					
Supportive Housing for the Elderly	14.157	Dover Housing Authority	Dover Housing Authority		$ 31,433
CDBG Entitlement Grants Cluster					
Community Development Block Grants / Entitlement Grants	14.218	City of Dover, New Hampshire	City of Dover	47,431	
Community Development Block Grants / Entitlement Grants	14.218	City of Rochester, New Hampshire	City of Rochester	97,897	145,328
CV - Emergency Solutions Grant Program	14.231	State of New Hampshire Department of Health and Human Services	05-95-42-423010-7927	134,363	
Emergency Solutions Grant Program	14.231	State of New Hampshire Department of Health and Human Services	05-95-42-423010-7927	87,098	221,461
Continuum of Care	14.267	State of New Hampshire Department of Health and Human Services	SS-2020-BHS-04PERNA-11	111,064	
Continuum of Care	14.267	State of New Hampshire Department of Health and Human Services		230,377	
Continuum of Care	14.267	State of New Hampshire Department of Health and Human Services		232,573	574,014
Supportive Housing Program	14.235	State of New Hampshire Department of Health and Human Services	010-092-7176-102-0415		22,915
Total U.S. Department of Housing and Urban Development					$ 995,151
U.S Department of Homeland Security			593600-035		$ 4,600
Emergency Food and Shelter National Program	97.024	United Way			
Total U.S. Department of Homeland Security					$ 4,600
U.S. Department of Energy					
BIL - Weatherization Assistance for Low-Income Persons	81.042	State of New Hampshire Governor's Office of Energy & Community Services	02-52-52-520010-XXXX0000-074-50	371,634	
Weatherization Assistance for Low-Income Persons	81.042	State of New Hampshire Governor's Office of Energy & Community Services	01-02-02-024010-7706-074-500587	177,515	$ 549,149
Total U.S. Department of Energy					$ 549,149
U.S. Department of the Treasury					
Emergency Rental Assistance Program	21.023	State of New Hampshire, NHHFA		1,564,073	
Emergency Rental Assistance Program	21.023	State of New Hampshire, NHHFA	HSS	183,044	$ 1,747,117
Coronavirus State and Local Fiscal Recovery Funds	21.027	State of New Hampshire, NHHFA			2,518,503
Total U.S. Department of the Treasury					$ 4,265,620

See Notes to Schedule of Expenditures of Federal Awards

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED DECEMBER 31, 2023

FEDERAL GRANTOR/ PASS-THROUGH GRANTOR/PROGRAM TITLE	ASSISTANCE LISTING NUMBER	PASS-THROUGH GRANTOR'S NAME	GRANTOR'S NUMBER	FEDERAL EXPENDITURES	
U.S. Department of Health & Human Services					
Aging Cluster					
Special Programs for the Aging - Title III, Part B	93.044	State of New Hampshire Department of Health and Human Services, NTS	05-95-48-48010-78720000-512-500352		$ 19,610
Maternal, Infant, Early Childhood Homevisiting Program	93.870	State of New Hampshire Department of Health and Human Services, DPH, BPHCS, Maternal & Health Section	05-95-90-902010-5896		267,195
Foster Care - Title IV - E	93.658	State of New Hampshire Department of Health and Human Services, DPH, BPHCS, Maternal & Health Section	05-95-90-902010-5897		205,598
Promoting Safe and Stable Families	93.556	State of New Hampshire, DHHS, Division for Children, Youth and Families	05-095-042-421010-29730000-102-500734-42107306		34,503
Temporary Assistance for Needy Families	93.558	State of New Hampshire, DHHS, Division for Children, Youth and Families	05-095-045-450010-61460000-502-500691-42108603		60,852
Low-Income Home Energy Assistance	93.568	State of New Hampshire Governor's Office of Energy & Planning	01-02-02-024010-77050000-074-500587	3,692,755	
Low-Income Home Energy Assistance	93.568	State of New Hampshire Governor's Office of Energy & Planning	01-02-02-024010-77050000-074-500587	301,306	3,994,061
Low-Income Water Assistance Program	93.499	State of New Hampshire Governor's Office of Energy & Planning	02-52-52-52010-19850000-500587		66,413
Community Services Block Grant	93.569	State of New Hampshire, DHHS, DFA	010-045-7148-093-0415	234,452	
Community Services Block Grant	93.569	Southern NH Services	RPIC	7,463	
CV-Community Services Block Grant	93.569	State of New Hampshire, DHHS, DFA	G-1981NHCOSR	76,862	318,777
CCDF Cluster					
ARPA - Child Care and Development Block Grant	93.575	State of New Hampshire, DHHS	177200		354,862
Head Start Cluster					
Head Start	93.600	Direct Funding	01CH01149602 & 603, 01HP00025002	3,911,764	
CV - Head Start	93.600	Direct Funding	01CH01149601C3, 01HE00061501C6	144,403	4,056,167
Substance Abuse and Mental Health Services Administration	93.243	Hope on Haven Hill	H79TI084759		40,136
Special Programs for the Aging, Title III, Part D, Disease Prevention and Health Promotion Services	93.043	National Council on Aging	90HDRC006		3,774
Social Services Research and Demonstration	93.647	State of New Hampshire, DHHS, Division for Children, Youth and Families	9EDA0017		1,755
Maternal and Child Health Services Block Grant to States	93.994	State of New Hampshire, DHHS, Division for Children, Youth and Families	05-095-090-51900000-102-500731-90004009		9,202
Stephanie Tubbs Jones Child Welfare Program	93.645	State of New Hampshire, DHHS, Division for Children, Youth and Families	05-095-042-421010-29880000-102-500734-42108802		1,365
Social Services Block Grant	93.667	State of New Hampshire, DHHS, Division for Children, Youth and Families	05-095-042-421010-29880000-102-500734-42108603		129,421
Total U.S. Department of Health & Human Services					$ 9,563,701
TOTAL					$ 16,099,932

See Notes to Schedule of Expenditures of Federal Awards

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS FOR THE YEAR ENDED DECEMBER 31, 2023

NOTE 1. BASIS OF PRESENTATION

The accompanying schedule of expenditures of Federal Awards (the Schedule) includes the federal award activity of Community Action Partnership of Strafford County under programs of the federal government for the year ended December 31, 2023. 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 Community Action Partnership of Strafford County, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the Agency.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the Schedule are reported on the accrual basis of accounting. 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 reimbursement.

NOTE 3. INDIRECT COST RATE

Community Action Partnership of Strafford County has elected not to use the ten percent de minimis indirect cost rate allowed under the Uniform Guidance.

NOTE 4. FOOD DONATION

Nonmonetary assistance is reported in the Schedule at the fair value of the commodities received and disbursed.

NOTE 5. SUBRECIPIENTS

Community Action Partnership of Strafford County had no subrecipients for the year ended December 31, 2023.

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Leone, McDonnell & Roberts
PROFESSIONAL ASSOCIATION
CERTIFIED PUBLIC ACCOUNTANTS
DOVER • WOLFEBORO
NORTH CONWAY

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

INDEPENDENT AUDITORS' 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*

To the Board of Directors of
Community Action Partnership of Strafford County

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 consolidated financial statements of Community Action Partnership of Strafford County (a New Hampshire nonprofit organization) and Affiliate, which comprise the consolidated statements of financial position as of December 31, 2023 and 2022, and the related consolidated statements of activities, functional expenses, and cash flows, and the related notes to the consolidated financial statements, and have issued our report thereon dated June 5, 2024.

Internal Control Over Financial Reporting

In planning and performing our audit of the consolidated financial statements, we considered Community Action Partnership of Strafford County's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the consolidated financial statements, but not for the purpose of expressing an opinion on the effectiveness of Community Action Partnership of Strafford County's internal control. Accordingly, we do not express an opinion on the effectiveness of Community Action Partnership of Strafford County'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.

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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 and therefore, material weaknesses or significant deficiencies may exist that have not been identified. We identified a deficiency in internal control, described in the accompanying schedule of findings and questioned costs as item 2023-001, that we consider to be a significant deficiency.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether Community Action Partnership of Strafford County'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 determination of financial statement amounts. 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 organization'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 organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Leone, McDonnell & Roberts
Professional Association

Dover, New Hampshire
June 5, 2024

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Leone, McDonnell & Roberts
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CERTIFIED PUBLIC ACCOUNTANTS
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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

To the Board of Directors of
Community Action Partnership of Strafford County

Report on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Community Action Partnership of Strafford County'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 Community Action Partnership of Strafford County's major federal programs for the year ended December 31, 2023. Community Action Partnership of Strafford County's major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

In our opinion, Community Action Partnership of Strafford County 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 December 31, 2023.

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 Auditors' Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of Community Action Partnership of Strafford County 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 Community Action Partnership of Strafford County'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 Community Action Partnership of Strafford County's federal programs.

Auditors' 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 Community Action Partnership of Strafford County'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 Community Action Partnership of Strafford County'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 Community Action Partnership of Strafford County'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 Community Action Partnership of Strafford County'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 Community Action Partnership of Strafford County's internal control over compliance. Accordingly, no such opinion is expressed.

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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 Auditors' 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.

Leone, McDonnell & Roberts
Professional Association

Dover, New Hampshire
June 5, 2024

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

SCHEDULE OF FINDINGS AND QUESTIONED COSTS
FOR THE YEAR ENDED DECEMBER 31, 2023

A. SUMMARY OF AUDITORS' RESULTS

1. The auditors' report expresses an unmodified opinion on whether the consolidated financial statements of Community Action Partnership of Strafford County and Affiliate were prepared in accordance with GAAP.

2. One significant deficiency relating to the audit of the consolidated financial statements is reported in the *Independent Auditors' 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*. No material weaknesses are reported.

3. No instances of noncompliance material to the financial statements of Community Action Partnership of Strafford County, which would be required to be reported in accordance with *Government Auditing Standards*, were disclosed during the audit.

4. No significant deficiencies in internal control over major federal award programs are reported in the *Independent Auditors' Report on Compliance for Each Major Program and on Internal Control Over Compliance Required by the Uniform Guidance*. No material weaknesses are reported.

5. The auditors' report on compliance for the major federal award programs for Community Action Partnership of Strafford County expresses an unmodified opinion on all major federal programs.

6. There were no audit findings that would be required to be reported in accordance with 2 CFR section 200.516(a).

7. The programs tested as major were: U.S. Department of Health and Human Services, Low Income Home Energy Assistance Program, ALN 93.568 and U.S. Department of the Treasury, Emergency Rental Assistance Program, ALN 21.023, Coronavirus State and Local Fiscal Recovery Funds, ALN 21.027, U.S Department of Energy, Weatherization Assistance for Low-Income Persons, ALN 81.042.

8. The threshold used for distinguishing between Type A and B programs was $750,000.

9. Community Action Partnership of Strafford County was determined to not be a low-risk auditee.

B. FINDINGS – FINANCIAL STATEMENTS AUDIT

2023-001

Condition: Accounts receivable was not reconciled to the aging report and uncollectible amounts were not written off timely. Bad debt expense was recognized in the current year as a result.

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Criteria: Internal controls should be in place to ensure that accounts receivable are reconciled frequently to the aging report and accounts receivable are reviewed for collectability regularly. This reconciliation should be reviewed and approved by the CFO.

Cause: There has been a great deal of staff turnover in the Agency and the difficulty in hiring qualified people into the fiscal department has made proper accounting controls hard to achieve.

Effect: An entry in the amount of $97,154 was posted to the current year bad debt expense. As nearly all accounts receivable is driven by billing for expenses under grants, it is normally deemed 100% collectible. As such, revenue in a prior year was overstated by the $97,154.

Recommendation: We recommend that accounts receivable be reviewed regularly and any amounts that are deemed uncollectible are written off timely and/or establish an allowance for doubtful accounts. We also recommend that procedures are implemented to ensure that monthly reconciliations for accounts receivable are being performed in a timely manner.

Views of Responsible Officials and Planned Corrective Actions: As previously discussed during the fieldwork and noted in the report, staff turnover at CAPSC caused delays in some reconciliations due to training and hiring processes. There were no incorrect actions or processes; the delay in writing off outstanding accounts receivable was primarily due to staff turnover. With our newly completed fiscal team, we are now positioned to thoroughly research and resolve all outstanding accounts receivable balances. We are confident that our established procedures for monthly reviews and follow-up activities will effectively address this issue.

C. FINDINGS AND QUESTIONED COSTS – MAJOR FEDERAL AWARD PROGRAMS AUDIT

None

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Community Action Partnership of Strafford County
Board of Directors 2025

Name	Board Role	Sector
Terry Jarvis	Chairperson	Elected Official New Durham
Katrin Kasper	Vice Chairperson	Elected/Appointed Official Town Of Lee
Sarah Kuhl	Secretary	Private Banking Representative
Steve Trozinski	Treasurer	Private Community Representative
Anthony M. Carr	Board Member	Private Legal Representative
Bekki Carlson	Board Member	Lived Experience Childcare
Brandi McKay-Berry	Board Member	Elected/Appointed Official Town of Barrington
Christi-Anne Walter	HS Policy Council Chairperson	Lived Experience Head Start Policy Council Chair
Heather Blumenfeld	Board Member	Lived Experience Executive Director Triangle Club
Ian Oneail	Board Member	Private Banking Representative
James Rathbun	Board Member	Lived Experience Head Start Policy Council

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Community Action Partnership of Strafford County
Board of Directors 2025

Jeff Warach	Board Member	Elected/Appointed Official Supervisor of Checklist- Dover
Jessica Lamontagne	Board Member	Elected Official State Representative
Leah Crouser	Board Member	Private NH Public Defender
Mark Toussaint	Board Member	Elected/Appointed Official City of Rochester
Nate Bernitz	Board member	Private UNH Cooperative Extension
Nicki Gearwar	Board Member	Lived Experience Parent Representative
Rich Plourde	Board Member	Private Revo Casino
Robert Harrington	Board Member	Private MGB/WDH
Robert Warach	Board Member	Elected/Appointed Official City of Dover
Roxanne Osgood	Board Member	Lived Experience Rochester Housing Authority

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Community Action Partnership of Strafford County
Board of Directors 2025

Tom Southworth	Board Member	Elected/Appointed Official State Representative

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Tanisha Johnson

[redacted]

EXECUTIVE SUMMARY

Dynamic **Nonprofit Director** with a proven track record of optimizing nonprofit excellence, securing multi-million-dollar funding, and driving strategic initiatives that foster equity and belonging. Adept at **transformational leadership, operational efficiency, and cross-functional collaboration**, with expertise in program development, financial planning, and team mentorship. Passionate about leveraging data-driven insights and inclusive leadership to create **lasting community impact**.

Core Competencies:

✓ Strategic Planning & Execution
✓ Diversity, Equity, Inclusion, Accessibility, and Belonging (DEIAB)
✓ Budgeting & Financial Management ($6M+ in Funding)
✓ Program Development & Optimization
✓ Grant Writing & Fundraising
✓ Team Leadership & Coaching
✓ Stakeholder & Community Engagement
✓ Risk & Compliance Management
✓ Data-Driven Decision Making

PROFESSIONAL EXPERIENCE

Community Action Partnership of Strafford County – Exeter, NH

Family Services Director | January 2025 – Present

◆ Lead strategic direction and operational excellence for family service programs, ensuring alignment with organizational goals and community needs including Home Visiting Programs and Family Resource Centers

◆ Managed **$3M+ in state and federal grants**, ensuring sustainable program funding and expansion.

◆ Oversee program expansion, budget management, and compliance to enhance service delivery.

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◆ Develop and sustain partnerships with government agencies, nonprofits, and community organizations to drive funding and advocacy efforts.

Child and Family Services Director | 2020 – January 2025

◆ Managed **$6M+ in federal grants**, ensuring sustainable program funding and expansion.

◆ Directed **operations, fiscal planning, and program execution** for 2 childcare centers, the Head Start program, 2 Family Resource Centers, and multiple home-visiting programs.

◆ Spearheaded **strategic partnerships and policy advocacy**, collaborating with legislative bodies on child and family service initiatives.

◆ Led a **team of 10 Managers and 2 Program Assistants**, providing mentorship and leadership development.

◆ Implemented **data-driven predictive analytics** to enhance service efficiency and program outcomes.

Exeter Area YMCA – Exeter, NH

Branch Director | 2020

◆ Directed daily operations for a **$2.5M facility serving 7,200 members** and leading a team of 114 employees.

◆ **Secured a $10K Tufts Healthcare grant** to launch a senior wellness initiative.

◆ Pioneered a **70% member retention rate** during COVID by developing **35+ virtual programs** and establishing a community support network for 50+ families.

◆ Developed and implemented a **comprehensive reopening strategy post-COVID**, including safety protocols and mental health awareness training.

Associate Branch Director | 2017 – 2020

◆ Managed **$2M in annual budgets**, ensuring financial sustainability and program excellence.

◆ Secured **$60K+ in grants**, expanding programming and increasing community impact.

◆ Launched a **fundraising campaign that raised $25K**, enhancing membership accessibility and operational growth.

Service Access & Management, Inc. – Reading, PA

Early Intervention Supervisor | 2015 – 2017

◆ Led **case management services for children with developmental disabilities**, driving a **15% increase in team productivity**.

◆ Designed and executed **new training modules** that streamlined onboarding and improved staff competency.

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Early Intervention Program Manager | 2012 – 2015

- Reduced operational costs by **20% through implementation of a Fiscal Payment System**, improving departmental revenue.
- Spearheaded **electronic referral and reporting systems**, ensuring federal compliance and streamlining case management processes.

EDUCATION & CERTIFICATIONS

Master of Business Administration (MBA) | Walden University
Bachelor of Science in Psychology | Walden University
Diversity & Inclusion in the Workplace | Cornell University
Inclusive Leadership & Program Management

Certifications:
✓ Talk Saves Lives, Certified Teacher (AFSP)
✓ More Than Sad: Suicide Prevention, Certified Teacher (AFSP)
✓ Certified Spinning Instructor, Mad Dogg Athletics

TECHNICAL SKILLS: MS Office | Adobe Systems | Constant Contact | Database Management | Social Media & Marketing | Predictive Analytics | CRM Systems | Canva

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BOARD & VOLUNTEER LEADERSHIP

Board Chair, New England Head Start Association (2023 – 2025)
Board Chair, New Hampshire Head Start Association (2023 – 2025)
Co-Founder, Black Lives Matter – New Hampshire (2020 – Present)
Vice Chair, Black Heritage Trail of New Hampshire (2023 – Present)
Committee Member, NH PQC Maternal Health Task Force (2025 – Present)
Committee Member, GRCHF, Community Advisory Committee (2024 – Present)
Committee Member, NH Comp Fiscal Analysis Planning Steering Comm (2025 – Present)

SPEAKING ENGAGEMENTS & MEDIA FEATURES

NH Magazine/603 Diversity: Let Love not hate reign over our hearts Read here
Podcast Co-Host | The Conversations We Should be Having (2023-2025) Listen here
NH PBS | Real Talk on Racism and Policing (2023) – Watch Here
NH CHF | Address Individual Needs & Build Systemic Equity (2023) Read remarks here
SOS Recovery Conference (2022) – *DEI in Recovery Spaces*
Portsmouth Women's March Speaker (2020)
Black Heritage Trail Conference (2020)

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DANIELLE E. BAH

| [redacted] | [redacted] |

EDUCATION

B.S | May 2015 | Coastal Carolina University

Degree: Public Health

SKILLS

-Interpersonal Communication
-Networking
-Program Analysis
-Relationship Building
-French Language
-Cross-Cultural Sensitivity
-Task Management
-Public Relations
-Advocacy
- Mentoring & Coaching

CERTIFICATIONS

-Licensed Nursing Assistant (LNA)
-Logic Model Certification
-Certified Yoga Instructor
-Peace Corps Stomp Out Malaria Training

WORK EXPERIENCE

Healthy Families of America Home Visitor | CAPSC |October 2021- Present

- Assess family needs using a variety of reflective strategies such as: relationship building, motivational interviewing, problem talk, explore and wonder, and accentuate the positive.
- Educates parents in child development, child and maternal health, safety and parenting skills based on individual needs prenatally up to age 3.
- Develops client led family goals and service plans collaboratively with parents/caregivers
- Supports the development of nurturing relationships and parental self-efficacy through reinforcing and modeling positive, nurturing, and responsive parent-child interactions, skills, and relationships.
- Facilitates resource & referral based on community supports and expressed family needs
- Establishes and facilitates strength-based, trusting relationships with families through home-based services
- Supports families in developing and capitalizing on necessary parenting skills needed to support the physical, emotional, social, and overall developmental needs of their children.
- Translates and utilizes specific curriculum and techniques to teach, model and grow parents' confidence in their abilities to positively parent their child/ren and encourage development while maintaining a safe, healthy environment
- Maintains a caseload of 8-15 families based on frequency of visits determined by family needs
- Conducts initial meetings with families to determine eligibility for program
- Advocates for clients by coordinating care with and providing outreach to community partners on behalf of families
- Documents individual and family demographic information using ETO
- Facilitates various routine screenings such as: (ASQ) developmental screening, (EPDS) depression screening, and (RAT) relationship assessment tool.

Intake Specialist & Family Support Specialist | Waypoint | October 2019- September 2021

- Conducted initial needs assessments with clients identifying service eligibility and family needs
- Collected family & individual demographic information for families enrolling in services
- Initiated outreach to referral sources facilitating care coordination and networking
- Fostered strength-based, positive, trusting relationships with families ensuring a safe space for client intervention
- Entered client data using: Apricot, Quickbase, NH MMIS Healthcare Portal
- Utilized motivational interviewing during home visits; assessing needs, identifying existing strengths & supports, and encouraging self-efficacy
- Facilitated client led goal, treatment planning, and intervention based on need and desired family function
- Maintained case load of 10-22 clients conducting resource & referral based on need and Tx plan

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Health Extension Volunteer | Peace Corps Guinea | February 2017- January 2019

- Implemented series of door-to-door mosquito net distributions and conducted malaria education outreach within a village setting to over 100 families
- Initiated maternal health education and counseling programs with 40 women, two groups of 20 women each
- Counseled community members on the symptoms, dangers, prevention and treatment of malaria
- Facilitated pre-natal consultations and assisted with maternal health counseling
- Worked with Community Health Agents and Doctors to distribute Polio vaccines and Malaria prevention medication and education during annual country-wide distribution campaigns
- Initiated door-to-door community wide malaria prevention, symptoms, and treatment education outreach to a community consisting of over 1,200 residents on the village level
- Increased the capacity of trained community members on the topics of malaria and women's rights
- Completed: Stomp Out Malaria two week training (Senegal), Malaria Boot-camp (Guinea), and Let Girls Learn Conference (Guinea)

Contacts:

Tera Feliz
HFA Supervisor: Community Action Partnership of Strafford County
Email: [redacted]
Phone: [redacted]

Martha Bradley
Public Health Consultant: JSI Research and Training Institute, Inc.
Email: [redacted]
Phone: [redacted]

Dr. Abdoulaye Barry
Program Manager: Peace Corps Guinea
Email: [redacted]

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Arianna Newman, BA, MSW

[redacted]

Education & Continuing Education

BACHELOR OF ARTS IN PSYCHOLOGY (BA) | WINTER 2014 | TEXAS STATE UNIVERSITY – SAN MARCOS, TX

MASTERS OF SOCIAL WORK (MSW) | SUMMER 2018 | TEXAS STATE UNIVERSITY – SAN MARCOS, TX

CREDENTIAL IN EARLY CHILDHOOD FAMILY MENTAL HEALTH – CURRENT TO FALL 2025

Work Experience

HFA Home Visiting Supervisor / CAPSC / NEW HAMPSHIRE/ AUGUST 2024 – CURRENT

- Supervises HFA Family Support Specialists and HFA Family Resource Specialist
- Reviews FSS and FRS case notes, assessments, service plans, and referrals
- Meets weekly with FSS and FRS staff for reflective supervision and completes supervision notes
- Manages FSS/FRS caseloads
- Reviews FRS FROG Assessments with FRS
- Uses Reflective Strategies in supervisions and in informal supervision with HFA staff
- Encourages staff reflection around triggering events that occur in home visits
- Problem solves with HVs around barriers for families as well as HVs perception of barriers
- Gathers HFA data and inputs in CAPSC spreadsheets and HFA spreadsheets
- Completes monthly and quarterly reports
- Attends CAPSC, state, and national HFA meetings
- Collaborates to plan groups and events
- Leads groups
- Works with CAPSC consultants to provide services for HFA families
- Conducts Family Satisfaction Survey's with enrolled families
- Attends CAPSC Committees
- Collaborates with Program Manager to plan and attend Health Advisory Committee Meetings
- Interviews HFA candidates
- Sits in on other home visiting program interviews when necessary
- Trains new HFA staff
- Builds onboarding schedules for new HFA staff

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HEALTHY FAMILIES AMERICA HOME VISITOR / CAPSC/ NEW HAMPSHIRE / JUNE 2023 - CURRENT

- Maintains up to a 12-family caseload
- Uses ETO note keeping system proficiently to take visit notes, document assessments, and document referrals for families
- Implements Parents As Teacher's curriculum to drive visit planning and support activities to engage parent with baby
- Completes Edinburgh Postnatal Depression Scale (EPDS) in a timely manner pre and postnatal
- Makes referrals based on EPDS scores to outside agencies I.E. OBGYN offices, CAPSC mental health consultant, therapist/clinician offices, mental health, and maternal health hotlines
- Makes referrals to community resources I.E. local food pantries, CAPSC fuel/electrical assistance and weatherization program, local homeless shelters, Sharefund, City Welfare, HAVEN, Hope on Haven Hill, Community Partners ESS, FRC groups, etc.
- Works with Home Visiting team to develop, facilitate, and implement outreach activities such as HFA playgroups, community baby shower, FRC playgroups
- Enrolls and discharges families from ETO
- Enrolls families into HFA program
- Follows HFA policies and procedures
- Enter's families into Empower initially at enrollment
- Meets with families in their homes and in the community
- Uses reflective strategies with families and practices the parallel process
- Offers support and guidance to HFA team members
- Makes appropriate adjustments to visit planning, documentation practices, and time management based on feedback/changes from supervisors and managers.

FAMILY INTERVENTION SPECIALIST / YOUTH VILLAGES / NEW HAMPSHIRE / JANUARY 2019 - JANUARY 2020

- Maintained a 4-5 family caseload
- Used Youth Villages assessment tools collaboratively with families
- Utilized Youth Villages approved curriculum to develop treatment plans for children and their families
- Collaborated on treatment plans with clients and families
- Applied family systems theory to unique cases to develop goals and objectives
- Developed new treatment plans every two weeks to meet the ever-changing needs of clients and families
- Met with children and their families in their homes and in the community 3 times per week
- Taught life skills, taught anxiety management skills, taught anger management skills
- Utilized motivational interviewing techniques in cases involving intimate partner violence
- Collaborated with DCYF caseworkers, teachers, school administrators, group home counselors, CASA volunteers, and family members
- Documented sessions collaboratively with clients and their families
- Provided crisis intervention during sessions and on an on-call basis
- Wrote client reports for DCYF court cases and reported to a judge during court cases.

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Graduate Experience

INTERN | HYDER FAMILY HOSPICE HOUSE | DOVER, NH | MAY 2018 - AUGUST 2018 | 540 HRS

- Used assessment tools with families and patients
- Evaluated family dynamics and strengths
- Collaborated with interdisciplinary teams
- Provided solution focused and narrative therapy for families and patients in crisis
- Allocated resources for families and patients
- Gathered appropriate documents for admission of new patients
- Conducted new admissions
- Operated Point Click note keeping system
- Conducted family visits in a medical facility

INTERN | BLUE BONNET TRAILS COMMUNITY SERVICES | ROUND ROCK, TX | JANUARY 2017- MAY 2017 | 360 HRS

- Used research informed practices with children and adolescents
- Taught life skills to children and adolescents diagnosed with severe mental health disorders
- Assessed children, adolescents, and parental figure(s) with the CANS assessment
- Provided wrap around case management
- Formulated client centered goals and objectives
- Experience providing care in the home
- Operated ANASAZI note keeping system

Skills

- Outlook
- Word
- Excel
- PowerPoint
- Microsoft OneDrive
- Microsoft SharePoint

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Maura Florian

[redacted]

OBJECTIVE

My desire is to find a stable yet challenging position in a professional environment in which to learn new technologies and skills as a human service provider, and to be an active employee in an organization to express and develop my skills for the mutual development of the organization.

EXPERIENCE

Healthy Families of America Lead Home Visitor, FRS, Community Action, Dover, NH

January 2023-Present

Provide support and connect families to resources in the community. Help create family goals, complete development assessment for the target child to track milestones. Make referrals as necessary. Complete FROG assessment to better serve the families. Provide parent-child interactions activities and developmental activities families can do at home.

Housing Stability Case Manager Lead, Community Action, Dover, NH

December 2021-January 2023

Create an action plan, based on the barriers that every client has as a family or as an individual. Making sure that all the clients have the right documents needed for any referrals that need to be made. Provide insight information to help the clients who are homeless and reaching the 18 months of the C-19 assistance. Prevent eviction and homelessness by providing resources and screening for prevention services. Provide referrals resources to all our clients and also identify when a client need is urgent and in an emergency services situation, such as domestic violence. Assist with the help of finding employment, applying for SNAP and so on. meet with your client at least twice a month to talk about the action plan and their goals to see if they have done any improvements. Write a case note for every interaction I have with client.

DHHS, DCYF, FAMILY WORKER, Rochester, NH

March 2020-December 2021

Help and develop case plans, goals for reunification between families, file court reports, participate in hearings,

conduct monthly meetings between parents, foster parents, and children.

Testing Center and PAX Center Paraprofessional, Dover High School, Dover, NH

August 2017-March 2020

Assist students in the classroom by providing them individual help with lessons and helping maintain discipline and assist them with emotional support.

SKILLS

Internet Search, Microsoft Word, Microsoft Office (PowerPoint, Excel)

AWARDS/CERTIFICATIONS

Increased Customer Service satisfaction when worked for Amazing Home Care by answering and helping clients over the phone and by texting the clients. This resulted in at least 200 more calls answered and over 300 text messages sent in one day. CPI, CPR, First Aid and BLS certifications.

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LANGUAGES

Fluent in Spanish and English.

EDUCATION

Southern New Hampshire University - Hooksett, NH

July. 2021 -Present

Masters in Psychology and Counseling

(Child and Adolescent Development)

Metropolitan College of New York - New York, NY

Sept. 2013 to May. 2015

Bachelor's in Professional Studies

(Human Services)

Reference Available Upon Request

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Jessica Fisher



Authorized to work in the US for any employer

Work Experience

Healthy Families America Home Visitor

Community Action Partnership of Strafford County-Rochester, NH
September 2024 to Present

Also worked October 2021 to April 2022

I help children ages 0-3 and parents by:

- Providing information regarding child development and milestones.
- Working on activities to enhance and grow parent-child relationships.
- Helping to advocate for the family and refer family to needed resources
- Planning with colleagues, supervisor, and other members of the team to find out what the best-course would be for the family.
- Adapting goals to changes in situations and needs
- Working through resistance with clients through building engagement and alignment
- Assessing homes for safety and helping family implement plans to improve safety in the homes
- Entering case recordings into ETOS as well as other assessments (ASQs) done with clients
- Working with other key players to help benefit the youth and family.
- Helping parents identify ways to build attachment
- Providing resources to help the family physically and psychologically
- Assessing the child for possible developmental delays and refer for early intervention services as needed.
- Self-managing my schedule and doing office work as needed
- Helping others on the team as directed and as I saw that others needed

Personal Banker II

Profile Bank-Somersworth, NH
October 2020 to March 2023

I provide customer service to our members by:

- Opening new accounts both consumer and business.
- Instant Issue Debit/ATM cards
- Personal and Commercial transactions on accounts
- Solving debit issues and helping to file error resolutions.
- Balancing the ATM
- Issuing Cashier's Checks and Money orders
- And many more transactions.

Customer Service Representative

Fisher-Cordina Solutions-Remote

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March 2015 to October 2020

I worked for a small DBA providing customer service by taking short term contracts/positions remotely and in person

• Provided exceptional customer service by promptly addressing inquiries, resolving issues, and ensuring customer satisfaction

• Managed a high volume of incoming calls and emails, consistently meeting or exceeding performance metrics for response time and resolution

• Demonstrated strong product knowledge to effectively answer customer questions and provide accurate information

• Built rapport with customers through active listening, empathy, and personalized interactions

• Resolved complex customer complaints by investigating the root cause of the issue and implementing appropriate solutions

• Assisted customers in navigating company website, troubleshooting technical issues, and placing orders online

• Managed escalated customer issues with professionalism and empathy, ensuring swift resolution while maintaining a positive brand image

Child and Youth IST Case Manager Worked in the Case Management Services Area

Helen Ross McNabb-Maryville, TN

September 2014 to March 2015

1704 E Broadway Ave Maryville, TN 37804

09/14- 03/15 Maryville, TN

Child and Youth IST Case Manager Worked in the Case Management Services Area

Engaged Families to identify strengths and needs.

- Teamed with Children and their Families during CFTMs, FSTMs, Court Hearings, and other important events in a family's life.
- Planned with colleagues, supervisor, and other members of the team to find out what the best course would be for the family
- Implemented interventions in the form of coping skills with the family during weekly appointments.
- Helped get clients to their appointments and manage their medications effectively.
- Worked with the family to have them direct the course of case management
- Adapted case management to changes in situations and needs
- Worked through resistance with clients through building engagement and alignment
- Assessed homes for safety and helped family implement plans to improve safety in the homes
- Entered case recordings into Centricity as well as other assessments done with clients
- Worked with other key players to help benefit the youth and family
- Provided support both on the phone and in person during working hours.
- Self-managed my schedule and did office work as needed
- Helped others on the team as directed and as I saw that others needed help.

Family Intervention Specialist, Intercept In-Home Counseling Working in Knoxville Office

Youth Villages-Knoxville, TN

May 2013 to September 2014

9111 Cross Park Dr E475 Knoxville, TN 37923

05/13-09/14 Knoxville, TN

Family Intervention Specialist, Intercept In-Home Counseling Working in Knoxville Office

Engaged Families to identify strengths and needs.

Docusign Envelope ID: 7E4F00AF-FDE1-4B0F-A85C-CE09698120E8

- Teamed with Families during CFTMs, FSTMs, Court Hearings, and other important events in a family's life.
- Planned with colleagues, supervisor, and other members of the team to find out what the best course would be for the family
- Implemented interventions with the family during the three in home sessions done weekly.
- Worked with the family to have them direct the course of treatment
- Adapted treatment to changes in situations and needs
- Worked through resistance with clients through building engagement and alignment
- Assessed homes for safety and helped family implement plans to improve safety in the homes
- Entered case recordings into Evolv as well as other assessments done with the family
- Worked with other key players to help benefit the youth and family
- Provided support both on the phone and in person 24 hours a day during the week and on call weekends.
- Self-managed my schedule and did office work as needed

Cottage Lead Houseparent Girls' Intake Cottage Worked under Peggy Grover (865)

Smoky Mountain Children's Home-Sevierville, TN

April 2011 to August 2012

429 McCarn Circle Sevierville, TN 37862

04/11- 08/12 Sevierville, TN

Cottage Lead Houseparent Girls' Intake Cottage Worked under Peggy Grover (865) 438-7715

- Worked my way up from being a Relief Houseparent (4/11-7/11) to a Shift Lead (7/11-12/11) and then to a Cottage Lead (12/11-08/12) within a year's time span.
- Provided care for children ages 6-18 by: teaching life skills, helping the children maintain a household, counseling children through personal crisis and life events, supporting the children when they have problems with family or school, providing transportation to and from appointments, involving the children in therapeutic crafts, and other forms of care.
- Managed the milieu and helped counsel staff and residents through crisis
- Trained new staff on how to relate to the children and how to do their work to the best of their ability
- Dispensed medications for the children and helped them learn what medications they are taking and why
- Maintained Behavior Logs and other paper work that are critical to the running of the milieu
- Managed a staff of 7 workers.
- Managed resident allowances and cottage petty cash.
- Budgeted, shopped for, and made sure to follow nutrition guidelines for groceries for residents on the cottage.
- Helped residents transition from the intake cottage to "step-down" cottages, foster homes, or back to their biological family.

Education

Masters of Art in Human Services

Liberty University - Lynchburg, VA

August 2010 to January 2013

Bachelors of Art in Philosophy and Religion

Berea College - Berea, KY

August 2005 to May 2009

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Skills

- Management
- Social Work
- Microsoft Word
- Case Management
- Behavioral Health
- Experience with Children
- Financial Services
- Microsoft Office
- Banking
- Budgeting
- Early Intervention

Certifications and Licenses

Behavioral Health Professional
Present

Post-Partum Doula
December 2021 to Present

I am certified as a Post-Partum Doula through Cornerstone Birthwork Trainings.

CPR and First Aid: Child and Infant
January 2025 to January 2027

Cpr and First Aid

Additional Information

Any gaps in employment are due to the inclusion of relevant career data only. Most positions not listed were short term in length and not relevant to my job history. I wish to find a long term position where I can grow with an organization for years to come.

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Kali Purington



Professional Summary

Creative professional with problem-solving abilities. Dependable and caring person bringing skills in activity planning, safety monitoring and behavior modification. Highly reliable worker who shows up with a smile everyday and ready to work.

Patient professional experienced in providing reliable and compassionate care to children of all ages. Well-versed in developing lesson plans, implementing educational activities, and providing a safe and nurturing environment. Skilled in building positive relationships with parents and guardians, collaborating with fellow teachers, and managing student behaviors. A natural teacher who adores working with children, and is dedicated to fostering a child's physical, mental, and emotional development.

Adaptable professional with years of work experience and proven knowledge of leadership, problem-solving, and workflow prioritization. Aiming to leverage my abilities to successfully fill the role at your company.

Seeking to utilize excellent communication, interpersonal, and organizational skills to complete tasks. Reliable with a good work ethic and the ability to quickly adapt to new tasks and environments.

Detail-oriented professional with excellent communication, interpersonal, and creative thinking skills. Frequently praised as hard-working by peers, can be relied upon to help achieve goals.

Ambitious individual with strong organizational and multitasking skills, as well as an aptitude for technology. Ready to apply knowledge and skills to any challenge.

Work Experience

Home Visitor/Parent Educator

September 2024 to Present

- Conducted home visits to assess living conditions and provide support to families in crisis situations
- Maintained accurate documentation of client progress, treatment plans, and case management activities
- Participated in regular supervision meetings with colleagues to discuss cases and receive guidance on best practices
- Managed an caseload of families, ensuring timely completion of required reports and documentation
- Monitored progress of families, documenting observations and providing feedback on areas of improvement
- Created personalized goals with parents that focused on improving their parenting skills

Babysitter

self employeed

2012 to Present

- Provided children with nurturing, safe environment to promote emotional, social and intellectual growth
- Secured indoor and outdoor premises to protect children under care.
- Helped children complete homework and special assignments daily to support academic performance.
- Helped prepare meals, snacks and refreshments for children, accounting for individual dietary needs and restrictions.

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- Cut snack foods into bite-sized pieces before serving to young children and monitored closely during snack time to prevent choking.
- Led children in tidying up, handwashing and cleanliness to teach responsibility.

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Lead Teacher

Wolfeboro Children's Center

February 2022 to August 2024

- Created positive environment focused on learning and being inclusive of children from different backgrounds.
- Encouraged children to work through difficulties and improve social skills.
- Worked collaboratively with director, fellow teachers and parents to meet unique needs of each child.
- Evaluated children regularly to identify negative behaviors associated with learning disorders or troubled home lives
- Cleaned spaces regularly and sanitized surfaces daily to prevent spread of communicable diseases.
- Arranged daily nap and rest periods to recharge students for afternoon play and additional learning.
- Modeled positive behaviors to promote self-esteem and enhance children's conflict management abilities.
- Prepared and served meals and snacks to meet children's nutritional needs.
- Checked classroom regularly to identify safety concerns and maintain cleanliness.
- Kept supplies organized and well-stocked for upcoming lessons and typical usage.
- Checked classroom regularly for safety problems and housekeeping requirements.
- Coordinated regular outside activities to promote children's physical development.
- Promoted good nutrition for every student by preparing and serving healthy meals and snacks.
- Offered variety of materials and resources for children to explore imaginative and academic ideas.
- Maintained positive and encouraging learning environment with use of positive reinforcement strategies.
- Supported students emotionally, socially and academically with one-on-one care.

Childcare Assistant

Wolfeboro Area Children's Center-Wolfeboro, NH

2020 to February 2022

Observed and monitored play to identity developmental strengths and target areas for enrichment activities

- Encouraged curiosity, exploration and problem-solving with age-appropriate playtime activities
- Promoted language development skills through reading and storytelling
- Recorded information about behavior, food service, and medication dispensing
- Managed general housekeeping duties, including feeding, diapering, resting and cleanup.
- Monitor children's play activities to verify safety and wellness.
- Collaborated with daily classroom teachers to keep activities running smoothly
- Enforced rules to teach manners and maintain safe environment for children
- Served nutritious snacks and meals for up to 8 children at a time
- Assisted lead teacher with snack time, arts and crafts and putting children down for naps
- Used clear communications and professionalism to develop constructive relationships with families.

Student Mentor

DOVER HIGH SCHOOL

2015 to 2016

- Worked collectively with education professionals to deliver in-school support for identified students.

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- Monitored students academic progress, mental health and sociability through ongoing individual assessments.
- Promoted parent and teacher partnerships and communications to support students educational goals

Preschool Volunteer
2014 to 2015

- Fostered relationships with students to increase engagement, and periodically reported student progress to parents/guardians and school leadership.
- Conducted small group and individual classroom activities with students based on differentiated learning needs.
- Eliminated learning gaps and effectively instructed students by using a wide variety of teaching aids and motivational strategies.

Education

Some in Early Childhood Education
NHTI Community College
2020 to 2022

High School Diploma
Dover High School
2012 to 2016

Skills

- Microsoft Word
- Time management
- Organizational skills
- Daycare (5 years)
- Excellent communication Skills
- Lesson planning (3 years)
- Computer literacy
- Microsoft Outlook
- First aid (5 years)
- Approachable
- Playful
- Cleaning
- Classroom management
- Customer service
- Meal Preparation
- Teaching
- Motivational interviewing
- English
- Toddler care

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- Experience with Children
- Leadership skills
- Bathing, grooming and dressing
- Communication skills
- Experience working with students
- Cheerful and energetic
- Behavior management
- Childhood development (7 years)
- Friendly
- Computer skills
- Childcare
- Microsoft Powerpoint
- Experience with children (10+ years)
- Meal and snack preparation
- Caregiving
- Microsoft Office
- Infant care
- Organizational Skills
- Reliable
- Typing
- Age-appropriate routines
- Exercise and outdoor activities
- Dependable
- Early childhood education (5 years)
- Preschool experience
- Classroom experience
- Babysitting
- Calm under pressure
- Special education

Languages

- English - Fluent

Certifications and Licenses

Adult and Pediatric First Aid/CPR/AED
January 2025 to January 2027

New Hampshire Health & Safety Training Program
January 2024 to January 2025

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Prosolutions Training

NEW HAMPSHIRE PACKAGE Pyramid Infant Toddler
2024 to 2025

Prosolutions Training

Building Positive Social Emotional Skills for All Children: Introducing the Pyramid Model
2024 to 2025

Prosolutions Training

CACFP
February 2022 to February 2023

Provides aid to child and adult care institutions and family or group day care homes for the provision of nutritious foods that contribute to the wellness, healthy growth, and development of young children, and the health and wellness of older adults and chronically impaired disabled persons.

Driver's License

CPR Certification

First Aid Certification

AED Certification

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NH Department of Health and Human Services

KEY PERSONNEL

List those primarily responsible for meeting the terms and conditions of the agreement.

Job descriptions not required for vacant positions.

Contractor Name: Community Action Partnership of Strafford Cty

NAME	JOB TITLE	ANNUAL AMOUNT PAID FROM THIS CONTRACT	ANNUAL SALARY
Tanisha Johnson	Director of Family Services	$37,081.00	$98,883.00
Danielle Bah	Home Visiting Manager	$29,016.00	$58,032.00
Ariana Newman	HFA Supervisor	$52,229.00	$52,229.00
Maura Florian	Lead HFA HV	$51,480.00	$51,480.00
Jessica Fisher	HFA HV	$44,656.00	$44,656.00
Kali Purington	HFA HV	$44,554.00	$44,554.00

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ARC

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Lori A. Weaver
Commissioner

Iain N. Watt
Director

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

September 10, 2024

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into amendments to existing contracts with the Contractors listed below to continue providing home visiting services, by exercising contract renewal options by increasing the total price limitation by $16,911,354 from $9,788,971 to $26,700,325 and by extending the completion dates from September 30, 2024 to September 30, 2028, effective October 1, 2024, upon Governor and Council approval. 70% Federal Funds. 30% General Funds.

The individual contracts were approved by Governor and Council as specified in the table below.

Contractor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
Community Action Partnership of Stafford County Dover, NH	177200-B004	Rochester Catchment Area	$1,224,446	$2,131,968	$3,356,414	O: 2/8/23 Item #39
Granite VNA, Inc. Concord, NH	174069-R001	Conway and Laconia Catchment Areas	$1,065,241	$1,968,315	$3,033,556	O: 2/8/23 Item #39; A1: 6/14/23 Item #26; A2: 5/1/24 Item #18
The Family Resource Center at Gorham Gorham, NH	162412-B001	Berlin and Littleton Catchment Areas	$1,845,113	$2,904,538	$4,749,651	O: 2/8/23 Item #39; A1: 6/14/23 Item #27; A2: 5/1/24 Item #18
Waypoint Manchester, NH	177166-B002	Concord, Manchester, Seacoast and Southern Catchment Areas	$5,654,171	$9,906,533	$15,560,704	O: 2/8/23 Item #39; A1: 5/1/24 Item #18

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		Total:	$9,788,971	$16,911,354	$26,700,325	

Funds are available in the following accounts for State Fiscal Years 2025 and are anticipated to be available in State Fiscal Years 2026, 2027, 2028 and 2029, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details.

EXPLANATION

The purpose of this request is to allow the Contractors to continue providing voluntary home visiting services to pregnant individuals and families with children up to five (5) years of age within designated Division of Child, Youth, and Families (DCYF) catchment areas. In addition, the Contractor will pursue expansion of the program making it available to a broader population of families, including those already involved in New Hampshire's child welfare system.

The Contractors provide voluntary home visiting services utilizing the Healthy Families America (HFA) evidence-based Home Visiting model, its Child Welfare Protocols, and an approved Registered Nurse (RN) home visit model enhancement. The HFA model has shown to improve positive parenting practices, maternal and child health, school readiness, economic self-sufficiency and parental educational attainment, and to increase linkages and referrals to valuable community resources. In addition, families who participate in the HFA model experience less child maltreatment and family violence than their non-HFA counterparts. The HFA model is currently being provided in every county in New Hampshire.

Approximately 246 families will be served during State Fiscal Years 2025, 2026, 2027, 2028, and 2029.

As referenced in Exhibit A, Revisions to Standard Agreement Provisions, of the original agreements, the parties have the option to extend the agreements for up to four (4) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and Governor and Council approval. The Department is exercising its option to renew services for four (4) years of the four (4) years available.

Should the Governor and Executive Council not authorize this request, more than 200 families will experience a lapse in services that serve to prevent child abuse and neglect, family violence, and poor maternal and child health outcomes.

Source of Federal Funds: Assistance Listing Number (ALN) 93.870, FAIN X10MC50315; ALN 93.658, FAIN (FFPSA) 2301NHFOST

In the event that the Federal Funds become no longer available, additional General Funds will not be requested to support this program.

Respectfully submitted,

Lori A. Weaver
Commissioner

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Fiscal Detail Sheets
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-3596 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, HOME VISITING FORMULA GNT
94% Federal Funds 6% General Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$192,620.00	$0.00	$192,620.00
2023	102-500731	Contracts for Program Services	90083208	$16,995.00	$0.00	$16,995.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$317,840.00	$0.00	$317,840.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$79,410.00	$0.00	$79,410.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$238,230.00	$238,230.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$60,598.00	$60,598.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$181,793.00	$181,793.00
2026	102-500731	Contracts for Program Svcs	90005896	$0.00	$52,456.00	$52,456.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$54,327.00	$54,327.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$162,981.00	$162,981.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$54,327.00	$54,327.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$162,981.00	$162,981.00
2028	102-500731	Contracts for Program Svcs	90005896	$0.00	$45,028.00	$45,028.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$54,327.00	$54,327.00
			SUBTOTAL:	$606,865.00	$1,067,048.00	$1,673,713.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$692,250.00	$0.00	$692,250.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$950,000.00	$0.00	$950,000.00
2024	102-500731	Contracts for Program Services	90005896	$54,682.00	$0.00	$54,682.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$237,500.00	$0.00	$237,500.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$712,500.00	$712,500.00
2025	102-500731	Contracts for Program Services	90005896	$27,341.00	$0.00	$27,341.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$230,356.00	$230,356.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$691,068.00	$691,068.00
2026	102-500731	Contracts for Program Services	90005896	$0.00	$167,050.00	$167,050.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$227,975.00	$227,975.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$683,924.00	$683,924.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$227,975.00	$227,975.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$683,924.00	$683,924.00
2028	102-500731	Contracts for Program Services	90005696	$0.00	$172,818.00	$172,818.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	227,975.00	$227,975.00
			Subtotal:	$1,961,773.00	$4,025,565.00	$5,987,338.00

Fiscal Detail Sheets
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$80,533.00	$0.00	$80,533.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$340,529.00	$0.00	$340,529.00
2024	102-500731	Contracts for Program Services	90005896	$6,667	$0.00	$6,667.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$85,311.00	$0.00	85,311.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$252,840.00	252,840.00
2025	102-500731	Contracts for Program Services	90005896	$3,333.00	$0.00	$3,333.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$60,326.00	$60,326.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$180,976.00	$180,976.00
2026	102-500731	Contracts for Program Services	90005896	$0.00	$34,669.00	$34,669.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$51,997.00	$51,997.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$155,991.00	$155,991.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$51,997.00	$51,997.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$155,991.00	$155,991.00
2028	102-500731	Contracts for Program Services	90005896	$0.00	$40,243.00	$40,243.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$51,997.00	$51,997.00
			Subtotal:	$516,373.00	$1,037,027.00	1,553,400.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$269,729.00	$0.00	$269,729.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$378,354.00	$0.00	$378,354.00
2024	102-500731	Contracts for Program Svcs	90005896	$33,571	$0.00	$33,571.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$92,583.00	$0.00	$92,583.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$277,749.00	$277,749.00
2025	102-500731	Contracts for Program Svcs	90005896	$25,179	$0.00	$25,179.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$117,573.00	$117,573.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$352,718.00	$352,718.00
2026	102-500731	Contracts for Program Svcs	90005896	$0.00	$57,079.00	$57,079.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$125,903.00	$125,903.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$377,707.00	$377,707.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$125,903.00	$125,903.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$377,707.00	$377,707.00
2028	102-500731	Contracts for Program Svcs	90005896	$0.00	$90,920.00	$90,920.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$125,903.00	$125,903.00
			Subtotal:	$799,416.00	$2,029,162.00	2,828,578.00
			TOTAL:	$3,884,227.00	$8,158,802.00	$12,043,029.00

05-95-92-920510-3382 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIVISION, BUREAU OF DRUG & ALCOHOL SVCS; GOVERNOR COMMISSION FUNDS
100% Other Funds

Waypoint - Vendor #177166-B002

Fiscal Detail Sheets
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	92057502	$108,000.00	$0.00	$108,000.00
			Subtotal:	$108,000.00	$0.00	$108,000.00
			TOTAL:	$108,000.00	$0.00	$108,000.00

05-95-90-902010-5390 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, MATERNAL - CHILD HEALTH,
100% General Funds

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	102-500731	Contracts for Program Svcs	90004019	$56,250.00	$0.00	$56,250.00
2024	102-500731	Contracts for Program Svcs	90004019	$75,000.00	$0.00	$75,000.00
2025	102-500731	Contracts for Program Svcs	90004019	$0.00		$0.00
			Subtotal:	$131,250.00	$0.00	$131,250.00
			TOTAL:	$131,250.00	$0.00	$131,250.00

05-95-90-901010-5771 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF HEALTHCARE ACCESS, EQUITY & POLICY, COVID-19 HEALTH DISPARITIES
100% Federal Funds

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577160	$105,000.00	$0.00	$105,000.00
2023	074-500589	Grants for Pub Asst and Relief	90577150	$157,500.00	$0.00	$157,500.00
			Subtotal:	$262,500.00	$0.00	$ 262,500.00

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577150	$15,000.00	$0.00	$15,000
2023	074-500589	Grants for Pub Asst and Relief	90577150	$101,512.00	$0.00	101,512.00
2024	074-500589	Grants for Pub Asst and Relief	90577150	$85,000.00	$0.00	$85,000
2024	074-500589	Grants for Pub Asst and Relief	90577150	$100,000.00	$0.00	100,000.00
			Subtotal:	$301,512.00	$0.00	301,512.00
			TOTAL:	$564,012.00	$0.00	$564,012.00

05-95-90-902010-2451-HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, ARP - MIEC HOME VISITING
100% Federal Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$17,532.00	$0.00	$17,532.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$54,231.00	$0.00	$54,231.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$13,558.00	$0.00	$13,558.00
			Subtotal:	$85,321.00	$0.00	$85,321.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$114,064.00	$0.00	$114,064.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$125,000.00	$0.00	$125,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$142,350.00	$0.00	$142,350.00
			Subtotal:	$381,414.00	$0.00	381,414.00

Granite VNA - Vendor #174089-R001

State Fiscal Year	Class / Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount

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Fiscal Detail Sheets
Home Visiting Services
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2023	074-500589	Grants for Pub Asst and Rel	90083206	$72,691.00	$0.00	$72,691.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$8504.00	$0.00	$8,504.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$2130.00	$0.00	$2,130.00
			Subtotal:	$83,225.00	$0.00	$83,225.00

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$88,714.00	$0.00	$88,714.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$50,000.00	$0.00	$50,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$56,532.00	$0.00	$56,532.00
			Subtotal:	$175,246.00	$0.00	$175,246.00
			TOTAL:	$725,296.00	$0.00	$725,296.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-29580000, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD – FAMILY SERVICES
50% Federal Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$199,673.00	$0.00	$199,673.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00	$0.00	$266,230.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$66,557.00	$199,673.00	$266,230.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$266,230.00	$266,230.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$266,230.00	$266,230.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$266,230.00	$266,230.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$66,557.00	$66,557.00
			Subtotal:	$532,460.00	$1,064,920.00	$1,597,380.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$125,960.00	$0	$125,960.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$271,746.00	$0	$271,746.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$67,937.00	$164,885	$232,822.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 232,822.00	$ 232,822.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 232,822.00	$ 232,822.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 232,822.00	$ 232,822.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 67,937.00	$ 67,937.00
			Subtotal:	$465,643.00	$931,288	$1,396,931.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$164,133.00	$0	$164,133.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,845.00	$0	$218,845.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$54,711.00	$164,133	$218,844.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 218,844.00	$ 218,844.00

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Fiscal Detail Sheets
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 218,844.00	$ 218,844.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 218,844.00	$ 218,844.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 54,711.00	$ 54,711.00
				Subtotal:	$437,689.00	$875,376	$1,313,065.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,102,682.00	$0.00	$1,102,682.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00	$0.00	$1,470,242.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$367,560.00	$1,102,682.00	$1,470,242.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$1,470,242.00	$1,470,242.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$1,470,242.00	$1,470,242.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$1,470,242.00	$1,470,242.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$367,560.00	$367,560.00
				Subtotal:	$2,940,484.00	$5,880,968.00	$8,821,452.00
				TOTAL:	$4,378,276.00	$8,752,552.00	$13,128,828.00

GRAND TOTAL:	$9,788,971.00	$16,911,354.00	$26,700,325.00

State of New Hampshire
Department of Health and Human Services
Amendment #1

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Community Action Partnership of Strafford County ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item #39), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37 General Provisions, Block 1.7, Completion Date, to read:

   September 30, 2028

2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $3,356,414

3. Modify Exhibit B, Scope of Services, Subsection 3.3., to read:

   3.3. The Contractor must service a portion of families utilizing the Healthy Families America (HFA) Child Welfare Protocols (CWP) in the Rochester DCYF Catchment Area, which is attached as Attachment 1. Virtual home visits may also be accommodated, in compliance with HFA requirements. The Contractor must ensure families being served utilizing the CWP have an expanded enrollment window, allowing for enrollment of families with a child up to twenty-four (24) months of age, referred by the child welfare system, who are participating in the service voluntarily. The Contractor shall exhaust all reasonable efforts to serve forty (40) DCYF families in the Rochester Catchment Area; serving no less than 70% of the identified number of families for this region, before the end of the contract period.

4. Modify Exhibit B, Scope of Services, Subsection 3.5.4., to read:

   3.5.4. Families with an open DCYF case who have recently reunified, or where the child remains at home with their family and not in an out-of-home placement.

5. Modify Exhibit B, Scope of Services, Subsection 3.7.1.2., to read:

   3.7.1.2. Have HFA CWP available in the Rochester DCYF Catchment Area.

      3.7.1.2.1. Should the Contractor be unable to provide services through the HFA CWP, a corrective action plan must be developed by the Contractor and approved by the Department.

         3.7.1.2.1.1. In the event that the Contractor is unable to provide services using the CWP, the Contractor must enter into a subcontract or MOA with an approved, accredited HFA provider to provide this service, no later than thirty (30) business days from the date of discontinuation.

6. Modify Exhibit C, Payment Terms, Section 1, to read:

1. This Agreement is funded by:

1.1. 73.30% Federal funds from:

1.1.1. 64.07% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the DHHS Health Resources and Services Administration (HRSA), Assistance Listing Number (ALN) 93.870, FAINX10MC43595; and as awarded on September 2, 2022, FAINX10MC46878; and as awarded on August 29, 2023, FAINX10MC50315.

1.1.2. 3.47% American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the DHHS HRSA, ALN 93.870, FAIN X11MC41935; and as awarded on October 28, 2021, FAIN X11MC45263.

1.1.3. 32.46% Administration of Children Youth & Families (ACF), as awarded on October 1, 2022, ALN 93.658, FAIN 2201NHFOST.

1.2. 26.70% General funds.

7. Modify Exhibit C, Payment Terms, Section 7, to read:

7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement and shall be in accordance with the approved line items as specified in Exhibit C-1, Budget Sheet SFY 2023 through Exhibit C-12, Budget Sheet SFY 2029 – Amendment #1.

8. Modify Exhibit C, Payment Terms, Section 9.3, to read:

9.3. The Contractor must not exceed the maximum allotment for weekly rate expenditure by State Fiscal Year, which is as follows:

State Fiscal Year	Amount
SFY 2023	$44,372
SFY 2024	$88,744
SFY 2025	$226,230
SFY 2026	$226,230
SFY 2027	$226,230
SFY 2028	$226,230
SFY 2029	$66,557
Total	**1,104,593**

9. Modify Exhibit C, Payment Terms, by deleting Section 10, in its entirety.
10. Modify Exhibit C-3 Budget Sheet, SFY 2025, by replacing it in its entirety with Exhibit C-3 Budget Sheet, SFY 2025 – Amendment #1, which is attached hereto and incorporated by reference herein.
11. Add Exhibit C-9, Budget Sheet SFY 2026 – Amendment #1, which is attached hereto and incorporated by reference herein.
12. Add Exhibit C-10, Budget Sheet SFY 2027 – Amendment #1, which is attached hereto and incorporated by reference herein.
13. Add Exhibit C-11, Budget Sheet SFY 2028 – Amendment #1, which is attached hereto and incorporated by reference herein.
14. Add Exhibit C-12, Budget Sheet SFY 2029 – Amendment #1, which is attached hereto and incorporated by reference herein.

DS
BLP

Contractor Initials

Date 9/9/2024

All terms and conditions of the Contract not modified by this Amendment remain in full force and effect. This Amendment shall be effective October 1, 2024, upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

9/9/2024
Date

DocuSigned by:
Iain Watt
D7788B63F9704C7...
Name: Iain Watt
Title: Director - DPHS

Community Action Partnership of Strafford County

9/9/2024
Date

DocuSigned by:
Betsey Andrews Parker
85105A0CCB0646E...
Name: Betsey Andrews Parker
Title: CEO

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

9/10/2024
Date

DocuSigned by:
Robyn Guarino
74873484941400...
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Exhibit C-3 Budget Sheet, SFY 2025 - Amendment #1

New Hampshire Department of Health and Human Services

Complete one budget form for each budget period.

Contractor Name: *Community Action Partnership of Strafford County*

Budget Request for: *Home Visiting Services*

Budget Period *SFY 2025 (07/1/24 - 6/30/25)*

Indirect Cost Rate (if applicable) 15.90%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	224,491.92
2. Fringe Benefits	22,449.39
3. Consultants	2,293.95
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	1,067.13
5.(a) Supplies - Educational	1,414.25
5.(b) Supplies - Lab	
5.(c) Supplies - Pharmacy	
5.(d) Supplies - Medical	
5.(e) Supplies Office.	480.00
6. Travel	1,578.00
7. Software	
8. (a) Other - Marketing/ Communications	159.75
8. (b) Other - Education and Training	2,810.00
8. (c) Other - Other (specify below) -	
Subscriptions	2,378.50
Insurance	608.93
audit and legal	0.00
telephone/internet	3,945.00
Occupancy	10,386.64
9. Subrecipient Contracts	0.00
Total Direct Costs	274,063.46
Total Indirect Costs	43,576.54
TOTAL	**317,640.00**

DS

BLP

Contractor Initials: _____

Date: 9/9/2024

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Exhibit C-9, Budget Sheet SFY 2026 - Amendment #1

New Hampshire Department of Health and Human Services	
Contractor Name:	Community Action Partnership of Strafford County
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	SFY 26 (7/1/25 - 6/30/26)
Indirect Cost Rate (if applicable)	15.9%
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$200,960
2. Fringe Benefits	$20,096
3. Consultants	$1,879
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$1,172
5.(a) Supplies - Educational	$936
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$585
6. Travel	$1,872
7. Software	$0
8. (a) Other - Marketing/ Communications	$234
8. (b) Other - Education and Training	$4,200
8. (c) Other - Other (specify below)	$15,914
Other (please specify)	$5,148
Other (please specify)	$94
Other (please specify)	$702
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$254,399
Total Indirect Costs	$40,448
TOTAL	$294,847

Contractor Initials: DS BAP

Date: 9/9/2024

Docusign Envelope ID: 7E4F00AF-FDE1-4B0F-A85C-CE09698120E8

Docusign Envelope ID: 236FC02D-060B-4B59-9E42-DC3A9333B82C

Exhibit C-10, Budget Sheet SFY 2027 - Amendment #1

New Hampshire Department of Health and Human Services	
Contractor Name:	Community Action Partnership of Strafford County
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	SFY 27 (7/1/26 - 6/30/27)
Indirect Cost Rate (if applicable)	15.9

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$15
2. Fringe Benefits	$14,060
3. Consultants	$2,370
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$2,372
5.(a) Supplies - Educational	$928
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$593
6. Travel	$1,896
7. Software	$0
8. (a) Other - Marketing/ Communications	$237
8. (b) Other - Education and Training	$3,586
8. (c) Other - Other (specify below)	$14,223
Other (please specify)	$5,214
Other (please specify)	$94
Other (please specify)	$711
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$187,500
Total Indirect Costs	$29,808
TOTAL	$217,308

Contractor Initials: DS BLP

Date: 9/9/2024

Exhibit C-11, Budget Sheet SFY 2028 - Amendment #1

New Hampshire Department of Health and Human Services	
Contractor Name:	Community Action Partnership of Strafford County
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	SFY 28 (7/1/27 - 6/30/28)
Indirect Cost Rate (If applicable)	15.9
Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$175,678
2. Fringe Benefits	$17,569
3. Consultants	$2,387
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$1,082
5.(a) Supplies - Educational	$1,638
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$540
6. Travel	$2,159
7. Software	$0
8. (a) Other - Marketing/ Communications	$216
8. (b) Other - Education and Training	$4,342
8. (c) Other - Other (specify below)	$14,700
Other (please specify)	$4,752
Other (please specify)	$86
Other (please specify)	$638
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$226,348
Total Indirect Costs	$35,988
TOTAL	$262,336

Contractor Initials: DS BAP

Date: 9/9/2024

Exhibit C-12, Budget Sheet SFY 2029 - Amendment #1

New Hampshire Department of Health and Human Services	
Contractor Name:	Community Action Partnership of Strafford County
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	SFY 29 (7/1/28 - 9/30/28)
Indirect Cost Rate (if applicable)	15.9%
Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$34,812
2. Fringe Benefits	$3,470
3. Consultants	$750
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$200
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$150
6. Travel	$492
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$550
8. (c) Other - Other (specify below)	$4,500
Other (please specify)	$1,500
Other (please specify)	$30
Other (please specify)	$225
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$46,874
Total Indirect Costs	$7,453
TOTAL	$54,327

Contractor Initials: BAP (DS)

Date: 9/9/2024

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH SERVICES

Lori A. Weaver
Interim Commissioner

Patricia M. Tilley
Director

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

December 29, 2022

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, and the Division of Children, Youth and Families, to enter into Retroactive contracts with the contractors listed below in an amount not to exceed $8,847,771 to provide home visiting services, with the option to renew for up to four (4) additional years, effective retroactive to October 1, 2022, upon Governor and Council approval through September 30, 2024. 73.67% Federal Funds. 25.11% General Funds. 1.22% Other Funds.

Contractor Name	Vendor Code	Area Served*	Contract Amount
Community Action Partnership of Strafford County	177200-B004	Rochester Catchment Area	$1,224,446
Granite VNA, Inc.	177244-B002	Conway Catchment Area	$461,064
The Family Resource Center at Gorham	162412-B001	Berlin and Littleton Catchment Areas	$1,590,113
Waypoint	177166-B002	Concord, Manchester, Seacoast and Southern Catchment Areas	$5,572,148
		Total:	**$8,847,771**

* Note the Department did not receive vendor responses for some areas of the state and is currently in the process of re-soliciting for those remaining regions to ensure statewide coverage.

Funds are available in the following accounts for State Fiscal Year 2023, and are anticipated to be available in State Fiscal Years 2024 and 2025, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

Because the Bridges System is used to process and monitor payments for these agreements, no purchase order number is assigned. The New Hampshire First System will not be used to encumber these funds. Depending on the eligibility of the client, funding type is determined at the time of the payment.

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See attached fiscal details.

EXPLANATION

This request is **Retroactive** to avoid any interruption in these services and to allow for continuity of care for families in these regions. This was a complex procurement collaboratively sought by the Division of Public Health Services and the Division for Children, Youth and Families with multiple funding sources. The Department needed additional time to confirm funding details and finalize the contracts and therefore did not have executed contracts in time to present to Governor and Council to prevent the previous contracts from expiring.

The purpose of this request is to provide home visiting services to pregnant individuals, and families with children up to age five (5), by utilizing the evidence-based home visiting model from Healthy Families America and its' Child Welfare Protocols. This nationally recognized program demonstrates positive outcomes for families in the areas of positive parenting practices, improved maternal and child health, improved school readiness, increased economic self-sufficiency and parental educational attainment, and increased linkages and referrals to valuable community resources. This model has also demonstrated reduction in child maltreatment and family violence. Healthy Families America is currently being provided in every County in New Hampshire. The purpose of this request is to ensure continuity of services, while supporting expansion of the program, making it available to a broader population of families, including those involved in New Hampshire's child welfare system.

Approximately 354 individuals will be served during State Fiscal Years 2023, 2024, and 2025.

The Division of Public Health Services will monitor services by:

- Conducting monthly, quarterly, and annual data reviews to evaluate capacity utilization, service delivery by region, and demographic data to ensure equitable provision of services.
- Conducting quarterly and annual data reviews of program performance across 19 federally-defined performance measures.
- Reviewing data entered into model-specific tracking documents by each sub-contractor to ensure fidelity to the requirements of the evidence-based model.

The Division for Children, Youth, and Families will monitor services using the following performance measures:

[1] HFA_Evidence_of_Effectiveness_2022_Website.pdf (healthyfamiliesamerica.org)

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- Referrals
  - Share of families who are referred to Healthy Families America form Division for Children, Youth and Families. (Number of families currently enrolled in Healthy Families America Child Welfare Protocols and percentage of Healthy Families America Child Welfare Protocol slots currently used.)
  - Share of Division for Children, Youth and Families-referred families that were enrolled between three (3) and twenty-four (24) months of age.
  - Share of Division for Children, Youth and Families-referred families with a recent assessment of a Substance Exposed Infant.
- Enrollments
  - Average time to enrollment from the time and date of referral.
  - Number of days from referral date to the first home visit.
  - Share of families that are offered Healthy Family America and percentage of offered families who decide to receive Healthy Family America.
  - Proportion of families that are retained in the program over specified periods of time, (3 months, 6 months, and every 6 months thereafter) after receiving a first home visit.
  - Proportion of families who receive at least seventy-five percent (75%) of the appropriate number of home visits based upon the individual level of service to which they are assigned.
- Program Completion
  - Share of families who do not complete the program, including, reason for non-completion and/or discharge.
  - Share of families that discharged who completed a minimum of specified periods of service. (Starting at 6 months, and every 6 months thereafter up until 36 months of service.)
- Short-term Outcomes
  - Share of families with a new case opened to the Division for Children, Youth and Families, or a new report of maltreatment, within 6 months after discharge.
  - Share of children who enter out-of-home placement within 6 months after discharge, including breakdown of placement type.
  - Share of children who enter any form of out-of-home placement within 12 months of discharge.
  - Differences in outcomes outlined above (i.e., prevention of out of home removal, decreases in risk/needs) by racial/ethnic and geographic characteristics.

The Department selected the contractors through a competitive bid process using a Request for Proposals (RFP) that was posted on the Department's website from June 29, 2022 through August 2, 2022. The Department received four (4) responses that were reviewed and scored by a team of qualified individuals. The Scoring Sheet is attached.

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As referenced in Exhibit A, of the attached agreements, the parties have the option to extend the agreements for up to four (4) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties, and Governor and Council approval.

Should the Governor and Council not authorize this request over 200 New Hampshire families will experience a lapse in preventive services they've come to depend on, leaving vulnerable families without access to proven support for preventing child abuse and neglect, family violence, low birth weight, maternal depression, and developmental delays.

Source of Federal Funds: Assistance Listing Number # 93.870, FAIN # X1043595, X1046878, X1145263; Assistance Listing Number # 93.658, FAIN # (FFPSA) 2201NHFOST; and Assistance Listing Number # 93.391, FAIN # NH75OT000031

In the event that the Federal or Other Funds become no longer available, additional General Funds will not be requested to support this program.

Respectfully submitted,

Lori A. Weaver
Interim Commissioner

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FISCAL DETAIL SHEET

SFY 23, 24 & 25 HOME VISITING SERVICES CONTRACTS

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: PUBLIC HEALTH DIV, BUREAU OF COMM & HEALTH SERV, HOME VISITING FORMULA GNT

100% FEDERAL CFDA #93.870 FAIN.# X1043595, X1046878

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$192,620.00
2023 (10/1/22 - 6/30/23)	102-500731	Contracts for Program Services	90083208	$16,995.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$317,640.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$79,410.00
			SUBTOTAL:	$606,665.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$692,250.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$950,000.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$237,500.00
			SUBTOTAL:	$1,879,750.00

Granite VNA - Vendor #177244-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$80,533.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$109,446.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$27,540.00
			SUBTOTAL:	$217,519.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$269,729.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$378,354.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$92,583.00
			SUBTOTAL:	$740,666.00
			Total of AU 5896	$3,444,600.00

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05-95-92-920510-3382 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIVISION, BUREAU OF DRUG & ALCOHOL SVCS, GOVERNOR COMMISSION FUNDS

100% OTHER FUNDS

Waypoint - Vendor #177166-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023	074-500589	Grants for Pub Asst and Rel	92057502	$108,000.00
			SUBTOTAL:	$108,000.00
			TOTAL OF AU 3382	$108,000.00

05-95-09-902010-5190 HEALTH AND SOCIAL SERVICES. HEALTH AND HUMAN SVCS, HHS: PUBLIC BUREAU OF COMM & HEALTH SERV, MATERNAL - CHILD HEALTH, HEALTH DIV

100% GENERAL FUNDS

Family Resource Center at Gorham - Vendor #162412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	102-500731	Contracts for Program Svcs	90004019	$56,250.00
2024 (7-1-23-6/30/24)	102-500731	Contracts for Program Svcs	90004019	$75,000.00
2025 (7/1/24-9/30/24)	102-500731	Contracts for Program Svcs	90004019	$18,750.00
			SUBTOTAL:	$150,000.00
			TOTAL OF AU 5190	$150,000.00

05-95-09-901010-5771 HEALTH AND SOCIAL SERVICES. HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF POLICY & PERFORMANCE, PH COVID-19 HEALTH DISPARITIES

100% FEDERAL FUNDS CFDA #93.391 FAIN#NH75OT000031

Waypoint - Vendor #177166-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Relief	90577160	$105,000.00
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Relief	90577150	$157,500.00
			SUBTOTAL:	$262,500.00

Family Resource Center at Gorham - Vendor #162412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Relief	90577150	$86,512.00
			SUBTOTAL:	$86,512.00
			TOTAL OF AU 5771	$349,012.00

05-95-90-902010-2451 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV, BUEAU OF COMM & HEALTH SERV, ARP - MIEC HOME VISITING 100% FEDERAL FUNDS CFDA #93.870, FAIN# X1141935 & X1145263

Community Action Partnership of Strafford County - Vendor #177200-B004				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083206	$17,532.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$54,231.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$13,558.00
			SUBTOTAL:	$85,321.00

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Waypoint - Vendor #177166-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083206	$114,064.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$125,000.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$142,350.00
			SUBTOTAL:	$381,414.00

Granite VNA - Vend #177244-B002				
State Fiscal Year	Class / Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083206	$11,452.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$0.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$0.00
			SUBTOTAL:	$11,452.00

Family Resource Center at Gorham - Vendor #162412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083206	$68,714.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$50,000.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$56,532.00
			SUBTOTAL:	$175,246.00
			TOTAL OF AU 2451	$653,433.00

DPHS SUBTOTAL: $4,705,045.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-2958, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD – FAMILY SERVICES
50% FEDERAL CFDA #93.658 FAIN # 2201NHFOST

Community Action Partnership of Strafford County - Vendor #177200-B004				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$199,673.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$66,557.00
			SUBTOTAL:	$532,460.00

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Granite VNA - Vendor #177244-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$87,035.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$116,046.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$29,012.00
			SUBTOTAL:	$232,093.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 -6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$164,133.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,845.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$54,711.00
			SUBTOTAL:	$437,689.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,102,682.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$367,560.00
			SUBTOTAL:	$2,940,484.00
			Total of AU 2958	$4,142,726.00

DCYF SUBTOTAL: $4,142,726.00

COMBINED HOME VISITING SERVICES CONTRACT TOTAL:	$8,847,771.00

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New Hampshire Department of Health and Human Services
Division of Finance and Procurement
Bureau of Contracts and Procurement
Scoring Sheet

Project ID # RFP-2023-DPHS-01-HOMEV

Project Title Home Visiting Services

	Maximum Points Available	Community Action Partnership of Strafford County	Granite VNA, Inc.	The Family Resource Center at Gorham	Waypoint
Technical					
Experience	30	25	24	30	28
Organizational Capacity	35	30	29	33	30
Performance Improvement	25	20	22	24	24
Subtotal - Technical	90	75	75	87	82
Cost					
Budget Sheet (Appendix F & F-1)	5	3	3	4	3
Program Staff List (Appendix G)	5	3	3	4	4
Subtotal - Cost	10	6	6	8	7
TOTAL POINTS	100	81	81	95	89
TOTAL PROPOSED VENDOR COST		$1,064,920	$484,188	$1,750,754	$5,880,958

	Reviewer Name	Title
1	Gaytaen Smith	Administrator III, Finance
2	Lisa Cacciola (Lampron)	Administrator II, DPHS Finance
3	Kristi Hart	Program Specialist IV, DPHS
4	Ashley Janos	Program Specialist IV, DCYF
5	Kelly McCormac	Assessment Supervisor IV, DCYF
6	Aurelia Moran	Supervisor V, DPHS

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FORM NUMBER P-37 (version 12/11/2019)

Subject: Home Visiting Services / RFP-2023-DPHS-01-HOMEV-01

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 Health and Human Services		1.2 State Agency Address 129 Pleasant Street Concord, NH 03301-3857	
1.3 Contractor Name Community Action Partnership of Strafford County		1.4 Contractor Address 577 Central Avenue, Suite 10 Dover, NH 03820	
1.5 Contractor Phone Number 603-435-2500, Ext. 8135	1.6 Account Number 05-095-090-902010-5896 05-095-090-902010-2451 05-095-042-421010-2958	1.7 Completion Date 9/30/2024	1.8 Price Limitation $1,224,446.00
1.9 Contracting Officer for State Agency Robert W. Moore, Director		1.10 State Agency Telephone Number (603) 271-9631	
1.11 Contractor Signature DocuSigned by: Betsey Andrews Parker Date: 12/29/2022		1.12 Name and Title of Contractor Signatory Betsey Andrews Parker CEO	
1.13 State Agency Signature DocuSigned by: Patricia M. Tilley Date: 1/4/2023		1.14 Name and Title of State Agency Signatory Patricia M. Tilley Director	
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: DocuSigned by: Robyn Guarino On: 1/5/2023			
1.17 Approval by the Governor and Executive Council *(if applicable)* G&C Item number: G&C Meeting Date:			

Contractor Initials: DS BAP
Date: 12/29/2022

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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 as indicated in block 1.17, 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. 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 affected 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. 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, 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 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. The State shall have no liability to the Contractor other than the contract price.

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 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.

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. 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 race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3. 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 all rules, regulations and orders, and 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 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

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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) days from the date of the notice; and if the Event of Default is not timely cured, terminate this Agreement, effective two (2) 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.

8.3. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

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) 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) 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. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT B. In addition, at the State's discretion, the Contractor shall, within 15 days of notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement.

10. DATA/ACCESS/CONFIDENTIALITY/ PRESERVATION.

10.1 As used in this Agreement, the word "data" shall mean all 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 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data 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 The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice, which shall be provided to the State at least fifteen (15) days prior to the assignment, and a written consent of the State. For purposes of this paragraph, 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.

12.2 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State. 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. Unless otherwise exempted by law, the Contractor shall indemnify and hold harmless the State, its officers and employees, from and against any and all claims, liabilities and costs for any personal injury or property damages, patent or copyright infringement, or other claims asserted against the State, its officers or employees, which arise out of (or which may be claimed to arise out of) the acts or omissions of the

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Contractor, or subcontractors, including but not limited to the negligence, reckless or intentional conduct. 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 sovereign immunity of the State, 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 his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than ten (10) days prior to the expiration date of each insurance policy. 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 his or her 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. 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.

17. 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.

18. CHOICE OF LAW AND FORUM. This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. 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. Any actions arising out of this Agreement shall be brought and maintained in New Hampshire Superior Court which shall have exclusive jurisdiction thereof.

19. CONFLICTING TERMS. In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and/or attachments and amendment thereof, the terms of the P-37 (as modified in EXHIBIT A) shall control.

20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

21. 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.

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

23. 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.

24. 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.

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EXHIBIT A

Revisions to Standard Agreement Provisions

1. Revisions to Form P-37, General Provisions

1.1. Paragraph 3, Subparagraph 3.1, Effective Date/Completion of Services, is amended as follows:

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 as indicated in block 1.17, this Agreement, and all obligations of the parties hereunder, shall become effective October 1, 2022, ("Effective Date").

1.2. Paragraph 3, Effective Date/Completion of Services, is amended by adding subparagraph 3.3 as follows:

3.3. The parties may extend the Agreement for up to four (4) additional years from the Completion Date, contingent upon satisfactory delivery of services, available funding, agreement of the parties, and approval of the Governor and Executive Council.

1.3. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.3 as follows:

12.3. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions. The Contractor shall have written agreements with all subcontractors, specifying the work to be performed, and if applicable, a Business Associate Agreement in accordance with the Health Insurance Portability and Accountability Act. Written agreements shall specify how corrective action shall be managed. The Contractor shall manage the subcontractor's performance on an ongoing basis and take corrective action as necessary. The Contractor shall annually provide the State with a list of all subcontractors provided for under this Agreement and notify the State of any inadequate subcontractor performance.

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EXHIBIT B

Scope of Services

1. Introduction

1.1. The Contractor must provide services in accordance with Department requirements and the Healthy Families America (HFA) program, which is designed to reduce the risk of child maltreatment by strengthening parent-child relationships, promoting healthy childhood growth, and enhancing family functioning and protective factors. Families enroll voluntarily with HFA, and meet regularly with a Family Support Specialist and receive services tailored to their needs.

HFA is both culturally-inclusive and trauma-informed, and teaches parents about healthy child development and appropriate activities for keeping their child(ren) healthy and thriving. The Contractor must provide services to assist in:

- Increasing caregivers' ability to build attachments with their child(ren);
- Creating foundations for nurturing relationships;
- Enhancing family functioning through reducing risk and increasing protective factors; and
- Developing connections to additional resources, which include, but are not limited to:
  - Housing.
  - Food.
  - Various forms of treatment.
  - School readiness.
  - Childcare.
  - Access to diapers and other supplies.

1.2. The Department, through this Agreement, seeks to assess needs more holistically, and to create crucial linkages across systems that touch vulnerable populations to seamlessly connect them to supports and enhance available services at all levels of needs. The Department's Division of Public Health Services (DPHS) in conjunction with the Division for Children, Youth and Families (DCYF) are collaborating their efforts to achieve this goal. The Contractor must provide services using the HFA program to children and families on behalf of both Divisions.

1.3. For the purposes of this Agreement, all references to day(s) mean Monday through Friday, business days, excluding state and federal holidays.

2. Key Definitions & Terminology

2.1. **Begin Date of Services** –The date the Contractor initiated contact with the client/family, and corresponds with the date listed as "begin date of services" on the Division for Children, Youth and Families (DCYF) Service Authorization Form.

2.2. **CPS** – Child Protective Services.

2.3. **CQI** – Continuous Quality Improvement.

2.4. **Cultural Humility** – Maintaining a willingness to suspend what you know, or what you think you know, about a person based on generalizations about their culture. Rather what you learn about a participant's culture stems from being open to what they themselves have determined is their personal expression of their heritage and culture.

2.5. **CWP** – Child Welfare Protocols.

2.6. **DCYF** – Division for Children, Youth and Families.

2.7. **DHHS** – Department of Health and Human Services.

2.8. **DPHS** – Division of Public Health Services.

2.9. **DO** – District Office.

2.10. **Face-to-face** – An in-person or virtual interaction or home visit (defined below) following the date on which the referral was made in which a provider begins working with the families to deliver HFA.

2.11. **FFPSA** – Family First Prevention Services Act.

2.12. **FTE** – Full time equivalent is a figure calculated from the number of full-time and part-time employees in an organization that represents these workers as a comparable number of full-time employees.

2.13. **GGK** – Growing Healthy Kids is a user friendly and truly comprehensive strength-based approach to growing nurturing parent-child relationships and supporting healthy childhood development.

2.14. **HFA** – Healthy Families America.

2.15. **HFA model** – A well-supported practice that provides home visiting designed to work with families who may have histories of trauma, intimate partner violence, mental health challenge, and/or substance use disorders. HFA services are delivered voluntarily, intensively, and over the long-term.

2.16. **HFA BPS** – Healthy Families America Best Practice Standards.

2.17. **HFA CWP model** – A set of protocols that requires the existing model requirements be provided, while offering additional guidance related to enrollment, caseload management, and establishing a formal MOU with child welfare in order to best serve families. Services are offered for a minimum of three years, regardless of the age of the child at intake, and supports families

with children through age five, which allows sites to enroll families referred by child welfare up to age twenty-four months.

2.18. **HRSA** – Health Resource and Services Administration is the primary Federal agency for improving access to health care services for people who are uninsured, isolated, or medically vulnerable and the funding source of the MIECHV.

2.19. **MIECHV** – Maternal, Infant and Early Childhood Home Visiting – a program that supports pregnant individuals and families and helps at-risk parents of children from birth to kindergarten entry to tap the resources and hone the skills they need to raise children who are physically, socially and emotionally healthy and ready to learn.

2.20. **MOU/MOA** – Memorandum of Understanding/Memorandum of Agreement – a written agreement between two (2) parties to provide certain services.

2.21. **Open Assessment** – Any report of concern received by DCYF that is screened in by DCYF's central intake, and is being investigated by child protection staff.

2.22. **Open Case** – Any case opened to DCYF, including community-based/internal voluntary cases.

2.23. **Out-of-Home Placement** – The removal of a child from their normal place of residence to reside in a court-ordered substitute care setting under the placement and care responsibility of DCYF.

2.24. **PAT** – Parents As Teachers – a foundational curriculum used as an approach to working with families that is relationship-based and parenting-focused.

2.25. **PII** – Personally Identifiable Information.

2.26. **QA** – Quality Assurance.

2.27. **Virtual Home Visit** - A home visit, as described in an applicable service delivery model that is conducted solely by the use of electronic information and telecommunications technologies.[1]

2.28. **Well-supported practice** – An evidence-based service that has at least two (2) contrasts, with non-overlapping samples in studies carried out in usual care or practice settings that achieve a rating of moderate or high on design and execution and demonstrate favorable effects in a target outcome domain. At least one (1) of the contrasts must demonstrate a sustained favorable effect of at least 12 months beyond the end of treatment on at least one (1) target outcome.

3. Statement of Work

3.1. The Contractor must provide face-to-face voluntary home visiting services to

[1] Text - H.R.133 - 116th Congress (2019-2020): Consolidated Appropriations Act, 2021 | Congress.gov | Library of Congress

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pregnant individuals and families with children up to age five (5) by utilizing the evidence-based home visiting model from HFA.

3.2. The Contractor must ensure a minimum of 80% of families served using the traditional HFA model are enrolled in services prenatally or by when the child is 3-months old. The Contractor must offer services in compliance with HFA requirements after enrollment. Eligible families for traditional HFA services (as managed by the Division of Public Heather Services) must fall within one (1) or more of the federally defined priority populations below:

3.2.1. Are first-time parents.

3.2.2. Have income of less than one hundred eighty-five percent (<185%) of the U.S. Department of Health and Human Services (USDHHS) Poverty Guidelines.

3.2.3. Are less than twenty-one (21) years of age.

3.2.4. Have a history of child abuse or neglect, or have had interactions with child welfare services.

3.2.5. Have a history of substance misuse or need substance use disorder treatment.

3.2.6. Are users of tobacco products in the home.

3.2.7. Have or have had a child(ren) with low student achievement.

3.2.8. Have a child(ren) with developmental delays or disabilities.

3.2.9. Are in families that include individuals who are serving or have formerly served in the armed forces.

3.3. The Contractor must service a portion of families utilizing the HFA Child Welfare Protocols (CWP) in the Rochester DCYF Catchment Area, which is attached as Attachment 1. Virtual home visits may also be accommodated, in compliance with HFA requirements. The Contractor must ensure families being served utilizing the CWP have an expanded enrollment window, allowing for enrollment of families with a child up to twenty-four (24) months old, referred by the child welfare system, who are participating in the service voluntarily. The Contractor must serve no less than four (4) DCYF families during the first six (6) months of the contract period and no less than fourteen (14) families thereafter through the end of the contract period.

3.4. The Contractor must serve thirty-two (32) families in the Rochester DCYF Catchment Area under the traditional HFA model.

3.5. Eligible families for HFA CWP services must fall within one (1) of more of the following DCYF FFPSA priority populations:

3.5.1. Pregnant or parenting youth in foster care.

3.5.2. Families with an infant born exposed to substances.

3.5.3. Families assessed by DCYF where the assessment will be closed unfounded.

3.5.4. Families with an open DCYF case who have recently reunified.

3.6. The Contractor must provide services with the goal of reducing risk of maltreatment for children assessed by the DCYF by:

3.6.1. Serving families involved with DCYF through open assessments or open cases, and also beyond their DCYF involvement.

3.6.2. Strengthening parent-child relationships.

3.6.3. Promoting healthy childhood growth.

3.6.4. Enhancing family functioning and protective factors both during and beyond their DCYF involvement with a long-term outcome goal of decreasing future system involvement and the need for out-of-home placement.

3.7. The Contractor must provide services that address the diverse needs of children and families in order to improve health and development outcomes for priority populations through evidence-based home visiting programs, with fidelity to the HFA model BPS. The Contractor must:

3.7.1. Be approved through the HFA model to provide services under this Agreement. The Contractor must:

3.7.1.1. Be approved through HFA, to implement the HFA CWP, which allows enrollment into HFA for DCYF referred families up to twenty-four (24) months of age.

3.7.1.2. Have HFA CWP available in the Rochester DCYF Catchment Area within six (6) months of Governor and Executive Council approval of this Agreement.

3.7.1.2.1 Should the Contractor be unable to begin providing services through the HFA CWP by the date specified above, a corrective action plan must be developed by the Contractor and approved by the Department.

3.7.1.2.1.1. In the event that the HFA National Office denies the Contractor use of the CWP, the Contract must develop a subcontract or MOA with an approved, accredited HFA provider to provide this service, no later than thirty (30) business days from the date of the denial.

3.7.2. Select and implement an evidence-based curriculum to support

prenatal individuals and newly parenting families. Family Support Specialists (FSS) must be trained within six (6) months of hire on the following:

3.7.2.1. Parents as Teachers (PAT), as an annually trained "Approved user;" or

3.7.2.2. Growing Great Kids (GGK) with certification of training.

3.7.3. Collaborate with other early childhood and social service agencies to support linkages to services beneficial to families.

3.7.4. Ensure the twelve (12) critical elements that make up the essential components of the HFA model are addressed in agency policies.

3.7.5. Enter personally identifiable information (PII) for all participants served under this Agreement into the Department's designated Home Visiting Data System.

3.8. The Contractor must identify positive ways to establish relationships with each family and keep families engaged and connected over time, as participants may be reluctant to engage in services and may have difficulty building trusting relationships. The Contractor must use creative outreach strategies, such as Motivational Interviewing, to re-engage families who have disengaged.

3.9. The Contractor must adhere to HFA's site requirements by ensuring weekly individual supervision is received by all direct service staff.

3.10. The Contractor must provide monthly reflective consultation groups for direct service staff and supervisors with a skilled Infant Mental Health consultant.

3.11. The Contractor must offer home visits by licensed nurses (registered nurse (RN) or greater education level) during the prenatal and post-partum periods at a frequency of once per trimester prenatally, and once per quarter during the first year post-partum.

3.12. The Contractor must offer services that are comprehensive and focus on supporting the parent/caregiver, as well as supporting the parent-child interaction and child development. Additionally, all families must be linked to a medical provider and other services, as appropriate.

3.13. The Contractor must obtain all necessary authorizations for release of information. All forms developed for authorization for release of information must be made available for review by the Department during site visits for selected case reviews.

3.14. The Contractor must coordinate, where possible, with other local service providers including, but not limited to:

3.14.1. Health care providers.

3.14.2. Social workers.

3.14.3. Social services.

3.14.4. Early interventionists.

3.15. The Contractor must develop and maintain an advisory group comprised of community partners, family participants, and agency staff with a wide range of skills and abilities, including representatives with diverse skills, strengths, community knowledge, professions, and cultural diversity. The Contractor must:

3.15.1. Promote equity in all facets of operations with families, staff, and community.

3.15.2. Maintain policy or other written guidance expressing the Contractor's commitment to respectful staff interactions and supporting staff to continually strengthen their relational skills focused on diversity, equity, and inclusion.

3.15.3. Gather information to reflect on and better understand issues impacting staff and families served and to examine the effectiveness of its equity strategies.

3.15.4. Develop an equity plan based on what it learns about itself, from an equity perspective, in the way it supports its staff, the families it serves, and the community it works within to set a course for continuous improvement to achieve greater equity in all facets of its work.

3.16. The Contractor must evaluate the progress of each program participant, as well as the performance of programs and services provided.

3.17. The Contractor must ensure that they:

3.17.1. Collaborate with relevant DCYF staff and related stakeholders when a valid release of information has been signed or a subpoena has been issued by the court.

3.17.2. Make reports to DCYF Central Intake if they suspect child abuse or neglect, consistent with their responsibility, as mandated reporters under New Hampshire law.

3.18. The Contractor must actively and regularly collaborate monthly, with both Divisions, to enhance contract management, improve results, and adjust program delivery and policy, based on successful outcomes.

3.19. Compliance Standards

3.19.1. The Contractor must offer services to all families referred by the Department unless that family is identified as ineligible for HFA under model specifications and requirements.

3.19.2. The Contractor must ensure referrals are accepted from multiple

sources within the child welfare system including, but not limited to:

3.19.2.1. DCYF Juvenile Justice Services.

3.19.2.2. DCYF Child Protective Services (CPS).

3.19.3. The Contractor must adhere to all specifications and requirements, in compliance with NH DCYF's 5-year prevention plan and the Family First Prevention Service Act (FFPSA), for HFA CWP cases, including but not limited to:

3.19.3.1. All data reporting;

3.19.3.2. Record keeping and retention;

3.19.3.3. Fiscal compliance;

3.19.3.4. Maintenance of an evidence-based program identified as well-supported through the Title IV-E Clearinghouse;

3.19.3.5. Documented prevention type on the DCYF service authorization (which will be completed by the Department); and

Submitting a completed prevention plan every twelve (12) months for every DCYF- referred family. DCYF staff will complete the initial prevention plan for families, and the Contractor must update the plans at the 12-month mark and annually. The Department will distribute associated guidance after DCYF's 5-year plan is reviewed and approved.

3.19.4. The Contractor must collaborate with the Department to ensure that all program policies, procedures, and documents align with NH DCYF and DPHS policies, NH state law, and Department needs.

3.19.5. The Contractor must identify staff responsible for submitting reports and data to the Department within 30 days of the Agreement effective date.

3.20. Staffing:

3.20.1. The Contractor must follow all HFA Essential and Safety standards for staffing, hiring, training, and supervision, as outlined in HFA BPS.

3.20.2. The Contractor must ensure HFA home visiting staff have at least a high school diploma or equivalent, experience providing services to families, and knowledge of child development. Supervisors and Program Managers must have at least a Bachelor's degree with three (3) years prior experience.

3.20.3. The Contractor must ensure FSSs receive extensive training in the program model before delivering the service and on a recurring basis.

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Training must comply with all HFA model specifications and requirements, including but not limited to:

3.20.3.1. Attending a four-day core training that is specialized based on role (assessors, home visitors, and supervisors).

3.20.3.2. Supervisors attending one (1) additional day for the core training and an optional three (3) days of training that focuses on building reflective supervision skills.

3.20.3.3. Program managers are required to attend core training plus three (3) days of training focused on how to implement the model to fidelity using the HFA BPS.

3.20.4. The Contractor must ensure additional available training is beneficial to the staff in delivering HFA. Training and conferences topics must include but are not limited to:

3.20.4.1. Substance use.

3.20.4.2. Childhood Maltreatment (Abuse/Neglect).

3.20.4.3. Parenting techniques.

3.20.4.4. Cultural competence/humility.

3.20.4.5. Childhood and generational trauma (Trauma-Informed).

3.20.4.6. Engagement strategies.

3.20.5. The Contractor must ensure each Family Support Specialist (FSS) maintains a caseload of no more than ten (10) to twelve (12) families per 1 FTE for the first two (2) years of employment and no more than fifteen (15) to twenty (20) families per one (1) FTE after completing 24 months of employment for traditional HFA; and no more than ten (10) to twelve (12) families at any time for HFA CWP. These caseload maximums shall be prorated per HFA requirements for staff with less than 40 hours per week dedicated to the role of FSS.

3.21. The Contractor must maintain HFA accreditation and follow all BPS related to hiring, staffing levels, training, and supervision among other components of the model.

3.22. **Discharge from HFA services:**

3.22.1. The Contractor must develop a discharge plan for each family, beginning at the time of admission and continuing throughout service.

3.22.2. The Contractor must not discharge any family referred by the Department without following a protocol specified by the Department.

3.23. **Extending HFA services:**

3.23.1. The Contractor must offer HFA Services to the child and family for a

minimum of three (3) years in total.

3.24. Reporting

3.24.1. The Contractor must complete a Monthly Capacity Analysis Report, which is attached as Attachment 2 on a form provided by the Department. This document must be submitted to DPHS no later than the 15th of each month, containing the prior month's data.

3.24.2. The Contractor, on a quarterly (January, April, July, and October) and annual (October) basis, must submit to DCYF:

3.24.2.1. Form 1, which is attached as Attachment 3.

3.24.2.2. Form 2, which is attached as Attachment 4.

3.24.3. The Contractor may be required to provide new data reporting requirements, or other key data and metrics including client-level demographic, performance, and service data to the Department in a format specified by the Department.

3.25. Background Checks

3.25.1. For all Contractor employees, interns, volunteers, and any subcontractor employees, interns, and volunteers providing services under this Agreement, the Contractor must, at its own expense, after obtaining a signed and notarized authorization form the individual(s) for whom information is being sought:

3.25.1.1. Submit the person's name for review against the Bureau of Elderly Adult Services (BEAS) state registry maintained pursuant to RSA 161-F:49;

3.25.1.2. Submit the person's name for review against the Division for Children, Youth and Families (DCYF) center registry pursuant to RSA 169-C:35;

3.25.1.3. Complete a criminal records check to ensure that the person has no history of:

3.25.1.3.1. Felony conviction; or

3.25.1.3.2. Any misdemeanor conviction involving:

3.25.1.3.2.1. Physical or sexual assault;

3.25.1.3.2.2. Violence;

3.25.1.3.2.3. Exploitation;

3.25.1.3.2.4. Child pornography;

3.25.1.3.2.5. Threatening or reckless conduct;

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3.25.1.3.2.6. Theft;

3.25.1.3.2.7. Driving under the influence of drugs or alcohol; or

3.25.1.3.2.8. Any other conduct that represents evidence of behaviors that could endanger the well-being of any individual served under this Agreement; and

3.25.2. Unless approval is granted by the Department, the Contractor must not permit any employee, volunteer, intern, or subcontractor to provide services under this Agreement until the Contractor has confirmed:

3.25.2.1. The individual's name is not on the BEAS state registry;

3.25.2.2. The individual's name is not on the DCYF central registry;

3.25.2.3. The individual does not have a record of a felony conviction; or

3.25.2.4. The individual does not have a record of any misdemeanors as specified above.

3.26. Confidential Data

3.26.1. The Contractor must meet all information security and privacy requirements as set by the Department and in accordance with the Department's Exhibit K, DHHS Information Security Requirements.

3.26.2. The Contractor must ensure any staff and/or volunteers involved in delivering services through this Agreement, sign an attestation agreeing to access, view, store, and discuss Confidential Data in accordance with federal and state laws and regulations and the Department's Exhibit K. The Contractor must ensure said individuals have a justifiable business need to access confidential data. The Contractor must provide attestations upon Department request.

3.26.3. Upon request, the Contractor must allow the Department to conduct a Privacy Impact Assessment (PIA) of its system. To conduct the PIA the Contractor must provide the Department access to applicable systems and documentation sufficient to allow the Department to asses, at minimum, the following:

3.26.3.1. How PII is gathered and stored;

3.26.3.2. Who will have access to PII;

3.26.3.3. How PII will be used in the system;

3.26.3.4. How individual consent will be achieved and revoked and

3.26.3.5. Privacy practices.

3.26.4. The Department may conduct follow-up PIAs in the event there are either significant process changes or new technologies impacting the collection, processing or storage of PII.

3.27. Contract End-of-Life Transition Services

3.27.1. If applicable, upon termination or expiration of the Agreement, the Parties agree to cooperate in good faith to effectuate a smooth secure transition of the services from the Contractor to the Department and, if applicable, the Contractor engaged by the Department to assume the services previously performed by the Contractor for this section the new Contractor shall be known as ("Recipient"). Ninety (90) days prior to the end-of the contract or unless otherwise specified by the Department, the Contractor must begin working with the Department and if applicable, the new Recipient to develop a Data Transition Plan (DTP) on a template provided by the Department.

3.27.2. The Contractor must use reasonable efforts to assist the Recipient, in connection with the transition from the performance of Services by the Contractor and their Affiliates to the performance of such Services. This may include assistance with the secure transfer of records (electronic and hard copy), transition of historical data (electronic and hard copy), the transition of such Service from the hardware, software, network and telecommunications equipment and internet-related information technology infrastructure ("Internal IT Systems") of Contractor to the Internal IT Systems of the Recipient and cooperation with an assistance to any third-party consultants engaged by Recipient in connection with the Transition Services.

3.27.3. If a system, database, hardware, software, and/or software license ("Tools") was purchased or created to manage, track, and/or store State Data in relationship to this Contract, said Tools will be inventoried and returned to the Department, along with the inventory document, once transition of State Data is complete.

3.27.4. The internal planning of the Transition Services by the Contractor and its Affiliates must be provided to the Department and if applicable, the Recipient in a timely manner. Any such Transition Services must be deemed to be Services for purposes of this Contract.

3.27.5. Should the Data Transition extend beyond the end of the Contract, the Contractor and its Affiliates agree Contract Information Security Requirements, and if applicable, the Department's Business Associates Agreement terms and conditions remain in effect until the Data Transition is accepted as complete by the Department.

3.27.6. In the event where the Contractor has comingled Department Data and the destruction of Transition of said data is not feasible, the Department and Contractor will jointly evaluate regulatory and professional standards for retention requirements prior to destruction.

3.28. Website and Social Media

3.28.1. Contractor agrees that if performance of services on behalf of the Department involves using social media or a website to solicit information of individuals, or Confidential data, the Contractor must work with the Department's Communication Bureau to ensure that any social media or website designed, created, or managed on behalf of the Department meets all of the Department's and NH Department of Information Technology's website and social media requirements and policies.

3.28.2. Contractor agrees that protected health information (PHI), personal identifiable information (PII), or other confidential information solicited either by social media or the website that is maintained, stored or captured must not be further disclosed, unless expressly provided in the Contract. The solicitation or disclosure of PHI, PII, or other confidential information is subject to the Information Security Requirements Exhibit, the Business Associates Agreement Exhibit and all applicable state rules and state and federal laws. Unless specifically required by the Contract and unless clear notice is provided to users of the website or social media, the Contractor agrees that site visitation will not be tracked, disclosed or used for website or social medial analytics or marketing.

3.29. Performance Measures

3.29.1. For services provided for DPHS, the Department will monitor Contractor performance by reviewing indicated reporting requirements on Form 1, which is attached as Attachment 3, and Form 2, which is attached as Attachment 4, and working with the Contractor to select areas to improve upon utilizing CQI strategies through a data driven process.

3.29.2. For services provided for DCYF, the Department will focus on specific data points collected through its internal data systems, monthly, quarterly and annual submissions via email, and existing HFA data collection reports on DCYF Key Performance Metrics, which are attached as Attachment 5.

4. Exhibits Incorporated

4.1. The Contractor must use and disclose Protected Health Information in compliance with the Standards for Privacy of Individually Identifiable Health

Information (Privacy Rule) (45 CFR Parts 160 and 164) under the Health Insurance Portability and Accountability Act (HIPAA) of 1996, and in accordance with the attached Exhibit I, Business Associate Agreement, which has been executed by the parties.

4.2. The Contractor must manage all confidential data related to this Agreement in accordance with the terms of Exhibit K, DHHS Information Security Requirements.

4.3. The Contractor must comply with all Exhibits D through K, which are attached hereto and incorporated by reference herein.

5. Additional Terms

5.1. Impacts Resulting from Court Orders or Legislative Changes

5.1.1. The Contractor agrees that, to the extent future state or federal legislation or court orders may have an impact on the Services described herein, the State has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

5.2. Federal Civil Rights Laws Compliance: Culturally and Linguistically Appropriate Programs and Services

5.2.1. The Contractor must submit, within ten (10) days of the Agreement Effective Date, a detailed description of the communication access and language assistance services to be provided to ensure meaningful access to programs and/or services to individuals with limited English proficiency; individuals who are deaf or have hearing loss; individuals who are blind or have low vision; and individuals who have speech challenges.

5.3. Credits and Copyright Ownership

5.3.1. All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Agreement must include the following statement, "The preparation of this (report, document etc.) was financed under an Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services."

5.3.2. All materials produced or purchased under the Agreement must have prior approval from the Department before printing, production, distribution or use.

5.3.3. The Department must retain copyright ownership for any and all

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original materials produced, including, but not limited to:

5.3.3.1. Brochures.

5.3.3.2. Resource directories.

5.3.3.3. Protocols or guidelines.

5.3.3.4. Posters.

5.3.3.5. Reports.

5.3.4. The Contractor must not reproduce any materials produced under the Agreement without prior written approval from the Department.

5.4. Operation of Facilities: Compliance with Laws and Regulations

5.4.1. In the operation of any facilities for providing services, the Contractor must comply with all laws, orders and regulations of federal, state, county and municipal authorities and with any direction of any Public Officer or officers pursuant to laws which must impose an order or duty upon the contractor with respect to the operation of the facility or the provision of the services at such facility. If any governmental license or permit must be required for the operation of the said facility or the performance of the said services, the Contractor will procure said license or permit, and will at all times comply with the terms and conditions of each such license or permit. In connection with the foregoing requirements, the Contractor hereby covenants and agrees that, during the term of this Agreement the facilities must comply with all rules, orders, regulations, and requirements of the State Office of the Fire Marshal and the local fire protection agency, and must be in conformance with local building and zoning codes, by-laws and regulations.

6. Records

6.1. The Contractor must keep records that include, but are not limited to:

6.1.1. Books, records, documents and other electronic or physical data evidencing and reflecting all costs and other expenses incurred by the Contractor in the performance of the Contract, and all income received or collected by the Contractor.

6.1.2. All records must be maintained in accordance with accounting procedures and practices, which sufficiently and properly reflect all such costs and expenses, and which are acceptable to the Department, and to include, without limitation, all ledgers, books, records, and original evidence of costs such as purchase requisitions and orders, vouchers, requisitions for materials, inventories, valuations of in-kind contributions, labor time cards, payrolls, and other records requested or required by the Department.

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6.1.3. Statistical, enrollment, attendance or visit records for each recipient of services, which records must include all records of application and eligibility (including all forms required to determine eligibility for each such recipient), records regarding the provision of services and all invoices submitted to the Department to obtain payment for such services.

6.2. During the term of this Agreement and the period for retention hereunder, the Department, the United States Department of Health and Human Services, and any of their designated representatives must have access to all reports and records maintained pursuant to the Agreement for purposes of audit, examination, excerpts and transcripts. If, upon review of the Final Expenditure Report the Department must disallow any expenses claimed by the Contractor as costs hereunder the Department must retain the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

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Attachment 1:
DCYF Catchment Area Locations

Berlin
(650 Main Street Suite 200, Berlin NH 03570)

Serving the cities, towns, and locations of:

- Atkinson and Gilmanton Academy Grant
- Bean's Grant
- Bean's Purchase
- Berlin
- Bretton Woods
- Cambridge
- Carroll
- Cascade
- Chandlers Purchase
- Clarksville
- Colebrook
- Columbia
- Coos Junction
- Crawford's Purchase
- Crystal
- Cutt's Grant
- Dalton
- Dix's Grant
- Dixville
- Dummer
- Errol
- Ervings Location
- Fabyan Gorham
- Grange Greens Grant
- Groveton
- Hadley's Purchase
- Jefferson
- Kilkenny
- Lancaster
- Low and Burbank's Grant
- Maplewood
- Martin's Location
- Milan
- Millsfield
- North Stratford
- Northumberland
- Odell
- Percy
- Pinkham's Grant
- Pittsburg
- Randolph
- Riverton
- Sargent's Purchase
- Second College Grant
- Shelburne
- South Lancaster
- Stark
- Stewartstown
- Stratford
- Stratford Hollow
- Success
- Thompson & Meserve's Purchase
- Twin Mountain
- Wentworth's Location
- West Milan
- West Stewartstown
- Whitefield

Littleton
(80 North Littleton Road, Littleton, NH 03561)

Serving the cities, towns, and locations of:

- Apthorp
- Bath
- Benton
- Bethlehem
- Bethlehem Junction
- Center Haverhill
- East Haverhill
- Easton
- Franconia
- Glencliff
- Haverhill
- Landaff
- Lincoln
- Lisbon
- Littleton
- Livermore
- Lyman
- Monroe
- North Haverhill
- North Woodstock
- Pierce Bridge
- Piermont
- Pike
- Sugar Hill
- Warren
- Woodstock
- Woodsville

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Attachment 1:
DCYF Catchment Area Locations

Conway
(71 Hobbs Street, Conway NH 03818)

Serving the cities, towns, and locations of:

- Albany
- Bartlett
- Brookfield
- Center Conway
- Center Effingham
- Center Ossipee
- Center Sandwich
- Center Tuftonboro
- Chatham
- Chocorua
- Conway
- East Conway
- East Wakefield
- Eaton
- Effingham
- Freedom
- Glen
- Granite
- Hale's Location
- Hart's Location
- Intervale
- Jackson
- Kearsarge
- Madison
- Melvin Village
- Mirror Lake
- Moultonborough
- Moultonville
- North Conway
- North Sandwich
- Ossipee
- Redstone
- Sanbornville
- Sandwich
- Silver Lake
- Snowville
- South Chatham
- South Effingham
- South Tamworth
- Tamworth
- Tuftonboro
- Union
- Wakefield
- West Ossipee
- Wolfeboro
- Wolfeboro Falls
- Wonalancet

Claremont
(17 Water Street, Suite 301, Claremont NH 03743)

Serving the cities, towns, and locations of:

- Acworth
- Beauregard Village
- Burkehaven
- Canaan
- Charlestown
- Claremont
- Cornish
- Cornish Flat
- Croydon
- East Lempster
- Enfield
- Enfield Center
- Etna
- Georges Mills
- Goshen
- Grafton
- Grantham
- Guild
- Hanover
- Langdon
- Lebanon
- Lempster
- Lyme
- Lyme Center
- Meriden
- Mount Sunapee
- Newport
- Orange
- Orford
- Plainfield
- South Acworth
- South Charlestown
- Springfield
- Sunapee
- Unity
- Washington
- West Canaan
- West Lebanon
- West Springfield
- West Unity

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Attachment 1:
DCYF Catchment Area Locations

Keene
(111 Key Road, Keene NH 03431).

Serving the cities, towns, and locations of:

- Alstead
- Antrim
- Ashuelot
- Bennington
- Chesterfield
- Deering
- Drewsville
- Dublin
- East Sullivan
- East Swanzey
- East Westmoreland
- Fitzwilliam
- Gilsum
- Greenfield
- Greenville
- Hancock
- Harrisville
- Hillsborough
- Hillsborough Upper Village
- Hinsdale
- Jaffrey
- Keene
- Marlborough
- Marlow
- Munsonville
- Nelson
- New Ipswich
- North Swanzey
- North Walpole
- Peterborough
- Richmond
- Rindge
- Roxbury
- Sharon
- Spofford
- Stoddard
- Sullivan
- Surry
- Swanzey
- Temple
- Troy
- Walpole
- West Chesterfield
- West Deering
- West Peterborough
- West Swanzey
- Westmoreland
- Westport
- Winchester
- Windsor

Laconia
(65 Beacon Street West, Laconia NH 03246)

Serving the cities, towns, and locations of:

- Alexandria
- Alton
- Alton Bay
- Ashland
- Barnstead
- Bear Island
- Belmont
- Bridgewater
- Bristol
- Campton
- Center Barnstead
- Center Harbor
- Dorchester
- East Holderness
- Ellsworth
- Gilford
- Gilmanton
- Gilmanton Corners
- Gilmanton Iron Works
- Glendale
- Governor Isle
- Groton
- Hebron
- Holderness
- Laconia
- Lakeport
- Lochmere
- Lower Gilmanton
- Meredith
- Meredith Center
- New Hampton
- North Sanbornton
- Plymouth
- Quincy
- Rumney
- Sanbornton
- Thornton
- Tilton
- Waterville Valley
- Weirs
- Wentworth
- West Alton
- West Rumney
- Winnisquam

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Attachment 1:
DCYF Catchment Area Locations

Concord *(40 Terrill Park Drive, Concord, NH 03301)*		
Serving the cities, towns, and locations of:		
▪ Allenstown	▪ Epsom	▪ Penacook
▪ Andover	▪ Francestown	▪ Pinardville
▪ Blodgett Landing	▪ Franklin	▪ Pittsfield
▪ Boscawen	▪ Gerrish	▪ Potter Place
▪ Bow	▪ Goffstown	▪ Salisbury
▪ Bradford	▪ Gossville	▪ Short Falls
▪ Canterbury	▪ Henniker	▪ South Danbury
▪ Chichester	▪ Hill	▪ South Sutton
▪ Concord	▪ Hooksett	▪ Suncook
▪ Contoocook	▪ Hopkinton	▪ Sutton
▪ Danbury	▪ Loudon	▪ Warner
▪ Davisville	▪ New Boston	▪ Weare
▪ Dunbarton	▪ New London	▪ Webster
▪ East Andover	▪ Newbury	▪ Webster Lake
▪ East Concord	▪ North Sutton	▪ West Franklin
▪ East Sutton	▪ North Wilmot	▪ Wilmot
▪ Elkins	▪ Northfield	▪ Wilmot Flat
	▪ Pembroke	

Manchester *(1050 Perimeter, Suite 501, Manchester, NH 03103)*
Serving the city of: Manchester

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Attachment 1:
DCYF Catchment Area Locations

Rochester
(150 Wakefield Street Suite 22, Rochester NH 03867)

Serving the cities, towns, and locations of:

- Barrington
- Center Strafford
- Dover
- Durham
- East Rochester
- Farmington
- Gonic
- Lee
- Madbury
- Middleton
- Milton
- Milton Mills
- New Durham
- Rochester
- Rollinsford
- Strafford

Seacoast
(19 Rye St. Portsmouth, NH 03801)

Serving the cities, towns, and locations of:

- Auburn
- Brentwood
- Candia
- Danville
- Deerfield
- East Kingston
- Epping
- Exeter
- Fremont
- Greenland
- Hampton
- Hampton Beach
- Hampton Falls
- Kensington
- Kingston
- New Castle
- Newfields
- Newington
- Newmarket
- Newton
- Newton Junction
- North Hampton
- Northwood
- Nottingham
- Portsmouth
- Raymond
- Rye
- Rye Beach
- Seabrook
- Somersworth
- South Hampton
- Stratham
- West Nottingham

Southern
(26 Whipple St. Nashua, NH 03060)

<u>District Office</u> serving the cities, towns, and locations of:

- Amherst
- Bedford
- Brookline
- Hollis
- Hudson
- Litchfield
- Lyndeborough
- Mason
- Merrimack
- Milford
- Mont Vernon
- Nashua
- North Salem
- Pelham
- Reeds Ferry
- Salem
- Wilton
- Windham

<u>Southern Telework</u> serving the cities, towns, and locations of:

- Atkinson
- Chester
- Derry
- East Derry
- East Hampstead
- Hampstead
- Londonderry
- Plaistow
- Sandown

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Attachment 2 - Capacity Analysis Report

INTRODUCTION & NOTES	CASELOAD AND CAPACITY ANALYSIS: To be completed for each month of the contract period This Excel tool has been set up to automatically calculate the caseload and capacity analysis for your Local Implementing Agency. Caseload and capacity analysis are calculated across all LIAs. Please do not copy this workbook to use next month. Instead, open the file named for monthly data you are reporting (i.e., in early January, open the file named "CA 2017" to report Dece[illegible]. The "New Home Visitor" tab has been designed for home visitors in their first 24 months to [illegible]
USE	1. Click on a home visitor worksheet (HV) tab, below. Enter the home visitor's information into theGREEN CELLS only: their Name, # hours per week paid by HFA, and % of HFA time as a home visitor. 2. Enter the number of families on each level that the home visitor saw in the reporting month. 3. Repeat Steps 1-2 for each home visitor allocated to HFA Home Visiting during the month, in the separate tabs provided. 4. If you have a home visitor position that is currently vacant, please indicate this using "RECRUITMENT" instead of the home visitor's name. 5. Click the "Capacity Analysis" worksheet tab to review the analysis for your Local Implementing Agency this month. NOTE: to optimize your case-assignment planning, use next month's workbook to model your family and case-weight numbers, and see what your performance results will be!
MAIN VARIANCE	PLEASE FOLLOW IF YOUR FAMILY SERVICE WORKER IS CHANGED IN THE REPORTING MONTH If your HFA home visiting staff changed, but the number of HFA home visitors did not exceed 5, simply change the "Name of staff member" in Cell B2. Return to this Step 1. If the number of HFA home visitors during the reporting month was greater than 5, contact the State Team for technical assistance, OR: 1. Duplicate the last FSW worksheet tab (right-click, select "move or copy", click box "create a copy", move to "before Capacity Analysis") 2. Update formulas in the Capacity Analysis worksheet tab to include the new FSW worksheet: a. # families served, per case weight category (cells E3:I3) b. % of monthly home visitor capacity utilized (cells E7, F7) c. Service Utilization % (cells, E10, F10)
Note: The # of hours paid should be the salaried or expected contracted hours for HFA only, regardless of vacation days, out of office, sick, etc. Note: The % of time spent home visiting should be the % of time - of the HFA hours recorded above - doing home visiting work. For FSWs who are NOT also doing FAW work, the % will be 100% Once the green cells are filled, all orange fields and the Capacity Analysis worksheet will auto-calculate for the individual home visitors and for your LIA If the total number of families or the total weighted caseload is above the maximum, the corresponding field will turn red	

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Attachment 2 - Capacity Analysis Report

Month for Caseload Analysis	January 2022											
Hire Date (New Hire under 24 months only)		6/21/2022			Permanent Special Circumstances (PSC) Families should be captured above at their level, AND in this section if they have any of the following: need an interpreter, have multiple births (twins, triplets, etc.), have significant additional travel time, or a child with special needs							
Areas of staff member					# of families with additional caseweights due to PSCs							
# hours per week worked for HFA only												
Of the hours above, % time as HFA home visitor												
Caseload multiplier	0.00											
Levels	Description	Number of Families on Level	Weight	Weighted Caseload per Level	0.5	1	1.5	2	2.5	3	Extra Case Weight	
Level 2P	Prenatal - visits every other week during first and second trimester		2.00	0							0	
Level 1P	Prenatal - visits every week in third trimester (or earlier if needed)		2.00	0							0	
Level 1	First 6 months after birth or enrollment - visits every week		2.00	0							0	
Level 2	Visits every other week		1.00	0							0	
Level 3	Visits once per month		0.50	0							0	
Level 1SS	Crisis intervention - visits weekly, or more if needed		3.00	0								
Level 4	Visits once per quarter		0.25	0								
Creative Outreach (CO)	Creative Outreach (CO) is for families that completed at least one home visit but become disengaged. CO families are given the same caseweight they had prior to going on CO, to ensure space if re-engaged.											
Level CO1			2.00	0								
Level CO2			1.00	0								
Level CO3			0.50	0								
Temporary Assignments (T01-T3)	Temporarily Out of Area (TO): for up to 3 months, families are given the same caseweight they had prior to going on CO, to ensure space if re-engaged. Temporary Re-Assignment (TR): for up to 3 months, families accept voluntary re-assignment to another FSW due to leave or turnover											
Level TO1			2.00	0								
Level TO2			1.00	0								
Level TO3			0.50	0								
Level TR			0.50	0								
	Actual totals	0		0	Total additional PSC caseweights							
	Minimum for fidelity	0		0	0							
	HFA CAPACITY CALCULATION	#DIV/0!										
	FSW Contribution to HFA CAPACITY CALCULATION	0.0%										

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Attachment 2 - Capacity Analysis Report

Month for Caseload Analysis		6/15/2022			Permanency Special Circumstances (PSC) families should be captured above at their level, AND in the section if they have any of the following: need an interpreter, have multiple births (twins, triplets, etc.), have significant additional travel time, or a child with special needs							
Hire Date (New Hire under 24 months only)												
Name of staff member												
# hours per week worked for HFA only												
Of the hours above, % time as HFA home visitor					# of families with additional caseweight due to PSCs							
Caseload multiplier	0.00											
Levels	Descriptions	Number of Families on Level	Weight	Weighted Caseload per Level	0.5	1	1.5	2	2.5	3	Extra Case Weight	
Level 2P	Prenatal - visits every other week during first and second trimester		2.00	0							0	
Level 3P	Prenatal - visits every week in third trimester (or earlier if needed)		2.00	0							0	
Level 1	First 6 months after birth or enrollment - visits every week		2.00	0							0	
Level 2	Visits every other week		1.00	0							0	
Level 3	Visits once per month		0.50	0							0	
Level 1SS	Crisis intervention - visits weekly, or more if needed		3.00	0								
Level 4	Visits once per quarter		0.25	0								
Creative Outreach (CO)	Creative Outreach (CO) is for families that completed at least one											
Level 1CO1	home visit but become disengaged.		2.00	0								
Level CO2	CO families are given the same caseweight they had prior to going on		1.00	0								
Level CO3	CO, to ensure space if re-engaged.		0.50	0								
Temporary Assignments (TO, TR)	Temporarily Out of Area (TO): for up to 3 months, families at a given											
Level TO1	the same caseweight they had prior to going on CO, to ensure space if		2.00	0								
Level TO2	re-engaged.		1.00	0								
Level TO3	Temporary Re-Assignment (TR): for up to 3 months, families accept		0.50	0								
Level TR	voluntary re-assignment to another FSW due to leave or turnover		0.50	0								
	Actual percent	0		0	Total additional PSC caseweights							
	Maximum for fidelity	0		0	0							
	HFA CAPACITY CALCULATION	#DIV/0!										
	FSW Contribution to HRSA CAPACITY CALCULATION	0.0%										

PSC EXPLICATION

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Attachment 2 - Capacity Analysis Report

Month for Caseload Analysis												
Name of staff member												
# hours per week worked for HFA only												
Of the hours above, % time on HFA home visits												
Caseload multiplier	0.00											
Levels	Description	Number of Families on Level	Weight	Weighted Caseload per Level	0.5	1	1.5	2	2.5	3	Level Case Weight
Level 1P	Prenatal - visits every other week during first and second trimesters		2.00	0							0
Level 1P	Prenatal - visits every week in third trimester (or earlier if needed)		2.00	0							0
Level 1	First 6 months after birth or enrollment - visits every week		2.00	0							0
Level 2	Visits every other week		1.00	0							0
Level 3	Visits once per month		0.50	0							0
Level 1SS	Crisis intervention - visits weekly, or more if needed		3.00	0							
Level 4	Visits once per quarter		0.25	0							
Creating Outreach (CO)	Creative Outreach (CO) is for families that completed all HFA core										
Level CO1	home visit but became disengaged.		2.00	0							
Level CO2	CO1 and CO3 are given the same caseweight they had prior to going on		1.00	0							
Level CO3	CO. When they access X re-engage.		0.50	0							
Temporary Assignments (TO, TR)	Temporarily Out of Area (TO): for up to 3 months, families are given										
Level TO1	the same caseweight they had prior to going on CO, to ensure space		2.00	0							
Level TO2	if re-engaged.		1.00	0							
Level TO3	Temporary Re-Assignment (TR): for up to 3 months, families accept		0.50	0							
Level TR	voluntary re-assignment to another FSW due to leave or turnover		0.50	0							
	Actual total	0		0							
	Maximum for Fidelity	0		0							
	HFA CAPACITY CALCULATION	#DIV/0!									
	FSW Contribution to HSA CAPACITY CALCULATION	0.0%									

Permanent Special Circumstances (PSC) families should be captured above at their level, AND in this section if they have any of the following: need an interpreter, have multiple births (twins, triplets, etc.), have significant additional work/time, or a child with special needs

of families with additional caseweight due to PSCs

Total additional PSC caseweights: 0

per staff member

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Attachment 2 - Capacity Analysis Report

Levels	Description	Number of Families on Level	Weight	Weighted Caseload per Level
Level 1P	Prenatal - visits every other week starting first and second trimester		2.00	0
Level 1 P	Prenatal - visits every week in last trimester or per visitor (if needed)		2.00	0
Level 1	First 6 months after birth or enrollment - visits every week		2.00	0
Level 2	Visits every other week		1.00	0
Level 3	Visits once per month		0.50	0
Level 3 SS	Crisis intervention - visits weekly or more if needed		3.00	0
Level 4	Visits every per quarter		0.25	0
Cooperative Overreach (CO)	Cooperative Overreach (CO) is for families that completed all the SSS app			
Level CO3	Home visit but became disengaged.		0.50	0
Level CO2	CO families are given the same caseweight they had prior to going on		1.00	0
Level CO1	CO, to ensure space if re-engaged.		0.50	0
Temporary Assignment to (TO, TR)	Temporary Out of Area (TO) for up to 3 months, families are given			
Level TO1	the same caseweight they had prior to going on CO, to ensure space		2.00	0
Level TO2	if re-engaged		1.00	0
Level TO3	Temporary Re-Assignment (TR): for up to 3 months, families accept		0.50	0
Level TR	voluntary re-assignment to another FSW due to leave of absence		0.50	0
	Actual totals			0
	Maximum for Reality	0		0
	HSA CAPACITY CALCULATION	#DIV/0!		
	FSW Contribution to HHSA CAPACITY CALCULATION	0.0%		

Permanent Special Circumstances (PSC) families should be captured above at their level, AND in this section if they have any of the following: need an interpreter, have multiple births (twins, triplets, etc.), have significant additional travel time, or a child with special needs	# of families with additional caseweights due to PSC						
	0.5	1	1.5	2	2.5	3	Extra Case Weights
							0
							0
							0

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Attachment 2 - Capacity Analysis Report

Month for Caseload Analysis					Permanent Special Circumstances (PSC) families should be captured above at their level, AND in this section if they have any of the following: need an interpreter, have multiple births (twins, triplets, etc.), have significant additional travel time, or a child with special needs						
Name of staff member					# of families with additional caseweights due to PSC:						
# hours per week worked for HFA only											
Of the hours above, % time as HFA home visitor											
Caseload multiplier	1.00										
Levels	Description	Number of Families on Level	Weight	Weighted Caseload per Level	0.5	1	1.5	2	2.5	3	Extra Case Weights
Level 1P	Prenatal - visits every other week during first and second trimester		2.00	0							0
Level 1P	Prenatal - visits every week in third trimester (or earlier if needed)		2.00	0							0
Level 1	Post, 6 months after birth or overthomes - visits every week		1.00	0							0
Level 2	Visits every other week		1.00	0							0
Level 3	Visits once per month		0.50	0							0
Level 3SS	Crisis intervention - visits weekly, or more if needed		3.00	0							
Level 4	Visits once per quarter		0.25	0							
Graduate Overreach (GO)	Graduate Overreach (GO) is for families that completed at least one										
Level GO1	home visit but became disengaged.		2.00	0							
Level GO2	GO families are given the same caseweight they had prior to going on		2.00	0							
Level GO3	GO, to ensure space if re-engages.		0.50	0							
Temporary Assignments (TO, TR)	Temporarily Out of Area (TO): for up to 3 months, families are given										
Level TO1	the same caseweight they had prior to going on GO/to ensure space		2.00	0							
Level TO1	if re-engaged.		2.00	0							
Level TO1	Temporary Re-Assignment (TR): for up to 3 months, families agree to		0.50	0							
Level TR	voluntary re-assignment to another FSW due to leave or turnover		0.50	0							
	Actual totals	0		0	Total additional PSC caseweights						
	Maximum for Position	0		0	0						
	HFA CAPACITY CALCULATION	#DIV/0!									
	FSW Contribution to HFA CAPACITY CALCULATION	0.0%									

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Attachment 2 - Capacity Analysis Report

Inputs for Caseload Analysis	
Hiring of FTE anticipated	
# hours per week worked for HFA only	
Of the hours above, % that is on HFA home visits	
Caseload multiplier	0.00

Permanent Special Circumstances (PSC) families should be captured above at their level. AND in this section if they have any of the following need an interpreter, have multiple births (twins, triplets, etc.), have significant additional travel time, or a child with special needs						
# of families with additional caseweight due to PSCs						
0.5	1	1.5	2	2.5	3	Extra Case Weights
						0
						0
						0
						0
						0

Levels	Descriptions	Number of Families on Level	Weight	Weighted Caseload per Level
Level LP	Prenatal - visits every other week during first and second trimester		2.00	0
Level 1P	Prenatal - visits every week in third trimester (or earlier if needed)		2.00	0
Level 1	First 6 months after birth or enrollment - visits every week		3.00	0
Level 2	Visits every other week		3.00	0
Level 3	Visits once per month		0.50	0
Level LSS	Crisis intervention - visits weekly, or more if needed		3.00	0
Level 4	Visits once per quarter		0.25	0
Creative Outreach (CO)	Creative Outreach (CO) is for families that completed at least one home visit but became disengaged. CO families are given the same caseweight they had prior to going on CO, to ensure space if re-engaged.		1.00	0
Level CO1			1.00	0
Level CO2			0.50	0
Level CO3				
Temporarily Assignment to (TO), TR)	Temporarily Out of Area (TOs) for up to 3 months, families are given the same caseweight they had prior to going on CO, to ensure space if re-engaged.		2.00	0
Level TO1			1.00	0
Level TO3	Temporary Re-Assignment (TR) for up to 3 months, families accept referral to participant to another FSW due to leave or turnover		0.50	0
Level TO3'			0.50	0
Level TR	Actual Totals	0		0
	Maximum for Activity	0		0
	HFA CAPACITY CALCULATION	#DIV/0!		
	FSW Contribution to HFSA CAPACITY CALCULATION	0.0%		

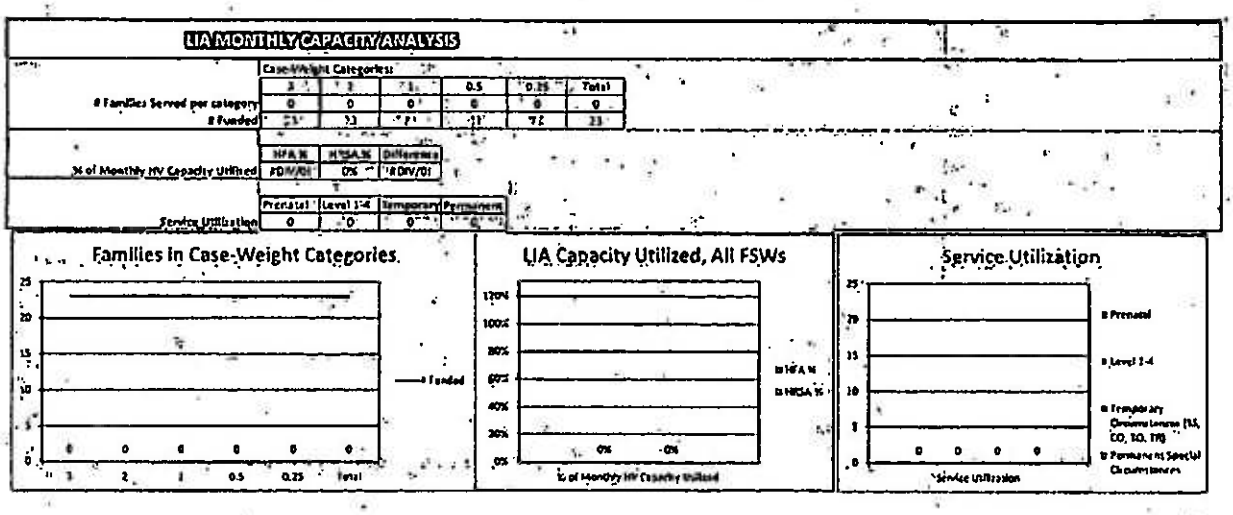
Total additional PSC caseweights
0

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Attachment 2: Capacity Analysis Report



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OMB No: 0906-0017
Expiration Date: 07/31/2021

Attachment 3 - FORM 1

THE MATERNAL, INFANT, AND EARLY CHILDHOOD HOME VISITING PROGRAM

DEMOGRAPHIC, SERVICE UTILIZATION, AND SELECT CLINICAL INDICATORS

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0906-0017. Public reporting burden for this collection of information is estimated to average 560 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-29, Rockville, Maryland, 20857.

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OMB No: 0906-0017
Expiration Date: 07/31/2021

SECTION A: PARTICIPANT DEMOGRAPHICS

Table 1: Unduplicated Count of New and Continuing Program Participants Served by MIECHV

Participants	Number Newly Enrolled	Number Continuing During Reporting Period	Total
Pregnant Women			
Female Caregivers			
Male Caregivers			
All Adults (Auto Calculate)			
Female Index Children			
Male Index Children			
All Index Children (Auto Calculate)			

Notes:

Table 2: Unduplicated Count of Households Served by MIECHV

Households	Number Newly Enrolled	Number Continuing During Reporting Period	Total
Number of Households			

Notes:

Table 3: Unduplicated Count of Participants and Households Served by State Home Visiting Programs (non-MIECHV)

Participants and Households	Total Number Served during Reporting Period
Pregnant Women	
Female Caregivers	
Male Caregivers	
All Adults (Auto Calculate)	
Female Index Children	
Male Index Children	
All Index Children (Auto Calculate)	
Number of Households	

Notes:

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Attachment 3 - Form J

Table 4: Adult Participants by Age

Adult Participants	≤17	18-19	20-21	22-24	25-29	30-34	35-44	45-54	55-64	≥65	Unknown/Did not Report*	Total
Pregnant Women												
Female Caregivers												
Male Caregivers												
All Adults (Auto Calculate)												

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 5: Index Children by Age

Index Children	<1 year	1-2 years	3-4 years	5-6 years	Unknown/Did not Report*	Total
Female Index Children						
Male Index Children						
All Index Children (Auto Calculate)						

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 6: Participants by Ethnicity

Participants	Hispanic or Latino	Not Hispanic or Latino	Unknown/Did not Report*	Total
Pregnant Women				
Female Caregivers				
Male Caregivers				
All Adults (Auto Calculate)				
Female Index Children				
Male Index Children				
All Index Children (Auto Calculate)				

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Attachment 3 - Form 1

Notes:

Table 7: Participants by Race

Participants	American Indian or Alaska Native	Asian	Black or African American	Native Hawaiinn or Other Pacific Islander	White	More than one race	Unknown/Did not Report*	Total
Pregnant Women								
Female Caregivers								
Male Caregivers								
All Adults (Auto Calculate)								
Female Index Children								
Male Index Children								
All Index Children (Auto Calculate)								

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 8: Adult Participants by Marital Status

Adult Participants	Never Married (Excluding Not Married but Living Together with Partner)	Married	Not Married but Living Together with Partner	Separated/Divorced/Widowed	Unknown/Did not Report*	Total
Pregnant Women						
Female Caregivers						
Male Caregivers						
All Adults (Auto Calculate)						

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Attachment 3 - Form 1

Notes:

Table 9: Adult Participants by Educational Attainment

Adult Participants	Less than HS diploma	HS Diploma/GED	Some college/ training	Technical training or certification	Associate's Degree	Bachelor's Degree or higher	Other	Unknown/Did not Report*	Total
Pregnant Women									
Female Caregivers									
Male Caregivers									
All Adults (Auto Calculate)									

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 10: Adult Participants by Employment Status

Adult Participants	Employed Full Time	Employed Part-Time	Not employed	Unknown/Did not Report*	Total
Pregnant Women					
Female Caregivers					
Male Caregivers					
All Adults (Auto Calculate)					

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

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Attachment 3 - Form 1

Table 11: Adult Participants by Housing Status

	Not Homeless					Total Not Homeless	Homeless			Total Homeless	Unknown/Did not Report*	Total
Adult Participants	Owns or shares own home, condominium, or apartment	Rents or shares own home or apartment	Lives in-public housing	Lives with parent or family member	Some other arrangement		Homeless and sharing housing	Homeless and living in an emergency or transitional shelter	Some other arrangement			
Pregnant Women												
Female Caregivers												
Male Caregivers												
All Adults (Auto Calculate)												

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 12: Primary Language Spoken at Home

Index Children	Number	Percent
English		
Spanish		
Other		
Unknown/Did Not Report*		
All Index Children (Auto Calculate)		100

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Notes:

Table 13: Household Income in Relation to Federal Poverty Guidelines

Households	Number of Households	Percent
50% and under		
51-100%		
101-133%		
134-200%		
201-300%		
>300%		
Unknown/Did not Report*		
All Households (Auto Calculate)		100

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 14: For Each Household Indicate the Priority Population Charneteristics

Households	Yes	No	Unknown/Did not Report*	Total
1. Low income household				
2. Household contains an enrollee who is pregnant and under age 21.				
3. Household has a history of child abuse or neglect or has had interactions with child welfare services				
4. Household has a history of substance abuse or needs substance abuse treatment				
5. Someone in the household uses tobacco products in the home				
6. Someone in the household has attained low student achievement or has a child with low student achievement				
7. Household has a child with developmental delays or disabilities				
8. Household includes individuals who are serving or formerly served in the US armed forces				

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

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SECTION B: SERVICE UTILIZATION

Table 15: Service Utilization

Home Visits	Number
Total Number of Home Visits completed	

Notes:

Table 16: Family Engagement by Household

Households	Number of Households	Percent
Currently receiving services		
Completed program		
Stopped services before completion		
Enrolled but not currently receiving services/Other		
Unknown/Did not Report*		
All Categories (Auto Calculate)		

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 17: Unduplicated Count of Households by Evidence-Based Home Visiting Model or Promising Approach

Home Visiting Model (Select One per Row – Add Rows for Additional Models)	Number Newly Enrolled	Number Continuing During Reporting Period	Total

Notes:

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SECTION C: INSURANCE AND CLINICAL INDICATORS

Table 18: Participants by Type of Health Insurance Coverage

Participants	No Insurance Coverage	Medicaid or CHIP	Tri-Care	Private or Other	Unknown/Did not Report*	Total
Pregnant Women						
Female Caregivers						
Male Caregivers						
All Adults (Auto Calculate)						
Female Index Children						
Male Index Children						
All Index Children (Auto Calculate)						

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 19: Index Children by Usual Source of Medical Care

Index Children	Doctor's/Nurse Practitioner's Office	Hospital Emergency Room	Hospital Outpatient	Federally Qualified Health Center	Retail Store or Minute Clinic	Other	None	Unknown/Did not Report*	Total
Female Index Children									
Male Index Children									
All Index Children (Auto Calculate)									

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

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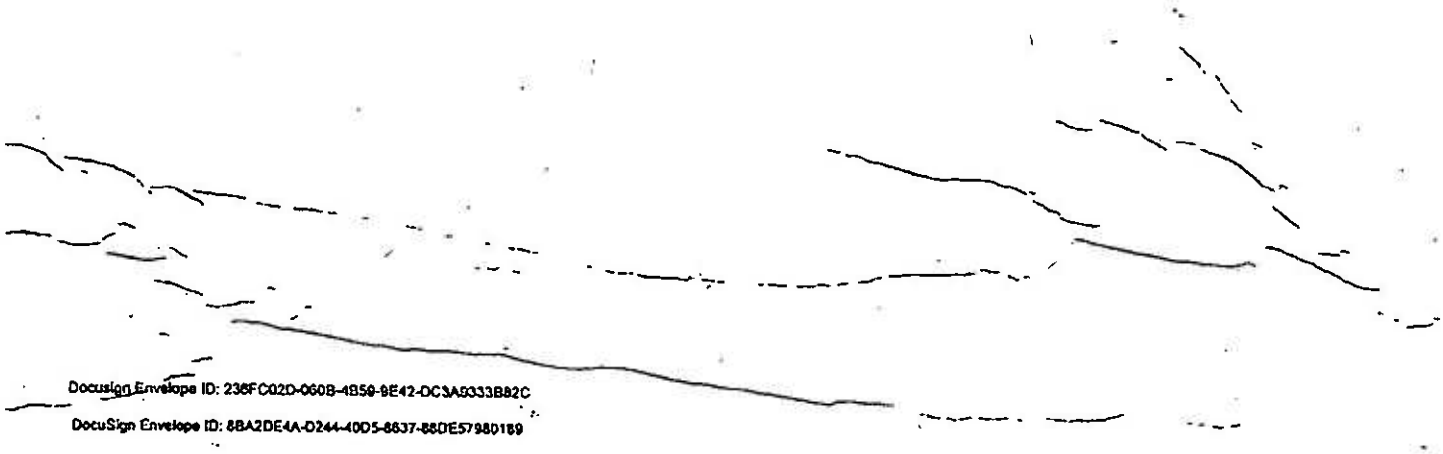
Table 20: Index Children (≥ 12 months of age) by Usual Source of Dental Care

Index Children	Have a Usual Source of Dental Care	Do not have a Usual Source of Dental Care	Unknown/Did not Report*	Total
Female Index Children				
Male Index Children				
All Index Children (Auto Calculate)				

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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DEFINITIONS OF KEY TERMS

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Table Number	Field	Key Terms Requiring Definitions
All Tables		MIECHV Household: For the purposes of reporting to HRSA on Form 1, a "MIECHV household" is defined as a family served during the reporting period by a trained home visitor implementing services with fidelity to the model and that is identified as a MIECHV household at enrollment. HRSA has identified two different methods that can be used to identify MIECHV households that are described below: 1. Home Visitor Personnel Cost Method (preferred method): Households are designated as MIECHV at enrollment based on the designation of the home visitor they are assigned. Using this methodology, recipients designate all households as MIECHV that are served by home visitors for whom at least 25 percent of his/her personnel costs (salary/wages including benefits) are paid for with MIECHV funding. 2. Enrollment Slot Method (temporary option): Households are designated as MIECHV households based on the slot they are assigned to at enrollment. Using this methodology, recipients identify certain slots as MIECHV-funded and assign households to these slots at enrollment in accordance with the terms of the contractual agreement between the MIECHV state recipient and the LIA regardless of the percentage of the slot funded by MIECHV. Once designated as a MIECHV household, the household is tracked for the purposes of data collection through the tenure of household participation in the program.
1	Unduplicated Count of New and Continuing Program Participants Served by MIECHV	New Participant: A participant, including a pregnant woman, female caregiver, or male caregiver, who signs up to participate in the home visiting program at any time during the reporting period who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). Continuing Participant: A participant, including a pregnant woman, female caregiver, or male caregiver, who was signed up and actively enrolled in the home visiting program prior to the beginning of the reporting period who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). Pregnant women are participants who were either pregnant at enrollment or pregnant at the annual update of information in a subsequent reporting period. Female caregivers are those female household members who are enrolled in the program during the reporting period, are considered a caregiver of the index child, and were not pregnant at the time of enrollment or the annual update of this information (e.g., biological mothers, adoptive mothers, foster mothers, grandmothers).

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		Male caregivers include those male household members (e.g. expectant fathers, biological fathers, step-fathers, and partners) who also meet the definition of an enrollee. Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified.
2	Unduplicated Count of Household Served by MIECHV.	New Household: A household, including a pregnant woman, female caregiver, and/or male caregiver who signs up to participate in the home visiting program at any time during the reporting period. The household may include multiple caregivers depending on model-specific definitions. Continuing Household: A household, including a pregnant woman, female caregiver, and/or male caregiver who were signed up and actively enrolled in the home visiting program prior to the beginning of the reporting period. The household may include multiple caregivers depending on model-specific definitions.
3	Unduplicated Count of Participants and Households Served by State Home Visiting Programs (non-MIECHV)	Participant Served by a State Home Visiting Program (non-MIECHV): A participant, including a pregnant woman, female caregiver, or male caregiver, who signs up to participate in the home visiting program at any time during the reporting period who was identified as being part of a non-MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms).
4	Adult Participants by Age	Adult Participants: includes the person or persons in the household who signed up to participate in the home visiting program (e.g., a teenage parent would be counted as an adult participant but not an index child). The category can include more than one member of the household if more than one individual are enrolled in the program (e.g., a father and a mother have both signed up to participate). It should include at a minimum for every household the primary caregiver of the index child.
5	Index Children by Age	Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified.
6	Participants by Ethnicity	The responses regarding ethnicity should reflect what the person considers herself/himself to be and are not based on percentages of ancestry. If ethnicity is unknown or not reported for some participants, enter that count in the respective "Unknown/Did not report" column.
7	Participants by Race	The responses regarding race should reflect what the person considers herself/himself to be and are not based on percentages of ancestry. Participants who select more than one race should be reported in the "More than one race" category. If ethnicity and race are unknown or not reported for some participants, enter that count in the respective "Unknown/Did not Report" columns.
8	Adult Participants by Marital Status	Adult Participants: includes the person or persons in the household who signed up to participate in the home visiting program (e.g., a teenage parent would be counted as an adult participant but not an index child). The category can include more than one member of the household if more than one individual are enrolled in the program (e.g., a father and a mother have both signed up to participate). It should include at a minimum for every household the primary caregiver of the index child.

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		If more than one individual is enrolled in the program, enter the status for all enrollees. For example, if a pregnant woman is enrolled with her spouse in the program, both participants would be counted under the married category.
9	Adult Participants by Educational Attainment	Adult Participants: includes the person or persons in the household who signed up to participate in the home visiting program (e.g., a teenage parent would be counted as an adult participant but not an index child). The category can include more than one member of the household if more than one individual are enrolled in the program (e.g., a father and a mother have both signed up to participate). It should include at a minimum for every household the primary caregiver of the index child. Less than high school diploma includes individuals who have not completed their high school education. The Some college/training category includes those who are currently enrolled and those who attended in the past. The Technical training or certification category includes those who received technical training or certification in the past. The Associate's Degree category includes those who obtained an Associate's Degree. The Bachelor's Degree category includes those who obtained a Bachelor's Degree. The Other category includes those individuals who did not fall into the specified categories.
10	Adult Participants by Employment Status	Employed: refers to whether the person is currently working for pay. Employed Full Time: an employee who works an average of at least 30 hours per week[1] Employed Part Time: an employee who works an average of less than 30 hours per week[1] Not Employed: indicates that the person is not working for pay (this category may include, for example, students, homemakers and those enrollees actively seeking work but currently not employed)
11	Adult Participants by Housing Status	Not homeless: individuals who have a fixed, regular, and adequate nighttime residence (within the meaning of section 103(a)(1) of the McKinney-Vento Homeless Assistance Act); and Not homeless and lives in public housing: individuals who live in a public housing unit that is administered by a public housing agency (excludes individuals who utilize housing voucher programs) Homeless: individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of section 103(a)(1) of the McKinney-Vento Homeless Assistance Act); and

[1] Healthcare.gov Glossary. https://www.healthcare.gov/glossary/full-time-employee/

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		Homeless and sharing housing: individuals who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason Homeless and living in an emergency or transitional shelter: individuals who are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement Homeless and some other arrangement: individuals who are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; individuals who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of section 103(a)(2)(C)); individuals who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings[1]
12	Primary Language Spoken at Home	Primary language: the language used in the home the majority of the time. Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and was served by a trained home visitor implementing services with fidelity to the model who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified.
13	Household Income in Relation to Federal Poverty Guidelines	The appropriate category for a given family will depend both on household income and on the number of household members counted in the household (both home visiting enrollees and non-enrollees). Household income refers to the annual gross income for the household as defined in programmatic guidance, recorded at enrollment and annually thereafter. Federal Poverty Guidelines: Annual income data can be estimated from monthly data (monthly income x 12). The HHS Poverty Guidelines are updated annually in February and published in the Federal Register. See https://aspe.hhs.gov/poverty-guidelines .
14	For Each Household Indicate the Priority Population Characteristics	Low-Income: An individual or family with an income determined to be below the Federal Poverty Guidelines. The HHS Poverty Guidelines are updated annually in February and published in the Federal Register. See https://aspe.hhs.gov/poverty-guidelines. Pregnant women under 21: Households with expectant mothers who enroll in the program and are under 21 years old during the reporting period. Have a history of child abuse or neglect or have had interactions with child welfare services: Based on self-report, a household with members who have a history of abuse or neglect and have had involvement with child welfare services either as a child or as an adult.

[1] Administration for Children and Families. Early Childhood Learning and Knowledge Center. 2014. http://eclkc.ohs.acf.hhs.gov/hslc/hs-system/family/familyfileresources/hmls/definitions/definitions-local.html

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		Have a history of substance abuse or need substance abuse treatment: Based on self-report, a household with members who have a history of substance abuse or who have been identified as needing substance abuse services through a substance abuse screening administered upon enrollment. Are users of tobacco products in the home: Based on self-report, a household with members who use tobacco products in the home or who have been identified as using tobacco through a substance abuse screening administered during intake. Tobacco use is defined as combustibles (cigarettes, cigars, pipes, hookahs, bidis), non-combustibles (chew, dip, snuff, snus, and dissolvables), and electronic nicotine delivery systems (ENDS). Have, or have children with, low student achievement: Based on self-report, a household with members who have perceived themselves or their child(ren) as having low student achievement. Have a child or children with developmental delays or disabilities: Based on self-report or home visitor/staff observation, a household with members who have a child or children suspected of having a developmental delay or disability. Are in families that are or have served in the armed forces: Based on self-report, households that include individuals who are serving or formerly served in the Armed Forces, including such households that have members of the Armed Forces who have had multiple deployments outside of the United States. For this criterion, definition includes a military member's dependent acquired through marriage, adoption, or other action during the course of a member's current tour of assigned duty.
15	Service Utilization	Home visit refers to the definition of a completed home visit enacted by the various evidence-based home visiting models approved for implementation through the MIECHV program or a Promising Approach. Please refer to model-specific guidance for specific definitions.
16	Family Engagement by Household	Currently receiving services refers to families that are participating in services at the end of the reporting period. Completed program refers to families who have completed the program according to model-specific definitions and criteria during the reporting period. Stopped services before completion refers to families who left the program for any reason prior to completion. Enrolled but not currently receiving services/Other refers to those families who do not fall into the previous categories and may include unreachable participants (i.e. the family is not regularly participating but did not actively sever ties, etc.)
17	Unduplicated Count of Households by Evidence-Based Home Visiting Model or Promising Approach	A Household, including a pregnant woman, female caregiver, and/or male caregiver who were signed up and actively enrolled in the home visiting program prior to the beginning of or during the reporting period and continues enrollment during the reporting period. The household may include multiple caregivers depending on model-specific definitions.

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18	Participants by Type of Health Insurance Coverage	Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified. The insurance coverage categories are mutually exclusive. No insurance coverage indicates that the individual is currently not covered by any source of insurance. This table is intended to capture insurance status, not health care access: receipt of care provided for instance by the Indian Health Service or another safety net health care provider such as a Federally Qualified Health Center does not constitute insurance coverage.
19	Index Children by Usual Source of Medical Care	Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified. Usual source of care: the particular medical professional, doctor's office, clinic, health center, or other place where a person would usually go if sick or in need of advice about his or her health.
20	Index Children (≥ 12 months of age) by Usual Source of Dental Care	Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified. Usual source of dental care: a usual source of dental care, or dental home, is a place where a child can receive consistent, comprehensive, compassionate dental care. The concept of the Dental Home reflects the AAPD's clinical guidelines and best principles for the proper delivery of oral health care to all children, with a concentration on infant/age one patients and should be established no later than 12 months of age.[3]

[3] American Academy of Pediatric Dentistry. Dental Home Resource Center: http://www.aapd.org/advocacy/dentalhome/

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Attachment 4 - Form 2

OMB No: 0906-0017
Expiration Date: 07/31/2021

THE MATERNAL, INFANT, AND EARLY CHILDHOOD HOME VISITING PROGRAM

PERFORMANCE AND SYSTEMS OUTCOME MEASURES

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0906-0017. Public reporting burden for this collection of information is estimated to average 200 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-29, Rockville, Maryland, 20857.

July 19, 2018

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OMB No: 0906-0017
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MEASURE 1

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: PRETERM BIRTH**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of infants (among mothers who enrolled in home visiting prenatally before 37 weeks) who are born preter following program enrollment	
4. **SPECIFICATION** **NUMERATOR:** Number of live births (index child or subsequent children among mothers who enrolled in home visiting prenatally before 37 weeks) born before 37 completed weeks of gestation and after enrollment **DENOMINATOR:** Number of live births after enrollment who were born to mothers enrolled in home visiting prenatally before 37 weeks	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 2

1. BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH CONSTRUCT: BREASTFEEDING	
2. TYPE OF MEASURE Systems Outcome	
3. PERFORMANCE MEASURE Percent of infants (among mothers who enrolled in home visiting prenatally) who were breastfed any amount at 6 months of age	
4. SPECIFICATION NUMERATOR: Number of infants aged 6-12 months (index child among mothers who enrolled in home visiting prenatally) who were breastfed any amount at 6 months of age DENOMINATOR: Number of infants aged 6-12 months (index child among mothers who enrolled in home visiting prenatally) enrolled in home visiting for at least 6 months	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. NOTES	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 3

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: DEPRESSION SCREENING**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who are screened for depression using a validated tool within 3 months of enrollment (for those not enrolled prenatally) or within 3 months of delivery (for those enrolled prenatally)	
4. **SPECIFICATION** **NUMERATOR:** For those not enrolled prenatally, number of primary caregivers enrolled in home visiting who are screened for depression within the first 3 months since enrollment; for those enrolled prenatally, the number of primary caregivers screened for depression within 3 months of delivery **DENOMINATOR:** For those not enrolled prenatally, the number of primary caregivers enrolled in home visiting for at least 3 months; for those enrolled prenatally, the number of primary caregivers enrolled in home visiting for at least three months post delivery	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool, but all other data elements are known, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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7. NOTES

8. Measurement Tool Utilized
Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 4

1. BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH CONSTRUCT: WELL CHILD VISIT	
2. TYPE OF MEASURE Performance Indicator	
3. PERFORMANCE MEASURE Percent of children enrolled in home visiting who received the last recommended visit based on the American Academy of Pediatrics (AAP) schedule	
4. SPECIFICATION NUMERATOR: Number of children (index child) enrolled in home visiting who received the last recommended well child visit based on the AAP schedule DENOMINATOR: Number of children (index child) enrolled in home visiting	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if a home visit occurred but the home visitor did not collect the data. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. NOTES	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 5

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: POSTPARTUM CARE**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks (56 days) of delivery	
4. **SPECIFICATION** **NUMERATOR:** Number of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks (56 days) of delivery **DENOMINATOR:** Number of mothers who enrolled in home visiting prenatally or within 30 days after delivery and remained enrolled for at least 8 weeks (56 days) after delivery	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 6

1. BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH CONSTRUCT: TOBACCO CESSATION REFERRALS	
2. TYPE OF MEASURE Performance Indicator	
3. PERFORMANCE MEASURE Percent of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment.	
4. SPECIFICATION NUMERATOR: Number of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment DENOMINATOR: Number of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and were enrolled for at least 3 months	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether the primary caregiver used tobacco or cigarettes at enrollment since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are known and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator.	6.b. Value – Enter the number of cases missing from measure calculation:

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All cases of missing data should be excluded from the measure calculation.	
7. NOTES	

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MEASURE 7

1. BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS CONSTRUCT: SAFE SLEEP	
2. TYPE OF MEASURE Performance Indicator	
3. PERFORMANCE MEASURE Percent of infants enrolled in home visiting that are always placed to sleep on their backs, without bed-sharing and without soft bedding	
4. SPECIFICATION NUMERATOR: Number of infants (index child aged less than 1 year) enrolled in home visiting whose primary caregiver reports that they are always placed to sleep on their backs, without bed-sharing and without soft bedding DENOMINATOR: Number of infants (index child) enrolled in home visiting who were aged less than 1 year during the reporting period	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. NOTES	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 8

1. **BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS** **CONSTRUCT: CHILD INJURY**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Rate of injury-related visits to the Emergency Department (ED) during the reporting period among children enrolled in home visiting	
4. **SPECIFICATION** **NUMERATOR:** Number of parent-reported nonfatal injury-related visits to the ED during the reporting period among children (index child) enrolled in home visiting **DENOMINATOR:** Number of children (index child) enrolled in home visiting	
5. **VALUE FOR REPORTING PERIOD (rate)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 9

1. **BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS** **CONSTRUCT: CHILD MALTREATMENT**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** **Percent of children enrolled in home visiting with at least 1 investigated case of maltreatment following enrollment within the reporting period**	
4. **SPECIFICATION** **NUMERATOR: Number of children (index child) enrolled in home visiting with at least 1 investigated case of maltreatment following enrollment within the reporting period** **DENOMINATOR: Number of children (index child) enrolled in home visiting**	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition **Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.**	**6.b. Value – Enter the number of cases missing from measure calculation:**
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 10

1. BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT CONSTRUCT: PARENT-CHILD INTERACTION	
2. TYPE OF MEASURE Performance Indicator	
3. PERFORMANCE MEASURE Percent of primary caregivers enrolled in home visiting who receive an observation of caregiver-child interaction by the home visitor using a validated tool	
4. SPECIFICATION: NUMERATOR: Number of primary caregivers enrolled in home visiting who receive an observation of caregiver-child interaction by the home visitor using a validated tool DENOMINATOR: Number of primary caregivers enrolled in home visiting with children reaching the target age range	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether the index child received an observation of caregiver-child interaction by the home visitor using a validated tool, but all other data elements are known, then the index child should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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7. **NOTES**
8. **Measurement Tool Utilized** Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 11

1. BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT CONSTRUCT: EARLY LANGUAGE AND LITERACY ACTIVITIES	
2. TYPE OF MEASURE Performance Indicator	
3. PERFORMANCE MEASURE Percent of children enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories, and/or sang songs with their child daily, every day	
4. SPECIFICATION NUMERATOR: Number of children (index child) enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories, and/or sang songs with their child daily, every day DENOMINATOR: Number of children (index child) enrolled in home visiting	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. NOTES	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 12

1. **BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT** **CONSTRUCT: DEVELOPMENTAL SCREENING**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with a timely screen for developmental delays using a validated parent-completed tool	
4. **SPECIFICATION** NUMERATOR: Number of children (index child) enrolled in home visiting with at least one screening within the AAP-defined age groups during the reporting period DENOMINATOR: Number of children (index child) enrolled in home visiting reaching the specified time frame during the reporting period	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool, but all other data elements are known, then the child should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

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8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure

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MEASURE 13

1. BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT CONSTRUCT: BEHAVIORAL CONCERNS	
2. TYPE OF MEASURE Performance Indicator	
3. PERFORMANCE MEASURE Percent of postnatal home visits where primary caregivers were asked if they have any concerns regarding their child's development, behavior, or learning	
4. SPECIFICATION NUMERATOR: Number of postnatal home visits where primary caregivers enrolled in home visiting were asked if they have any concerns regarding their child's development, behavior, or learning DENOMINATOR: Total number of postnatal home visits during the reporting period	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. If a home visit occurred, but there is no documentation of whether the primary caregiver was asked about behavioral concerns, then the home visit should be included in the denominator (if eligible – i.e., postnatal visit), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. NOTES	

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MEASURE 14

1. BENCHMARK AREA: CRIME OR DOMESTIC VIOLENCE CONSTRUCT: INTIMATE PARTNER VIOLENCE SCREENING	
2. TYPE OF MEASURE Performance Indicator	
3. PERFORMANCE MEASURE Percent of primary caregivers enrolled in home visiting who are screened for intimate partner violence (IPV) within 6 months of enrollment using a validated tool	
4. SPECIFICATION NUMERATOR: Number of primary caregivers enrolled in home visiting who are screened for IPV using a validated tool within 6 months of enrollment DENOMINATOR: Number of primary caregivers enrolled in home visiting for at least 6 months	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool (including if a screening did not occur because the caregiver was male and they only have validated tools for use among female caregivers), but all other data elements are known, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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7. NOTES
8. **Measurement Tool Utilized** Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 15

1. **BENCHMARK AREA: FAMILY ECONOMIC SELF-SUFFICIENCY** **CONSTRUCT: PRIMARY CAREGIVER EDUCATION**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of primary caregivers who enrolled in home visiting without a high school degree or equivalent who subsequently enrolled in or maintained continuous enrollment in middle school or high school, or completed high school or equivalent during their participation in home visiting	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers who enrolled in or maintained continuous enrollment in middle school or high school, or completed a high school degree or equivalent after enrollment in home visiting (and met the conditions specified in the denominator) **DENOMINATOR:** Number of primary caregivers without a high school degree or equivalent at enrollment	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 16

1. BENCHMARK AREA: FAMILY ECONOMIC SELF-SUFFICIENCY CONSTRUCT: CONTINUITY OF INSURANCE COVERAGE	
2. TYPE OF MEASURE Systems Outcome	
3. PERFORMANCE MEASURE Percent of primary caregivers enrolled in home visiting who had continuous health insurance coverage for at least 6 consecutive months	
4. SPECIFICATION NUMERATOR: Number of primary caregivers enrolled in home visiting who reported having health insurance coverage for at least 6 consecutive months since enrollment in home visiting DENOMINATOR: Number of primary caregivers enrolled in home visiting for at least 6 months	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. NOTES	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 17

1. **BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS** **CONSTRUCT: COMPLETED DEPRESSION REFERRALS**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of primary caregivers referred to services for a positive screen for depression who receive one or more service contacts	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who received recommended services for depression (and met the conditions specified in the denominator) **DENOMINATOR:** Number of primary caregivers enrolled in home visiting who had a positive screen for depression within 3 months of enrollment (for those not enrolled prenatally) or within 3 months of delivery (for those enrolled prenatally) and were referred for services	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether a screening occurred using a validated tool, since inclusion in the denominator cannot be determined if the screening result is unknown. Data are also considered missing if there is no documentation of whether a referral was provided. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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7. NOTES

8. Measurement Tool Utilized
Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 18

1. **BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS** **CONSTRUCT: COMPLETED DEVELOPMENTAL REFERRALS**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool) who receive services in a timely manner	
4. **SPECIFICATION** **NUMERATOR:** Number of children enrolled in home visiting who a) received individualized developmental support from a home visitor; b) were referred to early intervention services and receive an evaluation within 45 days; OR c) were referred to other community services who received services within 30 days (and met the condition specified in the denominator) **DENOMINATOR:** Number of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool)	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether a screening occurred using a validated tool, since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are available and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if	6.b. Value – Enter the number of cases missing from measure calculation:

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Attachment 4 - Form 2

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Expiration Date: 07/31/2021

eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	
7. NOTES	
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 19

1. BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS CONSTRUCT: INTIMATE PARTNER VIOLENCE REFERRALS	
2. TYPE OF MEASURE Performance Indicator	
3. PERFORMANCE MEASURE Percent of primary caregivers enrolled in home visiting with positive screens for IPV (measured using a validated tool) who receive referral information to IPV resources	
4. SPECIFICATION NUMERATOR: Number of primary caregivers enrolled in home visiting who received referral information to IPV resources (and met the conditions specified in the denominator) DENOMINATOR: Number of primary caregivers enrolled in home visiting with positive screens for IPV (measured using a validated tool) within 6 months of enrollment	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether a screening occurred using a validated tool, since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are available and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of	6.b. Value – Enter the number of cases missing from measure calculation:

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missing data should be excluded from the measure calculation.	
7. NOTES	
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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DEFINITIONS OF KEY TERMS

July 19, 2018

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Construct Number	Construct	Key Term Definitions
1.	Preterm Birth	Preterm Birth: a birth before 37 completed weeks of gestation (defined as up to 36 weeks and 6 days).[1]
2.	Breastfeeding	Breastfeeding: in addition to breast milk fed directly from the mother to the infant, breastfeeding also includes feeding the infant pumped or expressed breast milk.
3.	Depression Screening	Depression: aligned with each grantee's validated depression screening tool's definition of depression.
4.	Well-Child Visit	AAP schedule for Well-Child Visits: Updated AAP 2017 Recommendations for Pediatric Preventive Health Care.https://www.aap.org/en-us/Documents/periodicity_schedule.pdf
5.	Postpartum Care	Postpartum Care Visit: A postpartum visit is a visit between the woman and her health care provider to assess the mother's current physical health, including the status of pregnancy-related conditions like gestational diabetes, screen for postpartum depression, provide counseling on infant care and family planning as well as screening and referrals for the management of chronic conditions. Additionally, a provider may use this opportunity to conduct a breast exam and discuss breastfeeding. The American College of Obstetricians and Gynecologists recommends that mothers receive a postpartum care visit within 6 weeks after delivery. [2]
6.	Tobacco Cessation Referrals	Tobacco Use: combustibles (cigarettes, cigars, pipes, hookahs, bidis), non-combustibles (chew, dip, snuff, snus, and dissolvables), and ENDS.
7.	Safe Sleep	No definitions required
8.	Child Injury	Injury-related Emergency Department Visit: Injuries refer to the following causes of mechanisms of injury: motor vehicle, suffocation, drowning, poisoning, fire/burns, falls, sports and recreation, and intentional injuries, such as child maltreatment.[3]
9.	Child Maltreatment	Investigated Case: all children with an allegation of maltreatment that were screened-in for investigation or assessment and further received an investigation. [4] A screened-in report is one that is accepted for investigation or assessment based on the state's screen-in criteria. [5]
10.	Parent-Child Interaction	No definitions required
11.	Early Language and Literacy Activities	No definitions required
12.	Developmental Screening	Developmental Delay: delays in any or all areas including cognitive, social, language, sensory,

[1] Behrman R, Stith Butler A, eds. Preterm Birth: Causes, Consequences, and Prevention. Washington, DC: The National Academies Press; 2007.
[2] Optimizing postpartum care. Committee Opinion No. 666. American College of Obstetricians and Gynecologists. Obstet Gynecol 2016;127:e187–92. Retrieved from https://www.acog.org/-/media/Committee-Opinions/Committee-on-Obstetric-Practice/co666.pdf?dmc=1&ts=20180221T1421452301
[3] Centers for Disease Control and Prevention. National Action Plan for Child Injury Prevention. 2012. Retrieved from http://www.cdc.gov/safechild/NAP/background.html#unint
[4] Child Welfare Information Gateway. Child Maltreatment 2015: Summary of Key Findings. Retrieved from https://www.childwelfare.gov/pubs/factsheets/canstats/
[5] Child Welfare Information Gateway. Screening and Intake. Retrieved from https://www.childwelfare.gov/topics/respondingchip/screening/

July 19, 2018

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		and emotional development.[6]
13.	Behavioral Concerns	No definitions required
14.	IPV Screening	Intimate Partner Violence: physical violence, sexual violence, stalking and psychological aggression (including coercive acts) by a current or former intimate partner. An intimate partner is a person with whom one has a close personal relationship that can be characterized by the following: emotional connectedness, regular contact, ongoing physical contact and sexual behavior, identity as a couple, familiarity and knowledge about each other's lives. [7]
15.	Primary Caregiver Education	No definitions required
16.	Continuity of Insurance Coverage	Continuous Health Insurance Coverage: having health insurance coverage without any lapses.
17.	Completed Depression Referrals	Recommended services: specific techniques and intervention models delivered in the context of client characteristics, culture, and preferences that have shown to have positive effects on outcomes through rigorous evaluations and have demonstrated to achieve positive outcomes for the client.[8]
18.	Completed Developmental Referrals	Developmental Delay: delays in any or all areas including cognitive, social, language, sensory, and emotional development.[6]
19.	IPV Referrals	Intimate Partner Violence: physical violence, sexual violence, stalking and psychological aggression (including coercive acts) by a current or former intimate partner. An intimate partner is a person with whom one has a close personal relationship that can be characterized by the following: emotional connectedness, regular contact, ongoing physical contact and sexual behavior, identity as a couple, familiarity and knowledge about each other's lives. [7]

[6] U.S. National Library of Medicine, National Institutes of Health. Psychological Index Terms via Unified Medical Language System, 2015. Retrieved from http://phr.nlm.nih.gov/glossary-developmentalrisk.jsp

[7] Centers for Disease Control and Prevention, Injury Prevention and Control: Division of Violence Prevention, 2015. Retrieved from http://www.cdc.gov/violenceprevention/intimatepartnerviolence/definitions.html

[8] Home Visiting Collaborative Improvement and Innovation Network.

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Attachment 5 - DCYF Key Performance Metrics

Key Performance Metrics
Referrals
Share of families who are referred to HFA from DCYF. (# of families currently enrolled in HFA CWP and % of HFA CWP slots currently used)
Share of DCYF-referred families that were enrolled between three (3) and twenty-four (24) months of age.
Share of DCYF-referred families with a recent assessment of a Substance Exposed Infant (SEI).
Enrollments
Average time to enrollment from the time and date of referral.
of days from referral date to the first home visit.
Share of families that are offered HFA and % of offered families who decide to receive HFA.
Relative rate of families enrolled by racial/ethnic and geographic characteristics.
Proportion of families that are retained in the program over specified periods of time (6 months, 12 months, 24 months, 36 months, etc.) after receiving a first home visit.
Proportion of families who receive at least seventy-five (75%) percent of the appropriate number of home visits based upon the individual level of service to which they are assigned.
Program Completion
Share of families who do not complete the program (incl. reason for non-completion/discharge).
Share of families that discharged who completed a minimum of specified periods of service. (3 months, 6 months, 12 months, 18 months, 24 months, 30 months, 36 months).
Proportion of families who complete program by racial/ethnic and geographic characteristics.
Short-term Outcomes
Share of families with a new case opened to DCYF, or a new report of maltreatment, within six months after discharge.
Share of children who enter out-of-home placement within six months after discharge (incl. breakdown of placement type).
Share of children who enter any form of out-of-home placement within 12 months of discharge.
Differences in outcomes outlined above (i.e., prevention of out of home removal, decreases in risk/needs) by racial/ethnic and geographic characteristics.

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EXHIBIT C

Payment Terms

1. This Agreement is funded by:
   1.1. 61.5% Federal funds from:
      1.1.1. Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X10MC43595.
      1.1.2. Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 2, 2022, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X10MC46878.
      1.1.3. American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X11MC41935.
      1.1.4. American Rescue Plan Act Funding for Home Visiting, as awarded on October 28, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X11MC45263.
      1.1.5. Administration of Children Youth & Families (ACF), as awarded on October 1, 2022, CFDA 93.658, FAIN 2201NHFOST.
   1.2. 38.5% General funds.
2. For the purposes of this Agreement the Department has identified:
   2.1. The Contractor as a Subrecipient, in accordance with 2 CFR 200.331.
   2.2. The Agreement as NON-R&D, in accordance with 2 CFR §200.332.
3. The Department shall make payments to the Contractor within thirty (30) days of receipt of each invoice and supporting documentation for authorized expenses, subsequent to approval of the submitted invoice.
4. The final invoice and supporting documentation for authorized expenses shall be due to the Department no later than forty (40) days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.
5. Notwithstanding Paragraph 17 of the General Provisions Form P-37, changes limited to adjusting amounts within the price limitation and adjusting encumbrances between State Fiscal Years and budget class lines through the Budget Office may be made by written agreement of both parties, without obtaining approval of the Governor and Executive Council, if needed and justified.
6. Audits

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6.1. The Contractor must email an annual audit to dhhs.act@dhhs.nh.gov if any of the following conditions exist:

6.1.1. Condition A - The Contractor expended $750,000 or more in federal funds received as a subrecipient pursuant to 2 CFR Part 200, during the most recently completed fiscal year.

6.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b, pertaining to charitable organizations receiving support of $1,000,000 or more.

6.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

6.2. If Condition A exists, the Contractor shall submit an annual Single Audit performed by an independent Certified Public Accountant (CPA) to dhhs.act@dhhs.nh.gov within 120 days after the close of the Contractor's fiscal year, conducted in accordance with the requirements of 2 CFR Part 200, Subpart F of the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal awards.

6.2.1. The Contractor shall submit a copy of any Single Audit findings and any associated corrective action plans. The Contractor shall submit quarterly progress reports on the status of implementation of the corrective action plan.

6.3. If Condition B or Condition C exists, the Contractor shall submit an annual financial audit performed by an independent CPA within 120 days after the close of the Contractor's fiscal year.

6.4. In addition to, and not in any way in limitation of obligations of the Agreement, it is understood and agreed by the Contractor that the Contractor shall be held liable for any state or federal audit exceptions and shall return to the Department all payments made under the Agreement to which exception has been taken, or which have been disallowed because of such an exception.

A. Payment Terms Respective to Traditional Home Visiting Services for the Division of Public Health Services (DPHS):

7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1, Budget through C-6, Budget.

8. The Contractor shall submit an invoice with supporting documentation to the Department no later than the fifteenth (15th) working day of the month following the month in which the services were provided. The Contractor shall ensure each invoice:

8.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.

8.2. Is submitted in a form that is provided by or otherwise acceptable to the Department.

8.3. Identifies and requests payment for allowable costs incurred in the previous month.

8.4. Includes supporting documentation of allowable costs with each invoice that may include, but are not limited to, time sheets, payroll records, receipts for purchases, and proof of expenditures, as applicable.

8.5. Is completed, dated and returned to the Department with the supporting documentation for allowable expenses to initiate payment.

8.6. Is assigned an electronic signature, includes supporting documentation, and is emailed to DPHSContractBilling@dhhs.nh.gov or mailed to:

Financial Manager
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

B. Payment Terms Respective to Child Welfare Protocols for the Division for Children, Youth and Families (DCYF) for direct services:

9. Payment shall be for services provided in fulfillment of this Agreement, as specified in Exhibit B, Scope of Work Section 3.4, and in accordance with the following:

9.1. Weekly Rate: For the purposes of this Agreement, a weekly rate shall be paid in the amount of $301.85 per client (family) once per week.

9.2. Payment shall be made on a monthly basis and follow a process determined by the Department.

9.3. The Contractor cannot exceed the maximum allotment for weekly rate expenditure by Fiscal Year, which is as follows:

State Fiscal Year	Amount
SFY 2023	$44,372
SFY 2024	$88,744
SFY 2025	$66,557
Sub-Total	**$199,673**

9.4. The Contractor shall submit non-clinical expenses via the Website: https://business.nh.gov/beb/PaQes/Index.asDx.

9.5. The Contractor must provide the services in Exhibit B, Scope of Services, in compliance with funding requirements.

C. Payment Terms Respective to Child Welfare Protocols for the Division for Children, Youth and Families (DCYF) for administrative services:

10. The Contractor shall submit an invoice with supporting documentation to the Department no later than the fifteenth (15th) working day of the month following the month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The Contractor shall ensure each invoice is completed, dated and returned to the Department in order to initiate payment.

10.1. Maximum allotment for contract expenditures by Fiscal Year is as follows:

State Fiscal Year	Amount
2023	$155,301
2024	$177,486
2025	$0*
Sub-Total	**$332,787**
***The Contractor will only bill for direct services in SFY 25.**	

10.2. In lieu of hard invoice copies, all invoices may be assigned an electronic signature and emailed to DCYFInvoices@dhhs.nh.gov, or invoices may be mailed to:

Financial Manager
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

10.3. The Contractor must provide the services in Exhibit B, Scope of Services, in compliance with funding requirements.

New Hampshire Department of Health and Human Services	
Contractor Name:	Community Action Partnership of Strafford County
Budget Request for:	Home Visiting Services - Home Visiting Formula Grant
Budget Period	SFY 2023 (10/01/2022 - 06/30/2023)
Indirect Cost Rate (if applicable)	14.79%

Line Item	Program Cost - Funded by DHHS.
1. Salary & Wages	$152,034
2. Fringe Benefits	
3. Consultants	$1,650
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$675
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$225
6. Travel	$900
7. Software	$0
8. (a) Other - Marketing/ Communications	$800
8. (b) Other - Education and Training	$4,080
8. (c) Other - Other (specify below)	
Insurance	$586
audit and legal	$225
telephone/internet	$2,250
Occupancy	$2,250
9. Subrecipient Contracts	$0
Total Direct Costs	$165,655
Total Indirect Costs	$28,757
TOTAL	$194,412

Contractor Initials: BAP (DS)

Date: 12/29/2022

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New Hampshire Department of Health and Human Services	
Contractor Name:	*Community Action Partnership of Strafford County*
Budget Request for:	*Home Visiting Services - Home Visiting Formula Grant*
Budget Period	*SFY 2024 (07/01/2023 - 06/30/2024)*
Indirect Cost Rate (if applicable)	13.61%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$233,117
2. Fringe Benefits	$23,312
3. Consultants	$1,200
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$1,500
5.(a) Supplies - Educational	$900
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$302
6. Travel	$1,800
7. Software	$0
8. (a) Other - Marketing/ Communications	$500
8. (b) Other - Education and Training	$4,700
8. (c) Other - Other (specify below)	
Insurance	$778
audit and legal	$300
telephone/internet	$3,000
Occupancy	$3,000
9. Subrecipient Contracts	$0
Total Direct Costs	$274,408
Total Indirect Costs	$43,232
TOTAL	$317,640

Contractor Initials: BAP (DS)

Date: 12/29/2022

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New Hampshire Department of Health and Human Services

Contractor Name: *Community Action Partnership of Strafford County*

Budget Request for: *Home Visiting Services - Home Visiting Formula Grant*

Budget Period: *SFY 2025 (07/01/2024 - 09/30/2024)*

Indirect Cost Rate (if applicable): 13.72%

Line Item	Program Cost - Funded by DHHS,
1. Salary & Wages	$59,488
2. Fringe Benefits	$5,949
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$225
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$54
6. Travel	$300
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$680
8. (c) Other - Other (specify below)	
Insurance	$195
audit and legal	$75
telephone/internet	$750
Occupancy	$800
9. Subrecipient Contracts	$0
Total Direct Costs	$68,515
Total Indirect Costs	$10,895
TOTAL	$79,410

Contractor Initials: BAP (DS)

Date: 12/29/2022

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New Hampshire Department of Health and Human Services

Contractor Name: *Community Action Partnership of Strafford County*

Home Visiting Services -

Budget Request for: *ARP - MIEC Home Visiting*

Budget Period *SFY 2023 (10/01/2022 - 06/30/2023)*

Indirect Cost Rate (if applicable) 13.54%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$12,780
2. Fringe Benefits	$1,278
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$0
6. Travel	$0
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$1,100
8. (c) Other - Other (specify below)	
Insurance	$0
audit and legal	$0
telephone/internet	$0
Occupancy	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$15,158
Total Indirect Costs	$2,374
TOTAL	$17,532

Contractor Initials: BAP (DS)

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New Hampshire Department of Health and Human Services

Contractor Name: *Community Action Partnership of Strafford County*

Home Visiting Services -

Budget Request for: *ARP - MIEC Home Visiting*

Budget Period *SFY 2024 (07/01/2023 - 06/30/2024)*

Indirect Cost Rate (if applicable) 13.09%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$39,686
2. Fringe Benefits	$3,969
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$478
6. Travel	$0
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$0
8. (c) Other - Other (specify below)	
Insurance	$0
audit and legal	$0
telephone/internet	$1,800
Occupancy	$1,200
9. Subrecipient Contracts	$0
Total Direct Costs	$47,133
Total Indirect Costs	$7,098
TOTAL	$54,231

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New Hampshire Department of Health and Human Services

Contractor Name: *Community Action Partnership of Strafford County*

Budget Request for: *Home Visiting Services - ARP - MIEC Home Visiting*

Budget Period *SFY 2025 (07/01/2024 - 09/30/2024)*

Indirect Cost Rate (if applicable) 13.72%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$10,112
2. Fringe Benefits	$1,011
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$35
6. Travel	$0
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$0
8. (c) Other - Other (specify below)	
Insurance	$0
audit and legal	$0
telephone/internet	$240
Occupancy	$300
9. Subrecipient Contracts	$0
Total Direct Costs	$11,698
Total Indirect Costs	$1,860
TOTAL	$13,558

Contractor Initials: BAP

Date: 12/29/2022

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New Hampshire Department of Health and Human Services

Contractor Name: *Community Action Program of Strafford County*

Budget Request for: *Home Visiting Services*

Budget Period: *SFY 2023 (1/1/23-6/30/23) 6 Months*

Indirect Cost Rate (if applicable) 13.72%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$95,358
2. Fringe Benefits	$9,536
3. Consultants	$1,500
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$4,500
5.(a) Supplies - Educational	$4,500
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$300
6. Travel	$1,200
7. Software	$0
8. (a) Other - Marketing/ Communications	$311
8. (b) Other - Education and Training	$10,850
8. (c) Other - Other (specify below)	
Occupancy	$2,100
Telephone/Internet	$2,100
Postage	$300
Insurance	$392
audit and legal	$150
subscriptions	$900
9. Subrecipient Contracts	$0
Total Direct Costs	$133,096
Total Indirect Costs	$21,305
TOTAL	$155,301

Contractor Initials: DS BAP

Date: 12/29/2022

Exhibit C-8 Budget Sheet, SFY 2024

RFP-2023-DPHS-01-HOMEV-01

New Hampshire Department of Health and Human Services	
Contractor Name:	*Community Action Program of Strafford County*
Budget Request for:	*Home Visiting Services*
Budget Period	*SFY 2024 (7/1/23-6/30/24) 12 Months*
Indirect Cost Rate (if applicable)	13.72%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$126,946
2. Fringe Benefits	$12,694
3. Consultants	$0
4. Equipment (Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$2,100
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$600
6. Travel	$1,800
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$1,000
8. (c) Other - Other (specify below)	
Occupancy	$3,000
Telephone/Internet	$3,000
Postage	$300
subscriptions	$600
audit and legal	$288
Insurance	$810
9. Subrecipient Contracts	$0
Total Direct Costs	$153,138
Total Indirect Costs	$24,349
TOTAL	$177,486

Contractor Initials: DS BAP

Date: 12/29/2022

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CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Vendor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

ALTERNATIVE I - FOR GRANTEES OTHER THAN INDIVIDUALS

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

This certification is required by the regulations implementing Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.). The January 31, 1989 regulations were amended and published as Part II of the May 25, 1990 Federal Register (pages 21681-21691), and require certification by grantees (and by inference, sub-grantees and sub-contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a grantee (and by inference, sub-grantees and sub-contractors) that is a State may elect to make one certification to the Department in each federal fiscal year in lieu of certificates for each grant during the federal fiscal year covered by the certification. The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment. Contractors using this form should send it to:

Commissioner
NH Department of Health and Human Services
129 Pleasant Street,
Concord, NH 03301-6505

1. The grantee certifies that it will or will continue to provide a drug-free workplace by:
   - 1.1. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
   - 1.2. Establishing an ongoing drug-free awareness program to inform employees about
     - 1.2.1. The dangers of drug abuse in the workplace;
     - 1.2.2. The grantee's policy of maintaining a drug-free workplace;
     - 1.2.3. Any available drug counseling, rehabilitation, and employee assistance programs; and
     - 1.2.4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
   - 1.3. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
   - 1.4. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will
     - 1.4.1. Abide by the terms of the statement; and
     - 1.4.2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
   - 1.5. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph 1.4.2 from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer on whose grant activity the convicted employee was working, unless the Federal agency

Vendor Initials BAP

Date 12/29/2022

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has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

1.6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 1.4.2, with respect to any employee who is so convicted

1.6.1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

1.6.2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

1.7. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1.1, 1.2, 1.3, 1.4, 1.5, and 1.6.

2. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant.

Place of Performance (street address, city, county, state, zip code) (list each location)

Check ☐ if there are workplaces on file that are not identified here.

Vendor Name: Community Action Partnership of Strafford Count

12/29/2022
Date

DocuSigned by:
Betsey Andrews Parker
Name: Betsey Andrews Parker
Title: CEO

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CERTIFICATION REGARDING LOBBYING

The Vendor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

Programs (indicate applicable program covered):
*Temporary Assistance to Needy Families under Title IV-A
*Child Support Enforcement Program under Title IV-D
*Social Services Block Grant Program under Title XX
*Medicaid Program under Title XIX
*Community Services Block Grant under Title VI
*Child Care Development Block Grant under Title IV

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor).

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, attached and identified as Standard Exhibit E-I.)

3. The undersigned shall require that the language of this certification be included in the award document for sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Vendor Name: Community Action Partnership of Strafford Coun

12/29/2022
Date

DocuSigned by:
Betsey Andrews Parker
Name: Betsey Andrews Parker
Title: CEO

Vendor Initials BAP
Date 12/29/2022

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CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Executive Office of the President, Executive Order 12549 and 45 CFR Part 76 regarding Debarment, Suspension, and Other Responsibility Matters, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal (contract), the prospective primary participant is providing the certification set out below.

2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. If necessary, the prospective participant shall submit an explanation of why it cannot provide the certification. The certification or explanation will be considered in connection with the NH Department of Health and Human Services' (DHHS) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

3. The certification in this clause is a material representation of fact upon which reliance was placed when DHHS determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, DHHS may terminate this transaction for cause or default.

4. The prospective primary participant shall provide immediate written notice to the DHHS agency to whom this proposal (contract) is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549: 45 CFR Part 76. See the attached definitions.

6. The prospective primary participant agrees by submitting this proposal (contract) that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by DHHS.

7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," provided by DHHS, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or involuntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List (of excluded parties).

9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and

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information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal government, DHHS may terminate this transaction for cause or default.

PRIMARY COVERED TRANSACTIONS

11. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
    - 11.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
    - 11.2. have not within a three-year period preceding this proposal (contract) been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or a contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
    - 11.3. are not presently indicted for otherwise criminally or civilly charged by a governmental entity. (Federal, State or local) with commission of any of the offenses enumerated in paragraph (l)(b) of this certification; and
    - 11.4. have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

12. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal (contract).

LOWER TIER COVERED TRANSACTIONS

13. By signing and submitting this lower tier proposal (contract), the prospective lower tier participant, as defined in 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:
    - 13.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
    - 13.2. where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal (contract).

14. The prospective lower tier participant further agrees by submitting this proposal (contract) that it will include this clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions," without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

Contractor Name: Community Action Partnership of Strafford Co

12/29/2022
Date

DocuSigned by:
Betsey Andrews Parker
Name: Betsey Andrews Parker
Title: CEO

DS
BAP
Contractor Initials
12/29/2022
Date

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CERTIFICATION OF COMPLIANCE WITH REQUIREMENTS PERTAINING TO FEDERAL NONDISCRIMINATION, EQUAL TREATMENT OF FAITH-BASED ORGANIZATIONS AND WHISTLEBLOWER PROTECTIONS

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

Contractor will comply, and will require any subgrantees or subcontractors to comply, with any applicable federal nondiscrimination requirements, which may include:

- the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. Section 3789d) which prohibits recipients of federal funding under this statute from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act requires certain recipients to produce an Equal Employment Opportunity Plan;

- the Juvenile Justice Delinquency Prevention Act of 2002 (42 U.S.C. Section 5672(b)) which adopts by reference, the civil rights obligations of the Safe Streets Act. Recipients of federal funding under this statute are prohibited from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act includes Equal Employment Opportunity Plan requirements;

- the Civil Rights Act of 1964 (42 U.S.C. Section 2000d, which prohibits recipients of federal financial assistance from discriminating on the basis of race, color, or national origin in any program or activity);

- the Rehabilitation Act of 1973 (29 U.S.C. Section 794), which prohibits recipients of Federal financial assistance from discriminating on the basis of disability, in regard to employment and the delivery of services or benefits, in any program or activity;

- the Americans with Disabilities Act of 1990 (42 U.S.C. Sections 12131-34), which prohibits discrimination and ensures equal opportunity for persons with disabilities in employment, State and local government services, public accommodations, commercial facilities, and transportation;

- the Education Amendments of 1972 (20 U.S.C. Sections 1681, 1683, 1685-86), which prohibits discrimination on the basis of sex in federally assisted education programs;

- the Age Discrimination Act of 1975 (42 U.S.C. Sections 6106-07), which prohibits discrimination on the basis of age in programs or activities receiving Federal financial assistance. It does not include employment discrimination;

- 28 C.F.R. pt. 31 (U.S. Department of Justice Regulations – OJJDP Grant Programs); 28 C.F.R. pt. 42 (U.S. Department of Justice Regulations – Nondiscrimination; Equal Employment Opportunity; Policies and Procedures); Executive Order No. 13279 (equal protection of the laws for faith-based and community organizations); Executive Order No. 13559, which provide fundamental principles and policy-making criteria for partnerships with faith-based and neighborhood organizations;

- 28 C.F.R. pt. 38 (U.S. Department of Justice Regulations – Equal Treatment for Faith-Based Organizations); and Whistleblower protections 41 U.S.C. §4712 and The National Defense Authorization Act (NDAA) for Fiscal Year 2013 (Pub. L. 112-239, enacted January 2, 2013) the Pilot Program for Enhancement of Contract Employee Whistleblower Protections, which protects employees against reprisal for certain whistle blowing activities in connection with federal grants and contracts.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment.

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In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, or sex against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, to the applicable contracting agency or division within the Department of Health and Human Services, and to the Department of Health and Human Services Office of the Ombudsman.

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this proposal (contract) the Contractor agrees to comply with the provisions indicated above.

Contractor Name: Community Action Partnership of Strafford C

12/29/2022
Date

DocuSigned by:
Betsey Andrews Parker
Name: Betsey Andrews Parker
Title: CEO

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CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to $1000 per day and/or the imposition of an administrative compliance order on the responsible entity.

The Contractor identified in Section 1.3 of the General Provisions agrees, by signature of the Contractor's representative as identified in Section 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this contract, the Contractor agrees to make reasonable efforts to comply with all applicable provisions of Public Law 103-227, Part C, known as the Pro-Children Act of 1994.

Contractor Name: Community Action Partnership of Strafford Cc

12/29/2022
Date

DocuSigned by:
Betsey Andrews Parker
Name: Betsey Andrews Parker
Title: CEO

Contractor Initials BAP
Date 12/29/2022

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HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT
BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement agrees to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191 and with the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160 and 164 applicable to business associates. As defined herein, "Business Associate" shall mean the Contractor and subcontractors and agents of the Contractor that receive, use or have access to protected health information under this Agreement and "Covered Entity" shall mean the State of New Hampshire, Department of Health and Human Services.

(1) Definitions.

a. "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.

b. "Business Associate" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.

c. "Covered Entity" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.

d. "Designated Record Set" shall have the same meaning as the term "designated record set" in 45 CFR Section 164.501.

e. "Data Aggregation" shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.

f. "Health Care Operations" shall have the same meaning as the term "health care operations" in 45 CFR Section 164.501.

g. "HITECH Act" means the Health Information Technology for Economic and Clinical Health Act, TitleXIII, Subtitle D, Part 1 & 2 of the American Recovery and Reinvestment Act of 2009.

h. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164 and amendments thereto.

i. "Individual" shall have the same meaning as the term "individual" in 45 CFR Section 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR Section 164.501(g).

j. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.

k. "Protected Health Information" shall have the same meaning as the term "protected health information" in 45 CFR Section 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

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l. "Required by Law" shall have the same meaning as the term "required by law" in 45 CFR Section 164.103.

m. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his/her designee.

n. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 CFR Part 164, Subpart C, and amendments thereto.

o. "Unsecured Protected Health Information" means protected health information that is not secured by a technology standard that renders protected health information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.

p. Other Definitions - All terms not otherwise defined herein shall have the meaning established under 45 C.F.R. Parts 160, 162 and 164, as amended from time to time, and the HITECH Act.

(2) Business Associate Use and Disclosure of Protected Health Information.

a. Business Associate shall not use, disclose, maintain or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under Exhibit A of the Agreement. Further, Business Associate, including but not limited to all its directors, officers, employees and agents, shall not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.

b. Business Associate may use or disclose PHI:
   I. For the proper management and administration of the Business Associate;
   II. As required by law, pursuant to the terms set forth in paragraph d. below; or
   III. For data aggregation purposes for the health care operations of Covered Entity.

c. To the extent Business Associate is permitted under the Agreement to disclose PHI to a third party, Business Associate must obtain, prior to making any such disclosure, (i) reasonable assurances from the third party that such PHI will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the third party; and (ii) an agreement from such third party to notify Business Associate, in accordance with the HIPAA Privacy, Security, and Breach Notification Rules of any breaches of the confidentiality of the PHI, to the extent it has obtained knowledge of such breach.

d. The Business Associate shall not, unless such disclosure is reasonably necessary to provide services under Exhibit A of the Agreement, disclose any PHI in response to a request for disclosure on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity has an opportunity to object to the disclosure and to seek appropriate relief. If Covered Entity objects to such disclosure, the Business

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Associate shall refrain from disclosing the PHI until Covered Entity has exhausted all remedies.

e. If the Covered Entity notifies the Business Associate that Covered Entity has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Business Associate shall be bound by such additional restrictions and shall not disclose PHI in violation of such additional restrictions and shall abide by any additional security safeguards.

(3) **Obligations and Activities of Business Associate.**

a. The Business Associate shall notify the Covered Entity's Privacy Officer immediately after the Business Associate becomes aware of any use or disclosure of protected health information not provided for by the Agreement including breaches of unsecured protected health information and/or any security incident that may have an impact on the protected health information of the Covered Entity.

b. The Business Associate shall immediately perform a risk assessment when it becomes aware of any of the above situations. The risk assessment shall include, but not be limited to:

- The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;
- The unauthorized person used the protected health information or to whom the disclosure was made;
- Whether the protected health information was actually acquired or viewed
- The extent to which the risk to the protected health information has been mitigated.

The Business Associate shall complete the risk assessment within 48 hours of the breach and immediately report the findings of the risk assessment in writing to the Covered Entity.

c. The Business Associate shall comply with all sections of the Privacy, Security, and Breach Notification Rule.

d. Business Associate shall make available all of its internal policies and procedures, books and records relating to the use and disclosure of PHI received from, or created or received by the Business Associate on behalf of Covered Entity to the Secretary for purposes of determining Covered Entity's compliance with HIPAA and the Privacy and Security Rule.

e. Business Associate shall require all of its business associates that receive, use or have access to PHI under the Agreement, to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein, including the duty to return or destroy the PHI as provided under Section 3 (l). The Covered Entity shall be considered a direct third party beneficiary of the Contractor's business associate agreements with Contractor's intended business associates, who will be receiving PHI

pursuant to this Agreement, with rights of enforcement and indemnification from such business associates who shall be governed by standard Paragraph #13 of the standard contract provisions (P-37) of this Agreement for the purpose of use and disclosure of protected health information.

f. Within five (5) business days of receipt of a written request from Covered Entity, Business Associate shall make available during normal business hours at its offices all records, books, agreements, policies and procedures relating to the use and disclosure of PHI to the Covered Entity, for purposes of enabling Covered Entity to determine Business Associate's compliance with the terms of the Agreement.

g. Within ten (10) business days of receiving a written request from Covered Entity, Business Associate shall provide access to PHI in a Designated Record Set to the Covered Entity, or as directed by Covered Entity, to an individual in order to meet the requirements under 45 CFR Section 164.524.

h. Within ten (10) business days of receiving a written request from Covered Entity for an amendment of PHI or a record about an individual contained in a Designated Record Set, the Business Associate shall make such PHI available to Covered Entity for amendment and incorporate any such amendment to enable Covered Entity to fulfill its obligations under 45 CFR Section 164.526.

i. Business Associate shall document such disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR Section 164.528.

j. Within ten (10) business days of receiving a written request from Covered Entity for a request for an accounting of disclosures of PHI, Business Associate shall make available to Covered Entity such information as Covered Entity may require to fulfill its obligations to provide an accounting of disclosures with respect to PHI in accordance with 45 CFR Section 164.528.

k. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within two (2) business days forward such request to Covered Entity. Covered Entity shall have the responsibility of responding to forwarded requests. However, if forwarding the individual's request to Covered Entity would cause Covered Entity or the Business Associate to violate HIPAA and the Privacy and Security Rule, the Business Associate shall instead respond to the individual's request as required by such law and notify Covered Entity of such response as soon as practicable.

l. Within ten (10) business days of termination of the Agreement, for any reason, the Business Associate shall return or destroy, as specified by Covered Entity, all PHI received from, or created or received by the Business Associate in connection with the Agreement, and shall not retain any copies or back-up tapes of such PHI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, Business Associate shall continue to extend the protections of the Agreement, to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business

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Associate maintains such PHI. If Covered Entity, in its sole discretion, requires that the Business Associate destroy any or all PHI, the Business Associate shall certify to Covered Entity that the PHI has been destroyed.

(4) Obligations of Covered Entity

a. Covered Entity shall notify Business Associate of any changes or limitation(s) in its Notice of Privacy Practices provided to individuals in accordance with 45 CFR Section 164.520, to the extent that such change or limitation may affect Business Associate's use or disclosure of PHI.

b. Covered Entity shall promptly notify Business Associate of any changes in, or revocation of permission provided to Covered Entity by individuals whose PHI may be used or disclosed by Business Associate under this Agreement, pursuant to 45 CFR Section 164.506 or 45 CFR Section 164.508.

c. Covered entity shall promptly notify Business Associate of any restrictions on the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 CFR 164.522, to the extent that such restriction may affect Business Associate's use or disclosure of PHI.

(5) Termination for Cause

In addition to Paragraph 10 of the standard terms and conditions (P-37) of this Agreement the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a breach by Business Associate of the Business Associate Agreement set forth herein as Exhibit I. The Covered Entity may either immediately terminate the Agreement or provide an opportunity for Business Associate to cure the alleged breach within a timeframe specified by Covered Entity. If Covered Entity determines that neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.

(6) Miscellaneous

a. Definitions and Regulatory References. All terms used, but not otherwise defined herein, shall have the same meaning as those terms in the Privacy and Security Rule, amended from time to time. A reference in the Agreement, as amended to include this Exhibit I, to a Section in the Privacy and Security Rule means the Section as in effect or as amended.

b. Amendment. Covered Entity and Business Associate agree to take such action as is necessary to amend the Agreement, from time to time as is necessary for Covered Entity to comply with the changes in the requirements of HIPAA, the Privacy and Security Rule, and applicable federal and state law.

c. Data Ownership. The Business Associate acknowledges that it has no ownership rights with respect to the PHI provided by or created on behalf of Covered Entity.

d. Interpretation. The parties agree that any ambiguity in the Agreement shall be resolved to permit Covered Entity to comply with HIPAA, the Privacy and Security Rule.

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e. Segregation. If any term or condition of this Exhibit I or the application thereof to any person(s) or circumstance is held invalid, such invalidity shall not affect other terms or conditions which can be given effect without the invalid term or condition; to this end the terms and conditions of this Exhibit I are declared severable.

f. Survival. Provisions in this Exhibit I regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the Agreement in section (3) I, the defense and indemnification provisions of section (3) e and Paragraph 13 of the standard terms and conditions (P-37), shall survive the termination of the Agreement.

IN WITNESS WHEREOF, the parties hereto have duly executed this Exhibit I.

Department of Health and Human Services	Community Action Partnership of Strafford County
The State	Name of the Contractor
Patricia M. Tilley	Betsey Andrews Parker
Signature of Authorized Representative	Signature of Authorized Representative
Patricia M. Tilley	Betsey Andrews Parker
Name of Authorized Representative	Name of Authorized Representative
Director	CEO
Title of Authorized Representative	Title of Authorized Representative
1/4/2023	12/29/2022
Date	Date

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CERTIFICATION REGARDING THE FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA) COMPLIANCE

The Federal Funding Accountability and Transparency Act (FFATA) requires prime awardees of individual Federal grants equal to or greater than $25,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $25,000 or more. If the initial award is below $25,000 but subsequent grant modifications result in a total award equal to or over $25,000, the award is subject to the FFATA reporting requirements, as of the date of the award.

In accordance with 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), the Department of Health and Human Services (DHHS) must report the following information for any subaward or contract award subject to the FFATA reporting requirements:

1. Name of entity
2. Amount of award
3. Funding agency
4. NAICS code for contracts / CFDA program number for grants
5. Program source
6. Award title descriptive of the purpose of the funding action
7. Location of the entity
8. Principle place of performance
9. Unique identifier of the entity (UEI #)
10. Total compensation and names of the top five executives if:
    - 10.1. More than 80% of annual gross revenues are from the Federal government, and those revenues are greater than $25M annually and
    - 10.2. Compensation information is not already available through reporting to the SEC.

Prime grant recipients must submit FFATA required data by the end of the month, plus 30 days, in which the award or award amendment is made.

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of The Federal Funding Accountability and Transparency Act, Public Law 109-282 and Public Law 110-252, and 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

The below named Contractor agrees to provide needed information as outlined above to the NH Department of Health and Human Services and to comply with all applicable provisions of the Federal Financial Accountability and Transparency Act.

Contractor Name: Community Action Partnership of Strafford C

12/29/2022
Date

DocuSigned by:
Betsey Andrews Parker
Name: Betsey Andrews Parker
Title: CEO

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FORM A

As the Contractor identified in Section 1.3 of the General Provisions, I certify that the responses to the below listed questions are true and accurate.

1. The UEI (SAM.gov) number for your entity is: Z3KKLWND4993

2. In your business or organization's preceding completed fiscal year, did your business or organization receive (1) 80 percent or more of your annual gross revenue in U.S. federal contracts, subcontracts, loans, grants, sub-grants, and/or cooperative agreements; and (2) $25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

   _____ NO _____X_____ YES

   If the answer to #2 above is NO, stop here

   If the answer to #2 above is YES, please answer the following:

3. Does the public have access to information about the compensation of the executives in your business or organization through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C.78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

   _____ NO _____X_____ YES

   If the answer to #3 above is YES, stop here

   If the answer to #3 above is NO, please answer the following:

4. The names and compensation of the five most highly compensated officers in your business or organization are as follows:

   Name: _____ Amount: _____

   Name: _____ Amount: _____

   Name: _____ Amount: _____

   Name: _____ Amount: _____

   Name: _____ Amount: _____

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A. Definitions

The following terms may be reflected and have the described meaning in this document:

1. "Breach" means the loss of control, compromise, unauthorized disclosure, unauthorized acquisition, unauthorized access, or any similar term referring to situations where persons other than authorized users and for an other than authorized purpose have access or potential access to personally identifiable information, whether physical or electronic. With regard to Protected Health Information, " Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.

2. "Computer Security Incident" shall have the same meaning "Computer Security Incident" in section two (2) of NIST Publication 800-61, Computer Security Incident Handling Guide, National Institute of Standards and Technology, U.S. Department of Commerce.

3. "Confidential Information" or "Confidential Data" means all confidential information disclosed by one party to the other such as all medical, health, financial, public assistance benefits and personal information including without limitation, Substance Abuse Treatment Records, Case Records, Protected Health Information and Personally Identifiable Information.

   Confidential Information also includes any and all information owned or managed by the State of NH - created, received from or on behalf of the Department of Health and Human Services (DHHS) or accessed in the course of performing contracted services - of which collection, disclosure, protection, and disposition is governed by state or federal law or regulation. This information includes, but is not limited to Protected Health Information (PHI), Personal Information (PI), Personal Financial Information (PFI), Federal Tax Information (FTI), Social Security Numbers (SSN), Payment Card Industry (PCI), and or other sensitive and confidential information.

4. "End User" means any person or entity (e.g., contractor, contractor's employee, business associate, subcontractor, other downstream user, etc.) that receives DHHS data or derivative data in accordance with the terms of this Contract.

5. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996 and the regulations promulgated thereunder.

6. "Incident" means an act that potentially violates an explicit or implied security policy, which includes attempts (either failed or successful) to gain unauthorized access to a system or its data, unwanted disruption or denial of service, the unauthorized use of a system for the processing or storage of data; and changes to system hardware, firmware, or software characteristics without the owner's knowledge, instruction, or consent. Incidents include the loss of data through theft or device misplacement, loss or misplacement of hardcopy documents, and misrouting of physical or electronic

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mail, all of which may have the potential to put the data at risk of unauthorized access, use, disclosure, modification or destruction.

7. "Open Wireless Network" means any network or segment of a network that is not designated by the State of New Hampshire's Department of Information Technology or delegate as a protected network (designed, tested, and approved, by means of the State, to transmit) will be considered an open network and not adequately secure for the transmission of unencrypted PI, PFI, PHI or confidential DHHS data.

8. "Personal Information" (or "PI") means information which can be used to distinguish or trace an individual's identity, such as their name, social security number, personal information as defined in New Hampshire RSA 359-C:19, biometric records, etc., alone, or when combined with other personal or identifying information which is linked or linkable to a specific individual, such as date and place of birth, mother's maiden name, etc.

9. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 C.F.R. Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.

10. "Protected Health Information" (or "PHI") has the same meaning as provided in the definition of "Protected Health Information" in the HIPAA Privacy Rule at 45 C.F.R. § 160.103.

11. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 C.F.R. Part 164, Subpart C, and amendments thereto.

12. "Unsecured Protected Health Information" means Protected Health Information that is not secured by a technology standard that renders Protected Health Information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.

I. RESPONSIBILITIES OF DHHS AND THE CONTRACTOR

A. Business Use and Disclosure of Confidential Information.

1. The Contractor must not use, disclose, maintain or transmit Confidential Information except as reasonably necessary as outlined under this Contract. Further, Contractor, including but not limited to all its directors, officers, employees and agents, must not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.

2. The Contractor must not disclose any Confidential Information in response to a

request for disclosure on the basis that it is required by law, in response to a subpoena, etc., without first notifying DHHS so that DHHS has an opportunity to consent or object to the disclosure.

3. If DHHS notifies the Contractor that DHHS has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Contractor must be bound by such additional restrictions and must not disclose PHI in violation of such additional restrictions and must abide by any additional security safeguards.
4. The Contractor agrees that DHHS Data or derivative there from disclosed to an End User must only be used pursuant to the terms of this Contract.
5. The Contractor agrees DHHS Data obtained under this Contract may not be used for any other purposes that are not indicated in this Contract.
6. The Contractor agrees to grant access to the data to the authorized representatives of DHHS for the purpose of inspecting to confirm compliance with the terms of this Contract.

II. METHODS OF SECURE TRANSMISSION OF DATA

1. Application Encryption. If End User is transmitting DHHS data containing Confidential Data between applications, the Contractor attests the applications have been evaluated by an expert knowledgeable in cyber security and that said application's encryption capabilities ensure secure transmission via the internet.
2. Computer Disks and Portable Storage Devices. End User may not use computer disks or portable storage devices, such as a thumb drive, as a method of transmitting DHHS data.
3. Encrypted Email. End User may only employ email to transmit Confidential Data if email is encrypted and being sent to and being received by email addresses of persons authorized to receive such information.
4. Encrypted Web Site. If End User is employing the Web to transmit Confidential Data, the secure socket layers (SSL) must be used and the web site must be secure. SSL encrypts data transmitted via a Web site.
5. File Hosting Services, also known as File Sharing Sites. End User may not use file hosting services, such as Dropbox or Google Cloud Storage, to transmit Confidential Data.
6. Ground Mail Service. End User may only transmit Confidential Data via *certified* ground mail within the continental U.S. and when sent to a named individual.
7. Laptops and PDA. If End User is employing portable devices to transmit Confidential Data said devices must be encrypted and password-protected.
8. Open Wireless Networks. End User may not transmit Confidential Data via an open

wireless network. End User must employ a virtual private network (VPN) when remotely transmitting via an open wireless network.

9. Remote User Communication. If End User is employing remote communication to access or transmit Confidential Data, a virtual private network (VPN) must be installed on the End User's mobile device(s) or laptop from which information will be transmitted or accessed.
10. SSH File Transfer Protocol (SFTP), also known as Secure File Transfer Protocol. If End User is employing an SFTP to transmit Confidential Data, End User will structure the Folder and access privileges to prevent inappropriate disclosure of information. SFTP folders and sub-folders used for transmitting Confidential Data will be coded for 24-hour auto-deletion cycle (i.e. Confidential Data will be deleted every 24 hours).
11. Wireless Devices. If End User is transmitting Confidential Data via wireless devices, all data must be encrypted to prevent inappropriate disclosure of information.

III. RETENTION AND DISPOSITION OF IDENTIFIABLE RECORDS

The Contractor will only retain the data and any derivative of the data for the duration of this Contract. After such time, the Contractor will have 30 days to destroy the data and any derivative in whatever form it may exist, unless, otherwise required by law or permitted under this Contract. To this end, the parties must:

A. Retention

1. The Contractor agrees it will not store, transfer or process data collected in connection with the services rendered under this Contract outside of the United States. This physical location requirement shall also apply in the implementation of cloud computing, cloud service or cloud storage capabilities, and includes backup data and Disaster Recovery locations.
2. The Contractor agrees to ensure proper security monitoring capabilities are in place to detect potential security events that can impact State of NH systems and/or Department confidential information for contractor provided systems.
3. The Contractor agrees to provide security awareness and education for its End Users in support of protecting Department confidential information.
4. The Contractor agrees to retain all electronic and hard copies of Confidential Data in a secure location and identified in section IV. A.2
5. The Contractor agrees Confidential Data stored in a Cloud must be in a FedRAMP/HITECH compliant solution and comply with all applicable statutes and regulations regarding the privacy and security. All servers and devices must have currently-supported and hardened operating systems, the latest anti-viral, anti-hacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a

whole, must have aggressive intrusion-detection and firewall protection.

6. The Contractor agrees to and ensures its complete cooperation with the State's Chief Information Officer in the detection of any security vulnerability of the hosting infrastructure.

B. Disposition

1. If the Contractor will maintain any Confidential Information on its systems (or its sub-contractor systems), the Contractor will maintain a documented process for securely disposing of such data upon request or contract termination; and will obtain written certification for any State of New Hampshire data destroyed by the Contractor or any subcontractors as a part of ongoing, emergency, and or disaster recovery operations. When no longer in use, electronic media containing State of New Hampshire data shall be rendered unrecoverable via a secure wipe program in accordance with industry-accepted standards for secure deletion and media sanitization, or otherwise physically destroying the media (for example, degaussing) as described in NIST Special Publication 800-88, Rev 1, Guidelines for Media Sanitization, National Institute of Standards and Technology, U. S. Department of Commerce. The Contractor will document and certify in writing at time of the data destruction, and will provide written certification to the Department upon request. The written certification will include all details necessary to demonstrate data has been properly destroyed and validated. Where applicable, regulatory and professional standards for retention requirements will be jointly evaluated by the State and Contractor prior to destruction.
2. Unless otherwise specified, within thirty (30) days of the termination of this Contract, Contractor agrees to destroy all hard copies of Confidential Data using a secure method such as shredding.
3. Unless otherwise specified, within thirty (30) days of the termination of this Contract, Contractor agrees to completely destroy all electronic Confidential Data by means of data erasure, also known as secure data wiping.

IV. PROCEDURES FOR SECURITY

A. Contractor agrees to safeguard the DHHS Data received under this Contract, and any derivative data or files, as follows:

1. The Contractor will maintain proper security controls to protect Department confidential information collected, processed, managed, and/or stored in the delivery of contracted services.
2. The Contractor will maintain policies and procedures to protect Department confidential information throughout the information lifecycle, where applicable, (from creation, transformation, use, storage and secure destruction) regardless of the media used to store the data (i.e., tape, disk, paper, etc.).

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3. The Contractor will maintain appropriate authentication and access controls to contractor systems that collect, transmit, or store Department confidential information where applicable.

4. The Contractor will ensure proper security monitoring capabilities are in place to detect potential security events that can impact State of NH systems and/or Department confidential information for contractor provided systems.

5. The Contractor will provide regular security awareness and education for its End Users in support of protecting Department confidential information.

6. If the Contractor will be sub-contracting any core functions of the engagement supporting the services for State of New Hampshire, the Contractor will maintain a program of an internal process or processes that defines specific security expectations, and monitoring compliance to security requirements that at a minimum match those for the Contractor, including breach notification requirements.

7. The Contractor will work with the Department to sign and comply with all applicable State of New Hampshire and Department system access and authorization policies and procedures, systems access forms, and computer use agreements as part of obtaining and maintaining access to any Department system(s). Agreements will be completed and signed by the Contractor and any applicable sub-contractors prior to system access being authorized.

8. If the Department determines the Contractor is a Business Associate pursuant to 45 CFR 160.103, the Contractor will execute a HIPAA Business Associate Agreement (BAA) with the Department and is responsible for maintaining compliance with the agreement.

9. The Contractor will work with the Department at its request to complete a System Management Survey. The purpose of the survey is to enable the Department and Contractor to monitor for any changes in risks, threats, and vulnerabilities that may occur over the life of the Contractor engagement. The survey will be completed annually, or an alternate time frame at the Departments discretion with agreement by the Contractor, or the Department may request the survey be completed when the scope of the engagement between the Department and the Contractor changes.

10. The Contractor will not store, knowingly or unknowingly, any State of New Hampshire or Department data offshore or outside the boundaries of the United States unless prior express written consent is obtained from the Information Security Office leadership member within the Department.

11. Data Security Breach Liability. In the event of any security breach Contractor shall make efforts to investigate the causes of the breach, promptly take measures to prevent future breach and minimize any damage or loss resulting from the breach. The State shall recover from the Contractor all costs of response and recovery from

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the breach, including but not limited to: credit monitoring services, mailing costs and costs associated with website and telephone call center services necessary due to the breach.

12. Contractor must, comply with all applicable statutes and regulations regarding the privacy and security of Confidential Information, and must in all other respects maintain the privacy and security of PI and PHI at a level and scope that is not less than the level and scope of requirements applicable to federal agencies, including, but not limited to, provisions of the Privacy Act of 1974 (5 U.S.C. § 552a), DHHS Privacy Act Regulations (45 C.F.R. §5b), HIPAA Privacy and Security Rules (45 C.F.R. Parts 160 and 164) that govern protections for individually identifiable health information and as applicable under State law.

13. Contractor agrees to establish and maintain appropriate administrative, technical, and physical safeguards to protect the confidentiality of the Confidential Data and to prevent unauthorized use or access to it. The safeguards must provide a level and scope of security that is not less than the level and scope of security requirements established by the State of New Hampshire, Department of Information Technology. Refer to Vendor Resources/Procurement at https://www.nh.gov/doit/vendor/index.htm for the Department of Information Technology policies, guidelines, standards, and procurement information relating to vendors.

14. Contractor agrees to maintain a documented breach notification and incident response process. The Contractor will notify the State's Privacy Officer and the State's Security Officer of any security breach immediately, at the email addresses provided in Section VI. This includes a confidential information breach, computer security incident, or suspected breach which affects or includes any State of New Hampshire systems that connect to the State of New Hampshire network.

15. Contractor must restrict access to the Confidential Data obtained under this Contract to only those authorized End Users who need such DHHS Data to perform their official duties in connection with purposes identified in this Contract.

16. The Contractor must ensure that all End Users:

    a. comply with such safeguards as referenced in Section IV A. above, implemented to protect Confidential Information that is furnished by DHHS under this Contract from loss, theft or inadvertent disclosure.

    b. safeguard this information at all times.

    c. ensure that laptops and other electronic devices/media containing PHI, PI, or PFI are encrypted and password-protected.

    d. send emails containing Confidential Information only if encrypted and being sent to and being received by email addresses of persons authorized to receive such information.

e. limit disclosure of the Confidential Information to the extent permitted by law.

f. Confidential Information received under this Contract and individually identifiable data derived from DHHS Data, must be stored in an area that is physically and technologically secure from access by unauthorized persons during duty hours as well as non-duty hours (e.g., door locks, card keys, biometric identifiers, etc.).

g. only authorized End Users may transmit the Confidential Data, including any derivative files containing personally identifiable information, and in all cases, such data must be encrypted at all times when in transit, at rest, or when stored on portable media as required in section IV above.

h. in all other instances Confidential Data must be maintained, used and disclosed using appropriate safeguards, as determined by a risk-based assessment of the circumstances involved.

i. understand that their user credentials (user name and password) must not be shared with anyone. End Users will keep their credential information secure. This applies to credentials used to access the site directly or indirectly through a third party application.

Contractor is responsible for oversight and compliance of their End Users. DHHS reserves the right to conduct onsite inspections to monitor compliance with this Contract, including the privacy and security requirements provided in herein, HIPAA, and other applicable laws and Federal regulations until such time the Confidential Data is disposed of in accordance with this Contract.

V. LOSS REPORTING

The Contractor must notify the State's Privacy Officer and Security Officer of any Security Incidents and Breaches immediately, at the email addresses provided in Section VI.

The Contractor must further handle and report Incidents and Breaches involving PHI in accordance with the agency's documented Incident Handling and Breach Notification procedures and in accordance with 42 C.F.R. §§ 431.300 - 306. In addition to, and notwithstanding, Contractor's compliance with all applicable obligations and procedures, Contractor's procedures must also address how the Contractor will:

1. Identify Incidents;
2. Determine if personally identifiable information is involved in Incidents;
3. Report suspected or confirmed Incidents as required in this Exhibit or P-37;
4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and

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5. Determine whether Breach notification is required, and, if so, identify appropriate Breach notification methods, timing, source, and contents from among different options, and bear costs associated with the Breach notice as well as any mitigation measures.

Incidents and/or Breaches that implicate PI must be addressed and reported, as applicable, in accordance with NH RSA 359-C:20.

VI. PERSONS TO CONTACT

A. DHHS Privacy Officer:

DHHSPrivacyOfficer@dhhs.nh.gov

B. DHHS Security Officer:

DHHSInformationSecurityOffice@dhhs.nh.gov

State of New Hampshire
Department of Health and Human Services
Amendment #4

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Granite VNA, Inc. ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item #39), as amended on June 14, 2023 (Item #26), as amended on May 1, 2024 (Item #18), and as amended on September 25, 2024 (Item #16), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8., Price Limitation, to read:

   $3,325,715

2. Modify Exhibit B, Scope of Services, Section 3.7.2., to read:

   3.7.2. Utilize evidence-based curricula to support prenatal individuals and newly parenting families including but not limited to:

   3.7.2.1. Parents as Teachers (PAT), as an annually trained "Approved user"; or

   3.7.2.2. Growing Great Kids (GGK) with certification of training.

3. Modify Exhibit C, Payment Terms; Section 1, to read:

   1. This Agreement is funded by:

      1.1. 76.44% Federal funds from:

      1.1.1. 52.94% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the DHHS Health Resources and Services Administration (HRSA), Assistance Listing Number (ALN) 93.870, FAIN X10MC43595; and as awarded on September 2, 2022, FAIN X10MC46878; and as awarded on August 29, 2023, FAIN X10MC50315; and as awarded on August 27, 2024, FAIN X10MC53631.

      1.1.2. 21% Foster Care Title IV-E, as awarded on October 1, 2022, by the Administration of Children Youth & Families (ACF), ALN 93.658, FAIN (FFPSA) 2301NHFOST and FAIN 2201NHFOST.

      1.1.3. 2.50% American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the DHHS HRSA, ALN 93.870, FAIN X11MC41935; and as awarded on October 28, 2021, FAIN X11MC45263.

      1.2. 23.56% General funds.

4. Modify Exhibit C, Payment Terms, Section 7, to read:

   7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement and shall be in accordance with the approved line items as specified in Exhibit C-1, Budget SFY 2023 through Exhibit C-12, Budget SFY 2029 – Amendment #4.

5. Modify Exhibit C-3, Budget (SFY 2025) – Amendment #3, by replacing it in its entirety with Exhibit C-3, Budget (SFY 2025) – Amendment #4, which is attached hereto and incorporated by reference herein.
6. Modify Exhibit C-9, Budget (SFY 2026) – Amendment #3, by replacing it in its entirety with Exhibit C-9, Budget Sheet, (SFY 2026) – Amendment #4, which is attached hereto and incorporated by reference herein.
7. Modify Exhibit C-10, Budget (SFY 2027) – Amendment #3, by replacing it in its entirety with Exhibit C-10, Budget, (SFY 2027) – Amendment #4, which is attached hereto and incorporated by reference herein.
8. Modify Exhibit C-11, Budget (SFY 2028) – Amendment #3, by replacing it in its entirety with Exhibit C-11, Budget (SFY 2028) – Amendment #4, which is attached hereto and incorporated by reference herein.
9. Modify Exhibit C-12, Budget (SFY 2029) – Amendment #3, by replacing it in its entirety with Exhibit C-12, Budget (SFY 2029) – Amendment #4, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment remain in full force and effect. This Amendment shall be effective upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

4/4/2025
Date

DocuSigned by:
Iain Watt
0778BB63F0704C7...
Name: Iain Watt
Title: Director - DPHS

Granite VNA, Inc.

4/3/2025
Date

DocuSigned by:
Beth Slepian
9720152A0D240E...
Name: Beth Slepian
Title: President/CEO

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

4/16/2025
Date

DocuSigned by:
Robyn Guarino
74873484404146D...
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Exhibit C-3, Budget (SFY 2025) - Amendment #4

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Formula Grant
Budget Period	G&C Approval Date - 6/30/25
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$271,626
2. Fringe Benefits	$46,844
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$5,000
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$3,042
5.(e) Supplies Office	$3,725
6. Travel	$14,000
7. Software	$8,351
8. (a) Other - Marketing/ Communications	$5,500
8. (b) Other - Education and Training	$16,500
8. (c) Other - Other (specify below)	$0
Other (HFA Affiliation Fee)	$5,000
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$379,588
Total Indirect Costs	$37,958
TOTAL	**$417,546**

Contractor Initial: DS BJS

Date: 4/3/2025

Exhibit C-9, Budget (SFY 2026) - Amendment #4

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/25 - 6/30/26
Indirect Cost Rate (if applicable)	10%
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$235,498
2. Fringe Benefits	$37,293
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$500
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$455
5.(e) Supplies Office	$0
6. Travel	$8,270
7. Software	$6,614
8. (a) Other - Marketing/ Communications	$2,000
8. (b) Other - Education and Training	$4,000
8. (c) Other - Other (specify below)	$0
Other (HFA Accredidation)	$6,000
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$300,630
Total Indirect Costs	$30,063
TOTAL	$330,693

Contractor Initials: BJS (DS)

Date: 4/3/2025

Exhibit C-10, Budget (SFY 2027) - Amendment #4

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/26 - 6/30/27
Indirect Cost Rate (if applicable)	10%
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$194,992
2. Fringe Benefits	$26,963
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$100
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$100
5.(e) Supplies Office	$0
6. Travel	$9,000
7. Software	$5,299
8. (a) Other - Marketing/ Communications	$125
8. (b) Other - Education and Training	$1,305
8. (c) Other - Other (specify below)	$0
Other (HFA Affiliation fee)	$3,000
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$240,884
Total Indirect Costs	$24,088
TOTAL	$264,972

Contractor Initials: BJS

Date: 4/3/2025

Exhibit C-11, Budget (SFY 2028) - Amendment #4

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/27 - 6/30/28
Indirect Cost Rate (if applicable)	10%
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$247,896
2. Fringe Benefits	$33,512
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$100
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$100
5.(e) Supplies Office	$0
6. Travel	$5,617
7. Software	$6,595
8. (a) Other - Marketing/ Communications	$500
8. (b) Other - Education and Training	$2,470
8. (c) Other - Other (specify below)	$0
Other (HFA Affiliationi Fee)	$3,000
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$299,790
Total Indirect Costs	$29,968
TOTAL	$329,758

Contractor Initials: BJS

Date: 4/3/2025

Exhibit C-12, Budget (SFY 2029) - Amendment #4

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/28 - 9/30/28
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$49,983
2. Fringe Benefits	$5,733
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$100
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$100
5.(e) Supplies Office	$0
6. Travel	$8,142
7. Software	$1,497
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$0
8. (c) Other - Other (specify below)	$0
Other (HFA Affiliation Fee)	$2,500
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$68,055
Total Indirect Costs	$6,806
TOTAL	$74,861

Contractor Initials: DS BJS

Date: 4/3/2025

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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 GRANITE VNA, INC. is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on October 18, 1899. 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: **63116**

Certificate Number: **0007144458**

IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 1st day of April A.D. 2025.

David M. Scanlan

Secretary of State

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Granite VNA

CERTIFICATE OF AUTHORITY

I, Andrea M. Stevenson, hereby certify that:

1. I am a duly elected Clerk/Secretary/Officer of Granite VNA, Inc.

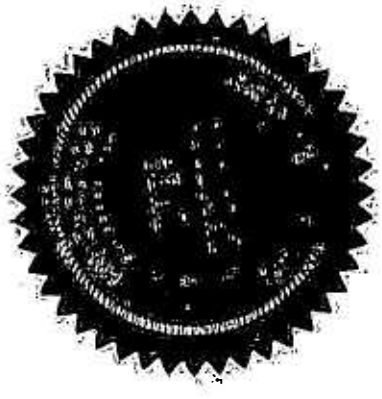
2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on **March 11, 2025** at which a quorum of the Directors/shareholders were present and voting.

VOTED: That Beth J. Slepian is duly authorized on behalf of Granite VNA, 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: 3·11·25

Andrea Stevenson
Board of Trustee – Secretary



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GRANIVNA

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 3/27/2025

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Linda Jaeger, CIC
USI Insurance Services LLC 3 Executive Park Drive, Suite 300 Bedford, NH 03110 855 874-0123	PHONE (A/C, No, Ext): 855 874-0123 FAX (A/C, No): E-MAIL ADDRESS: linda.jaeger@usi.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : National Union Fire Ins Co of Pitts, PA	19445
INSURER B : Granite State Healthcare & Human Svc WC	NONAIC
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Granite VNA, Inc.
30 Pillsbury Street
Concord, NH 03301

COVERAGES CERTIFICATE NUMBER: 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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-JECT LOC OTHER:	X	X	VHNUHG003353701	04/01/2025	04/01/2026	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$1,000,000 $1,000,000 $5,000 $1,000,000 $3,000,000 $3,000,000
A	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY SCHEDULED AUTOS X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY			VHNUHA003353901	04/01/2025	04/01/2026	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$1,000,000 $ $ $
A	UMBRELLA LIAB X OCCUR X EXCESS LIAB CLAIMS-MADE DED X RETENTION $0	X	X	VHNUHX003354001	04/01/2025	04/01/2026	EACH OCCURRENCE AGGREGATE	$10,000,000 $10,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y/N N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		P10344HCHS2025 3A States: NH	01/01/2025	01/01/2026	X PER STATUTE OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$1,000,000 $1,000,000 $1,000,000
A	Professional Liability			VHNUHG003353701	04/01/2025	04/01/2026	$1,000,000 Ea. Incident $3,000,000 Aggregate	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Additional Insured Status Is Provided Where Required by Contract, Agreement or Permit.

CERTIFICATE HOLDER

State of New Hampshire
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301-3857

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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Granite VNA

Office 603.224.4093
800.924.8620
info@granitevna.org
www.granitevna.org

30 Pillsbury Street
Concord, NH 03301
Offices in Laconia and Wolfeboro

Mission Statement

"We enhance dignity and independence for people by delivering quality health care and promoting wellness in homes and communities through all stages of life."

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BerryDunn

Granite VNA

FINANCIAL STATEMENTS

and

FEDERAL REPORTS IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS* AND THE UNIFORM GUIDANCE

September 30, 2024 and 2023

With Independent Auditor's Report

Docusign Envelope ID: 20D3F45B-E562-41D0-891C-C24ABA9B619B

BerryDunn
BDMP Assurance, LLP

INDEPENDENT AUDITOR'S REPORT

Board of Trustees
Granite VNA, Inc.

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of Granite VNA, Inc., which comprise the statement of financial position as of September 30, 2024, and the related statement of operations and changes in net assets and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Granite VNA, Inc. as of September 30, 2024, and the results of its operations, changes in its net assets, and its cash flows for the year then ended in accordance with U.S. generally accepted accounting principles (U.S. GAAP).

Basis for Opinion

We conducted our audits in accordance with U.S. generally accepted auditing standards (U.S. GAAS) 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 Granite VNA, 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 opinion.

Prior Period Financial Statements

The financial statements of Granite VNA, Inc. as of and for the year ended September 30, 2023 were audited by Berry, Dunn, McNeil & Parker, LLC whose report dated January 9, 2024 expressed an unmodified opinion on those statements.

Change in Accounting Principle

As discussed in Note 1 to the financial statements, Granite VNA, Inc. adopted Financial Accounting Standards Board Accounting Standards Update No. 2016-13, *Financial Instruments - Credit Losses (Topic 326): Measurement of Credit Losses on Financial Instruments*, and related guidance as amended, during the year ended September 30, 2024. Our opinion is not modified with respect to that matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with U.S. GAAP, 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 Granite VNA, Inc.'s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Board of Trustees
Granite VNA, Inc.

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 U.S. 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 U.S. GAAS 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 Granite VNA, 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 Granite VNA, 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.

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated January 14, 2025 on our consideration of the Association'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 solely 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 Granite VNA, 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 Granite VNA, Inc.'s internal control over financial reporting and compliance.

BDMP Assurance, LLP

Manchester, New Hampshire
January 14, 2025

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GRANITE VNA, INC.

Statements of Financial Position

September 30, 2024 and 2023

	2024	2023
ASSETS		
Current assets		
Cash and cash equivalents	$ 1,555,641	$ 4,374,606
Restricted cash	100,000	-
Patient accounts receivable, net	5,574,461	8,745,556
Other receivables	82,622	375,697
Prepaid expenses	477,968	681,394
Employee retention tax credit receivable	6,254,341	6,254,341
Assets held for sale	200,000	674,000
Total current assets	14,245,033	21,105,594
Investments	29,458,363	24,730,024
Beneficial interest in perpetual trusts	1,770,002	1,577,284
Hospice house lease receivable	2,250,000	2,375,000
Property and equipment, net	5,088,562	5,292,567
Other assets	110,355	104,962
Total assets	$ 52,922,315	$ 55,185,431
LIABILITIES AND NET ASSETS		
Current liabilities		
Accounts payable and accrued expenses	$ 409,612	$ 420,979
Accrued payroll and related expenses	4,263,188	3,494,286
Deferred revenue	8,183	4,800
Refundable advance	185,573	464,948
Total current liabilities	4,866,556	4,385,013
Other liabilities	110,355	104,962
Total liabilities	4,976,911	4,489,975
Net assets		
Without donor restrictions	37,094,281	41,122,624
With donor restrictions	10,851,123	9,572,832
Total net assets	47,945,404	50,695,456
Total liabilities and net assets	$ 52,922,315	$ 55,185,431

The accompanying notes are an integral part of these financial statements.

Docusign Envelope ID: 20D3F45B-E562-41D0-891C-C24ABA9B619B

GRANITE VNA, INC.

Statements of Operations and Changes in Net Assets

Year Ended September 30, 2024

	Without Donor Restrictions				
	Operating	Internally Designated	Total	With Donor Restrictions	**Total**
Operating revenue					
Net patient service revenue	$ 37,659,583	$ -	$ 37,659,583	$ -	**$ 37,659,583**
Other revenue	2,209,686	-	2,209,686	-	**2,209,686**
Spending policy allotment releases - donor restricted	54,126	135,927	190,053	(190,053)	**-**
Spending policy allotment - board designated endowment	525,936	(525,936)	-	-	**-**
Net assets released from restrictions for operations - donor restricted	211,905	-	211,905	(211,905)	**-**
Net assets released from restrictions for operations - board designated	2,369,000	(2,369,000)	-	-	**-**
Total operating revenue	43,030,236	(2,759,009)	40,271,227	(401,958)	**39,869,269**
Operating expenses					
Salaries and wages	31,914,975	-	31,914,975	-	**31,914,975**
Employee benefits	10,272,030	-	10,272,030	-	**10,272,030**
Purchased services	2,384,733	-	2,384,733	-	**2,384,733**
Supplies and other expenses	4,566,667	-	4,566,667	-	**4,566,667**
Depreciation	439,179	-	439,179	-	**439,179**
Total operating expenses	49,577,584	-	49,577,584	-	**49,577,584**
Operating loss	(6,547,348)	(2,759,009)	(9,306,357)	(401,958)	**(9,708,315)**
Nonoperating revenue and other support					
Contributions	1,059,151	-	1,059,151	100,000	**1,159,151**
Loss on sale of nonfinancial assets	(217,680)	-	(217,680)	-	**(217,680)**
Investment income, net of fees	114,635	360,865	475,500	121,039	**596,539**
Change in fair value of beneficial interest in perpetual trusts	-	-	-	192,718	**192,718**
Change in fair value of investments, net of spending policy allotment	469,665	3,491,378	3,961,043	1,266,492	**5,227,535**
Total nonoperating revenue and other support	1,425,771	3,852,243	5,278,014	1,680,249	**6,958,263**
Change in net assets	(5,121,577)	1,093,234	(4,028,343)	1,278,291	**(2,750,052)**
Net assets, beginning of year	24,408,195	16,714,429	41,122,624	9,572,832	**50,695,456**
Net assets, end of year	$ 19,286,618	$ 17,807,663	$ 37,094,281	$ 10,851,123	**$ 47,945,404**

The accompanying notes are an integral part of these financial statements.

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GRANITE VNA, INC.

Statements of Operations and Changes in Net Assets

Year Ended September 30, 2023

	Without Donor Restrictions				
	Operating	Internally Designated	Total	With Donor Restrictions	Total
Operating revenue					
Net patient service revenue	$ 35,884,540	$ -	$ 35,884,540	$ -	$ 35,884,540
Other revenue	2,782,678	-	2,782,678	-	2,782,678
Spending policy allotment releases - donor restricted	48,982	122,880	171,862	(171,862)	-
Spending policy allotment - board designated endowment	625,404	(625,404)	-	-	-
Net assets released from restrictions for operations - donor restricted	234,500	-	234,500	(234,500)	-
Net assets released from restrictions for operations - board designated	9,389,000	(9,389,000)	-	-	-
Total operating revenue	48,965,104	(9,891,524)	39,073,580	(406,362)	38,667,218
Operating expenses					
Salaries and wages	32,593,720	-	32,593,720	-	32,593,720
Employee benefits	8,106,423	-	8,106,423	-	8,106,423
Purchased services	2,877,606	-	2,877,606	-	2,877,606
Supplies and other expenses	4,905,972	-	4,905,972	-	4,905,972
Depreciation	516,894	-	516,894	-	516,894
Total operating expenses	49,000,615	-	49,000,615	-	49,000,615
Operating loss	(35,511)	(9,891,524)	(9,927,035)	(406,362)	(10,333,397)
Nonoperating revenue and other support					
Employee retention tax credit	6,254,341	-	6,254,341	-	6,254,341
Contributions	791,294	-	791,294	2,500,000	3,291,294
Contribution of nonfinancial asset	674,000	-	674,000	-	674,000
Investment income, net of fees	82,836	422,595	505,431	107,470	612,901
Change in fair value of beneficial interest in perpetual trusts	-	-	-	53,122	53,122
Change in fair value of investments, net of spending policy allotment	35,818	2,112,387	2,148,205	511,711	2,659,916
Total nonoperating revenue and other support	7,838,289	2,534,982	10,373,271	3,172,303	13,545,574
Change in net assets	7,802,778	(7,356,542)	446,236	2,765,941	3,212,177
Net assets, beginning of year	16,605,417	24,070,971	40,676,388	6,806,891	47,483,279
Net assets, end of year	$ 24,408,195	$ 16,714,429	$ 41,122,624	$ 9,572,832	$ 50,695,456

The accompanying notes are an integral part of these financial statements.

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GRANITE VNA, INC.

Statements of Cash Flows

Years Ended September 30, 2024 and 2023

	2024	2023
Cash flows from operating activities		
Change in net assets	$ (2,750,052)	$ 3,212,177
Adjustments to reconcile change in net assets to net cash used by operating activities		
Depreciation	439,179	516,894
Contribution of nonfinancial asset	-	(674,000)
Loss on sale of nonfinancial asset	217,680	-
Change in fair value of investments	(5,227,535)	(2,659,916)
Change in fair value of beneficial interest in perpetual trusts	(192,718)	(53,122)
Decrease (increase) in the following assets		
Patient accounts receivable	3,171,095	1,906,933
Other receivables	293,075	(62,895)
Prepaid expenses	203,426	170,177
Employee retention tax credit receivable	-	(6,254,341)
Hospice house lease receivable	125,000	(2,375,000)
Increase (decrease) in the following liabilities		
Accounts payable	(11,367)	(38,850)
Accrued payroll and related expenses	768,902	611,803
Deferred revenue	3,383	(11,700)
Refundable advance	(279,375)	(301,609)
Net cash used by operating activities	(3,239,307)	(6,013,449)
Cash flows from investing activities		
Acquisition of property and equipment	(235,174)	(88,819)
Purchases of investments	(7,698,491)	(5,558,867)
Proceeds from sale of investments	8,197,687	13,637,269
Proceeds from sale of nonfinancial asset	256,320	-
Net cash provided by investing activities	520,342	7,989,583
Net (decrease) increase in cash and cash equivalents	(2,718,965)	1,976,134
Cash, cash equivalents and restricted cash, beginning of year	4,374,606	2,398,472
Cash, cash equivalents and restricted cash, end of year	$ 1,655,641	$ 4,374,606

The accompanying notes are an integral part of these financial statements.

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1. Summary of Significant Accounting Policies

Organization

Granite VNA, Inc., (the Association) is a non-stock, non-profit corporation organized in New Hampshire. The Association's primary purposes are to provide home health care, hospice, and community health services to residents of Concord, New Hampshire and surrounding communities.

The Association is a subsidiary of Capital Region Health Care Corporation (CRHC), its sole corporate member. CRHC is a holding company for various providers of health care services to residents in central New Hampshire, including Concord Hospital.

Recently Adopted Accounting Principle

Financial Accounting Standards Board (FASB) issued Accounting Standards Update No. 2016-13, *Financial Instruments - Credit Losses* (Topic 326): *Measurement of Credit Losses on Financial Instruments*, and related guidance as amended, which replaces the incurred loss methodology with an expected loss methodology that is referred to as the current expected credit loss (CECL) methodology. The measurement of expected credit losses under the CECL methodology is applicable to financial assets measured at amortized cost, which includes patient accounts receivable. The adoption of Topic 326 during the year ended September 30, 2024 did not have a material impact on the financial statements of the Association as a significant portion of the payors to the Association either have the full faith and backing of the U.S. government or are credit worthy with limited to no credit risk associated with them. Other than patient accounts receivable, there are no other financial assets that are measured at amortized cost.

Basis of Statement Presentation

Net assets and revenues, expenses, gains, and losses are classified as follows based on the existence or absence of donor-imposed restrictions in accordance with FASB Accounting Standards Codification (ASC) Topic 958, *Not-For-Profit Entities*, as described below. Under FASB ASC Topic 958 and FASB ASC Topic 954, *Health Care Entities*, all not-for-profit healthcare organizations are required to provide a statement of financial position, statements of operations and changes in net assets, and a statement of cash flows. FASB ASC Topic 958 requires reporting amounts for an organization's total assets, liabilities, and net assets in a statement of financial position; reporting the change in an organization's net assets in statements of operations and changes in net assets; and reporting the change in its cash and cash equivalents in a statement of cash flows.

Net assets without donor restrictions: Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Association. These net assets may be used at the discretion of the Association's management and the Board of Trustees (Board).

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Net assets with donor restrictions: Net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Association or by the passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity.

Use of Estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles (U.S. GAAP) requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash and Cash Equivalents

Cash and cash equivalents include highly liquid investments with an original maturity of three months or less, excluding investments and restricted cash.

The Association has cash deposits in a major financial institution which may exceed federal depository insurance limits. The Association has not experienced any losses in such accounts. Management believes it is not exposed to any significant risk with respect to these accounts.

Restricted Cash

Restricted cash consists of donor restricted funds to be maintained in perpetuity.

Patient Accounts Receivable

Patient accounts receivable is stated at the amount management expects to collect from outstanding balances. Management provides a reserve for payment adjustments based on its assessment of the current status of individual accounts. Balances that are still outstanding after management has used reasonable collection efforts are applied against the reserve for payment adjustments.

Patient accounts receivable, net amounted to $5,574,461; $8,745,556; and $10,652,489 as of September 30, 2024, 2023, and 2022, respectively.

Investments

The Association reports investments at fair value, and has elected to report all gains and losses in net assets without donor restrictions unless otherwise stipulated by the donor or State law. All gains and losses related to investments stipulated by the donor or State law are reported as changes in net assets with donor restrictions in the statements of operations and changes in net assets.

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Investments, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Consequently, it is reasonably possible that changes in the values of investments will occur in the near term and that such changes could materially affect the amounts reported in the statements of financial position.

Funds have been pooled for investment purposes. Income received, and realized and unrealized gains and losses, are apportioned to the participating funds based on their respective units in the pool, and then apportioned to the appropriate net asset categories according to donor restrictions and State law. The units held by each fund are determined using fair value.

Property and Equipment

Property and equipment are carried at cost less accumulated depreciation. Maintenance, repairs and minor renewals are expensed as incurred and renewals and betterments are capitalized. Depreciation expense is computed using the straight-line method over the useful lives of the related assets.

Net Patient Service Revenue

Services to all patients are recorded as revenue when services are rendered at the estimated net realizable amounts from patients, third-party payors and others, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and in future periods as final settlements are determined. Patients unable to pay full charge, who do not have other third-party resources, are charged a reduced amount based on the Association's published sliding fee scale. Reductions in full charge are recognized when the service is rendered.

Performance obligations are determined based on the nature of the services provided by the Association. Revenue for performance obligations satisfied over time is recognized based on actual services rendered. Generally, performance obligations satisfied over time relate to patients receiving skilled and non-skilled services in their home or facility. The Association measures the period over which the performance obligation is satisfied from admission to the point when it is no longer required to provide services to that patient, which is generally at the time of discharge.

Providers of home health services to clients eligible for Medicare home health benefits are paid on a prospective basis, with no retrospective settlement. The prospective payment is based on the scoring attributed to the acuity level of the client at a rate determined by federal guidelines. As the performance obligations for home health services are met, revenue is recognized based upon the portion of the transaction price allocated to the performance obligation. The transaction price is the prospective payment determined for the medically necessary services.

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Providers of hospice services to clients eligible for Medicare hospice benefits are paid on a per-diem basis, with no retrospective settlement, provided the Association's aggregate annual Medicare reimbursement is below a predetermined aggregate capitated rate. Revenue is recognized as the services are performed based on the fixed rate amount. As the performance obligations for hospice services are met, revenue is recognized based upon the portion of the transaction price allocated to the performance obligation. The transaction price is the predetermined aggregate capitated rate per day.

Because all of the Association's performance obligations relate to short-term periods of care, the Association has elected to apply the optional exemption provided in FASB ASC Subtopic 606-10-50-14 (a) and, therefore, is not required to disclose the aggregate amount of the transaction price allocated to performance obligations that are unsatisfied or partially unsatisfied at the end of the reporting period.

Income Taxes

The Association is a tax-exempt entity under Section 501(c)(3) of the Internal Revenue Code (IRC). As a public charity, the Association is exempt from state and federal income taxes on income earned in accordance with its tax-exempt purpose. Unrelated business income is subject to state and federal income tax. Management has evaluated the Association's tax positions and concluded that the Association has no unrelated business income or uncertain tax positions that require adjustment to the financial statements.

Contributions

Unconditional promises to give cash and other assets are reported at fair value at the date the promise is received, which is then treated as cost. The gifts are reported as support with donor restrictions if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), net assets with donor restrictions are reclassified as net assets without donor restrictions and reported in the statements of operations and changes in net assets as net assets released from restrictions. Donor-restricted contributions whose restrictions are met in the same year as received are reflected as contributions without donor restrictions in the accompanying financial statements.

Change in Net Assets from Operations

The statements of operations and changes in net assets includes a measure of change in net assets from operations. Changes in net assets which are excluded from the change in net assets from operations include the employee retention tax credit revenue, contributions without and with donor restrictions, investment income, net of fees, change in fair value of beneficial interest in perpetual trusts, and the change in fair value of investments, net of spending policy allotment.

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COVID-19 and Relief Funding

On March 11, 2020, the World Health Organization declared the Coronavirus disease (COVID-19) a global pandemic. In response to the global pandemic, The Centers for Medicare & Medicaid Services (CMS) implemented certain relief measures and also issued guidance for limiting the spread of COVID-19.

The U.S. government responded with several phases of relief legislation as a response to the COVID-19 outbreak. Legislation was enacted into law on March 27, 2020, called the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), a statute to address the economic impact of the COVID-19 outbreak. The CARES Act, among other things, 1) authorizes emergency loans to distressed businesses by establishing, and providing funding for, forgivable bridge loans; 2) provides additional funding for grants and technical assistance; 3) delays due dates for employer payroll taxes and estimated tax payments for corporations; and 4) revises provisions of the IRC, including those related to losses, charitable deductions, and business interest.

American Rescue Plan Act

On March 11, 2021, the U.S. government enacted the American Rescue Plan Act (ARPA). ARPA, amongst other things, provided support for health and human services workforce development in response to COVID-19 and broader economic impacts of the pandemic. The Association received $12,764 and $144,517 in grant funding under ARPA during the years ended September 30, 2024 and 2023, respectively, for the purpose of workforce investment. The Association has incurred qualifying recruitment and retention expenses in the amount of $292,139 and $446,126 that was recorded as other revenue in the statements of operations and changes in net assets for the years ended September 30, 2024 and 2023, respectively. The remaining unspent ARPA funds of $185,573 and $464,948 are reported as refundable advances on the statements of financial position at September 30, 2024 and 2023, respectively.

Employee Retention Tax Credit

The CARES Act provides an employee retention tax credit (ERTC), which is a refundable tax credit against certain employment taxes. For 2020, the tax credit is equal to 50% of qualified wages paid to employees during the calendar year, capped at $10,000 of qualified wages per employee. Additional relief provisions were passed by the U.S. government, which extended and expanded the qualified wage caps on these credits through September 30, 2021. Based on these additional provisions, the tax credit was increased to 70% of qualified wages paid to employees during each quarter, and the limit on qualified wages per employee increased to $10,000 of qualified wages per calendar quarter.

Management determined that the Association qualified for the ERTC under the government orders test and estimated that they will receive $6,254,341, which has been recorded as a receivable on the statements of financial position at September 30, 2024 and 2023 and as revenue during the year ended September 30, 2023. The credits received are subject to audit for up to five years from the date of the credit filing.

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2. Availability and Liquidity of Financial Assets

The Association had working capital of $9,378,477 as of September 30, 2024 and average days (based on normal expenditures) of cash and cash equivalents and liquid investments on hand of 55 and 57 at September 30, 2024 and 2023, respectively.

Financial assets and liquidity resources available within one year for general expenditure, such as operating expenses and capital acquisitions costs not financed with debt or restricted funds, were as follows:

	2024	2023
Cash and cash equivalents, less donor restricted funds	$ 1,540,152	$ 4,359,121
Patient accounts receivable, net	5,574,461	8,745,556
Other receivables	82,622	375,697
Employee retention tax credit receivable	6,254,341	6,254,341
Investments without donor restrictions or board designations	4,935,068	2,410,537
Estimated spending policy appropriation - donor restricted	172,000	172,000
Estimated spending policy appropriation - board designated	733,000	625,000
Financial assets available to meet general expenditures within one year	$ 19,291,644	$ 22,942,252

The Board has designated a portion of its resources without donor-imposed restrictions to act as endowment funds. These funds are invested for long-term appreciation and current income, but remain available and may be spent at the discretion of the Board. The Association also has board designated long-term investments that are intended to fund certain costs or projects that could be made available for general expenditure upon Board approval. The Association has other assets restricted to use, which are more fully described in Note 6, and which are not available for general expenditure within the next year. These amounts are not reflected in the amounts above.

The Association manages its cash and cash equivalents available to meet general expenditures following two guiding principles:

- Operating within a prudent range of financial soundness and stability.
- Maintaining adequate liquid assets.

3. Investments

Investments by class of net assets and designation consist of the following:

	2024	2023
Without donor restrictions and undesignated	$ 4,935,068	$ 2,410,537
Without donor restrictions - designated by Board		
Functions as endowment	10,738,128	9,179,353
Hospice House	718,904	568,637
Hospice House replacement reserve	424,897	332,031
30 Pillsbury Street replacement reserve	490,317	384,651
Donahue Fund	56,217	45,157
Leadership Fund	32,363	25,990
Workforce development	4,746,837	5,578,610
Building capital improvements and maintenance	600,000	600,000
With donor restrictions		
Temporary in nature	3,308,064	2,197,490
Endowment (corpus only	3,407,568	3,407,568
	$ 29,458,363	$ 24,730,024

Investment income consisted of the following:

	2024	2023
Interest and dividends, net of fees	$ 596,539	$ 612,901
Change in fair value of investments	5,227,535	2,659,916
	$ 5,824,074	$ 3,272,817

Investment management fees were $130,787 for 2024 and $141,045 for 2023.

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Endowment

The Association's endowment consists of individual funds established for a variety of purposes by donors. As required by U.S. GAAP, net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

Changes in endowment net assets for the years ended September 30 are as follows:

	Without Donor Restrictions	With Donor Restrictions	Total
Endowment net assets, September 30, 2022	$ 15,932,621	$ 3,848,145	$19,780,766
Investment losses			
Investment income, net of fees	299,750	79,102	378,852
Net appreciation in fair value	1,572,386	373,756	1,946,142
Total investment losses	1,872,136	452,858	2,324,994
Release to operations	(8,000,000)	(2,000)	(8,002,000)
Spending policy appropriations	(625,404)	(171,862)	(797,266)
Endowment net assets, September 30, 2023	9,179,353	4,127,141	13,306,494
Investment return			
Investment income, net of fees	**242,558**	**90,733**	**333,291**
Net appreciation in fair value	**2,342,153**	**949,437**	**3,291,590**
Total investment return	**2,584,711**	**1,040,170**	**3,624,881**
Release to operations	**(500,000)**	**(2,000)**	**(502,000)**
Spending policy appropriations	**(525,936)**	**(190,053)**	**(715,989)**
Endowment net assets, September 30, 2024	**$ 10,738,128**	**$ 4,975,258**	**$15,713,386**

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Return Objectives and Strategies Employed for Achieving Objectives

The primary objective of the investment funds is preserving the purchasing power of the assets. The investment funds are managed based on relative performance, in a manner that provides diversification, liquidity and a dependable source of income. The goal is to attain a rate of return equal to the Consumer Price Index plus 4%.

Funds with Deficiencies

From time to time, the fair value of assets associated with donor-restricted endowment funds may fall below the level that the donor or the State of New Hampshire Uniform Prudent Management of Institutional Funds Act (the Act) requires the Association to retain as a fund of perpetual duration ("underwater"). The Board's policy does permit spending from underwater endowment. Any deficiencies are reported in net assets with donor restrictions. There were no such deficiencies at September 30, 2024 and 2023.

Spending Policy

The Association has interpreted the Act as allowing the Board to appropriate for expenditure for the uses and purposes for which the endowment fund is established, unless otherwise specified by the donor, so much of the net appreciation, realized and unrealized, in the fair value of the assets of the endowment fund over the historic dollar value of the fund as is prudent. In doing so, the Board must consider the long and short-term needs of the Association in carrying out its purpose, its present and anticipated financial requirements, expected total return on its investments, price level trends, and general economic conditions. For the years ended September 30, 2024 and 2023, the Board retained all appreciation over 7% of the original gift value on donor-restricted endowment funds in net assets with donor restrictions, excluding three funds.

The Association developed an additional spending policy for funds donated to the Association without donor restrictions and designated by the Board as endowment funds. The policy is a 3% annual draw calculated on a three-year rolling market value historical average regardless of deficiencies due to temporary market fluctuations. The funds are released monthly and transferred from the investment account to the operating account to help support operations and continue to meet the Association's mission.

4. Beneficial Interest in Perpetual Trusts

The Association is a beneficiary of the Benjamin and Gertrude Couch, George Griffin, Jeanne C. and Walter W. Dwyer, Thelma A. Larson Trusts, Muriel Devens Bond Fund, Leo and Marguerite LaFrance Fund, and Fernald-Gilman-Leavitt VNA Hospice Continuing Education Fund, the assets of which are not in the possession of the Association. The Association has legally enforceable rights and claims to such assets, including the right to income therefrom. Consistent with the provisions of FASB ASC Subtopic 958-605 related to accounting for contributions received, these funds are included in the Association's financial statements. The fair value of the trust assets is reflected as an estimate of the present value of the future cash flows from the trusts and is reported as net assets with donor restrictions. Appreciation in fair value of the trusts is not available for expenditure by the Association unless the trustee decides to appropriate it. Total distributions from these trusts were $228,577 in 2024 and $85,170 in 2023.

5. Property and Equipment

A summary of property and equipment as of September 30 follows:

	2024	2023
Land	$ 306,000	$ 306,000
Buildings and improvements	5,941,828	5,745,191
Leasehold improvements	1,160,818	1,160,818
Furniture and equipment	2,426,517	2,376,088
Information system equipment	1,328,141	1,340,033
	11,163,304	10,928,130
Less accumulated depreciation	6,074,742	5,635,563
Property and equipment, net	$ 5,088,562	$ 5,292,567

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6. Net Assets

Net assets with donor restrictions were as follows at September 30:

	2024	2023
Funds subject to time restriction		
Hospice house lease	$ 2,250,000	$ 2,375,000
Funds maintained with donor restrictions temporary in nature:		
Slusser Fund - scholarships	139,984	112,697
Audrey Lindgren Fund - financial assistance	1,600,389	1,365,221
Barstow Trust	2,131	2,131
Special Needs Bearded Men	13,046	13,046
Bishop Scholarship - nursing education	8,826	5,196
Ruby Raine Nydegger Fund - pediatric education	38,036	25,423
Penacook Village Fund - homemaker services for residents of Penacook and Lower Boscawen	975,968	610,114
Hospice preparatory course and certification	312	312
	2,778,692	2,134,140
Funds subject to the Association's spending policy and appropriation		
Perpetual in nature, the income of which is expendable to support:		
General	1,136,359	1,136,359
Hospice House	923,377	823,377
Bishop Scholarship	20,543	20,543
Heston Hospice	463,242	463,242
Donahue Fund	32,199	32,199
Ruby Raine Nydegger Fund	32,282	32,282
Penacook Village Fund	899,567	899,567
Appreciation of net assets with perpetual donor restrictions	544,860	78,839
	4,052,429	3,486,408
Funds maintained in perpetuity		
Beneficial interest in perpetual trusts, income without restrictions	1,770,002	1,577,284
Total	$10,851,123	$ 9,572,832

The Association entered into a 20-year building lease, expiring September 2042, for a cost of $1 per year with CRHC. The lease is for the building that the Association utilizes for the hospice house. Due to the lease payment being below fair market value the lease is considered a time restricted receivable and net asset that will be released over the life of the lease.

7. Net Patient Service Revenue

A summary of net patient service revenue for the years ended September 30 is as follows:

	2024	2023
Gross patient service revenue		
Medicare and Medicare Advantage	$ 33,522,886	$ 32,431,414
Medicaid	1,258,769	1,536,745
Private patient	453,821	350,536
Other third-party	4,858,722	4,508,112
	40,094,198	38,826,807
Less contractual adjustments and charity care	2,434,615	2,942,267
Net patient service revenue	$ 37,659,583	$ 35,884,540

Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation. Compliance with such laws and regulations can be subject to future government review and interpretation, as well as significant regulatory action including fines, penalties, and exclusion from the Medicare and Medicaid programs. The Association believes that it is in substantial compliance with all applicable laws and regulations. However, there is at least a reasonable possibility that recorded estimates could change a material amount in the near term. Differences between amounts previously estimated and amounts subsequently determined to be recoverable or payable are included in net patient service revenue in the year that such amounts become known.

In assessing collectability, the Association has elected the portfolio approach. This portfolio approach is being used as the Association has similar contracts with similar classes of patients. The Association reasonably expects that the effect of applying a portfolio approach to a group of contracts would not differ materially from considering each contract separately. Management's judgment to group the contracts by portfolio is based on the payment behavior expected in each portfolio category. As a result, management believes aggregating contracts (which are at the patient level) by the particular payor or group of payors results in the recognition of revenue approximating that which would result from applying the analysis at the individual patient level.

8. Charity Care

The Association has a policy of providing charity care to its clients who are unable to pay. Eligible clients are identified based on their financial information obtained and subsequent analysis. Since the Association does not expect payment, estimated charges for charity care are not included in revenue.

The amount of home care charges foregone for services furnished under the Association's charity care policy was $134,800 and $120,700 for 2024 and 2023, respectively. Costs incurred for these activities approximated $109,400 and $100,800 for 2024 and 2023, respectively.

The Association also provided services in other health-related activities, primarily to indigent patients, at rates substantially below cost. Costs incurred for these activities, for services to Medicaid patients, approximated $1,060,000 and $1,310,000 for 2024 and 2023, respectively.

The Association was able to provide the above charity care under sliding fee scale policies and in activities without established rates or at rates substantially below cost through a combination of local community support and state grants. Local community support consisted of contributions and municipal appropriations.

In 2024 and 2023, approximately 1% of nongovernmental home health and hospice clients served received services on a discounted basis.

9. Concentrations of Credit Risk

The Association generated approximately 87% of its net patient service revenues from the New Hampshire Medicaid and federal Medicare programs in 2024 and 2023. Under these programs, the provider is reimbursed for the care of the qualified clients at amounts which may differ from its standard charges.

The Association grants credit without collateral to its patients, most of whom are local residents and insured under third-party payor agreements. The mix of receivables for patients and third-party payors at September 30 were as follows:

	2024	2023
Medicare	66 %	59 %
Medicaid	7	5
Private patient	2	5
Other third-party payors	25	31
	100 %	100 %

Due to the large concentration of clients who receive benefits from the Medicare reimbursement program, the Association is highly dependent upon regulatory authorities establishing reimbursement rates that are adequate to sustain the Association's operations.

10. Commitments and Contingencies

Self-Insurance

The Association has a self-insured healthcare plan for all of its employees. The Association has obtained reinsurance coverage to limit its exposure associated with this plan individually of $100,000 per claim with an aggregate limit of $4,818,998 of the expected claims. The Association has accrued $1,670,433 and $897,431 at September 30, 2024 and 2023, respectively, which is reported in the Association's accrued payroll and related expenses in the statements of financial position.

Malpractice Insurance

The Association carries malpractice insurance coverage under a claims-made policy through a group risk sharing arrangement with CRHC. The policy is a claims-made policy that includes basic liability, as well as excess liability coverage on varying levels. The cost of purchasing the coverage is shared between the entities that have entered into the risk sharing agreement.

Should the claims-made policy not be renewed or replaced with equivalent insurance, claims based on occurrences during its term, but reported subsequently, would be uninsured. The Association intends to renew its coverage on a claims-made basis and has no reason to believe that it may be prevented from renewing such coverage. The Association is subject to complaints, claims, and litigation due to potential claims which arise in the normal course of business. U.S. GAAP requires the Association to accrue the ultimate cost of malpractice claims when the incident that gives rise to the claim occurs, without consideration of insurance recoveries. Expected recoveries are presented as a separate asset. The Association has evaluated its exposure to losses arising from potential claims and determined that no such accrual is necessary for the years ended September 30, 2024 and 2023.

11. Functional Expenses

The Association provides various services to residents within its geographic location. Expenses related to providing these services are as follows:

	2024	2023
Program services		
Salaries and wages	$ 26,003,688	$ 25,973,185
Employee benefits	8,369,447	6,459,822
Other operating expenses		
Supplies	1,835,623	1,860,160
Purchased services	706,353	1,128,869
Transportation	991,135	1,135,379
Other	163,699	297,975
Depreciation	51,593	49,299
Total program services	38,121,538	36,904,689
Administrative and general		
Salaries and wages	5,911,287	6,620,535
Employee benefits	1,902,583	1,646,601
Other operating expenses		
Purchased services	1,678,380	1,748,737
Transportation	58,279	55,948
Other	1,517,931	1,556,510
Depreciation	387,586	467,595
Total administrative and general	11,456,046	12,095,926
Total	$ 49,577,584	$ 49,000,615

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The Association allocates expenses between program services and administrative and general functions. Benefits are allocated based on a percentage of total salaries, and depreciation, rent, and repairs and maintenance are allocated based on square footage. The remaining expenses are allocated using a Medicare cost reporting methodology.

12. Retirement Plan

The Association sponsors a 401(k) profit sharing plan (Plan) that includes an Association match covering employees who meet certain age and time requirements. Contributions to the Plan were $1,416,902 for 2024 and $1,287,738 for 2023.

13. Deferred Compensation Plan

The Association had established a funded deferred compensation plan for the former President/Chief Executive Officer (CEO). The plan was designed to defer a portion of annual compensation and provide payments, as determined by the plan, at disability, retirement, death, separation from service, or for certain financial hardships. All amounts contributed and income earned under the funded plan are held in a trust, remain, until made available to the participant or designated beneficiary, the sole property and rights of the Association, and are included in other assets and other liabilities in the statements of financial position. The former President/CEO has elected distribution at a future time.

14. Related Party Transactions

The Association engages in activities with CRHC and its subsidiaries on a regular basis. Services purchased from affiliates by the Association include information system support, telephone services, and supplies. The amounts due from affiliates are included in other receivables in the statements of financial position. The amounts owed to affiliates are included in accounts payable in the statements of financial position.

	2024	2023
Revenue for nursing services provided to affiliates	$ 104,305	$ 105,685
Operating expenses for services purchased from affiliates	$ 580,693	$ 496,688
Amounts due from affiliates	$ 21,850	$ 31,510
Amounts owed to affiliates	$ 72,434	$ 55,879

15. Fair Value Measurement

FASB ASC Topic 820, *Fair Value Measurement*, defines fair value as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date. FASB ASC Topic 820 also establishes a fair value hierarchy which requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. The standard describes three levels of inputs that may be used to measure fair value:

Level 1: Quoted prices (unadjusted) for identical assets or liabilities in active markets that the entity has the ability to access as of the measurement date.

Level 2: Significant observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, and other inputs that are observable or can be corroborated by observable market data.

Level 3: Significant unobservable inputs that reflect an entity's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

The following table sets forth by level, within the fair value hierarchy, the Association's assets measured at fair value on a recurring basis as of September 30:

	2024			
	Carrying Amount	Level 1	Level 2	Level 3
Investments				
Cash and cash equivalents	$ 764,947	$ 764,947	$ -	$ -
Equities	20,238,327	20,238,327	-	-
Corporate bonds and notes	8,455,089	-	8,455,089	-
	29,458,363	21,003,274	8,455,089	-
Beneficial interest in perpetual trusts	1,770,002	-	-	1,770,002
Assets to fund deferred compensation	110,355	110,355	-	-
Total	$31,338,720	$21,113,629	$ 8,455,089	$ 1,770,002

	2023			
	Carrying Amount	Level 1	Level 2	Level 3
Investments				
Cash and cash equivalents	$ 604,464	$ 604,464	$ -	$ -
Equities	15,519,297	15,519,297	-	-
Commodities	469,775	469,775	-	-
Corporate bonds and notes	8,136,488	-	8,136,488	-
	24,730,024	16,593,536	8,136,488	-
Beneficial interest in perpetual trusts	1,577,284	-	-	1,577,284
Assets to fund deferred compensation	104,962	104,962	-	-
Total	$26,412,270	$16,698,498	$ 8,136,488	$ 1,577,284

Fair value of the investments is measured using quoted prices in active markets where available. Fair value of Level 2 corporate bonds and notes is primarily based on quoted market prices of comparable securities.

Fair value of the beneficial interest in perpetual trusts is measured based on quoted market prices of the investments in the trusts, but is classified as Level 3 as there is no market in which to trade the beneficial interest itself.

Changes in the fair value of assets classified as Level 3 are comprised of the following:

Balance, September 30, 2022	$ 1,524,162
Change in value	53,122
Balance, September 30, 2023	1,577,284
Change in value	192,718
Balance, September 30, 2024	**$ 1,770,002**

16. Subsequent Events

For purposes of the preparation of these financial statements, management has considered transactions or events occurring through January 14, 2025, the date which the financial statements were available to be issued.

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BerryDunn
BDMP Assurance, LLP

INDEPENDENT AUDITOR'S 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*

Board of Trustees
Granite VNA, Inc.

We have audited, in accordance with U.S. generally accepted auditing standards 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 Granite VNA, Inc. (the Association), which comprise the statement of financial position as of September 30, 2024, and the related statements of operations and changes in net assets and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated January 14, 2025.

Report on Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Association'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 the Association's internal control. Accordingly, we do not express an opinion on the effectiveness of the Association'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. We consider the deficiencies described in the accompanying schedule of findings and questioned costs as items 2024-001 and 2024-002 to be material weaknesses.

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. We consider the deficiency described in the accompanying schedule of findings and questioned costs as item 2024-003 to be a significant deficiency.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Association'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*.

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Board of Trustees
Granite VNA, Inc.

The Association's Response to Findings

Government Auditing Standards requires the auditor to perform limited procedures on the Association's response to the findings identified in our audit and described in the accompanying schedule of findings and questioned costs. The Association's response was not subjected to other auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on the response.

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 Association'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 Association's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

BDMP Assurance, LLP

Manchester, New Hampshire
January 14, 2025

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BerryDunn
BDMP Assurance, LLP

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE ON THE MAJOR FEDERAL PROGRAM; REPORT ON INTERNAL CONTROL OVER COMPLIANCE; AND REPORT ON THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS REQUIRED BY THE UNIFORM GUIDANCE

Board of Trustees
Granite VNA, Inc.

Report on Compliance for Each Major Federal Program

Opinion on the Major Federal Program

We have audited Granite VNA, Inc.'s (the Association) compliance with the types of compliance requirements described in the Office of Management and Budget *Compliance Supplement* that could have a direct and material effect on the Association's major federal program for the year ended September 30, 2024. The Association's major federal program is identified in the Summary of Auditor's Results section of the accompanying schedule of findings and questioned costs.

In our opinion the Association 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 program for the year ended September 30, 2024.

Basis for Opinion on the Major Federal Program

We conducted our audit of compliance in accordance with U.S. generally accepted auditing standards; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and 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 the Association 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 the major federal program. Our audit does not provide a legal determination of Association'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 the Association's federal programs.

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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 the Association'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 U.S. 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 the Association's compliance with the requirements of each of its major federal program as a whole.

In performing an audit in accordance with U.S. 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 the Association'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 the Association'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 the Association'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 compliance that we identified during the audit.

Other Matters

The results of our auditing procedures disclosed an instance of noncompliance which is required to be reported in accordance with the Uniform Guidance and which is described in the accompanying schedule of findings and questioned costs as item 2024-004. Our opinion on the major federal program is not modified with respect to this matter.

Government Auditing Standards requires the auditor to perform limited procedures on the Association's responses to the noncompliance finding identified in our compliance audit described in the accompanying schedule of findings and questioned costs. The Association's response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

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Report on Internal Control Over Compliance

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section 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 and therefore, material weaknesses and significant deficiencies may exist that were not identified. However, as discussed below, we did identify a deficiency in internal control over compliance that we consider to be a material weakness.

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.

We consider the deficiency in internal controls over compliance described in the accompanying schedule of findings and questioned costs as item 2024-004 to be a material weakness.

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.

Government Auditing Standards requires the auditor to perform limited procedures on the Association's response to the internal control over compliance findings identified in our compliance audit described in the accompanying schedule of findings and questioned costs. The Association's response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

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.

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Board of Trustees
Granite VNA, Inc.

Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

We have audited the financial statements of the Association as of and for the year ended September 30, 2024, and have issued our report thereon dated January 14, 2025, which contained an unmodified opinion on those financial statements. Our audit was 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, *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 U.S. generally accepted auditing standards. 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.

BDMP Assurance, LLP

Manchester, New Hampshire
January 14, 2025

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GRANITE VNA, INC.

Schedule of Expenditures of Federal Awards

Year Ended September 30, 2024

Federal Grant/Pass-Through Grantor/Program Title	Federal AL Number	Pass-through Contract Number	Total Federal Expenditures
United States Department of Treasury:			
Pass-through:			
State of New Hampshire Department of Health, Division of Maternal and Child Health:			
Maternal, Infant, and Early Childhood Home Visiting Grant	93.870	N/A	$ 274,047
United States Department of Homeland Security:			
Direct:			
Disaster Grants – Public Assistance	97.036	N/A	716,233
Total Expenditures of Federal Awards			$ 990,280

The accompanying notes are an integral part of the schedule.

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GRANITE VNA, INC.

Notes to Schedule of Expenditures of Federal Awards

Year Ended September 30, 2024

1. Basis of Presentation

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal grant activity of Granite VNA, Inc. (the Association) under programs of the federal government for the year ended September 30, 2024. The information in the 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 portion of the operations of the Association, it is not intended to and does not present the financial position, changes in net assets or cash flows of the Association.

2. Basis of Accounting

Expenditures reported on the Schedule are reported on the accrual basis of accounting. 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 reimbursement.

The Association has not elected to use the 10% de minimis indirect cost rate.

3. Other Information

Expenditures reported on the Schedule for the Disaster Grants – Public Assistance were related to fiscal years 2021 and 2022 but were approved by Federal Emergency Management Agency (FEMA) during fiscal year 2024. Therefore, the funds are reported on the Schedule at the time of approval.

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GRANITE VNA, INC.

Schedule of Findings and Questioned Costs

Year Ended September 30, 2024

Section I. – Summary of Auditor's Results

Financial Statements

Type of auditor's report issued:	Unmodified	
Internal control over financial reporting:		
Material weakness(es) identified?	X yes	___ no
Significant deficiency(ies) identified not considered to be material weaknesses?	X yes	___ none reported
Noncompliance material to financial statements noted?	___ yes	X no

Federal Awards

Internal control over major programs:		
Material weakness(es) identified?	X yes	___ no
Significant deficiency(ies) identified not considered to be material weaknesses?	___ yes	X none reported
Type of auditor's report issued on compliance for major programs:	Unmodified	
Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?	X yes	___ no

Identification of major programs:

AL Number(s)	Name of Federal Program or Cluster
97.036	United States Department of Homeland Security – Disaster Grants – Public Assistance

Dollar threshold used to distinguish between Type A and Type B programs:	$750,000	
Auditee qualified as low-risk auditee?	___ yes	X no

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GRANITE VNA, INC.

Schedule of Findings and Questioned Costs (Continued)

Year Ended September 30, 2024

Section II. – Findings Relating to the Financial Statements Which are Required to be Reported in Accordance with *Government Auditing Standards*

Finding Number:	**2024-001**
Criteria:	The Association is responsible for designing, implementing and maintaining effective internal control over financial reporting that provides reasonable assurance that the internal controls will prevent misstatements, intentional or unintentional, from occurring, or detect and correct misstatements on a timely basis. Additionally, the Association is responsible for maintaining complete and accurate financial records.
Condition Found:	During our audit of the financial statements of the Association, we noted instances where reconciliations of significant accounts were not being performed or the reconciliations of the significant accounts were performed untimely.
Cause and Effect:	Based on our observations and understanding of the Association, the main causes for the issue above related to turnover in the finance department in the prior year. During the fiscal year ended September 30,. 2024, the finance department has been developing month-end procedures and checklists that were not in effect during fiscal year ended September 30, 2024. a result, significant adjustments were identified and posted during the audit.
Identification as a Repeat Finding, if Applicable:	A repeat finding; See finding 2023-002.
Recommendation:	We recommend the Association develop a formal monthly close process which includes reconciliations of all significant accounts. These reconciliations should include evidence of a review being performed. This monthly process should also include producing standard monthly financial reports for review by key management and the Board of Directors.
Views of a Responsible Official and Corrective Action Plan:	Management agrees with the finding and the recommendation. See Corrective Action Plan attached.
Finding Number:	**2024-002**
Criteria:	The Association is responsible for designing, implementing and maintaining effective internal control over financial reporting that provides reasonable assurance that the internal controls will prevent misstatements, intentional or unintentional, from occurring, or detect and correct misstatements on a timely basis. Additionally, the Association is responsible for maintain complete and accurate financial records.

GRANITE VNA, INC.

Schedule of Findings and Questioned Costs (Continued)

Year Ended September 30, 2024

Condition Found:	During our review of journal entries, we noted there is no formal process to review journal entries. Journal entries are a key function that should be reviewed by an individual outside of the reconciliation process.
Cause and Effect:	There are no formal procedures documented to review journal entries. As a result, there is potential that an error or misstatement related to financial reporting may not be prevented, or detected and corrected, on a timely basis. Journal entries are a mechanism to circumvent other key internal controls of the Association.
Identification as a Repeat Finding, if Applicable:	N/A
Recommendation:	We recommend the Association implement a formal documented and independent review of journal entries on a monthly basis and supporting documentation for each journal entry be retained.
Views of a Responsible Official and Corrective Action Plan:	Management agrees with the finding and the recommendation. See Corrective Action Plan attached.
Finding Number:	**2024-003**
Criteria:	The Association is responsible for designing, implementing and maintaining effective internal control over financial reporting that provides reasonable assurance that the internal controls will prevent misstatements, intentional or unintentional, from occurring, or detect and correct misstatements on a timely basis.
Condition Found:	During our review of payroll internal controls, we noted there was no formal review of payroll, performed by an individual independent of the preparer. In addition, payroll change reports were not generated, reviewed or maintained.
Cause and Effect:	There are no formal procedures documented to review the payroll reports. As a result, there is potential that an error or misstatement related to payroll may not be prevented, or detected and corrected, on a timely basis.
Identification as a Repeat Finding, if Applicable:	N/A
Recommendation:	We recommend the Association implement a system of internal controls that would include documented review over the payroll transaction cycle.

GRANITE VNA, INC.

Schedule of Findings and Questioned Costs (Concluded)

Year Ended September 30, 2024

Views of a Responsible Official and Corrective Action Plan:	Management agrees with the finding and the recommendation. See Corrective Action Plan attached.

Section III. – Findings and Questioned Costs for Federal Awards

Finding Number:	**2024-004**
Information on the Federal Program:	Federal Agency: U.S. Department of Homeland Security Program Name: Disaster Grants – Public Assistance AL: 7.036 Federal Award Year: Year Ended June 30, 2024
Specific Requirement:	The cost principles in 2 CFR, Part 200, Subpart E (Cost Principles) are required for the administration of federal awards of Nonprofit organizations.
Condition Found:	During our audit, we noted the Association had charged the following expenditure to the grant that were deemed to be unallowable based on the Cost Principles: - An hourly rate of $102 for 40 hours of contract labor totaling $4,080 whereas the cost incurred was an hourly rate of $89 for 40 hours of contract labor totaling $3,560.
Context:	We sampled 40 expense transactions under the Disaster Grants – Public Assistance and noted 1 transaction that was not consistent with the Cost Principles.
Questioned Costs:	$520
Cause and Effect:	The Association was unaware of the Allowable Costs and Cost Principles requirements as it relates to expenditures charged to the grant.
Identification as a Repeat Finding, if Applicable:	N/A
Recommendation:	We recommend the Association implement a process to review all expenditures that are charged to the grant to verify that are allowable under the Federal Cost Principles.
Views of a Responsible Official and Corrective Action Plan:	Management agrees with the finding and the recommendation. See Corrective Action Plan attached.

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GRANITE VNA, INC.

Summary Schedule of Prior Audit Findings

Year Ended September 30, 2024

Finding Number:	**2023-001**
Condition Found:	Since the Association receives Federal funding that exceeds $750,000, it is required to prepare a complete and accurate Schedule of Expenditures of Federal Awards (SEFA) as part of its federal compliance audit under the Uniform Guidance. The SEFA provided by management for the year ended September 30, 2023 was not complete and accurate.
Recommendation:	We recommend management develop a template to provide a complete and accurate summary SEFA that includes all expenditures of federal awards during the year. The SEFA should be updated and reconciled to the general ledger on a monthly basis.
Status:	Resolved.
Finding Number:	**2023-002**
Condition Found:	During our audit of the financial statements of the Association, we noted instances where reconciliations of significant accounts were not being performed or the reconciliations of the significant accounts were performed untimely.
Recommendation:	We recommend the Association develop a formal monthly close process which includes reconciliations of all significant accounts. These reconciliations should include evidence of a review being performed. This monthly process should also include producing standard monthly financial reports for review by key management and the Board of Directors.
Status:	Unresolved; See finding 2024-001.

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Granite VNA

Office 603.224.4093
800.924.8620
info@granitevna.org
www.granitevna.org

30 Pillsbury Street
Concord, NH 03301
Offices in Laconia and Wolfeboro

Corrective Action Plan

Finding Number 2024-001

Corrective Action Planned: The Chief Financial Officer (CFO) will monitor the monthly checklist of key account reconciliations to verify they are performed timely and accurately, in coordination with the Controller, for reconciliations prepared by the Controller.

Individual Responsible for Corrective Action: Jim Manahan, CFO

Anticipated Completion Date: CFO anticipates starting with October 2024 close.

Finding Number 2024-002

Corrective Action Planned: The CFO will review journal entry batches via a Blackbaud report, on a monthly basis against a checklist created of recurring entries, accruals and reversals, in addition to the review of the financial statements generated.

Individual Responsible for Corrective Action: Jim Manahan, CFO

Anticipated Completion Date: CFO plans on starting with October 2024 close.

Finding Number 2024-003

Corrective Action Planned: The CFO will review a Payroll Change report monthly and a Pre-Process Payroll Compare report each pay period, with initials and dates to document review that has taken place.

Individual Responsible for Corrective Action: Jim Manahan, CFO

Anticipated Completion Date: CFO plans on starting immediately with bi-weekly payroll cycles.

Finding Number 2024-004

Corrective Action Planned: Management will certify that the costs charged to grants are documented, reviewed and approved for accuracy and legitimacy.

Individual Responsible for Corrective Action: Jim Manahan, CFO

Anticipated Completion Date: CFO will implement immediately.

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Granite VNA

BOARD OF TRUSTEES

Michael Griffin, Chair
Dr. David Green, Vice Chair
James Mullins, Treasurer
Andrea Stevenson, Secretary
Robin Michaud, Representative-At-Large
Beth Slepian, President/CEO

Daniel Andrus
Brian Duffy
Michelline Dufort
Mark Edelstein
Susan Houghton
Daniel Kaplan
Lyn Lindpaintner, MD
Chris Parkinson
Natalya Pearl
Corrine Smith
Maura Weston
Steven Whitley

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BETH J. SLEPIAN, MBA, PT

Dynamic leader with strong communication and interpersonal skills. Experienced in all levels of home care and hospice operations, including budgeting, strategic planning, and personnel management. Proven ability to ensure high quality patient outcomes and patient satisfaction. Successful track record of leading complex organizational improvement efforts and implementation of best practices. Demonstrated ability to work throughout a continuum of care. Passionate about advocacy and legislative issues with relationships at state and national level.

Professional Experience

2015-Present — ***President/Chief Executive Officer, Granite VNA (formerly Concord Regional Visiting Nurse Association), Concord, NH***
Responsible to the Board of Trustees for the strategic, operational, and development activities of the agency's Home Care and Hospice Program, Hospice House and Community Health Services.

2013-2015 — ***Vice President, Education and Clinical Compliance, Concord Regional Visiting Nurse Association, Concord, NH***

1994-2013 — ***Northeast Rehabilitation Health Network, Salem, NH***
Administrator, NRH Home Care, 2011-2013
Clinical Director, NRH Home Care, 1995-2011
Physical Therapist, NRH Home Care, 1994-1995

1992-1994 — ***Director of Physical Therapy, New Hampshire Rehabilitation Hospital, Concord, NH***

1987-1992 — ***Northeast Rehabilitation Hospital, Salem, NH***
Stroke Program Director, 1990-1992
Staff/Senior Staff Physical Therapist 1987-1990

Community/Committee Participation

- National Alliance for Care at Home Merger Integration Board, Board of Directors (2024-Present)
  - Governance Committee 2024-Present
- National Association for Home Care & Hospice – Board of Directors (2021-Present)
  - Merger committee for NAHC/NHPCO Merger 2023- present
  - Public Policy Committee (2022- Present)
  - Advocacy Council (2020-Present)
  - Medicare Advantage Subcommittee (2020-2021)
  - NAHC Mentor Program- Mentor (2022)
- Granite CEO Peer Group – Member (2020-Present)
- CATCH Community Housing – Board of Directors (2019-Present)
- VNA Health System of Northern New England (2017-Present)
  - President (2019- 2021)
- Home Care, Hospice & Palliative Care Alliance of New Hampshire – Board of Directors (2016-Present)
  - Board President (2022-2024)
  - Chair of the Legislative Committee (2020-2022)
- National Government Services Provider Outreach and Education Advisory Group for Home Health (2014-Present)
- Strategic Healthcare Programs Advisory Board (2020-2024)
- Greater Concord Chamber of Commerce – Board of Directors (2018-2023)
- Havenwood Heritage Heights, Concord, NH – Board of Directors (2017-2024)
- Region 2 Lead for 1115 (a) Medicaid Waiver Demonstration. – Executive Committee Member (2017-2020)
- Accountable Care Partners ACO, Management Committee, Quality Committee (2015-2019)
- New Hampshire Cares ACO - Management Committee, Transformation of Care Committee (2020-2021)

Education

- Excellence in Governance Certificate Program, NH Center for Nonprofits/Saint Anselm College
- Bachelor of Science, Physical Therapy, University of Vermont
- Masters in Business Administration, Non-Profit Leadership, New England College

Awards

- 2024 Inducted into National Association of Home Care and Hospice Hall of Fame
- 2022 NH Business Excellence Award- Large Organization Healthcare
- 2018 Mary Ellen LaRoche Home Care Public Policy Award Recipient, Home Care Association of NH

Licensure Current New Hampshire Physical Therapist #964

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James E. Manahan II

Granite VNA, Inc.
Chief Financial Officer September 2023 – Present

- Primary oversight of the finance, accounting, UR and revenue cycle functions.
- Responsible for all financial business operations, to include development & implementation of financial policies, accounting systems and internal controls.
- Provide financial reports and analysis to monitor agency operations and programmatic results.
- Oversight of all accounting information systems including payroll, accounts receivable, accounts payable, general ledger and financial reporting systems.
- Prepare and file periodic financial statements for internal users, BOD and regulatory agencies.
- Coordinates the annual operating and capital budget development process.
- Evaluate the financial impact of proposed contracts and service agreements.
- Acts as the financial liason with the governing body, regulatory agencies and third-party entities.
- Serves as a senior member of the agency's management team, assisting with the development of strategic planning, program evaluation, operations, policies and procedures.

Finance & Operations Consultant April 2021 – August 2023

- Coordinate and oversee the annual operating and capital budget building process.
- Provide oversight of accounting, finance and revenue cycle staff to include I&R, accounts payable, payroll, and special projects during a leadership transition.
- Oversee retirement plan administration and transition to a consolidated platform.
- Coordinated the transition of insurance plan coverages within the UVMHN.
- Conduct interviews and assist with orientation for new human resources and finance staff.
- Catching up monthly financial & data reports and providing financial leadership/oversight.
- Complete the federal & state provider Covid relief funds federal reporting requirements.
- Compiled the financial data for submission and consideration of HRSA Phase 4 relief funds.

Interim-Sr. Vice President of Finance and Operations, Bogner of America, Inc. May 2022 - January 2023

- Responsible for all wholesale, retail and e-commerce operations, logistics, financial oversight and reporting for the United States and Canada.
- Oversee HR, IT, accounting, payroll, finance, compliance & warehousing through private-equity restructure.

AVP Finance, Alice Hyde Medical Center February/March 2021
VP for Finance & Administration, Home Health & Hospice September 2010 – February 2021
University of Vermont Health Network –

- Lead financial & administrative officer and Assistant Treasurer of the Agency.
- Lead, manage and account for the financial and administrative operations of the agency.
- Coordinate and oversee annual budget development process, accounting, finance, business analytics, revenue cycle to include I&R, coding and auditing through accounts receivable/billing, accounts payable, payroll, facilities, and information & technology departments.
- Primary liaison with the Treasurer of the HH&H BOD and primary staff for select board committees.
- Assuring compliance with all applicable laws & regulations.
- Primary finance & administrative lead on the affiliation with the UVM Health Network.

Key Accomplishments –

- Successful planning and construction of a state-of-the-art 21 bed inpatient hospice/respite facility, which replaced a 13 bed facility that was subsequently sold.
- Building more than 200 days of cash on hand, through our revenue cycle analysis, which improved our revenue cycle processing efficiencies, with complete electronic billing to all payers.

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CFO/Vice-President Finance, VNA of the Treasure Coast September 2009 – September 2010

- Project Management oversight for implementation of POC clinical & billing information system, including telephony and AP/GL sub-systems.
- Coordination of annual fiscal audit and filings for IRS Form 990 and CMS cost reports.
- Presentation of monthly operating results to Finance Committee and Board of Directors and sub agency boards.
- $30 million revenue agency over four sites, with Private Duty and inpatient Hospice House facility.

Key Accomplishments -

- Successful implementation of Homecare Homebase Point-Of-Care EMR system, with implementation & integration of telephony and Blackbaud AP/GL system.
- Interim leadership in the midst of a complete turnover of the Sr. leadership of the organization.

Chief Financial Officer, Franklin County Home Health Agency January 1995 – September 2009

- Responsible for all financial operations and reporting, information systems, payroll, A/R & billing, facilities, audits and presentation of operating results to Board of Directors; with former oversight of Human Resources.
- Develop and present the annual operating and capital budgets to management team and board of directors.
- Assist statewide Visiting Nurse Associations and state agencies with program implementation issues.
- Participate with state agencies and legislators in development and analysis of legislative

initiatives. Key Accomplishments –

- Prepared agency to be among the first providers in Region 1 to successfully submit claims under Medicare's newly implemented PPS system; within four days of transition date.
- Designed and implemented inaugural IT network, with implementations & upgrades to Point-Of-Care EMR clinical, billing and AP/GL applications.

EDUCATION:

- University of Vermont, Professional Certificate in Healthcare Leadership & Administration
- University of Vermont, Master of Business Administration/Forecasting concentration
- Lyndon State College, B.S. Business Administration/Accounting concentration
- Lyndon State College, A.S. Business Administration/Accounting concentration

ACTIVITIES/AWARDS:

Treasurer, Homecare, Hospice & Palliative Care Alliance of New Hampshire
Chair, VAHHA/VNAs of VT CFO Committee
President, Rotary Club of St. Albans, VT
Treasurer, St. Albans Rotary Club Home & Recreation Expo
Director, Northwestern Medical Center, Inc.
Vice-President, NMC Physician-Hospital Organization
Chair, Barlow Street Community Center Task Force
Alderman, St. Albans City Council
Trustee, St. Albans Free Public Library
Who's Who Among Students in American Colleges and Universities
Community Service Award, City of St. Albans, VT
US Lacrosse Collegiate Officials Council – District 1 & District 5
Canadian University Field Lacrosse Association Official
NCAA Collegiate Ice Hockey Official
National Ice Hockey Officials Association - Vermont Chapter
USA Level 4 Hockey Official
Secretary/Treasurer – Northern Vermont Youth Lacrosse
President, Vermont Lacrosse Officials Association
Certified Officials Trainer - US Lacrosse
Vermont Lacrosse Officials Education Director
Vermont Evaluation Program Coordinator – USA Hockey Officiating Program
Level 1 Certified Lifeguard

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PERSONAL INTERESTS:
Photography, Hunting, Alpine Skiing, Kayaking, Mountain Biking, Golf, Hiking, American Revolution History, Norman Rockwell

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Jennifer Brechtel

Profile

Experienced community health professional with 15+ years in leading health initiatives and fostering partnerships to improve access and outcomes in underserved communities. Expertise in strategic planning, policy development, and implementing evidence-based solutions to address health disparities. Skilled at driving health equity through collaboration with healthcare providers, government agencies, and local organizations.

Experience

DIRECTOR OF COMMUNITY HEALTH | GRANITE VNA | MARCH 2007 - PRESENT

- Develops and prioritizes strategies to advance community health initiatives across the agency and the communities served.
- Leads community health needs assessments and asset mapping; designs and manages outreach initiatives; tracks, measures, and reports program outcomes and impact.
- Represents the agency in external partnerships and forums on community health issues, fostering collaboration and advocating for the agency's mission.
- Engages in community-focused workgroups, coalitions, and initiatives, including conducting community needs assessments to drive mission-aligned efforts.
- Supervise, coach, and mentor community health program staff, providing continuous education and professional development to enhance team performance and program outcomes.
- Previous positions included Liaison, Community Health Coordinator, Community Benefit Manager.

OPERATIONS TRAINER II | ANTHEM BLUE CROSS BLUE SHIELD | JULY 2000 – MARCH 2007

- Provided training in all lines of business to customer service representatives.
- Designed and developed customer service training curriculum.
- Created and updated documentation used by customer service to resolve customer inquiries.
- The M.A.G.I.C.® of Customer Relations Certified Facilitator.
- Previous positions included Customer Service Representative, Researcher, and Performance Specialist.

Education

BACHELOR OF SCIENCE IN HEALTH EDUCATION: WELLNESS MANAGEMENT
MAY 2000 | PLYMOUTH STATE UNIVERSITY, PLYMOUTH NH

Certificates

- Certified Health Education Specialist (CHES)
- Master Trainer – "A Matter of Balance: Managing Concerns About Falls"
- Master Trainer "Chronic Disease Management Program (CDSMP)

References

References are available on request.

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Schelley Rondeau, R.N.

[redacted]

Experience:

School Nurse- Tuftonboro Central School K-6 **2021- present**

Responsible for student health

Pediatric Home Care Nurse/Home Visiting Nurse/Supervisor
Granite Visiting Nurses **2021- present**

Responsible for pediatric home care clients

MCH Coordinator/Pediatric Program Manager **2010-2021**
Central NH VNA and Hospice, Laconia & Wolfeboro, Inc., NH 03894.

Responsible for pediatric program administration and coordination as well as case management and home visiting according to MCH contract guidelines.

Home Health Nurse/Maternal Child Health Nurse **1997-2010**
VNA-Hospice of Southern Carroll County and Vicinity, Inc. Wolfeboro, NH 03894

Responsible for primary client care for home health patients, maternal-newborn visits, home visiting for Good Beginnings program, Child Health Program, collaborates with parent educator and community resources.

Responsible for Children and adults' immunization clinics

Intake Nurse **1995 - 1997**
VNA-Hospice of Southern Carroll County and Vicinity Wolfeboro, NH

Responsible for intake of new referrals, staff scheduling, case management and supervision of staff nurses

U.S. Army Staff Nurse, R.N. **1991-1995**
Gorgas Army Community Hospital, U.S. Canal Zone, Republic of Panama

Supervision and Staff Nurse on a Pediatric Ward

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Education and Awards

Bachelor's in Nursing Norwich University, Northfield, Vermont	**1982 -1986**
U.S. Army, Commander's Award for Public Service-	**June 1995**
Superior Performance Award from Gorgas Army Community Hospital	**June 1995**
Certified as Lactation Counselor	**1997-Present**
Certified in Parents as Teachers program	**2012-Present**
Certified in Growing Great Kids Program	**2012-Present**

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RYAN A. MARCHAND

MISSION

I'd like to empower community members and new parents through skill-building, resource connection, reflection, and evidence-based practices.

EXPERIENCE

Program Manager/Supervisor/FAW, Healthy Families America, BM-CAP - 2022-present

Oversees HFA program, ensuring our site follows and upholds up to date Best Practice Standards. I also supervise and provide guidance for one family support specialist with weekly reflective supervision. Additionally, I screen/enroll referrals using the FROG tool.

Family Support Specialist, Healthy Families America, BM-CAP – 2018-2022

As a Home visitor/FSS, I was responsible for building relationships with new and expecting parents in the area, as well as connecting them with community resources to promote a sense of confidence and build protective factors for participating families. I employed the Parents as Teachers curriculum during these visits.

EDUCATION

Lakes Region Community College, Laconia, NH — Computer Technologies, 2013 - 2015

Plymouth State University, Plymouth, NH — BA, Communications, 2007

SKILLS SUMMARY

- Familiarity with up to date HFA Best Practice Standards
- Records available for HFA FSS/FAW/FROG/Supervisory trainings
- Trauma-informed home visiting and motivational interviewing expertise
- Reflective Supervision experience with home visiting staff, nurturing professional growth
- Dependability, collaboration and friendliness as a baseline in home and work life
- Excellent time and resource management skills, flexible and pragmatic problem solving
- Administrative organization with special attention to confidentiality
- Course-backed Microsoft Office Suite expertise (Word, Excel, PowerPoint, Outlook, Access)

References available upon request

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Sarah Love

Skills

I am a passionate and dedicated life-long learner who values respectful communication, collaborative problem solving, authentic and joyful engagement. I am patient, adaptable and hard working. I love to weave my joy of gardening, cooking, exploring and singing with my sense of humor to create loving, engaging and meaningful moments and environments.

Experience

2021-Present

The Sandwich Children's Center, Sandwich NH - *Co-Director/Lead Toddler Teacher/Program Coordinator*

As Lead Toddler Teacher:

- Follows state DHHS/CCLU rules and regulations to maintain a physical and emotional safe space for all children and families
- Responsible for the creation of program philosophy and ensures it reflects best practices in foundations of early child development according to NAEYC
- Observes regularly in classrooms and serves as a role model and mentor in all aspects of interaction with children, families and staff
- Conducts home visits with all families in order to foster a respectful partnership to ensure each family and child are visible in the classroom
- Responsible for child observations, assessments and documentation of children's development and exploration according to Developmentally Appropriate Practice
- Partners with local school district professionals to conduct referrals to local resource agencies
- Works with all staff to create a reflective, respectful, professional and empowering ECE culture through weekly staff meetings, professional development days and daily communication

As Co-Director:

- Ensures the Center's adherence to all state and local health, safety, and licensing regulations to maintain a physical and emotional safe space for all children, families and staff.
- Responsible for operating the Center in accordance with the approved budget. Works with the bookkeeper to be sure all financial files and records are thorough, accurate, regularly maintained and up-to-date.
- Responsible for the daily operations of the program including budget, billing, health and safety practices, hiring, training, promoting, supervising and problem solving with staff in order to create an effective environment conducive of growth and learning.
- Establishes procedures for interviewing prospective families, enrolling students and providing financial aid information.
- Facilitates orientation and adjustment of all newly enrolled children and their families.
- Establishes open and warm relationships with families and community members. Responds to requests and concerns in a timely and respectful manner.

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- Maintains professional development plans, conducts annual reviews and reviews of policy handbooks.
- Attends bi-monthly Board of Directors meetings as an ex-officio member to maintain cohesive program philosophy and mission.
- Establish a culture of professionalism and commitment to best practices according to NAEYC competencies and code of ethics
- Executing the program's mission as well as developing and carrying out program policies and procedures that support that mission
- Advocates for all children being able to gain access to quality programming

2017-2020

Barton Family, Moultonboro NH - *Family Helper*

- Supporting parents in the home setting during caregiving routines for their infant and two toddlers.
- Errand running, grocery shopping
- Planning and preparing nutritious weekly meals
- Lite house keeping

2015-2020

Squam Lake Inn/Squam Lake Marketplace, Holderness NH-*Bar/Kitchen Manager*

- Leading front of the house/back of the house teams which included hiring and training new staff, ensuring staff complies with company policy and healthy/safety regulations.
- Managing inventory/finances
- Overseeing daily operations
- Ensuring customer satisfaction and handling conflicts
- Menu creation for daily operation as well as special events coordination
- Maintaining SERVSAFE certification
- Working with upper management to create a respectful, cooperative and positive work environment for customers and staff alike.

2008-2009

Sandwich Children's Center, Sandwich NH - *Afternoon Preschool Teacher*

- Supporting children during afternoon rest.
- Creating a safe and inclusive environment for children to explore and play.
- Age appropriate curriculum development and implementation.
- Forming partnerships with families in order to bridge home and school life.

Spring 2008

Cabrillo College Children's Center One's Classroom, Aptos CA - *Student Intern*

- Planning and implementing a balance of individual and group activities based on careful observation of each child's social, emotional, cognitive and physical needs.
- Conflict resolution techniques that promoted cooperation and empathy.
- Use of DAP (Developmentally Appropriate Practice) for assessing and observing children.
- Daily family check-ins and monthly family workshops.

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2004-2008

Tara Redwood School, Soquel CA-*Co-Teacher Multiage (3-5) Preschool Classroom*

- Utilized my extensive foundation of early childhood development to create a safe, predictable, respectful, age appropriate and inclusive preschool classroom that fostered each child's innate curiosity about the richly diverse physical world around them.
- Helped to cultivate a classroom culture rich in language, the sciences, art, music and movement that assisted children in feeling competent, valued, seen and heard.
- Created a curriculum for children that helped them to make connections to the natural world around them.
- Assisted in fostering the development of warm relationships between children, their caregivers and peers through meaningful dialogue, mindfulness exercises and respectful conflict resolution techniques.
- Assisted in making all families feel visible and honored by encouraging family participation in the classroom.
- Working with upper management to create a respectful, cooperative and positive work environment for customers and staff alike.

Education

2005-2008

Cabrillo College, Aptos CA - *AS Early Childhood Education*

Specialization Certificates

- Anti Bias Curriculum
- Working with Culturally Diverse Families
- Curriculum Planning
- Peace Education and Children's Literature

1997-2000

University of Southern Maine, Portland ME -*Undergraduate General Education*

Certifications/Licenses/Trainings

- State of California Family Day Care License Tara Redwood School 2011-2012
- UCSB Extension Montessori World Institute Certificate Sensorial and Practical Life
- UCSB Extension Montessori World Institute Certificate Pre K Math and Language
- UCSB Extension Montessori World Institute Certificate Beginner Math and Language
- Creating Compassionate Cultures Educator/Caregiver Training
- Attended RIE 2022 Annual Conference Online with keynote speaker Dr. Dana Suskind
- Attended webinar Creating Culturally Inclusive Family Programs with Antioch University and Unearthing Joy Together

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Betsy A Stipo

Objective - in pursuit of a position to apply skills used in education to a new opportunity

Work Experience

PITTSFIELD ELEMENTARY SCHOOL, Pittsfield, NH

-Title One Reading Teacher

Organize,plan and implement small lessons for emergent readers in Grades K-5

THE PAUL SCHOOL, Wakefield, NH

-Special Education Case Manager, January 2022 - June 2023

Implement and write IEPs

-ABA Tutor, February 2021-January 2022

Implement Applied Behavior Analysis techniques, run discrete trials, support autistic students as needed

MOULTONBOROUGH CENTRAL SCHOOL, Moultonborough, NH

-Special Education Paraprofessional, September 2019-November 2021

-Title One Teacher, November 2019-February 2021

Work with small groups in primary grades teaching reading strategies, developing sound/letter awareness

CRESCENT LAKE SCHOOL, Wolfeboro, NH

-Special Education Paraprofessional, September 2018-June 2019

OSSIPEE CENTRAL SCHOOL, Ossipee, NH

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-Special Education Paraprofessional, September 2017-June 2018

-5th Grade Teacher, November 2017-February 2018

Follow curriculum while teacher was on maternity leave.

Education
Centenary University, Hackettstown, NJ
B.S. Elementary Education and Psychology (May2001)

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Desiree A MacKinnon

Early Childhood Educator, Ma. Dept of EEC Certified for Director 1, Lead Preschool, Infant/Toddler Teacher, BA in Education and Home Visitor with twenty plus year of classroom experience,teacher management and parent and family engagement.

Experience

Sandwich Children's Center Sandwich NH — July 2022-Present

Preschool Co-Teacher in a play-based,child-led, nature-inspired classroom of children aged 3 to 5 years old

- Curriculum planning to enhance development and learning based on children interests and the five domains of early childhood education..
- Help children develop skills for social-emotional literacy and conflict resolution.
- Observe, document and Assess Children's Learning and Development.

Head Start Home Based Home Visitor — South Middlesex Opportunity Council — 2011-2022

In accordance with Head Start and Mass. EEC regulations, work directly with children and their families to support the school readiness of children aged three to five through social/emotional,cognitive,physical, language and literacy activities.

- Observe and record and assess children's development, using TSG.
- Create weekly individualized plans for children.
- Create bi monthly plans and implement in a classroom.
- Advocate for children and their families by meeting their individual needs.
- Strengthen family relationships and family involvement.

Parent-Child Home Program — Montachusett Opportunity Council — 2008-2011

- Educational enrichment program for children at home and for Family Day Care providers using books and toys.
- Develop and implement educational lesson plans.
- Model verbal interaction and learning to parents through reading and play with children aged 16 months to 4 years
- Model verbal interaction and learning to Family Day Care providers and children aged 0-7 years.

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MRO Integrated Solutions (Formally CSF Technologies and Praxair) 1998-2008

- Inside sales, customer service and warehouse technician
- Responsible for RFQ,RFP, creating sales orders, product sourcing, purchasing materials, maintain monthly and yearly material requirement inventory,manage product inquiries, receive shipments and enter data into inventory system using Excel and Word, daily shipping using UPS and Fed EX.

Tahanto Regional Middle High School Preschool program: substitute, 1993-1998

The Learning Center for Children Co-Founder, Owner, Teacher 1987-1990

- Group day care serving infants, toddlers and preschoolers
- Responsibilities include: Teacher for infant/toddler and preschool classrooms,hiring and managing of four professional staff,provide training and workshops,collaborate with staff to plan weekly curriculum, jointly administer the center by creating policies and procedures and prepare site for licensing..

Arlington Children's Center 1983-1986

- Lead Toddler Teacher
- Design and implement curriculum for children ages 2 -3 years old.
- Organize parent teacher conferences.
- Develop and plan staff meetings.
- Manage four teachers and six aides.
- Ensure two toddler classrooms were organized and operating per the centers guidelines.

Woburn Children's Center Team Teacher 1982-1983

- Team teaching approach a group of seven to nine toddlers.
- Curriculum planning and classroom organization
- Provide a safe learning environment.

Education

- Bachelor of Arts in Education UMass Amherst 1979-1982
- Mass. Bay Community College 1976-1978

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3/5 2:00pm

Maureen Paul

Objective

- To obtain a position with your organization utilizing my knowledge and experience as well as challenging my abilities.

Education

MEDICAL BILLING SPECIALIST | 1999 | HO HO KUS SCHOOL (EASTWICK COLLEGE)

- Medical billing and coding

CRIMINAL JUSTICE | 1991 | BERGEN COMMUNITY COLLEGE

- Criminology, Sociology

PHARMACY TECH CERTIFICATE | 2014 |

- Acquired through cross training and hands on experience while overseen by a licensed pharmacist.

Experience

ACCOUNTS PAYABLE & ACCOUNTS RECEIVABLE COORDINATOR |THE HOMEMAKERS HEALTH SERVICES, ROCHESTER NH | 2016-2018

- (AP) Weekly billing Medicare, Medicaid and Third Party Insurances, daily follow up on unpaid claims, maintained cash sheets, daily bank deposits, and maintained petty cash

(AR) Input weekly invoices, managed payables, assisted CFO with month end process,

BILLING SPECIALIST | LAKEVIEW NEURO REHAB, WOLFEBORO NH | 2011-2015

- Input charges, followed up on claims, managed client funds, assisted CFO with month end closing, collections, insurance verifications

MEDICAL BILLER | FRISBEE HOSPITAL, ROCHESTER NH | 2009-2011

- Input charges, followed up on claims, patient relations

MEDICAL BILLER AND RECEPTIONIST | PAUL DEMASI D.O., WOLFEBORO NH | 2003-2004

- Billing of Medicare, Medicaid and third party insurances, posted payments, insurance verifications, collections, scheduled patient appointments

MEDICAL BILLER | MERRIAM GRAVES MEDICAL, WOLEBORO NH | 2000-2003

- Billing of Medicare, Medicaid and third party insurances for two offices, posting of payments, tracking unpaid claims, insurance verifications, collections, coding durable medical equipment (CPT,ICD-9)

MEDICAL BILLING MANAGER | PRIME RECEIVABLES, ORADELL NJ | 1999-2000

- Managed billing for 13 physicians, managed a staff of 5 employees, billing and tracking of claims, posting payments

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MEDICAL BILLER AND RECEPTIONIST |ALEXANDER MAZZIOTTI MD, HAWTHORN NJ | 1998-1999

- Billing, collections, scheduling appointments for patients

MANAGER | COGER FARMS AND GARDEN CENTER INC, SADDLE BROOK NJ | 1989-1998

- Managed a staff of 5 employees, ordering and receiving, scheduling, payroll, billing, data entry, customer relations

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Heather Fritzky

Work Experience:

State of New Hampshire:

- **February 2006 – Present New Hampshire Retirement System, Assistant Director of Finance/Controller:**
  - Assist the Director of Finance with preparation and monitoring of NHRS' operating budget(s) that aligns with strategic plan and objectives
  - Provide cash forecasts for annuitant payroll, operational and investment cash
  - Recommend cost-savings and operational efficiencies for NHRS
  - Analyze results of actuarial valuation and coordinates actuarial activities in conjunction with the audit, Annual Comprehensive Financial Report (ACFR) and GASB reports
  - Supervises assigned staff including assessing training and development needs and management of workload and workflow
  - Implement and maintain effective internal controls
  - Responsible for employer reporting, posting of wages and contributions, reconciliation of discrepancies, processing billings, refunds, assessing delinquent penalties and reviewing waiver requests as appropriate
  - Oversee the completion and filing of the annual 945 IRS form
  - Responsible for preparing, processing and issuing of all 1099 forms to retirees, beneficiaries and vendors
  - Plan, coordinate and prepare the ACFR, GASB 68 and GASB 75 reports
  - Work directly with NHRS's external auditor to provide all necessary information to complete the annual financial & GASB audits
  - Implement all relevant and necessary GASB pronouncements, most recently GASB 67, 68, 72, 74 & 75
  - Oversee processing of all journal entries to account for the NHRS' trust fund using Microsoft Dynamics ($11.6 Billion-dollar trust fund)
  - Reporting monthly financial condition of trust fund to members and Board of Trustees using Microsoft Dynamics, management reporter and Microsoft Excel software
  - Responsible for planning, procurement, implementation and maintenance of financial software systems to meet organizational and reporting needs.
  - Responsible for all aspects of cash management including cash receipts and disbursements as well as establishing appropriate internal controls and policies
  - Provide all financial data necessary for the System's actuary to complete the valuation which is used to determine employer contribution rates for future years
  - Supply key financial information to the State of NH for input in their ACFR

- **June 2000- February 2006 New Hampshire Retirement System, Accountant:**
  - Assisted in preparation of Comprehensive Annual Financial Report (CAFR)
  - Processing journal entries to account for trust fund using Solomon VI ($6.1 Billion-dollar trust fund)
  - Reporting monthly and quarterly financial condition of trust fund to members and Board of Trustees using Pagemaker, FRX report writer and Microsoft Excel software
  - Provide all necessary information for financial audit to System's external auditors
  - Reconciling pension benefit system to general ledger
  - Reduced monthly reporting package for the Board of Trustees by 90 percent
  - Assisted in implementing GASB 34
  - Tracked contributions made and distributions received for all alternative investments using Microsoft Excel, 48 funds

- **November 1998-June 2000 Department of Administrative Services, Financial Reporting, Accountant I:**
  - Reconciled monthly activity for general fund, special fund, capital fund, fish & game, and highway fund
  - Produce the comprehensive annual financial report (CAFR) using pagemaker
  - Developed condensed monthly revenue report to be sent to Governor's Office, House and Senate leaders as well as other key state officials using pagemaker
  - Prepared CAFR and other interim reports for viewing on the state website using pagemaker and excel
  - Processed payment vouchers in the State's financial system
  - Processed required year end entries to facilitate fiscal year end closing

- **May 1995-November 1998 Department of Administrative Services, Business Office, Accounting Technician:**
  - Processed payments for all court facility expenditures using the State's financial system, 13 owned and 46 leased properties
  - Tracked and paid all capital expenditures for courthouses under construction, as many as 6 at one time
  - Processing and tracking leave time for all administrative service employees using the State's payroll system, 325 employees
  - Responsible for developing and inputting operating budget for court facilities using the State's financial system
  - Producing special reports as requested by administrator of court facilities or business supervisors

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Education:

2005 Bachelors' degree in Accounting Southern New Hampshire University, member of Delta Mu Delta honor society
2002 Certified Public Managers Program certificate, George S. Askew Award winner
2001 Associates degree in Business Administration with Specialization in Accounting, New Hampshire Technical Institute
1999 Certified Public Supervisors Program certificate

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NH Department of Health and Human Services

KEY PERSONNEL

List those primarily responsible for meeting the terms and conditions of the agreement.

Job descriptions not required for vacant positions.

Contractor Name: **Granite VNA, Inc.**

NAME	JOB TITLE	ANNUAL AMOUNT PAID FROM THIS CONTRACT	ANNUAL SALARY
Beth Slepian	President & CEO	$0.00	$398,777.08
James Manahan	CFO	$0.00	$244,800.14
Jennifer Brechtel	Director (HFA Program Manager)	$0.00	$97,624.28
Schelley Rondeau	HFA Supervisor	$68,874.00	$68,874.00
Ryan Marchand	Family Support Specialist	$53,560.00	$53,560.00
Sarah Love	Family Support Specialist	$53,560.00	$53,560.00
Betsy Stipo	Family Support Specialist	$53,040.00	$53,040.00
Desiree MacKinnon	Family Support Specialist	$39,780.00	$39,780.00
Heather Fritzky	Controller	$0.00	$117,291.00
Maureen Paul	Finance Specialist	$0.00	$57,449.00

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ARC

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH SERVICES

Lori A. Weaver
Commissioner

Iain N. Watt
Director

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

September 10, 2024

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into amendments to existing contracts with the Contractors listed below to continue providing home visiting services, by exercising contract renewal options by increasing the total price limitation by $16,911,354 from $9,788,971 to $26,700,325 and by extending the completion dates from September 30, 2024 to September 30, 2028, effective October 1, 2024, upon Governor and Council approval. 70% Federal Funds. 30% General Funds.

The individual contracts were approved by Governor and Council as specified in the table below.

Contractor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
Community Action Partnership of Stafford County Dover, NH	177200-B004	Rochester Catchment Area	$1,224,446	$2,131,968	$3,356,414	O: 2/8/23 Item #39
Granite VNA, Inc. Concord, NH	174069-R001	Conway and Laconia Catchment Areas	$1,065,241	$1,968,315	$3,033,556	O: 2/8/23 Item #39; A1: 6/14/23 Item #26; A2: 5/1/24 Item #18
The Family Resource Center at Gorham Gorham, NH	162412-B001	Berlin and Littleton Catchment Areas	$1,845,113	$2,904,538	$4,749,651	O: 2/8/23 Item #39; A1: 6/14/23 Item #27; A2: 5/1/24 Item #18
Waypoint Manchester, NH	177166-B002	Concord, Manchester, Seacoast and Southern Catchment Areas	$5,654,171	$9,906,533	$15,560,704	O: 2/8/23 Item #39; A1: 5/1/24 Item #18

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		Total:	**$9,788,971**	**$16,911,354**	**$26,700,325**	

Funds are available in the following accounts for State Fiscal Years 2025 and are anticipated to be available in State Fiscal Years 2026, 2027, 2028 and 2029, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details.

EXPLANATION

The purpose of this request is to allow the Contractors to continue providing voluntary home visiting services to pregnant individuals and families with children up to five (5) years of age within designated Division of Child, Youth, and Families (DCYF) catchment areas. In addition, the Contractor will pursue expansion of the program making it available to a broader population of families, including those already involved in New Hampshire's child welfare system.

The Contractors provide voluntary home visiting services utilizing the Healthy Families America (HFA) evidence-based Home Visiting model, its Child Welfare Protocols, and an approved Registered Nurse (RN) home visit model enhancement. The HFA model has shown to improve positive parenting practices, maternal and child health, school readiness, economic self-sufficiency and parental educational attainment, and to increase linkages and referrals to valuable community resources. In addition, families who participate in the HFA model experience less child maltreatment and family violence than their non-HFA counterparts. The HFA model is currently being provided in every county in New Hampshire.

Approximately 246 families will be served during State Fiscal Years 2025, 2026, 2027, 2028, and 2029.

As referenced in Exhibit A, Revisions to Standard Agreement Provisions, of the original agreements, the parties have the option to extend the agreements for up to four (4) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and Governor and Council approval. The Department is exercising its option to renew services for four (4) years of the four (4) years available.

Should the Governor and Executive Council not authorize this request, more than 200 families will experience a lapse in services that serve to prevent child abuse and neglect, family violence, and poor maternal and child health outcomes.

Source of Federal Funds: Assistance Listing Number (ALN) 93.870, FAIN X10MC50315; ALN 93.658, FAIN (FFPSA) 2301NHFOST

In the event that the Federal Funds become no longer available, additional General Funds will not be requested to support this program.

Respectfully submitted,

Lori A. Weaver
Commissioner

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Fiscal Detail Sheets
Home Visiting Services
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DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-3696 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, HOME VISITING FORMULA GNT
94% Federal Funds 6% General Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Assi and Rel	90083208	$192,620.00	$0.00	$192,620.00
2023	102-500731	Contracts for Program Services	90083208	$16,995.00	$0.00	$16,995.00
2024	074-500589	Grants for Pub Assi and Rel	90083210	$317,840.00	$0.00	$317,840.00
2025	074-500589	Grants for Pub Assi and Rel	90083210	$79,410.00	$0.00	$79,410.00
2025	074-500589	Grants for Pub Assi and Rel	90083211	$0.00	$238,230.00	$238,230.00
2026	074-500589	Grants for Pub Assi and Rel	90083211	$0.00	$60,598.00	$60,598.00
2026	074-500589	Grants for Pub Assi and Rel	90083212	$0.00	$181,793.00	$181,793.00
2026	102-500731	Contracts for Program Svcs	90005896	$0.00	$52,456.00	$52,456.00
2027	074-500589	Grants for Pub Assi and Rel	90083212	$0.00	$54,327.00	$54,327.00
2027	074-500589	Grants for Pub Assi and Rel	90083213	$0.00	$162,981.00	$162,981.00
2028	074-500589	Grants for Pub Assi and Rel	90083213	$0.00	$54,327.00	$54,327.00
2028	074-500589	Grants for Pub Assi and Rel	90083214	$0.00	$162,981.00	$162,981.00
2028	102-500731	Contracts for Program Svcs	90005896	$0.00	$45,028.00	$45,028.00
2029	074-500589	Grants for Pub Assi and Rel	90083214	$0.00	$54,327.00	$54,327.00
			SUBTOTAL:	$606,865.00	$1,067,048.00	$1,673,713.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Assi and Rel	90083208	$692,250.00	$0.00	$692,250.00
2024	074-500589	Grants for Pub Assi and Rel	90083210	$950,000.00	$0.00	$950,000.00
2024	102-500731	Contracts for Program Services	90005896	$54,682.00	$0.00	$54,682.00
2025	074-500589	Grants for Pub Assi and Rel	90083210	$237,500.00	$0.00	$237,500.00
2025	074-500589	Grants for Pub Assi and Rel	90083211	$0.00	$712,500.00	$712,500.00
2025	102-500731	Contracts for Program Services	90005896	$27,341.00	$0.00	$27,341.00
2026	074-500589	Grants for Pub Assi and Rel	90083211	$0.00	$230,356.00	$230,356.00
2026	074-500589	Grants for Pub Assi and Rel	90083212	$0.00	$691,068.00	$691,068.00
2026	102-500731	Contracts for Program Services	90005896	$0.00	$167,050.00	$167,050.00
2027	074-500589	Grants for Pub Assi and Rel	90083212	$0.00	$227,975.00	$227,975.00
2027	074-500589	Grants for Pub Assi and Rel	90083213	$0.00	$683,924.00	$683,924.00
2028	074-500589	Grants for Pub Assi and Rel	90083213	$0.00	$227,975.00	$227,975.00
2028	074-500589	Grants for Pub Assi and Rel	90083214	$0.00	$683,924.00	$683,924.00
2028	102-500731	Contracts for Program Services	90005896	$0.00	$172,818.00	$172,818.00
2029	074-500589	Grants for Pub Assi and Rel	90083214	$0.00	227,975.00	$227,975.00
			Subtotal:	$1,961,773.00	$4,025,565.00	$5,987,338.00

Fiscal Detail Sheets
Home Visiting Services
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Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$80,533.00	$0.00	$80,533.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$340,529.00	$0.00	$340,529.00
2024	102-500731	Contracts for Program Services	90005896	$6,667	$0.00	$6,667.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$85,311.00	$0.00	85,311.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$252,640.00	252,640.00
2025	102-500731	Contracts for Program Services	90005896	$3,333.00	$0.00	$3,333.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$60,326.00	$60,326.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$180,976.00	$180,976.00
2026	102-500731	Contracts for Program Services	90005896	$0.00	$34,869.00	$34,869.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$51,997.00	$51,997.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$155,991.00	$155,991.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$51,997.00	$51,997.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$155,991.00	$155,991.00
2028	102-500731	Contracts for Program Services	90005896	$0.00	$40,243.00	$40,243.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$51,997.00	$51,997.00
			Subtotal:	$516,373.00	$1,037,027.00	1,553,400.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$269,729.00	$0.00	$269,729.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$378,354.00	$0.00	$378,354.00
2024	102-500731	Contracts for Program Svcs	90005896	$33,571	$0.00	$33,571.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$92,583.00	$0.00	$92,583.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$277,749.00	$277,749.00
2025	102-500731	Contracts for Program Svcs	90005896	$25,179	$0.00	$25,179.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$117,573.00	$117,573.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$352,718.00	$352,718.00
2026	102-500731	Contracts for Program Svcs	90005896	$0.00	$57,079.00	$57,079.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$125,903.00	$125,903.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$377,707.00	$377,707.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$125,903.00	$125,903.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$377,707.00	$377,707.00
2028	102-500731	Contracts for Program Svcs	90005896	$0.00	$90,920.00	$90,920.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$125,903.00	$125,903.00
			Subtotal:	$799,416.00	$2,029,162.00	2,828,578.00
			TOTAL:	$3,884,227.00	$8,158,802.00	$12,043,029.00

05-95-92-920510-3382 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIVISION, BUREAU OF DRUG & ALCOHOL SVCS; GOVERNOR COMMISSION FUNDS
100% Other Funds

Waypoint - Vendor #177166-B002

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Fiscal Detail Sheets
Home Visiting Services
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State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	92057602	$108,000.00	$0.00	$108,000.00
			Subtotal:	$108,000.00	$0.00	$108,000.00
			TOTAL:	$108,000.00	$0.00	$108,000.00

05-95-90-902010-5890 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, MATERNAL - CHILD HEALTH,
100% General Funds

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	102-500731	Contracts for Program Svcs	90004019	$56,250.00	$0.00	$56,250.00
2024	102-500731	Contracts for Program Svcs	90004019	$75,000.00	$0.00	$75,000.00
2025	102-500731	Contracts for Program Svcs	90004019	$0.00		$0.00
			Subtotal:	$131,250.00	$0.00	$131,250.00
			TOTAL:	$131,250.00	$0.00	$131,250.00

05-95-09-901010-5771 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF HEALTHCARE ACCESS, EQUITY & POLICY, COVID-19 HEALTH DISPARITIES
100% Federal Funds

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577160	$105,000.00	$0.00	$105,000.00
2023	074-500589	Grants for Pub Asst and Relief	90577150	$157,500.00	$0.00	$157,500.00
			Subtotal:	$262,500.00	$0.00	$ 262,500.00

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577150	$15,000.00	$0.00	$15,000
2023	074-500589	Grants for Pub Asst and Relief	90577150	$101,512.00	$0.00	101,512.00
2024	074-500589	Grants for Pub Asst and Relief	90577150	$85,000.00	$0.00	$85,000
2024	074-500589	Grants for Pub Asst and Relief	90577150	$100,000.00	$0.00	100,000.00
			Subtotal:	$301,512.00	$0.00	301,512.00
			TOTAL:	$564,012.00	$0.00	$564,012.00

05-95-90-902010-2451-HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, ARP - MIEC HOME VISITING
100% Federal Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$17,532.00	$0.00	$17,532.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$54,231.00	$0.00	$54,231.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$13,558.00	$0.00	$13,558.00
			Subtotal:	$85,321.00	$0.00	$85,321.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$114,064.00	$0.00	$114,064.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$125,000.00	$0.00	$125,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$142,350.00	$0.00	$142,350.00
			Subtotal:	$381,414.00	$0.00	381,414.00

Granite VNA - Vendor #174060-R001

State Fiscal Year	Class / Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount

Fiscal Detail Sheets
Home Visiting Services
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2023	074-500589	Grants for Pub Asst and Rel	90083206	$72,591.00	$0.00	$72,591.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$8504.00	$0.00	$8,504.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$2130.00	$0.00	$2,130.00
			Subtotal:	$83,225.00	$0.00	$83,225.00

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$68,714.00	$0.00	$68,714.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$50,000.00	$0.00	$50,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$56,532.00	$0.00	$56,532.00
			Subtotal:	$175,246.00	$0.00	$175,246.00
			TOTAL:	$725,206.00	$0.00	$725,206.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-29580000, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD – FAMILY SERVICES
50% Federal Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504161	TITLE IV-E FOSTER CARE SERVICE	42105869	$199,673.00	$0.00	$199,673.00
2024	637-504161	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00	$0.00	$266,230.00
2025	637-504161	TITLE IV-E FOSTER CARE SERVICE	42105869	$66,557.00	$199,673.00	$266,230.00
2026	637-504161	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$266,230.00	$266,230.00
2027	637-504161	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$266,230.00	$266,230.00
2028	637-504161	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$266,230.00	$266,230.00
2029	637-504161	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$66,557.00	$66,557.00
			Subtotal:	$532,460.00	$1,064,920.00	$1,597,380.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504161	TITLE IV-E FOSTER CARE SERVICE	42105869	$125,960.00	$0	$125,960.00
2024	637-504161	TITLE IV-E FOSTER CARE SERVICE	42105869	$271,746.00	$0	$271,746.00
2025	637-504161	TITLE IV-E FOSTER CARE SERVICE	42105869	$67,937.00	$164,885	$232,822.00
2026	637-504161	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 232,822.00	$ 232,822.00
2027	637-504161	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 232,822.00	$ 232,822.00
2028	637-504161	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 232,822.00	$ 232,822.00
2029	637-504161	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 67,937.00	$ 67,937.00
			Subtotal:	$465,643.00	$931,288	$1,396,931.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504161	TITLE IV-E FOSTER CARE SERVICE	42105869	$164,133.00	$0	$164,133.00
2024	637-504161	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,845.00	$0	$218,845.00
2025	637-504161	TITLE IV-E FOSTER CARE SERVICE	42105869	$54,711.00	$164,133	$218,844.00
2026	637-504161	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 218,844.00	$ 218,844.00

Fiscal Detail Sheets
Home Visiting Services
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2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 218,844.00	$ 218,844.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 218,844.00	$ 218,844.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 54,711.00	$ 54,711.00
			Subtotal:	$437,689.00	$876,376	$1,313,065.00

Waypoint - Vendor #177100-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,102,682.00	$0.00	$1,102,682.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00	$0.00	$1,470,242.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$367,560.00	$1,102,682.00	$1,470,242.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$1,470,242.00	$1,470,242.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$1,470,242.00	$1,470,242.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$1,470,242.00	$1,470,242.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$367,560.00	$367,560.00
			Subtotal:	$2,940,484.00	$5,880,968.00	$8,821,452.00
			TOTAL:	$4,378,276.00	$8,752,552.00	$13,128,828.00

GRAND TOTAL:	$9,788,971.00	$16,911,354.00	$26,700,325.00

State of New Hampshire
Department of Health and Human Services
Amendment #3

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Granite VNA, Inc. ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item #39), as amended on June 14, 2023 (Item #26), and as amended on May 1, 2024 (Item #18), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37 General Provisions, Block 1.7, Completion Date, to read:

   September 30, 2028

2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $3,033,556

3. Modify Exhibit B, Scope of Services, Section 3.3., to read:

   3.3. The Contractor must service a portion of families utilizing the Healthy Families America (HFA) Child Welfare Protocols (CWP) in the Conway and Laconia DCYF Catchment Areas, which is attached as Attachment 1. Virtual home visits may also be accommodated, in compliance with HFA requirements. The Contractor must ensure families being served utilizing the CWP have an expanded enrollment window, allowing for enrollment of families with a child up to twenty-four (24) months of age, referred by the child welfare system, who are participating in the service voluntarily. The Contractor shall exhaust all reasonable efforts to serve sixteen (16) DCYF families in the Conway Catchment Area; serving no less than 70% of the identified number of families for this region before the end of the contract period. The Contractor shall exhaust all reasonable effort to serve thirty-two (32) DCYF families in the Laconia Catchment Area; serving no less than 70% of the identified number of families for this region before the end of the contract period.

4. Modify Exhibit B, Scope of Services, Section 3.5.4., read:

   3.5.4. Families with an open DCYF case who have recently reunified, or where the child remains at home with their family and not in an out-of-home placement.

5. Modify Exhibit B, Scope of Services, Section 3.7.1.2., to read:

   3.7.1.2. Have HFA CWP available in the Conway and Laconia DCYF Catchment Areas.

   3.7.1.2.1 Should the Contractor be unable to provide services through the HFA CWP, a corrective action plan must be developed by the Contractor and approved by the Department.

   3.7.1.2.1.1. In the event that the Contractor is unable to provide services using the CWP, the Contractor must enter into a subcontract or MOA with an approved, accredited HFA provider to provide this service, no later than thirty (30) business days from the date of discontinuation.

6. Modify Exhibit C, Payment Terms, Section 1 to read:

1. This Agreement is funded by:

1.1. 74.17% Federal funds from:

1.1.1. 65.26% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the United States Department of Health and Human Service (US DHHS), Health Resources and Services Administration (HRSA), Assistance Listing Number (ALN) 93.870; FAIN X10MC43595; and as awarded on September 2, 2022, FAIN X10MC46878; and as awarded on August 29, 2023, FAIN X10MC50315.

1.1.2. 3.70% American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the US DHHS, HRSA, ALN 93.870, FAIN X11MC41935; and as awarded on October 28, 2021, FAIN X11MC45263.

1.1.3. 31.04% Administration of Children Youth & Families (ACF), as awarded on October 1, 2022, by the US DHHS, ALN 93.658, FAIN 2201NHFOST.

1.2. 25.83% General funds.

7. Modify Exhibit C, Payment Terms, Section 7, to read:

7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement and shall be in accordance with the approved line items as specified in Exhibit C-1, Budget, SFY 2023 through Exhibit C-12, Budget, SFY 2029-Amendment #3.

8. Modify Exhibit C, Payment Terms, Section B, to read:

B. Payment Terms Respective to Child Welfare Protocols for the Division for Children, Youth and Families (DCYF) for direct services to Conway Catchment Region:

9. Modify Exhibit C, Payment Terms, Section 9.3., to read:

9.3. The Contractor cannot exceed the maximum allotment for weekly rate expenditure by Fiscal Year, which is as follows:

State Fiscal Year	Amount
SFY 2023	$24,867
SFY 2024	$58,024
SFY 2025	$111,455
SFY 2026	$116,411
SFY 2027	$116,411
SFY 2028	$116,411
SFY 2029	$33,969
Subtotal	**$577,548**

10. Modify Exhibit C, Payment Terms, Section 11.3 through 11.5, to read:

11.3. The Contractor cannot exceed the maximum allotment for weekly rate expenditure by Fiscal Year, which is as follows:

State Fiscal Year	Amount
SFY 2023	$16,533

SFY 2024	$93,590
SFY 2025	$121,368
SFY 2026	$116,411
SFY 2027	$116,411
SFY 2028	$116,411
SFY 2029	$33,969
Subtotal	**$614,693**

11.4. The Contractor shall submit non-clinical expenses via the Website: https://business.nh.gov/beb/PaQes/Index.asDx.

11.5. The Contractor must provide the services in Exhibit B, Scope, of Services, in compliance with funding requirements.

11. Modify Exhibit C-3, Budget (SFY 2025) – Amendment #2, by replacing it in its entirety with Exhibit C-3, Budget (SFY 2025) – Amendment #3, which is attached hereto and incorporated by reference herein.

12. Add Exhibit C-9, Budget (SFY 2026) – Amendment #3, which is attached hereto and incorporated by reference herein.

13. Add Exhibit C-10, Budget (SFY 2027) – Amendment #3, which is attached hereto and incorporated by reference herein.

14. Add Exhibit C-11, Budget (SFY 2028) – Amendment #3, which is attached hereto and incorporated by reference herein.

15. Add Exhibit C-12, Budget (SFY 2029) – Amendment #3, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment remain in full force and effect. This Amendment shall be effective October 1, 2024, upon.Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

9/6/2024
Date

DocuSigned by:
Iain Watt
D778BB63F9704C7...
Name: Iain Watt
Title: Director - DPHS

Granite VNA, Inc.

9/6/2024
Date

DocuSigned by:
Beth Slepian
97291852AAD240E...
Name: Beth Slepian
Title: President/CEO

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

9/10/2024
Date

DocuSigned by:
Robyn Guarino
748734844941460...
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

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Docusign Envelope ID: E7E67423-091B-4370-AC2F-6C3066490311

Exhibit C-3, Budget (SFY 2025) - Amendment # 3

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Formula Grant
Budget Period	7/1/24 - 6/30/25
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$230,881
2. Fringe Benefits	$46,844
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$1,607
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$100
5.(e) Supplies Office	$0
6. Travel	$10,000
7. Software	$6,826
8. (a) Other - Marketing/ Communications	$3,000
8. (b) Other - Education and Training	$7,500
8. (c) Other - Other (specify below)	$0
Other (please specify)	$3,500
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$310,258
Total Indirect Costs	$31,026
TOTAL	**$341,284**

Contractor Initial: BJS (DS)

Date: 9/6/2024

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Exhibit C-9, Budget (SFY 2026) - Amendment #3

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/25 - 6/30/26
Indirect Cost Rate (if applicable)	0.1
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$185,628
2. Fringe Benefits	$37,293
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$500
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$456
5.(e) Supplies Office	$0
6. Travel	$7,200
7. Software	$6,977
8. (a) Other - Marketing/ Communications	$2,000
8. (b) Other - Education and Training	$4,000
8. (c) Other - Other (specify below)	$0
Other (please specify)	$4,500
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$248,554
Total Indirect Costs	$27,617
TOTAL	$276,171

Contractor Initials: DS BJS

Date: 9/6/2024

Exhibit C-10, Budget (SFY 2027) - Amendment #3

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/26 - 6/30/27
Indirect Cost Rate (If applicable)	0.1
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$141,299
2. Fringe Benefits	$28,109
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$100
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$100
5.(e) Supplies Office	$0
6. Travel	$9,000
7. Software	$4,159
8. (a) Other - Marketing/ Communications	$118
8. (b) Other - Education and Training	$1,305
8. (c) Other - Other (specify below)	$0
Other (please specify)	$3,000
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$187,190
Total Indirect Costs	$20,798
TOTAL	$207,988

Contractor Initials: BJS (DS)

Date: 9/6/2024

Exhibit C-11, Budget (SFY 2028) - Amendment #3

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/27 - 6/30/28
Indirect Cost Rate (If applicable)	0.1
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$170,068.00
2. Fringe Benefits	$33,511.00
3. Consultants	$0.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0.00
5.(a) Supplies - Educational	$100.00
5.(b) Supplies - Lab	$0.00
5.(c) Supplies - Pharmacy	$0.00
5.(d) Supplies - Medical	$100.00
5.(e) Supplies Office	$0.00
6. Travel	$8,165.00
7. Software	$4,964.00
8. (a) Other - Marketing/ Communications	$500.00
8. (b) Other - Education and Training	$3,500.00
8. (c) Other - Other (specify below)	$0.00
Other (please specify)	$2,500.00
Other (please specify)	$0.00
Other (please specify)	$0.00
Other (please specify)	$0.00
9. Subrecipient Contracts	$0.00
Total Direct Costs	$223,408.00
Total Indirect Costs	$24,823.00
TOTAL	$248,231.00

Contractor Initials: BJS

Date: 9/11/24

Exhibit C-12, Budget (SFY 2029) - Amendment #3

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/28 - 9/30/28
Indirect Cost Rate (If applicable)	0.1
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$29,402.00
2. Fringe Benefits	$5,734.00
3. Consultants	$0.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0.00
5.(a) Supplies - Educational	$100.00
5.(b) Supplies - Lab	$0.00
5.(c) Supplies - Pharmacy	$0.00
5.(d) Supplies - Medical	$100.00
5.(e) Supplies Office	$0.00
6. Travel	$7,921.00
7. Software	$1,040.00
8. (a) Other - Marketing/ Communications	$0.00
8. (b) Other - Education and Training	$0.00
8. (c) Other - Other (specify below)	$0.00
Other (please specify)	$2,500.00
Other (please specify)	$0.00
Other (please specify)	$0.00
Other (please specify)	$0.00
9. Subrecipient Contracts	$0.00
Total Direct Costs	$46,797.00
Total Indirect Costs	$5,200.00
TOTAL	$51,997.00

Contractor Initials: BJS

Date: 9/11/24

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ARC

18

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH SERVICES

Lori A. Weaver
Commissioner

Jake N. Watt
Interim Director

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

March 12, 2024

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into **Sole Source** amendments to existing contracts with the Contractors listed below in bold to continue providing home visiting services, by increasing the total price limitation by $132,023 from $9,656,948 to $9,788,971 with no change to the contract completion dates of September 30, 2024, effective upon Governor and Council approval. 100% General Funds.

The individual contracts were approved by Governor and Council as specified in the table below.

Contractor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
Community Action Partnership of Strafford County Dover, NH	177200-B004	Rochester Catchment Area	$1,224,446	$0	$1,224,446	O: February 8, 2023, Item #39
Granite VNA, Inc. Concord, NH	**174069-R001**	**Conway Catchment Area**	**$1,055,241**	**$10,000**	**$1,065,241**	O: February 8, 2023, Item #39 A1: June 14, 2023, Item #26
The Family Resource Center at Gorham Gorham, NH	**162412-B001**	**Berlin and Littleton Catchment Areas**	**$1,605,113**	**$40,000**	**$1,645,113**	O: February 8, 2023, Item #39 A1: June 14, 2023, Item #27
Waypoint Manchester, NH	**177166-B002**	**Concord, Manchester, Seacoast& Southern Catchment Areas**	**$5,572,148**	**$82,023**	**$5,654,171**	O: February 8, 2023, Item #39
		Total:	$9,656,948	$132,023	$9,788,971	

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Funds are available in the following accounts for State Fiscal Years 2024 and 2025, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details.

EXPLANATION

This request is **Sole Source** to allow the Department to add funding to amend the scope of services for one (1) of the Contractors, The Family Resource Center at Gorham, to add a Family Engagement Specialist. In addition, the Department is adding funding to increase staffing allocations for the other two (2) Contractors for fiscal management and oversight activities.

The purpose of this request is to increase the number of families enrolled and retained in home visiting services in the North Country by The Family Resource Center at Gorham by supporting a Family Engagement Specialist position. The Family Engagement Specialist will engage new and existing referral partners and maintain community and family relationships. In addition, the funding will allow Granite VNA and Waypoint to support staffing for fiscal management to comply with added reporting requirements in the current contract year.

Approximately 357 families will be served during State Fiscal Years 2024 and 2025.

The Contractors provide voluntary home visiting services to pregnant individuals and families with children up to five (5) years of age, by utilizing the Healthy Families America (HFA) evidence-based Home Visiting model and its Child Welfare protocols. This nationally recognized model demonstrates positive outcomes for families in the areas of positive parenting practices, improved maternal and child health, improved school readiness, increased economic self-sufficiency and parental educational attainment, and increased linkages and referrals to valuable community resources. In addition, the HFA model has demonstrated a reduction in child maltreatment and family violence. HFA is currently being provided in every county in New Hampshire.

The Department will continue to monitor services through:

- Data reviews to evaluate capacity utilization, service delivery by region, and demographic data to ensure equitable provision of services.
- Quarterly data reviews of program performance across 19 federally defined performance measures.
- Quarterly review of data entered into model-specific tracking documents by the contractor to ensure fidelity to the requirements of the evidence-based model.
- Quarterly data reviews to ensure that at least seventy-five percent (75%) of expected home visits occur based upon the individual level of service to which each family is assigned.
- Annual sub-recipient monitoring site visits to ensure compliance with contract and model requirements, utilizing tools developed by the home visiting program and the Healthy Families America model.

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Should the Governor and Council not authorize this request, The Family Resource Center at Gorham will be unable to increase the number of families enrolled and retained in home visiting services in the North Country. In addition, Granite VNA and Waypoint will not have the ability to improve fiscal management and oversight activities.

Respectfully submitted,

Lori A. Weaver
Commissioner

Docusign Envelope ID: 20D3F45B-E562-41D0-891C-C24ABA9B619B

Docusign Envelope ID: E7E67423-091B-4370-AC2F-6C3066490311

Fiscal Detail Sheet
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-5885 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, HOME VISITING FORMULA GNT
96% Federal Funds 4% General Funds
Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$192,620.00	$0.00	$192,620.00
2023	102-500731	Contracts for Program Services	90083208	$16,995.00	$0.00	$16,995.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$317,640.00	$0.00	$317,640.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$79,410.00	$0.00	$79,410.00
			SUBTOTAL:	$606,665.00	$0.00	$606,665.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$692,250.00	$0.00	$692,250.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$950,000.00	$0.00	$950,000.00
2024	102-500731	Contracts for Program Services	90005896	$0.00	$54,882.00	$54,882.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$237,500.00	$0.00	$237,500.00
2025	102-500731	Contracts for Program Services	90005896	$0.00	$27,341.00	$27,341.00
			SUBTOTAL:	$1,879,750.00	$82,023.00	$1,961,773.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$80,533.00	$0.00	$80,533.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$340,529.00	$0.00	$340,529.00
2024	102-500731	Contracts for Program Services	90005896	$0	$8,887.00	$8,887.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$85,311.00	$0.00	$85,311.00
2025	102-500731	Contracts for Program Services	90005896	$0	$3,333.00	$3,333.00
			SUBTOTAL:	$506,373.00	$10,000.00	$510,373.00

The Family Resource Center at Gorham - Vendor #152412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$269,729.00	$0.00	$269,729.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$378,354.00	$0.00	$378,354.00
2024	102-500731	Contracts for Program Svcs	90005896	$0	$33,571.00	$33,571.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$92,583.00	$0.00	$92,583.00
2025	102-500731	Contracts for Program Svcs	90005896	$0	$25,179.00	$25,179.00
			SUBTOTAL:	$740,666.00	$58,750.00	799,416.00
			Total:	$3,733,454.00	$150,773.00	$3,884,227.00

05-95-92-920510-3382 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
BEHAVIORAL HEALTH DIVISION, BUREAU OF DRUG & ALCOHOL SVCS, GOVERNOR COMMISSION FUNDS
100% Other Funds
Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	92057502	$108,000.00	$0.00	$108,000.00
			SUBTOTAL:	$108,000.00	$0.00	$108,000.00
			TOTAL:	$108,000.00	$0.00	$108,000.00

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Docusign Envelope ID: E7E67423-091B-4370-AC2F-6C3066490311

Fiscal Detail Sheet
Home Visiting Services
RFP-2023-DFHS-01-HOMEV

05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, MATERNAL - CHILD HEALTH,
100% General Funds
Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	102-500731	Contracts for Program Svcs	90004010	$56,250.00	$0.00	$56,250.00
2024	102-500731	Contracts for Program Svcs	90004010	$75,000.00	$0.00	$75,000.00
2025	102-500731	Contracts for Program Svcs	90004010	$18,750.00	($18,750.00)	$0.00
			SUBTOTAL:	$150,000.00	($18,750.00)	$131,250.00
			TOTAL:	$150,000.00	($18,750.00)	$131,250.00

05-95-90-901010-5771 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF HEALTHCARE ACCESS, EQUITY & POLICY, COVID-19 HEALTH DISPARITIES
100% Federal Funds
Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577160	$105,000.00	$0.00	$105,000.00
2023	074-500589	Grants for Pub Asst and Relief	90577150	$157,500.00	$0.00	$157,500.00
			SUBTOTAL:	$262,500.00	$0.00	$ 262,500.00

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577150	$15,000.00	$0.00	$15,000
2023	074-500589	Grants for Pub Asst and Relief	90577150	$101,512.00	$0.00	101,512.00
2024	074-500589	Grants for Pub Asst and Relief	90577150	$85,000.00	$0.00	$85,000
2024	074-500589	Grants for Pub Asst and Relief	90577150	$100,000.00	$0.00	100,000.00
			SUBTOTAL:	$301,512.00	$0.00	301,512.00
			TOTAL:	$564,012.00	$0.00	$564,012.00

05-95-90-902010-2451-HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, ARP - MIEC HOME VISITING
100% Federal Funds
Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$17,532.00	$0.00	$17,532.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$54,231.00	$0.00	$54,231.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$13,558.00	$0.00	$13,558.00
			SUBTOTAL:	$85,321.00	$0.00	$85,321.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	074-500589	Grants for Pub Asst and Rel	90083206	$114,064.00	$0.00	$114,064.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$125,000.00	$0.00	$125,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$142,350.00	$0.00	$142,350.00
			SUBTOTAL:	$381,414.00	$0.00	$381,414.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class / Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$72,591.00	$0.00	$72,591.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$8504.00	$0.00	$8,504.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$2130.00	$0.00	$2,130.00
			SUBTOTAL:	$83,225.00	$0.00	$83,225.00

Family Resource Center at Gorham - Vendor #162412-B001

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Fiscal Detail Sheet
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$68,714.00	$0.00	$68,714.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$50,000.00	$0.00	$50,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$56,532.00	$0.00	$56,532.00
			SUBTOTAL:	$175,246.00	$0.00	$175,246.00
			TOTAL:	$725,206.00	$0.00	$725,206.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-29580000, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD – FAMILY SERVICES
50% Federal Funds
Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$199,673.00	$0.00	$199,673.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00	$0.00	$266,230.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$66,557.00	$0.00	$66,557.00
			SUBTOTAL:	$532,460.00	$0.00	$532,460.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$125,960.00	$0	$125,960.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$271,746.00	$0	$271,746.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$67,937.00	$0	$67,937.00
			SUBTOTAL:	$465,643.00	$0	$465,643.00

The Family Resource Center at Gorham - Vendor #152412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$184,133.00	$0	$184,133.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,845.00	$0	$218,845.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$54,711.00	$0	$54,711.00
			SUBTOTAL:	$437,689.00	$0	$437,689.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,102,682.00	$0.00	$1,102,682.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00	$0.00	$1,470,242.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$367,560.00	$0.00	$367,560.00
			SUBTOTAL:	$2,940,484.00	$0.00	$2,940,484.00
			TOTAL:	$4,376,276.00	$0.00	$4,376,276.00
			GRAND TOTAL:	$9,658,948.00	$132,023.00	$9,788,971.00

State of New Hampshire
Department of Health and Human Services
Amendment #2

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Granite VNA, Inc. ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item #39), as amended on June 14, 2023 (Item #26), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $1,065,241

2. Modify Exhibit C; Payment Terms, Section 1, to read:

   1. This Agreement is funded by:

      1.1. 77% Federal funds from:

         1.1.1. 10% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the United States Department of Health and Human Service (US DHHS), Health Resources and Services Administration (HRSA), Assistance Listing Number (ALN) 93.870, FAIN X10MC43595.

         1.1.2. 52% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 2, 2022, by the US DHHS, HRSA, ALN 93.870, FAIN X10MC46878.

         1.1.3. 9% American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the US DHHS, HRSA, ALN 93.870, FAIN X11MC41935.

         1.1.4. 1% American Rescue Plan Act Funding for Home Visiting, as awarded on October 28, 2021, by the US DHHS, HRSA, ALN 93.870, FAIN X11MC45263.

         1.1.5. 28% Administration of Children Youth & Families (ACF), as awarded on October 1, 2022, by the US DHHS, CFDA 93.658, FAIN 2201NHFOST.

      1.2. 23% General funds.

3. Modify Exhibit C-2, Budget (SFY 2024) – Amendment #1, by replacing it in its entirety with Exhibit C-2, Budget (SFY 2024) – Amendment #2, which is attached hereto and incorporated by reference herein.

4. Modify Exhibit C-3, Budget (SFY 2025) – Amendment #1, by replacing it in its entirety with Exhibit C-3, Budget (SFY 2025) – Amendment #2, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment remain in full force and effect. This Amendment shall be effective upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

3/21/2024
Date

DocuSigned by:
Iain Watt
Name: Iain Watt
Title: Interim Director - OPHS

Granite VNA, Inc.

3/12/2024
Date

DocuSigned by:
Beth Stepian
Name: Beth Stepian
Title: President/CEO

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

3/23/2024
Date

DocuSigned by:
Robyn Guarino
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

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Exhibit C-2, Budget (SFY 2024) - Amendment # 2

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Formula Grant
Budget Period	*SFY 2024* (G&C Approval - 06/30/2024)
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$136,043
2. Fringe Benefits	$38,620
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$14,950
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$4,500
5.(e) Supplies Office	$8,000
6. Travel	$38,000
7. Software	$17,026
8. (a) Other - Marketing/ Communications	$18,100
8. (b) Other - Education and Training	$33,000
8. (c) Other - Other (specify below)	$0
Other (please specify)	$3,000
Other (please specify)	$5,000
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$316,239
Total Indirect Costs	$30,957
TOTAL	**$347,196**

Contractor Initial: BJS

Date: 3/12/2024

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Exhibit C-3, Budget (SFY 2025) - Amendment # 2

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Formula Grant
Budget Period	*SFY 2025* (07/01/2024 - 09/30/2024)
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$31,798
2. Fringe Benefits	$8,799
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$4,000
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$2,000
5.(e) Supplies Office	$3,725
6. Travel	$4,000
7. Software	$4,263
8. (a) Other - Marketing/ Communications	$5,000
8. (b) Other - Education and Training	$15,000
8. (c) Other - Other (specify below)	$0
Other (please specify)	$2,000
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$80,585
Total Indirect Costs	$8,059
TOTAL	**$88,644**

Contractor Initial: BJS (OS)

Date: 3/12/2024

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH SERVICES

Lori A. Weaver
Interim Commissioner

Patricia M. Tilley
Director

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

May 30, 2023

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into a **Retroactive, Sole Source** amendment to an existing contract, which was originally competitively bid, with Granite VNA, Inc. (VC# 174069), Concord, NH, to add funding to support home visiting, involving care, coordination and outreach, by increasing the total price limitation by $594,177 from $461,064 to $1,055,241 with no change to the contract completion date of September 30, 2024, effective retroactive to April 1, 2023, upon Governor and Council approval. 80% Federal Funds. 20% General Funds.

The original contracts were approved by Governor and Council on February 8, 2023, item #39.

Funds are available in the following accounts for State Fiscal Year 2023, and are anticipated to be available in State Fiscal 2024 and 2025, upon availability and continued appropriation of funds in the future operating budget with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details.

EXPLANATION

The Department released two (2) Requests for Proposals for Home Visiting Services statewide but was not able to identify a contractor to serve the Laconia catchment area. The Department is therefore adding services and funding for the Laconia catchment area to the existing home visiting contract with Granite VNA, Inc. This request is **Retroactive** to April 1, 2023, to ensure there is no gap in services for the families in the catchment area. This request is **Sole Source** because the Department is increasing the price limitation by more than 10%. The Contractor was identified as willing to take on the additional service area and has established relationships, experience, staff, and knowledge necessary to ensure that Laconia families receive care without disruption.

The purpose of this request is to add funding to the existing contract for Granite VNA, Inc. to take on Home Visiting Services for the Laconia region.

The Contractor provides home visiting services to pregnant individuals, and families with children up to age five (5), by utilizing the evidence-based home visiting model from Healthy Families America and its' Child Welfare Protocols. This nationally recognized program demonstrates positive outcomes for families in the areas of positive parenting practices, improved

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maternal and child health, improved school readiness, increased economic self-sufficiency and parental educational attainment, and increased linkages and referrals to valuable community resources. This model has also demonstrated reduction in child maltreatment and family violence Healthy Families America is currently being provided in every County in New Hampshire.

Approximately 44 families will be served by Granite VNA through the Home Visiting program during State Fiscal Years 2023, 2024, and 2025.

The Department will continue to monitor services by:

- Conducting scheduled data reviews to evaluate capacity utilization, service delivery by region, and demographic data to ensure equitable provision of services.
- Conducting scheduled data reviews of program performance across 19 federally-defined performance measures.
- Reviewing data entered into model-specific tracking documents by each sub-contractor to ensure fidelity to the requirements of the evidence-teased model.
- Ensuring the proportion of families who receive at least seventy-five percent (75%) of the appropriate number of home visits based upon the individual level of service to which they are assigned.

Should the Governor and Executive Council not authorize this request, families in the Laconia region, which was identified as one of the state's highest areas of need in the most recent programmatic Need Assessment Update, will go unserved.

Source of Federal Funds: Assistance Listing Number # 93.870, FAIN # X1043595 / X1046878; Assistance Listing Number # 93.870, FAIN# X1141935 / X1145263; Assistance Listing Number # 93.658, FAIN# 2201NHFOST.

In the event that the Federal Funds become no longer available, additional General Funds will not be requested to support this program.

Respectfully submitted,

Lori A. Weaver
Interim Commissioner

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FISCAL DETAILS
HOME VISITING SERVICES - GRANITE VNA, INC.
AMENDMENT #1

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: PUBLIC HEALTH DIV, BUREAU OF COMM & HEALTH SERV, HOME VISITING FORMULA GNT,
100% FEDERAL, CFDA# 93.870, FAIN# X1043595; X1046878

Granite VNA - Vendor # 174069

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023 (10/1/22-6/30/23)	074-500589	Grants for Pub Assi and Rel	90083208	$80,533.00	$0.00	$80,533.00
2024 (7/1/23-6/30/24)	074-500589	Grants for Pub Assi and Rel	90083210	$109,446.00	$231,083.00	$340,529.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Assi and Rel	90083210	$27,540.00	$57,771.00	$85,311.00
			TOTAL	$217,519.00	$288,854.00	$506,373.00

05-95-90-902010-2451 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV, BUREAU OF COMM & HEALTH SERV, ARP - MIECHV HOME VISITING
100% FEDERAL FUNDS, CFDA# 93.870, FAIN# X1141935; X1146263

Granite VNA - Vendor # 174069

State Fiscal Year	Class / Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023 (10/1/22-6/30/23)	074-500589	Grants for Pub Assi and Rel	90083706	$11,452.00	$61,139.00	$72,591.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Assi and Rel	90083707	$0.00	$8,504.00	$8504.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Assi and Rel	90083707	$0.00	$2,130.00	$2130.00
			TOTAL	$11,452.00	$71,773.00	$83,225.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-047-421010-29580000, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD - FAMILY SERVICES
50% FEDERAL FUNDS, CFDA# 93.658, FAIN# 2201NHFOST

Granite VNA - Vendor # 174069

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023 (10/1/22-6/30/23)	537-504181	TITLE IV-E FOSTER CARE SERVICE	42105859	$87,035.00	$38,925.00	$125,960.00
2024 (7/1/23-6/30/24)	537-504181	TITLE IV-E FOSTER CARE SERVICE	42105859	$116,046.00	$155,700.00	$271,746.00
2025 (7/1/24-9/30/24)	537-504181	TITLE IV-E FOSTER CARE SERVICE	42105859	$29,012.00	$38,925.00	$67,937.00
			TOTAL	$232,093.00	$233,550.00	$465,643.00

COMBINED HOME VISITING SERVICES CONTRACT TOTAL	$461,064.00	$594,177.00	$1,055,241.00

Contractor Initials _

Date _

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State of New Hampshire
Department of Health and Human Services
Amendment #1

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Granite VNA, Inc. ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item # 39), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 17, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to increase the price limitation, and modify the scope of services to support continued delivery of these services; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $1,055,241

2. Modify Exhibit B, Scope of Services by replacing Subsections 3.3. & 3.4. with the below:

   3.3. The Contractor must service a portion of families utilizing the HFA Child Welfare Protocols (CWP) in the Conway and Laconia DCYF Catchment Areas, which is attached as Attachment 1. Virtual home visits may also be accommodated, in compliance with HFA requirements. The Contractor must ensure families being served utilizing the CWP have an expanded enrollment window, allowing for enrollment of families with a child up to twenty-four (24) months old, referred by the child welfare system, who are participating in the service voluntarily. For the Conway region, the Contractor must serve no less than three (3) DCYF families during the first six (6) months of the contract period and no less than four (4) families thereafter through the end of the contract period. For the Laconia region, the Contractor must serve no less than six (6) DCYF families during the first six (6) months of the contract period and no less than eight (8) families thereafter through the end of the contract period.

   3.4. The Contractor must serve fourteen (14) families in the Conway DCYF Catchment Area and thirteen (13) families in the Laconia DCYF Catchment Area under the traditional HFA model.

3. Modify Exhibit C, Payment Terms, Section 1, to read:

   1. This Agreement is funded by:

      1.1. 78% Federal Funds from:

         1.1.1. Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X10MG43595.

         1.1.2. Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 2, 2022, by the DHHS Health Resources and

Services Administration, CFDA 93.870, FAIN X10MC46878.

1.1.3. American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X11MC41935.

1.1.4. American Rescue Plan Act Funding for Home Visiting, as awarded on October 28, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X11MC45263.

1.1.5. Administration of Children Youth & Families (ACF), as awarded on October 1, 2022, CFDA 93.658, FAIN 2301NHFOST.

1.2. 22% General Funds.

4. Modify Exhibit C, Payment Terms, Section 7., to read:

7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line items, as specified in Exhibit C-1, Budget through Exhibit C-8, Budget (SFY 2025) – Amendment # 1.

5. Modify Exhibit C, Payment Terms, Subsection 9.2., by replacing with the below:

9.2. Payment shall be made on a monthly basis and follow a process determined by the Department, as indicated in Section 10.1., below.

6. Modify Exhibit C, Payment Terms, Subsection 10.1., by replacing with the below:

10.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line items, as specified in Exhibit C-5, DCYF Budget (SFY 2023) – Amendment # 1, and Exhibit C-6, DCYF Budget (SFY 2024) – Amendment # 1. The Maximum allotment for contract expenditures by Fiscal Year is as follows:

State Fiscal Year	Amount
2023	$62,168
2024	$58,022
2025	$0*
Sub-Total	$120,190
*The Contractor will only bill for direct services in SFY 25.	

7. Add Exhibit C, Payment Terms, Section D., to read:

D. Payment Terms Respective to Child Welfare Protocols for the Division for Children, Youth and Families (DCYF) for direct services to Laconia Catchment Region:

11. Payment shall be for services provided in fulfillment of this Agreement, as specified in Exhibit B Scope of Work Section 3.4, and in accordance with the following:

11.1. Weekly Rate: For the purposes of this Agreement, a weekly rate shall be paid in the amount of $148.95 per client (family) once per week.

11.2. Payment shall be made on a monthly basis and follow a process determined by the Department.

11.3. The Contractor cannot exceed the maximum allotment for weekly rate expenditure by Fiscal Year, which is as follows:

State Fiscal Year	Amount
2023	$16,533
2024	$93,590
2025	$38,925
Sub-Total	$149,148

1.1.5. The Contractor must provide the services in Exhibit B, Scope of Services, in compliance with funding requirements.

8. Add Exhibit C, Payment Terms, Section E., to read:

E. Payment Terms Respective to Child Welfare Protocols for the Division for Children, Youth and Families (DCYF) for administrative services to Laconia Catchment Region:

12. The Contractor shall submit an invoice with supporting documentation to the Department no later than the fifteenth (15th) working day of the month following the month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The Contractor shall ensure each invoice is completed, dated and returned to the Department in order to initiate payment.

12.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line items, as specified in Exhibit C-5, DCYF Budget (SFY 2023) – Amendment # 1, and Exhibit C-6, DCYF Budget (SFY 2024) – Amendment # 1. The Maximum allotment for contract expenditures by Fiscal Year is as follows:

State Fiscal Year	Amount
2023	$22,392
2024	$62,010
2025	$0*
Sub-Total	$84,402
* The Contractor will only bill for direct services in SFY 25.	

12.2. In lieu of hard invoice copies, all invoices may be assigned an electronic signature and emailed to DCYFInvoices@dhhs.nh.gov, or invoices may be mailed to:

Financial Manager

Department of Health and Human Services

129 Pleasant Street

Concord, NH 03301

12.3. The Contractor must provide the services in Exhibit B, Scope of Services, in compliance with funding requirements.

9. Modify Exhibit C-2 Budget, SFY 2024, by replacing in its entirety with Exhibit C-2, Budget (SFY 2024) – Amendment # 1, which is attached hereto and incorporated by reference herein.

10. Modify Exhibit C-3 Budget, SFY 2025, by replacing in its entirety with Exhibit C-3, Budget (SFY 2025) – Amendment # 1, which is attached hereto and incorporated by reference herein.

11. Modify Exhibit C-4 Budget, SFY 2023, by replacing in its entirety with Exhibit C-4, Budget (SFY 2023) – Amendment # 1, which is attached hereto and incorporated by reference herein.

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12. Modify Exhibit C-5 Budget, SFY 2023, by replacing in its entirety with Exhibit C-5, DCYF Budget (SFY 2023) – Amendment # 1, which is attached hereto and incorporated by reference herein.
13. Modify Exhibit C-6 Budget, SFY 2024, by replacing in its entirety with Exhibit C-6, DCYF Budget (SFY 2024) – Amendment # 1, which is attached hereto and incorporated by reference herein.
14. Add Exhibit C-7, Budget (SFY 2024) – Amendment # 1, which is attached hereto and incorporated by reference herein.
15. Add Exhibit C-8, Budget (SFY 2025) – Amendment # 1, which is attached hereto and incorporated by reference herein.

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All terms and conditions of the Contract not modified by this Amendment remain in full force and effect. This Amendment shall be effective retroactive to April 1, 2023, upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below.

State of New Hampshire

Department of Health and Human Services

5/30/2023

Date

DocuSigned by:
Patricia M. Tilley

Name: Patricia M. Tilley

Title: Director

Granite VNA, Inc.

5/30/2023

Date

DocuSigned by:
Geraldine Holmes

Name: Geraldine Holmes

Title: CFO

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The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

5/30/2023
Date

DocuSigned by:
Robyn Guarino
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

_____
Date

_____
Name:
Title:

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Exhibit C-2, Budget (SFY 2024) - Amendment # 1

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Formula Grant
Budget Period	SFY 2024 (07/01/2023 - 06/30/2024)
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$131,243
2. Fringe Benefits	$36,753
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$14,950
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$4,500
5.(e) Supplies Office	$8,000
6: Travel	$38,000
7. Software	$17,026
8. (a) Other - Marketing/ Communications	$18,100
8. (b) Other - Education and Training	$33,000
8. (c) Other - Other (specify below)	$0
Other (please specify)	$3,000
Other (please specify)	$5,000
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$309,572
Total Indirect Costs	$30,957
TOTAL	$340,529

Contractor Initial: GH (DS)

Date: 5/30/2023

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Exhibit C-3, Budget (SFY 2025) - Amendment # 1

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Formula Grant
Budget Period	*SFY 2025* (07/01/2024 - 09/30/2024)
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$29,349
2. Fringe Benefits	$8,218
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$4,000
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$2,000
5.(e) Supplies Office	$3,725
6. Travel	$4,000
7. Software	$4,263
8. (a) Other - Marketing/ Communications	$5,000
8. (b) Other - Education and Training	$15,000
8. (c) Other - Other (specify below)	$0
Other (please specify)	$2,000
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$77,555
Total Indirect Costs	$7,756
TOTAL	$85,311

Contractor Initial: GH (DS)

Date: 5/30/2023

Docusign Envelope ID: 20D3F45B-E562-41D0-891C-C24ABA9B619B

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Exhibit C-4, Budget (SFY 2023) - Amendment # 1

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	ARP - MIECH Home Visiting
Budget Period	SFY 2023 (10/01/2022 - 06/30/2023)
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$43,143
2. Fringe Benefits	$12,080
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$150
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$150
5.(e) Supplies Office	$100
6. Travel	$1,000
7. Software	$3,629
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$5,240
8. (c) Other - Other (specify below)	$0
Other (please specify)	$500
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$65,992
Total Indirect Costs	$6,599
TOTAL	$72,591

Contractor Initial: GH

Date: 5/30/2023

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Exhibit C-5, DCYF Budget (SFY 2023) - Amendment # 1

New Hampshire Department of Children, Youth and Families	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services, Child-Family Services
Budget Period	*SFY 2023* (10/01/2022 - 06/30/2023)
Indirect Cost Rate (if applicable)	8%

Line Item	Program Cost - Funded by DCYF
1. Salary & Wages	$16,102
2. Fringe Benefits	$4,509
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$0
6. Travel	$0
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$0
8. (c) Other - Other (specify below)	$0
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$20,611
Total Indirect Costs	$1,781
TOTAL	$22,392

Contractor Initial: GH

Date: 5/30/2023

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Exhibit C-6, DCYF Budget (SFY 2024) - Amendment # 1

New Hampshire Department of Children, Youth and Families	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services, Child-Family Services
Budget Period	*SFY 2024* (07/01/2023 - 06/30/2024)
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DCYF
1. Salary & Wages	$43,143
2. Fringe Benefits	$12,080
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$0
6. Travel	$0
7. Software	$1,150
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$0
8. (c) Other - Other (specify below)	$0
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$56,374
Total Indirect Costs	$5,636
TOTAL	**$62,010**

Contractor Initial: GH (ps)

Date: 5/30/2023

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Exhibit C-7, Budget (SFY 2024) - Amendment # 1

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	ARP - MIECH Home Visiting
Budget Period	SFY 2024 (07/01/2023 - 06/30/2024)
Indirect Cost Rate (if applicable)	4%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$7,201
2. Fringe Benefits	$0
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$1,000
5.(e) Supplies Office	$0
6. Travel	$0
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$0
8. (c) Other - Other (specify below)	$0
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$8,201
Total Indirect Costs	$303
TOTAL	$8,504

Contractor Initial: GH

Date: 5/30/2023

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Exhibit C-8, Budget (SFY 2025) - Amendment # 1

New Hampshire Department of Health and Human Services	
Contractor Name:	Granite VNA, Inc.
Budget Request for:	ARP - MIECH Home Visiting
Budget Period	*SFY 2025* (07/01/2024 - 09/30/2024)
Indirect Cost Rate (If applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$1,436
2. Fringe Benefits	$0
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$500
5.(e) Supplies Office	$0
6. Travel	$0
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$0
8. (c) Other - Other (specify below)	$0
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$1,936
Total Indirect Costs	$194
TOTAL	**$2,130**

Contractor Initial: DS GH

Date: 5/30/2023

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ARC
39

Lori A. Weaver
Interim Commissioner

Patricia M. Tilley
Director

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

December 29, 2022

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, and the Division of Children, Youth and Families, to enter into Retroactive contracts with the contractors listed below in an amount not to exceed $8,647,771 to provide home visiting services, with the option to renew for up to four (4) additional years, effective retroactive to October 1, 2022, upon Governor and Council approval through September 30, 2024. 73.67% Federal Funds. 25.11% General Funds. 1.22% Other Funds.

Contractor Name	Vendor Code	Area Served*	Contract Amount
Community Action Partnership of Strafford County	177200-B004	Rochester Catchment Area	$1,224,446
Granite VNA, Inc.	177244-B002	Conway Catchment Area	$481,064
The Family Resource Center at Gorham	162412-B001	Berlin and Littleton Catchment Areas	$1,590,113
Waypoint	177166-B002	Concord, Manchester, Seacoast and Southern Catchment Areas	$5,572,148
		Total:	$8,647,771

* Note the Department did not receive vendor responses for some areas of the state and is currently in the process of re-soliciting for those remaining regions to ensure statewide coverage.

Funds are available in the following accounts for State Fiscal Year 2023, and are anticipated to be available in State Fiscal Years 2024 and 2025, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

Because the Bridges System is used to process and monitor payments for these agreements, no purchase order number is assigned. The New Hampshire First System will not be used to encumber these funds. Depending on the eligibility of the client, funding type is determined at the time of the payment.

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See attached fiscal details.

EXPLANATION

This request is Retroactive to avoid any interruption in these services and to allow for continuity of care for families in these regions. This was a complex procurement collaboratively sought by the Division of Public Health Services and the Division for Children, Youth and Families with multiple funding sources. The Department needed additional time to confirm funding details and finalize the contracts and therefore did not have executed contracts in time to present to Governor and Council to prevent the previous contracts from expiring.

The purpose of this request is to provide home visiting services to pregnant individuals, and families with children up to age five (5), by utilizing the evidence-based home visiting model from Healthy Families America and its' Child Welfare Protocols. This nationally recognized program demonstrates positive outcomes for families in the areas of positive parenting practices, improved maternal and child health, improved school readiness, increased economic self-sufficiency and parental educational attainment, and increased linkages and referrals to valuable community resources. This model has also demonstrated reduction in child maltreatment and family violence. Healthy Families America is currently being provided in every County in New Hampshire. The purpose of this request is to ensure continuity of services, while supporting expansion of the program, making it available to a broader population of families, including those involved in New Hampshire's child welfare system.

Approximately 354 individuals will be served during State Fiscal Years 2023, 2024, and 2025.

The Division of Public Health Services will monitor services by:

- Conducting monthly, quarterly, and annual data reviews to evaluate capacity utilization, service delivery by region, and demographic data to ensure equitable provision of services.
- Conducting quarterly and annual data reviews of program performance across 18 federally-defined performance measures.
- Reviewing data entered into model-specific tracking documents by each sub-contractor to ensure fidelity to the requirements of the evidence-based model.

The Division for Children, Youth, and Families will monitor services using the following performance measures:

[1] HFA Evidence of Effectiveness 2022 Website.pdf (healthyfamiliesamerica.org)

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- Referrals
  - Share of families who are referred to Healthy Families America form Division for Children, Youth and Families. (Number of families currently enrolled in Healthy Families America Child Welfare Protocols and percentage of Healthy Families America Child Welfare Protocol slots currently used.)
  - Share of Division for Children, Youth and Families-referred families that were enrolled between three (3) and twenty-four (24) months of age.
  - Share of Division for Children, Youth and Families-referred families with a recent assessment of a Substance Exposed Infant.
- Enrollments
  - Average time to enrollment from the time and date of referral.
  - Number of days from referral date to the first home visit.
  - Share of families that are offered Healthy Family America and percentage of offered families who decide to receive Healthy Family America.
  - Proportion of families that are retained in the program over specified periods of time, (3 months, 6 months, and every 6 months thereafter) after receiving a first home visit.
  - Proportion of families who receive at least seventy-five percent (75%) of the appropriate number of home visits based upon the individual level of service to which they are assigned.
- Program Completion
  - Share of families who do not complete the program, including, reason for non-completion and/or discharge.
  - Share of families that discharged who completed a minimum of specified periods of service. (Starting at 6 months, and every 6 months thereafter up until 36 months of service.)
- Short-term Outcomes
  - Share of families with a new case opened to the Division for Children, Youth and Families, or a new report of maltreatment, within 6 months after discharge.
  - Share of children who enter out-of-home placement within 6 months after discharge, including breakdown of placement type.
  - Share of children who enter any form of out-of-home placement within 12 months of discharge.
  - Differences in outcomes outlined above (i.e., prevention of out of home removal, decreases in risk/needs) by racial/ethnic and geographic characteristics.

The Department selected the contractors through a competitive bid process using a Request for Proposals (RFP) that was posted on the Department's website from June 29, 2022 through August 2, 2022. The Department received four (4) responses that were reviewed and scored by a team of qualified individuals. The Scoring Sheet is attached.

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As referenced in Exhibit A, of the attached agreements, the parties have the option to extend the agreements for up to four (4) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties, and Governor and Council approval.

Should the Governor and Council not authorize this request over 200 New Hampshire families will experience a lapse in preventive services they've come to depend on, leaving vulnerable families without access to proven support for preventing child abuse and neglect, family violence, low birth weight, maternal depression, and developmental delays.

Source of Federal Funds: Assistance Listing Number # 93.870, FAIN # X1043595, X1046878, X1145263; Assistance Listing Number # 93.658, FAIN # (FFPSA) 2201NHFOST; and Assistance Listing Number # 93.391, FAIN # NH75OT000031

In the event that the Federal or Other Funds become no longer available, additional General Funds will not be requested to support this program.

Respectfully submitted,

Lori A. Weaver
Interim Commissioner

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FISCAL DETAIL SHEET

SFY 22, 24 & 25 HOME VISITING SERVICES CONTRACTS

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-5936 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: PUBLIC HEALTH DIV, BUREAU OF COMM & HEALTH SERV, HOME VISITING FORMULA GNT

100% FEDERAL CFDA 093.870 FAIN # X1043595, X1046878

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$182,620.00
2023 (10/1/22 - 6/30/23)	102-500731	Contracts for Program Services	90083208	$16,995.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$317,540.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$79,410.00
			SUBTOTAL:	$600,565.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$592,250.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$950,000.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$237,500.00
			SUBTOTAL:	$1,879,750.00

[redacted] - Vendor #177244-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$80,533.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$109,446.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$27,540.00
			SUBTOTAL:	$217,519.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$269,720.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$378,354.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$92,583.00
			SUBTOTAL:	$740,656.00
			Total of AU 5896	$3,444,600.00

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05-95-92-920510-3382 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIVISION, BUREAU OF DRUG & ALCOHOL SVCS, GOVERNOR COMMISSION FUNDS

100% OTHER FUNDS

Waypoint - Vendor 0177166-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023	074-500589	Grants for Pub Asst and Rel	92057502	$108,000.00
			SUBTOTAL:	$108,000.00
			TOTAL OF AU 3382	$108,000.00

05-95-90-902010-5180 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC BUREAU OF COMM & HEALTH SERV, MATERNAL - CHILD HEALTH, HEALTH DIV

100% GENERAL FUNDS

Family Resource Center at Gorham - Vendor #182412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	102-500731	Contracts for Program Svcs	90004019	$56,250.00
2024 (7-1-23-6/30/24)	102-500731	Contracts for Program Svcs	90004019	$75,000.00
2025 (7/1/24-9/30/24)	102-500731	Contracts for Program Svcs	90004019	$18,750.00
			SUBTOTAL:	$150,000.00
			TOTAL OF AU 5180	$150,000.00

05-95-90-901010-5771 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF POLICY & PERFORMANCE, PH COVID-19 HEALTH DISPARITIES

100% FEDERAL FUNDS CFDA #93.391 FAIN#NH75OT000031

Waypoint - Vendor 0177166-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Relief	90577160	$105,000.00
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Relief	90577150	$157,500.00
			SUBTOTAL:	$262,500.00

Family Resource Center at Gorham - Vendor #182412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Relief	90577150	$86,512.00
			SUBTOTAL:	$86,512.00
			TOTAL OF AU 5771	$349,012.00

05-95-90-902010-2451 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV, BUEAU OF COMM & HEALTH SERV, ARP - MIEC HOME VISITING 100% FEDERAL FUNDS CFDA #93.870, FAIN# X1141935 & X1145263

Community Action Partnership of Strafford County - Vendor #177200-B004				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$17,532.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$54,231.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$13,558.00
			SUBTOTAL:	$85,321.00

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Waypoint - Vendor #177158-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083206	$114,064.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$125,000.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$142,350.00
			SUBTOTAL:	$381,414.00

[redacted]				
State Fiscal Year	Class / Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083206	$11,452.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$0.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$0.00
			SUBTOTAL:	$11,452.00

Family Resource Center at Gorham - Vendor #162412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083206	$68,714.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$50,000.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$56,532.00
			SUBTOTAL:	$175,246.00
			TOTAL OF AU 2451	$653,433.00

DPHS SUBTOTAL: $4,705,045.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-2958, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD – FAMILY SERVICES
50% FEDERAL CFDA 093.658 FAIN B 2201NHFOST

Community Action Partnership of Strafford County - Vendor #177200-B004				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	537-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$199,673.00
2024 (7-1-23-6/30/24)	537-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00
2025 (7/1/24-9/30/24)	537-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$66,557.00
			SUBTOTAL:	$532,460.00

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State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$87,035.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$116,048.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$29,012.00
			SUBTOTAL:	$232,095.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$164,133.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,845.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$54,711.00
			SUBTOTAL:	$437,689.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,102,682.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$367,560.00
			SUBTOTAL:	$2,940,484.00
			Total of AU 2958	$4,142,726.00

DCYF SUBTOTAL: $4,142,726.00

COMBINED HOME VISITING SERVICES CONTRACT TOTAL:	**$8,847,771.00**

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New Hampshire Department of Health and Human Services
Division of Finance and Procurement
Bureau of Contracts and Procurement
Scoring Sheet

Project ID # RFP-2023-DPHS-01-HOMEV

Project Title Home Visiting Services

	Maximum Points Available	Community Action Partnership of Strafford County	Granite VNA, Inc.	The Family Resource Center at Gorham	Waypoint
Technical					
Experience	20	23	24	20	20
Organizational Capacity	35	30	30	33	29
Performance Improvement	25	20	22	24	24
Subtotal - Technical	80	73	76	87	83
Cost					
Budget Sheet (Appendix F & F-1)	5	3	3	4	3
Program Staff List (Appendix G)	5	3	3	4	4
Subtotal - Cost	10	6	6	8	7
TOTAL POINTS	100	81	81	95	89
TOTAL PROPOSED VENDOR COST		$1,064,870	$854,168	$1,780,714	$3,640,958

Reviewer Name	Title
1 Caytlen Smith	Administrator II, Finance
2 Lisa Cecchini (Lampron)	Administrator II, DPHS Finance
3 Kristi Hart	Program Specialist IV, DPHS
4 Ashley Jones	Program Specialist IV, DCYF
5 Kelly McCormick	Assessment Supervisor IV, DCYF
6 Aurelia Moran	Supervisor V, DPHS

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FORM NUMBER P-37 (version 12/11/2019)

Subject: Home Visiting Services / RFP-2023-DPHS-01-HOMEV-02

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 Health and Human Services		1.2 State Agency Address 129 Pleasant Street Concord, NH 03301-3857	
1.3 Contractor Name Granite VNA, Inc.		1.4 Contractor Address 30 Pillsbury Street, Concord, NH 03301	
1.5 Contractor Phone Number 603-515-2465	1.6 Account Number 05-095-090-902010-5896 05-095-090-902010-2451 05-095-042-421010-2958	1.7 Completion Date 9/30/2024	1.8 Price Limitation $461,064.00
1.9 Contracting Officer for State Agency Robert W. Moore, Director		1.10 State Agency Telephone Number (603) 271-9631	
1.11 Contractor Signature Beth Slepian Date: 1/5/2023		1.12 Name and Title of Contractor Signatory Beth Slepian President/CEO	
1.13 State Agency Signature Patricia M. Tilley Date: 1/5/2023		1.14 Name and Title of State Agency Signatory Patricia H. Tilley Director	
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: Paige Gunino.		On: 1/5/2023	
1.17 Approval by the Governor and Executive Council *(if applicable)* G&C Item number:		G&C Meeting Date:	

Contractor Initials BJS
Date 1/5/2023

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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 as indicated in block 1.17, 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. 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 affected 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. 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, 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 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. The State shall have no liability to the Contractor other than the contract price.

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 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.

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. 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 race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3. 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 all rules, regulations and orders, and 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 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

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Date 3/5/2025

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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) days from the date of the notice; and if the Event of Default is not timely cured, terminate this Agreement, effective two (2) 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.

8.3. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

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) 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) 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. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT B. In addition, at the State's discretion, the Contractor shall, within 15 days of notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement.

10. DATA/ACCESS/CONFIDENTIALITY/ PRESERVATION.

10.1 As used in this Agreement, the word "data" shall mean all 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 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data 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 The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice, which shall be provided to the State at least fifteen (15) days prior to the assignment, and a written consent of the State. For purposes of this paragraph, 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.

12.2 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State. 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. Unless otherwise exempted by law, the Contractor shall indemnify and hold harmless the State, its officers and employees, from and against any and all claims, liabilities and costs for any personal injury or property damages, patent or copyright infringement, or other claims asserted against the State, its officers or employees, which arise out of (or which may be claimed to arise out of) the acts or omissions of the

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Date 12/5/2023

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Contractor, or subcontractors, including but not limited to the negligence, reckless or intentional conduct. 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 sovereign immunity of the State, 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 his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than ten (10) days prior to the expiration date of each insurance policy. The certificate(s) of insurance and any renewal(s) 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 his or her 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. 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, to a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

17. 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.

18. CHOICE OF LAW AND FORUM. This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. 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. Any actions arising out of this Agreement shall be brought and maintained in New Hampshire Superior Court which shall have exclusive jurisdiction thereof.

19. CONFLICTING TERMS. In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and/or attachments and amendment thereof, the terms of the P-37 (as modified in EXHIBIT A) shall control.

20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

21. 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.

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

23. 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.

24. 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.

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Date 1/5/2023

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New Hampshire Department of Health and Human Services
Home Visiting Services

EXHIBIT A

Revisions to Standard Agreement Provisions

1. Revisions to Form P-37, General Provisions

1.1. Paragraph 3, Subparagraph 3.1, Effective Date/Completion of Services, is amended as follows:

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 as indicated in block 1.17, this Agreement, and all obligations of the parties hereunder, shall become effective October 1, 2022, ("Effective Date").

1.2. Paragraph 3, Effective Date/Completion of Services, is amended by adding subparagraph 3.3 as follows:

3.3. The parties may extend the Agreement for up to four (4) additional years from the Completion Date, contingent upon satisfactory delivery of services, available funding, agreement of the parties, and approval of the Governor and Executive Council.

1.3. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.3 as follows:

12.3. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions. The Contractor shall have written agreements with all subcontractors, specifying the work to be performed, and if applicable, a Business Associate Agreement in accordance with the Health Insurance Portability and Accountability Act. Written agreements shall specify how corrective action shall be managed. The Contractor shall manage the subcontractor's performance on an ongoing basis and take corrective action as necessary. The Contractor shall annually provide the State with a list of all subcontractors provided for under this Agreement and notify the State of any inadequate subcontractor performance.

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New Hampshire Department of Health and Human Services
Home Visiting Services

EXHIBIT B

Scope of Services

1. Introduction

1.1. The Contractor must provide services in accordance with Department requirements and the Healthy Families America (HFA) program, which is designed to reduce the risk of child maltreatment by strengthening parent-child relationships, promoting healthy childhood growth, and enhancing family functioning and protective factors. Families enroll voluntarily with HFA, and meet regularly with a Family Support Specialist and receive services tailored to their needs.

HFA is both culturally-inclusive and trauma-informed, and teaches parents about healthy child development and appropriate activities for keeping their child(ren) healthy and thriving. The Contractor must provide services to assist in:

- Increasing caregivers' ability to build attachments with their child(ren);
- Creating foundations for nurturing relationships;
- Enhancing family functioning through reducing risk and increasing protective factors; and
- Developing connections to additional resources, which include, but are not limited to:
  - Housing.
  - Food.
  - Various forms of treatment.
  - School readiness.
  - Childcare.
  - Access to diapers and other supplies.

1.2. The Department, through this Agreement, seeks to assess needs more holistically, and to create crucial linkages across systems that touch vulnerable populations to seamlessly connect them to supports and enhance available services at all levels of needs. The Department's Division of Public Health Services (DPHS) in conjunction with the Division for Children, Youth and Families (DCYF) are collaborating their efforts to achieve this goal. The Contractor must provide services using the HFA program to children and families on behalf of both Divisions.

1.3. For the purposes of this Agreement, all references to day(s) mean Monday through Friday, business days, excluding state and federal holidays.

2. Key Definitions & Terminology

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2.1. **Begin Date of Services** –The date the Contractor initiated contact with the client/family, and corresponds with the date listed as "begin date of services" on the Division for Children, Youth and Families (DCYF) Service Authorization Form.

2.2. **CPS** – Child Protective Services.

2.3. **CQI** – Continuous Quality Improvement.

2.4. **Cultural Humility** – Maintaining a willingness to suspend what you know, or what you think you know, about a person based on generalizations about their culture. Rather what you learn about a participant's culture stems from being open to what they themselves have determined is their personal expression of their heritage and culture.

2.5. **CWP** – Child Welfare Protocols.

2.6. **DCYF** – Division for Children, Youth and Families.

2.7. **DHHS** – Department of Health and Human Services.

2.8. **DPHS** – Division of Public Health Services.

2.9. **DO** – District Office.

2.10. **Face-to-face** – An in-person or virtual interaction or home visit (defined below) following the date on which the referral was made in which a provider begins working with the families to deliver HFA.

2.11. **FFPSA** – Family First Prevention Services Act.

2.12. **FTE** – Full time equivalent is a figure calculated from the number of full-time and part-time employees in an organization that represents these workers as a comparable number of full-time employees.

2.13. **GGK** – Growing Healthy Kids is a user friendly and truly comprehensive strength-based approach to growing nurturing parent-child relationships and supporting healthy childhood development.

2.14. **HFA** – Healthy Families America.

2.15. **HFA model** – A well-supported practice that provides home visiting designed to work with families who may have histories of trauma, intimate partner violence, mental health challenge, and/or substance use disorders. HFA services are delivered voluntarily, intensively, and over the long-term.

2.16. **HFA BPS** – Healthy Families America Best Practice Standards.

2.17. **HFA CWP model** – A set of protocols that requires the existing model requirements be provided, while offering additional guidance related to enrollment, caseload management, and establishing a formal MOU with child welfare in order to best serve families. Services are offered for a minimum of three years, regardless of the age of the child at intake, and supports families

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with children through age five, which allows sites to enroll families referred by child welfare up to age twenty-four months.

2.18. **HRSA** – Health Resource and Services Administration is the primary Federal agency for improving access to health care services for people who are uninsured, isolated, or medically vulnerable and the funding source of the MIECHV.

2.19. **MIECHV** – Maternal, Infant and Early Childhood Home Visiting – a program that supports pregnant individuals and families and helps at-risk parents of children from birth to kindergarten entry to tap the resources and hone the skills they need to raise children who are physically, socially and emotionally healthy and ready to learn.

2.20. **MOU/MOA** – Memorandum of Understanding/Memorandum of Agreement – a written agreement between two (2) parties to provide certain services.

2.21. **Open Assessment** – Any report of concern received by DCYF that is screened in by DCYF's central intake, and is being investigated by child protection staff.

2.22. **Open Case** – Any case opened to DCYF, including community-based/internal voluntary cases.

2.23. **Out-of-Home Placement** – The removal of a child from their normal place of residence to reside in a court-ordered substitute care setting under the placement and care responsibility of DCYF.

2.24. **PAT** – Parents As Teachers – a foundational curriculum used as an approach to working with families that is relationship-based and parenting-focused.

2.25. **PII** – Personally Identifiable Information.

2.26. **QA** – Quality Assurance.

2.27. **Virtual Home Visit** - A home visit, as described in an applicable service delivery model that is conducted solely by the use of electronic information and telecommunications technologies.[1]

2.28. **Well-supported practice** – An evidence-based service that has at least two (2) contrasts, with non-overlapping samples in studies carried out in usual care or practice settings that achieve a rating of moderate or high on design and execution and demonstrate favorable effects in a target outcome domain. At least one (1) of the contrasts must demonstrate a sustained favorable effect of at least 12 months beyond the end of treatment on at least one (1) target outcome.

3. Statement of Work

3.1. The Contractor must provide face-to-face voluntary home visiting services to

[1] Text - H.R.133 - 116th Congress (2019-2020): Consolidated Appropriations Act, 2021 | Congress.gov | Library of Congress

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pregnant individuals and families with children up to age five (5) by utilizing the evidence-based home visiting model from HFA.

3.2. The Contractor must ensure a minimum of 80% of families served using the traditional HFA model are enrolled in services prenatally or by when the child is 3-months old. The Contractor must offer services in compliance with HFA requirements after enrollment. Eligible families for traditional HFA services (as managed by the Division of Public Heather Services) must fall within one (1) or more of the federally defined priority populations below:

3.2.1. Are first-time parents.

3.2.2. Have income of less than one hundred eighty-five percent (<185%) of the U.S. Department of Health and Human Services (USDHHS) Poverty Guidelines.

3.2.3. Are less than twenty-one (21) years of age.

3.2.4. Have a history of child abuse or neglect, or have had interactions with child welfare services.

3.2.5. Have a history of substance misuse or need substance use disorder treatment.

3.2.6. Are users of tobacco products in the home.

3.2.7. Have or have had a child(ren) with low student achievement.

3.2.8. Have a child(ren) with developmental delays or disabilities.

3.2.9. Are in families that include individuals who are serving or have formerly served in the armed forces.

3.3. The Contractor must service a portion of families utilizing the HFA Child Welfare Protocols (CWP) in the Conway DCYF Catchment Area, which is attached as Attachment 1. Virtual home visits may also be accommodated, in compliance with HFA requirements. The Contractor must ensure families being served utilizing the CWP have an expanded enrollment window, allowing for enrollment of families with a child up to twenty-four (24) months old, referred by the child welfare system, who are participating in the service voluntarily. The Contractor must serve no less than three (3) DCYF families during the first six (6) months of the contract period and no less than four (4) families thereafter through the end of the contract period.

3.4. The Contractor must serve fourteen (14) families in the Conway DCYF Catchment Area under the traditional HFA model.

3.5. Eligible families for HFA CWP services must fall within one (1) of more of the following DCYF FFPSA priority populations:

3.5.1. Pregnant or parenting youth in foster care.

3.5.2. Families with an infant born exposed to substances.

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3.5.3. Families assessed by DCYF where the assessment will be closed unfounded.

3.5.4. Families with an open DCYF case who have recently reunified.

3.6. The Contractor must provide services with the goal of reducing risk of maltreatment for children assessed by the DCYF by:

3.6.1. Serving families involved with DCYF through open assessments or open cases, and also beyond their DCYF involvement.

3.6.2. Strengthening parent-child relationships.

3.6.3. Promoting healthy childhood growth.

3.6.4. Enhancing family functioning and protective factors both during and beyond their DCYF involvement with a long-term outcome goal of decreasing future system involvement and the need for out-of-home placement.

3.7. The Contractor must provide services that address the diverse needs of children and families in order to improve health and development outcomes for priority populations through evidence-based home visiting programs, with fidelity to the HFA model BPS. The Contractor must:

3.7.1. Be approved through the HFA model to provide services under this Agreement. The Contractor must:

3.7.1.1. Be approved through HFA, to implement the HFA CWP, which allows enrollment into HFA for DCYF referred families up to twenty-four (24) months of age.

3.7.1.2. Have HFA CWP available in the Conway DCYF Catchment Area within six (6) months of Governor and Executive Council approval of this Agreement.

3.7.1.2.1 Should the Contractor be unable to begin providing services through the HFA CWP by the date specified above, a corrective action plan must be developed by the Contractor and approved by the Department.

3.7.1.2.1.1. In the event that the HFA National Office denies the Contractor use of the CWP, the Contract must develop a subcontract or MOA with an approved, accredited HFA provider to provide this service, no later than thirty (30) business days from the date of the denial.

3.7.2. Select and implement an evidence-based curriculum to support

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prenatal individuals and newly parenting families. Family Support Specialists (FSS) must be trained within six (6) months of hire on the following:

3.7.2.1. Parents as Teachers (PAT), as an annually trained "Approved user;" or

3.7.2.2. Growing Great Kids (GGK) with certification of training.

3.7.3. Collaborate with other early childhood and social service agencies to support linkages to services beneficial to families.

3.7.4. Ensure the twelve (12) critical elements that make up the essential components of the HFA model are addressed in agency policies.

3.7.5. Enter personally identifiable information (PII) for all participants served under this Agreement into the Department's designated Home Visiting Data System.

3.8. The Contractor must identify positive ways to establish relationships with each family and keep families engaged and connected over time, as participants may be reluctant to engage in services and may have difficulty building trusting relationships. The Contractor must use creative outreach strategies, such as Motivational Interviewing, to re-engage families who have disengaged.

3.9. The Contractor must adhere to HFA's site requirements by ensuring weekly individual supervision is received by all direct service staff.

3.10. The Contractor must provide monthly reflective consultation groups for direct service staff and supervisors with a skilled Infant Mental Health consultant.

3.11. The Contractor must offer home visits by licensed nurses (registered nurse (RN) or greater education level) during the prenatal and post-partum periods at a frequency of once per trimester prenatally, and once per quarter during the first year post-partum.

3.12. The Contractor must offer services that are comprehensive and focus on supporting the parent/caregiver, as well as supporting the parent-child interaction and child development. Additionally, all families must be linked to a medical provider and other services, as appropriate.

3.13. The Contractor must obtain all necessary authorizations for release of information. All forms developed for authorization for release of information must be made available for review by the Department during site visits for selected case reviews.

3.14. The Contractor must coordinate, where possible, with other local service providers including, but not limited to:

3.14.1. Health care providers.

3.14.2. Social workers.

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3.14.3. Social services.

3.14.4. Early interventionists.

3.15. The Contractor must develop and maintain an advisory group comprised of community partners, family participants, and agency staff with a wide range of skills and abilities, including representatives with diverse skills, strengths, community knowledge, professions, and cultural diversity. The Contractor must:

3.15.1. Promote equity in all facets of operations with families, staff, and community.

3.15.2. Maintain policy or other written guidance expressing the Contractor's commitment to respectful staff interactions and supporting staff to continually strengthen their relational skills focused on diversity, equity, and inclusion.

3.15.3. Gather information to reflect on and better understand issues impacting staff and families served and to examine the effectiveness of its equity strategies.

3.15.4. Develop an equity plan based on what it learns about itself, from an equity perspective, in the way it supports its staff, the families it serves, and the community it works within to set a course for continuous improvement to achieve greater equity in all facets of its work.

3.16. The Contractor must evaluate the progress of each program participant, as well as the performance of programs and services provided.

3.17. The Contractor must ensure that they:

3.17.1. Collaborate with relevant DCYF staff and related stakeholders when a valid release of information has been signed or a subpoena has been issued by the court.

3.17.2. Make reports to DCYF Central Intake if they suspect child abuse or neglect, consistent with their responsibility, as mandated reporters under New Hampshire law.

3.18. The Contractor must actively and regularly collaborate monthly, with both Divisions, to enhance contract management, improve results, and adjust program delivery and policy, based on successful outcomes.

3.19. Compliance Standards

3.19.1. The Contractor must offer services to all families referred by the Department unless that family is identified as ineligible for HFA under model specifications and requirements.

3.19.2. The Contractor must ensure referrals are accepted from multiple

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sources within the child welfare system including, but not limited to:

3.19.2.1. DCYF Juvenile Justice Services.

3.19.2.2. DCYF Child Protective Services (CPS).

3.19.3. The Contractor must adhere to all specifications and requirements, in compliance with NH DCYF's 5-year prevention plan and the Family First Prevention Service Act (FFPSA), for HFA CWP cases, including but not limited to:

3.19.3.1. All data reporting;

3.19.3.2. Record keeping and retention;

3.19.3.3. Fiscal compliance;

3.19.3.4. Maintenance of an evidence-based program identified as well-supported through the Title IV-E Clearinghouse;

3.19.3.5. Documented prevention type on the DCYF service authorization (which will be completed by the Department); and

Submitting a completed prevention plan every twelve (12) months for every DCYF- referred family. DCYF staff will complete the initial prevention plan for families, and the Contractor must update the plans at the 12-month mark and annually. The Department will distribute associated guidance after DCYF's 5-year plan is reviewed and approved.

3.19.4. The Contractor must collaborate with the Department to ensure that all program policies, procedures, and documents align with NH DCYF and DPHS policies, NH state law, and Department needs.

3.19.5. The Contractor must identify staff responsible for submitting reports and data to the Department within 30 days of the Agreement effective date.

3.20. Staffing:

3.20.1. The Contractor must follow all HFA Essential and Safety standards for staffing, hiring, training, and supervision, as outlined in HFA BPS.

3.20.2. The Contractor must ensure HFA home visiting staff have at least a high school diploma or equivalent, experience providing services to families, and knowledge of child development. Supervisors and Program Managers must have at least a Bachelor's degree with three (3) years prior experience.

3.20.3. The Contractor must ensure FSSs receive extensive training in the program model before delivering the service and on a recurring basis.

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Training must comply with all HFA model specifications and requirements, including but not limited to:

3.20.3.1. Attending a four-day core training that is specialized based on role (assessors, home visitors, and supervisors).

3.20.3.2. Supervisors attending one (1) additional day for the core training and an optional three (3) days of training that focuses on building reflective supervision skills.

3.20.3.3. Program managers are required to attend core training plus three (3) days of training focused on how to implement the model to fidelity using the HFA BPS.

3.20.4. The Contractor must ensure additional available training is beneficial to the staff in delivering HFA. Training and conferences topics must include but are not limited to:

3.20.4.1. Substance use.

3.20.4.2. Childhood Maltreatment (Abuse/Neglect).

3.20.4.3. Parenting techniques.

3.20.4.4. Cultural competence/humility.

3.20.4.5. Childhood and generational trauma (Trauma-Informed).

3.20.4.6. Engagement strategies.

3.20.5. The Contractor must ensure each Family Support Specialist (FSS) maintains a caseload of no more than ten (10) to twelve (12) families per 1 FTE for the first two (2) years of employment and no more than fifteen (15) to twenty (20) families per one (1) FTE after completing 24 months of employment for traditional HFA; and no more than ten (10) to twelve (12) families at any time for HFA CWP. These caseload maximums shall be prorated per HFA requirements for staff with less than 40 hours per week dedicated to the role of FSS.

3.21. The Contractor must maintain HFA accreditation and follow all BPS related to hiring, staffing levels, training, and supervision among other components of the model.

3.22. Discharge from HFA services:

3.22.1. The Contractor must develop a discharge plan for each family, beginning at the time of admission and continuing throughout service.

3.22.2. The Contractor must not discharge any family referred by the Department without following a protocol specified by the Department.

3.23. Extending HFA services:

3.23.1. The Contractor must offer HFA Services to the child and family for a

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minimum of three (3) years in total.

3.24. Reporting

3.24.1. The Contractor must complete a Monthly Capacity Analysis Report, which is attached as Attachment 2 on a form provided by the Department. This document must be submitted to DPHS no later than the 15th of each month, containing the prior month's data.

3.24.2. The Contractor, on a quarterly (January, April, July, and October) and annual (October) basis, must submit to DCYF:

3.24.2.1. Form 1, which is attached as Attachment 3.

3.24.2.2. Form 2, which is attached as Attachment 4.

3.24.3. The Contractor may be required to provide new data reporting requirements, or other key data and metrics including client-level demographic, performance, and service data to the Department in a format specified by the Department.

3.25. Background Checks

3.25.1. For all Contractor employees, interns, volunteers, and any subcontractor employees, interns, and volunteers providing services under this Agreement, the Contractor must, at its own expense, after obtaining a signed and notarized authorization form the individual(s) for whom information is being sought:

3.25.1.1. Submit the person's name for review against the Bureau of Elderly Adult Services (BEAS) state registry maintained pursuant to RSA 161-F:49;

3.25.1.2. Submit the person's name for review against the Division for Children, Youth and Families (DCYF) center registry pursuant to RSA 169-C:35;

3.25.1.3. Complete a criminal records check to ensure that the person has no history of:

3.25.1.3.1. Felony conviction; or

3.25.1.3.2. Any misdemeanor conviction involving:

3.25.1.3.2.1. Physical or sexual assault;

3.25.1.3.2.2. Violence;

3.25.1.3.2.3. Exploitation;

3.25.1.3.2.4. Child pornography;

3.25.1.3.2.5. Threatening or reckless conduct;

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3.25.1.3.2.6. Theft;

3.25.1.3.2.7. Driving under the influence of drugs or alcohol; or

3.25.1.3.2.8. Any other conduct that represents evidence of behaviors that could endanger the well-being of any individual served under this Agreement; and

3.25.2. Unless approval is granted by the Department, the Contractor must not permit any employee, volunteer, intern, or subcontractor to provide services under this Agreement until the Contractor has confirmed:

3.25.2.1. The individual's name is not on the BEAS state registry;

3.25.2.2. The individual's name is not on the DCYF central registry;

3.25.2.3. The individual does not have a record of a felony conviction; or

3.25.2.4. The individual does not have a record of any misdemeanors as specified above.

3.26. Confidential Data

3.26.1. The Contractor must meet all information security and privacy requirements as set by the Department and in accordance with the Department's Exhibit K, DHHS Information Security Requirements.

3.26.2. The Contractor must ensure any staff and/or volunteers involved in delivering services through this Agreement, sign an attestation agreeing to access, view, store, and discuss Confidential Data in accordance with federal and state laws and regulations and the Department's Exhibit K. The Contractor must ensure said individuals have a justifiable business need to access confidential data. The Contractor must provide attestations upon Department request.

3.26.3. Upon request, the Contractor must allow the Department to conduct a Privacy Impact Assessment (PIA) of its system. To conduct the PIA the Contractor must provide the Department access to applicable systems and documentation sufficient to allow the Department to asses, at minimum, the following:

3.26.3.1. How PII is gathered and stored;

3.26.3.2. Who will have access to PII;

3.26.3.3. How PII will be used in the system;

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3.26.3.4. How individual consent will be achieved and revoked and

3.26.3.5. Privacy practices.

3.26.4. The Department may conduct follow-up PIAs in the event there are either significant process changes or new technologies impacting the collection, processing or storage of PII.

3.27. Contract End-of-Life Transition Services

3.27.1. If applicable, upon termination or expiration of the Agreement, the Parties agree to cooperate in good faith to effectuate a smooth secure transition of the services from the Contractor to the Department and, if applicable, the Contractor engaged by the Department to assume the services previously performed by the Contractor for this section the new Contractor shall be known as ("Recipient"). Ninety (90) days prior to the end-of the contract or unless otherwise specified by the Department, the Contractor must begin working with the Department and if applicable, the new Recipient to develop a Data Transition Plan (DTP) on a template provided by the Department.

3.27.2. The Contractor must use reasonable efforts to assist the Recipient, in connection with the transition from the performance of Services by the Contractor and their Affiliates to the performance of such Services. This may include assistance with the secure transfer of records (electronic and hard copy), transition of historical data (electronic and hard copy), the transition of such Service from the hardware, software, network and telecommunications equipment and Internet-related information technology infrastructure ("Internal IT Systems") of Contractor to the Internal IT Systems of the Recipient and cooperation with an assistance to any third-party consultants engaged by Recipient in connection with the Transition Services.

3.27.3. If a system, database, hardware, software, and/or software license ("Tools") was purchased or created to manage, track, and/or store State Data in relationship to this Contract, said Tools will be inventoried and returned to the Department, along with the inventory document, once transition of State Data is complete.

3.27.4. The internal planning of the Transition Services by the Contractor and its Affiliates must be provided to the Department and if applicable, the Recipient in a timely manner. Any such Transition Services must be deemed to be Services for purposes of this Contract.

3.27.5. Should the Data Transition extend beyond the end of the Contract, the Contractor and its Affiliates agree Contract Information Security Requirements, and if applicable, the Department's Business Associates Agreement terms and conditions remain in effect until the Data Transition is accepted as complete by the Department.

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3.27.6. In the event where the Contractor has comingled Department Data and the destruction of Transition of said data is not feasible, the Department and Contractor will jointly evaluate regulatory and professional standards for retention requirements prior to destruction.

3.28. Website and Social Media

3.28.1. Contractor agrees that if performance of services on behalf of the Department involves using social media or a website to solicit information of individuals, or Confidential data, the Contractor must work with the Department's Communication Bureau to ensure that any social media or website designed, created, or managed on behalf of the Department meets all of the Department's and NH Department of Information Technology's website and social media requirements and policies.

3.28.2. Contractor agrees that protected health information (PHI), personal identifiable information (PII), or other confidential information solicited either by social media or the website that is maintained, stored or captured must not be further disclosed, unless expressly provided in the Contract. The solicitation or disclosure of PHI, PII, or other confidential information is subject to the Information Security Requirements Exhibit, the Business Associates Agreement Exhibit and all applicable state rules and state and federal laws. Unless specifically required by the Contract and unless clear notice is provided to users of the website or social media, the Contractor agrees that site visitation will not be tracked, disclosed or used for website or social medial analytics or marketing.

3.29. Performance Measures

3.29.1. For services provided for DPHS, the Department will monitor Contractor performance by reviewing indicated reporting requirements on Form 1, which is attached as Attachment 3, and Form 2, which is attached as Attachment 4, and working with the Contractor to select areas to improve upon utilizing CQI strategies through a data driven process.

3.29.2. For services provided for DCYF, the Department will focus on specific data points collected through its internal data systems, monthly, quarterly and annual submissions via email, and existing HFA data collection reports on DCYF Key Performance Metrics, which are attached as Attachment 5.

4. Exhibits Incorporated

4.1. The Contractor must use and disclose Protected Health Information in compliance with the Standards for Privacy of Individually Identifiable Health

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information (Privacy Rule) (45 CFR Parts 160 and 164) under the Health Insurance Portability and Accountability Act (HIPAA) of 1996, and in accordance with the attached Exhibit I, Business Associate Agreement, which has been executed by the parties.

4.2. The Contractor must manage all confidential data related to this Agreement in accordance with the terms of Exhibit K, DHHS Information Security Requirements.

4.3. The Contractor must comply with all Exhibits D through K, which are attached hereto and incorporated by reference herein.

5. Additional Terms

5.1. Impacts Resulting from Court Orders or Legislative Changes

5.1.1. The Contractor agrees that, to the extent future state or federal legislation or court orders may have an impact on the Services described herein, the State has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

5.2. Federal Civil Rights Laws Compliance: Culturally and Linguistically Appropriate Programs and Services

5.2.1. The Contractor must submit, within ten (10) days of the Agreement Effective Date, a detailed description of the communication access and language assistance services to be provided to ensure meaningful access to programs and/or services to individuals with limited English proficiency; individuals who are deaf or have hearing loss; individuals who are blind or have low vision; and individuals who have speech challenges.

5.3. Credits and Copyright Ownership

5.3.1. All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Agreement must include the following statement, "The preparation of this (report, document etc.) was financed under an Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services."

5.3.2. All materials produced or purchased under the Agreement must have prior approval from the Department before printing, production, distribution or use.

5.3.3. The Department must retain copyright ownership for any and all

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original materials produced, including, but not limited to:

5.3.3.1. Brochures.

5.3.3.2. Resource directories.

5.3.3.3. Protocols or guidelines.

5.3.3.4. Posters.

5.3.3.5. Reports.

5.3.4. The Contractor must not reproduce any materials produced under the Agreement without prior written approval from the Department.

5.4. Operation of Facilities: Compliance with Laws and Regulations

5.4.1. In the operation of any facilities for providing services, the Contractor must comply with all laws, orders and regulations of federal, state, county and municipal authorities and with any direction of any Public Officer or officers pursuant to laws which must impose an order or duty upon the contractor with respect to the operation of the facility or the provision of the services at such facility. If any governmental license or permit must be required for the operation of the said facility or the performance of the said services, the Contractor will procure said license or permit, and will at all times comply with the terms and conditions of each such license or permit. In connection with the foregoing requirements, the Contractor hereby covenants and agrees that, during the term of this Agreement the facilities must comply with all rules, orders, regulations, and requirements of the State Office of the Fire Marshal and the local fire protection agency, and must be in conformance with local building and zoning codes, by-laws and regulations.

6. Records

6.1. The Contractor must keep records that include, but are not limited to:

6.1.1. Books, records, documents and other electronic or physical data evidencing and reflecting all costs and other expenses incurred by the Contractor in the performance of the Contract, and all income received or collected by the Contractor.

6.1.2. All records must be maintained in accordance with accounting procedures and practices, which sufficiently and properly reflect all such costs and expenses, and which are acceptable to the Department, and to include, without limitation, all ledgers, books, records, and original evidence of costs such as purchase requisitions and orders, vouchers, requisitions for materials, inventories, valuations of in-kind contributions, labor time cards, payrolls, and other records requested or required by the Department.

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8.1.3. Statistical, enrollment, attendance or visit records for each recipient of services, which records must include all records of application and eligibility (including all forms required to determine eligibility for each such recipient), records regarding the provision of services and all invoices submitted to the Department to obtain payment for such services.

8.2. During the term of this Agreement and the period for retention hereunder, the Department, the United States Department of Health and Human Services, and any of their designated representatives must have access to all reports and records maintained pursuant to the Agreement for purposes of audit, examination, excerpts and transcripts. If, upon review of the Final Expenditure Report the Department must disallow any expenses claimed by the Contractor as costs hereunder the Department must retain the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

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Attachment 1:
DCYF Catchment Area Locations

Berlin
(650 Main Street, Suite 200, Berlin NH 03570)

Serving the cities, towns, and locations of:

- Atkinson and Gilmanton Academy Grant
- Bean's Grant
- Bean's Purchase
- Berlin
- Bretton Woods
- Cambridge
- Carroll
- Cascade
- Chandlers Purchase
- Clarksville
- Colebrook
- Columbia
- Coos Junction
- Crawford's Purchase
- Crystal
- Cutt's Grant
- Dalton
- Dix's Grant
- Dixville
- Dummer
- Errol
- Ervings Location
- Fabyan Gorham
- Grange Groens Grant
- Groveton
- Hadley's Purchase
- Jefferson
- Kilkenny
- Lancaster
- Low and Burbank's Grant
- Maplewood
- Martin's Location
- Milan
- Millsfield
- North Stratford
- Northumberland
- Odell
- Percy
- Pinkham's Grant
- Pittsburg
- Randolph
- Riverton
- Sargent's Purchase
- Second College Grant
- Shelburne
- South Lancaster
- Stark
- Stewartstown
- Stratford
- Stratford Hollow
- Success
- Thompson & Meserve's Purchase
- Twin Mountain
- Wentworth's Location
- West Milan
- West Stewartstown
- Whitefield

Littleton
(80 North Littleton Road, Littleton, NH 03561)

Serving the cities, towns, and locations of:

- Apthorp
- Bath
- Benton
- Bethlehem
- Bethlehem Junction
- Center Haverhill
- East Haverhill
- Easton
- Franconia
- Glencliff
- Haverhill
- Landaff
- Lincoln
- Lisbon
- Littleton
- Livermore
- Lyman
- Monroe
- North Haverhill
- North Woodstock
- Pierce Bridge
- Piermont
- Pike
- Sugar Hill
- Warren
- Woodstock
- Woodsville

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Attachment 1:
DCYF Catchment Area Locations

Conway *(71 Hobbs Street, Conway NH 03818)*		
Serving the cities, towns, and locations of:		
Albany	Freedom	Redstone
Bartlett	Glen	Sanbornville
Brookfield	Granite	Sandwich
Center Conway	Hale's Location	Silver Lake
Center Effingham	Hart's Location	Snowville
Center Ossipee	Intervale	South Chatham
Center Sandwich	Jackson	South Effingham
Center Tuftonboro	Kearsarge	South Tamworth
Chatham	Madison	Tamworth
Chocorua	Melvin Village	Tuftonboro
Conway	Mirror Lake	Union
East Conway	Moultonborough	Wakefield
East Wakefield	Moultonville	West Ossipee
Eaton	North Conway	Wolfeboro
Effingham	North Sandwich	Wolfeboro Falls
	Ossipee	Wonalancet

Claremont *(17 Water Street, Suite 301, Claremont NH 03743)*		
Serving the cities, towns, and locations of:		
Acworth	Georges Mills	Orange
Beauregard Village	Goshen	Orford
Burkehaven	Grafton	Plainfield
Canaan	Grantham	South Acworth
Charlestown	Hanover	South Charlestown
Claremont	Langdon	Springfield
Cornish	Lebanon	Sunapee
Cornish Flat	Lempster	Unity
Croydon	Lyme	Washington
East Lempster	Lyme Center	West Canaan
Enfield	Meriden	West Lebanon
Enfield Center	Mount Sunapee	West Springfield
Etna	Newport	West Unity

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Attachment 1:
DCYF Catchment Area Locations

Keene *(111 Key Road, Keene NH 03431)*		
Serving the cities, towns, and locations of:		
Alstead	Harrisville	Sharon
Antrim	Hillsborough	Spofford
Ashuelot	Hillsborough Upper Village	Stoddard
Bennington	Hinsdale	Sullivan
Chesterfield	Jaffrey	Surry
Deering	Keene	Swanzey
Drewsville	Marlborough	Temple
Dublin	Marlow	Troy
East Sullivan	Munsonville	Walpole
East Swanzey	Nelson	West Chesterfield
East Westmoreland	New Ipswich	West Deering
Fitzwilliam	North Swanzey	West Peterborough
Gilsum	North Walpole	West Swanzey
Greenfield	Peterborough	Westmoreland
Greenville	Richmond	Westport
Hancock	Ridge	Winchester
	Roxbury	Windsor

Laconia *(65 Beacon Street West, Laconia NH 03246)*		
Serving the cities, towns, and locations of:		
Alexandria	Ellsworth	Meredith Center
Alton	Gilford	New Hampton
Alton Bay	Gilmanton	North Sanbornton
Ashland	Gilmanton Corners	Plymouth
Barnstead	Gilmanton Iron Works	Quincy
Bear Island	Glendale	Rumney
Belmont	Governor Isle	Sanbornton
Bridgewater	Groton	Thornton
Bristol	Hebron	Tilton
Campton	Holderness	Waterville Valley
Center Barnstead	Laconia	Wells
Center Harbor	Lakeport	Wentworth
Dorchester	Lochmere	West Alton
East Holderness	Lower Gilmanton	West Rumney
	Meredith	Winnisquam

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Attachment 1:
DCYF Catchment Area Locations

Concord *(40 Terrill Park Drive, Concord NH 03301)*		
Serving the cities, towns, and locations of:		
▪ Allenstown	▫ Epsom	▪ Penacook
▪ Andover	▫ Francestown	▪ Pinardville
▫ Blodgett Landing	▪ Franklin	▪ Pittsfield
▪ Boscawen	▫ Garrish	▫ Potter Place
▫ Bow	▪ Goffstown	▪ Salisbury
▫ Bradford	▪ Gossville	▪ Short Falls
▪ Canterbury	▪ Hannikar	▪ South Danbury
▪ Chichester	▪ Hill	▪ South Sutton
▪ Concord	▪ Hooksett	▪ Suncook
▫ Contoocook	▪ Hopkinton	▪ Sutton
▪ Danbury	▪ Loudon	▪ Warner
▪ Davisville	▪ New Boston	▫ Weare
▫ Dunbarton	▪ New London	▪ Webster
▫ East Andover	▪ Newbury	▪ Webster Lake
▫ East Concord	▫ North Sutton	▪ West Franklin
▪ East Sutton	▫ North Wilmot	▪ Wilmot
▪ Elkins	▪ Northfield	▫ Wilmot Flat
	▪ Pembroke	

Manchester *(1050 Perimeter, Suite 501, Manchester, NH 03103)*
Serving the city of: Manchester

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Attachment 1:
DCYF Catchment Area Locations

Rochester: *(150 Wakefield Street, Suite 22, Rochester NH 03867):*	
Serving the cities, towns, and locations of:	
▪ Barrington	▫ Madbury
▫ Center Strafford	▪ Middleton
▫ Dover	▪ Milton
▪ Durham	▫ Milton Mills
▫ East Rochester	▪ New Durham
▫ Farmington	▪ Rochester
▪ Gonic	▪ Rollinsford
▪ Lee	▪ Strafford

Seacoast *(19 Rye St, Portsmouth, NH 03801)*		
Serving the cities, towns, and locations of:		
▫ Auburn	▫ Hampton Beach	▫ Northwood
▪ Brentwood	▫ Hampton Falls	▫ Nottingham
▪ Candia	▫ Kensington	▫ Portsmouth
▪ Danville	▫ Kingston	▪ Raymond
▫ Deerfield	▪ New Castle	▫ Rye
▪ East Kingston	▪ Newfields	▪ Rye Beach
▪ Epping	▪ Newington	▪ Seabrook
▫ Exeter	▪ Newmarket	▫ Somersworth
▪ Fremont	▪ Newton	▪ South Hampton
▫ Greenland	▫ Newton Junction	▫ Strathom
▪ Hampton	▪ North Hampton	▪ West Nottingham

Southern *(26 Whipple St. Nashua, NH 03060)*			
<u>District Office</u> serving the cities, towns, and locations of:		<u>Southern Telework</u> serving the cities, towns, and locations of:	
▪ Amherst	▫ Milford	▪ Atkinson	
▪ Bedford	▪ Mont Vernon	▪ Chester	
▪ Brookline	▫ Nashua	▫ Derry	
▫ Hollis	▪ North Salem	▫ East Derry	
▫ Hudson	▪ Pelham	▪ East Hampstead	
▪ Litchfield	▫ Reeds Ferry	▫ Hampstead	
▪ Lyndeborough	▪ Salem	▫ Londonderry	
▫ Mason	▪ Wilton	▪ Plaistow	
▫ Merrimack	▫ Windham	▫ Sandown	

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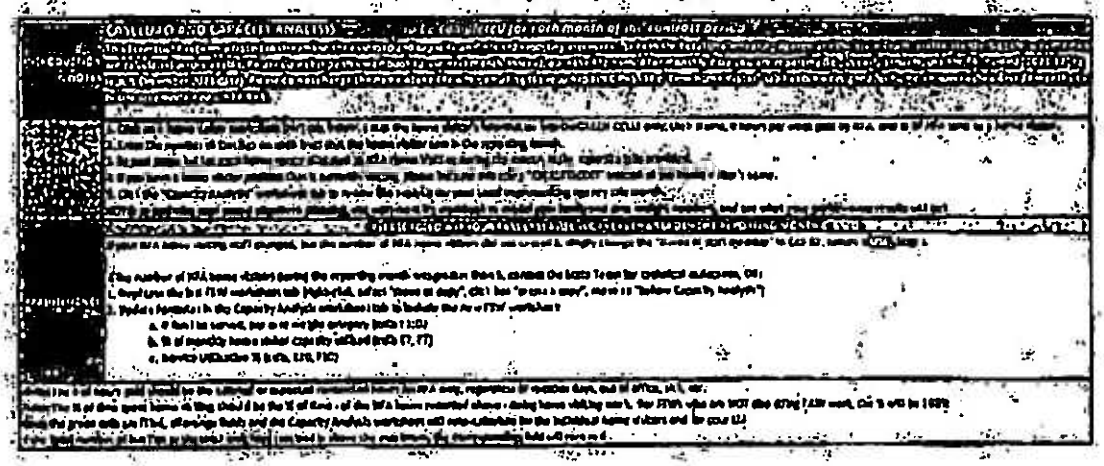
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Attachment 2 - Capacity Analysis Report



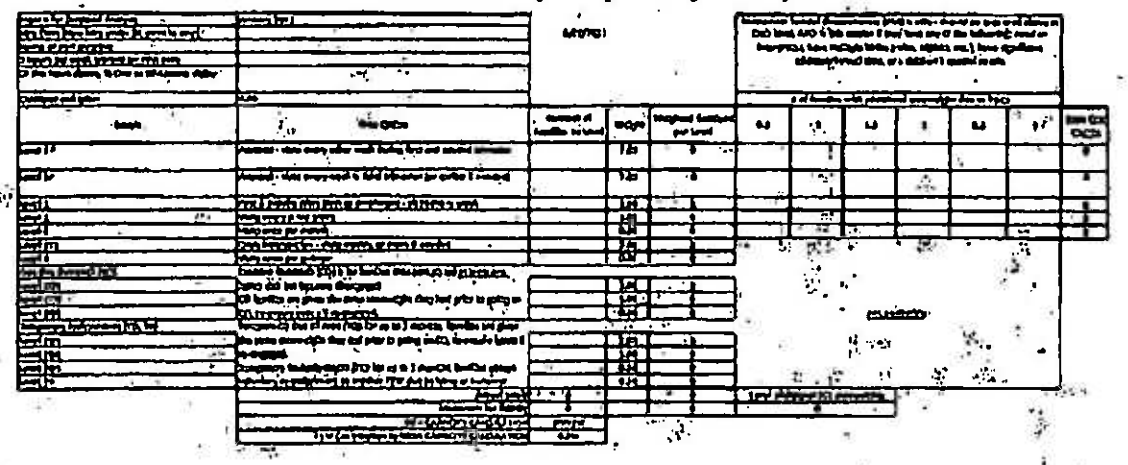
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Attachment 2 - Capacity Analysis Report



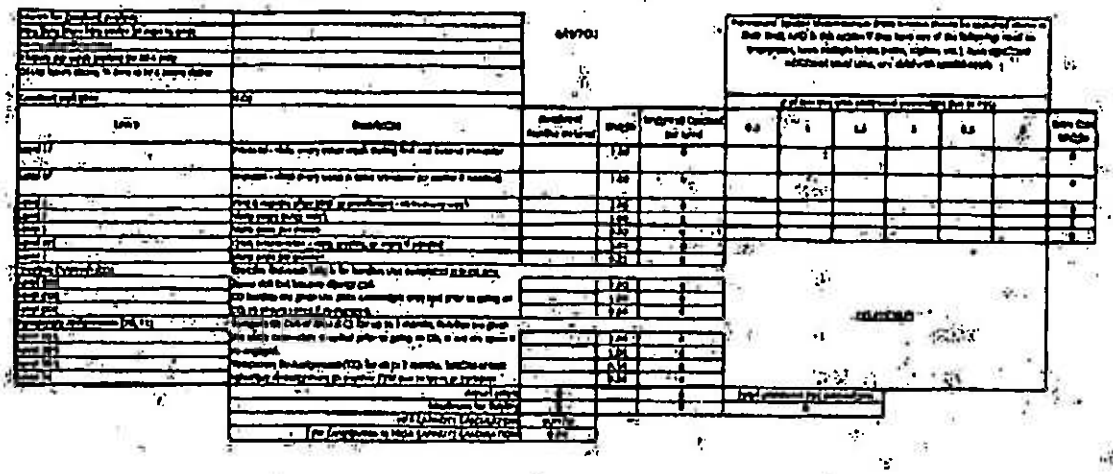
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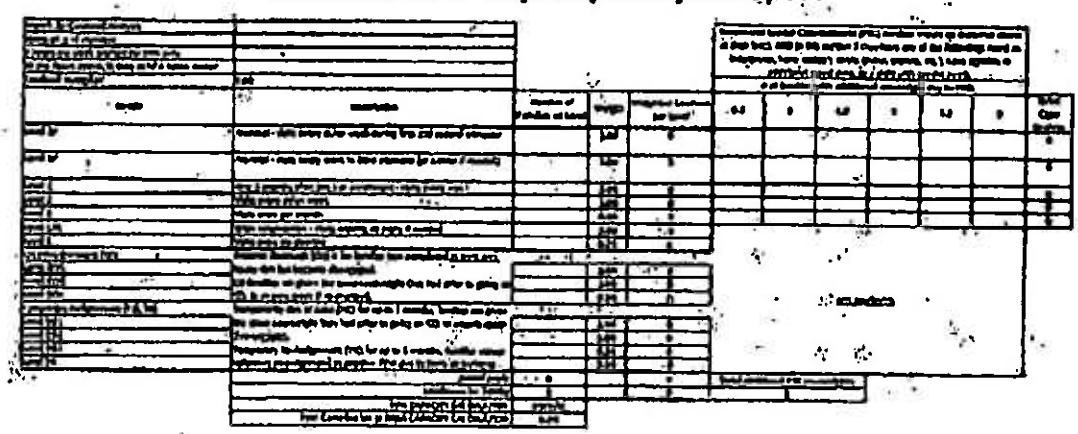
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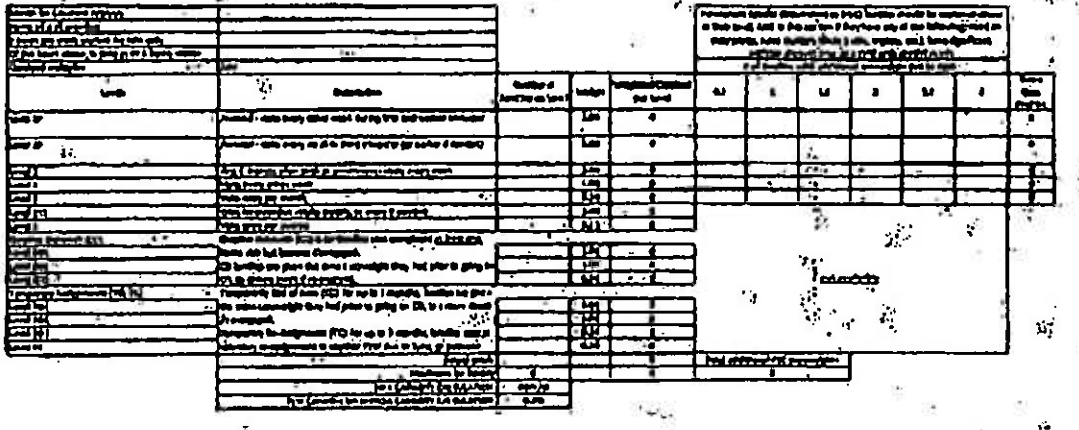
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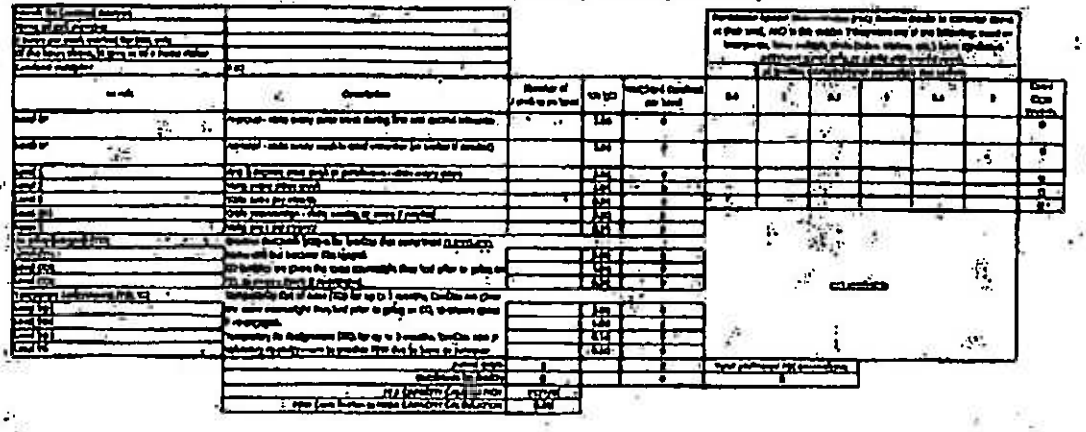
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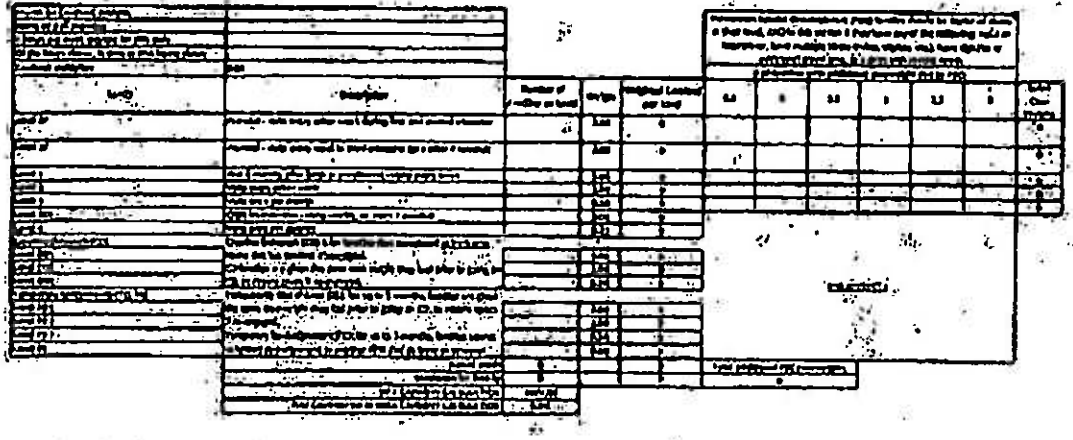
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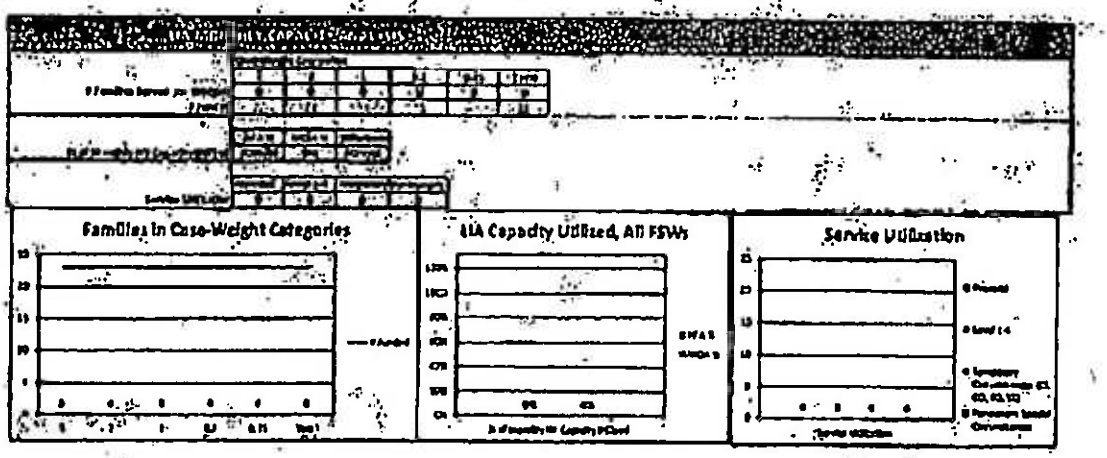
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OMB No: 0906-0017
Expiration Date: 07/31/2018

Attachment 3 - FORM 1

THE MATERNAL, INFANT, AND EARLY CHILDHOOD HOME VISITING PROGRAM

DEMOGRAPHIC, SERVICE UTILIZATION, AND SELECT CLINICAL INDICATORS

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0906-0017. Public reporting burden for this collection of information is estimated to average 360 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-29, Rockville, Maryland, 20857.

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OMB No: 0906-0611
Expiration Date: 01/31/2021

Attachment 3 - Form 1

SECTION A: PARTICIPANT DEMOGRAPHICS

Table 1: Unduplicated Count of New and Continuing Program Participants Served by MIECHV

Participants	Number Newly Enrolled	Number Continuing During Reporting Period	Total
Pregnant Women			
Female Caregivers			
Male Caregivers			
All Adults (Auto Calculate)			
Female Index Children			
Male Index Children			
All Index Children (Auto Calculate)			

Notes:

Table 2: Unduplicated Count of Households Served by MIECHV

Households	Number Newly Enrolled	Number Continuing During Reporting Period	Total
Number of Households			

Notes:

Table 3: Unduplicated Count of Participants and Households Served by State Home Visiting Programs (non-MIECHV)

Participants and Households	Total Number Served during Reporting Period
Pregnant Women	
Female Caregivers	
Male Caregivers	
All Adults (Auto Calculate)	
Female Index Children	
Male Index Children	
All Index Children (Auto Calculate)	
Number of Households	

Notes:

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Expiration Date: 07/31/2021

Attachment 3 - Form 1

Table 4: Adult Participants by Age

Adult Participants	≤17	18-19	20-21	22-24	25-29	30-34	35-44	45-54	55-64	≥65	Unknown/Did not Report*	Total
Pregnant Women												
Female Caregivers												
Male Caregivers												
All Adults (Auto Calculate)												

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 5: Index Children by Age

Index Children	<1 year	1-2 years	3-4 years	5-6 years	Unknown/Did not Report*	Total
Female Index Children						
Male Index Children						
All Index Children (Auto Calculate)						

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 6: Participants by Ethnicity

Participants	Hispanic or Latino	Not Hispanic or Latino	Unknown/Did not Report*	Total
Pregnant Women				
Female Caregivers				
Male Caregivers				
All Adults (Auto Calculate)				
Female Index Children				
Male Index Children				
All Index Children (Auto Calculate)				

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Expiration Date: 01/31/2021

Attachment 3 - Form 1

Notes:

Table 7: Participants by Race

Participants	American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or Other Pacific Islander	White	More than one race	Unknown/Did not Report*	Total
Pregnant Women								
Female Caregivers								
Male Caregivers								
All Adults (Auto Calculate)								
Female Index Children								
Male Index Children								
All Index Children (Auto Calculate)								

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 8: Adult Participants by Marital Status

Adult Participants	Never Married (Excluding Not Married but Living Together with Partner)	Married	Not Married but Living Together with Partner	Separated/Divorced/Widowed	Unknown/Did not Report*	Total
Pregnant Women						
Female Caregivers						
Male Caregivers						
All Adults (Auto Calculate)						

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Attachment 3 - Form 1

Notes:

Table 9: Adult Participants by Educational Attainment

Adult Participants	Less than HS diploma	HS Diploma/GED	Some college/ training	Technical training or certificates	Associate's Degree	Bachelor's Degree or higher	Other	Unknown/Did not Report*	Total
Pregnant Women									
Female Caregivers									
Male Caregivers									
All Adults (Auto Calculate)									

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 10: Adult Participants by Employment Status

Adult Participants	Employed Full Time	Employed Part-Time	Not employed	Unknown/Did not Report*	Total
Pregnant Women					
Female Caregivers					
Male Caregivers					
All Adults (Auto Calculate)					

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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OMB No: 0584-0311
Expiration Date: 01/31/2013

Attachment 3 - Form 1

Table 11: Adult Participants by Housing Status

	Not Homeless					Total Not Homeless	Homeless			Total Homeless	Unknown/Did not Report*	Total
Adult Participants	Owns or shares own home, condominium, or apartment	Rents or shares own home or apartment	Lives in public housing	Lives with parent or family member	Some other arrangement		Homeless and sharing housing	Homeless and living in an emergency or transitional shelter	Some other arrangement			
Pregnant Women												
Female Caregivers												
Male Caregivers												
All Adults (Auto Calculate)												

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 12: Primary Language Spoken at Home

Index Children	Number	Percent
English		
Spanish		
Other		
Unknown/Did Not Report*		
All Index Children (Auto Calculate)		100

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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OMB No 9996-0017
Expiration Date: 01/31/2011

Attachment 3 - Form 1

Notes:

Table 13: Household Income in Relation to Federal Poverty Guidelines

Households	Number of Households	Percent
50% and under		
51-100%		
101-133%		
134-200%		
201-300%		
>300%		
Unknown/Did not Report*		
All Households (Auto Calculate)		100

* When the percent of data that is "Unknown/Did not Report" is ≥ 10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 14: For Each Household Indicate the Priority Population Characteristics

Households	Yes	No	Unknown/Did not Report*	Total
1. Low income household				
2. Household contains an enrollee who is pregnant and under age 21				
3. Household has a history of child abuse or neglect or has had interactions with child welfare services				
4. Household has a history of substance abuse or needs substance abuse treatment				
5. Someone in the household uses tobacco products in the home				
6. Someone in the household has strained low student achievement or has a child with low student achievement				
7. Household has a child with developmental delays or disabilities				
8. Household includes individuals who are serving or formerly served in the US armed forces				

* When the percent of data that is "Unknown/Did not Report" is ≥ 10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

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Attachment 3 - Form 1

SECTION B: SERVICE UTILIZATION

Table 15: Service Utilization

Home Visits	Number
Total Number of Home Visits completed	

Notes:

Table 16: Family Engagement by Household

Household*	Number of Households	Percent
Currently receiving services		
Completed program		
Stopped services before completion		
Enrolled but not currently receiving services/Other		
Unknown/Did not Report*		
All Categories (Auto Calculate)		

* When the percent of data that is "Unknown/Did not Report" is ≥ 10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 17: Unduplicated Count of Households by Evidence-Based Home Visiting Model or Promising Approach

Home Visiting Model (Select One per Row – Add Rows for Additional Models)	Number Newly Enrolled	Number Continuing During Reporting Period	Total

Notes:

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SECTION C: INSURANCE AND CLINICAL INDICATORS

Table 18: Participants by Type of Health Insurance Coverage

Participants	No Insurance Coverage	Medicaid or CHIP	Tri-Care	Private or Other	Unknown/Did not Report*	Total
Pregnant Women						
Female Caregivers						
Male Caregivers						
All Adults (Auto Calculate)						
Female Index Children						
Male Index Children						
All Index Children (Auto Calculate)						

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 19: Index Children by Usual Source of Medical Care

Index Children	Doctor's/Nurse Practitioner's Office	Hospital Emergency Room	Hospital Outpatient	Federally Qualified Health Center	Retail Store or Minute Clinic	Other	None	Unknown/Did not Report*	Total
Female Index Children									
Male Index Children									
All Index Children (Auto Calculate)									

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

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Table 10: Index Children (≥ 12 months of age) by Usual Source of Dental Care

Index Children	Have a Usual Source of Dental Care	Do not have a Usual Source of Dental Care	Unknown/Did not Report*	Total
Female Index Children				
Male Index Children				
All Index Children (Able Calculate)				

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

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DEFINITIONS OF KEY TERMS

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Table Number	Field	Key Terms Requiring Definitions
All Tables		MIECHV Household: For the purposes of reporting to HRSA on Form 1, a "MIECHV household" is defined as a family served during the reporting period by a trained home visitor implementing services with fidelity to the model and that is identified as a MIECHV household at enrollment. HRSA has identified two different methods that can be used to identify MIECHV households that are described below: 1. Home Visitor Personnel Cost Method (preferred method): Households are designated as MIECHV at enrollment based on the designation of the home visitor they are assigned. Using this methodology, recipients designate all households as MIECHV that are served by home visitors for whom at least 25 percent of his/her personnel costs (salary/wages including benefits) are paid for with MIECHV funding. 2. Enrollment Slot Method (temporary option): Households are designated as MIECHV households based on the slot they are assigned to at enrollment. Using this methodology, recipients identify certain slots as MIECHV-funded and assign households to these slots at enrollment in accordance with the terms of the contractual agreement between the MIECHV state recipient and the LIA regardless of the percentage of the slot funded by MIECHV. Once designated as a MIECHV household, the household is tracked for the purposes of data collection through the tenure of household participation in the program.
	Unduplicated Count of New and Continuing Program Participants Served by MIECHV	New Participant: A participant, including a pregnant woman, female caregiver, or male caregiver, who signs up to participate in the home visiting program at any time during the reporting period who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). Continuing Participant: A participant, including a pregnant woman, female caregiver, or male caregiver, who was signed up and actively enrolled in the home visiting program prior to the beginning of the reporting period who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). Pregnant women are participants who were either pregnant at enrollment or pregnant at the annual update of information in a subsequent reporting period. Female caregivers are those female household members who are enrolled in the program during the reporting period, are considered a caregiver of the index child, and were not pregnant at the time of enrollment or the annual update of this information (e.g., biological mothers, adoptive mothers, foster mothers, grandmothers).

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		Male caregivers include those male household members (e.g. expectant fathers, biological fathers, step-fathers, and partners) who also meet the definition of an enrollee. Index Child (Birth – Kindergarten Entry): the child (or children) is an individual household who is under the care of the enrollee(s) and who is enrolled in the program and was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified.
2	Unduplicated Count of Households Served by MIECHV	New Household: A household, including a pregnant woman, female caregiver, and/or male caregiver who signs up to participate in the home visiting program at any time during the reporting period. The household may include multiple caregivers depending on model-specific definitions. Continuing Household: A household, including a pregnant woman, female caregiver, and/or male caregiver who were signed up and actively enrolled in the home visiting program prior to the beginning of the reporting period. The household may include multiple caregivers depending on model-specific definitions.
3	Unduplicated Count of Participants and Households Served by State Home Visiting Programs (non-MIECHV)	Participant Served by a State Home Visiting Program (non-MIECHV): A participant, including a pregnant woman, female caregiver, or male caregiver, who signs up to participate in the home visiting program at any time during the reporting period who was identified as being part of a non-MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms).
4	Adult Participants by Age	Adult Participant: Includes the person or persons in the household who signed up to participate in the home visiting program (e.g., a teenage parent would be counted as an adult participant but not an index child). The category can include more than one member of the household if more than one individual are enrolled in the program (e.g., a father and a mother have both signed up to participate). It should include at a minimum for every household the primary caregiver of the index child.
5	Index Children by Age	Index Child (Birth – Kindergarten Entry): the child (or children) is an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified.
6	Participants by Ethnicity	The responses regarding ethnicity should reflect what the person considers herself/himself to be and are not based on percentages of ancestry. If ethnicity is unknown or not reported for some participants, enter that count in the respective "Unknown/Did not report" columns.
7	Participants by Race	The responses regarding race should reflect what the person considers herself/himself to be and are not based on percentages of ancestry. Participants who select more than one race should be reported in the "More than one race" category. If ethnicity and race are unknown or not reported for some participants, enter that count in the respective "Unknown/Did not Report" columns.
8	Adult Participants by Marital Status	Adult Participant: Includes the person or persons in the household who signed up to participate in the home visiting program (e.g., a teenage parent would be counted as an adult participant but not an index child). The category can include more than one member of the household if more than one individual are enrolled in the program (e.g., a father and a mother have both signed up to participate). It should include at a minimum for every household the primary caregiver of the index child.

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		If more than one individual is enrolled in the program, enter the status for all enrollees. For example, if a pregnant woman is enrolled with her spouse in the program, both participants would be counted under the married category.
9	Adult Participants by Educational Attainment	Adult Participant: Includes the person or persons in the household who signed up to participate in the home visiting program (e.g., a teenage parent would be counted as an adult participant but not as index child). The category can include more than one member of the household if more than one individual are enrolled in the program (e.g., a father and a mother have both signed up to participate). It should include at a minimum for every household the primary caregiver of the index child. Less than high school diploma includes individuals who have not completed their high school education. The Some college/Training category includes those who are currently enrolled and those who attended in the past. The Technical training or certification category includes those who received technical training or certification in the past. The Associate's Degree category includes those who obtained an Associate's Degree. The Bachelor's Degree category includes those who obtained a Bachelor's Degree. The Other category includes those individuals who did not fall into the specified categories.
10	Adult Participants by Employment Status	Employed: refers to whether the person is currently working for pay. Employed Full Time: an employee who works an average of at least 30 hours per week. Employed Part Time: an employee who works an average of less than 30 hours per week[1] Not Employed: Indicates that the person is not working for pay (this category may include, for example, students, homemakers and those applying actively seeking work but currently not employed)
11	Adult Participants by Housing Status	Not homeless: individuals who have a fixed, regular, and adequate nighttime residence (within the meaning of section 103(a)(1) of the McKinney-Vento Homeless Assistance Act); and Not homeless and lives in public housing: individuals who live in a public housing unit that is administered by a public housing agency (excludes individuals who utilize housing voucher programs) Homeless: individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of section 103(a)(1) of the McKinney-Vento Homeless Assistance Act); and

[1] Merriam-Webster Glossary. https://www.merriam-webster.com/dictionary/part%20time

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		Homeless and sharing housing: individuals who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason. Homeless and living in an emergency or transitional shelter: individuals who are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement. Homeless and some other arrangement: individuals who are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; individuals who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of section 103(a)(2)(C)); individuals who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.
12	Primary Language Spoken at Home	Primary language: the language used in the home the majority of the time. Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and was served by a trained home visitor implementing services with fidelity to the model who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified.
13	Household Income in Relation to Federal Poverty Guidelines	The appropriate category for a given family will depend both on household income and on the number of household members counted in the household (both home visiting enrollees and non-enrollees). Household income refers to the annual gross income for the household as defined in programmatic guidance, recorded at enrollment and annually thereafter. Federal Poverty Guidelines: Annual income data can be estimated from monthly data (monthly income x 12). The HHS Poverty Guidelines are updated annually in February and published in the Federal Register. See https://aspe.hhs.gov/poverty-guidelines.
14	For Each Household Indicate the Priority Population Characteristics	Low-Income: An individual or family with an income determined to be below the Federal Poverty Guidelines. The HHS Poverty Guidelines are updated annually in February and published in the Federal Register. See https://aspe.hhs.gov/poverty-guidelines. Pregnant women under 21: Households with expectant mothers who enroll in the program and are under 21 years old during the reporting period. Have a history of child abuse or neglect or have had interactions with child welfare services: Based on self-report, a household with members who have a history of abuse or neglect and have had involvement with child welfare services either as a child or as an adult.

[8] Administration for Children and Families, Early Childhood Learning and Knowledge Center, 2016. [illegible]

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		Have a history of substance abuse or need substance abuse treatment: Based on self-report, a household with members who have a history of substance abuse or who have been identified as needing substance abuse services through a substance abuse screening administered upon enrollment. Are users of tobacco products in the home: Based on self-report, a household with members who use tobacco products in the home or who have been identified as using tobacco through a substance abuse screening administered during intake. Tobacco use is defined as combustibles (cigarettes, cigars, pipes, hookahs, bidis), non-combustibles (chew, dip, snuff, snus, and dissolvables), and electronic cigarette delivery systems (ENDS). Have, or have children who, low student achievement: Based on self-report, a household with members who have perceived themselves or their child(ren) as having low student achievement. Have a child or children with developmental delays or disabilities: Based on self-report or home visitor/staff observation, a household with members who have a child or children suspected of having a developmental delay or disability. Are in families that are or have served in the armed forces: Based on self-report, households that include individuals who are serving or formerly served in the Armed Forces, including such households that have members of the Armed Forces who have had multiple deployments outside of the United States. For this criterion, definition includes a military member's dependent acquired through marriage, adoption, or other action during the course of a member's current tour of assigned duty.
15	Service Utilization	Home visit refers to the definition of a completed home visit enacted by the various evidence-based home visiting models approved for implementation through the MIECHV program or a Promising Approach. Please refer to model-specific guidance for specific definitions.
16	Family Engagement by Household	Currently receiving services refers to families that are participating in services at the end of the reporting period. Completed program refers to families who have completed the program according to model-specific definitions and criteria during the reporting period. Stopped services before completion refers to families who left the program for any reason prior to completion. Enrolled but not currently receiving services/Other refers to those families who do not fall into the previous categories and may include unreachable participants (i.e. the family is not regularly participating but did not actively leave the site).
17	Unduplicated Count of Households by Evidence-Based Home Visiting Model or Promising Approach	A Household, including a pregnant woman, female caregiver, and/or male caregiver, who were signed up and actively enrolled in the home visiting program prior to the beginning of or during the reporting period and continues enrollment during the reporting period. The household may include multiple caregivers depending on model-specific definitions.

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18	Participants by Type of Health Insurance Coverage	Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified. The insurance coverage categories are mutually exclusive. No insurance coverage indicates that the individual is currently not covered by any source of insurance. This table is intended to capture insurance status, not health care access: receipt of care provided for instance by the Indian Health Service or another safety net health care provider such as a Federally Qualified Health Center does not constitute insurance coverage.
19	Index Children by Usual Source of Medical Care	Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified. Usual source of care: the particular medical professional, doctor's office, clinic, health center, or other place where a person would usually go if sick or in need of advice about his or her health.
20	Index Children (2 12 months of age) by Usual Source of Dental Care	Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified. Usual source of dental care: a usual source of dental care, or dental home, is a place where a child can receive consistent, accessible, compassionate dental care. The concept of the Dental Home reflects the AAPD's clinical guidelines and key principles for the proper delivery of oral health care to all children, with a concentration on establishing oral patients and should be established no later than 12 months of age.[1]

[1] American Academy of Pediatric Dentistry. Dental Home Resource Center. [illegible]

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Attachment 4 - Form 2

OMB No: 0906-0017
Expiration Date: 07/31/2021

THE MATERNAL, INFANT, AND EARLY CHILDHOOD HOME VISITING PROGRAM

PERFORMANCE AND SYSTEMS OUTCOME MEASURES

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0906-0017. Public reporting burden for this collection of information is estimated to average 200 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-29, Rockville, Maryland, 20857.

July 19, 2018

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OMB No: 0906-0017
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MEASURE I

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: PRETERM BIRTH**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of infants (among mothers who enrolled in home visiting prenatally before 37 weeks) who are born preter following program enrollment	
4. **SPECIFICATION** **NUMERATOR:** Number of live births (index child or subsequent children among mothers who enrolled in home visiting prenatally before 37 weeks) born before 37 completed weeks of gestation and after enrollment **DENOMINATOR:** Number of live births after enrollment who were born to mothers enrolled in home visiting prenatally before 37 weeks	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 2

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: BREASTFEEDING**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of infants (among mothers who enrolled in-home visiting prenatally) who were breastfed any amount at 6 months of age	
4. **SPECIFICATION** **NUMERATOR:** Number of infants aged 6-12 months (index child among mothers who enrolled in home visiting prenatally) who were breastfed any amount at 6 months of age **DENOMINATOR:** Number of infants aged 6-12 months (index child among mothers who enrolled in home visiting prenatally) enrolled in home visiting for at least 6 months	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 3

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: DEPRESSION SCREENING**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who are screened for depression using a validated tool within 3 months of enrollment (for those not enrolled prenatally) or within 3 months of delivery (for those enrolled prenatally)	
4. **SPECIFICATION** **NUMERATOR:** For those not enrolled prenatally, number of primary caregivers enrolled in home visiting who are screened for depression within the first 3 months since enrollment; for those enrolled prenatally, the number of primary caregivers screened for depression within 3 months of delivery **DENOMINATOR:** For those not enrolled prenatally, the number of primary caregivers enrolled in home visiting for at least 3 months; for those enrolled prenatally, the number of primary caregivers enrolled in home visiting for at least three months post delivery	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA**[a] 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool, but all other data elements are known, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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7. NOTES
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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OMB No: 0906-0017
Expiration Date: 07/31/2021

MEASURE 4

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: WELL CHILD VISIT**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting who received the last recommended visit based on the American Academy of Pediatrics (AAP) schedule	
4. **SPECIFICATION** **NUMERATOR:** Number of children (index child) enrolled in home visiting who received the last recommended well child visit based on the AAP schedule **DENOMINATOR:** Number of children (index child) enrolled in home visiting	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if a home visit occurred but the home visitor did not collect the data. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 5

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: POSTPARTUM CARE**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks (56 days) of delivery	
4. **SPECIFICATION** **NUMERATOR:** Number of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks (56 days) of delivery **DENOMINATOR:** Number of mothers who enrolled in home visiting prenatally or within 30 days after delivery and remained enrolled for at least 8 weeks (56 days) after delivery	
5. **VALUE FOR REPORTING PERIOD** (percentage) **Value:**	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Expiration Date: 07/31/2011

MEASURE 6

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: TOBACCO CESSATION REFERRALS**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment.	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment **DENOMINATOR:** Number of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and were enrolled for at least 3 months	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA**[4] 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether the primary caregiver used tobacco or cigarettes at enrollment since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are known and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator.	6.b. Value – Enter the number of cases missing from measure calculation:

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Expiration Date: 01/31/2021

All cases of missing data should be excluded from the measure calculation.	
7. NOTES	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 7

1. **BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS** **CONSTRUCT: SAFE SLEEP**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of infants enrolled in home visiting that are always placed to sleep on their backs, without bed-sharing and without soft bedding	
4. **SPECIFICATION** **NUMERATOR:** Number of infants (index child aged less than 1 year) enrolled in home visiting whose primary caregiver reports that they are always placed to sleep on their backs, without bed-sharing and without soft bedding **DENOMINATOR:** Number of infants (index child) enrolled in home visiting who were aged less than 1 year during the reporting period	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Expiration Date: 07/31/2021

MEASURE 8

1. **BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS** **CONSTRUCT: CHILD INJURY**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Rate of injury-related visits to the Emergency Department (ED) during the reporting period among children enrolled in home visiting	
4. **SPECIFICATION** **NUMERATOR:** Number of parent-reported nonfatal injury-related visits to the ED during the reporting period among children (index child) enrolled in home visiting **DENOMINATOR:** Number of children (index child) enrolled in home visiting	
5. **VALUE FOR REPORTING PERIOD (rate)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 9

1. **BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS** **CONSTRUCT: CHILD MALTREATMENT**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with at least 1 investigated case of maltreatment following enrollment within the reporting period	
4. **SPECIFICATION** **NUMERATOR:** Number of children (index child) enrolled in home visiting with at least 1 investigated case of maltreatment following enrollment within the reporting period **DENOMINATOR:** Number of children (index child) enrolled in home visiting	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE I0

1. **BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT** **CONSTRUCT: PARENT-CHILD INTERACTION**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who receive an observation of caregiver-child interaction by the home visitor using a validated tool	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who receive an observation of caregiver-chil interaction by the home visitor using a validated tool **DENOMINATOR:** Number of primary caregivers enrolled in home visiting with children reaching the target age range	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA**[a] 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether the index child received an observation of caregiver-child interaction by the home visitor using a validated tool, but all other data elements are known, then the index child should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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7. NOTES
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 11

1. **BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT** **CONSTRUCT: EARLY LANGUAGE AND LITERACY ACTIVITIES**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories, and/or sang songs with their child daily, *every* day	
4. **SPECIFICATION** **NUMERATOR:** Number of children (index child) enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories, and/or sang songs with their child daily, every day **DENOMINATOR:** Number of children (index child) enrolled in home visiting	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 12

1. **BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT** **CONSTRUCT: DEVELOPMENTAL SCREENING**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with a timely screen for developmental delays using a validated parent-completed tool	
4. **SPECIFICATION** **NUMERATOR:** Number of children (index child) enrolled in home visiting with at least one screening within the AAP-defined age groups during the reporting period **DENOMINATOR:** Number of children (index child) enrolled in home visiting reaching the specified time frame during the reporting period	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool, but all other data elements are known, then the child should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

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OMB No: 0905-0017
Expiration Date: 07/31/2021

8. Measurement Tool Utilized
Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 13

1. **BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT** **CONSTRUCT: BEHAVIORAL CONCERNS**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of postnatal home visits where primary caregivers were asked if they have any concerns regarding their child's development, behavior, or learning	
4. **SPECIFICATION** **NUMERATOR:** Number of postnatal home visits where primary caregivers enrolled in home visiting were asked if they have any concerns regarding their child's development, behavior, or learning **DENOMINATOR:** Total number of postnatal home visits during the reporting period	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. If a home visit occurred, but there is no documentation of whether the primary caregiver was asked about behavioral concerns, then the home visit should be included in the denominator (if eligible – i.e., postnatal visit), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

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* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 14

1. **BENCHMARK AREA: CRIME OR DOMESTIC VIOLENCE** **CONSTRUCT: INTIMATE PARTNER VIOLENCE SCREENING**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who are screened for intimate partner violence (IPV) within 6 months of enrollment using a validated tool	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who are screened for IPV using a validated tool within 6 months of enrollment **DENOMINATOR:** Number of primary caregivers enrolled in home visiting for at least 6 months	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool (including if a screening did not occur because the caregiver was male and they only have validated tools for use among female caregivers), but all other data elements are known, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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Docusign Envelope ID: E7E67423-091B-4370-AC2F-6C3066490311

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OMB No: 0906-0017
Expiration Date: 07/31/2021

7. NOTES
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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OMB No: 0906-0017
Expiration Date: 07/31/2021

MEASURE 15

1. **BENCHMARK AREA: FAMILY ECONOMIC SELF-SUFFICIENCY** **CONSTRUCT: PRIMARY CAREGIVER EDUCATION**	
2. **TYPE OF MEASURE** **Systems Outcome**	
3. **PERFORMANCE MEASURE** *Percent of primary caregivers who enrolled in home visiting without a high school degree or equivalent who subsequently enrolled in or maintained continuous enrollment in middle school or high school, or completed high school or equivalent during their participation in home visiting*	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers who enrolled in or maintained continuous enrollment in middle school or high school, or completed a high-school degree or equivalent after enrollment in home visiting (and met the conditions specified in the denominator) **DENOMINATOR:** Number of primary caregivers without a high school degree or equivalent at enrollment	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 16

1. **BENCHMARK AREA: FAMILY ECONOMIC SELF-SUFFICIENCY** **CONSTRUCT: CONTINUITY OF INSURANCE COVERAGE**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who had continuous health insurance coverage for at least 6 consecutive months	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who reported having health insurance coverage for at least 6 consecutive months since enrollment in home visiting **DENOMINATOR:** Number of primary caregivers enrolled in home visiting for at least 6 months	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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OMB No: 0906-0017
Expiration Date: 07/31/2021

MEASURE 17

1. **BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS** **CONSTRUCT: COMPLETED DEPRESSION REFERRALS**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of primary caregivers referred to services for a positive screen for depression who receive one or more service contacts	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who received recommended services for depression (and met the conditions specified in the denominator) **DENOMINATOR:** Number of primary caregivers enrolled in home visiting who had a positive screen for depression within 3 months of enrollment (for those not enrolled prenatally) or within 3 months of delivery (for those enrolled prenatally) and were referred for services	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether a screening occurred using a validated tool, since inclusion in the denominator cannot be determined if the screening result is unknown. Data are also considered missing if there is no documentation of whether a referral was provided. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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7. NOTES
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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OMB No: 0906-0017
Expiration Date: 07/31/2021

MEASURE 18

1. **BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS** **CONSTRUCT: COMPLETED DEVELOPMENTAL REFERRALS**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool) who receive services in a timely manner	
4. **SPECIFICATION** **NUMERATOR:** Number of children enrolled in home visiting who a) received individualized developmental support from a home visitor; b) were referred to early intervention services and receive an evaluation within 45 days; OR c) were referred to other community services who received services within 30 days (and met the condition specified in the denominator) **DENOMINATOR:** Number of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool)	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA**[4] 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether a screening occurred using a validated tool, since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are available and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if	6.b. Value – Enter the number of cases missing from measure calculation:

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Expiration Date: 07/31/2021

eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	
7. NOTES	
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Expiration Date: 07/31/2021

MEASURE 19

1. **BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS** **CONSTRUCT: INTIMATE PARTNER VIOLENCE REFERRALS**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting with positive screens for IPV (measured using a validated tool) who receive referral information to IPV resources	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who received referral information to IPV resources (and met the conditions specified in the denominator) **DENOMINATOR:** Number of primary caregivers enrolled in home visiting with positive screens for IPV (measured using a validated tool) within 6 months of enrollment	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether a screening occurred using a validated tool, since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are available and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of	6.b. Value – Enter the number of cases missing from measure calculation:

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Expiration Date: 01/31/2021

missing data should be excluded from the measure calculation.	
7. **NOTES**	
8. **Measurement Tool Utilized** Indicate the validated measurement tool(s) utilized to address this measure	

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DEFINITIONS OF KEY TERMS

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Construct Number	Construct	Key Terms Definitions
1.	Preterm Birth	Preterm Birth: a birth before 37 completed weeks of gestation (defined as up to 36 weeks and 6 days).[1]
2.	Breastfeeding	Breastfeeding: In addition to breast milk fed directly from the mother to the baby, breastfeeding also includes feeding the infant pumped or expressed breast milk.
3.	Depression Screening	Depression: aligned with each grantee's validated depression screening tool's definition of depression.
4.	Well-Child Visit	AAP materials for Well-Child Visits: Updated AAP 2017 Recommendations for Pediatric Preventive Health Care https://www.aap.org/en-us/Documents/periodicity_schedule.pdf
5.	Postpartum Care	Postpartum Care Visit: A postpartum visit is a visit between the woman and her health care provider to assess the mother's current physical health, including the status of pregnancy-related conditions like gestational diabetes, screen for postpartum depression, provide counseling on infant care and family planning as well as screening and referrals for the management of chronic conditions. Additionally, a provider may use this opportunity to conduct a breast exam and discuss breastfeeding. The American College of Obstetricians and Gynecologists recommends that mothers receive a postpartum care visit within 6 weeks after delivery.[2]
6.	Tobacco Cessation Referrals	Tobacco Use: combustibles (cigarettes, cigars, pipes, hookahs, bidis), non-combustibles (chew, dip, snuff, snus, and dissolvables), and ENDS.
7.	Safe Sleep	No definitions required
8.	Child Injury	Injury-related Emergency Department Visit: Injuries refer to the following causes of mechanisms of injury: motor vehicle, suffocation, drowning, poisoning, fire/burns, falls, sports and recreation, and intentional injuries, such as child maltreatment.[3]
9.	Child Maltreatment	Investigated Case: all children with an allegation of maltreatment that were screened-in for investigation or assessment and further received an investigation.[4] A screened-in report is one that is accepted for investigation or assessment based on the state's screen-in criteria.[5]
10.	Parent-Child Interaction	No definitions required
11.	Early Language, and Literacy Activities	No definitions required
12.	Developmental Screening	Developmental Delays: delays in any or all areas including cognitive, social, language, sensory,

[1] Behrman R, Butler A, eds. Preterm Birth: Causes, Consequences, and Prevention. Washington, DC: The National Academies Press; 2007.
[2] Optimizing postpartum care. Committee Opinion No. 560. American College of Obstetricians and Gynecologists. Obstet Gynecol 2013;122(5):1140-3. Retrieved from http://www.acog.org/-/media/Committee-Opinions/Committee-on-Obstetric-Practice/co560.pdf?dmc=1&ts=20150221T1431[illegible]
[3] Centers for Disease Control and Prevention. National Action Plan for Child Injury Prevention. 2012. Retrieved from http://www.safekids.org/sites/default/files/documents/MAP/background_data.pdf
[4] Child Welfare Information Gateway. Child Maltreatment 2013: Summary of Key Findings. Retrieved from https://www.childwelfare.gov/pubs/factsheets/publications.cfm
[5] Child Welfare Information Gateway. Screening and Intake. Retrieved from https://www.childwelfare.gov/topics/management/intake/.

July 19, 2018

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Attachment 4 - Form 2

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		and emotional development.[5]
13.	Behavioral Concerns	No definitions required
14.	IPV Screening	Intimate Partner Violence: physical violence, sexual violence, stalking and psychological aggression (including coercive acts) by a current or former intimate partner. An intimate partner is a person with whom one has a close personal relationship that can be characterized by the following: emotional connectedness, regular contact, ongoing physical contact and sexual behavior, identity as a couple, familiarity and knowledge about each other's lives.[7]
15.	Primary Caregiver Education	No definitions required
16.	Continuity of Insurance Coverage	Continuous Health Insurance Coverage: having health insurance coverage without any lapses.
17.	Completed Depression Referrals	Recommended services: specific techniques and intervention models delivered in the context of client characteristics, culture, and preferences that have shown to have positive effects on outcomes through rigorous evaluations and have demonstrated to achieve positive outcomes for the client.[8]
18.	Completed Developmental Referrals	Developmental Delay: delays in any or all areas including cognitive, social, language, sensory, and emotional development.[9]
19.	IPV Referrals	Intimate Partner Violence: physical violence, sexual violence, stalking and psychological aggression (including coercive acts) by a current or former intimate partner. An intimate partner is a person with whom one has a close personal relationship that can be characterized by the following: emotional connectedness, regular contact, ongoing physical contact and sexual behavior, identity as a couple, familiarity and knowledge about each other's lives.[7]

[5] U.S. National Library of Medicine. National Institutes of Health. Psychological Index Terms via Unified Medical Language System, 2011. Retrieved from [illegible]

[7] Centers for Disease Control and Prevention. Injury Prevention and Control: Division of Violence Prevention, 2015. Retrieved from [illegible]

[8] Home Visiting Collaborative Improvement and Innovation Network.

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Attachment 5 - DCYF Key Performance Metrics

Key Performance Metrics
Referrals
Share of families who are referred to HFA from DCYF. (# of families currently enrolled in HFA CWP and % of HFA CWP slots currently used)
Share of DCYF-referred families that were enrolled between three (3) and twenty-four (24) months of age.
Share of DCYF-referred families with a recent assessment of a Substance Exposed Infant (SEI).
Enrollments
Average time to enrollment from the time and date of referral.
of days from referral date to the first home visit.
Share of families that are offered HFA and % of offered families who decide to receive HFA.
Relative rate of families enrolled by racial/ethnic and geographic characteristics.
Proportion of families that are retained in the program over specified periods of time (6 months, 12 months, 24 months, 36 months, etc.) after receiving a first home visit.
Proportion of families who receive at least seventy-five (75%) percent of the appropriate number of home visits based upon the individual level of service to which they are assigned.
Program Completion
Share of families who do not complete the program (incl. reason for non-completion/discharge).
Share of families that discharged who completed a minimum of specified periods of service. (3 months, 6 months, 12 months, 18 months, 24 months, 30 months, 36 months).
Proportion of families who complete program by racial/ethnic and geographic characteristics.
Short-term Outcomes
Share of families with a new case opened to DCYF, or a new report of maltreatment, within six months after discharge.
Share of children who enter out-of-home placement within six months after discharge (incl. breakdown of placement type).
Share of children who enter any form of out-of-home placement within 12 months of discharge.
Differences in outcomes outlined above (i.e., prevention of out of home removal, decreases in risk/needs) by racial/ethnic and geographic characteristics.

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EXHIBIT C

Payment Terms

1. This Agreement is funded by:
   - 1.1. 61.5% Federal funds from:
     - 1.1.1. Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X10MC43595.
     - 1.1.2. Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 2, 2022, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X10MC46878.
     - 1.1.3. American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X11MC41935.
     - 1.1.4. American Rescue Plan Act Funding for Home Visiting, as awarded on October 28, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X11MC45263.
     - 1.1.5. Administration of Children Youth & Families (ACF), as awarded on October 1, 2022, CFDA 93.658, FAIN 2201NHFOST.
   - 1.2. 38.5% General funds.
2. For the purposes of this Agreement the Department has identified:
   - 2.1. The Contractor as a Subrecipient, in accordance with 2 CFR 200.331.
   - 2.2. The Agreement as NON-R&D, in accordance with 2 CFR §200.332.
3. The Department shall make payments to the Contractor within thirty (30) days of receipt of each invoice and supporting documentation for authorized expenses, subsequent to approval of the submitted invoice.
4. The final invoice and supporting documentation for authorized expenses shall be due to the Department no later than forty (40) days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.
5. Notwithstanding Paragraph 17 of the General Provisions Form P-37, changes limited to adjusting amounts within the price limitation and adjusting encumbrances between State Fiscal Years and budget class lines through the Budget Office may be made by written agreement of both parties, without obtaining approval of the Governor and Executive Council, if needed and justified.
6. Audits

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6.1. The Contractor must email an annual audit to dhhs.act@dhhs.nh.gov if any of the following conditions exist:

6.1.1. Condition A - The Contractor expended $750,000 or more in federal funds received as a subrecipient pursuant to 2 CFR Part 200, during the most recently completed fiscal year.

6.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b, pertaining to charitable organizations receiving support of $1,000,000 or more.

6.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

6.2. If Condition A exists, the Contractor shall submit an annual Single Audit performed by an Independent Certified Public Accountant (CPA) to dhhs.act@dhhs.nh.gov within 120 days after the close of the Contractor's fiscal year, conducted in accordance with the requirements of 2 CFR Part 200, Subpart F of the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal awards.

6.2.1. The Contractor shall submit a copy of any Single Audit findings and any associated corrective action plans. The Contractor shall submit quarterly progress reports on the status of implementation of the corrective action plan.

6.3. If Condition B or Condition C exists, the Contractor shall submit an annual financial audit performed by an Independent CPA within 120 days after the close of the Contractor's fiscal year.

6.4. In addition to, and not in any way in limitation of obligations of the Agreement, it is understood and agreed by the Contractor that the Contractor shall be held liable for any state or federal audit exceptions and shall return to the Department all payments made under the Agreement to which exception has been taken, or which have been disallowed because of such an exception.

A. Payment Terms Respective to Traditional Home Visiting Services for the Division of Public Health Services (DPHS):

7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1, Budget through C-4, Budget.

8. The Contractor shall submit an invoice with supporting documentation to the Department no later than the fifteenth (15th) working day of the month following the month in which the services were provided. The Contractor shall ensure each invoice:

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8.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.

8.2. Is submitted in a form that is provided by or otherwise acceptable to the Department.

8.3. Identifies and requests payment for allowable costs incurred in the previous month.

8.4. Includes supporting documentation of allowable costs with each invoice that may include, but are not limited to, time sheets, payroll records, receipts for purchases, and proof of expenditures, as applicable.

8.5. Is completed, dated and returned to the Department with the supporting documentation for allowable expenses to initiate payment.

8.6. Is assigned an electronic signature, includes supporting documentation, and is emailed to DPHSContractBilling@dhhs.nh.gov or mailed to:

Financial Manager
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

B. Payment Terms Respective to Child Welfare Protocols for the Division for Children, Youth and Families (DCYF) for direct services:

9. Payment shall be for services provided in fulfillment of this Agreement, as specified in Exhibit B, Scope of Work Section 3.4, and in accordance with the following:

9.1. Weekly Rate: For the purposes of this Agreement, a weekly rate shall be paid in the amount of $338.33 per client (family) once per week.

9.2. Payment shall be made on a monthly basis and follow a process determined by the Department.

9.3. The Contractor cannot exceed the maximum allotment for weekly rate expenditure by Fiscal Year, which is as follows:

State Fiscal Year	Amount
SFY 2023	$24,867
SFY 2024	$58,024
SFY 2025	$29,012
Sub-Total	**$111,903**

9.4. The Contractor shall submit non-clinical expenses via the Website: https://business.nh.gov/beb/PaQes/index.asDx.

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9.5. The Contractor must provide the services in Exhibit B, Scope of Services, in compliance with funding requirements.

C. Payment Terms Respective to Child Welfare Protocols for the Division for Children, Youth and Families (DCYF) for administrative services:

10. The Contractor shall submit an invoice with supporting documentation to the Department no later than the fifteenth (15th) working day of the month following the month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The Contractor shall ensure each invoice is completed, dated and returned to the Department in order to initiate payment.

10.1. Maximum allotment for contract expenditures by Fiscal Year is as follows:

State Fiscal Year	Amount
2023	$62,168
2024	$58,022
2025	$0*
Sub-Total	$120,190
*The Contractor will only bill for direct services in SFY 25.	

10.2. In lieu of hard invoice copies, all invoices may be assigned an electronic signature and emailed to DCYFInvoices@dhhs.nh.gov, or invoices may be mailed to:

Financial Manager
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

10.3. The Contractor must provide the services in Exhibit B, Scope of Services, in compliance with funding requirements.

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New Hampshire Department of Health and Human Services

Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services - Home Visiting Formula Grant
Budget Period:	SFY 2023 (10/01/2022 - 06/30/2023)
Indirect Cost Rate (if applicable)	1.59%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$50,372
2. Fringe Benefits	$14,104
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$800
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$300
5.(e) Supplies Office	$250
6. Travel	$2,000
7. Software	$2,376
8. (a) Other - Marketing/ Communications	$1,500
8. (b) Other - Education and Training	$8,750
8. (c) Other - Other (specify below)	
HFA Affiliation Fee	$800
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$79,251
Total Indirect Costs	$1,282
TOTAL	$80,533

Contractor Initials: BJS

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New Hampshire Department of Health and Human Services

Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services - Home Visiting Formula Grant
Budget Period:	SFY 2024 (07/01/2023 - 06/30/2024)
Indirect Cost Rate (if applicable)	3.91%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$88,626
2. Fringe Benefits	$16,215
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$1,176
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$388
5.(e) Supplies Office	$588
6. Travel	$3,430
7. Software	$4,900
8. (a) Other - Marketing/ Communications	$880
8. (b) Other - Education and Training	$4,900
8. (c) Other - Other (specify below)	
HFA Affiliation Fee	$980
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$105,183
Total Indirect Costs	$4,283
TOTAL	$109,466

Contractor Initials: BJS

Date: 1/5/2023

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New Hampshire Department of Health and Human Services

Contractor Name:	Granite VNA, Inc.
Budget Request for:	Home Visiting Services - Home Visiting Formula Grant
Budget Period:	SFY 2025 (07/01/2024 - 09/30/2024)
Indirect Cost Rate (if applicable)	3.62%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$16,806
2. Fringe Benefits	$4,706
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$288
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$80
5.(e) Supplies Office	$144
6. Travel	$840
7. Software	$1,989
8. (a) Other - Marketing/ Communications	$240
8. (b) Other - Education and Training	$1,200
8. (c) Other - Other (specify below)	
HFA Affiliation Fee	$240
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$26,543
Total Indirect Costs	$997
TOTAL	$27,540

Contractor Initials: BJS

Date: 1/5/2023

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New Hampshire Department of Health and Human Services

Contractor Name: Granite VNA, Inc.

Budget Request for: Home Visiting Services - ARP - MIECH Home Visiting

Budget Period: SFY 2023 (10/01/2022 - 06/30/2023)

Indirect Cost Rate (if applicable) 0.00%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$11,452
2. Fringe Benefits	$0
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$0
6. Travel	$0
7. Software	$0
8.(a) Other - Marketing/Communications	$0
8.(b) Other - Education and Training	$0
8.(c) Other - Other (specify below)	
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$11,452
Total Indirect Costs	$0
TOTAL	$11,452

Contractor Initials: BJS

Date: 1/5/2023

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Exhibit C-1 Budget Sheet, SFY 2023

RFP-2023-DPHS-01-HOMEV-02

New Hampshire Department of Health and Human Services

Contractor Name: Granite VNA, Inc.

Budget Request for: Home Visiting Services

Budget Period: SFY 2023 (1/1/23-6/30/23) 6 Months

Indirect Cost Rate (if applicable): 8.81%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$36,097
2. Fringe Benefits	$10,000
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$622
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$165
5.(e) Supplies Office	$310
6. Travel	$1,000
7. Software	$2,487
8. (a) Other - Marketing/ Communications	$995
8. (b) Other - Education and Training	$4,974
8. (c) Other - Other (specify below)	
HFA Affiliation Fee	$497
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$50,057
Total Indirect Costs	$4,111
TOTAL	$54,168

Contractor Initials BJS

Date 2/5/2023

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New Hampshire Department of Health and Human Services

Contractor Name: Granite VNA, Inc.

Budget Request for: Home Visiting Services

Budget Period: SFY 2024 (7/1/23-6/30/24) 12 Months

Indirect Cost Rate (if applicable): 8.61%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$33,653
2. Fringe Benefits	$9,079
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$560
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$145
5.(e) Supplies Office	$260
6. Travel	$1,741
7. Software	$2,321
8. (a) Other - Marketing/ Communications	$928
8. (b) Other - Education and Training	$4,642
8. (c) Other - Other (specify below)	
HFA Affiliation Fee	$464
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$54,187
Total Indirect Costs	$3,835
TOTAL	$58,022

Contractor Initials BJS

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CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Vendor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

ALTERNATIVE I - FOR GRANTEES OTHER THAN INDIVIDUALS

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

This certification is required by the regulations implementing Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.). The January 31, 1989 regulations were amended and published as Part II of the May 25, 1990 Federal Register (pages 21681-21691), and require certification by grantees (and by inference, sub-grantees and sub-contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a grantee (and by inference, sub-grantees and sub-contractors) that is a State may elect to make one certification to the Department in each federal fiscal year in lieu of certificates for each grant during the federal fiscal year covered by the certification. The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment. Contractors using this form should send it to:

Commissioner
NH Department of Health and Human Services
129 Pleasant Street,
Concord, NH 03301-6505

1. The grantee certifies that it will or will continue to provide a drug-free workplace by:
   - 1.1. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
   - 1.2. Establishing an ongoing drug-free awareness program to inform employees about
     - 1.2.1. The dangers of drug abuse in the workplace;
     - 1.2.2. The grantee's policy of maintaining a drug-free workplace;
     - 1.2.3. Any available drug counseling, rehabilitation, and employee assistance programs; and
     - 1.2.4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
   - 1.3. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
   - 1.4. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will
     - 1.4.1. Abide by the terms of the statement; and
     - 1.4.2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
   - 1.5. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph 1.4.2 from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer on whose grant activity the convicted employee was working, unless the Federal agency

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Date 1/5/2023

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has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

1.6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 1.4.2, with respect to any employee who is so convicted.

1.6.1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

1.6.2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

1.7. Making a good faith effort to continue to maintain a drug-free workplace through implementation of ppragraphs 1.1, 1.2, 1.3, 1.4, 1.5, and 1.6.

2. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant.

Place of Performance (street address, city, county, state, zip code) (list each location)

Check ☐ if there are workplaces on file that are not identified here.

Vendor Name: Granite VNA dba Concord Regional VNA

1/5/2023
Date

Docusigned by:
Beth Stepian
Name: Beth Stepian
Title: President/CEO

BJS
Vendor Initials

1/5/2023
Date

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CERTIFICATION REGARDING LOBBYING

The Vendor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

Programs (indicate applicable program covered):
*Temporary Assistance to Needy Families under Title IV-A
*Child Support Enforcement Program under Title IV-D
*Social Services Block Grant Program under Title XX
*Medicaid Program under Title XIX
*Community Services Block Grant under Title VI
*Child Care Development Block Grant under Title IV

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor).

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, attached and identified as Standard Exhibit E-I.)

3. The undersigned shall require that the language of this certification be included in the award document for sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Vendor Name: Granite VNA dba Concord Regional VNA

1/5/2023
Date

Docusigned by:
Beth Stepian
Name: Beth Stepian
Title: President/CEO

Vendor Initials BJS
Date 1/5/2023

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CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Executive Office of the President, Executive Order 12549 and 45 CFR Part 76 regarding Debarment, Suspension, and Other Responsibility Matters, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal (contract), the prospective primary participant is providing the certification set out below.
2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. If necessary, the prospective participant shall submit an explanation of why it cannot provide the certification. The certification or explanation will be considered in connection with the NH Department of Health and Human Services' (DHHS) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when DHHS determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, DHHS may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the DHHS agency to whom this proposal (contract) is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549: 45 CFR Part 76. See the attached definitions.
6. The prospective primary participant agrees by submitting this proposal (contract) that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by DHHS.
7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," provided by DHHS, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or involuntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List (of excluded parties).
9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and

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Contractor Initials

2/5/2023

Date

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Information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 8 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal government, DHHS may terminate this transaction for cause or default.

PRIMARY COVERED TRANSACTIONS

11. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
    - 11.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
    - 11.2. have not within a three-year period preceding this proposal (contract) been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or a contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
    - 11.3. are not presently indicted for otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (l)(b) of this certification; and
    - 11.4. have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

12. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal (contract).

LOWER TIER COVERED TRANSACTIONS

13. By signing and submitting this lower tier proposal (contract), the prospective lower tier participant, as defined in 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:
    - 13.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
    - 13.2. where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal (contract).

14. The prospective lower tier participant further agrees by submitting this proposal (contract) that it will include this clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions," without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

Contractor Name: Granite VNA dba Concord Regional VNA

1/5/2023
Date

Docusigned by:
Beth Slepian
Name: Beth Slepian
Title: President/CEO

Contractor Initials BJS
Date 1/5/2023

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CERTIFICATION OF COMPLIANCE WITH REQUIREMENTS PERTAINING TO FEDERAL NONDISCRIMINATION, EQUAL TREATMENT OF FAITH-BASED ORGANIZATIONS AND WHISTLEBLOWER PROTECTIONS

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

Contractor will comply, and will require any subgrantees or subcontractors to comply, with any applicable federal nondiscrimination requirements, which may include:

- the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. Section 3789d) which prohibits recipients of federal funding under this statute from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act requires certain recipients to produce an Equal Employment Opportunity Plan;

- the Juvenile Justice Delinquency Prevention Act of 2002 (42 U.S.C. Section 5672(b)) which adopts by reference, the civil rights obligations of the Safe Streets Act. Recipients of federal funding under this statute are prohibited from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act includes Equal Employment Opportunity Plan requirements;

- the Civil Rights Act of 1964 (42 U.S.C. Section 2000d, which prohibits recipients of federal financial assistance from discriminating on the basis of race, color, or national origin in any program or activity);

- the Rehabilitation Act of 1973 (29 U.S.C. Section 794), which prohibits recipients of Federal financial assistance from discriminating on the basis of disability, in regard to employment and the delivery of services or benefits, in any program or activity;

- the Americans with Disabilities Act of 1990 (42 U.S.C. Sections 12131-34), which prohibits discrimination and ensures equal opportunity for persons with disabilities in employment, State and local government services, public accommodations, commercial facilities, and transportation;

- the Education Amendments of 1972 (20 U.S.C. Sections 1681, 1683, 1685-86), which prohibits discrimination on the basis of sex in federally assisted education programs;

- the Age Discrimination Act of 1975 (42 U.S.C. Sections 6106-07), which prohibits discrimination on the basis of age in programs or activities receiving Federal financial assistance. It does not include employment discrimination;

- 28 C.F.R. pt. 31 (U.S. Department of Justice Regulations – OJJDP Grant Programs); 28 C.F.R. pt. 42 (U.S. Department of Justice Regulations – Nondiscrimination; Equal Employment Opportunity; Policies and Procedures); Executive Order No. 13279 (equal protection of the laws for faith-based and community organizations); Executive Order No. 13559, which provide fundamental principles and policy-making criteria for partnerships with faith-based and neighborhood organizations;

- 28 C.F.R. pt. 38 (U.S. Department of Justice Regulations – Equal Treatment for Faith-Based Organizations); and Whistleblower protections 41 U.S.C. §4712 and The National Defense Authorization Act (NDAA) for Fiscal Year 2013 (Pub. L. 112-239, enacted January 2, 2013) the Pilot Program for Enhancement of Contract Employee Whistleblower Protections, which protects employees against reprisal for certain whistle blowing activities in connection with federal grants and contracts.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment.

Contractor Initials BJS

Date 1/5/2023

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In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, or sex against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, to the applicable contracting agency or division within the Department of Health and Human Services, and to the Department of Health and Human Services Office of the Ombudsman.

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this proposal (contract) the Contractor agrees to comply with the provisions indicated above.

Contractor Name: Granite VNA dba Concord Regional VNA

1/5/2023
Date

Beth Slepian
Name: Beth Slepian
Title: President/CEO

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CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to $1000 per day and/or the imposition of an administrative compliance order on the responsible entity.

The Contractor identified in Section 1.3 of the General Provisions agrees, by signature of the Contractor's representative as identified in Section 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this contract, the Contractor agrees to make reasonable efforts to comply with all applicable provisions of Public Law 103-227, Part C, known as the Pro-Children Act of 1994.

Contractor Name: Granite VNA dba Concord Regional VNA

1/5/2023
Date

Docusigned by:
Beth Stepian
Name: Beth Stepian
Title: President/CEO

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HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement agrees to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191 and with the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160 and 164 applicable to business associates. As defined herein, "Business Associate" shall mean the Contractor and subcontractors and agents of the Contractor that receive, use or have access to protected health information under this Agreement and "Covered Entity" shall mean the State of New Hampshire, Department of Health and Human Services.

(1) Definitions.

a. "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.

b. "Business Associate" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.

c. "Covered Entity" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.

d. "Designated Record Set" shall have the same meaning as the term "designated record set" in 45 CFR Section 164.501.

e. "Data Aggregation" shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.

f. "Health Care Operations" shall have the same meaning as the term "health care operations" in 45 CFR Section 164.501.

g. "HITECH Act" means the Health Information Technology for Economic and Clinical Health Act, TitleXIII, Subtitle D, Part 1 & 2 of the American Recovery and Reinvestment Act of 2009.

h. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164 and amendments thereto.

i. "Individual" shall have the same meaning as the term "individual" in 45 CFR Section 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR Section 164.501(g).

j. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.

k. "Protected Health Information" shall have the same meaning as the term "protected health information" in 45 CFR Section 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

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l. "Required by Law" shall have the same meaning as the term "required by law" in 45 CFR Section 164.103.

m. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his/her designee.

n. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 CFR Part 164, Subpart C, and amendments thereto.

o. "Unsecured Protected Health Information" means protected health information that is not secured by a technology standard that renders protected health information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.

p. Other Definitions - All terms not otherwise defined herein shall have the meaning established under 45 C.F.R. Parts 160, 162 and 164, as amended from time to time, and the HITECH Act.

(2) Business Associate Use and Disclosure of Protected Health Information.

a. Business Associate shall not use, disclose, maintain or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under Exhibit A of the Agreement. Further, Business Associate, including but not limited to all its directors, officers, employees and agents, shall not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.

b. Business Associate may use or disclose PHI:
   I. For the proper management and administration of the Business Associate;
   II. As required by law, pursuant to the terms set forth in paragraph d. below; or
   III. For data aggregation purposes for the health care operations of Covered Entity.

c. To the extent Business Associate is permitted under the Agreement to disclose PHI to a third party, Business Associate must obtain, prior to making any such disclosure, (i) reasonable assurances from the third party that such PHI will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the third party; and (ii) an agreement from such third party to notify Business Associate, in accordance with the HIPAA Privacy, Security, and Breach Notification Rules of any breaches of the confidentiality of the PHI, to the extent it has obtained knowledge of such breach.

d. The Business Associate shall not, unless such disclosure is reasonably necessary to provide services under Exhibit A of the Agreement, disclose any PHI in response to a request for disclosure on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity has an opportunity to object to the disclosure and to seek appropriate relief. If Covered Entity objects to such disclosure, the Business

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Associate shall refrain from disclosing the PHI until Covered Entity has exhausted all remedies.

e. If the Covered Entity notifies the Business Associate that Covered Entity has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Business Associate shall be bound by such additional restrictions and shall not disclose PHI in violation of such additional restrictions and shall abide by any additional security safeguards.

(3) Obligations and Activities of Business Associate.

a. The Business Associate shall notify the Covered Entity's Privacy Officer immediately after the Business Associate becomes aware of any use or disclosure of protected health information not provided for by the Agreement including breaches of unsecured protected health information and/or any security incident that may have an impact on the protected health information of the Covered Entity.

b. The Business Associate shall immediately perform a risk assessment when it becomes aware of any of the above situations. The risk assessment shall include, but not be limited to:

- The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;
- The unauthorized person used the protected health information or to whom the disclosure was made;
- Whether the protected health information was actually acquired or viewed
- The extent to which the risk to the protected health information has been mitigated.

The Business Associate shall complete the risk assessment within 48 hours of the breach and immediately report the findings of the risk assessment in writing to the Covered Entity.

c. The Business Associate shall comply with all sections of the Privacy, Security, and Breach Notification Rule.

d. Business Associate shall make available all of its internal policies and procedures, books and records relating to the use and disclosure of PHI received from, or created or received by the Business Associate on behalf of Covered Entity to the Secretary for purposes of determining Covered Entity's compliance with HIPAA and the Privacy and Security Rule.

e. Business Associate shall require all of its business associates that receive, use or have access to PHI under the Agreement, to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein, including the duty to return or destroy the PHI as provided under Section 3 (l). The Covered Entity shall be considered a direct third party beneficiary of the Contractor's business associate agreements with Contractor's intended business associates, who will be receiving PHI

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pursuant to this Agreement, with rights of enforcement and indemnification from such business associates who shall be governed by standard Paragraph #13 of the standard contract provisions (P-37) of this Agreement for the purpose of use and disclosure of protected health information.

f. Within five (5) business days of receipt of a written request from Covered Entity, Business Associate shall make available during normal business hours at its offices all records, books, agreements, policies and procedures relating to the use and disclosure of PHI to the Covered Entity, for purposes of enabling Covered Entity to determine Business Associate's compliance with the terms of the Agreement.

g. Within ten (10) business days of receiving a written request from Covered Entity, Business Associate shall provide access to PHI in a Designated Record Set to the Covered Entity, or as directed by Covered Entity, to an Individual in order to meet the requirements under 45 CFR Section 164.524.

h. Within ten (10) business days of receiving a written request from Covered Entity for an amendment of PHI or a record about an individual contained in a Designated Record Set, the Business Associate shall make such PHI available to Covered Entity for amendment and incorporate any such amendment to enable Covered Entity to fulfill its obligations under 45 CFR Section 164.526.

i. Business Associate shall document such disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR Section 164.528.

j. Within ten (10) business days of receiving a written request from Covered Entity for a request for an accounting of disclosures of PHI, Business Associate shall make available to Covered Entity such information as Covered Entity may require to fulfill its obligations to provide an accounting of disclosures with respect to PHI in accordance with 45 CFR Section 164.528.

k. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within two (2) business days forward such request to Covered Entity. Covered Entity shall have the responsibility of responding to forwarded requests. However, if forwarding the individual's request to Covered Entity would cause Covered Entity or the Business Associate to violate HIPAA and the Privacy and Security Rule, the Business Associate shall instead respond to the individual's request as required by such law and notify Covered Entity of such response as soon as practicable.

l. Within ten (10) business days of termination of the Agreement, for any reason, the Business Associate shall return or destroy, as specified by Covered Entity, all PHI received from, or created or received by the Business Associate in connection with the Agreement, and shall not retain any copies or back-up tapes of such PHI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, Business Associate shall continue to extend the protections of the Agreement, to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business

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Associate maintains such PHI. If Covered Entity, in its sole discretion, requires that the Business Associate destroy any or all PHI, the Business Associate shall certify to Covered Entity that the PHI has been destroyed.

(4) Obligations of Covered Entity

a. Covered Entity shall notify Business Associate of any changes or limitation(s) in its Notice of Privacy Practices provided to individuals in accordance with 45 CFR Section 164.520, to the extent that such change or limitation may affect Business Associate's use or disclosure of PHI.

b. Covered Entity shall promptly notify Business Associate of any changes in, or revocation of permission provided to Covered Entity by individuals whose PHI may be used or disclosed by Business Associate under this Agreement, pursuant to 45 CFR Section 164.506 or 45 CFR Section 164.508.

c. Covered entity shall promptly notify Business Associate of any restrictions on the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 CFR 164.522, to the extent that such restriction may affect Business Associate's use or disclosure of PHI.

(5) Termination for Cause

In addition to Paragraph 10 of the standard terms and conditions (P-37) of this Agreement the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a breach by Business Associate of the Business Associate Agreement set forth herein as Exhibit I. The Covered Entity may either immediately terminate the Agreement or provide an opportunity for Business Associate to cure the alleged breach within a timeframe specified by Covered Entity. If Covered Entity determines that neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.

(6) Miscellaneous

a. Definitions and Regulatory References. All terms used, but not otherwise defined herein, shall have the same meaning as those terms in the Privacy and Security Rule, amended from time to time. A reference in the Agreement, as amended to include this Exhibit I, to a Section in the Privacy and Security Rule means the Section as in effect or as amended.

b. Amendment. Covered Entity and Business Associate agree to take such action as is necessary to amend the Agreement, from time to time as is necessary for Covered Entity to comply with the changes in the requirements of HIPAA, the Privacy and Security Rule, and applicable federal and state law.

c. Data Ownership. The Business Associate acknowledges that it has no ownership rights with respect to the PHI provided by or created on behalf of Covered Entity.

d. Interpretation. The parties agree that any ambiguity in the Agreement shall be resolved to permit Covered Entity to comply with HIPAA, the Privacy and Security Rule.

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e. Segregation. If any term or condition of this Exhibit I or the application thereof to any person(s) or circumstance is held invalid, such invalidity shall not affect other terms or conditions which can be given effect without the invalid term or condition; to this end the terms and conditions of this Exhibit I are declared severable.

f. Survival. Provisions in this Exhibit I regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the Agreement in section (3) I, the defense and indemnification provisions of section (3) e and Paragraph 13 of the standard terms and conditions (P-37), shall survive the termination of the Agreement.

IN WITNESS WHEREOF, the parties hereto have duly executed this Exhibit I.

Department of Health and Human Services	Granite VNA dba Concord Regional VNA
The State	Name of the Contractor
Patricia M. Tilley	Beth Slepian
Signature of Authorized Representative	Signature of Authorized Representative
Patricia M. Tilley	Beth Slepian
Name of Authorized Representative	Name of Authorized Representative
Director	President/CEO
Title of Authorized Representative	Title of Authorized Representative
1/5/2023	1/5/2023
Date	Date

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CERTIFICATION REGARDING THE FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA) COMPLIANCE

The Federal Funding Accountability and Transparency Act (FFATA) requires prime awardees of individual Federal grants equal to or greater than $25,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $25,000 or more. If the initial award is below $25,000 but subsequent grant modifications result in a total award equal to or over $25,000, the award is subject to the FFATA reporting requirements, as of the date of the award.
In accordance with 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), the Department of Health and Human Services (DHHS) must report the following information for any subaward or contract award subject to the FFATA reporting requirements:

1. Name of entity
2. Amount of award
3. Funding agency
4. NAICS code for contracts / CFDA program number for grants
5. Program source
6. Award title descriptive of the purpose of the funding action
7. Location of the entity
8. Principle place of performance
9. Unique identifier of the entity (UEI-9)
10. Total compensation and names of the top five executives if:
    - 10.1. More than 80% of annual gross revenues are from the Federal government, and those revenues are greater than $25M annually and
    - 10.2. Compensation information is not already available through reporting to the SEC.

Prime grant recipients must submit FFATA required data by the end of the month, plus 30 days, in which the award or award amendment is made.
The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of The Federal Funding Accountability and Transparency Act, Public Law 109-282 and Public Law 110-252, and 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions, execute the following Certification:
The below named Contractor agrees to provide needed information as outlined above to the NH Department of Health and Human Services and to comply with all applicable provisions of the Federal Financial Accountability and Transparency Act.

Contractor Name: Granite VNA dba Concord Regional VNA

1/5/2023
Date

Docusigned by:
Beth Stepian
Name: Beth Stepian
Title: President/CEO

Contractor Initials BJS
Date 1/5/2023

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FORM A

As the Contractor identified in Section 1.3 of the General Provisions, I certify that the responses to the below listed questions are true and accurate.

1. The UEI (SAM.gov) number for your entity is: J1GJSEM4BJ97
2. In your business or organization's preceding completed fiscal year, did your business or organization receive (1) 80 percent or more of your annual gross revenue in U.S. federal contracts, subcontracts, loans, grants, sub-grants, and/or cooperative agreements; and (2) $25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

   _____ NO _____X_____ YES

   If the answer to #2 above is NO, stop here

   If the answer to #2 above is YES, please answer the following:
3. Does the public have access to information about the compensation of the executives in your business or organization through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C.78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

   _____ NO _____X_____ YES

   If the answer to #3 above is YES, stop here

   If the answer to #3 above is NO, please answer the following:
4. The names and compensation of the five most highly compensated officers in your business or organization are as follows:

   Name: _____ Amount: _____

   Name: _____ Amount: _____

   Name: _____ Amount: _____

   Name: _____ Amount: _____

   Name: _____ Amount: _____

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New Hampshire Department of Health and Human Services

Exhibit K

DHHS Information Security Requirements

A. **Definitions**

The following terms may be reflected and have the described meaning in this document:

1. "Breach" means the loss of control, compromise, unauthorized disclosure, unauthorized acquisition, unauthorized access, or any similar term referring to situations where persons other than authorized users and for an other than authorized purpose have access or potential access to personally identifiable information, whether physical or electronic. With regard to Protected Health Information, "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.

2. "Computer Security Incident" shall have the same meaning "Computer Security Incident" in section two (2) of NIST Publication 800-61, Computer Security Incident Handling Guide, National Institute of Standards and Technology, U.S. Department of Commerce.

3. "Confidential Information" or "Confidential Data" means all confidential information disclosed by one party to the other such as all medical, health, financial, public assistance benefits and personal information including without limitation, Substance Abuse Treatment Records, Case Records, Protected Health Information and Personally Identifiable Information.

   Confidential Information also includes any and all information owned or managed by the State of NH - created, received from or on behalf of the Department of Health and Human Services (DHHS) or accessed in the course of performing contracted services - of which collection, disclosure, protection, and disposition is governed by state or federal law or regulation. This information includes, but is not limited to Protected Health Information (PHI), Personal Information (PI), Personal Financial Information (PFI), Federal Tax Information (FTI), Social Security Numbers (SSN), Payment Card Industry (PCI), and or other sensitive and confidential information.

4. "End User" means any person or entity (e.g., contractor, contractor's employee, business associate, subcontractor, other downstream user, etc.) that receives DHHS data or derivative data in accordance with the terms of this Contract.

5. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996 and the regulations promulgated thereunder.

6. "Incident" means an act that potentially violates an explicit or implied security policy, which includes attempts (either failed or successful) to gain unauthorized access to a system or its data, unwanted disruption or denial of service, the unauthorized use of a system for the processing or storage of data; and changes to system hardware, firmware, or software characteristics without the owner's knowledge, instruction, or consent. Incidents include the loss of data through theft or device misplacement, loss or misplacement of hardcopy documents, and misrouting of physical or electronic

Contractor Initials BJS

Date 1/5/2023

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mail, all of which may have the potential to put the data at risk of unauthorized access, use, disclosure, modification or destruction.

7. "Open Wireless Network" means any network or segment of a network that is not designated by the State of New Hampshire's Department of Information Technology or delegate as a protected network (designed, tested, and approved, by means of the State, to transmit) will be considered an open network and not adequately secure for the transmission of unencrypted PI, PFI, PHI or confidential DHHS data.

8. "Personal Information" (or "PI") means information which can be used to distinguish or trace an individual's identity, such as their name, social security number, personal information as defined in New Hampshire RSA 359-C:19, biometric records, etc., alone, or when combined with other personal or identifying information which is linked or linkable to a specific individual, such as date and place of birth, mother's maiden name, etc.

9. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 C.F.R. Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.

10. "Protected Health Information" (or "PHI") has the same meaning as provided in the definition of "Protected Health Information" in the HIPAA Privacy Rule at 45 C.F.R. § 160.103.

11. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 C.F.R. Part 164, Subpart C, and amendments thereto.

12. "Unsecured Protected Health Information" means Protected Health Information that is not secured by a technology standard that renders Protected Health Information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.

I. RESPONSIBILITIES OF DHHS AND THE CONTRACTOR

A. Business Use and Disclosure of Confidential Information.

1. The Contractor must not use, disclose, maintain or transmit Confidential Information except as reasonably necessary as outlined under this Contract. Further, Contractor, including but not limited to all its directors, officers, employees and agents, must not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.

2. The Contractor must not disclose any Confidential Information in response to a

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request for disclosure on the basis that it is required by law, in response to a subpoena, etc., without first notifying DHHS so that DHHS has an opportunity to consent or object to the disclosure.

3. If DHHS notifies the Contractor that DHHS has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Contractor must be bound by such additional restrictions and must not disclose PHI in violation of such additional restrictions and must abide by any additional security safeguards.
4. The Contractor agrees that DHHS Data or derivative there from disclosed to an End User must only be used pursuant to the terms of this Contract.
5. The Contractor agrees DHHS Data obtained under this Contract may not be used for any other purposes that are not indicated in this Contract.
6. The Contractor agrees to grant access to the data to the authorized representatives of DHHS for the purpose of inspecting to confirm compliance with the terms of this Contract.

II. METHODS OF SECURE TRANSMISSION OF DATA

1. Application Encryption. If End User is transmitting DHHS data containing Confidential Data between applications, the Contractor attests the applications have been evaluated by an expert knowledgeable in cyber security and that said application's encryption capabilities ensure secure transmission via the Internet.
2. Computer Disks and Portable Storage Devices. End User may not use computer disks or portable storage devices, such as a thumb drive, as a method of transmitting DHHS data.
3. Encrypted Email. End User may only employ email to transmit Confidential Data if email is encrypted and being sent to and being received by email addresses of persons authorized to receive such information.
4. Encrypted Web Site. If End User is employing the Web to transmit Confidential Data, the secure socket layers (SSL) must be used and the web site must be secure. SSL encrypts data transmitted via a Web site.
5. File Hosting Services, also known as File Sharing Sites. End User may not use file hosting services, such as Dropbox or Google Cloud Storage, to transmit Confidential Data.
6. Ground Mail Service. End User may only transmit Confidential Data via *certified* ground mail within the continental U.S. and when sent to a named individual.
7. Laptops and PDA. If End User is employing portable devices to transmit Confidential Data said devices must be encrypted and password-protected.
8. Open Wireless Networks. End User may not transmit Confidential Data via an open

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wireless network. End User must employ a virtual private network (VPN) when remotely transmitting via an open wireless network.

9. Remote User Communication. If End User is employing remote communication to access or transmit Confidential Data, a virtual private network (VPN) must be installed on the End User's mobile device(s) or laptop from which information will be transmitted or accessed.
10. SSH File Transfer Protocol (SFTP), also known as Secure File Transfer Protocol. If End User is employing an SFTP to transmit Confidential Data, End User will structure the Folder and access privileges to prevent inappropriate disclosure of information. SFTP folders and sub-folders used for transmitting Confidential Data will be coded for 24-hour auto-deletion cycle (i.e. Confidential Data will be deleted every 24 hours).
11. Wireless Devices. If End User is transmitting Confidential Data via wireless devices, all data must be encrypted to prevent inappropriate disclosure of information.

III. RETENTION AND DISPOSITION OF IDENTIFIABLE RECORDS

The Contractor will only retain the data and any derivative of the data for the duration of this Contract. After such time, the Contractor will have 30 days to destroy the data and any derivative in whatever form it may exist, unless, otherwise required by law or permitted under this Contract. To this end, the parties must:

A. Retention

1. The Contractor agrees it will not store, transfer or process data collected in connection with the services rendered under this Contract outside of the United States. This physical location requirement shall also apply in the implementation of cloud computing, cloud service or cloud storage capabilities, and includes backup data and Disaster Recovery locations.
2. The Contractor agrees to ensure proper security monitoring capabilities are in place to detect potential security events that can impact State of NH systems and/or Department confidential information for contractor provided systems.
3. The Contractor agrees to provide security awareness and education for its End Users in support of protecting Department confidential information.
4. The Contractor agrees to retain all electronic and hard copies of Confidential Data in a secure location and identified in section IV. A.2
5. The Contractor agrees Confidential Data stored in a Cloud must be in a FedRAMP/HITECH compliant solution and comply with all applicable statutes and regulations regarding the privacy and security. All servers and devices must have currently-supported and hardened operating systems, the latest anti-viral, anti-hacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a

Contractor Initials BJS

Date 1/5/2023

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whole, must have aggressive intrusion-detection and firewall protection.

6. The Contractor agrees to and ensures its complete cooperation with the State's Chief Information Officer in the detection of any security vulnerability of the hosting infrastructure.

B. Disposition

1. If the Contractor will maintain any Confidential Information on its systems (or its sub-contractor systems), the Contractor will maintain a documented process for securely disposing of such data upon request or contract termination; and will obtain written certification for any State of New Hampshire data destroyed by the Contractor or any subcontractors as a part of ongoing, emergency, and or disaster recovery operations. When no longer in use, electronic media containing State of New Hampshire data shall be rendered unrecoverable via a secure wipe program in accordance with industry-accepted standards for secure deletion and media sanitization, or otherwise physically destroying the media (for example, degaussing) as described in NIST Special Publication 800-88, Rev 1, Guidelines for Media Sanitization; National Institute of Standards and Technology, U. S. Department of Commerce. The Contractor will document and certify in writing at time of the data destruction, and will provide written certification to the Department upon request. The written certification will include all details necessary to demonstrate data has been properly destroyed and validated. Where applicable, regulatory and professional standards for retention requirements will be jointly evaluated by the State and Contractor prior to destruction.
2. Unless otherwise specified, within thirty (30) days of the termination of this Contract, Contractor agrees to destroy all hard copies of Confidential Data using a secure method such as shredding.
3. Unless otherwise specified, within thirty (30) days of the termination of this Contract, Contractor agrees to completely destroy all electronic Confidential Data by means of data erasure, also known as secure data wiping.

IV. PROCEDURES FOR SECURITY

A. Contractor agrees to safeguard the DHHS Data received under this Contract, and any derivative data or files, as follows:

1. The Contractor will maintain proper security controls to protect Department confidential information collected, processed, managed, and/or stored in the delivery of contracted services.
2. The Contractor will maintain policies and procedures to protect Department confidential information throughout the information lifecycle, where applicable, (from creation, transformation, use, storage and secure destruction) regardless of the media used to store the data (i.e., tape, disk, paper, etc.).

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3. The Contractor will maintain appropriate authentication and access controls to contractor systems that collect, transmit, or store Department confidential information where applicable.

4. The Contractor will ensure proper security monitoring capabilities are in place to detect potential security events that can impact State of NH systems and/or Department confidential information for contractor provided systems.

5. The Contractor will provide regular security awareness and education for its End Users in support of protecting Department confidential information.

6. If the Contractor will be sub-contracting any core functions of the engagement supporting the services for State of New Hampshire, the Contractor will maintain a program of an internal process or processes that defines specific security expectations, and monitoring compliance to security requirements that at a minimum match those for the Contractor, including breach notification requirements.

7. The Contractor will work with the Department to sign and comply with all applicable State of New Hampshire and Department system access and authorization policies and procedures, systems access forms, and computer use agreements as part of obtaining and maintaining access to any Department system(s). Agreements will be completed and signed by the Contractor and any applicable sub-contractors prior to system access being authorized.

8. If the Department determines the Contractor is a Business Associate pursuant to 45 CFR 160.103, the Contractor will execute a HIPAA Business Associate Agreement (BAA) with the Department and is responsible for maintaining compliance with the agreement.

9. The Contractor will work with the Department at its request to complete a System Management Survey. The purpose of the survey is to enable the Department and Contractor to monitor for any changes in risks, threats, and vulnerabilities that may occur over the life of the Contractor engagement. The survey will be completed annually, or an alternate time frame at the Departments discretion with agreement by the Contractor, or the Department may request the survey be completed when the scope of the engagement between the Department and the Contractor changes.

10. The Contractor will not store, knowingly or unknowingly, any State of New Hampshire or Department data offshore or outside the boundaries of the United States unless prior express written consent is obtained from the Information Security Office leadership member within the Department.

11. Data Security Breach Liability. In the event of any security breach Contractor shall make efforts to investigate the causes of the breach, promptly take measures to prevent future breach and minimize any damage or loss resulting from the breach. The State shall recover from the Contractor all costs of response and recovery from

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the breach, including but not limited to: credit monitoring services, mailing costs and costs associated with website and telephone call center services necessary due to the breach.

12. Contractor must, comply with all applicable statutes and regulations regarding the privacy and security of Confidential Information, and must in all other respects maintain the privacy and security of PI and PHI at a level and scope that is not less than the level and scope of requirements applicable to federal agencies, including, but not limited to, provisions of the Privacy Act of 1974 (5 U.S.C. § 552a), DHHS Privacy Act Regulations (45 C.F.R. §5b), HIPAA Privacy and Security Rules (45 C.F.R. Parts 160 and 164) that govern protections for individually identifiable health information and as applicable under State law.

13. Contractor agrees to establish and maintain appropriate administrative, technical, and physical safeguards to protect the confidentiality of the Confidential Data and to prevent unauthorized use or access to it. The safeguards must provide a level and scope of security that is not less than the level and scope of security requirements established by the State of New Hampshire, Department of Information Technology. Refer to Vendor Resources/Procurement at https://www.nh.gov/doit/vendor/index.htm for the Department of Information Technology policies, guidelines, standards, and procurement information relating to vendors.

14. Contractor agrees to maintain a documented breach notification and incident response process. The Contractor will notify the State's Privacy Officer and the State's Security Officer of any security breach immediately, at the email addresses provided in Section VI. This includes a confidential information breach, computer security incident, or suspected breach which affects or includes any State of New Hampshire systems that connect to the State of New Hampshire network.

15. Contractor must restrict access to the Confidential Data obtained under this Contract to only those authorized End Users who need such DHHS Data to perform their official duties in connection with purposes identified in this Contract.

16. The Contractor must ensure that all End Users:

    a. comply with such safeguards as referenced in Section IV A. above, implemented to protect Confidential Information that is furnished by DHHS under this Contract from loss, theft or inadvertent disclosure.

    b. safeguard this information at all times.

    c. ensure that laptops and other electronic devices/media containing PHI, PI, or PFI are encrypted and password-protected.

    d. send emails containing Confidential Information only if <u>encrypted</u> and being sent to and being received by email addresses of persons authorized to receive such information.

Contractor Initials BJS

Date 1/5/2023

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e. limit disclosure of the Confidential Information to the extent permitted by law.

f. Confidential Information received under this Contract and individually identifiable data derived from DHHS Data, must be stored in an area that is physically and technologically secure from access by unauthorized persons during duty hours as well as non-duty hours (e.g., door locks, card keys, biometric identifiers, etc.).

g. only authorized End Users may transmit the Confidential Data, including any derivative files containing personally identifiable information, and in all cases, such data must be encrypted at all times when in transit, at rest, or when stored on portable media as required in section IV above.

h. In all other instances Confidential Data must be maintained, used and disclosed using appropriate safeguards, as determined by a risk-based assessment of the circumstances involved.

i. understand that their user credentials (user name and password) must not be shared with anyone. End Users will keep their credential information secure. This applies to credentials used to access the site directly or indirectly through a third party application.

Contractor is responsible for oversight and compliance of their End Users. DHHS reserves the right to conduct onsite inspections to monitor compliance with this Contract, including the privacy and security requirements provided in herein, HIPAA, and other applicable laws and Federal regulations until such time the Confidential Data is disposed of in accordance with this Contract.

V. LOSS REPORTING

The Contractor must notify the State's Privacy Officer and Security Officer of any Security Incidents and Breaches immediately, at the email addresses provided in Section VI.

The Contractor must further handle and report Incidents and Breaches involving PHI in accordance with the agency's documented Incident Handling and Breach Notification procedures and in accordance with 42 C.F.R. §§ 431.300 - 306. In addition to, and notwithstanding, Contractor's compliance with all applicable obligations and procedures, Contractor's procedures must also address how the Contractor will:

1. Identify Incidents;
2. Determine if personally identifiable information is involved in Incidents;
3. Report suspected or confirmed Incidents as required in this Exhibit or P-37;
4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and

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5. Determine whether Breach notification is required, and, if so, identify appropriate Breach notification methods, timing, source, and contents from among different options, and bear costs associated with the Breach notice as well as any mitigation measures.

Incidents and/or Breaches that implicate PI must be addressed and reported, as applicable, in accordance with NH RSA 359-C:20.

VI. PERSONS TO CONTACT

A. DHHS Privacy Officer:

DHHSPrivacyOfficer@dhhs.nh.gov

B. DHHS Security Officer:

DHHSInformationSecurityOffice@dhhs.nh.gov

Contractor Initials BJS

Date 1/5/2023

State of New Hampshire
Department of Health and Human Services
Amendment #4

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and The Family Resource Center at Gorham ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item #39), as amended on June 14, 2023 (Item #27), as amended on May 1, 2024 (Item #18), and as amended on September 25, 2024 (Item #16), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8., Price Limitation, to read:

   $5,380,129

2. Modify Exhibit B, Scope of Services, Section 3.7.2., to read:

   3.7.2. Utilize evidence-based curricula to support prenatal individuals and newly parenting families including but not limited to:

   3.7.2.1. Parents as Teachers (PAT), as an annually trained "Approved user"; or

   3.7.2.2. Growing Great Kids (GGK) with certification of training.

3. Modify Exhibit C, Payment Terms; Section 1, to read:

   1. This Agreement is funded by:

      1.1. 81.51% Federal funds from:

         1.1.1. 60.45% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the DHHS Health Resources and Services Administration (HRSA), Assistance Listing Number (ALN) 93.870, FAIN X10MC43595; and as awarded on September 2, 2022, FAIN X10MC46878; and as awarded on August 29, 2023, FAIN X10MC50315; and as awarded on August 27, 2024, FAIN X10MC53631.

         1.1.2. 12.20% Foster Care Title IV-E, as awarded on October 1, 2022, by the Administration of Children Youth & Families (ACF), ALN 93.658, FAIN (FFPSA) 2301NHFOST and FAIN 2201NHFOST.

         1.1.3. 3.26% American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the DHHS HRSA, ALN 93.870, FAIN X11MC41935; and as awarded on October 28, 2021, FAIN X11MC45263.

         1.1.4. 5.60% Centers for Disease Control and Prevention (CDC), as awarded on May 27, 2021, by the NH Initiative to Address Covid-19 Health Disparities, ALN 93.391, FAIN NB75OT000031.

      1.2. 18.49% General funds.

4. Modify Exhibit C, Payment Terms, Section 7, to read:

   7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement and shall be in accordance with the approved line items, as specified in Exhibits C-1 Budget Sheet, SFY 2023 through Exhibit C-8 Budget Sheet, SFY 2024; and Exhibit C-10 Budget Sheet, SFY 2023 through Exhibit C-17, Budget Sheet SFY 2029 – Amendment #4.

5. Modify Exhibit C-3, Budget (SFY 2025) – Amendment #3, by replacing it in its entirety with Exhibit C-3, Budget, SFY 2025 – Amendment #4, which is attached hereto and incorporated by reference herein.

6. Modify Exhibit C-14, Budget Sheet, SFY 2026 – Amendment #3, by replacing it in its entirety with Exhibit C-14, Budget Sheet, SFY 2026 – Amendment #4, which is attached hereto and incorporated by reference herein.

7. Modify Exhibit C-15, Budget Sheet, SFY 2027 – Amendment #3, by replacing it in its entirety with Exhibit C-15, Budget Sheet, SFY 2027 – Amendment #4, which is attached hereto and incorporated by reference herein.

8. Modify Exhibit C-16, Budget Sheet, SFY 2028 – Amendment #3, by replacing it in its entirety with Exhibit C-16, Budget Sheet, SFY 2028 – Amendment #4, which is attached hereto and incorporated by reference herein.

9. Modify Exhibit C-17, Budget Sheet, SFY 2029 – Amendment #3, by replacing it in its entirety with Exhibit C-17, Budget Sheet, SFY 2029 – Amendment #4, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment remain in full force and effect. This Amendment shall be effective upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

4/7/2025
Date

DocuSigned by:
Iain Watt
D7788B63F9794C7...
Name: Iain Watt
Title: Director - DPHS

The Family Resource Center at Gorham

4/7/2025
Date

Signed by:
Gabrielle Flanders
BE0FE1D63784AB...
Name: Gabrielle Flanders
Title: Executive Director

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

4/16/2025
Date

DocuSigned by:
Robyn Guarino
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Exhibit C-3 Budget, SFY 2025 - Amendment #4

New Hampshire Department of Health and Human Services	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - Home Visiting Formula Grant
Budget Period	G&C Approval Date - 6/30/25
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$348,014.45
2. Fringe Benefits	$69,602.89
3. Consultants	$2,000.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$3,138.00
5.(a) Supplies - Educational	$0.00
5.(b) Supplies - Lab	$0.00
5.(c) Supplies - Pharmacy	$0.00
5.(d) Supplies - Medical	$0.00
5.(e) Supplies Office	$12,000.84
6. Travel	$20,000.00
7. Software	$0.00
8. (a) Other - Marketing/ Communications	$5,000.00
8. (b) Other - Education and Training	$10,000.00
8. (c) Other - Other (specify below)	$0.00
Other (Occupancy)	$21,000.00
Other (Telephones)	$4,000.00
Other (Liability Insurance)	$350.00
Other (Annual Fees)	$2,000.00
Other (Audit and Legal)	$2,000.00
Other (Postage)	$350.00
9. Subrecipient Contracts	$0.00
Total Direct Costs	$499,456.18
Total Indirect Costs	$49,631.82
TOTAL	$549,088.00

Contractor Initial: GF (Initial)

Date: 4/7/2025

Exhibit C-14, Budget Sheet SFY 2026 - Amendment #4

New Hampshire Department of Health and Human Services	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/25 - 6/30/26
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$376,898.56
2. Fringe Benefits	$75,379.71
3. Consultants	$3,000.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$5,000.00
5.(a) Supplies - Educational	$0.00
5.(b) Supplies - Lab	$0.00
5.(c) Supplies - Pharmacy	$0.00
5.(d) Supplies - Medical	$0.00
5.(e) Supplies - Office	$20,000.00
6. Travel	$26,000.00
7. Software	$1,000.00
8. (a) Other - Marketing/ Communications	$22,000.00
8. (b) Other - Education and Training	$12,000.00
8. (c) Other - Other (specify below)	$0.00
Other (Occupancy)	$32,900.00
Other (Telephone)	$4,620.00
Other (Liability Insurance)	$1,000.00
Other (Annual Dues & Fees)	$2,200.00
Other (Audit & Legal)	$2,633.63
Other (Postage)	$401.16
9. Subrecipient Contracts	$0.00
Total Direct Costs	$585,033.06
Total Indirect Costs	$57,519.94
TOTAL	$642,553.00

Contractor Initials: GF (Initial)

Date: 4/7/2025

Exhibit C-15, Budget Sheet SFY 2027 - Amendment #4

New Hampshire Department of Health and Human Services	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/26 - 6/30/27
Indirect Cost Rate (if applicable)	10%
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$408,127.72
2. Fringe Benefits	$81,634.54
3. Consultants	$1,500.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$2,843.31
5.(a) Supplies - Educational	$0.00
5.(b) Supplies - Lab	$0.00
5.(c) Supplies - Pharmacy	$0.00
5.(d) Supplies - Medical	$0.00
5.(e) Supplies - Office	$10,000.00
6. Travel	$25,000.00
7. Software	$1,000.00
8. (a) Other - Marketing/ Communications	$5,400.00
8. (b) Other - Education and Training	$5,463.20
8. (c) Other - Other (specify below)	$0.00
Other (Occupancy)	$21,000.00
Other (Telephone)	$5,200.00
Other (Liability Insurance)	$1,000.00
Other (Annual Dues & Fees)	$2,500.00
Other (Audit & Legal)	$2,000.00
Other (Postage)	$448.80
Total Direct Costs	$573,117.57
Total Indirect Costs	$56,577.43
TOTAL	$629,695.00

Contractor Initials: GF (Initial)

Date: 4/7/2025

Exhibit C-16, Budget Sheet SFY 2028 - Amendment #4

New Hampshire Department of Health and Human Services	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/27 - 6/30/28
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$493,880.28
2. Fringe Benefits	$98,776.00
3. Consultants	$3,000.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$5,000.00
5.(a) Supplies - Educational	$0.00
5.(b) Supplies - Lab	$0.00
5.(c) Supplies - Pharmacy	$0.00
5.(d) Supplies - Medical	$0.00
5.(e) Supplies - Office	$10,490.99
6. Travel	$22,000.00
7. Software	$1,000.00
8. (a) Other - Marketing/ Communications	$12,000.00
8. (b) Other - Education and Training	$15,000.00
8. (c) Other - Other (specify below)	$0.00
Other (Occupancy)	$25,000.00
Other (Telephone)	$17,000.00
Other (Liability Insurance)	$500.00
Other (Annual Dues & Fees)	$2,500.00
Other (Audit & Legal)	$2,000.00
Other (Postage)	$500.00
9. Subrecipient Contracts	$0.00
Total Direct Costs	$708,647.27
Total Indirect Costs	$69,914.73
TOTAL	$778,562.00

Contractor Initials: GF (Initial)

Date: 4/7/2025

Exhibit C-17, Budget Sheet SFY 2029 - Amendment #4

New Hampshire Department of Health and Human Services	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/28 - 9/30/28
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$119,912.52
2. Fringe Benefits	$23,982.50
3. Consultants	$800.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$320.83
5.(a) Supplies - Educational	$0.00
5.(b) Supplies - Lab	$0.00
5.(c) Supplies - Pharmacy	$0.00
5.(d) Supplies - Medical	$0.00
5.(e) Supplies - Office	$635.13
6. Travel	$4,300.00
7. Software	$100.00
8. (a) Other - Marketing/ Communications	$300.00
8. (b) Other - Education and Training	$1,000.00
8. (c) Other - Other (specify below)	$0.00
Other (Occupancy)	$6,400.00
Other (Telephone)	$900.00
Other (Liability Insurance)	$100.00
Other (Annual Dues & Fees)	$2,200.00
Other (Audit & Legal)	$600.00
Other (Postage)	$100.00
9. Subrecipient Contracts	$0.00
Total Direct Costs	$161,650.98
Total Indirect Costs	$15,853.02
TOTAL	$177,504.00

Contractor Initials: GF (Initial)

Date: 4/7/2025

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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 THE FAMILY RESOURCE CENTER AT GORHAM is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on April 03, 1997. 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: **270161**

Certificate Number: **0007149517**

IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 4th day of April A.D. 2025.

David M. Scanlan

Secretary of State

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CERTIFICATE OF AUTHORITY

I, Christine Grant, hereby certify that:

1. I am a duly elected Clerk/Secretary/Officer of the Family Resource Center Gorham.

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 January 15, 2025, at which a quorum of the Directors/shareholders were present and voting.

VOTED: That Gabrielle Flanders (may list more than one person)

is duly authorized on behalf of the Family Resource Center Gorham 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: 4/4/25

Signature of Elected Officer
Name: Christine Grant
Title: President

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 04/02/2025

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	CONTACT NAME: Fairley Kenneally
E & S Insurance Services LLC 21 Meadowbrook Lane P O Box 7425 Gilford NH 03247-7425	PHONE (A/C, No, Ext): (603) 293-2791 FAX (A/C, No): (603) 293-7188 E-MAIL ADDRESS: fairley@esinsurance.net
INSURED	INSURER(S) AFFORDING COVERAGE / NAIC #
The Family Resource Center at Gorham 123 Main Street Gorham NH 03581	INSURER A: Great American Insurance Group — GAIG INSURER B: Travelers Property Casualty Co of America — 25674 INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES **CERTIFICATE NUMBER:** 23-24 wc **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	[X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [ ] PRO-JECT [ ] LOC [ ] OTHER:			MAC 3793560 18	05/10/2024	05/10/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG Abuse/Molestation	$ 1,000,000 $ 100,000 $ 5,000 $ 1,000,000 $ 3,000,000 $ 3,000,000 $ 1,000,000
	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS [ ] HIRED AUTOS ONLY [ ] NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ $ $ $
A	[X] UMBRELLA LIAB [ ] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $			UMB1137784 10	05/10/2024	05/10/2025	EACH OCCURRENCE AGGREGATE	$ 1,000,000 $ 1,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N: N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		6JUB4N33995325	01/01/2025	01/01/2026	[X] PER STATUTE [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ 500,000 $ 500,000 $ 500,000

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

CERTIFICATE HOLDER

State of NH Dept. of Health & Human Services
129 Pleasant Street
Concord NH 03301-3857

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

Fairley Kenneally

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the family resource center

123 Main Street Gorham, NH 03581 (603) 466-5190 www.frc123.org

Mission

To build healthier Families and stronger communities through positive relationships, programs and collaborations in the North Country.

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Financial Statements

FAMILY RESOURCE CENTER AT GORHAM

FOR THE YEARS ENDED JUNE 30, 2024 AND 2023
AND
INDEPENDENT AUDITORS' REPORT AND REPORTS ON COMPLIANCE AND INTERNAL CONTROL

Leone, McDonnell & Roberts
PROFESSIONAL ASSOCIATION

CERTIFIED PUBLIC ACCOUNTANTS

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FAMILY RESOURCE CENTER AT GORHAM

FINANCIAL STATEMENTS

FOR THE YEARS ENDED JUNE 30, 2024 AND 2023

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Leone, McDonnell & Roberts
Professional Association
CERTIFIED PUBLIC ACCOUNTANTS
DOVER • WOLFEBORO
NORTH CONWAY

INDEPENDENT AUDITORS' REPORT

To the Board of Directors of
Family Resource Center at Gorham

Opinion

We have audited the accompanying financial statements of Family Resource Center at Gorham (a New Hampshire nonprofit organization), which comprise the statements of financial position as of June 30, 2024 and 2023, 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 Family Resource Center at Gorham as of June 30, 2024 and 2023, 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 Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Family Resource Center at Gorham 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 the 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 Family

Resource Center at Gorham's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditors' 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 auditors' 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 Family Resource Center at Gorham'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 Family Resource Center at Gorham'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.

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Supplementary Information

Our audit was 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 October 10, 2024, on our consideration of Family Resource Center at Gorham'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 solely 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 Family Resource Center at Gorham'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 Family Resource Center at Gorham's internal control over financial reporting and compliance.

Leone, McDonnell & Roberts
Professional Association

North Conway, New Hampshire
October 10, 2024

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FAMILY RESOURCE CENTER AT GORHAM

STATEMENTS OF FINANCIAL POSITION
AS OF JUNE 30, 2024 AND 2023

ASSETS

	2024	2023
CURRENT ASSETS		
Cash and cash equivalents	$ 644,104	$ 1,100,311
Certificates of deposit	1,296,762	502,855
Grants receivable	507,482	459,651
Prepaid expenses	36,070	31,869
Total current assets	2,484,418	2,094,686
PROPERTY		
Leasehold improvements	110,754	100,805
Furniture and equipment	51,575	51,575
Buildings	70,015	70,015
Total	232,344	222,395
Less: accumulated depreciation	(133,630)	(122,681)
Property, net	98,714	99,714
OTHER ASSETS		
Investments	258,980	235,147
Agency deposits - cash	-	11,946
Operating lease right-of-use asset	56,319	44,094
Total other assets	315,299	291,187
TOTAL ASSETS	$ 2,898,431	$ 2,485,587

LIABILITIES AND NET ASSETS

CURRENT LIABILITIES		
Accounts payable	$ 19,381	$ 33,884
Accrued expenses	111,769	144,806
Agency deposits	-	11,946
Refundable advances	202,088	154,677
Current portion of right-of-use operating lease liability	25,760	13,027
Total current liabilities	358,998	358,340
OTHER LIABILITIES		
Right-of-use operating lease liability, less current portion shown above	30,559	31,067
Total liabilities	389,557	389,407
NET ASSETS		
Without donor restrictions		
Designated for long-term building maintenance	46,110	46,325
Undesignated	2,176,334	1,780,245
Total net assets without donor restrictions	2,222,444	1,826,570
With donor restrictions	286,430	269,610
Total net assets	2,508,874	2,096,180
TOTAL LIABILITIES AND NET ASSETS	$ 2,898,431	$ 2,485,587

See Notes to Financial Statements

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FAMILY RESOURCE CENTER AT GORHAM

STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2024

	Without Donor Restrictions	With Donor Restrictions	Total
REVENUE AND SUPPORT			
Grants	$ 2,171,495	$ -	$ 2,171,495
Medicaid	1,479,969	-	1,479,969
In-kind contributions	95,172	-	95,172
Contributions	40,555	-	40,555
Agency rents	49,222	-	49,222
Investment return	-	24,145	24,145
Interest income	50,610	-	50,610
Other income	11,013	-	11,013
Net assets released from restrictions	7,325	(7,325)	-
Total revenue and support	3,905,361	16,820	3,922,181
EXPENSES			
Program services	3,137,091	-	3,137,091
Management and general	372,396	-	372,396
Total expenses	3,509,487	-	3,509,487
CHANGE IN NET ASSETS	395,874	16,820	412,694
NET ASSETS, BEGINNING OF YEAR	1,826,570	269,610	2,096,180
NET ASSETS, END OF YEAR	$ 2,222,444	$ 286,430	$ 2,508,874

See Notes to Financial Statements

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FAMILY RESOURCE CENTER AT GORHAM

STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2023

	Without Donor Restrictions	With Donor Restrictions	Total
REVENUE AND SUPPORT			
Grants	$ 1,720,241	$ -	$ 1,720,241
Medicaid	1,708,785	-	1,708,785
In-kind contributions	126,817	-	126,817
Contributions	50,979	-	50,979
Agency rents	45,841	-	45,841
Investment return	-	12,145	12,145
Interest income	3,664	-	3,664
Other income	14,017	-	14,017
Net assets released from restrictions	-	-	-
Total revenue and support	3,670,344	12,145	3,682,489
EXPENSES			
Program services	2,973,339	-	2,973,339
Management and general	455,443	-	455,443
Total expenses	3,428,782	-	3,428,782
CHANGE IN NET ASSETS	241,562	12,145	253,707
NET ASSETS, BEGINNING OF YEAR	1,585,008	257,465	1,842,473
NET ASSETS, END OF YEAR	$ 1,826,570	$ 269,610	$ 2,096,180

See Notes to Financial Statements

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FAMILY RESOURCE CENTER AT GORHAM

STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2024

	Program Services	Management and General	Total
Personnel Costs			
Salaries and wages	$ 1,937,545	$ 217,230	$ 2,154,775
Employee benefits	251,294	25,950	277,244
Payroll taxes	145,714	17,051	162,765
Program activities	344,621	-	344,621
Travel	177,019	1,694	178,713
Food and supplies	96,492	1,520	98,012
Training	41,607	203	41,810
Rent	39,833	-	39,833
Legal and professional fees	12,875	25,698	38,573
Liability insurance	23,658	7,254	30,912
Telephone and internet	28,320	1,835	30,155
Heat and utilities	-	28,567	28,567
Contractors and consultants	18,217	1,812	20,029
Repairs and maintenance	-	13,961	13,961
Technology	3,270	9,049	12,319
Depreciation	-	10,949	10,949
Advertising	8,969	726	9,695
Small equipment	6,397	-	6,397
Property insurance	-	5,648	5,648
Payroll processing service	-	2,302	2,302
Postage and shipping	818	453	1,271
Conferences and meetings	-	484	484
Printing	442	-	442
Bank charges	-	10	10
Total	$ 3,137,091	$ 372,396	$ 3,509,487

See Notes to Financial Statements

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FAMILY RESOURCE CENTER AT GORHAM

STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2023

	Program Services	Management and General	Total
Personnel Costs			
Salaries and wages	$ 1,822,061	$ 257,988	$ 2,080,049
Employee benefits	234,890	28,346	263,236
Payroll taxes	144,149	19,470	163,619
Travel	223,745	1,965	225,710
Food and supplies	205,388	2,870	208,258
Program activities	117,879	-	117,879
Contractors and consultants	65,312	19,652	84,964
Training	52,255	806	53,061
Legal and professional fees	4,868	36,126	40,994
Rent	33,633	-	33,633
Heat and utilities	-	30,004	30,004
Telephone and internet	26,961	1,685	28,646
Liability insurance	16,631	3,981	20,612
Repairs and maintenance	-	19,601	19,601
Technology	2,231	14,113	16,344
Small equipment	11,586	1,011	12,597
Advertising	10,244	1,585	11,829
Depreciation	-	9,496	9,496
Property insurance	-	2,626	2,626
Payroll processing service	-	2,223	2,223
Printing	873	654	1,527
Postage and shipping	633	450	1,083
Conferences and meetings	-	661	661
Bank charges	-	130	130
Total	$ 2,973,339	$ 455,443	$ 3,428,782

See Notes to Financial Statements

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FAMILY RESOURCE CENTER AT GORHAM

STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED JUNE 30, 2024 AND 2023

	2024	2023
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	$ 412,694	$ 253,707
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Unrealized gain on investments	(18,305)	(6,796)
Realized gains on investments	(935)	(424)
Depreciation	10,949	9,496
(Increase) decrease in operating lease right-of-use asset	(22,052)	4,879
Increase (decrease) in operating lease liability	22,052	(4,879)
(Increase) decrease in assets:		
Grants receivable	(47,831)	147,520
Prepaid expenses	(4,201)	(16,266)
Increase (decrease) in liabilities:		
Accounts payable	(14,503)	13,738
Accrued expenses	(33,037)	42,510
Due to State of New Hampshire	-	(32,257)
Agency deposits	(11,946)	(18,628)
Refundable advances	47,411	121,345
NET CASH PROVIDED BY OPERATING ACTIVITIES	340,296	513,945
CASH FLOWS FROM INVESTING ACTIVITIES		
Proceeds from the sale of investments	41,298	40,702
Purchase of investments and certificates of deposits	(839,798)	(461,812)
Additions to property and equipment	(9,949)	(12,353)
NET CASH USED IN INVESTING ACTIVITIES	(808,449)	(433,463)
NET INCREASE (DECREASE) IN CASH AND EQUIVALENTS AND RESTRICTED CASH	(468,153)	80,482
CASH AND EQUIVALENTS AND RESTRICTED CASH, BEGINNING OF YEAR	1,112,257	1,031,775
CASH AND EQUIVALENTS AND RESTRICTED CASH, END OF YEAR	$ 644,104	$ 1,112,257
CASH BALANCES		
Cash and equivalents, operating	$ 644,104	$ 1,100,311
Agency deposits - cash	-	11,946
Total cash and equivalents and restricted cash	$ 644,104	$ 1,112,257

See Notes to Financial Statements

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FAMILY RESOURCE CENTER AT GORHAM

NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED JUNE 30, 2024 AND 2023

1. ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization

The Family Resource Center at Gorham (the Resource Center) is a voluntary, not-for-profit corporation incorporated under the laws of the State of New Hampshire (RSA 292) and organized exclusively for tax-exempt charitable and educational purposes. The principal activity of the Resource Center is to deliver programming that works to build healthier families and stronger communities.

The programs are preventative and help to remove obstacles by providing pathways to healthy family function and early childhood development to at-risk and underserved populations in northern New Hampshire.

Evidence-based home visiting delivers parent education and support that empowers parents to build healthy family dynamics. They address issues such as substance misuse, lack of education, safe housing and employment. The Resource Center provides community based social and emotional support through workshops, support groups, and counseling to promote family success.

Basis of Accounting

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

Basis of Presentation

The financial statements of the Resource Center have been prepared in accordance with U.S. generally accepted accounting principles (US GAAP), which require the Resource Center to report information regarding its financial position and activities according to the following net asset classifications:

Net assets without donor restrictions – Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Resource Center. These net assets may be used at the discretion of the Resource Center's management and board of directors.

Net assets with donor restrictions – Net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Resource Center or by passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

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Cash and Cash Equivalents
Cash and cash equivalents include all monies in banks and liquid investments with maturity dates of less than three months. The carrying value of cash and cash equivalents approximates fair value because of the short maturities of those financial instruments.

Certificates of Deposits
The certificates of deposits are carried at fair value. Interest is accrued and recognized in income when earned.

Grants Receivable
Grants receivable from various public and other nonprofit organizations at **June 30, 2024** and 2023 were considered fully collectable and therefore no provisions for bad debts have been made in these financial statements.

Investments
Investments are accounted for according to Accounting Standards Codification (ASC) 958-320 *Not For Profit Entities – Investments – Debt and Equity Securities.* Under ASC 958-320, investments in marketable securities with readily determinable fair values and all investments in debt securities are valued at their fair values in the statement of financial position. Unrealized gains and losses are included in the change in net assets. Fair values of investments are based on quoted prices in active markets for identical investments.

Property and Equipment
Property and equipment is recorded at cost if purchased and at fair value if donated. Depreciation is computed using the straight-line method over the estimated useful lives of the related assets as follows:

Furniture and equipment	5 - 15 years
Leasehold improvements	20 years
Buildings	39 years

The Resource Center's policy is to capitalize all assets over $2,500 with an expected life of one year or longer. Assets sold or otherwise disposed of are removed from the accounts, along with the related depreciation allowance, and any gain or loss is recognized.

Refundable Advances
The Resource Center records grant/contract revenue as a refundable advance until it is expended for the purpose of the grant/contract, at which time it is recognized as revenue.

Revenue Recognition
In May of 2014, the FASB issued Accounting Standards Update (ASU) 2014-09, *Revenue from Contracts with Customers (Topic 606).* This ASU is a comprehensive revenue recognition model that requires an organization to recognize revenue to depict the transfer of goods or services to a customer at an amount that reflects the consideration it expects to receive in exchange for those goods or services. Contracts and transactions with customers predominantly contain a single performance obligation.

The Resource Center records the following exchange transaction revenue in its statements of activities for the years ended June 30, 2024 and 2023:

Program Service Fees – Revenue from providing family support services under the State of New Hampshire's Medicaid program. Revenue from providing family support services is recognized at the completion of providing such services.

Agency Rents – Revenue from the rental of office space is recognized over time.

Contributions

Contributions received are recorded as increases in net assets without donor restrictions or net assets with donor restrictions depending on the existence and/or nature of any donor or time restrictions. A purpose restriction permits the Resource Center to use contributed assets as specified for a particular purpose. Net assets restricted in perpetuity are those that are required to be permanently maintained, but income from such investments may be used for specified purposes. All donor restricted support is reported as an increase in net assets with donor restrictions, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), net assets are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions.

Contributions of donated non-cash assets are recorded at their fair values in the period received. Contributions of donated services that create or enhance non-financial assets or that require specialized skills, which are provided by the individuals possessing those skills, and would typically need to be purchased if not provided by donations, are recorded at their fair values in the period received.

Functional Allocation of Expenses

The costs of providing the various programs and other activities have been summarized on a functional basis. Accordingly, costs have been allocated among the program services and supporting activities benefited. Such allocations have been determined by management on an equitable basis.

The expenses that are allocated include the following:

Expense	Method of Allocation
Salaries and benefits	Time and effort
Occupancy	Square footage
Depreciation	Square footage
All other expenses	Direct assignment

Income Taxes

The Resource Center is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. In addition, the Resource Center qualifies for the charitable contribution deduction under Section 170(b)(1)(a) and has been classified as an organization that is not a private foundation.

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Management has evaluated the Resource Center's tax positions and concluded that the Resource Center has maintained its tax-exempt status and has taken no uncertain tax positions that would require adjustment to the financial statements.

Advertising
Advertising costs are expensed as incurred.

Reclassifications
Certain amounts in the prior year financial statements have been reclassified for comparative purposes to conform with the presentation in the current year financial statements.

Fair Value of Financial Instruments
ASC Topic No. 820-10, *Fair Value Measurement*, provides a definition of fair value which focuses on an exit price rather than an entry price, establishes a framework in generally accepted accounting principles for measuring fair value which emphasizes that fair value is a market based measurement, not an entity specific measurement, and requires expanded disclosures about fair value measurements. In accordance with FASB ASC 820-10, the Resource Center may use valuation techniques consistent with market, income and cost approaches to measure fair value. As a basis for considering market participant assumptions in fair value measurements, ASC Topic 820-10 establishes a fair value hierarchy, which prioritizes the inputs used in measuring fair values. The hierarchy gives the highest priority to Level 1 measurements and the lowest priority to Level 3 measurements. The three levels of the fair value hierarchy under ASC Topic 820-10 are described as follows:

> ***Level 1*** – Inputs to the valuation methodology are quoted prices available in active markets for identical investments as of the reporting date.
>
> ***Level 2*** - Inputs to the valuation methodology are other than quoted market prices in active markets, which are either directly or indirectly observable as of the reporting date, and fair value can be determined through the use of models or other valuation methodologies.
>
> ***Level 3*** - Inputs to the valuation methodology are unobservable inputs in situations where there is little or no market activity for the asset or liability and the reporting entity makes estimates and assumptions related to the pricing of the asset or liability including assumptions regarding risk.

At June 30, 2024 and 2023, the Resource Center's investments were all classified as Level 1 and were based on fair value.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

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The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2024 and 2023.

Equities: Valued at the closing market price on the stock exchange where they are traded (primarily the New York Stock Exchange).

Mutual Funds: Valued at the net asset value (NAV) of shares held by the Resource Center at year-end.

The preceding method may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Resource Center believes its valuation method is appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

New Accounting Pronouncement

As of July 1, 2023, the Resource Center adopted FASB ASU 2016-13, *Financial Instruments-Credit Losses (Topic 326): Measurement of Credit Losses on Financial Instruments*, as amended, which modifies the measurement of expected credit losses on certain financial instruments. The Resource Center adopted this new guidance utilizing the modified retrospective transition method. The adoption of this Standard did not have a material impact on the Resource Center's financial statements but did change how the allowance for credit losses is determined.

2. LIQUIDITY AND AVAILABILITY

The following represents the Resource Center's financial assets as of June 30, 2024 and 2023:

	2024	2023
Cash and cash equivalents	$ 644,104	$ 1,100,311
Certificates of deposit	1,296,762	502,855
Grants receivable	507,482	459,651
Investments	258,980	235,147
Agency deposits - cash	-	11,946
Total financial assets	2,707,328	2,309,910
Less amounts not available to be used within one year:		
Net assets with donor restrictions	286,430	269,610
Amount board designated for long-term maintenance	46,110	46,325
Agency deposits - cash	-	11,946
Amounts not available within one year	332,540	327,881
Financial assets available to meet general expenditures over the next twelve months	$ 2,374,788	$ 1,982,029

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The Resource Center's goal is generally to maintain financial assets to meet 90 days of operating expenses (approximately $880,000) As part of its liquidity plan, excess cash is invested in short-term investments, including money market accounts and certificates of deposits.

3. INVESTMENTS

Investments presented in the financial statements are stated at fair value. Realized gains and losses are determined on the specific identification method. Gains and losses (realized and unrealized) are reported in the statement of activities as increases or decreases to net assets without donor restrictions, except for those investments for which their use is restricted. Information on investments at June 30, 2024 and 2023 is presented as follows:

	2024		2023	
	Cost	Market Value	Cost	Market Value
Equities	$ 107,251	$ 135,540	$ 106,039	$ 120,345
Mutual Funds	125,355	123,440	121,115	114,802
Totals	$ 232,606	$ 258,980	$ 227,154	$ 235,147

Components of Investment Return:

	2024	2023
Interest and dividends	$ 8,197	$ 8,558
Unrealized gain	18,305	6,796
Realized gain	935	424
Investment fees	(3,292)	(3,633)
Total investment return	$ 24,145	$ 12,145

4. AGENCY DEPOSITS

During the year ended June 30, 2021, the Resource Center began serving as a fiscal agent for Small Acts North, a Northern New Hampshire not-for-profit volunteer group that supports the community by providing small acts of kindness. The fiscal agent relationship ended during the year ended June 30, 2024. The amount held on behalf of Small Acts North as of June 30, 2023 was $11,946.

5. DEMAND NOTE PAYABLE

In April 2013, the Resource Center entered into a revolving line of credit agreement with a bank. The revolving line of credit agreement provided for maximum borrowings up to $75,000 and was collateralized by a certificate of deposit held at the same bank. This line of credit agreement was closed in May 2023.

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6. CONCENTRATION OF CREDIT RISK - CASH

The Resource Center maintains cash balances that, at times, may exceed federally insured limits. The cash balances are insured by the Federal Deposit Insurance Corporation (FDIC) up to $250,000 per bank at June 30, 2024 and 2023. The Resource Center has not experienced any losses in such accounts and believes it is not exposed to any significant risk with these accounts. Cash balances in excess of FDIC insured limits amounted to $469,037 and $1,136,663 at June 30, 2024 and June 30, 2023, respectively.

During the year ended June 30, 2024, the Resource Center deposited over $1,000,000 into an ICS money market account to obtain FDIC insurance on funds in excess of $250,000.

7. CONCENTRATION OF RISK

For the years ended June 30, 2024 and 2023, approximately 38% and 46% of the total revenue was derived from Medicaid, respectively.

In order for the Resource Center to receive Medicaid funding, they must be formally approved by the State of New Hampshire, Department of Health and Human Services, Division of Community Based Care Services, Bureau of Behavioral Health, and Bureau of Developmental Services as the provider of services for individuals with mental health illnesses and developmentally disabled individuals, for that region.

Medicaid receivables comprise approximately 19% and 11% of the total accounts receivable balances at June 30, 2024 and 2023, respectively.

8. NET ASSETS

Net assets with donor restrictions were as follows for the years ended **June 30, 2024** and 2023:

	2024	2023
Purpose restrictions:		
Flooring/carpeting	$ 6,155	$ 13,480
Community events	15,000	15,000
Restrictions in perpetuity:		
Endowment	265,275	241,130
Total net assets with donor restrictions	$ 286,430	$ 269,610

Net assets without donor restrictions for the years ended June 30, 2024 and 2023 are as follows:

	2024	2023
Undesignated	$ 2,176,334	$ 1,780,245
Board designated	46,110	46,325
Total net assets without donor restrictions	$ 2,222,444	$ 1,826,570

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9. NET ASSETS WITHOUT DONOR RESTRICTIONS – BOARD DESIGNATED

By vote of the Board of Directors, funds have been designated for long-term building maintenance. Net assets without donor restrictions designated by the board was $46,110 and $46,325 at June 30, 2024 and 2023, respectively.

10. ENDOWMENT FUND

In 2007, the Resource Center established a permanent endowment fund for the organization with the intent of accumulating donations and interest earnings of one million dollars. Per the laws of the State of New Hampshire (RSA 292-B:4), 7% of the fair market value of the endowment fund, calculated on the basis of fair market value determined at least quarterly and averaged over a period of not less than three years may be appropriated for operating account expenditures. No distributions were taken during the years ended June 30, 2024 and 2023.

The Not-for-Profit Entities Topic of the FASB ASC (ASC 958-205 and subsections) intends to improve the quality of consistency of financial reporting of endowments held by not-for-profit organizations. This Topic provides guidance on classifying the net assets associated with donor-restricted endowment funds held by organizations that are subject to an enacted version of the Uniform Prudent Management Institutional Funds Act (UPMIFA). New Hampshire has adopted UPMIFA. The Topic also requires additional financial statement disclosures on endowments and related net assets.

The Resource Center has followed an investment and spending policy to ensure a total return (income plus capital change) necessary to preserve the principal of the fund and at the same time, provide a dependable source of support to help build healthier families and stronger communities.

In recognition of the prudence required of fiduciaries, the Resource Center only invests the fund in cash and mutual funds. The Resource Center has taken a risk adverse approach to managing the endowment fund in order to mitigate financial market risk such as interest rate, credit and overall market volatility, which could substantially impact the fair value of the endowment fund at any given time.

Fund activity for June 30, 2024 and 2023 was as follows:

	Balances as of June 30, 2023	Activity for the Year Ended June 30, 2024	Balances as of June 30, 2024
Permanent gifts	$ 175,809	$ -	$ 175,809
Investment earnings	83,398	8,197	91,595
Realized gain	69,350	935	70,285
Transfer to unrestricted	(41,590)	-	(41,590)
Investment expense	(53,628)	(3,293)	(56,921)
Unrealized gain	7,791	18,305	26,096
	$ 241,130	$ 24,144	$ 265,274

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	Balances as of June 30, 2022	Activity for the Year Ended June 30, 2023	Balances as of June 30, 2023
Permanent gifts	$ 175,809	$ -	$ 175,809
Investment earnings	74,840	8,558	83,398
Realized gain	68,926	424	69,350
Transfer to unrestricted	(41,590)	-	(41,590)
Investment expense	(49,995)	(3,633)	(53,628)
Unrealized gain (loss)	995	6,796	7,791
	$ 228,985	$ 12,145	$ 241,130

11. OPERATING LEASES

The Resource Center leases its current facility from the Town of Gorham. In lieu of rent, the Resource Center is responsible for the cost of repairs and maintenance, insurance, utilities and rubbish removal. The lease term is from May 1, 2021 until April 30, 2026.

The Resource Center in turn sublets space in the facility to other nonprofit and community agencies at an average rate of approximately $17 per square foot. All participating organizations must provide services to a client base that is at least 66% low and moderate income.

During the year ended June 2021, the Resource Center entered into a lease agreement for office space in Littleton, New Hampshire. The terms of the lease call for monthly payments of $1,000 through October 31, 2025. Rent expense under this agreement aggregated $12,000 for the years ended June 30, 2024 and 2023.

During March of 2023, the Resource Center entered into a lease agreement for two copiers in Gorham, New Hampshire. The terms of the lease agreement calls for monthly payments of $130 through March 9, 2028. Rent expense under this agreement aggregated $1,560 and $520 for the years ended June 30, 2024 and 2023, respectively.

During April of 2024, the Resource Center entered into a lease agreement for office space in Lancaster, NH. The terms of the lease call for monthly payments of $1,000, with rent increasing annually by $100 per month. The initial term of the lease is for four years beginning on May 1, 2024, through April 30, 2027. Rent expense under this agreement aggregated $2,000 for the year ended June 30, 2024.

The right-of-use asset and related operating lease liability for the above leases amounted to $56,319 and $44,094 for the years ended June 30, 2024 and 2023, respectively. The weighted average lease term was 2.63 and 3.32 years for the years ended June 30, 2024 and 2023, respectively. The weighted average discount rate was 1.24% and 1.38% for the years ended June 30, 2024 and 2023, respectively.

Total lease expense under these agreements totaled $15,560 and $12,520 for the years ended June 30, 2024 and 2023, respectively.

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Minimum future lease payments required under the operating lease agreement in effect at June 30, 2024 were as follows:

Year Ending June 30	Amount
2025	$ 25,760
2026	18,960
2027	13,560
2028	1,040
Total	$ 59,320

12. IN-KIND CONTRIBUTIONS

The Resource Center received the following in-kind contributions during the years ended **June 30, 2024** and 2023:

	2024	2023
Donated clothing, toys, and household supplies	$ 95,172	$ 126,817

The Resource Center's policy related to in-kind contributions is to utilize the assets given to carry out the mission of the Resource Center. If an asset is provided that does not allow the Resource Center to utilize it in its normal course of business, the asset will be sold at its fair value as determined by appraisal or specialist depending on the type of asset.

Donated supplies for the years ended June 30, 2024 and 2023 were considered contributions without donor restrictions and were recorded as food and supplies expense on the accompanying statements of functional expenses.

13. SUBSEQUENT EVENTS

Subsequent events are events or transactions that occur after the statement of financial position date, but before financial statements are available to be issued. Recognized subsequent events are events or transactions that provide additional evidence about conditions that existed at the statement of financial position date, including the estimates inherent in the process of preparing financial statements. Non recognized subsequent events are events that provide evidence about conditions that did not exist at the statement of financial position date but arose after that date. Management has evaluated subsequent events through October 10, 2024, the date the June 30, 2024 financial statements were available for issuance.

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FAMILY RESOURCE CENTER AT GORHAM

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED JUNE 30, 2024

FEDERAL GRANTOR/ PASS-THROUGH GRANTOR/ PROGRAM TITLE	FEDERAL ALN	PASS THROUGH GRANTOR NUMBER	FEDERAL EXPENDITURES
U.S. DEPT. OF HEALTH AND HUMAN SERVICES			
Passed through State of New Hampshire			
Department of Health and Human Services, Office of Human Services,			
Division of Children, Youth and Families			
Stephanie Tubbs Jones Child Welfare Services Program	93.645	2001NHCWSS	$ 9,523
Promoting Safe and Stable Families	93.556	2001FPSS	46,850
Social Services Block Grant	93.667	2001NHSOSR	161,473
Temporary Assistance for Needy Families	93.558	19NHTANF	386,827
Maternal & Child Health Services Block Grant for States	93.994	90CA1858	12,512
Maternal & Child Health Services Block Grant for States	93.994	05-95-90-902010-5190	56,946
		TOTAL 93.994	69,458
Maternal, Infant and Early Childhood Home Visiting Program	93.870	05-95-90-902010-5896	359,031
ARPA - Maternal, Infant and Early Childhood Home Visiting Program	93.870	05-95-90-902010-2451	39,190
		TOTAL 93.870	398,221
Activities to Support (STLT) Health Department Response to Public Health or Healthcare Crises	93.391	05-95-90-902010-5771	183,285
Foster Care - Title IV - E	93.658	05-95-042-421010-29580000	39,772
Total U.S. Department of Health and Human Services			$ 1,295,409
Total expenditures of federal awards			$ 1,295,409

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FAMILY RESOURCE CENTER AT GORHAM

NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS FOR THE YEAR ENDED JUNE 30, 2024

NOTE A BASIS OF PRESENTATION

The accompanying schedule of expenditures of federal awards (the Schedule) includes the federal grant activity of Family Resource Center at Gorham under programs of the federal government for the year ended June 30, 2024. 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 Family Resource Center at Gorham, it is not intended to and does not present the financial position, changes in net assets, or cash flows of Family Resource Center.

NOTE B SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in Uniform Guidance, where in certain types of expenditures are not allowable or are limited to reimbursement. Negative amounts shown on the Schedule represent adjustments or credits made in the normal course of business to amounts reported as expenditures in prior years.

NOTE C INDIRECT COST RATE

Family Resource Center at Gorham has elected to use the 10-percent de minimis indirect cost rate allowed under Uniform Guidance.

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INDEPENDENT AUDITORS' 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*

To the Board of Directors of
Family Resource Center at Gorham

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 Family Resource Center at Gorham (a New Hampshire nonprofit organization), which comprise the statements of financial position as of June 30, 2024 and 2023, the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements, and have issued our report thereon dated October 10, 2024.

Report on Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered Family Resource Center at Gorham'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 Family Resource Center at Gorham's internal control. Accordingly, we do not express an opinion on the effectiveness of Family Resource Center at Gorham'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.

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Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether Family Resource Center at Gorham'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 organization'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 organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Leone, McDonnell & Roberts
Professional Association

North Conway, New Hampshire
October 10, 2024

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INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

To the Board of Directors of
Family Resource Center at Gorham

Report on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Family Resource Center at Gorham'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 Family Resource Center at Gorham's major federal programs for the year ended June 30, 2024. Family Resource Center at Gorham's major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

In our opinion, Family Resource Center at Gorham 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, 2024.

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 Auditors' Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of Family Resource Center at Gorham 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 Family Resource Center at Gorham'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 Family Resource Center at Gorham's federal programs.

Auditors' 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 Family Resource Center at Gorham'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 Family Resource Center at Gorham'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 Family Resource Center at Gorham'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 Family Resource Center at Gorham'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 Family Resource Center at Gorham'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.

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Our consideration of internal control over compliance was for the limited purpose described in the Auditors' 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.

Leone, McDonnell & Roberts
Professional Association

North Conway, New Hampshire
October 10, 2024

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FAMILY RESOURCE CENTER AT GORHAM

SCHEDULE OF FINDINGS AND QUESTIONED COSTS
FOR THE YEAR ENDED JUNE 30, 2024

A. SUMMARY OF AUDITORS' RESULTS

1. The auditors' report expresses an unmodified opinion on whether the financial statements of Family Resource Center at Gorham were prepared in accordance with GAAP.

2. No significant deficiencies relating to the audit of the financial statements are reported in the *Independent Auditors' 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.* No material weaknesses are reported.

3. No instances of noncompliance material to the financial statements of Family Resource Center at Gorham, which would be required to be reported in accordance with Government Auditing Standards, were disclosed during the audit.

4. No significant deficiencies in internal control over major federal award programs are reported in the *Independent Auditors' Report on Compliance for Each Major Program and on Internal Control Over Compliance Required by Uniform Guidance.* No material weaknesses are reported.

5. The auditors' report on compliance for the major federal award programs for Family Resource Center at Gorham expresses an unmodified opinion on all major federal programs.

6. There were no audit findings that are required to be reported in accordance with 2 CFR 200.516(a).

7. The programs tested as major programs were: U.S. Department of Health and Human Services, Maternal, Infant & Early Childhood Home Visiting Program, ALN – 93.870.

8. The threshold for distinguishing between Type A and B programs was $750,000.

9. Family Resource Center at Gorham Family Resource Center at Gorham was determined to be a low-risk auditee.

B. FINDINGS – FINANCIAL STATEMENTS AUDIT

None

C. FINDINGS AND QUESTIONED COSTS–MAJOR FEDERAL AWARD PROGRAM AUDIT

None

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the family resource center

Board of Directors

Christine Grant, President
Chelsea Andrea, APRN, Vice President
Dawn Cross, Secretary
Heidi Barker
Margo Sullivan
Chasity Murphy
Michele Santy
Sarah Blais

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GABRIELLE FLANDERS

[redacted]

OBJECTIVE

Highly skilled and empathetic professional with experience leading, managing and supervising professional staff in social services. Past work has included supervisory support; coaching; program planning and development and educational parenting support. Active listener with a knack for building lasting professional relationships.

EXPERIENCE

THE FAMILY RESOURCE CENTER MARCH 2016– PRESENT

- **EXECUTIVE DIRECTOR**
  DECEMBER 2024- PRESENT
- Provide strategic leadership for the organization, overseeing programs, operations, and staff.

- **DIRECTOR OF FAMILY SUPPORT SERVICES**
  NOVEMBER 2022- DECEMBER 2024
- **ASSOCIATE DIRECTOR OF FAMILY SUPPORT**
  JUNE 2018- NOVEMBER 2022
- **PROGRAM MANAGER**
  MARCH 2016- JUNE 2018

I-SOCIAL NH DOE, BUREAU OF STUDENT SUPPORT DECEMBER 2018 – DECEMBER 2019

PYRAMID MODEL COACH

- Provide social emotional learning practice-based coaching to designated implementation sites across northern and southern New Hampshire.
- Responsible for maintaining and submitting electronic and paper-based records in a secure manner to preserve confidentiality and document successes and progress.
- Observed workers performance and provided feedback while having tough conversations when necessary.

COOS COALITION FOR YOUNG CHILDREN & FAMILIES

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SEL COACHING COORDINATOR **MARCH 2016– DECEMBER 2024**

- Created and maintained an effective and efficient Coaching System around SEL to support the growing needs of the local organizations.
- Scheduled and planned meetings and conferences, including site-to-site video conferencing calls, which helped to streamline business operations.
- Created and offered additional materials to enhance coaching around SEL. Reduced process gaps by supporting the effective coaching of new practitioners on best practices and protocols through supporting and creating a process.
- Delivered instruction on a broad range of topics, integrating audio-visual presentations and training materials.
- Mentored and coached new coaches by offering insight into successful procedures and implementation of program training. Created systems to facilitate in-house training and coaching; overseeing all registrations for training and professional development for all local organizations.
- Overseeing ongoing coaching in Pyramid Model, Growing Great Kids, and Mind in the Making.
- Linked with local agencies to learn their coaching needs in regard to Social Emotional Learning and supporting their engagement.

EDUCATION

MAY 2015
BACHELOR OF SCIENCE, NEW ENGLAND COLLEGE
Dean's List

SKILLS

- Reliable & Flexible
- Self-starter and Quick learner
- Ability to analyze data & be creative with outcomes
- Strength based & growth minded
- Experience supervising/managing & coaching a team
- Active Listener
- Effective public speaker
- Strategy & system thinker
- Proficient computer skills including MS Word, Excel, PowerPoint and Outlook
- Ability to multi-task, be versatile and deal with crisis situations while maintaining excellent time management skills and professionalism
- Knack for learning new technology & software

BOARDS, COMMITTEES, VOLUNTEERING, ETC.

- North Country Maternity Network Advisory Board *2022- Present*
- Raising Strong Families Steering Committee *2021- Present*
- Substance Exposed Infant Pilot Project 2019-2020
- Coos Coalition for Young Children Leadership Workgroup

TRAINING, CERTIFICATIONS, SKILLS

- Peer Recovery Support Worker- Certified RCA
- Dialectical Behavior Therapy (DBT)
- Circle of Security- Facilitator
- Boundary Spanning Leadership
- Policy & Procedure writing
- Motivational Interviewing
- Practice-Based Coach
- Reflective Supervision
- ASQ: Watch Me Grow- Facilitator

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Briana M. Shannon

[redacted]

Objective

Committed to building healthier families and stronger communities in the North Country of New Hampshire through positive relationships, innovative programs, and strategic partnerships.

Work Experience

Director of Family Support Services
The Family Resource Center at Gorham - Gorham, NH
January 2025 to Present
Day-to-day management of the Family Support Programs

- Provide reflective supervision to Supervisors and Program Managers
- Facilitate program meetings including FS/RR Leadership Meeting
- Assists with writing and managing all grants associated with the various programs, as well as outcome reporting (monthly and annual) and budgets
- Designs policies, procedures, and strategies to meet the objectives of each program and to ensure compliance with applicable local, state, and federal laws
- Utilizes data-driven analysis and forecasting to measure and evaluate the performance of programs
- Communicate with a wide range of individuals, including program participants, board members, civic leaders, elected officials, government employees, representatives of funders, agency staff, community service providers, and the public to effectively promote programs and establish a professional working relationship
- Manages the review and renewal of contracts with managed care
- Anticipates and prepares programs for annual audits

Program Manager-Healthy Families America
The Family Resource Center at Gorham - Gorham, NH
July 2018 to January 2025

- Manage daily program operations for the Healthy Families America Program.
- Track visit completion rates, and update tracking forms
- Oversee program supervisor's daily performance while providing growth opportunities.
- Provide high quality reflective supervision and support other program leaders
- Recruit, train, supervise, coach, evaluate, and support program staff
- Maintain program fidelity and accreditation, in accordance with national standards
- Draft and manage program budgets
- Ensure program compliance with state and local contracts-

Supervisor
The Family Resource Center-Gorham, NH
February 2018-July 2018

- Provide administrative, clinical and reflective supervision to staff weekly.
- Complete detailed documentation of supervisory sessions.
- Provide education, training, and mentoring for new staff.

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- Support Program Manager with accreditation preparation.
- Work collectively with staff to create healthy work-life balance supporting individual growth.
- Edit, revise, track staff's weekly documentation, developing plans to support incomplete measures.
- Work collectively with Program Manager to track and develop plans for improvement for low benchmark measures.

Family Support Specialist
The Family Resource Center - Gorham, NH
February 2016 to July 2018

- Provide parent education to referred families by use of visuals and specialized educational tools.
- Document clients contact notes and complete data updates.
- Meet regularly with supervisor for supervision and case consultation.
- Utilize all professional development opportunities provided
- Communicate openly with referral sources

Additional Employment history available upon request

Education

Groveton High School-High School diploma
Southern NH University-2019- Not currently enrolled

Skills

- Microsoft Office
- Microsoft Word
- Microsoft Excel
- Microsoft PowerPoint
- Program Management
- Budgeting
- Project / Program Management
- Project Management
- Process Improvement
- Reflective Practice/Reflective Supervision
- Strategic Planning
- Motivational Interviewing
- Meeting planning
- Event Organization/collaboration

Certifications and Trainings
Growing Great Kids Curriculum--- July 2016
Motivational Interviewing--- March 2016
Recovery Coach Academy--- June 2019
Infant Mental Health First Aide--- March 2016 & May 2023
Standards of Quality--- November 2020 to November 2022
Integrated Strategies for Family Support--- September 2016
Parent Survey and Community Outreach training--- April 2017
Families, Resiliency and Opportunities for Growth training--- December 2021
Families, Resiliency, and Opportunities for Growth Supervisor Training--- January 2022
Healthy Families America National Peer Reviewer Training--- June 2022
Solution Based Casework Training--- February 2021
Transforming Trauma & PTSD--- July 2020
Cultural Competency & Diversity Workshop—February 2024
Relationships & Reflections: HFA Core Supervisor Training: September 2023

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Advanced Supervisor Training-July 2018
Newborn Behavioral Observation- Brazelton Institute- January 2021

Additional training certificates available upon request

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JULIE KINERSON

[redacted]

EXPERIENCE

JULY 7 2020 – PRESENT

Family Resource Center – Healthy Families America

- **January 2025 – Present: Program Manager,** overseeing program budget, monthly and quarterly reports, staff wellbeing and productivity, supporting supervisors that support FSS's. Preparing team and documents for accreditation process to maintain Healthy Families America status.
- **April 2023 – January 2025: Supervisor,** supporting Family Support Specialists through reflective supervision in working with families. Monitoring case work and time-sensitive documents, billing for program, temporary program coverage when program manager is out.
- **July 2020 – January 2025: Family support specialist**: educating parents on child attachment/bonding and child development while maintaining confidentiality.
- Maintaining time-sensitive documents and inputting into database.
- Facilitating group meetings and staff trainings.

SEPTEMBER 2008 – JULY 7TH 2020

Stay at Home Mom

- 2015-2021 Homeschooled children

SEPTEMBER 2006 – SEPTEMBER 2008

Dunkin donuts

- Shift leader, was responsible for team on shift. Tracking day to day tasks to be completed.
- Delegating tasks to team members while ensuring staff were taking breaks when needed.

June 2003 – September 2006

Storyland

- Drama department: Script memorization, implementing strict schedule.
- Entrance department: Managing cash registers

EDUCATION

2013- 2020

BACHELORS DEGREE, POST UNIVERSITY

- Post University, Connecticut
- BA in Human Services, concentration in counseling
- GPA - 3.9

2002 - 2006

HIGH SCHOOL, Berlin Senior High

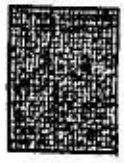
SKILLS

- Communication Skills
- Motivational Interviewing

- Time Management
- Organization
- Multi-tasking
- Technology & Data input

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ANN-MARIE E. SMITH



Experience

2017 - Present

Supervisor/Family Support Specialist • Colebrook, NH

Oversee Family Support Specialists, provide weekly reflective supervision, ensure accuracy of client notes, and reviews time sheets and mileage Providing in home support to at-risk families. Creating support plans based on family's needs including budgeting assistance, parenting skills, child development, and referrals to outside services. Using reflective and active listening skills, practice high confidentiality, record keeping, and offer creative and flexibility with planning for each family.

2008 - 2017

Child and Family Services • Colebrook, NH

Family Support Worker and Home Visits. I have been providing in-home education as well as parenting, child development, budgeting, personal communication along with household and stress management. I also assist in accessing community and state resources.

1- 1993 – 2006

- **Kingswood Regional Middle and High School • Wolfeboro, NH**
- **Inter-Lakes Middle School • Meredith, NH**
- **Governor Wentworth Regional School District • Wolfeboro, NH**
- **Bartlett Community Preschool NH • Bartlett, NH**

Teaching in a general classroom setting for all age groups to One-on-One Special Assistant. Encouraging physically handicapped student develop social skills, academic comprehension, and communication through facial, body, and sign language. Helping with mental and developmental disabilities with various curriculum and techniques. Involved in confidential mediations alongside behavioral councilors, aiding students to deal with relationships, family issues and peer conflicts. Successfully preventing and resolving negative confrontations and behavior by setting appropriate boundaries creating positive resolutions

Skills and Interests

- Through workshops and other ventures in my life, I have gained techniques to motivate and aide behavioral problems and learning disabilities.
- I am certified in NH Healthy Kids Training and am an Accredited provider of Level 4 Positive Parenting Program. I am also certified in Growing Great Kids-Tier 1, prenatal to 36 mos. skill developmental program. I am trained in ASQ-ASQ-SE and am on the steering committees for "Watch me Grow", and Maternal Depression, promoting MD awareness in Coos County
- I like to stay active, both professionally and physically. I walk daily and am always looking at furthering my personal knowledge and education to invest in our Coos kids.

Education

Hesser Business College • Manchester, NH

Graduated in 1984

- Major in Travel Management
- Minor in Social Science, Psychology, Sociology, Human Development and Public Speaking

References and Certifications are available upon request

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LEAH J. WHITE

[redacted]

Education

University of New Hampshire

Bachelor of Arts: Psychology, December 2008

Bachelor of Arts: Justice Studies, December 2008

Work Experience

Quality Assurance Manager, October 2022-Present

Family Resource Center, Gorham, NH

Evaluate program procedures and processes to ensure program efficacy. Analyze data, create reports and communicate feedback. Document identified discrepancies and process improvement goals. Ensure programs develop and implement a comprehensive quality assurance plan for reviewing and documenting the quality of all aspects of site implementation (initial engagement, home-visiting, supervision and management etc.) and implement follow-up mechanisms to address identified areas of improvement. Coordinate quarterly program file reviews.

Family Support Specialist, September 2017-Present

Family Resource Center, Gorham, NH

Provide supervised visitation, support and education to parents in the process of reunifying with their child placed in foster care. Develop support plans to address family needs including parenting skills, child development, and service referrals. Accommodate family needs by utilizing a creative and flexible approach. Use active and reflective listening skills. Maintain confidentiality and appropriate documentation.

Respite Provider, October 2015-May 2018

Provide relief for home care provider.

Home Care Provider, May 2012-October 2015

Contracted with Northern Human Services, Berlin, NH

Welcomed an individual with disabilities to reside in personal residence. Provided supports in all aspects of daily living, including personal care and medication administration. Attended training specific to individual's medical needs to provide informed care catered to the specific needs of the individual. Completed a minimum of 10 hours of training per year. Advocated for individual's wants and needs with a focus on human rights. Transferred individual utilizing a barrier free Hoyer lift. Maintained all medical documentation. Assisted individual in meeting goals and documented monthly progress notes.

Residential Program Manager, June 2011-May 2012

Easter Seals, Lancaster, NH

Managed operation of therapeutic residential placement for adolescent boys. Arranged daily schedules and activities for residents. Assured completion of all essential documentation. Provided weekly staff supervisions, monthly staff meetings and completed performance evaluations as necessary. Interviewed, hired and trained staff in accordance to the agency's mission and state regulations. Handled all petty cash. Focused on maintaining a positive and professional work environment to ensure all needs of

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individuals were met.

Residential Instructor, October 2010-June 2011
Easter Seals, Lancaster, NH

Supervised and counseled residents in a living environment. Assisted residents with activities of daily living focused on treatment plans and completed all necessary documentation in accordance with state regulations.

Assistant Program Director, *March 2010-October 2010*
Bridgewell, Beverly, MA

Assisted in daily operation of a residential home for individuals with disabilities. Managed medical, clinical and financial needs of individuals. Conducted interviews. Trained and supervised staff by providing leadership with a focus on team building.

Direct Support Professional, *January 2009-March 2010*
Bridgewell, Haverhill, MA

Provided support and assisted individuals with activities of daily living in a residential home. Provided services to individuals according to DMR regulatory standards, administered medications according to MAP regulations and maintained core training certifications. Worked at DMH program for initial 7 months with adults afflicted with mental illness.

Respite/Relief Residential Youth Counselor, *October 2008-January 2009*
Odyssey House, Hampton, NH

Supervised and counseled residents in a living environment, participated in groups, planned and assisted residents with daily therapeutic activities, behavioral tracking and documentation.

Front-End Assistant Manager, June 2002-January 2009
Market Basket, Plaistow, NH

Assisted front-end manager with maintaining smooth operation of check-out area, handled money transactions, addressed customer complaints in a professional manner and supervised cashiers.

Internships

Sexual Assault Support Services, *Summer 2008*

165 hour internship. Completed 36 hours of crisis intervention training with SASS. Provided support to sexual assault survivors and their families at child advocacy centers for their interviews with police departments, crisis counseled survivors on crisis hotline and provided referrals to victims of sexual assault to community services.

New Outlook Teen Center, *Fall 2006*

20 hour internship. Served as role model for young teenagers and organized donations for annual Christmas party.

Certifications

-Certified Lactation Counselor

-Peer Recovery Support Worker-certified

-Growing Great Kids Curriculum tier 1(0-3) certified

-Trained in Motivational Interviewing-evidenced based counseling approach to health care

-Health Families of America-Evidenced based model certified Family Support Worker

-Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children trained

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Joanne Bevins

FAMILY SUPPORT SPECIALIST

My goal is to become a leader in Family Support Services and provide quality care and early intervention for families in need.

[redacted] [redacted]

EXPERIENCE

March 2022- Current

Family Support Specialist, Family Resource Center

Provide early intervention with parenting education, activities, and modeling using an evidenced based curriculum
Act as a Liaison between the families and other agency services provided
Crisis intervention intake and assessment
Maintain accurate records of home visits., ensuring confidentiality
Team collaboration, facilitating groups
Creating individualized service plans and goal plans

May 2021 – November 2021

Case Manager, Northeast family Services

Co-Parenting plans and meetings
Provided case management services in collaboration with other team members.
Experience working with children with behavioral-/emotional disorders and autism spectrum disorders
Assessment, service planning, and crisis intervention.
Team Liaison working with families and collateral service providers
Supervised visitations

April 2003 – April 2023

Home Health Aide *Granite State Independant Living*

Program management and application
Consumer relations
Money and time management
Assist in training other home care workers
Collaboration with other health professionals/family
Home care management

January 2020 – October 2020

Student Internship - Northern Human Services -
Internship: (Shadowing)
Case Management
Functional Support Services
Children's Services

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Residential Programs
Partial Day Rehabilitation Program

EDUCATION

May 2020
BS Applied Sciences
May 2023
MS Marriage and Family Counseling
Liberty University

SKILLS

Early intervention
Case management
Communication
Establishing Rapport
Problem solving

INTERESTS

I am passionate about helping families to thrive.
I love my family and spending time with my granddaughter.
I love debater and deep conversation

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SHAYNA HENRY

Family Support Specialist

PROFILE

Energetic Family Support Specialist provides services to families in need, including pregnant and parenting families with children up to three years old. Initiates, engages, and maintains good rapport and a trusting relationship with participant families as they progress and transition through the continuum of services.

CONTACT

PHONE: [redacted]

EMAIL: [redacted]

SKILLS

Excellent oral and written communication skills; competent interpersonal skills, and strong organizational skills.
Knowledge and education regarding developmentally appropriate practices.
Sensitivity and responsiveness to the needs of families, clients, and staff.
Experience using software applications including ETO, Word, Excel, Teams, Outlook, and Google Suite Apps.

EDUCATION

White Mountains Community College – Graduating Class of 2018

Associate's degree
Early Childhood Education
Understanding Children with Special Needs and Early Intervention
Administrative Management

- Maintained a 3.8 GPA or Higher
- Student teacher – Positive Guidance Techniques with Pat Finnigan-Allen

WORK EXPERIENCE

The Family Resource Center of Gorham - HFA Family Support Specialist

May 2023–Present

-Schedule regular, long-term visits to families in their homes to provide support and education for parents to strengthen parent-child attachment and support healthy development.
-Ensure visits are family-centered and strength-based and focus on establishing a trusting relationship with the family as a whole.
- Responsible for assisting the family in establishing goals and planning for the accomplishment of those goals (Family Goal Plan).
- Regularly assess the growth and development of the child using the ASQ-3 and the ASQ-SE2.
-Facilitates GGK Coaching to offer support to colleagues to feel more confident in using our strength-based curriculum.
-HFA Shining Star of 2024 – For being an exemplary HFA NH team member.

Day By Day Child Care-Center Director

June 2010–April 2023

-Planned, implemented, monitored, and assessed childcare program consistent with the NH Childcare Licensing regulations and guidelines.
-Sustained all required licenses and certifications, scoring perfect with routine NH licensing inspections.
-Maintained and organized accurate and detailed records, including staff and child files on enrollments.
- Facilitated meetings to provide updates to parents concerning their child's progression, staff meetings, and CEU training.
-Managed Billing and Accounts receivable, maintained the childcare center's budget and completed tax preparation.
-Knowledge and experience in promoting growth and development in children for all of the developmental domains, responding effectively to the root causes of challenging behaviors in students using positive guidance techniques and early intervention skills.
-Implemented the Creative Curriculum and TS Gold assessment system to meet children on their level and build their skills through play and hands on activities.
-Experience with networking as a member of the Coos County Director's Network and Coos Coalition affiliate.

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Gabriella Maguire (Godin)

[redacted]

Skills and Strengths

Interpersonal Proficiencies: Communication, time management, organizational skills, problem solving, cultural competence, emotional intelligence, conflict resolution and management, multitasking, active listening, basic motivational interviewing skills, crisis support, personable, growth mindset, eager to learn new skills and able to grasp new concepts quickly

Technical Proficiencies: Microsoft Excel, Microsoft Office, TheraNest, ETO, computer programs and troubleshooting, English/Writing

Education

2012 | KENNETT HIGH SCHOOL

- High School Diploma

Experience

2024

FAMILY SUPPORT SPECIALIST/FAMILY RESOURCE SPECIALIST (Healthy Families America)

- Supports caregivers in creating secure attachment during the prenatal and 0-3 stages
- Supports caregivers in resiliency
- Helps caregivers access resources in the community
- Provides modeling for parent-child interaction
- Uses reflective strategies and motivational interviewing
- Direct care service
- Completes FROG Scale visits with families
- Builds service plans for family support
- Provides diapers to families in need
- Creates activities to encourage parent-child interaction
- Co-hosts Baby and Me group
- Participates in annual Community Baby Showers
- Supports families in creating and achieving goals
- Uses DHHS managed database (ETO)

2023-2024

INTAKE COORDINATOR/FAMILY RESOURCE SPECIALIST

- Processed referrals for new clients
- Completed FROG Scale visits with families
- Managed client files and information through Theranest and Microsoft Excel
- Met with clients to perform intake in home and in office
- Documented all contacts with clients in Theranest in a timely manner
- Ensured initial care plans are signed by nurse and filed immediately into Theranest
- Scanned in all pertinent paperwork post intake
- Contacted Program manager via email/phone call and identify families immediate needs
- Submitted Resource navigation referrals when appropriate

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- Worked closely with Program Director to organize and deliver food boxes for families in need
- Attended meetings with various programs to ensure any client overlap is effective
- Direct care service and working with people in the community
- Extensive knowledge of programs within the Family Resource Center

2022

CONTACT SERVICE CENTER COORDINATOR – Appalachian Mountain Club

- Created and handled reservations for 23 facilities from NJ to ME
- Processed memberships and donations
- Processed online store purchases
- Front desk duties at the Joe Dodge Lodge
  -Check-in/check-out, breakfast/dinner count, radio call, hut report, etc.
- Assisted housekeeping at Joe Dodge Lodge
- Answered phone calls and provided information about facilities, booking, events, memberships and other AMC related information to guests and customers
- Handled cash and credit card information both in person and over the phone
- Managed AMC inboxes by responding to customer emails in a timely and professional manner

2021-2022

STORE MANAGER – New England Charms

- Maintained stock/backstock in store
- Ordered/Received inventory
- Executed Cash and Credit sales with customers
- Cleaned and kept store tidy
- Engaged with all customers
- Effectively communicated with suppliers via phone and email

CERTIFICATIONS

Conscious Discipline
Family Resilience and Opportunities for Growth (FROG) Scale
Healthy Families America Home Visitor
Safe Sleep
Child Development 0-5
Ethical Considerations
Reproductive Health
Prenatal Basics
Child Abuse and Neglect
Cultural Self Awareness
Cultural Competency
Development of Attachment
Family Engagement
Family Goals
Family Partnerships
Health and Mental Health
Mental Health First Aid
Home Visiting Safety
Standards of Quality for Family Strengthening and Support

REFERENCES

References are available upon request.

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SHAHANNA LEBEL

PROFESSIONAL SUMMARY

Hardworking and passionate job seeker with strong organizational skills eager to secure entry-level Family Support Specialist position. Ready to help team achieve company goals. Extensive professional and personal experience in individual and family intervention and strength-based support. Utilizes strong interpersonal and computer skills. Builds client rapport and assesses the need to provide appropriate resources.

SKILLS

- Dynamic Communication Skills
- Communications Strategies
- Family and Patient Support
- Family Health
- Parenting Skills
- Assessment
- Community Resources
- Scheduling and Maintaining Appointments
- Computer Skills
- Confidential Case Documentation

WORK HISTORY

HEALTHY FAMILIES AMERICA - FAMILY SUPPORT SPECIALIST 05/2023 to Current
The Family Resource Center, Gorham, NH

- Work with families recently assessed by DCYF who were determined to be high or very high-risk of future DCYF involvement.
- Develop service plans with families which help build and maintain bridges to other parenting, economic, or behavior/mental health services.
- Utilize the Solution-Based Casework and Motivational Interviewing models with a focus on working in partnership with families, focusing on family progress and programmatic solutions to difficult family experiences, and celebrating family progress.
- Assess when ongoing case management support is no longer needed and develop plans with the families to transition out of services and into existing community-based support.

HOME SCHOOL INSTRUCTOR 08/2020 to 05/2023
Self-employed, Colebrook, NH

- Adapted teaching methods and lesson plans to changing student needs.
- Assisted students in retaining lecture information with creation of guides and course materials.
- Communicated student progress to parents and guardians for collaborative approach to educational goals.

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EDUCATIONAL ASSISTANT 10/2017 to 06/2020
Colebrook School District, Colebrook, NH

- Monitored students online learning, and alternative learning for credit recovery.
- Delivered personalized educational, behavioral, and emotional support to individual students to enable positive learning outcomes.
- Provided support to help students with special needs learn and grow.

CRISIS ADVOCATE 09/2012 to 01/2017
Response, Berlin, NH

- Documented risk to each client and context of concerns.
- Offered trauma intervention to individuals in crisis.
- Built safety plans to lower risk of crisis and intervened in specific manners outlined by procedures.
- Provided emergency response in crisis situations to diffuse tensions and prevent violence.

DOMESTIC VIOLENCE SPECIALIST 02/2014 to 10/2014
Response, Berlin, NH

- Provided crisis intervention services to clients in emergency situations.
- Assisted clients in developing and setting realistic goals to promote positive change.
- Participated in interdisciplinary team meetings to coordinate care for clients.
- Developed and maintained strong relationships with community resources for successful referrals.

EDUCATION

Granite State College, Concord, NH
Bachelor of Arts, Psychology, 03/2023
- 3.96 GPA

White Mountains Community College, Berlin, NH
Associate of Science, Human Services, 12/2016

Colebrook Academy, Colebrook, NH
High School Diploma, 06/2003

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Chantelle Higgins



Professional Summary

Looking for a great opportunity that will allow me to utilize my experience with opportunity for challenges and career advancement, while gaining knowledge of new skills.

Authorized to work in the US for any employer

Work Experience

Family Support Specialist - Healthy Families America

The Family Resource Center-Littleton, NH

December 2024 to Present

- Responsible for providing routine home visits, primarily occurring within the family's home.
- Develop a trusting relationship with families by providing strength-based family-centered interventions that assist in enhancing the parent-child relationship, build upon parenting skills and improve the family support system
- Assist families in establishing goals and a plan for accomplishing those goals
- Complete routine screenings and provide referrals as needed to support family needs
- Use evidence-based curriculum and practices to assess effectiveness with the target population
- Complete documentation and weekly notes for each family served; notes must be completed by the end of the week
- Maintain client confidentiality
- Maintain an up-to-date calendar of appointments

Event Coordinator

The Dwelling Place-Whitefield, NH

April 2022 to Present

- Overseeing registration processes for attendees, ensuring accurate data collection and timely communication.
- Liaised between clients/vendors/venue staff before/during/after an event ensuring smooth operations
- Social media management including creating marketing materials.

Dog Walker/Pet Sitter

Vixie Visits-Whitefield, NH

March 2022 to Present

My responsibilities with "Vixie Visits" as the owner/operator include growing/managing a business, scheduling, walking dogs anywhere from 20 minutes to one hour, drop in visits to care for dogs with fenced in yards/cats, litter box/yard cleaning. I also am responsible for promoting/graphic design of flyers and social media management.

Licensed Nursing Assistant

Pain Solutions-Nashua, NH

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July 2021 to December 2021

Responsibilities included chart preparation for all incoming patients, keeping the office organized and stocked. My duties were also to admit all patients and assess vital signs, communicate with family members and answer questions they may have. I assisted in keeping the patient comfortable during procedures as well as turning over the procedure room between cases, maintaining a sterile environment. Additionally, I was responsible for discharging patients after anesthesia, ensuring they made it to their vehicle safely.

Licensed Nursing Assistant (LNA)

Southern NH Medical Center- Surgery Center-Nashua, NH

January 2020 to March 2020

Responsible for pre-op and pacu care alongside an RN. My duties included entering pre-operative information into the computer after a Nurse documented phone interview. Making charts for the day of surgery. Bringing the patient into the Surgical Center and assessing vitals. Post operative care included monitoring a sedated patient alongside the RN, helping keep the post op pt comfortable by offering fluids and snacks, removing IV's and transporting patient to vehicle.

LNA

Elliot Health Systems-Manchester, NH

August 2017 to June 2019

Duties include performing tasks within the LNA scope of practice such as recording height/weight, documenting vital signs and reporting abnormalities to the RN. Assisting patients with ADL's. Transporting patients. Removing IV's, clipping/scrubbing patients to prepare for surgery, running HCG tests and recording results in EPIC. Experience with positioning patients for nerve blocks/spinals, assisting with the ultrasound machine during procedure (importing patient information, exporting images to the USB and properly cleaning after use.)

Additionally, secretarial work such as greeting and directing visitors and patients, putting charts together, answering phone calls, entering charges, sending/answering faxes and maintaining floor stock.

Nanny

Self-employed

January 2011 to February 2016

Assistant Toddler Teacher

World Academy

June 2008 to January 2011

Education

High school or equivalent

Campbell High School

Licensed Nursing Assistant

LNA Health Careers

Skills

- Well versed in supporting the social and emotional development of children (10+ years)
- Practiced Positive Disclipline and Redirecting (10+ years)
- Social Media Management
- Communication skills

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- Respects Patient Privacy (Less than 1 year)
- Effective skills in providing information to parents about child development. (5 years)
- Able to work in a family-centered program and perform duties per requirements of the families. (5 years)
- Epic
- Nannying
- Understands the stages of Dementia and grief and how to support the patient and family emotionally. (2 years)
- Performs tasks efficiently within LNA scope of practice (2 years)
- Follows all infection prevention precautions policies as appropriate (2 years)
- Developmental disabilities experience
- Babysitting
- Familiar with NAEYC accreditation process (3 years)
- Event Planning
- Demonstrated ability to create and maintain safe and motivating surroundings For young children and the elderly. (9 years)
- Toddler Care
- Experience changing and cleaning a colostomy bag. (Less than 1 year)
- Autism experience
- Data Collection

Certifications and Licenses

CPR Certification

Licensed Nursing Assistant
May 2017 to April 2021

CNA

Assessments

Protecting patient privacy — Proficient
November 2021

Understanding privacy rules and regulations associated with patient records
Full results: Proficient

Indeed Assessments provides skills tests that are not indicative of a license or certification, or continued development in any professional field.

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Merrilee Turgeon



Work Experience

Home Visiting Nurse

The Family Resource Center - Gorham, NH
July 2022 to Present

- RN
- Certified Lactation Counselor
- In-home visiting/family support
- Prenatal and postnatal education
- Newborn-toddler developmental education
- Recording and tracking immunizations
- Collaboration with local OB providers and hospitals
- Triaging client's health concerns and referring to primary care as necessary

Clinic Nurse

Coos County Family Health Services - Berlin, NH
October 2020 to December 2021

- RN
- Clinic nurse for both family practice and assisted with prenatal program
- Active partner/preceptor for the CCMA Apprenticeship Program at CCFHS
- Training new employees
- One on one patient care
- Medication reconciliation
- Tracking and charting patients' preventative health care
- Assisting with minor surgery
- Patient education
- Triage nurse (January 2013 to October 2014)
- Assessing adult and pediatric acute illnesses
- HIPPA compliance

Registered Nurse (RN)

Androscoggin Valley Hospital - Berlin, NH
February 2020 to October 2020

- Surgical Services

June 2017-February 2020

- Medical/Surgical Unit
- One on one patient care
- Medication reconciliation
- Charting patients' health care
- Assisting with minor surgery

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- Patient education
- Assessing adult and pediatric illnesses
- IV management

Clinic Nurse

Coos County Family Health Services - Berlin, NH
January 2012 to June 2017

- See description for "Clinic Nurse" October 2020-December 2021

Registered Nurse (RN)

St. Vincent de Paul Rehabilitation/Nursing Facility - Berlin, NH
August 2011 to January 2012

· Skilled nursing
· Assess patients, charting and reporting changes in patients' conditions, such as adverse reactions to medication or treatment, and taking any necessary action.
· Work as part of a health care team to assess patient needs, plan and modify care and implement interventions.
· Supervise nurses' aides and assistants.

Customer Service Manager, Human Resources Manager

Shaw's Supermarkets - Gorham, NH
March 1999 to February 2009

· Directly manage approximately 40+ associates
· Recruiting and training
· Prepare and deliver performance evaluations to develop well informed, productive, efficient employees
· Resolve customer complaints regarding sales and service.
· Consult with department managers to plan advertising services and to secure information on equipment and customer specifications.
· Prepare and approve budget expenditures.

Education

Associate Degree in Nursing

White Mountains Community College - Berlin, NH
May 2012

Nursing Licenses

RN

Expires: December 2025

State: NH

Skills

- Detail oriented and organized

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- Ability to work well with a team as well as independently
- Skilled in Microsoft Office (Word, Outlook, Excel, PowerPoint)

Certifications and Licenses

RN License

PALS Certification

LPN

ACLS Certification

Certified Lactation Counselor

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Kailee Guevin



Authorized to work in the US for any employer

Work Experience

Family Support Specialist / Family Resource Specialist

The Family Resource Center - Littleton, NH
April 2021 to Present

• The Family Support Specialist is responsible to provide routine home visiting, primarily occurring within the family's home; each home visit should last for at least one hour
• Develop a trusting relationship with families by providing strength based family-centered interventions that assist in enhancing the parent-child relationship, build upon parenting skills and improve the family support system.
• Assist families in establishing goals and a plan for accomplishing those goals.
• Complete routine screenings and provide referrals as needed to support family needs.
• Provide resources to participants on an ass needed basis.
• Coordinate and complete HFA intakes with a Family Resilience Opportunity for Growth Scale (FROG) on an as needed basis.
• Use evidence based curriculum and practices to assess effectiveness with the target population.
• Complete documentation and weekly notes for each family served; notes must be completed by end of week.
• Maintain client confidentiality
• Maintain an up-to-date calendar of appointments.
• Participate in any and all required trainings for ongoing professional development
• Attend staff meetings as scheduled.
• Attend weekly reflective supervision with supervisor.
• Adhere to Family Resource Center policies and procedures as set by the Board of Directors.

Private Caregiver

Bethlehem, NH
March 2023 to September 2023

Providing personal care, including showering, baths, shaving and oral hygiene as needed. Support with mobility. Preparation of daily meals and support with feeding and hydration.

Crisis Intervention Advocate

Coos County Family Health Services - Coos County, NH
January 2020 to April 2021

The Response Direct Services Advocate is responsible for providing direct services to survivors of sexual and domestic violence or stalking, outreach to potential victims and their families in the community and networking with area professionals including police, legal, judicial and social services.

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Provides direct client service including but not limited to: crisis intervention, court, medical and social advocacy, peer support, transportation, information and referrals to victims of domestic and sexual violence or stalking and their families.
Maintains client records according to policy.
Develops relationship with local resources for clients including police, legal, judicial and social service professionals.
I currently volunteer my hours for the Response Crisis Hotline.

Respite Care Provider

Kelly Bona (private) - Littleton, NH
March 2017 to April 2021

I provided day and weekend respite for a 59- year- old developmentally disabled women. This was provided in the space of my own home.
I provided one on one care with my client that includes a variety of things such as driving and running errands. A respite caregivers help with tasks like taking the patient to a doctor's appointment, picking up prescriptions or grocery shopping. In addition, I also assist with meal preparation and light housekeeping duties, when the family goes on vacations.
"Respite care is an essential part of the overall support that families may need to keep their family member with a disability at home. The word "respite" means to take a break from the daily challenges of caring for a child or a parent with special needs: It can be planned for a few hours or for as long as a weekend."

Residential Aide

The Morrison Nursing Home - Whitefield, NH
January 2018 to July 2020

• Assisting residents with daily personal routines, including bathing, dressing, grooming, eating, and using the bathroom.
• Providing companionship to residents and establishing a trusting relationship with them.
• Ensuring that residents are taking their prescribed medication.
• Reporting any concerns or medical issues.
• Ensuring that the residents' living quarters are safe and well-organized.
• Keeping records of resident activity, behavior, and moods.
• Performing any reasonable requests that residents ask for.
• Collaborating with management and coworkers to ensure residents receive the best quality of life possible.

Management Assistant/ Keyholder

Olympia Sports - Littleton, NH
March 2011 to August 2018

- Attracts potential customers by answering product and service questions; suggesting information about other products and services.
- Maintains customer records by updating account information.
- Resolves product or service problems by clarifying the customer's complaint; determining the cause of the problem; selecting and explaining the best solution to solve the problem; expediting correction or adjustment; following up to ensure resolution.
- Recommends potential products or services to management by collecting customer information and analyzing customer needs.

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- Contributes to team effort by accomplishing cleaning and product promotion as required.
- Clean and tidy the store for closing.
- Audit tills, prepare cash and deposit the required daily amounts.

Education

Associate in Human Services
White Mountains Community College
August 2020 to Present

Associate in Human Services
White Mountains Community College - Berlin, NH
August 2018 to June 2020

Medical Office Management in Medical office
White Mountains Community College - Littleton, NH
August 2011 to June 2015

Billing Certificate in Medical office
White Mountains Community College - Littleton, NH
August 2011 to June 2015

Skills

- Customer Service Skills (10+ years)
- Management (8 years)
- Receptionist (2 years)
- Critical thinking/problem solving (10+ years)
- Professional Services (10+ years)
- Microsoft Office (4 years)
- Caregiving (10+ years)
- Leadership Experience (3 years)
- ICD-10
- Medical Coding
- Medical Office Management
- Meal Preparation
- Social Work
- Retail management
- Customer service
- Crisis Intervention
- Care plans
- Senior care

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Certifications and Licenses

Medical Billing Certificate
Present

Assessments

Supervisory skills: Motivating & assessing employees — Proficient
October 2020

Motivating others to achieve objectives and identifying improvements or corrective actions
Full results: Proficient

Indeed Assessments provides skills tests that are not indicative of a license or certification, or continued development in any professional field.

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Tikatia Morris

Training & Development Manager

Tikatia Morris
[redacted]
[redacted]

Skills

client needs assessment; Microsoft Office Suite; file management; conflict resolution; case management; organized; effective public speaker; reliable; strategic thinker; event planning; team player; marketing and media relations; computer-savvy; logo design; website graphics; atypical problem solving; self-motivated; divergent thinking; critical observation, self-management; classical education tutoring methods; attention to detail; creativity; motivational interviewing; peer coaching; reflective supervision; solution-based casework

Experience

The Family Resource Center / Navigation Services Program Manager

April 2023 - Present

Responsive leader overseeing the daily management of the Navigation program including budgets, data, operations, syttems, and quality assurance; Monthly state reporting; Assure all contract requirements are met, including defined service activities, target population numbers, and designated client assessments; Coordinate training; Hiring new staff; Maintains public relations by attending monthly collaborative meetings with the NH Kinship Navigation community of practice, stakeholders, organization leadership etc. Develop and facilitate team meetings; Provide weekly reflective/administrative supervision to all staff assigned; Provide ongoing support to all supervisees through evaluation of job performance and field observations; Process timesheets and mileage, including PTO requests

The Family Resource Center / Training & Development Manager

December 2019 – April 2023

Created and maintained an effective and efficient learning management system to support the growing organization; Scheduled and planned meetings and conferences, including site-to-site video conferencing calls, which helped to streamline business operations. In-depth knowledge of the scope of services for all programs offered at the FRC; Created and offered additional materials to enhance training. Reduced process gaps by supporting the effective training of new hires on best practices and protocols through supporting and creating a train the trainer process. Delivered instruction on a broad range of topics, integrating audio-visual presentations and training materials. Mentored and coached new trainers by offering insight into successful procedures and implementation of program training. Created training schedules to meet the hiring demands of all FRC programs. Created systems to facilitate in-house training and coaching; overseeing all registrations for training and professional development for all programs. Overseeing ongoing coaching in motivational interviewing, solution-based casework, and peer coaching within programs; developed a professional development workgroup to facilitate more in-house training and provide feedback and support to trainers;

The Family Resource Center / Administrative Support Specialist /Training & Family Support Coordinator

December 2019 - January 2022

Provide administrative support to all areas of the family support program; Tracked and submitted employee timesheets to accounting department for payroll processing. Managed electronic calendars using G-Suite and scheduled meetings, appointments and conference calls; assisted in overseeing organizational transfer from G-Suit to Office 365; Created and maintained computer- and paper-based filing and organization systems for staff training records, reports, and documents. Scheduled and planned meetings and conferences, including site-to-site video conferencing calls, which helped to streamline business operations. Executed special objectives and projects in response to the Program Director's requests. Created and offered additional materials to enhance training. Reduced process gaps

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by effectively training new hires on best practices and protocols. Documented participant attendance, engagement, and progress. Delivered instruction on a broad range of topics, integrating audio-visual presentations and training materials. Mentored and coached new employees by offering insight into successful task prioritization. Created training schedules to meet the hiring demands of all FRC programs. Created systems to facilitate in-house training and coaching; overseeing all registrations for training and professional development for all programs.

The Family Resource Center / Edward Fenn ASP Group Leader & Coach
August 2019 - March 2020, Gorham

Established a positive, safe, and stimulating learning environment for all students. Cultivated strong relationships with students by listening carefully and offering positive reinforcement. Utilized the Choose Love curriculum to encourage and support social-emotional learning with all enrolled students, weekly classroom observation for implementing pyramid model strategies in the classroom and with staff; provide monthly one-on-one coaching sessions with all ASP staff to encourage growth support in pyramid model and social-emotional instruction to students

The Family Resource Center / Family Support Specialist
November 2018 - December 2019, Gorham

Built solid and trusting rapport with children and families, fostering communication to meet case needs. Worked to improve and enhance client lives through effective and compassionate care. Documented data and completed accurate updates to case records. Collaborated with community program leaders and advocates to make resources accessible to those in need. Interviewed individuals and families to assess needs and provide informational resources. Referred clients to appropriate team members, community agencies and organizations to meet treatment needs. Photographed to produce high-quality images for both print and Internet distribution. Developed creative design for marketing packages, including print materials, brochures, banners, and signs. Used publisher and photoshop to develop product mockups and prototype designs.

NH Homeschooling Families / Private Tutor
September 2013 - January 2018, Throughout NH & VT

Tutored over 20 struggling, average and advanced students in elementary through high school Classical Education course materials in Mathematics, Grammar and Language Arts, History, Science, Latin, and Logic. Created special handouts, study guides and assessments to evaluate and boost student knowledge. Spearheaded group tutoring sessions to help students struggling in similar areas. Coached and mentored junior tutors on successful classical education teaching strategies and time management.

Self-Employed / Freelance Photographer and Graphic Design
April 2012 - September 2018, Throughout NH

Planned and prepared for all on-location shoots. Inspected proofs to ensure the quality of prints, adjusting and retouching as necessary. Applied digital styling techniques to enhance photos. Maintained consistent use of graphic imagery in materials and other marketing outreach. Edited existing PowerPoint slides to enhance the corporate message. Updated computer graphic files using graphics software programs. Generated computer graphics and page-layout software, graphic elements and photography. Provided high-quality results in a timely manner.

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Education

Plymouth State University / English Education
August 1999 - June 2000, Plymouth

Laconia High School/ High School Diploma
August 1998 - June 1999, Laconia

Certifications and Trainings

2019-02

Pyramid Model Infant/Toddler Modules 2 & 3

ASQ: Introduction to Watch Me Grow for Coos County Early Childhood Professionals

Pyramid Model Peer-to-Peer Practice-Based Coaching

Parents Interacting with Infants (PIWI)

Pyramid Model Preschool Modules 1, 2, & 3

CCAR Ethical Considerations for Recovery Coaches

Growing Great Kids: Prenatal to 36 Months Tier 1

Certified TIPITOS Observer (certification date 07.19.19)

Certified TPOTS Observer (certification date 07.16.19)

Be Strong Families Parent Cafe Training

Recovery Coach Academy

NH Child Care Licensing Orientation for Licensed and License-Exempt Providers

2020

Equity, Autonomy and Substance Use Disorder: Lifecourse Considerations for Pregnant and Parenting People

Strengthening Families Framework Overview & Community Cafe

Certificate in Grandfamilies Leadership

2021

Boundary Spanning Leadership

Performance Evaluation

SBC Initial Training Course (Solution-Based Casework)

Motivational Interviewing: The Basics

Intermediate Motivational Interviewing

Motivational Interviewing: Advancing the Practice

MITI Coding

2022

Enneagram Spectrum Training & Certificate Program

Great Kids REMAP

Motivational Interviewing: MICA and Coaching

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NH Department of Health and Human Services

KEY PERSONNEL

List those primarily responsible for meeting the terms and conditions of the agreement.

Job descriptions not required for vacant positions.

Contractor Name: The Family Resource Center at Gorham

NAME	JOB TITLE	ANNUAL AMOUNT PAID FROM THIS CONTRACT	ANNUAL SALARY
Gabrielle Flanders	Executive Director	$0.00	$60,060
Briana Shannon	Director of Family Support Services	$1,544.40	$50,000.00
Julie Kinerson	Program Manager	$45,747.25	$46,482.80
Ann-Marie Smith	Supervisor	$38,752.00	$44,044.00
Leah White	QA Manager	$0.00	$45,864.00
Joanne Bevins	Family Support Specialist	$38,220.00	$38,220.00
Shayna Henry	Family Support Specialist	$38,220.00	$43,680.00
Gabriella Godin	Family Support Specialist	$0.00	$38,620.00
Shahanna Lebel	Family Support Specialist	$25,500.00	$25,500.00
Chantelle Higgins	Family Support Specialist	$34,580.00	$34,580.00
Merrilee Turgeon	Program Nurse	$61,058.40	$61,058.40
Kailee Guevin	Community Collaboration Specialist	$3,432.00	$40,040.00
Tikatia Morris	Training Manager	$0.00	$45,500.00

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ARC

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH SERVICES

Lori A. Weaver
Commissioner

Iain N. Watt
Director

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

September 10, 2024

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into amendments to existing contracts with the Contractors listed below to continue providing home visiting services, by exercising contract renewal options by increasing the total price limitation by $16,911,354 from $9,788,971 to $26,700,325 and by extending the completion dates from September 30, 2024 to September 30, 2028, effective October 1, 2024, upon Governor and Council approval. 70% Federal Funds. 30% General Funds.

The individual contracts were approved by Governor and Council as specified in the table below.

Contractor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
Community Action Partnership of Stafford County Dover, NH	177200-B004	Rochester Catchment Area	$1,224,446	$2,131,968	$3,356,414	O: 2/8/23 Item #39
Granite VNA, Inc. Concord, NH	174069-R001	Conway and Laconia Catchment Areas	$1,065,241	$1,968,315	$3,033,556	O: 2/8/23 Item #39; A1: 6/14/23 Item #26; A2: 5/1/24 Item #18
The Family Resource Center at Gorham Gorham, NH	162412-B001	Berlin and Littleton Catchment Areas	$1,845,113	$2,904,538	$4,749,651	O: 2/8/23 Item #39; A1: 6/14/23 Item #27; A2: 5/1/24 Item #18
Waypoint Manchester, NH	177166-B002	Concord, Manchester, Seacoast and Southern Catchment Areas	$5,654,171	$9,906,533	$15,560,704	O: 2/8/23 Item #39; A1: 5/1/24 Item #18

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		Total:	**$9,788,971**	**$16,911,354**	**$26,700,325**	

Funds are available in the following accounts for State Fiscal Years 2025 and are anticipated to be available in State Fiscal Years 2026, 2027, 2028 and 2029, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details.

EXPLANATION

The purpose of this request is to allow the Contractors to continue providing voluntary home visiting services to pregnant individuals and families with children up to five (5) years of age within designated Division of Child, Youth, and Families (DCYF) catchment areas. In addition, the Contractor will pursue expansion of the program making it available to a broader population of families, including those already involved in New Hampshire's child welfare system.

The Contractors provide voluntary home visiting services utilizing the Healthy Families America (HFA) evidence-based Home Visiting model, its Child Welfare Protocols, and an approved Registered Nurse (RN) home visit model enhancement. The HFA model has shown to improve positive parenting practices, maternal and child health, school readiness, economic self-sufficiency and parental educational attainment, and to increase linkages and referrals to valuable community resources. In addition, families who participate in the HFA model experience less child maltreatment and family violence than their non-HFA counterparts. The HFA model is currently being provided in every county in New Hampshire.

Approximately 246 families will be served during State Fiscal Years 2025, 2026, 2027, 2028, and 2029.

As referenced in Exhibit A, Revisions to Standard Agreement Provisions, of the original agreements, the parties have the option to extend the agreements for up to four (4) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and Governor and Council approval. The Department is exercising its option to renew services for four (4) years of the four (4) years available.

Should the Governor and Executive Council not authorize this request, more than 200 families will experience a lapse in services that serve to prevent child abuse and neglect, family violence, and poor maternal and child health outcomes.

Source of Federal Funds: Assistance Listing Number (ALN) 93.870, FAIN X10MC50315; ALN 93.658, FAIN (FFPSA) 2301NHFOST

In the event that the Federal Funds become no longer available, additional General Funds will not be requested to support this program.

Respectfully submitted,

Lori A. Weaver
Commissioner

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Fiscal Detail Sheets
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-3896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, HOME VISITING FORMULA GNT
94% Federal Funds 6% General Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$192,620.00	$0.00	$192,620.00
2023	102-500731	Contracts for Program Services	90083208	$16,995.00	$0.00	$16,995.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$317,640.00	$0.00	$317,640.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$79,410.00	$0.00	$79,410.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$238,230.00	$238,230.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$60,598.00	$60,598.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$181,793.00	$181,793.00
2026	102-500731	Contracts for Program Svcs	90005896	$0.00	$52,456.00	$52,456.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$54,327.00	$54,327.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$162,981.00	$162,981.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$54,327.00	$54,327.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$162,981.00	$162,981.00
2028	102-500731	Contracts for Program Svcs	90005896	$0.00	$45,028.00	$45,028.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$54,327.00	$54,327.00
			SUBTOTAL:	$606,665.00	$1,067,048.00	$1,673,713.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$892,250.00	$0.00	$892,250.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$950,000.00	$0.00	$950,000.00
2024	102-500731	Contracts for Program Services	90005896	$54,682.00	$0.00	$54,682.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$237,500.00	$0.00	$237,500.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$712,500.00	$712,500.00
2025	102-500731	Contracts for Program Services	90005896	$27,341.00	$0.00	$27,341.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$230,356.00	$230,356.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$691,068.00	$691,068.00
2026	102-500731	Contracts for Program Services	90005896	$0.00	$167,050.00	$167,050.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$227,975.00	$227,975.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$683,924.00	$683,924.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$227,975.00	$227,975.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$683,924.00	$683,924.00
2028	102-500731	Contracts for Program Services	90005896	$0.00	$172,618.00	$172,618.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	227,975.00	$227,975.00
			Subtotal:	$1,961,773.00	$4,025,565.00	$5,987,338.00

Fiscal Detail Sheets
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$80,533.00	$0.00	$80,533.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$340,529.00	$0.00	$340,529.00
2024	102-500731	Contracts for Program Services	90005896	$6,667	$0.00	$6,667.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$85,311.00	$0.00	85,311.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$252,640.00	252,640.00
2025	102-500731	Contracts for Program Services	90005896	$3,333.00	$0.00	$3,333.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$60,326.00	$60,326.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$180,976.00	$180,976.00
2026	102-500731	Contracts for Program Services	90005896	$0.00	$34,869.00	$34,869.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$51,997.00	$51,997.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$155,991.00	$155,991.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$51,997.00	$51,997.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$155,991.00	$155,991.00
2028	102-500731	Contracts for Program Services	90005896	$0.00	$40,243.00	$40,243.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$51,997.00	$51,997.00
			Subtotal:	$516,373.00	$1,037,027.00	1,553,400.00

The Family Resource Center at Gorham - Vendor #182412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$269,729.00	$0.00	$269,729.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$378,354.00	$0.00	$378,354.00
2024	102-500731	Contracts for Program Svcs	90005896	$33,571	$0.00	$33,571.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$92,583.00	$0.00	$92,583.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$277,749.00	$277,749.00
2025	102-500731	Contracts for Program Svcs	90005896	$25,179	$0.00	$25,179.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$117,573.00	$117,573.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$352,718.00	$352,718.00
2026	102-500731	Contracts for Program Svcs	90005896	$0.00	$57,079.00	$57,079.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$125,903.00	$125,903.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$377,707.00	$377,707.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$125,903.00	$125,903.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$377,707.00	$377,707.00
2028	102-500731	Contracts for Program Svcs	90005896	$0.00	$90,920.00	$90,920.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$125,903.00	$125,903.00
			Subtotal:	$799,416.00	$2,029,162.00	2,828,578.00
			TOTAL:	$3,884,227.00	$8,158,802.00	$12,043,029.00

05-95-92-920510-3382 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIVISION, BUREAU OF DRUG & ALCOHOL SVCS; GOVERNOR COMMISSION FUNDS
100% Other Funds

Waypoint - Vendor #177166-B002

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Fiscal Detail Sheets
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	92057502	$108,000.00	$0.00	$108,000.00
			Subtotal:	$108,000.00	$0.00	$108,000.00
			TOTAL:	$108,000.00	$0.00	$108,000.00

05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, MATERNAL - CHILD HEALTH,
100% General Funds

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	102-500731	Contracts for Program Svcs	90004019	$56,250.00	$0.00	$56,250.00
2024	102-500731	Contracts for Program Svcs	90004019	$75,000.00	$0.00	$75,000.00
2025	102-500731	Contracts for Program Svcs	90004019	$0.00		$0.00
			Subtotal:	$131,250.00	$0.00	$131,250.00
			TOTAL:	$131,250.00	$0.00	$131,250.00

05-95-09-901010-5771 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF HEALTHCARE ACCESS, EQUITY & POLICY, COVID-19 HEALTH DISPARITIES
100% Federal Funds

Waypoint - Vendor #177168-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577160	$105,000.00	$0.00	$105,000.00
2023	074-500589	Grants for Pub Asst and Relief	90577150	$157,500.00	$0.00	$157,500.00
			Subtotal:	$262,500.00	$0.00	$ 262,500.00

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577150	$15,000.00	$0.00	$15,000
2023	074-500589	Grants for Pub Asst and Relief	90577150	$101,512.00	$0.00	101,512.00
2024	074-500589	Grants for Pub Asst and Relief	90577150	$85,000.00	$0.00	$85,000
2024	074-500589	Grants for Pub Asst and Relief	90577150	$100,000.00	$0.00	100,000.00
			Subtotal:	$301,512.00	$0.00	301,512.00
			TOTAL:	$564,012.00	$0.00	$564,012.00

05-95-90-902010-2451-HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, ARP - MIEC HOME VISITING
100% Federal Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$17,532.00	$0.00	$17,532.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$54,231.00	$0.00	$54,231.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$13,558.00	$0.00	$13,558.00
			Subtotal:	$85,321.00	$0.00	$85,321.00

Waypoint - Vendor #177168-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$114,064.00	$0.00	$114,064.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$125,000.00	$0.00	$125,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$142,350.00	$0.00	$142,350.00
			Subtotal:	$381,414.00	$0.00	381,414.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class / Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount

Fiscal Detail Sheets
Home Visiting Services
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2023	074-500589	Grants for Pub Asst and Rel	90083206	$72,691.00	$0.00	$72,691.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$8504.00	$0.00	$8,504.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$2130.00	$0.00	$2,130.00
			Subtotal:	$83,225.00	$0.00	$83,225.00

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$68,714.00	$0.00	$68,714.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$50,000.00	$0.00	$50,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$56,532.00	$0.00	$56,532.00
			Subtotal:	$175,246.00	$0.00	$175,246.00
			TOTAL:	$725,206.00	$0.00	$725,206.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-29580000, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD – FAMILY SERVICES
50% Federal Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$199,673.00	$0.00	$199,673.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00	$0.00	$266,230.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$66,557.00	$199,673.00	$266,230.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$266,230.00	$266,230.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$266,230.00	$266,230.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$266,230.00	$266,230.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$66,557.00	$66,557.00
			Subtotal:	$532,460.00	$1,064,920.00	$1,597,380.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$125,960.00	$0	$125,960.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$271,746.00	$0	$271,746.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$67,937.00	$164,885	$232,822.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 232,822.00	$ 232,822.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 232,822.00	$ 232,822.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 232,822.00	$ 232,822.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 67,937.00	$ 67,937.00
			Subtotal:	$465,643.00	$931,288	$1,396,931.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$164,133.00	$0	$164,133.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,845.00	$0	$218,845.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$54,711.00	$164,133	$218,844.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 218,844.00	$ 218,844.00

Fiscal Detail Sheets
Home Visiting Services
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2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 218,844.00	$ 218,844.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 218,844.00	$ 218,844.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 54,711.00	$ 54,711.00
			Subtotal:	$437,689.00	$876,376	$1,313,065.00

Waypoint - Vendor #177160-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,102,682.00	$0.00	$1,102,682.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00	$0.00	$1,470,242.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$367,560.00	$1,102,682.00	$1,470,242.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$1,470,242.00	$1,470,242.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$1,470,242.00	$1,470,242.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$1,470,242.00	$1,470,242.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$367,560.00	$367,560.00
			Subtotal:	$2,940,484.00	$5,880,968.00	$8,821,452.00
			TOTAL:	$4,378,276.00	$8,752,552.00	$13,128,828.00

GRAND TOTAL:	$9,788,971.00	$16,911,354.00	$26,700,325.00

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Docusign Envelope ID: 42DDFF90-CA28-4A52-AC1F-622983472D7D

State of New Hampshire
Department of Health and Human Services
Amendment #3

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and The Family Resource Center at Gorham ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item #39), as amended on June 14, 2023 (Item #27), and as amended on May 1, 2024 (Item #18), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37 General Provisions, Block 1.7, Completion Date, to read:

   September 30, 2028

2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $4,749,651

3. Modify Exhibit B, Scope of Services, Subsection 3.3., to read:

   3.3. The Contractor must service a portion of families utilizing the Healthy Families America (HFA) Child Welfare Protocols (CWP) in the Berlin and Littleton DCYF Catchment Areas, which is attached as Attachment 1. Virtual home visits may also be accommodated, in compliance with HFA requirements. The Contractor must ensure families being served utilizing the CWP have an expanded enrollment window, allowing for enrollment of families with a child up to twenty-four (24) months of age, referred by the child welfare system, who are participating in the service voluntarily. The Contractor shall exhaust all reasonable efforts to serve forty-four (44) DCYF families in the Berlin/Littleton Catchment Area; serving no less than 70% of the identified number of families for this region before the end of the contract period.

4. Modify Exhibit B, Scope of Services, Subsection 3.5.4., to read:

   3.5.4. Families with an open DCYF case who have recently reunified, or where the child remains at home with their family and not in an out-of-home placement.

5. Modify Exhibit B, Scope of Services, Subsection 3.7.1.2., to read:

   3.7.1.2. Have HFA CWP available in the Berlin and Littleton DCYF Catchment Areas.

   3.7.1.2.1. Should the Contractor be unable to provide services through the HFA CWP, a corrective action plan must be developed by the Contractor and approved by the Department.

   3.7.1.2.1.1. In the event that the Contractor is unable to provide services using the CWP, the Contractor must enter into a subcontract or MOA with an approved, accredited HFA provider to provide this service, no later than thirty (30) business days from the date of discontinuation.

6. Modify Exhibit C, Payment Terms, Section 1, to read:

1. This Agreement is funded by:

1.1. 79.06% Federal funds from:

1.1.1. 69.82% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the United States Department of Health and Human Services (US DHHS), Health Resources and Services Administration (HRSA), Assistance Listing Number (ALN) 93.870, FAIN X10MC43595; and as awarded on September 2, 2022, FAIN X10MC46878; and as awarded on August 29,2023, FAIN X10MC50315.

1.1.2. 4.67% American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the US DHHS, HRSA, ALN 93.870, FAIN X11MC41935; and as awarded on October 28, 2021, FAIN X11MC45263.

1.1.3. 8.03% New Hampshire Initiative to Address COVID-19 Health Disparities, as awarded on June 1, 2021, by the US DHHS, Centers for Disease Control and Prevention, ALN 93.391, FAIN NH75OT000031.

1.1.4. 17.48% Administration of Children Youth & Families (ACF), as awarded on October 1, 2022, by the US DHHS, CFDA 93.658, FAIN 2201NHFOST.

1.2. 20.94% General funds.

7. Modify Exhibit C, Payment Terms – Amendment #2, Section 7, to read:

7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement and shall be in accordance with the approved line items, as specified in Exhibits C-1 Budget Sheet, SFY 2023 through Exhibit C-8 Budget Sheet, SFY 2024; and Exhibit C-10 Budget Sheet, SFY 2023 through Exhibit C-17, Budget Sheet SFY 2029 – Amendment #3.

8. Modify Exhibit C, Payment Terms, Section 9.3, to read:

9.3. The Contractor cannot exceed the maximum allotment for weekly rate expenditure by Fiscal Year, which is as follows:

State Fiscal Year	Amount
SFY 2023	$89,168
SFY 2024	$108,983
SFY 2025	$218,844
SFY 2026	$218,844
SFY 2027	$218,844
SFY 2028	$218,844
SFY 2029	$54,711
Subtotal	**$1,128,238**

9. Modify Exhibit C, Payment Terms, by deleting Section 10 in its entirety.

10. Modify Exhibit C-3, Budget Sheet (SFY 2025) – Amendment #2, by replacing it in its entirety with Exhibit C-3 Budget, SFY 2025 – Amendment #3, which is attached hereto and incorporated by reference herein.

11. Add Exhibit C-14, Budget Sheet, SFY 2026 – Amendment #3, which is attached hereto and incorporated by reference herein.

12. Add Exhibit C-15, Budget Sheet, SFY 2027 – Amendment #3, which is attached hereto and incorporated by reference herein.

13. Add Exhibit C-16, Budget Sheet, SFY 2028 – Amendment #3, which is attached hereto and incorporated by reference herein.
14. Add Exhibit C-17, Budget Sheet, SFY 2029 – Amendment #3, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment remain in full force and effect. This Amendment shall be effective October 1, 2024, upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

9/9/2024
Date

DocuSigned by:
Iain Watt
D770CD03F8764C7...
Name: Iain Watt
Title: Director - DPHS

The Family Resource Center at Gorham

9/9/2024
Date

DocuSigned by:
Patricia Stolte
C76F2D14EAD74FE...
Name: Patricia Stolte
Title: Executive Director

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

9/10/2024
Date

DocuSigned by:
Robyn Guarino
7487348410411480...
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Docusign Envelope ID: 3DECE725-0CDD-4507-8937-6581F3EABCD7

New Hampshire Department of Health and Human Services	
Complete one budget form for each budget period.	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - Home Visiting Formula Grant
Budget Period	7/1/24 - 6/30/25
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$ 249,514.45
2. Fringe Benefits	$ 81,031.91
3. Consultants	$ 2,000.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$ 1,000.00
5.(a) Supplies - Educational	$
5.(b) Supplies - Lab	$
5.(c) Supplies - Pharmacy	$
5.(d) Supplies - Medical	$
5.(e) Supplies Office	$ 1,000.00
6. Travel	$ 15,000.00
7. Software	$
8. (a) Other - Marketing/ Communications	$ 1,000.00
8. (b) Other - Education and Training	$ 1,000.00
8. (c) Other - Other (specify below).	$
Other (Occupancy)	$ 19,000.00
Other (Telephones)	$ 000.00
Other (Liability Insurance)	$ 350.00
Other (Annual Fees)	$ 1,800.00
Other (Audit and Legal)	$ 2,000.00
Other (Postage)	$ 350.00
9. Subrecipient Contracts	$
Total Direct Costs	$ 359,646.36
Total Indirect Costs	$ 35,864.64
TOTAL	$ 395,511.00

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Exhibit C-14, Budget Sheet SFY 2026 - Amendment #3

New Hampshire Department of Health and Human Services	
Complete one budget form for each budget period.	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/25 - 6/30/26
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$ 332,853.30
2. Fringe Benefits	$ 73,000.00
3. Consultants	$ 3,000.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$ 2,000.00
5.(a) Supplies - Educational	$ -
5.(b) Supplies - Lab	$ -
5.(c) Supplies - Pharmacy	$ -
5.(d) Supplies - Medical	$ -
5.(e) Supplies Office	$ 3,000.00
6. Travel	$ 30,000.00
7. Software	$ 600.00
8. (a) Other - Marketing/ Communications	$ 1,120.00
8. (b) Other - Education and Training	$ 2,500.00
8. (c) Other - Other (specify below)	$ -
Other (Occupancy)	$ 22,000.00
Other (Telephone)	$ 4,500.00
Other (Liability Insurance)	$ 1,000.00
Other (Annual Dues & Fees)	$ 2,000.00
Other (Audit & Legal)	$ 2,000.00
Other (Postage)	$ 399.43
9. Subrecipient Contracts	$ -
Total Direct Costs	$ 479,972.73

Total Indirect Costs	$ 47,397.27
TOTAL	$ 527,370.00

Contractor PS

Date 9/10/2024

Exhibit C-15, Budget Sheet SFY 2027 - Amendment #3

New Hampshire Department of Health and Human Services	
Complete one budget form for each budget period.	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/27 - 6/30/28
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$ 328,004.30
2. Fringe Benefits	$ 73,000.00
3. Consultants	$ 1,500.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$ 1,000.00
5.(a) Supplies - Educational	$
5.(b) Supplies - Lab	$
5.(c) Supplies - Pharmacy	$
5.(d) Supplies - Medical	$
5.(e) Supplies Office	$ 1,000.00
6. Travel	$ 21,000.00
7. Software	$ 200.00
8. (a) Other - Marketing/ Communications	$ 600.00
8. (b) Other - Education and Training	$ 1,000.00
8. (c) Other - Other (specify below)	$
Other (Occupancy)	$ 22,000.00
Other (Telephone)	$ 4,132.06
Other (Liability Insurance)	$ 1,000.00
Other (Annual Dues & Fees)	$ 1,500.00
Other (Audit & Legal)	$ 2,000.00
Other (Postage)	$ 300.00
9. Subrecipient Contracts	$
Total Direct Costs	$ 458,236.36

Total Indirect Costs	$ 45,373.64
TOTAL	$ 503,610.00

Contractor Initials PS

Date 9/10/2024

New Hampshire Department of Health and Human Services	
Complete one budget form for each budget period.	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/27 - 6/30/28
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$ 386,148.40
2. Fringe Benefits	$ 77,388.96
3. Consultants	$ 3,000.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$ 500.00
5.(a) Supplies - Educational	$
5.(b) Supplies - Lab	$
5.(c) Supplies - Pharmacy	$
5.(d) Supplies - Medical	$
5.(e) Supplies Office	$ 2,300.00
6. Travel	$ 30,000.00
7. Software	$ 1,000.00
8. (a) Other - Marketing/ Communications	$ 2,000.00
8. (b) Other - Education and Training	$ 2,000.00
8. (c) Other - Other (specify below)	$
Other (Occupancy)	$ 24,000.00
Other (Telephone)	$ 4,500.00
Other (Liability Insurance)	$ 1,100.00
Other (Annual Dues & Fees)	$ 3,200.00
Other (Audit & Legal)	$ 2,500.00
Other (Postage)	$ 500.00
9. Subrecipient Contracts	$
Total Direct Costs	$ 541,136.36
Total Indirect Costs	$ 53,393.64
TOTAL	$ 594,530.00

Contractor Initials PS

Date 9/10/2024

Exhibit C-17, Budget Sheet SFY 2029 - Amendment #3

New Hampshire Department of Health and Human Services	
Complete one budget form for each budget period.	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/28-9/30/28
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$ 87,167.60
2. Fringe Benefits	$ 17,500.00
3. Consultants	$ 800.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$ 300.00
5.(a) Supplies - Educational	$
5.(b) Supplies - Lab	$
5.(c) Supplies - Pharmacy	$
5.(d) Supplies - Medical	$
5.(e) Supplies Office	$ 635.13
6. Travel	$ 3,300.00
7. Software	$ 100.00
8. (a) Other - Marketing/ Communications	$ 300.00
8. (b) Other - Education and Training	$ 200.00
8. (c) Other - Other (specify below)	$
Other (Occupancy)	$ 3,000.00
Other (Telephone)	$ 800.00
Other (Liability Insurance)	$ 100.00
Other (Annual Dues & Fees)	$ 100.00
Other (Audit & Legal)	$ 100.00
Other (Postage)	$ 100.00
9. Subrecipient Contracts	$
Total Direct Costs	$ 114,502.73

Total Indirect Costs	$ 11,400.27
TOTAL	$ 125,903.00

Contractor Initials PS

Date 9/10/2024

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ARC

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Lori A. Weaver
Commissioner

Iula N. Watt
Interim Director

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

March 12, 2024

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into **Sole Source** amendments to existing contracts with the Contractors listed below in **bold** to continue providing home visiting services, by increasing the total price limitation by $132,023 from $9,656,948 to $9,788,971 with no change to the contract completion dates of September 30, 2024, effective upon Governor and Council approval. 100% General Funds.

The individual contracts were approved by Governor and Council as specified in the table below.

Contractor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
Community Action Partnership of Strafford County Dover, NH	177200-B004	Rochester Catchment Area	$1,224,446	$0	$1,224,446	O: February 8, 2023, Item #39
Granite VNA, Inc. Concord, NH	**174069-R001**	**Conway Catchment Area**	**$1,055,241**	**$10,000**	**$1,065,241**	O: February 8, 2023, Item #39 A1: June 14, 2023, Item #26
The Family Resource Center at Gorham, Gorham, NH	**162412-B001**	**Berlin and Littleton Catchment Areas**	**$1,805,113**	**$40,000**	**$1,845,113**	O: February 8, 2023, Item #39 A1: June 14, 2023, Item #27
Waypoint Manchester, NH	**177166-B002**	**Concord, Manchester, Seacoast& Southern Catchment Areas**	**$5,572,148**	**$82,023**	**$5,654,171**	O: February 8, 2023, Item #39
		Total:	$9,656,948	$132,023	$9,788,971	

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Funds are available in the following accounts for State Fiscal Years 2024 and 2025, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details.

EXPLANATION

This request is **Sole Source** to allow the Department to add funding to amend the scope of services for one (1) of the Contractors, The Family Resource Center at Gorham, to add a Family Engagement Specialist. In addition, the Department is adding funding to increase staffing allocations for the other two (2) Contractors for fiscal management and oversight activities.

The purpose of this request is to increase the number of families enrolled and retained in home visiting services in the North Country by The Family Resource Center at Gorham by supporting a Family Engagement Specialist position. The Family Engagement Specialist will engage new and existing referral partners and maintain community and family relationships. In addition, the funding will allow Granite VNA and Waypoint to support staffing for fiscal management to comply with added reporting requirements in the current contract year.

Approximately 357 families will be served during State Fiscal Years 2024 and 2025.

The Contractors provide voluntary home visiting services to pregnant individuals and families with children up to five (5) years of age, by utilizing the Healthy Families America (HFA) evidence-based Home Visiting model and its Child Welfare protocols. This nationally recognized model demonstrates positive outcomes for families in the areas of positive parenting practices, improved maternal and child health, improved school readiness, increased economic self-sufficiency and parental educational attainment, and increased linkages and referrals to valuable community resources. In addition, the HFA model has demonstrated a reduction in child maltreatment and family violence. HFA is currently being provided in every county in New Hampshire.

The Department will continue to monitor services through:

- Data reviews to evaluate capacity utilization, service delivery by region, and demographic data to ensure equitable provision of services.
- Quarterly data reviews of program performance across 19 federally defined performance measures.
- Quarterly review of data entered into model-specific tracking documents by the contractor to ensure fidelity to the requirements of the evidence-based model.
- Quarterly data reviews to ensure that at least seventy-five percent (75%) of expected home visits occur based upon the individual level of service to which each family is assigned.
- Annual sub-recipient monitoring site visits to ensure compliance with contract and model requirements, utilizing tools developed by the home visiting program and the Healthy Families America model.

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Should the Governor and Council not authorize this request, The Family Resource Center at Gorham will be unable to increase the number of families enrolled and retained in home visiting services in the North Country. In addition, Granite VNA and Waypoint will not have the ability to improve fiscal management and oversight activities.

Respectfully submitted,

Lori A. Weaver
Commissioner

Docusign Envelope ID: 3DECE725-0CDD-4507-8937-6581F3EABCD7

Fiscal Detail Sheet
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-5890 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, HOME VISITING FORMULA GNT
96% Federal Funds 4% General Funds
Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$192,620.00	$0.00	$192,620.00
2023	102-500731	Contracts for Program Services	90083208	$18,995.00	$0.00	$18,995.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$317,840.00	$0.00	$317,840.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$79,410.00	$0.00	$79,410.00
			SUBTOTAL:	$606,665.00	$0.00	$606,665.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$692,250.00	$0.00	$692,250.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$950,000.00	$0.00	$950,000.00
2024	102-500731	Contracts for Program Services	90005896	$0.00	$54,682.00	$54,682.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$237,500.00	$0.00	$237,500.00
2025	102-500731	Contracts for Program Services	90005896	$0.00	$27,341.00	$27,341.00
			SUBTOTAL:	$1,079,750.00	$82,023.00	$1,061,773.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$80,533.00	$0.00	$80,533.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$340,529.00	$0.00	$340,529.00
2024	102-500731	Contracts for Program Services	90005896	$0	$6,667.00	$6,667.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$85,311.00	$0.00	85,311.00
2025	102-500731	Contracts for Program Services	90005896	$0	$3,333.00	$3,333.00
			SUBTOTAL:	$506,373.00	$10,000.00	616,373.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$289,729.00	$0.00	$289,729.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$378,354.00	$0.00	$378,354.00
2024	102-500731	Contracts for Program Svcs	90005896	$0	$33,571.00	$33,571.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$92,583.00	$0.00	$92,583.00
2025	102-500731	Contracts for Program Svcs	90005896	$0	$25,179.00	$25,179.00
			SUBTOTAL:	$740,666.00	$50,750.00	799,416.00
			Total:	$3,733,454.00	$150,773.00	$3,884,227.00

05-93-92-920510-3382 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
BEHAVIORAL HEALTH DIVISION, BUREAU OF DRUG & ALCOHOL SVCS, GOVERNOR COMMISSION FUNDS
100% Other Funds
Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	92057502	$108,000.00	$0.00	$108,000.00
			SUBTOTAL:	$108,000.00	$0.00	$108,000.00
			TOTAL:	$108,000.00	$0.00	$108,000.00

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Fiscal Detail Sheet
Home Visiting Services
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05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, MATERNAL - CHILD HEALTH,
100% General Funds
Family Resource Center at Gorham - Vendor #182412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	102-500731	Contracts for Program Svcs	90004019	$56,250.00	$0.00	$56,250.00
2024	102-500731	Contracts for Program Svcs	90004019	$75,000.00	$0.00	$75,000.00
2025	102-500731	Contracts for Program Svcs	90004019	$18,750.00	($18,750.00)	$0.00
			SUBTOTAL:	$150,000.00	($18,750.00)	$131,250.00
			TOTAL:	$150,000.00	($18,750.00)	$131,250.00

05-95-09-901010-5771 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF HEALTHCARE ACCESS, EQUITY & POLICY, COVID-19 HEALTH DISPARITIES
100% Federal Funds
Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577160	$105,000.00	$0.00	$105,000.00
2023	074-500589	Grants for Pub Asst and Relief	90577150	$157,500.00	$0.00	$157,500.00
			SUBTOTAL:	$262,500.00	$0.00	$ 262,500.00

Family Resource Center at Gorham - Vendor #182412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577150	$15,000.00	$0.00	$15,000
2023	074-500589	Grants for Pub Asst and Relief	90577150	$101,512.00	$0.00	101,512.00
2024	074-500589	Grants for Pub Asst and Relief	90577150	$85,000.00	$0.00	$85,000
2024	074-500589	Grants for Pub Asst and Relief	90577150	$100,000.00	$0.00	100,000.00
			SUBTOTAL:	$301,512.00	$0.00	301,512.00
			TOTAL:	$564,012.00	$0.00	$504,012.00

05-95-90-902010-2451-HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, ARP - MIEC HOME VISITING
100% Federal Funds
Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$17,532.00	$0.00	$17,532.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$54,231.00	$0.00	$54,231.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$13,558.00	$0.00	$13,558.00
			SUBTOTAL:	$85,321.00	$0.00	$85,321.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	074-500589	Grants for Pub Asst and Rel	90083206	$114,064.00	$0.00	$114,064.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$125,000.00	$0.00	$125,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$142,350.00	$0.00	$142,350.00
			SUBTOTAL:	$381,414.00	$0.00	381,414.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class / Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$72,591.00	$0.00	$72,591.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$8504.00	$0.00	$8,504.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$2130.00	$0.00	$2,130.00
			SUBTOTAL:	$83,225.00	$0.00	$83,225.00

Family Resource Center at Gorham - Vendor #182412-B001

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Fiscal Detail Sheet
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State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$68,714.00	$0.00	$68,714.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$50,000.00	$0.00	$50,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$56,532.00	$0.00	$56,532.00
			SUBTOTAL:	$175,246.00	$0.00	$175,246.00
			TOTAL:	$725,206.00	$0.00	$725,206.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-29580000, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD – FAMILY SERVICES
50% Federal Funds
Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$199,073.00	$0.00	$199,073.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00	$0.00	$266,230.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$66,557.00	$0.00	$66,557.00
			SUBTOTAL:	$532,460.00	$0.00	$532,460.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$125,960.00	$0	$125,960.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$271,746.00	$0	$271,746.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$67,937.00	$0	$67,937.00
			SUBTOTAL:	$465,643.00	$0	$465,643.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$164,133.00	$0	$164,133.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,845.00	$0	$218,845.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$54,711.00	$0	$54,711.00
			SUBTOTAL:	$437,689.00	$0	$437,689.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,102,682.00	$0.00	$1,102,682.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00	$0.00	$1,470,242.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$367,560.00	$0.00	$367,560.00
			SUBTOTAL:	$2,940,484.00	$0.00	$2,940,484.00
			TOTAL:	$4,376,276.00	$0.00	$4,376,276.00
			GRAND TOTAL:	$9,658,948.00	$132,023.00	$9,786,971.00

State of New Hampshire
Department of Health and Human Services
Amendment #2

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and The Family Resource Center at Gorham ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item #39), as amended on June 14, 2023 (Item #27), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $1,845,113

2. Modify Exhibit B, Scope of Services, by adding Section 2.29., to read:

   2.29. **FRS** – Family Resource Specialist. As defined within the Healthy Families America (HFA) Best Practice Standards, a direct service staff member with responsibilities related to the engagement and enrollment of new families, which may include managing referrals, outreach to families referred, determining eligibility for services, offering HFA services, connecting families to additional resources in the community, and maintaining relationships with referral sources.

3. Modify Exhibit B, Scope of Services, Section 3.24., to read:

   3.24. **Reporting**

   3.24.1. The Contractor must complete a Monthly Capacity Analysis Report, which is attached as Attachment 2, and submit to DPHS no later than the 15th of each month that includes data for the prior month.

   3.24.2. The Contractor must submit quarterly reports in January, April, July, and October, to DPHS and DCYF:

   3.24.2.1. Form 1, which is attached as Attachment 3.

   3.24.2.2. Form 2, which is attached as Attachment 4.

   3.24.2.3. FRS Outreach and Engagement Activity Log, which is attached as Attachment 6 – Amendment #2.

   3.24.3. The Contractor may be required to provide new data reporting requirements, or other key data and metrics including, but not limited to, client-level demographic, performance, and service data to the Department in a format specified by the Department.

4. Modify Exhibit B, Scope of Services, by adding Section 3.31., to read:

   3.31. **Family Resource Specialist**

   3.31.1. The Contractor must maintain a designated Family Resource Specialist (FRS) position that focuses primarily on community and family engagement. The Contractor must ensure the FRS:

3.31.1.1. Conducts routine outreach to new and existing community partners in the Berlin and Littleton regions to promote program awareness to increase the number of new referrals.

3.31.1.2. Conducts outreach to other communities across the State as requested by The Department.

3.31.1.3. Tracks outreach efforts and outcomes utilizing the FRS Outreach and Engagement Activity Log (Attachment 6 – Amendment #2).

3.31.1.4. Collaborates with the Department on quality improvement activities related to improving community outreach, engagement and enrollment as requested by the Department.

4. Modify Exhibit C, Payment Terms, Section 1, to read:

1. This Agreement is funded by:

1.1. 78% Federal funds from:

1.1.1. 19% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the United States Department of Health and Human Services (US DHHS), Health Resources and Services Administration (HRSA), Assistance Listing Number (ALN) 93.870, FAIN X10MC43595.

1.1.2. 33% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 2, 2022, by the US DHHS, HRSA, ALN 93.870, FAIN X10MC46878.

1.1.3. 5% American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the US DHHS, HRSA, ALN 93.870, FAIN X11MC41935.

1.1.4. 7% American Rescue Plan Act Funding for Home Visiting, as awarded on October 28, 2021, by the US DHHS, HRSA, ALN 93.870, FAIN X11MC45263.

1.1.5. 21% New Hampshire Initiative to Address COVID-19 Health Disparities, as awarded on June 1, 2021, by the US DHHS, Centers for Disease Control and Prevention, ALN 93.391, FAIN NH75OT000031.

1.1.6. 15% Administration of Children Youth & Families (ACF), as awarded on October 1, 2022, by the US DHHS, ALN 93.658, FAIN 2201NHFOST.

1.2. 22% General funds.

5. Modify Exhibit C, Payment Terms, Section 7, to read:

7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement and shall be in accordance with the approved line items, as specified in Exhibits C-1 Budget Sheet, SFY 2023 through Exhibit C-8 Budget Sheet, SFY 2024, and Exhibit C-10 Budget Sheet, SFY 2023 through Exhibit C-13, Budget (SFY 2024) – Amendment #1.

6. Modify Exhibit C-2 Budget Sheet, SFY 2024, by replacing it in its entirety with Exhibit C-2 Budget, SFY 2024 – Amendment #2, which is attached hereto and incorporated by reference herein.

7. Modify Exhibit C-3 Budget Sheet, SFY 2025, by replacing it in its entirety with Exhibit C-3 Budget, SFY 2025 – Amendment #2, which is attached hereto and incorporated by reference herein.

8. Modify Exhibit C-9 Budget Sheet, SFY 2025, by deleting it in its entirety.

All terms and conditions of the Contract and prior amendments not modified by this Amendment remain in full force and effect. This Amendment shall be effective upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below.

State of New Hampshire
Department of Health and Human Services

3/26/2024
Date

DocuSigned by:
Iain Watt
Name: Iain Watt
Title: Interim Director - DPHS

The Family Resource Center at Gorham

3/26/2024
Date

DocuSigned by:
Patricia Stolte
Name: Patricia Stolte
Title: Executive Director

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

3/26/2024
Date

DocuSigned by:
Robyn Guarino
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____(date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

FRS Outreach and Engagement Activity Log	
Name of FRS:	
Quarter:	
Percent of FTE dedicated to Community Outreach (0-100% - # of hrs divided by 40):	

Date:	Activity	Comments (Please describe the outreach activity, who you met with, the outcome, and any planned follow-up.)
EAXMPLES:		
12/1/2023	Meeting with professional (scheduled)	Attended quarterly in-person meeting with Berlin DCYF OO. Reviewed the status of existing referrals. Discussed 2 new referrals anticipated this week. Reviewed the process of how to make a referral. Next meeting will occur 3/1/24.
12/1/2023	Meeting with non-participant	Provided information to a walk-in client at the FRC about HFA and CFSS home visiting and local food banks. Provided diapers from FRC stock. Scheduled follow-up check-in via text on 12/15.

Contractor Initial: PS

Date: 3/26/2024

Exhibit C-2 Budget, SFY 2024 - Amendment #2

New Hampshire Department of Health and Human Services	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - Home Visiting Formula Grant
Budget Period	G&C Approval - 06/30/2024
Indirect Cost Rate (if applicable)	0.09

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$258,414
2. Fringe Benefits	$56,851
3. Consultants	$5,000
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$3,000
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$5,500
6. Travel	$12,635
7. Software	$150
8. (a) Other - Marketing/ Communications	$3,000
8. (b) Other - Education and Training	$4,000
8. (c) Other - Other (specify below)	$0
Other (please specify)	$14,000
Other (please specify)	$2,000
Other (please specify)	$400
Other (please specify)	$3,800
9. Subrecipient Contracts	$0
Total Direct Costs	$374,750
Total Indirect Costs	$37,175
TOTAL	$411,925

Contractor Initial: PS

Date: 3/26/2024

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Exhibit C-3 Budget, SFY 2025 - Amendment #2

New Hampshire Department of Health and Human Services	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - Home Visiting Formula Grant
Budget Period	07/01/2024 - 09/30/2024
Indirect Cost Rate (if applicable)	0.09

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$81,880
2. Fringe Benefits	$18,001
3. Consultants	$1,572
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$250
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$650
6. Travel	$2,000
7. Software	$0
8. (a) Other - Marketing/ Communications	$185
8. (b) Other - Education and Training	$100
8. (c) Other - Other (specify below)	$0
Other (please specify)	$1,500
Other (please specify)	$700
Other (please specify)	$0
Other (please specify)	$51
9. Subrecipient Contracts	$0
Total Direct Costs	$107,079
Total Indirect Costs	$10,683
TOTAL	$117,762

Contractor Initial: PS

Date: 3/26/2024

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Lori A. Weaver
Interim Commissioner

Patricia M. Tilley
Director

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

May 30, 2023

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into a **Sole Source** amendment to an existing contract, which was originally competitively bid, with The Family Resource Center at Gorham (VC#162412-B001), Gorham, NH, below to add funding to support home visiting and lead reduction programmatic activities, involving care, coordination, outreach, and education by increasing the total price limitation by $215,000 from $1,590,113 to $1,805,113 with no change to the contract completion dates of September 30, 2024, effective upon Governor and Council approval. 100% Federal Funds.

The original contracts were approved by Governor and Council on February 8, 2023, item #39.

Funds are available in the following accounts for State Fiscal Year 2023, and are anticipated to be available in State Fiscal Years 2024 and 2025, upon availability and continued appropriation of funds in the future operating budget with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details sheet.

EXPLANATION

The request is **Sole Source** because the Department is amending the scope of services to include the Healthy Homes and Lead Poisoning Prevention Program (HHLPPP), as well as adding funding to support programmatic activities involving care coordination, outreach, and education. The Contractor is uniquely qualified to provide services, as they have established lead prevention services within the North Country region.

The purpose of this request is for the Contractor to conduct outreach and education initiatives in the North Country, with focus on prenatal testing, education to school nurses and special education directors, and completing lead risk assessment of targeted pre-1978 childcare facilities via the Healthy Homes and Lead Poisoning Prevention Program. The Contractor will provide education specifically on young children and pregnant women residing in housing built before 1978. Additional funding will support the ongoing programmatic activities involving care coordination and programmatic outreach conducted by Family Support Specialists to connect families with need services in the community, including home visiting and family resource center programming.

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The Contractor will collaborate with medical providers, families of young children and other stakeholders, initiating outreach and education to address the high risk of lead poisoning across the North Country.

Approximately 148 individuals will be served by The Family resource Center at Gorham during State Fiscal Years 2023, 2024, and 2025.

The Division of Public Health Services will continue to monitor services by reviewing all educational material and reports.

Should the Governor and Executive Council not authorize this request, individuals in the North Country will not have access to education and a lead risk assessment, which may increase the likelihood of Lead Poisoning occurrences in children under 6 years of age.

Source of Federal Funds: Assistance Listing Number # 93.391, FAIN# NH75OT000031.

In the event that the Federal Funds become no longer available, additional General Funds will not be requested to support this program.

Respectfully submitted,

Lori A. Weaver
Interim Commissioner

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FISCAL DETAILS
HOME VISITING SERVICES - THE FAMILY RESOURCE CENTER AT GORHAM
AMENDMENT #1

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: PUBLIC HEALTH DIV, BUREAU OF COMM & HEALTH SERV, HOME VISITING FORMULA GNT
100% FEDERAL - CFDA# 93.870, FAIN# X1043595, X1046878

The Family Resource Center at Gorham - Vendor #157412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023 (10/1/22-6/30/23)	074-500589	Grants for Pub Assi and Rel	90083208	$269,729.00	$0.00	$269,729.00
2024 (7/1/23-6/30/24)	074-500589	Grants for Pub Assi and Rel	90083210	$378,354.00	$0.00	$378,354.00
2025 (7/1/24-6/30/24)	074-500589	Grants for Pub Assi and Rel	90083210	$92,583.00	$0.00	$92,583.00
			SUBTOTAL	$740,666.00	$0.00	$740,666.00

05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF COMM & HEALTH SERV, MATERNAL - CHILD HEALTH, HEALTH DIV
62.50% GENERAL FUNDS, 37.50% FEDERAL FUNDS, HRSA 93.991, FAIN# B04MC45230

Family Resource Center at Gorham - Vendor #157412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023 (10/1/22-6/30/23)	102-500731	Contracts for Program Svcs	90004009	$56,250.00	$0.00	$56,250.00
2024 (7/1/23-6/30/24)	102-500731	Contracts for Program Svcs	90004019	$75,000.00	$0.00	$75,000.00
2025 (7/1/24-6/30/24)	102-500731	Contracts for Program Svcs	90004019	$18,750.00	$0.00	$18,750.00
			SUBTOTAL	$150,000.00	$0.00	$150,000.00

05-95-09-901010-5771 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF POLICY & PERFORMANCE, PH COVID-19 HEALTH DISPARITIES
100% FEDERAL FUNDS - CFDA# 93.391, FAIN# NH75OT000031

Family Resource Center at Gorham - Vendor #157412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023 (10/1/22-6/30/23)	074-500589	Grants for Pub Assi and Relief	90577150	$0.00	$15,000.00	$15,000
2023 (10/1/22-6/30/23)	074-500589	Grants for Pub Assi and Relief	90577150	$86,512.00	$15,000.00	101,512.00
2024 (7/1/23-5/31/24)	074-500589	Grants for Pub Assi and Relief	90577150	$0.00	$85,000.00	$85,000
2024 (7/1/23-5/31/24)	074-500589	Grants for Pub Assi and Relief	90577150	$0.00	$100,000.00	100,000.00
			SUBTOTAL	$86,512.00	$215,000.00	$301,512.00

05-95-90-902010-2451 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV: BUREAU OF COMM & HEALTH SERV, ARP - MIEC HOME VISITING
100% FEDERAL FUNDS - CFDA# 93.870, FAIN# X1141935, X1145263

Family Resource Center at Gorham - Vendor #157412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023 (10/1/22-6/30/23)	074-500589	Grants for Pub Assi and Rel	90083206	$88,714.00	$0.00	$88,714.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$50,000.00	$0.00	$50,000.00
2025 (7/1/24-6/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$56,532.00	$0.00	$56,532.00
			SUBTOTAL	$176,246.00	$0.00	$176,246.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-29580000, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD - FAMILY SERVICES
50% FEDERAL FUNDS - CFDA# 93.658, FAIN# 2201NHFOST

The Family Resource Center at Gorham - Vendor #157412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount

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FISCAL DETAILS
HOME VISITING SERVICES - THE FAMILY RESOURCE CENTER AT GORHAM
AMENDMENT #1

2023 (10/1/22-6/30/23)	537-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$164,133.00	$0.00	$164,133.00
2024 (7/1/23-6/30/24)	537-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,645.00	$0.00	$218,645.00
2025 (7/1/24-9/30/24)	537-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$54,711.00	$0.00	$54,711.00
			SUBTOTAL:	$437,489.00	$0.00	$437,489.00
COMBINED HOME VISITING SERVICES CONTRACT TOTAL:				$1,590,113.00	$215,000.00	$1,805,113.00

Docusign Envelope ID: 3DECE725-0CDD-4507-8937-6581F3EABCD7

DocuSign Envelope ID: A18740FE-0B0F-48E4-8804-5B3CD719C7B1

DocuSign Envelope ID: FB51B797-44E6-4309-B513-EC48448AC878

State of New Hampshire
Department of Health and Human Services
Amendment #1

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and The Family Resource Center at Gorham ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item # 39), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 17, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to increase the price limitation, and modify the scope of services to support continued delivery of these services; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $1,805,113

2. Modify Exhibit B, Scope of Services, by adding Subsection 3.30., to read:

   3.30. **Coos County Lead Program**

   3.30.1. Outreach and Education

   3.30.1.1. The Contractor must provide outreach and education to school nurses and Directors of Special Education in School Administrative Units across Coos County on the importance of lead testing, awareness of lead hazards in pre-1978 housing, and the impact of lead poisoning on children 72 months and younger.

   3.30.1.2. The Contractor must educate families of young children on lead hazards associated with living in a pre-1978 home. This education will include topics such as finding a lead safe contractor and the dangers of lead poisoning to young children and pregnant women. As part of this education, the Contractor shall distribute items that include lead check swabs, boot trays, and window guards.

   3.30.2. Policy Development

   3.30.2.1. The Contractor, in collaboration with the support from the Healthy Homes and Lead Poisoning Prevention Program, must educate School Administrators, School Boards, and Special Education Directors, on the benefits of developing policies to increase lead testing in young children.

   3.30.2.2. The Contractor, in collaboration with the support from the Healthy Homes and Lead Poisoning Prevention Program, must shall educate municipalities on the benefits of increasing the number of contractors in their community using lead safe work practices on pre-1978 properties.

3.30.3. Increasing Lead Testing Rates on Young Children and Pregnant Women

3.30.3.1. The Contractor shall obtain a Lead Care II Point of Care Testing Device to test young children, 72 months and younger and pregnant women for blood lead elevations

3.30.3.2. The Contractor shall educate healthcare providers, school nurses, parents and pregnant women on where lead paint hazards exist in pre-1978 properties, the importance of using lead-safe work practices, and blood lead testing.

3.30.4. Identify Lead Hazards in Childcare Facilities

3.30.4.1. The Contractor shall enter into an agreement with a licensed Risk Assessor work with up to four Childcare Facilities to identify lead hazards and the potential risk to young children, 72 months and younger.

3.30.4.2. The Risk Assessor will educate Childcare Facility staff members on lead hazard awareness and the importance of testing young children, 72 months and younger, for blood lead elevations.

3. Modify Exhibit B, Scope of Services, by adding Section 4., to read:

4. Exhibits Incorporated

4.1 The Contractor must use and disclose Protected Health Information in compliance with the Standards for Privacy of Individually Identifiable Health Information (Privacy Rule) (45 CFR Parts 160 and 164) under the Health Insurance Portability and Accountability Act (HIPAA) of 1996, and in accordance with the attached Exhibit I, Business Associate Agreement, which has been executed by the parties.

4.2 The Contractor must manage all confidential data related to this Agreement in accordance with the terms of Exhibit K, DHHS Information Security Requirements.

4.3 The Contractor must comply with all Exhibits D through K, which are attached hereto and incorporated by reference herein.

4. Modify Exhibit C, Payment Terms, Section 1., by replacing with the below:

1. This Agreement is funded by:

1.1. 83% Federal Funds from:

1.1.1. Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X10MG43595.

1.1.2. Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 2, 2022, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X10MC46878.

1.1.3. American Rescue Plan Act Funding for Home Visiting, as awarded on April 30,2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X11MC41935.

1.1.4. American Rescue Plan Act Funding for Home Visiting, as awarded on October 28, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAINX11MC45263.

1.1.5. Administration of Children Youth & Families (ACF), as awarded on October 1. 2022, CFDA 93.658, FAIN 2201NHFOST.

1.1.6. Maternal and Child Health Services Block Grant, as awarded on October 19, 2021, by the DHHS Health Resources and Services Administration CFDA 93.994, FAIN B04MC45230.

1.1.7. New Hampshire Initiative to Address COVID-19 Health Disparities, as awarded on May 27, 2021, by the Centers for Disease Control and Prevention, CFDA 93.391, FAIN NH75OT000031.

1.2. 17% General Funds.

5. Modify Exhibit C, Payment Terms, Section 7., by replacing with the below:

7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1 Budget Sheet, SFY 2023 through Exhibit C-13, Budget (SFY 2024) – Amendment # 1.

6. Modify Exhibit C, Payment Terms, Subsection 9.2., by replacing with the below:

9.2. Payment shall be made on a monthly basis and follow a process determined by the Department, as indicated in Section 10.1., below.

7. Modify Exhibit C, Payment Terms, Subsection 10.1., by replacing with the below:

10.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line items, as specified in Exhibit C-11 Budget Sheet, and SFY 2023; Exhibit C-12 Budget Sheet. The Maximum allotment for contract expenditures by Fiscal Year is as follows:

State Fiscal Year	Amount
2023	$74,965
2024	$109,862
2025	$0*
Sub-Total	**$184,827**
***The Contractor will only bill for direct services in SFY 25.**	

8. Modify Exhibit C-10 Budget, SFY 2023, by replacing in its entirety with Exhibit C-10, Budget (SFY 2023) – Amendment # 1, which is attached hereto and incorporated by reference herein.

9. Add Exhibit C-13, Budget (SFY 2024) – Amendment # 1, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract not modified by this Amendment remain in full force and effect. This Amendment shall be effective upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

5/30/2023
Date

DocuSigned by:
Patricia M. Tilley
Name: Patricia M. Tilley
Title: Director

The Family Resource Center at Gorham

5/30/2023
Date

DocuSigned by:
Patricia Stolte
Name: Patricia Stolte
Title: Executive Director

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

5/30/2023

Date

DocuSigned by:
Robyn Guarino

Name: Robyn Guarino

Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:

Title:

Exhibit C-10, Budget (SFY 2023) - Amendment # 1

New Hampshire Department of Health and Human Services	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - PH COVID-19 Health Disparities
Budget Period	*SFY 2023* (07/01/2022 - 06/30/2023)
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$69,753
2. Fringe Benefits	$9,000
3. Consultants	$3,500
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$2,200
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$5,000
5.(e) Supplies Office	$3,700
6. Travel	$3,000
7. Software	$400
8. (a) Other - Marketing/Communications	$1,000
8. (b) Other - Education and Training	$4,000
8. (c) Other - Other (specify below)	$4,000
Other (please specify)	$112
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$105,665
Total Indirect Costs	$10,847
TOTAL	**$116,512**

Contractor Initial: PS

Date: 5/30/2023

Exhibit C-13, Budget (SFY 2024) - Amendment # 1

New Hampshire Department of Health and Human Services	
Contractor Name:	The Family Resource Center at Gorham
Budget Request for:	Home Visiting Services - PH COVID-19 Health Disparities
Budget Period	*SFY 2024* (07/01/2023 - 06/30/2024)
Indirect Cost Rate (if applicable)	10%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$124,748
2. Fringe Benefits	$18,000
3. Consultants	$4,000
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$2,200
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$2,000
5.(e). Supplies Office	$3,700
6. Travel	$3,000
7. Software	$552
8. (a) Other - Marketing/ Communications	$1,000
8. (b) Other - Education and Training	$4,000
8. (c) Other - Other (specify below)	$4,000
Other (please specify)	$1,000
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$168,200
Total Indirect Costs	$16,800
TOTAL	**$185,000**

Contractor Initial: PS

Date: 5/30/2023

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ARC

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Lori A. Weaver
Interim Commissioner

Patricia M. Tilley
Director

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

December 28, 2022

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, and the Division of Children, Youth and Families, to enter into Retroactive contracts with the contractors listed below in an amount not to exceed $8,847,771 to provide home visiting services, with the option to renew for up to four (4) additional years, effective retroactive to October 1, 2022, upon Governor and Council approval through September 30, 2024. 73.07% Federal Funds. 25.11% General Funds. 1.22% Other Funds.

Contractor Name	Vendor Code	Area Served*	Contract Amount
Community Action Partnership of Strafford County	177200-B004	Rochester Catchment Area	$1,224,446
Granite VNA, Inc.	177244-B002	Conway Catchment Area	$461,064
The Family Resource Center at Gorham	162412-B001	Berlin and Littleton Catchment Areas	$1,590,113
Waypoint	177166-B002	Concord, Manchester, Seacoast and Southern Catchment Areas	$5,572,148
		Total:	$8,847,771

* Note the Department did not receive vendor responses for some areas of the state and is currently in the process of re-soliciting for those remaining regions to ensure statewide coverage.

Funds are available in the following accounts for State Fiscal Year 2023, and are anticipated to be available in State Fiscal Years 2024 and 2025, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

Because the Bridges System is used to process and monitor payments for these agreements, no purchase order number is assigned. The New Hampshire First System will not be used to encumber these funds. Depending on the eligibility of the client, funding type is determined at the time of the payment.

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See attached fiscal details.

EXPLANATION

This request is Retroactive to avoid any interruption in these services and to allow for continuity of care for families in these regions. This was a complex procurement collaboratively sought by the Division of Public Health Services and the Division for Children, Youth and Families with multiple funding sources. The Department needed additional time to confirm funding details and finalize the contracts and therefore did not have executed contracts in time to present to Governor and Council to prevent the previous contracts from expiring.

The purpose of this request is to provide home visiting services to pregnant individuals, and families with children up to age five (5), by utilizing the evidence-based home visiting model from Healthy Families America and its' Child Welfare Protocols. This nationally recognized program demonstrates positive outcomes for families in the areas of positive parenting practices, improved maternal and child health, improved school readiness, increased economic self-sufficiency and parental educational attainment, and increased linkages and referrals to valuable community resources. This model has also demonstrated reduction in child maltreatment and family violence. Healthy Families America is currently being provided in every County in New Hampshire. The purpose of this request is to ensure continuity of services, while supporting expansion of the program, making it available to a broader population of families, including those involved in New Hampshire's child welfare system.

Approximately 354 individuals will be served during State Fiscal Years 2023, 2024, and 2025.

The Division of Public Health Services will monitor services by:

- Conducting monthly, quarterly, and annual data reviews to evaluate capacity utilization, service delivery by region, and demographic data to ensure equitable provision of services.
- Conducting quarterly and annual data reviews of program performance across 19 federally-defined performance measures.
- Reviewing data entered into model-specific tracking documents by each sub-contractor to ensure fidelity to the requirements of the evidence-based model.

The Division for Children, Youth, and Families will monitor services using the following performance measures:

[1] HFA Evidence of Effectiveness 2022 Website.pdf (healthyfamiliesamerica.org).

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- Referrals
  - Share of families who are referred to Healthy Families America form Division for Children, Youth and Families. (Number of families currently enrolled in Healthy Families America Child Welfare Protocols and percentage of Healthy Families America Child Welfare Protocol slots currently used.)
  - Share of Division for Children, Youth and Families-referred families that were enrolled between three (3) and twenty-four (24) months of age.
  - Share of Division for Children, Youth and Families-referred families with a recent assessment of a Substance Exposed Infant.
- Enrollments
  - Average time to enrollment from the time and date of referral.
  - Number of days from referral date to the first home visit.
  - Share of families that are offered Healthy Family America and percentage of offered families who decide to receive Healthy Family America.
  - Proportion of families that are retained in the program over specified periods of time. (3 months, 6 months, and every 6 months thereafter) after receiving a first home visit.
  - Proportion of families who receive at least seventy-five percent (75%) of the appropriate number of home visits based upon the individual level of service to which they are assigned.
- Program Completion
  - Share of families who do not complete the program, including, reason for non-completion and/or discharge.
  - Share of families that discharged who completed a minimum of specified periods of service. (Starting at 6 months, and every 6 months thereafter up until 36 months of service.)
- Short-term Outcomes
  - Share of families with a new case opened to the Division for Children, Youth and Families, or a new report of maltreatment, within 6 months after discharge.
  - Share of children who enter out-of-home placement within 6 months after discharge, including breakdown of placement type.
  - Share of children who enter any form of out-of-home placement within 12 months of discharge.
  - Differences in outcomes outlined above (i.e., prevention of out of home removal, decreases in risk/needs) by racial/ethnic and geographic characteristics.

The Department selected the contractors through a competitive bid process using a Request for Proposals (RFP) that was posted on the Department's website from June 29, 2022 through August 2, 2022. The Department received four (4) responses that were reviewed and scored by a team of qualified individuals. The Scoring Sheet is attached.

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As referenced in Exhibit A, of the attached agreements, the parties have the option to extend the agreements for up to four (4) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties, and Governor and Council approval.

Should the Governor and Council not authorize this request over 200 New Hampshire families will experience a lapse in preventive services they've come to depend on, leaving vulnerable families without access to proven support for preventing child abuse and neglect, family violence, low birth weight, maternal depression, and developmental delays.

Source of Federal Funds: Assistance Listing Number # 93.870, FAIN # X1043595, X1046878, X1145263; Assistance Listing Number # 93.658, FAIN # (FFPSA) 2201NHFOST; and Assistance Listing Number # 93.391, FAIN # NH75OT000031

In the event that the Federal or Other Funds become no longer available, additional General Funds will not be requested to support this program.

Respectfully submitted,

Lori A. Weaver
Interim Commissioner

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FISCAL DETAIL SHEET

SFY 23, 24 & 25 HOME VISITING SERVICES CONTRACTS

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: PUBLIC HEALTH DIV, BUREAU OF COMM & HEALTH SERV, HOME VISITING FORMULA GNT

100% FEDERAL CFDA #93.870 FAIN # X1043595, X1046878

Community Action Partnership of Strafford County - Vendor #177200-B004				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$192,620.00
2023 (10/1/22 - 6/30/23)	102-500731	Contracts for Program Services	90083208	$16,905.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$317,640.00
2025 (7/1/24-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$79,410.00
			SUBTOTAL:	$600,665.00

Waypoint - Vendor #177166-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$692,250.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$950,000.00
2025 (7/1/24-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$237,500.00
			SUBTOTAL:	$1,879,750.00

[illegible]				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$80,533.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$109,440.00
2025 (7/1/24-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$27,540.00
			SUBTOTAL:	$217,510.00

The Family Resource Center at Gorham - Vendor #182412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$269,729.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$378,354.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$92,583.00
			SUBTOTAL:	$740,666.00
			Total of AU 5896	$3,444,600.00

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05-95-92-920510-3382 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIVISION, BUREAU OF DRUG & ALCOHOL SVCS, GOVERNOR COMMISSION FUNDS

100% OTHER FUNDS

Waypoint - Vendor #177166-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023	074-500589	Grants for Pub Asst and Rel	92057502	$108,000.00
			SUBTOTAL:	$108,000.00
			TOTAL OF AU 3382	$108,000.00

05-95-09-902010-5190 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC BUREAU OF COMM & HEALTH SERV, MATERNAL - CHILD HEALTH, HEALTH DIV

100% GENERAL FUNDS

Family Resource Center at Gorham - Vendor #162412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	102-500731	Contracts for Program Svcs	90004019	$56,250.00
2024 (7-1-23-6/30/24)	102-500731	Contracts for Program Svcs	90004019	$75,000.00
2025 (7/1/24-9/30/24)	102-500731	Contracts for Program Svcs	90004019	$18,750.00
			SUBTOTAL:	$150,000.00
			TOTAL OF AU 5190	$150,000.00

05-95-09-901010-5771 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF POLICY & PERFORMANCE, PH COVID-19 HEALTH DISPARITIES

100% FEDERAL FUNDS CFDA #93.391 FAIN#NH75OT000031

Waypoint - Vendor #177166-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Relief	90577160	$105,000.00
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Relief	90577150	$157,500.00
			SUBTOTAL:	$262,500.00

Family Resource Center at Gorham - Vendor #162412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Relief	90577150	$86,512.00
			SUBTOTAL:	$86,512.00
			TOTAL OF AU 5771	$349,012.00

05-95-90-902010-2451 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV, BUEAU OF COMM & HEALTH SERV, ARP - MIEC HOME VISITING 100% FEDERAL FUNDS CFDA #93.870, FAIN# X11161935 & X11145263

Community Action Partnership of Strafford County - Vendor #177200-B004				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083206	$17,532.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$54,231.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$13,558.00
			SUBTOTAL:	$85,321.00

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Waypoint - Vendor #177168-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Assi and Rel	90083206	$114,064.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$125,000.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$142,350.00
			SUBTOTAL:	$381,414.00

[redacted]				
State Fiscal Year	Class / Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Assi and Rel	90083206	$11,452.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$0.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$0.00
			SUBTOTAL:	$11,452.00

Family Resource Center at Gorham - Vendor #162412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Assi and Rel	90083206	$68,714.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$50,000.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$56,532.00
			SUBTOTAL:	$175,246.00
			TOTAL OF AU 2451	$653,433.00

DPHS SUBTOTAL: $4,705,045.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-2958, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD – FAMILY SERVICES
50% FEDERAL CFDA #93.658 FAIN # 2201NHFOST

Community Action Partnership of Strafford County - Vendor #177200-B004				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$199,673.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$66,557.00
			SUBTOTAL:	$532,460.00

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Child Trauma Treatment Network				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$87,035.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$116,046.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$29,012.00
			SUBTOTAL:	$232,093.00

The Family Resource Center at Durham - Vendor 0162412B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$164,133.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,845.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$54,711.00
			SUBTOTAL:	$437,689.00

Waypoint - Vendor 0177166B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,102,682.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$367,560.00
			SUBTOTAL:	$2,940,484.00
			Total of AU 2950	$4,142,726.00

DCYF SUBTOTAL:	**$4,142,726.00**
COMBINED HOME VISITING SERVICES CONTRACT TOTAL:	**$8,847,771.00**

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New Hampshire Department of Health and Human Services
Division of Finance and Procurement
Bureau of Contracts and Procurement
Scoring Sheet

Project ID # RFP-2023-DPHS-01-HOMEV

Project Title Home Visiting Services

	Maximum Points Available	Community Action Partnership of Strafford County	Granite VNA, Inc.	The Family Resource Center at Gorham	Waypoint
Technical					
Experience	30	25	26	30	26
Organizational Capacity	33	30	29	33	30
Performance Improvement	25	20	22	24	24
Subtotal - Technical	80	75	75	87	82
Cost					
Budget Sheet (Appendix F & F-1)	5	3	3	4	3
Program Staff List (Appendix G)	5	3	3	4	4
Subtotal - Cost	10	6	6	8	7
TOTAL POINTS	100	81	81	95	89
TOTAL PROPOSED VENDOR COST		$1,004,320	$484,186	$1,730,764	$3,840,958

	Reviewer Name	Title
1	Daytsen Smith	Administrator III, Finance
2	Lisa Cecchelo (Lampron)	Administrator II, DPHS Finance
3	Kristi Hall	Program Specialist IV, DPHS
4	Ashley Jones	Program Specialist IV, DCYF
5	Kelly McCormac	Assessment Supervisor IV, DCYF
6	Amelia Moran	Supervisor V, DPHS

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Subject: Home Visiting Services / RFP-2023-DPHS-01-HOMEV-03

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 Health and Human Services		1.2 State Agency Address 129 Pleasant Street Concord, NH 03301-3857	
1.3 Contractor Name The Family Resource Center at Gorham		1.4 Contractor Address 123 Main Street Gorham, NH 03851	
1.5 Contractor Phone Number 603-466-5190	1.6 Account Number 05-095-090-902010-5896 05-095-090-902010-5190 05-095-090-902010-2451 05-095-042-421010-2958 05-095-090-901010-5771	1.7 Completion Date 9/30/2024	1.8 Price Limitation $1,590,113.00
1.9 Contracting Officer for State Agency Robert W. Moore, Director		1.10 State Agency Telephone Number (603) 271-9631	
1.11 Contractor Signature Docu Signed by: Patricia Stolte Date: 1/5/2023		1.12 Name and Title of Contractor Signatory Patricia Stolte Executive Director	
1.13 State Agency Signature Docu Signed by: Patricia M. Tilley Date: 1/6/2023		1.14 Name and Title of State Agency Signatory Patricia M. Tilley Director	
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: Docu Signed by: Robyn Guarino		On: 1/6/2023	
1.17 Approval by the Governor and Executive Council *(if applicable)* G&C Item number:		G&C Meeting Date:	

Contractor Initials PS

Date 1/5/2023

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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 as indicated in block 1.17, 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. 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 affected 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. 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, 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 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. The State shall have no liability to the Contractor other than the contract price.

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 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.

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. 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 race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3. 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 all rules, regulations and orders, and 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 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

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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) days from the date of the notice; and if the Event of Default is not timely cured, terminate this Agreement, effective two (2) 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.

8.3. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

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) 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) 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. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT B. In addition, at the State's discretion, the Contractor shall, within 15 days of notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement.

10. DATA/ACCESS/CONFIDENTIALITY/ PRESERVATION.

10.1 As used in this Agreement, the word "data" shall mean all 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 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data 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 The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice, which shall be provided to the State at least fifteen (15) days prior to the assignment, and a written consent of the State. For purposes of this paragraph, 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.

12.2 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State. 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. Unless otherwise exempted by law, the Contractor shall indemnify and hold harmless the State, its officers and employees, from and against any and all claims, liabilities and costs for any personal injury or property damages, patent or copyright infringement, or other claims asserted against the State, its officers or employees, which arise out of (or which may be claimed to arise out of) the acts or omissions of the

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Contractor, or subcontractors, including but not limited to the negligence, reckless or intentional conduct. 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 sovereign immunity of the State, 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 his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than ten (10) days prior to the expiration date of each insurance policy. 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 his or her 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. 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.

17. 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.

18. CHOICE OF LAW AND FORUM. This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. 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. Any actions arising out of this Agreement shall be brought and maintained in New Hampshire Superior Court which shall have exclusive jurisdiction thereof.

19. CONFLICTING TERMS. In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and/or attachments and amendment thereof, the terms of the P-37 (as modified in EXHIBIT A) shall control.

20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

21. 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.

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

23. 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.

24. 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.

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EXHIBIT A

Revisions to Standard Agreement Provisions

1. Revisions to Form P-37, General Provisions

1.1. Paragraph 3, Subparagraph 3.1, Effective Date/Completion of Services, is amended as follows:

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 as indicated in block 1.17, this Agreement, and all obligations of the parties hereunder, shall become effective October 1, 2022, ("Effective Date").

1.2. Paragraph 3, Effective Date/Completion of Services, is amended by adding subparagraph 3.3 as follows:

3.3. The parties may extend the Agreement for up to four (4) additional years from the Completion Date, contingent upon satisfactory delivery of services, available funding, agreement of the parties, and approval of the Governor and Executive Council.

1.3. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.3 as follows:

12.3. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions. The Contractor shall have written agreements with all subcontractors, specifying the work to be performed; and if applicable, a Business Associate Agreement in accordance with the Health Insurance Portability and Accountability Act. Written agreements shall specify how corrective action shall be managed. The Contractor shall manage the subcontractor's performance on an ongoing basis and take corrective action as necessary. The Contractor shall annually provide the State with a list of all subcontractors provided for under this Agreement and notify the State of any inadequate subcontractor performance.

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EXHIBIT B

Scope of Services

1. Introduction

1.1. The Contractor must provide services in accordance with Department requirements and the Healthy Families America (HFA) program, which is designed to reduce the risk of child maltreatment by strengthening parent-child relationships, promoting healthy childhood growth, and enhancing family functioning and protective factors. Families enroll voluntarily with HFA, and meet regularly with a Family Support Specialist and receive services tailored to their needs.

HFA is both culturally-inclusive and trauma-informed, and teaches parents about healthy child development and appropriate activities for keeping their child(ren) healthy and thriving. The Contractor must provide services to assist in:

- Increasing caregivers' ability to build attachments with their child(ren);
- Creating foundations for nurturing relationships;
- Enhancing family functioning through reducing risk and increasing protective factors; and
- Developing connections to additional resources, which include, but are not limited to:
  - Housing.
  - Food.
  - Various forms of treatment.
  - School readiness.
  - Childcare.
  - Access to diapers and other supplies.

1.2. The Department, through this Agreement, seeks to assess needs more holistically, and to create crucial linkages across systems that touch vulnerable populations to seamlessly connect them to supports and enhance available services at all levels of needs. The Department's Division of Public Health Services (DPHS) in conjunction with the Division for Children, Youth and Families (DCYF) are collaborating their efforts to achieve this goal. The Contractor must provide services using the HFA program to children and families on behalf of both Divisions.

1.3. For the purposes of this Agreement, all references to day(s) mean Monday through Friday, business days, excluding state and federal holidays.

2. Key Definitions & Terminology

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EXHIBIT B

2.1. **Begin Date of Services** –The date the Contractor initiated contact with the client/family, and corresponds with the date listed as "begin date of services" on the Division for Children, Youth and Families (DCYF) Service Authorization Form.

2.2. **CPS** – Child Protective Services.

2.3. **CQI** – Continuous Quality Improvement.

2.4. **Cultural Humility** – Maintaining a willingness to suspend what you know, or what you think you know, about a person based on generalizations about their culture. Rather what you learn about a participant's culture stems from being open to what they themselves have determined is their personal expression of their heritage and culture.

2.5. **CWP** – Child Welfare Protocols.

2.6. **DCYF** – Division for Children, Youth and Families.

2.7. **DHHS** – Department of Health and Human Services.

2.8. **DPHS** – Division of Public Health Services.

2.9. **DO** – District Office.

2.10. **Face-to-face** – An in-person or virtual interaction or home visit (defined below) following the date on which the referral was made in which a provider begins working with the families to deliver HFA.

2.11. **FFPSA** – Family First Prevention Services Act.

2.12. **FTE** – Full time equivalent is a figure calculated from the number of full-time and part-time employees in an organization that represents these workers as a comparable number of full-time employees.

2.13. **GGK** – Growing Healthy Kids is a user friendly and truly comprehensive strength-based approach to growing nurturing parent-child relationships and supporting healthy childhood development.

2.14. **HFA** – Healthy Families America.

2.15. **HFA model** – A well-supported practice that provides home visiting designed to work with families who may have histories of trauma, intimate partner violence, mental health challenge, and/or substance use disorders. HFA services are delivered voluntarily, intensively, and over the long-term.

2.16. **HFA BPS** – Healthy Families America Best Practice Standards.

2.17. **HFA CWP model** – A set of protocols that requires the existing model requirements be provided, while offering additional guidance related to enrollment, caseload management, and establishing a formal MOU with child welfare in order to best serve families. Services are offered for a minimum of three years, regardless of the age of the child at intake, and supports families

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with children through age five, which allows sites to enroll families referred by child welfare up to age twenty-four months.

2.18. **HRSA** – Health Resource and Services Administration is the primary Federal agency for improving access to health care services for people who are uninsured, isolated, or medically vulnerable and the funding source of the MIECHV.

2.19. **MIECHV** – Maternal, Infant and Early Childhood Home Visiting – a program that supports pregnant individuals and families and helps at-risk parents of children from birth to kindergarten entry to tap the resources and hone the skills they need to raise children who are physically, socially and emotionally healthy and ready to learn.

2.20. **MOU/MOA** – Memorandum of Understanding/Memorandum of Agreement – a written agreement between two (2) parties to provide certain services.

2.21. **Open Assessment** – Any report of concern received by DCYF that is screened in by DCYF's central intake, and is being investigated by child protection staff.

2.22. **Open Case** – Any case opened to DCYF, including community-based/internal voluntary cases.

2.23. **Out-of-Home Placement** – The removal of a child from their normal place of residence to reside in a court-ordered substitute care setting under the placement and care responsibility of DCYF.

2.24. **PAT** – Parents As Teachers – a foundational curriculum used as an approach to working with families that is relationship-based and parenting-focused.

2.25. **PII** – Personally Identifiable Information.

2.26. **QA** – Quality Assurance.

2.27. **Virtual Home Visit** - A home visit, as described in an applicable service delivery model that is conducted solely by the use of electronic information and telecommunications technologies.[1]

2.28. **Well-supported practice** – An evidence-based service that has at least two (2) contrasts, with non-overlapping samples in studies carried out in usual care or practice settings that achieve a rating of moderate or high on design and execution and demonstrate favorable effects in a target outcome domain. At least one (1) of the contrasts must demonstrate a sustained favorable effect of at least 12 months beyond the end of treatment on at least one (1) target outcome.

3. **Statement of Work**

3.1. The Contractor must provide face-to-face voluntary home visiting services to

[1] Text - H.R.133 - 116th Congress (2019-2020): Consolidated Appropriations Act, 2021 | Congress.gov | Library of Congress.

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pregnant individuals and families with children up to age five (5) by utilizing the evidence-based home visiting model from HFA.

3.2. The Contractor must ensure a minimum of 80% of families served using the traditional HFA model are enrolled in services prenatally or by when the child is 3-months old. The Contractor must offer services in compliance with HFA requirements after enrollment. Eligible families for traditional HFA services (as managed by the Division of Public Heather Services) must fall within one (1) or more of the federally defined priority populations below:

3.2.1. Are first-time parents.

3.2.2. Have income of less than one hundred eighty-five percent (<185%) of the U.S. Department of Health and Human Services (USDHHS) Poverty Guidelines.

3.2.3. Are less than twenty-one (21) years of age.

3.2.4. Have a history of child abuse or neglect, or have had interactions with child welfare services.

3.2.5. Have a history of substance misuse or need substance use disorder treatment.

3.2.6. Are users of tobacco products in the home.

3.2.7. Have or have had a child(ren) with low student achievement.

3.2.8. Have a child(ren) with developmental delays or disabilities.

3.2.9. Are in families that include individuals who are serving or have formerly served in the armed forces.

3.3. The Contractor must service a portion of families utilizing the HFA Child Welfare Protocols (CWP) in the Berlin and Littleton DCYF Catchment Areas, which is attached as Attachment 1. Virtual home visits may also be accommodated, in compliance with HFA requirements. The Contractor must ensure families being served utilizing the CWP have an expanded enrollment window, allowing for enrollment of families with a child up to twenty-four (24) months old, referred by the child welfare system, who are participating in the service voluntarily. The Contractor must serve no less than four (4) DCYF families during the first six (6) months of the contract period and no less than eight (8) families thereafter through the end of the contract period.

3.4. The Contractor must serve families under the traditional HFA model by DCYF Catchment Area as follows: Berlin - 25, Littleton - 20.

3.5. Eligible families for HFA CWP services must fall within one (1) of more of the following DCYF FFPSA priority populations:

3.5.1. Pregnant or parenting youth in foster care.

3.5.2. Families with an infant born exposed to substances.

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3.5.3. Families assessed by DCYF where the assessment will be closed unfounded.

3.5.4. Families with an open DCYF case who have recently reunified.

3.6. The Contractor must provide services with the goal of reducing risk of maltreatment for children assessed by the DCYF by:

3.6.1. Serving families involved with DCYF through open assessments or open cases, and also beyond their DCYF involvement.

3.6.2. Strengthening parent-child relationships.

3.6.3. Promoting healthy childhood growth.

3.6.4. Enhancing family functioning and protective factors both during and beyond their DCYF involvement with a long-term outcome goal of decreasing future system involvement and the need for out-of-home placement.

3.7. The Contractor must provide services that address the diverse needs of children and families in order to improve health and development outcomes for priority populations through evidence-based home visiting programs, with fidelity to the HFA model BPS. The Contractor must:

3.7.1. Be approved through the HFA model to provide services under this Agreement. The Contractor must:

3.7.1.1. Be approved through HFA, to implement the HFA CWP, which allows enrollment into HFA for DCYF referred families up to twenty-four (24) months of age.

3.7.1.2. Have HFA CWP available in the Berlin and Littleton DCYF Catchment Areas within six (6) months of Governor and Executive Council approval of this Agreement.

3.7.1.2.1 Should the Contractor be unable to begin providing services through the HFA CWP by the date specified above, a corrective action plan must be developed by the Contractor and approved by the Department.

3.7.1.2.1.1. In the event that the HFA National Office denies the Contractor use of the CWP, the Contract must develop a subcontract or MOA with an approved, accredited HFA provider to provide this service, no later than thirty (30) business days from the date of the denial.

3.7.2. Select and implement an evidence-based curriculum to support

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prenatal individuals and newly parenting families. Family Support Specialists (FSS) must be trained within six (6) months of hire on the following:

3.7.2.1. Parents as Teachers (PAT), as an annually trained "Approved user;" or

3.7.2.2. Growing Great Kids (GGK) with certification of training.

3.7.3. Collaborate with other early childhood and social service agencies to support linkages to services beneficial to families.

3.7.4. Ensure the twelve (12) critical elements that make up the essential components of the HFA model are addressed in agency policies.

3.7.5. Enter personally identifiable information (PII) for all participants served under this Agreement into the Department's designated Home Visiting Data System.

3.8. The Contractor must identify positive ways to establish relationships with each family and keep families engaged and connected over time, as participants may be reluctant to engage in services and may have difficulty building trusting relationships. The Contractor must use creative outreach strategies, such as Motivational Interviewing, to re-engage families who have disengaged.

3.9. The Contractor must adhere to HFA's site requirements by ensuring weekly individual supervision is received by all direct service staff.

3.10. The Contractor must provide monthly reflective consultation groups for direct service staff and supervisors with a skilled Infant Mental Health consultant.

3.11. The Contractor must offer home visits by licensed nurses (registered nurse (RN) or greater education level) during the prenatal and post-partum periods at a frequency of once per trimester prenatally, and once per quarter during the first year post-partum.

3.12. The Contractor must offer services that are comprehensive and focus on supporting the parent/caregiver, as well as supporting the parent-child interaction and child development. Additionally, all families must be linked to a medical provider and other services, as appropriate.

3.13. The Contractor must obtain all necessary authorizations for release of information. All forms developed for authorization for release of information must be made available for review by the Department during site visits for selected case reviews.

3.14. The Contractor must coordinate, where possible, with other local service providers including, but not limited to:

3.14.1. Health care providers.

3.14.2. Social workers.

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3.14.3. Social services.

3.14.4. Early Interventionists.

3.15. The Contractor must develop and maintain an advisory group comprised of community partners, family participants, and agency staff with a wide range of skills and abilities, including representatives with diverse skills, strengths, community knowledge, professions, and cultural diversity. The Contractor must:

3.15.1. Promote equity in all facets of operations with families, staff, and community.

3.15.2. Maintain policy or other written guidance expressing the Contractor's commitment to respectful staff interactions and supporting staff to continually strengthen their relational skills focused on diversity, equity, and inclusion.

3.15.3. Gather information to reflect on and better understand issues impacting staff and families served and to examine the effectiveness of its equity strategies.

3.15.4. Develop an equity plan based on what it learns about itself, from an equity perspective, in the way it supports its staff, the families it serves, and the community it works within to set a course for continuous improvement to achieve greater equity in all facets of its work.

3.16. The Contractor must evaluate the progress of each program participant, as well as the performance of programs and services provided.

3.17. The Contractor must ensure that they:

3.17.1. Collaborate with relevant DCYF staff and related stakeholders when a valid release of information has been signed or a subpoena has been issued by the court.

3.17.2. Make reports to DCYF Central Intake if they suspect child abuse or neglect, consistent with their responsibility, as mandated reporters under New Hampshire law.

3.18. The Contractor must actively and regularly collaborate monthly, with both Divisions, to enhance contract management, improve results, and adjust program delivery and policy, based on successful outcomes.

3.19. Compliance Standards

3.19.1. The Contractor must offer services to all families referred by the Department unless that family is identified as ineligible for HFA under model specifications and requirements.

3.19.2. The Contractor must ensure referrals are accepted from multiple

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sources within the child welfare system including, but not limited to:

3.19.2.1. DCYF Juvenile Justice Services.

3.19.2.2. DCYF Child Protective Services (CPS).

3.19.3. The Contractor must adhere to all specifications and requirements, in compliance with NH DCYF's 5-year prevention plan and the Family First Prevention Service Act (FFPSA), for HFA CWP cases, including but not limited to:

3.19.3.1. All data reporting;

3.19.3.2. Record keeping and retention;

3.19.3.3. Fiscal compliance;

3.19.3.4. Maintenance of an evidence-based program identified as well-supported through the Title IV-E Clearinghouse;

3.19.3.5. Documented prevention type on the DCYF service authorization (which will be completed by the Department); and

Submitting a completed prevention plan every twelve (12) months for every DCYF- referred family. DCYF staff will complete the initial prevention plan for families, and the Contractor must update the plans at the 12-month mark and annually. The Department will distribute associated guidance after DCYF's 5-year plan is reviewed and approved.

3.19.4. The Contractor must collaborate with the Department to ensure that all program policies, procedures, and documents align with NH DCYF and DPHS policies, NH state law, and Department needs.

3.19.5. The Contractor must identify staff responsible for submitting reports and data to the Department within 30 days of the Agreement effective date.

3.20. **Staffing:**

3.20.1. The Contractor must follow all HFA Essential and Safety standards for staffing, hiring, training, and supervision, as outlined in HFA BPS.

3.20.2. The Contractor must ensure HFA home visiting staff have at least a high school diploma or equivalent, experience providing services to families, and knowledge of child development. Supervisors and Program Managers must have at least a Bachelor's degree with three (3) years prior experience.

3.20.3. The Contractor must ensure FSSs receive extensive training in the program model before delivering the service and on a recurring basis.

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Training must comply with all HFA model specifications and requirements, including but not limited to:

3.20.3.1. Attending a four-day core training that is specialized based on role (assessors, home visitors, and supervisors).

3.20.3.2. Supervisors attending one (1) additional day for the core training and an optional three (3) days of training that focuses on building reflective supervision skills.

3.20.3.3. Program managers are required to attend core training plus three (3) days of training focused on how to implement the model to fidelity using the HFA BPS..

3.20.4. The Contractor must ensure additional available training is beneficial to the staff in delivering HFA. Training and conferences topics must include but are not limited to:

3.20.4.1: Substance use.

3.20.4.2. Childhood Maltreatment (Abuse/Neglect).

3.20.4.3. Parenting techniques.

3.20.4.4. Cultural competence/humility.

3.20.4.5. Childhood and generational trauma (Trauma-Informed).

3.20.4.6. Engagement strategies.

3.20.5. The Contractor must ensure each Family Support Specialist (FSS) maintains a caseload of no more than ten (10) to twelve (12) families per 1 FTE for the first two (2) years of employment and no more than fifteen (15) to twenty (20) families per one (1) FTE after completing 24 months of employment for traditional HFA; and no more than ten (10) to twelve (12) families at any time for HFA CWP. These caseload maximums shall be prorated per HFA requirements for staff with less than 40 hours per week dedicated to the role of FSS.

3.21. The Contractor must maintain HFA accreditation and follow all BPS related to hiring, staffing levels, training, and supervision among other components of the model.

3.22. Discharge from HFA services:

3.22.1. The Contractor must develop a discharge plan for each family, beginning at the time of admission and continuing throughout service.

3.22.2. The Contractor must not discharge any family referred by the Department without following a protocol specified by the Department.

3.23. Extending HFA services:

3.23.1. The Contractor must offer HFA Services to the child and family for a

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minimum of three (3) years in total.

3.24. Reporting

3.24.1. The Contractor must complete a Monthly Capacity Analysis Report, which is attached as Attachment 2 on a form provided by the Department. This document must be submitted to DPHS no later than the 15th of each month, containing the prior month's data.

3.24.2. The Contractor, on a quarterly (January, April, July, and October) and annual (October) basis, must submit to DCYF:

3.24.2.1. Form 1, which is attached as Attachment 3.

3.24.2.2. Form 2, which is attached as Attachment 4.

3.24.3. The Contractor may be required to provide new data reporting requirements, or other key data and metrics including client-level demographic, performance, and service data to the Department in a format specified by the Department.

3.25. Background Checks

3.25.1. For all Contractor employees, interns, volunteers, and any subcontractor employees, interns, and volunteers providing services under this Agreement, the Contractor must, at its own expense, after obtaining a signed and notarized authorization form the individual(s) for whom information is being sought:

3.25.1.1. Submit the person's name for review against the Bureau of Elderly Adult Services (BEAS) state registry maintained pursuant to RSA 161-F:49;

3.25.1.2. Submit the person's name for review against the Division for Children, Youth and Families (DCYF) center registry pursuant to RSA 169-C:35;

3.25.1.3. Complete a criminal records check to ensure that the person has no history of:

3.25.1.3.1. Felony conviction; or

3.25.1.3.2. Any misdemeanor conviction involving:

3.25.1.3.2.1. Physical or sexual assault;

3.25.1.3.2.2. Violence;

3.25.1.3.2.3. Exploitation;

3.25.1.3.2.4. Child pornography;

3.25.1.3.2.5. Threatening or reckless conduct;

3.25.1.3.2.6. Theft;

3.25.1.3.2.7. Driving under the influence of drugs or alcohol; or

3.25.1.3.2.8. Any other conduct that represents evidence of behaviors that could endanger the well-being of any individual served under this Agreement; and

3.25.2. Unless approval is granted by the Department, the Contractor must not permit any employee, volunteer, intern, or subcontractor to provide services under this Agreement until the Contractor has confirmed:

3.25.2.1. The individual's name is not on the BEAS state registry;

3.25.2.2. The individual's name is not on the DCYF central registry;

3.25.2.3. The individual does not have a record of a felony conviction; or

3.25.2.4. The individual does not have a record of any misdemeanors as specified above.

3.26. Confidential Data

3.26.1. The Contractor must meet all information security and privacy requirements as set by the Department and in accordance with the Department's Exhibit K, DHHS Information Security Requirements.

3.26.2. The Contractor must ensure any staff and/or volunteers involved in delivering services through this Agreement, sign an attestation agreeing to access, view, store, and discuss Confidential Data in accordance with federal and state laws and regulations and the Department's Exhibit K. The Contractor must ensure said individuals have a justifiable business need to access confidential data. The Contractor must provide attestations upon Department request.

3.26.3. Upon request, the Contractor must allow the Department to conduct a Privacy Impact Assessment (PIA) of its system. To conduct the PIA the Contractor must provide the Department access to applicable systems and documentation sufficient to allow the Department to asses, at minimum, the following:

3.26.3.1. How PII is gathered and stored;

3.26.3.2. Who will have access to PII;

3.26.3.3. How PII will be used in the system;

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3.26.3.4. How individual consent will be achieved and revoked and

3.26.3.5. Privacy practices.

3.26.4. The Department may conduct follow-up PIAs in the event there are either significant process changes or new technologies impacting the collection, processing or storage of PII.

3.27. Contract End-of-Life Transition Services

3.27.1. If applicable, upon termination or expiration of the Agreement, the Parties agree to cooperate in good faith to effectuate a smooth secure transition of the services from the Contractor to the Department and, if applicable, the Contractor engaged by the Department to assume the services previously performed by the Contractor for this section the new Contractor shall be known as ("Recipient"). Ninety (90) days prior to the end-of the contract or unless otherwise specified by the Department, the Contractor must begin working with the Department and if applicable, the new Recipient to develop a Data Transition Plan (DTP) on a template provided by the Department.

3.27.2. The Contractor must use reasonable efforts to assist the Recipient, in connection with the transition from the performance of Services by the Contractor and their Affiliates to the performance of such Services. This may include assistance with the secure transfer of records (electronic and hard copy), transition of historical data (electronic and hard copy), the transition of such Service from the hardware, software, network and telecommunications equipment and internet-related information technology infrastructure ("Internal IT Systems") of Contractor to the Internal IT Systems of the Recipient and cooperation with an assistance to any third-party consultants engaged by Recipient in connection with the Transition Services.

3.27.3. If a system, database, hardware, software, and/or software license ("Tools") was purchased or created to manage, track, and/or store State Data in relationship to this Contract, said Tools will be inventoried and returned to the Department, along with the inventory document, once transition of State Data is complete.

3.27.4. The internal planning of the Transition Services by the Contractor and its Affiliates must be provided to the Department and if applicable, the Recipient in a timely manner. Any such Transition Services must be deemed to be Services for purposes of this Contract.

3.27.5. Should the Data Transition extend beyond the end of the Contract, the Contractor and its Affiliates agree Contract Information Security Requirements, and if applicable, the Department's Business Associates Agreement terms and conditions remain in effect until the Data Transition is accepted as complete by the Department.

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3.27.6. In the event where the Contractor has comingled Department Data and the destruction of Transition of said data is not feasible, the Department and Contractor will jointly evaluate regulatory and professional standards for retention requirements prior to destruction.

3.28. Website and Social Media

3.28.1. Contractor agrees that if performance of services on behalf of the Department involves using social media or a website to solicit information of individuals, or Confidential data, the Contractor must work with the Department's Communication Bureau to ensure that any social media or website designed, created, or managed on behalf of the Department meets all of the Department's and NH Department of Information Technology's website and social media requirements and policies.

3.28.2. Contractor agrees that protected health information (PHI), personal identifiable information (PII), or other confidential information solicited either by social media or the website that is maintained, stored or captured must not be further disclosed, unless expressly provided in the Contract. The solicitation or disclosure of PHI, PII, or other confidential information is subject to the Information Security Requirements Exhibit, the Business Associates Agreement Exhibit and all applicable state rules and state and federal laws. Unless specifically required by the Contract and unless clear notice is provided to users of the website or social media, the Contractor agrees that site visitation will not be tracked, disclosed or used for website or social media analytics or marketing.

3.29. Performance Measures

3.29.1. For services provided for DPHS, the Department will monitor Contractor performance by reviewing indicated reporting requirements on Form 1, which is attached as Attachment 3, and Form 2, which is attached as Attachment 4, and working with the Contractor to select areas to improve upon utilizing CQI strategies through a data driven process.

3.29.2. For services provided for DCYF, the Department will focus on specific data points collected through its internal data systems, monthly, quarterly and annual submissions via email, and existing HFA data collection reports on DCYF Key Performance Metrics, which are attached as Attachment 5.

4. Exhibits Incorporated

4.1. The Contractor must use and disclose Protected Health Information in compliance with the Standards for Privacy of Individually Identifiable Health

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information (Privacy Rule) (45 CFR Parts 160 and 164) under the Health Insurance Portability and Accountability Act (HIPAA) of 1996, and in accordance with the attached Exhibit I, Business Associate Agreement, which has been executed by the parties.

4.2. The Contractor must manage all confidential data related to this Agreement in accordance with the terms of Exhibit K, DHHS Information Security Requirements.

4.3. The Contractor must comply with all Exhibits D through K, which are attached hereto and incorporated by reference herein.

5. Additional Terms

5.1. Impacts Resulting from Court Orders or Legislative Changes

5.1.1. The Contractor agrees that, to the extent future state or federal legislation or court orders may have an impact on the Services described herein, the State has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

5.2. Federal Civil Rights Laws Compliance: Culturally and Linguistically Appropriate Programs and Services

5.2.1. The Contractor must submit, within ten (10) days of the Agreement Effective Date, a detailed description of the communication access and language assistance services to be provided to ensure meaningful access to programs and/or services to individuals with limited English proficiency; individuals who are deaf or have hearing loss; individuals who are blind or have low vision; and individuals who have speech challenges.

5.3. Credits and Copyright Ownership

5.3.1. All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Agreement must include the following statement, "The preparation of this (report, document etc.) was financed under an Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services."

5.3.2. All materials produced or purchased under the Agreement must have prior approval from the Department before printing, production, distribution or use.

5.3.3. The Department must retain copyright ownership for any and all

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original materials produced, including, but not limited to:

5.3.3.1. Brochures.

5.3.3.2. Resource directories.

5.3.3.3. Protocols or guidelines.

5.3.3.4. Posters.

5.3.3.5. Reports.

5.3.4. The Contractor must not reproduce any materials produced under the Agreement without prior written approval from the Department.

5.4. Operation of Facilities: Compliance with Laws and Regulations

5.4.1. In the operation of any facilities for providing services, the Contractor must comply with all laws, orders and regulations of federal, state, county and municipal authorities and with any direction of any Public Officer or officers pursuant to laws which must impose an order or duty upon the contractor with respect to the operation of the facility or the provision of the services at such facility. If any governmental license or permit must be required for the operation of the said facility or the performance of the said services, the Contractor will procure said license or permit, and will at all times comply with the terms and conditions of each such license or permit. In connection with the foregoing requirements, the Contractor hereby covenants and agrees that, during the term of this Agreement the facilities must comply with all rules, orders, regulations, and requirements of the State Office of the Fire Marshal and the local fire protection agency, and must be in conformance with local building and zoning codes, by-laws and regulations.

6. Records

6.1. The Contractor must keep records that include, but are not limited to:

6.1.1. Books, records, documents and other electronic or physical data evidencing and reflecting all costs and other expenses incurred by the Contractor in the performance of the Contract, and all income received or collected by the Contractor.

6.1.2. All records must be maintained in accordance with accounting procedures and practices, which sufficiently and properly reflect all such costs and expenses, and which are acceptable to the Department, and to include, without limitation, all ledgers, books, records, and original evidence of costs such as purchase requisitions and orders, vouchers, requisitions for materials, inventories, valuations of in-kind contributions, labor time cards, payrolls, and other records requested or required by the Department.

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6.1.3. Statistical, enrollment, attendance or visit records for each recipient of services, which records must include all records of application and eligibility (including all forms required to determine eligibility for each such recipient), records regarding the provision of services and all invoices submitted to the Department to obtain payment for such services.

6.2. During the term of this Agreement and the period for retention hereunder, the Department, the United States Department of Health and Human Services, and any of their designated representatives must have access to all reports and records maintained pursuant to the Agreement for purposes of audit, examination, excerpts and transcripts. If, upon review of the Final Expenditure Report the Department must disallow any expenses claimed by the Contractor as costs hereunder the Department must retain the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

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Attachment 1:
DCYF Catchment Area Locations

Berlin
(650 Main Street Suite 200, Berlin NH 03570)

Serving the cities, towns, and locations of:

- Atkinson and Gilmanton Academy Grant
- Bean's Grant
- Bean's Purchase
- Berlin
- Bretton Woods
- Cambridge
- Carroll
- Cascade
- Chandlers Purchase
- Clarksville
- Colebrook
- Columbia
- Coos Junction
- Crawford's Purchase
- Crystal
- Cutt's Grant
- Dalton
- Dix's Grant
- Dixville
- Dummer
- Errol
- Ervings Location
- Fabyan Gorham
- Grange Greens Grant
- Groveton
- Hadley's Purchase
- Jefferson
- Kilkenny
- Lancaster
- Low and Burbank's Grant
- Maplewood
- Martin's Location
- Milan
- Millsfield
- North Stratford
- Northumberland
- Odell
- Percy
- Pinkham's Grant
- Pittsburg
- Randolph
- Riverton
- Sargent's Purchase
- Second College Grant
- Shelburne
- South Lancaster
- Stark
- Stewartstown
- Stratford
- Stratford Hollow
- Success
- Thompson & Meserve's Purchase
- Twin Mountain
- Wentworth's Location
- West Milan
- West Stewartstown
- Whitefield

Littleton
(80 North Littleton Road, Littleton, NH 03561)

Serving the cities, towns, and locations of:

- Apthorp
- Bath
- Benton
- Bethlehem
- Bethlehem Junction
- Center Haverhill
- East Haverhill
- Easton
- Franconia
- Glencliff
- Haverhill
- Landaff
- Lincoln
- Lisbon
- Littleton
- Livermore
- Lyman
- Monroe
- North Haverhill
- North Woodstock
- Pierce Bridge
- Piermont
- Pike
- Sugar Hill
- Warren
- Woodstock
- Woodsville

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Attachment 1:
DCYF Catchment Area Locations

Conway *(71 Hobbs Street, Conway NH 03818)*		
Serving the cities, towns, and locations of:		
• Albany	• Freedom	• Redstone
• Bartlett	• Glen	• Sanbornville
• Brookfield	• Granite	• Sandwich
• Center Conway	• Hale's Location	• Silver Lake
• Center Effingham	• Hart's Location	• Snowville
• Center Ossipee	• Intervale	• South Chatham
• Center Sandwich	• Jackson	• South Effingham
• Center Tuftonboro	• Kearsarge	• South Tamworth
• Chatham	• Madison	• Tamworth
• Chocorua	• Melvin Village	• Tuftonboro
• Conway	• Mirror Lake	• Union
• East Conway	• Moultonborough	• Wakefield
• East Wakefield	• Moultonville	• West Ossipee
• Eaton	• North Conway	• Wolfeboro
• Effingham	• North Sandwich	• Wolfeboro Falls
	• Ossipee	• Wonalancet

Claremont *(17 Water Street, Suite 301, Claremont NH 03743)*		
Serving the cities, towns, and locations of:		
• Acworth	• Georges Mills	• Orange
• Beauregard Village	• Goshen	• Orford
• Burkehaven	• Grafton	• Plainfield
• Canaan	• Grantham	• South Acworth
• Charlestown	• Guild	• South Charlestown
• Claremont	• Hanover	• Springfield
• Cornish	• Langdon	• Sunapee
• Cornish Flat	• Lebanon	• Unity
• Croydon	• Lempster	• Washington
• East Lempster	• Lyme	• West Canaan
• Enfield	• Lyme Center	• West Lebanon
• Enfield Center	• Meriden	• West Springfield
• Etna	• Mount Sunapee	• West Unity
	• Newport	

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Attachment 1:
DCYF Catchment Area Locations

Keene
(111 Key Road, Keene NH 03431):

Serving the cities, towns, and locations of:

- Alstead
- Antrim
- Ashuelot
- Bennington
- Chesterfield
- Deering
- Drewsville
- Dublin
- East Sullivan
- East Swanzey
- East Westmoreland
- Fitzwilliam
- Gilsum
- Greenfield
- Greenville
- Hancock
- Harrisville
- Hillsborough
- Hillsborough Upper Village
- Hinsdale
- Jaffrey
- Keene
- Marlborough
- Marlow
- Munsonville
- Nelson
- New Ipswich
- North Swanzey
- North Walpole
- Peterborough
- Richmond
- Rindge
- Roxbury
- Sharon
- Spofford
- Stoddard
- Sullivan
- Surry
- Swanzey
- Temple
- Troy
- Walpole
- West Chesterfield
- West Deering
- West Peterborough
- West Swanzey
- Westmoreland
- Westport
- Winchester
- Windsor

Laconia
(65 Beacon Street West, Laconia NH 03246)

Serving the cities, towns, and locations of:

- Alexandria
- Alton
- Alton Bay
- Ashland
- Barnstead
- Bear Island
- Belmont
- Bridgewater
- Bristol
- Campton
- Center Barnstead
- Center Harbor
- Dorchester
- East Holderness
- Ellsworth
- Gilford
- Gilmanton
- Gilmanton Corners
- Gilmanton Iron Works
- Glendale
- Governor Isle
- Groton
- Hebron
- Holderness
- Laconia
- Lakeport
- Lochmere
- Lower Gilmanton
- Meredith
- Meredith Center
- New Hampton
- North Sanbornton
- Plymouth
- Quincy
- Rumney
- Sanbornton
- Thornton
- Tilton
- Waterville Valley
- Weirs
- Wentworth
- West Alton
- West Rumney
- Winnisquam

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Attachment 1:
DCYF Catchment Area Locations

Concord
(40 Terrill Park Drive, Concord NH 03301)

Serving the cities, towns, and locations of:

- Allenstown
- Andover
- Bladgett Landing
- Boscawen
- Bow
- Bradford
- Canterbury
- Chichester
- Concord
- Contoocook
- Danbury
- Davisville
- Dunbarton
- East Andover
- East Concord
- East Sutton
- Elkins
- Epsom
- Francestown
- Franklin
- Gerrish
- Goffstown
- Gossville
- Henniker
- Hill
- Hooksett
- Hopkinton
- Loudon
- New Boston
- New London
- Newbury
- North Sutton
- North Wilmot
- Northfield
- Pembroke
- Penacook
- Pinardville
- Pittsfield
- Potter Place
- Salisbury
- Short Falls
- South Danbury
- South Sutton
- Suncook
- Sutton
- Warner
- Weare
- Webster
- Webster Lake
- West Franklin
- Wilmot
- Wilmot Flat

Manchester
(1050 Perimeter, Suite 501, Manchester, NH 03103)

Serving the city of:
Manchester

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Attachment 1:
DCYF Catchment Area Locations

Rochester
(150 Wakefield Street Suite 22, Rochester NH 03867)

Serving the cities, towns, and locations of:

- Barrington
- Center Strafford
- Dover
- Durham
- East Rochester
- Farmington
- Gonic
- Lee
- Madbury
- Middleton
- Milton
- Milton Mills
- New Durham
- Rochester
- Rollinsford
- Strafford

Seacoast
(19 Rye St. Portsmouth, NH 03801)

Serving the cities, towns, and locations of:

- Auburn
- Brentwood
- Candia
- Danville
- Deerfield
- East Kingston
- Epping
- Exeter
- Fremont
- Greenland
- Hampton
- Hampton Beach
- Hampton Falls
- Kensington
- Kingston
- New Castle
- Newfields
- Newington
- Newmarket
- Newton
- Newton Junction
- North Hampton
- Northwood
- Nottingham
- Portsmouth
- Raymond
- Rye
- Rye Beach
- Seabrook
- Somersworth
- South Hampton
- Stratham
- West Nottingham

Southern
(16 Whipple St. Nashua, NH 03060):

District Office serving the cities, towns, and locations of:

- Amherst
- Bedford
- Brookline
- Hollis
- Hudson
- Litchfield
- Lyndeborough
- Mason
- Merrimack
- Milford
- Mont Vernon
- Nashua
- North Salem
- Pelham
- Reeds Ferry
- Salem
- Wilton
- Windham

Southern Telework serving the cities, towns, and locations of:

- Atkinson
- Chester
- Derry
- East Derry
- East Hampstead
- Hampstead
- Londonderry
- Plaistow
- Sandown

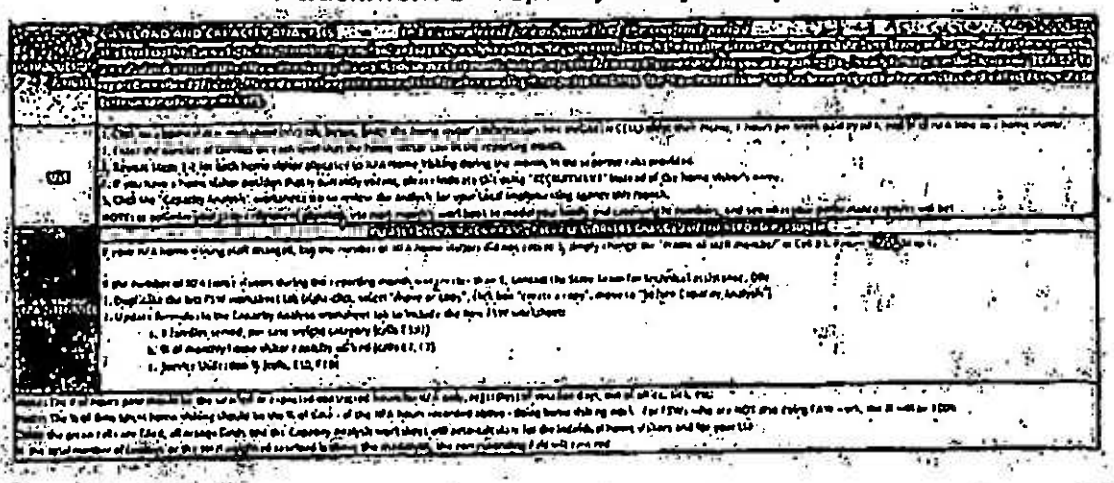
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Attachment 2 - Capacity Analysis Report

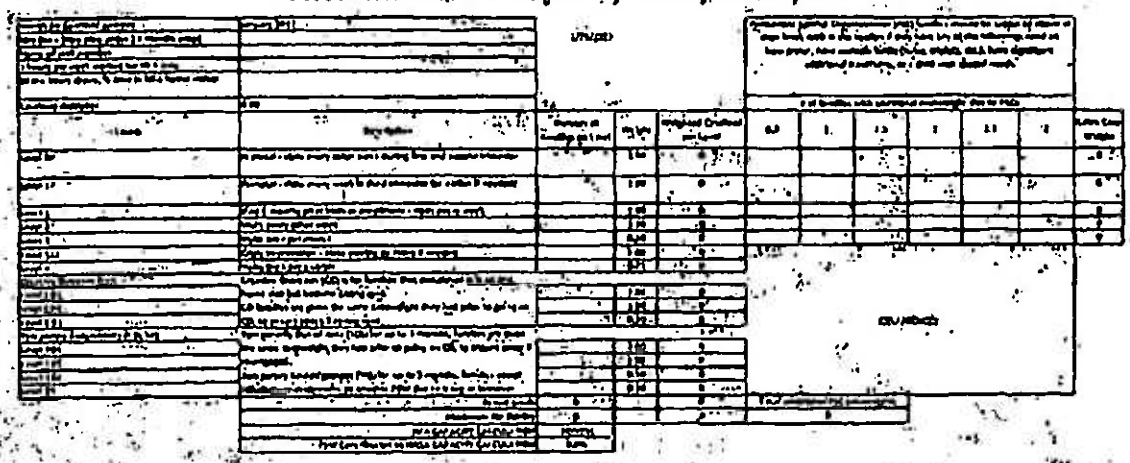


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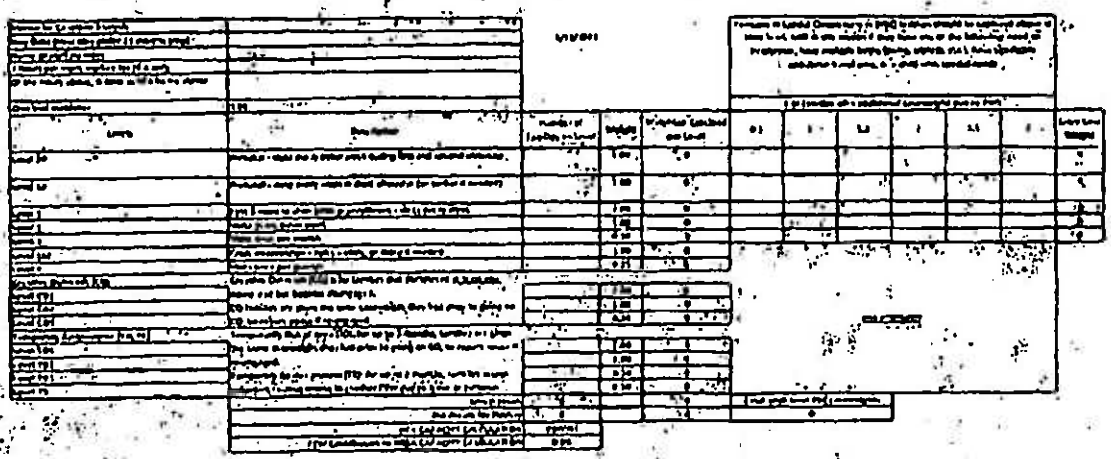


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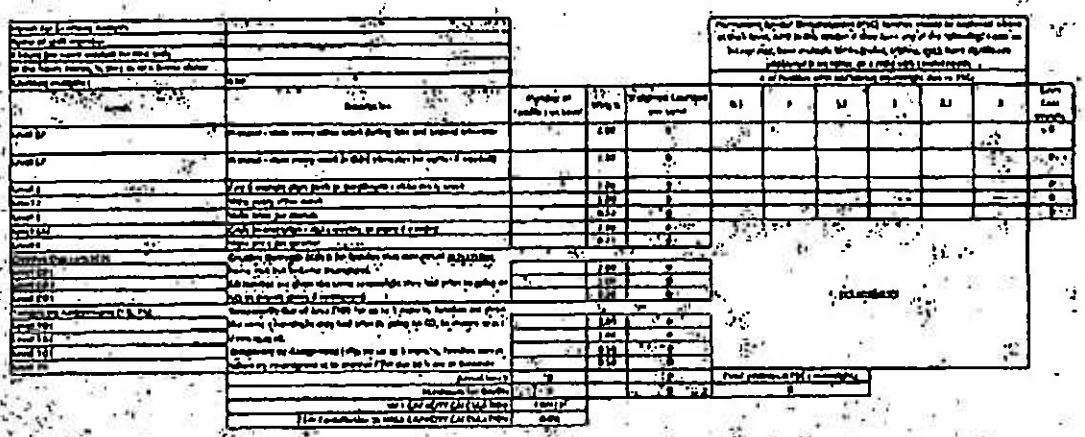
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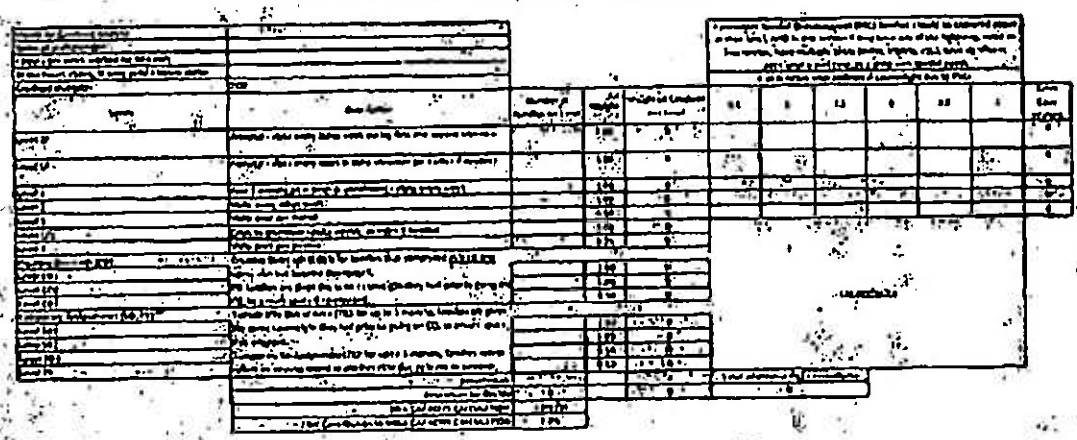


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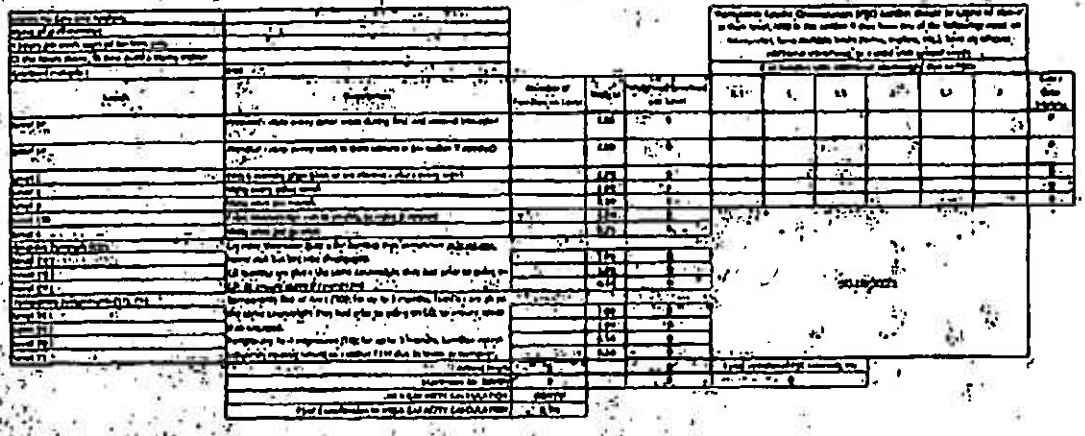
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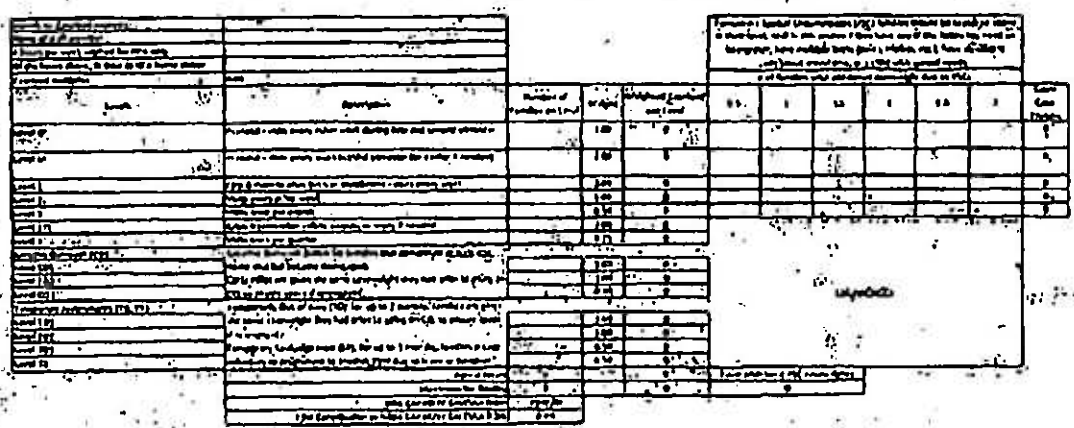
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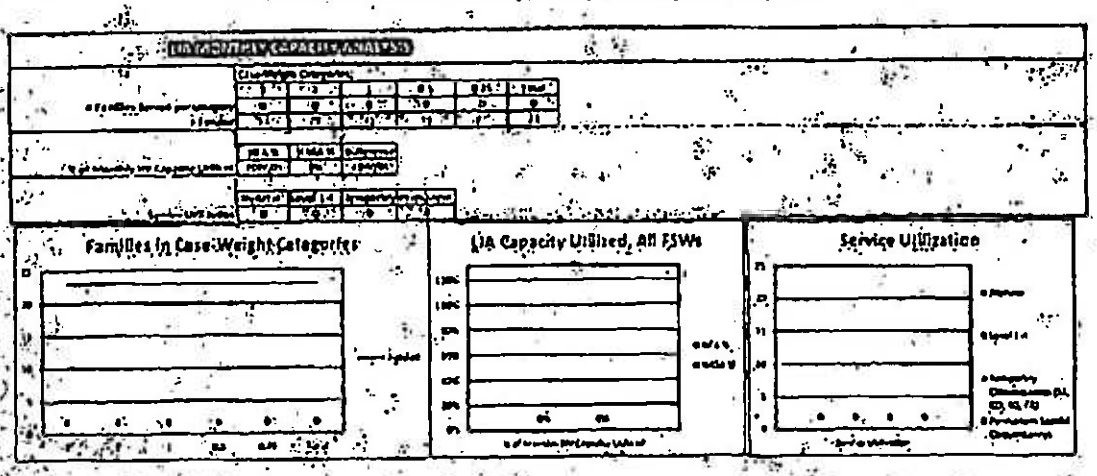


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OMB No. 0906-0017
Expiration Date: 07/31/2021

Attachment 3 - FORM 1

THE MATERNAL, INFANT, AND EARLY CHILDHOOD HOME VISITING PROGRAM

DEMOGRAPHIC, SERVICE UTILIZATION, AND SELECT CLINICAL INDICATORS

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0906-0017. Public reporting burden for this collection of information is estimated to average 360 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-29, Rockville, Maryland, 20857.

July 24, 2018

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OMB No: 0924-0811
Expiration Date: 07/31/2021

Attachment 3 - Form 1

SECTION A: PARTICIPANT DEMOGRAPHICS

Table 1: Unduplicated Count of New and Continuing Program Participants Served by MIECHV

Participants	Number Newly Enrolled	Number Continuing During Reporting Period	Total
Pregnant Women			
Female Caregivers			
Male Caregivers			
All Adults (Auto Calculate)			
Female Index Children			
Male Index Children			
All Index Children (Auto Calculate)			

Notes:

Table 2: Unduplicated Count of Households Served by MIECHV

Households	Number Newly Enrolled	Number Continuing During Reporting Period	Total
Number of Households			

Notes:

Table 3: Unduplicated Count of Participants and Households Served by State Home Visiting Programs (non-MIECHV)

Participants and Households	Total Number Served during Reporting Period
Pregnant Women	
Female Caregivers	
Male Caregivers	
All Adults (Auto Calculate)	
Female Index Children	
Male Index Children	
All Index Children (Auto Calculate)	
Number of Households	

Notes:

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OMB No. 0906-0017
Expiration Date: 03/31/2021

Attachment 3 - Form 3

Table 4: Adult Participants by Age

Adult Participants	≤17	18-19	20-21	22-24	25-29	30-34	35-44	45-54	55-64	≥65	Unknown/Did not Report*	Total
Pregnant Women												
Female Caregivers												
Male Caregivers												
All Adults (Auto Calculate)												

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 5: Index Children by Age

Index Children	<1 year	1-2 years	3-4 years	5-6 years	Unknown/Did not Report*	Total
Female Index Children						
Male Index Children						
All Index Children (Auto Calculate)						

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 6: Participants by Ethnicity

Participants	Hispanic or Latino	Not Hispanic or Latino	Unknown/Did not Report*	Total
Pregnant Women				
Female Caregivers				
Male Caregivers				
All Adults (Auto Calculate)				
Female Index Children				
Male Index Children				
All Index Children (Auto Calculate)				

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Expiration Date: 01/31/2021

Attachment 3 - Form 1

Notes:

Table 7: Participants by Race

Participants	American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or Other Pacific Islander	White	More than one race	Unknown/Did not Report*	Total
Pregnant Women								
Female Caregivers								
Male Caregivers								
All Adults (Auto Calculate)								
Female Index Children								
Male Index Children								
All Index Children (Auto Calculate)								

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 8: Adult Participants by Marital Status

Adult Participants	Never Married (Excluding Not Married but Living Together with Partner)	Married	Not Married but Living Together with Partner	Separated/Divorced/Widowed	Unknown/Did not Report*	Total
Pregnant Women						
Female Caregivers						
Male Caregivers						
All Adults (Auto Calculate)						

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Attachment 3 - Form I

Notes:

Table 9: Adult Participants by Educational Attainment

Adult Participants	Less than HS diploma	HS Diploma/GED	Some college/ training	Technical training or certification	Associate's Degree	Bachelor's Degree or Higher	Other	Unknown/Did not Report*	Total
Pregnant Women									
Female Caregivers									
Male Caregivers									
All Adults (Auto Calculate)									

*When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 10: Adult Participants by Employment Status

Adult Participants	Employed Full Time	Employed Part-Time	Not employed	Unknown/Did not Report*	Total
Pregnant Women					
Female Caregivers					
Male Caregivers					
All Adults (Auto Calculate)					

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

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Attachment 3 - Form 1

Table 11: Adult Participants by Housing Status

	Not Homeless					Total Not Homeless	Homeless			Total Homeless	Unknown/Did not Report*	Total
Adult Participants	Owns or shares own home, condominium, or apartment	Rents or shares own home or apartment	Lives in public housing	Lives with parent or family member	Some other arrangement		Homeless and living in shelter	Homeless and living in an emergency or transitional shelter	Some other arrangement			
Pregnant Women												
Female Caregivers												
Male Caregivers												
All Adults (Auto Calculate)												

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 12: Primary Language Spoken at Home

Index Children	Number	Percent
English		
Spanish		
Other		
Unknown/Did Not Report*		
All Index Children (Auto Calculate)		100

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Attachment 3 - Form 1

Notes:

Table 13: Household Income in Relation to Federal Poverty Guidelines

Households	Number of Households	Percent
50% and under		
51-100%		
101-133%		
134-200%		
201-300%		
>300%		
Unknown/Did not Report*		
All Households (Auto Calculate)		100

* When the percent of data that is "Unknown/Did not Report" is ≥ 10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 14: For Each Household Indicate the Priority Population Characteristics

Households	Yes	No	Unknown/Did not Report*	Total
1. Low income household				
2. Household consists of a mother who is pregnant and under age 21				
3. Household has a history of child abuse or neglect or has had interactions with child welfare services				
4. Household has a history of substance abuse or needs substance abuse treatment				
5. Someone in the household uses tobacco products in the home				
6. Someone in the household has attained low student achievement or has a child with low student achievement				
7. Household has a child with developmental delays or disabilities				
8. Household includes individuals who are serving or formerly served in the US armed forces				

* When the percent of data that is "Unknown/Did not Report" is ≥ 10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

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Attachment 3 - Form 1

SECTION B: SERVICE UTILIZATION

Table 15: Service Utilization

Home Visits	Number
Total Number of Home Visits completed	

Notes:

Table 16: Family Engagement by Household

Households	Number of Households	Percent
Currently receiving services		
Completed program		
Stopped services before completion		
Enrolled but not currently receiving services/Other		
Unknown/Did not Report*		
All Categories (Auto Calculate)		

* Where the percent of data that is "Unknown/Did not Report" is ≥ 10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 17: Unduplicated Count of Households by Evidence-Based Home Visiting Model or Promising Approach

Home Visiting Model (Select One per Row – Add Rows for Additional Awards)	Number Newly Enrolled	Number Continuing During Reporting Period	Total

Notes:

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SECTION C: INSURANCE AND CLINICAL INDICATORS

Table 18: Participants by Type of Health Insurance Coverage

Participants	No Insurance Coverage	Medicaid or CHIP	Tri-Care	Private or Other	Unknown/Did not Report*	Total
Pregnant Women						
Female Caregivers						
Male Caregivers						
All Adults (Auto Calculate)						
Female Index Children						
Male Index Children						
All Index Children (Auto Calculate)						

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 19: Index Children by Usual Source of Medical Care

Index Children	Doctor's/Nurse Practitioner's Office*	Hospital Emergency Room	Hospital Outpatient	Federally Qualified Health Center*	Retail Store or Minute Clinic	Other	None	Unknown/Did not Report*	Total
Female Index Children									
Male Index Children									
All Index Children (Auto Calculate)									

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Attachment 3 - Form 1

Table 20: Index Children (2-12 months of age) by Usual Source of Dental Care

Index Children	Have a Usual Source of Dental Care	Do not have a Usual Source of Dental Care	Unknown/Did not Report*	Total
Female Index Children				
Male Index Children				
All Index Children (Auto Calculate)				

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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DocuSign Envelope ID: AC

Attachment 3 - Form 1

DEFINITIONS OF KEY TERMS

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Table Number	Field	Key Terms Requiring Definition
All Tables		MIECHV Household: For the purposes of reporting to HRSA on Form 1, a "MIECHV household" is defined as a family served during the reporting period by a trained home visitor implementing services with fidelity to the model and that is identified as a MIECHV household at enrollment. HRSA has identified two different methods that can be used to identify MIECHV households that are described below: 1. Home Visitor Personnel Cost Method (preferred method): Households are designated as MIECHV at enrollment based on the designation of the home visitor they are assigned. Using this methodology, recipients designate all households as MIECHV that are served by home visitors for whom at least 75 percent of his/her personnel costs (salary/wages including benefits) are paid for with MIECHV funding. 2. Enrollment Slot Method (temporary option): Households are designated as MIECHV households based on the slot they are assigned to at enrollment. Using this methodology, recipients identify certain slots as MIECHV-funded and assign households to these slots at enrollment in accordance with the terms of the contractual agreement between the MIECHV state recipient and the LIA regardless of the percentage of the slot funded by MIECHV. Once designated as a MIECHV household, the household is tracked for the purposes of data collection through the course of household participation in the program.
1	Unduplicated Count of New and Continuing Program Participants Served by MIECHV	New Participant: A participant, including a pregnant woman, female caregiver, or male caregiver, who signs up to participate in the home visiting program at any time during the reporting period who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). Continuing Participants: A participant, including a pregnant woman, female caregiver, or male caregiver, who was signed up and actively enrolled in the home visiting program prior to the beginning of the reporting period who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). Pregnant women are participants who were either pregnant at enrollment or pregnant at the annual update of information in a subsequent reporting period. Female caregivers are those female household members who are enrolled in the program during the reporting period, are considered a caregiver of the index child, and were not pregnant at the time of enrollment or the annual update of this information (e.g., biological mothers, adoptive mothers, foster mothers, grandmothers).

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		Male caregivers include those male household members (e.g. expectant fathers, biological fathers, step-fathers, and partners) who also meet the definition of an enrollee. Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified.
2.	Unduplicated Count of Household Served by MIECHV	New Household: A household, including a pregnant woman, female caregiver, and/or male caregiver who signs up to participate in the home visiting program at any time during the reporting period. The household may include multiple caregivers depending on model-specific definitions. Continuing Household: A household, including a pregnant woman, female caregiver, and/or male caregiver who were signed up and actively enrolled in the home visiting program prior to the beginning of the reporting period. The household may include multiple caregivers depending on model-specific definitions.
3.	Unduplicated Count of Participants and Households Served by State Home Visiting Programs (non-MIECHV)	Participant Served by a State Home Visiting Program (non-MIECHV): A participant, including a pregnant woman, female caregiver, or male caregiver, who signs up to participate in the home visiting program at any time during the reporting period who was identified as being part of a non-MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms).
4	Adult Participants by Age	Adult Participant: Includes the person or persons in the household who signed up to participate in the home visiting program (e.g., a teenage parent would be counted as an adult participant but not an index child). The category can include more than one member of the household if more than one individual are enrolled in the program (e.g., a father and a mother have both signed up to participate). It should include at a minimum for every household the primary caregiver of the index child.
5	Index Children by Age	Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified.
6	Participants by Ethnicity	The responses regarding ethnicity should reflect what the person considers herself/himself to be and are not based on percentages of ancestry. If ethnicity is unknown or not reported for some participants, enter that count in the respective "Unknown/Did not report" column.
7	Participants by Race	The responses regarding race should reflect what the person considers herself/himself to be and are not based on percentages of ancestry. Participants who select more than one race should be reported in the "More than one race" category. If ethnicity and race are unknown or not reported for some participants, enter that count in the respective "Unknown/Did not Report" columns.
8	Adult Participants by Marital Status	Adult Participant: includes the person or persons in the household who signed up to participate in the home visiting program (e.g., a teenage parent would be counted as an adult participant but not an index child). The category can include more than one member of the household if more than one individual are enrolled in the program (e.g., a father and a mother have both signed up to participate). It should include at a minimum for every household the primary caregiver of the index child.

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		If more than one individual is enrolled in the program, enter the status for all enrollees. For example: If a pregnant woman is enrolled with her spouse in the program, both participants would be counted under the married category.
9	Adult Participants by Educational Attainment	Adult Participants: Includes the person or persons in the household who signed up to participate in the home visiting program (e.g., a teenage parent would be counted as an adult participant but not an index child). This category can include more than one member of the household if more than one individual are enrolled in the program (e.g., a father and a mother have both signed up to participate). It should include at a minimum for every household the primary caregiver of the index child. Less than high school diploma includes individuals who have not completed their high school education. The Some college/training category includes those who are currently enrolled and those who attended in the past. The Technical training or certification category includes those who received technical training or certification in the past. The Associate's Degree category includes those who obtained an Associate's Degree. The Bachelor's Degree category includes those who obtained a Bachelor's Degree. The Other category includes those individuals who did not fall into the specified categories.
10	Adult Participants by Employment Status	Employed: refers to whether the person is currently working for pay. Employed Full Time: an employee who works an average of at least 30 hours per week Employed Part Time: an employee who works an average of less than 30 hours per week Not Employed: Indicates that the person is not working for pay (this category may include, for example, students, homemakers and those enrollees actively seeking work but currently not employed)
11	Adult Participants by Housing Status	Not homeless: Individuals who have a fixed, regular, and adequate nighttime residence (within the meaning of section 103(a)(1) of the McKinney-Vento Homeless Assistance Act); and Not homeless and lives in public housing: Individuals who live in a public housing unit that is administered by a public housing agency (excludes individuals who utilize housing voucher programs) Homeless: Individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of section 103(a)(1) of the McKinney-Vento Homeless Assistance Act); and

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		Homeless and sharing housing: individuals who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason Homeless and living in an emergency or transitional shelter: individuals who are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement Homeless and some other arrangement: individuals who are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; individuals who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of section 103(a)(2)(C)); individuals who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings[1]
13	Primary Language Spoken at Home	Primary language: the language used in the home the majority of the time. Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and was served by a trained home visitor implementing services with fidelity to the model who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified.
15	Household Income in Relation to Federal Poverty Guidelines	The appropriate category for a given family will depend both on household income and on the number of household members counted in the household (both home visiting enrollees and non-enrollees). Household income refers to the annual gross income for the household as defined in programmatic guidance, recorded at enrollment and annually thereafter. Federal Poverty Guidelines: Annual income data can be estimated from monthly data (monthly income x 12). The HHS Poverty Guidelines are updated annually in February and published in the Federal Register. See https://aspe.hhs.gov/poverty-guidelines.
16	For Each Household Indicate the Priority Population Characteristics	Low-Income: An individual or family with an income determined to be below the Federal Poverty Guidelines. The HHS Poverty Guidelines are updated annually in February and published in the Federal Register. See https://aspe.hhs.gov/poverty-guidelines. Pregnant women under 21: Households with expectant mothers who enroll in the program and are under 21 years old during the reporting period. Have a history of child abuse or neglect or have had interactions with child welfare services: Based on self-report, a household with members who have a history of abuse or neglect and have had involvement with child welfare services either as a child or as an adult.

[1] Administration for Children and Families, Early Childhood Learning and Knowledge Center, 2014. https://eclkc.ohs.acf.hhs.gov/publication/publication-publication-publication-

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		Have a history of substance abuse or need substance abuse treatment: Based on self-report, a household with members who have a history of substance abuse or who have been identified as needing substance abuse services through a substance abuse screening administered upon enrollment. Are users of tobacco products in the home: Based on self-report, a household with members who use tobacco products in the home or who have been identified as using tobacco through a substance abuse screening administered during intake. Tobacco use is defined as combustibles (cigarettes, cigars, pipes, hookahs, bidis), non-combustibles (chew, dip, snuff, snus, and dissolvables), and electronic nicotine delivery systems (ENDS). Have, or have children with, low student achievement: Based on self-report, a household with members who have perceived themselves or their child(ren) as having low student achievement. Have a child or children with developmental delays or disabilities: Based on self-report or home visitor/staff observation, a household with members who have a child or children suspected of having a developmental delay or disability. Are in families that are or have served in the armed forces: Based on self-report, households that include individuals who are serving or formerly served in the Armed Forces, including such households that have members of the Armed Forces who have had multiple deployments outside of the United States. For this criterion, definition includes a military member's dependent acquired through marriage, adoption, or other action during the course of a member's current tour of assigned duty.
15	Service Utilization	Home visit refers to the definition of a completed home visit enacted by the various evidence-based home visiting models approved for implementation through the MIECHV program or a Promising Approach. Please refer to model-specific guidance for specific definitions.
16	Family Engagement by Household	Currently receiving services refers to families that are participating in services at the end of the reporting period. Completed program refers to families who have completed the program according to model-specific definitions and criteria during the reporting period. Stopped services before completion refers to families who left the program for any reason prior to completion. Enrolled but not currently receiving services/Other refers to those families who do not fall into the previous categories and may include unreachable participants (i.e. the family is not regularly participating but did not actively prevent ties, etc.)
17	Unduplicated Count of Households by Evidence-Based Home Visiting Model or Promising Approach	A Household, including a pregnant woman, female caregiver, and/or male caregiver who were signed up and actively enrolled in the home visiting program prior to the beginning of or during the reporting period and continues enrollment during the reporting period. The household may include multiple caregivers depending on model-specific definitions.

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18	Participants by Type of Health Insurance Coverage	Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified. The insurance coverage categories are mutually exclusive. No insurance coverage indicates that the individual is currently not covered by any source of insurance. This table is intended to capture insurance status, not health care access: receipt of care provided for instance by the Indian Health Service or another safety net health care provider such as a Federally Qualified Health Center does not constitute insurance coverage.
19	Index Children by Usual Source of Medical Care	Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified. Usual source of care: the particular medical professional, doctor's office, clinic, health center, or other place where a person would usually go if sick or in need of advice about his or her health.
20	Index Children (≥ 12 months of age) by Usual Source of Dental Care	Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified. Usual source of dental care: a usual source of dental care, or dental home, is a place where a child can receive continuous, comprehensive, compassionate dental care. The concept of the Dental Home reflects the AAPD's clinical guidelines and best principles for the proper delivery of oral health care to all children, with a concentration on infants[1] one patient and should be established no later than 12 months of age.[1]

[1] American Academy of Pediatric Dentistry. Dental Home Resource Center. [illegible]

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OMB No: 0906-0017
Expiration Date: 07/31/2021

THE MATERNAL, INFANT, AND EARLY CHILDHOOD HOME VISITING PROGRAM

PERFORMANCE AND SYSTEMS OUTCOME MEASURES

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0906-0017. Public reporting burden for this collection of information is estimated to average 200 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-29, Rockville, Maryland, 20857.

July 19, 2018

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OMB No: 0905-0017
Expiration Date: 01/31/2021

MEASURE 1

1. BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH CONSTRUCT: PRETERM BIRTH	
2. TYPE OF MEASURE *Systems Outcome*	
3. PERFORMANCE MEASURE Percent of infants (among mothers who enrolled in home visiting prenatally before 37 weeks) who are born preter following program enrollment	
4. SPECIFICATION NUMERATOR: Number of live births (index child or subsequent children among mothers who enrolled in home visiting prenatally before 37 weeks) born before 37 completed weeks of gestation and after enrollment DENOMINATOR: Number of live births after enrollment who were born to mothers enrolled in home visiting prenatally before 37 weeks	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. NOTES	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 2

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: BREASTFEEDING**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of infants (among mothers who enrolled in home visiting prenatally) who were breastfed any amount at 6 months of age	
4. **SPECIFICATION** **NUMERATOR:** Number of infants aged 6-12 months (index child among mothers who enrolled in home visiting prenatally) who were breastfed any amount at 6 months of age **DENOMINATOR:** Number of infants aged 6-12 months (index child among mothers who enrolled in home visiting prenatally) enrolled in home visiting for at least 6 months	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 3

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: DEPRESSION SCREENING**	
2. **TYPE OF MEASURE.** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who are screened for depression using a validated tool within 3 months of enrollment (for those not enrolled prenatally) or within 3 months of delivery (for those enrolled prenatally)	
4. **SPECIFICATION** **NUMERATOR:** For those not enrolled prenatally, number of primary caregivers enrolled in home visiting who are screened for depression within the first 3 months since enrollment; for those enrolled prenatally, the number of primary caregivers screened for depression within 3 months of delivery **DENOMINATOR:** For those not enrolled prenatally, the number of primary caregivers enrolled in home visiting for at least 3 months; for those enrolled prenatally, the number of primary caregivers enrolled in home visiting for at least three months post delivery	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool, but all other data elements are known, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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7. NOTES
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 4

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: WELL CHILD VISIT**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting who received the last recommended visit based on the American Academy of Pediatrics (AAP) schedule	
4. **SPECIFICATION** **NUMERATOR:** Number of children (index child) enrolled in home visiting who received the last recommended well child visit based on the AAP schedule **DENOMINATOR:** Number of children (index child) enrolled in home visiting	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if a home visit occurred but the home visitor did not collect the data. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥ 10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 5

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: POSTPARTUM CARE**	
2. **TYPE OF MEASURE** *Performance Indicator*	
3. **PERFORMANCE MEASURE** Percent of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks (56 days) of delivery	
4. **SPECIFICATION** **NUMERATOR:** Number of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks (56 days) of delivery **DENOMINATOR:** Number of mothers who enrolled in home visiting prenatally or within 30 days after delivery and remained enrolled for at least 8 weeks (56 days) after delivery	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note! When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 6

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: TOBACCO CESSATION REFERRALS**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment.	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment **DENOMINATOR:** Number of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and were enrolled for at least 3 months	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether the primary caregiver used tobacco or cigarettes at enrollment since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are known and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator.	6.b. Value – Enter the number of cases missing from measure calculation:

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All cases of missing data should be excluded from the measure calculation.	
7. NOTES	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 7

1. **BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS** **CONSTRUCT: SAFE SLEEP**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of infants enrolled in home visiting that are always placed to sleep on their backs, without bed-sharing and without soft bedding	
4. **SPECIFICATION** **NUMERATOR:** Number of infants (index child aged less than 1 year) enrolled in home visiting whose primary caregiver reports that they are always placed to sleep on their backs, without bed-sharing and without soft bedding **DENOMINATOR:** Number of infants (index child) enrolled in home visiting who were aged less than 1 year during the reporting period	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Expiration Date: 07/31/2021

MEASURE 8

1. **BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS** **CONSTRUCT: CHILD INJURY**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Rate of injury-related visits to the Emergency Department (ED) during the reporting period among children enrolled in home visiting	
4. **SPECIFICATION** **NUMERATOR:** Number of parent-reported nonfatal injury-related visits to the ED during the reporting period among children (index child) enrolled in home visiting **DENOMINATOR:** Number of children (index child) enrolled in home visiting	
5. **VALUE FOR REPORTING PERIOD (rate)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 9

1. **BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS** **CONSTRUCT: CHILD MALTREATMENT**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with at least 1 investigated case of maltreatment following enrollment within the reporting period	
4. **SPECIFICATION** **NUMERATOR:** Number of children (index child) enrolled in home visiting with at least 1 investigated case of maltreatment following enrollment within the reporting period **DENOMINATOR:** Number of children (index child) enrolled in home visiting	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 10

1. **BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT** **CONSTRUCT: PARENT-CHILD INTERACTION**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who receive an observation of caregiver-child interaction by the home visitor using a validated tool	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who receive an observation of caregiver-child interaction by the home visitor using a validated tool **DENOMINATOR:** Number of primary caregivers enrolled in home visiting with children reaching the target age range	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether the index child received an observation of caregiver-child interaction by the home visitor using a validated tool, but all other data elements are known, then the index child should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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Expiration Date: 07/31/2021

7. NOTES
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure

*Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Expiration Date: 07/31/2021

MEASURE 11

1. **BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT** **CONSTRUCT: EARLY LANGUAGE AND LITERACY ACTIVITIES**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories, and/or sang songs with their child daily, every day	
4. **SPECIFICATION** **NUMERATOR:** Number of children (index child) enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories, and/or sang songs with their child daily, every day **DENOMINATOR:** Number of children (index child) enrolled in home visiting.	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 12

1. **BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT** **CONSTRUCT: DEVELOPMENTAL SCREENING**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with a timely screen for developmental delays using a validated parent-completed tool	
4. **SPECIFICATION** **NUMERATOR:** Number of children (index child) enrolled in home visiting with at least one screening within the AAP-defined age groups during the reporting period **DENOMINATOR:** Number of children (index child) enrolled in home visiting reaching the specified time frame during the reporting period	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool, but all other data elements are known, then the child should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

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8. Measurement Tool Utilized
Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 13

1. BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT CONSTRUCT: BEHAVIORAL CONCERNS	
2. TYPE OF MEASURE Performance Indicator	
3. PERFORMANCE MEASURE Percent of postnatal home visits where primary caregivers were asked if they have any concerns regarding their child's development, behavior, or learning	
4. SPECIFICATION NUMERATOR: Number of postnatal home visits where primary caregivers enrolled in home visiting were asked if they have any concerns regarding their child's development, behavior, or learning DENOMINATOR: Total number of postnatal home visits during the reporting period	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. If a home visit occurred, but there is no documentation of whether the primary caregiver was asked about behavioral concerns, then the home visit should be included in the denominator (if eligible – i.e., postnatal visit), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. NOTES	

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* Note: When the percent of missing data is ≥ 10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 14

1. **BENCHMARK AREA: CRIME OR DOMESTIC VIOLENCE** **CONSTRUCT: INTIMATE PARTNER VIOLENCE SCREENING**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who are screened for intimate partner violence (IPV) within 6 months of enrollment using a validated tool	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who are screened for IPV using a validated tool within 6 months of enrollment **DENOMINATOR:** Number of primary caregivers enrolled in home visiting for at least 6 months	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool (including if a screening did not occur because the caregiver was male and they only have validated tools for use among female caregivers), but all other data elements are known, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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7. **NOTES**
8. **Measurement Tool Utilized** Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Expiration Date: 07/31/2021

MEASURE 15

1. **BENCHMARK AREA: FAMILY ECONOMIC SELF-SUFFICIENCY** **CONSTRUCT: PRIMARY CAREGIVER EDUCATION**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of primary caregivers who enrolled in home visiting without a high school degree or equivalent who subsequently enrolled in or maintained continuous enrollment in middle school or high school, or completed high school or equivalent during their participation in home visiting .	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers who enrolled in or maintained continuous enrollment in middle school or high school, or completed a high school degree or equivalent after enrollment in home visiting (and met the conditions specified in the denominator) **DENOMINATOR:** Number of primary caregivers without a high school degree or equivalent at enrollment	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 16

1. **BENCHMARK AREA: FAMILY ECONOMIC SELF-SUFFICIENCY** **CONSTRUCT: CONTINUITY OF INSURANCE COVERAGE**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who had continuous health insurance coverage for at least 6 consecutive months	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who reported having health insurance coverage for at least 6 consecutive months since enrollment in home visiting **DENOMINATOR:** Number of primary caregivers enrolled in home visiting for at least 6 months	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 17

1. **BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS** **CONSTRUCT: COMPLETED DEPRESSION REFERRALS**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of primary caregivers referred to services for a positive screen for depression who receive one or more service contacts	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who received recommended services for depression (and met the conditions specified in the denominator). **DENOMINATOR:** Number of primary caregivers enrolled in home visiting who had a positive screen for depression within 3 months of enrollment (for those not enrolled prenatally) or within 3 months of delivery (for those enrolled prenatally) and were referred for services	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether a screening occurred using a validated tool, since inclusion in the denominator cannot be determined if the screening result is unknown. Data are also considered missing if there is no documentation of whether a referral was provided. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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OMB No: 0906-0511
Expiration Date: 07/31/2021

7. NOTES

8. Measurement Tool Utilized
Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Expiration Date: 07/31/2018

MEASURE 18

1. **BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS** **CONSTRUCT: COMPLETED DEVELOPMENTAL REFERRALS**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool) who receive services in a timely manner	
4. **SPECIFICATION** **NUMERATOR:** Number of children enrolled in home visiting who a) received individualized developmental support from a home visitor; b) were referred to early intervention services and receive an evaluation within 45 days; OR c) were referred to other community services who received services within 30 days (and met the condition specified in the denominator) **DENOMINATOR:** Number of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool)	
5. **VALUE FOR REPORTING PERIOD (percentage)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether a screening occurred using a validated tool, since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are available and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if	6.b. Value – Enter the number of cases missing from measure calculation:

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DocuSign Envelope ID: AC2835E0-02F6-4020-DD2E-344DE4F95C1C

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Expiration Date: 07/31/2021

eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	
7. NOTES	
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 19

1. **BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS** **CONSTRUCT: INTIMATE PARTNER VIOLENCE REFERRALS**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting with positive screens for IPV (measured using a validated tool) who receive referral information to IPV resources	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who received referral information to IPV resources (and met the conditions specified in the denominator) **DENOMINATOR:** Number of primary caregivers enrolled in home visiting with positive screens for IPV (measured using a validated tool) within 6 months of enrollment	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition: Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether a screening occurred using a validated tool, since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are available and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of	6.b. Value – Enter the number of cases missing from measure calculation:

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Expiration Date: 07/31/2021

missing data should be excluded from the measure calculation.	
7. **NOTES**	
8. **Measurement Tool Utilized** Indicate the validated measurement tool(s) utilized to address this measure	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Attachment 4 - Form 2

OMB No: 0906-0017
Expiration Date: 07/31/2021

DEFINITIONS OF KEY TERMS

July 19, 2018

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Attachment 4 - Form 2

OMB No: 0906-0811
Expiration Date: 03/31/2021

Construct Number	Construct	Key Term Definitions
1.	Preterm Birth	Preterm Birth: a birth before 37 completed weeks of gestation (defined as up to 36 weeks and 6 days).[1]
2.	Breastfeeding	Breastfeeding: in addition to breast milk fed directly from the mother to the infant, breastfeeding also includes feeding the infant pumped or expressed breast milk.
3.	Depression Screening	Depression: aligned with each grantee's validated depression screening tool's definition of depression.
4.	Well-Child Visit	AAP schedule for Well-Child Visits: Updated AAP 2017 Recommendations for Pediatric Preventive Health Care https://www.aap.org/en-us/Documents/periodicity_schedule.pdf
5.	Postpartum Care	Postpartum Care Visit: A postpartum visit is a visit between the woman and her health care provider to assess the mother's current physical health, including the status of pregnancy-related conditions like gestational diabetes, screen for postpartum depression, provide counseling on infant care and family planning as well as screening and referrals for the management of chronic conditions. Additionally, a provider may use this opportunity to conduct a breast exam and discuss breastfeeding. The American College of Obstetricians and Gynecologists recommends that mothers receive a postpartum care visit within 6 weeks after delivery.[2]
6.	Tobacco Cessation Referrals	Tobacco Use: combustibles (cigarettes, cigars, pipes, hookahs, bidis), non-combustibles (chew, dip, snuff, snus, and dissolvables), and ENDS.
7.	Safe Sleep	No definitions required.
8.	Child Injury	Injury-related Emergency Department Visit: Injuries refer to the following causes of mechanisms of injury: motor vehicle, suffocation, drowning, poisoning, firearms, falls, sports and recreation, and intentional injuries, such as child maltreatment.[3]
9.	Child Maltreatment	Investigated Case: all children with an allegation of maltreatment that were screened-in for investigation or assessment and further received an investigation. [4] A screened-in report is one that is accepted for investigation or assessment based on the state's screen-in criteria.[5]
10.	Parent-Child Interaction	No definitions required
11.	Early Language and Literacy Activities	No definitions required
12.	Developmental Screening	Developmental Delay: delays in any or all areas including cognitive, social, language, sensory,

[1] Behrman R, Stith Butler A, eds. Preterm Birth: Causes, Consequences, and Prevention, Washington, DC: The National Academies Press, 2007.
[2] Optimizing postpartum care. Committee Opinion No. 666. American College of Obstetricians and Gynecologists. Obstet Gynecol 2016;127:e187-92. Retrieved from https://www.acog.org/-/media/Committee-Opinions/Committee-on-Obstetric-Practice/co666.pdf?dmc=1&ts=20180221T1814113281
[3] Centers for Disease Control and Prevention. National Action Plan for Child Injury Prevention. 2012. Retrieved from https://www.cdc.gov/safechild/pdf/NAP/Book.pdf
[4] Child Welfare Information Gateway. Child Maltreatment 2015: Summary of Key Findings. Retrieved from https://www.childwelfare.gov/pubPDFs/child-maltreatment-publication.pdf
[5] Child Welfare Information Gateway. Screening and Intake. Retrieved from https://www.childwelfare.gov/topics/management/screening-intake/

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Attachment 4 - Form 2

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		and emotional development.[5]
13.	Behavioral Concerns	No definitions required
14.	IPV Screening	Intimate Partner Violence: physical violence, sexual violence, stalking and psychological aggression (including coercive acts) by a current or former intimate partner. An intimate partner is a person with whom one has a close personal relationship that can be characterized by the following: emotional connectedness, regular contact, ongoing physical contact and sexual behavior, identity as a couple, familiarity and knowledge about each other's lives.[1]
15.	Primary Caregiver Education	No definitions required.
16.	Continuity of Insurance Coverage	Continuous Health Insurance Coverage: having health insurance coverage without any lapse.
17.	Completed Depression Referral	Recommended services: specific techniques and intervention models delivered in the context of client characteristics, culture, and preferences that have shown to have positive effects on outcomes through rigorous evaluations and have demonstrated to achieve positive outcomes for the client.[4]
18.	Completed Developmental Referral	Developmental Delays: delays in any or all areas including cognitive, social, language, sensory, and emotional development.[5]
19.	IPV Referral	Intimate Partner Violence: physical violence, sexual violence, stalking and psychological aggression (including coercive acts) by a current or former intimate partner. An intimate partner is a person with whom one has a close personal relationship that can be characterized by the following: emotional connectedness, regular contact, ongoing physical contact and sexual behavior, identity as a couple, familiarity and knowledge about each other's lives.[1]

[1] U.S. National Library of Medicine, National Institutes of Health. Psychological Intra-Terms via United Medical Language System, 2011. Retrieved from [illegible]

[2] Centers for Disease Control and Prevention. Injury Prevention and Control: Division of Violence Prevention, 2015. Retrieved from [illegible]

[3] Home Visiting Collaborative Improvement and Innovation Network.

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Attachment 5 - DCYF Key Performance Metrics

Key Performance Metrics
Referrals
Share of families who are referred to HFA from DCYF. (# of families currently enrolled in HFA CWP and % of HFA CWP slots currently used)
Share of DCYF-referred families that were enrolled between three (3) and twenty-four (24) months of age.
Share of DCYF-referred families with a recent assessment of a Substance Exposed Infant (SEI).
Enrollments
Average time to enrollment from the time and date of referral.
of days from referral date to the first home visit.
Share of families that are offered HFA and % of offered families who decide to receive HFA.
Relative rate of families enrolled by racial/ethnic and geographic characteristics.
Proportion of families that are retained in the program over specified periods of time (6 months, 12 months, 24 months, 36 months, etc.) after receiving a first home visit.
Proportion of families who receive at least seventy-five (75%) percent of the appropriate number of home visits based upon the individual level of service to which they are assigned.
Program Completion
Share of families who do not complete the program (incl. reason for non-completion/discharge).
Share of families that discharged who completed a minimum of specified periods of service. (3 months, 6 months, 12 months, 18 months, 24 months, 30 months, 36 months).
Proportion of families who complete program by racial/ethnic and geographic characteristics.
Short-term Outcomes
Share of families with a new case opened to DCYF, or a new report of maltreatment, within six months after discharge.
Share of children who enter out-of-home placement within six months after discharge (incl. breakdown of placement type).
Share of children who enter any form of out-of-home placement within 12 months of discharge.
Differences in outcomes outlined above (i.e., prevention of out of home removal, decreases in risk/needs) by racial/ethnic and geographic characteristics.

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EXHIBIT C

Payment Terms

1. This Agreement is funded by:
   - 1.1. 61.5% Federal funds from:
     - 1.1.1. Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X10MC43595.
     - 1.1.2. Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 2, 2022, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X10MC46878.
     - 1.1.3. American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X11MC41935.
     - 1.1.4. American Rescue Plan Act Funding for Home Visiting, as awarded on October 28, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X11MC45263.
     - 1.1.5. New Hampshire Initiative to Address COVID-19 Health Disparities, as awarded on May 27, 2021, by the DHHS Centers for Disease Control and Prevention, CFDA 93.391, FAIN NH75OT000031.
     - 1.1.6. Administration of Children Youth & Families (ACF), as awarded on October 1, 2022, CFDA 93.658, FAIN 2201NHFOST.
   - 1.2. 38.5% General funds.
2. For the purposes of this Agreement the Department has identified:
   - 2.1. The Contractor as a Subrecipient, in accordance with 2 CFR 200.331.
   - 2.2. The Agreement as NON-R&D, in accordance with 2 CFR §200.332.
3. The Department shall make payments to the Contractor within thirty (30) days of receipt of each invoice and supporting documentation for authorized expenses, subsequent to approval of the submitted invoice.
4. The final invoice and supporting documentation for authorized expenses shall be due to the Department no later than forty (40) days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.
5. Notwithstanding Paragraph 17 of the General Provisions Form P-37, changes limited to adjusting amounts within the price limitation and adjusting encumbrances between State Fiscal Years and budget class lines through the

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Budget Office may be made by written agreement of both parties, without obtaining approval of the Governor and Executive Council, if needed and justified.

6. Audits

6.1. The Contractor must email an annual audit to dhhs.act@dhhs.nh.gov if any of the following conditions exist:

6.1.1. Condition A - The Contractor expended $750,000 or more in federal funds received as a subrecipient pursuant to 2 CFR Part 200, during the most recently completed fiscal year.

6.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b, pertaining to charitable organizations receiving support of $1,000,000 or more.

6.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

6.2. If Condition A exists, the Contractor shall submit an annual Single Audit performed by an independent Certified Public Accountant (CPA) to dhhs.act@dhhs.nh.gov within 120 days after the close of the Contractor's fiscal year, conducted in accordance with the requirements of 2 CFR Part 200, Subpart F of the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal awards.

6.2.1. The Contractor shall submit a copy of any Single Audit findings and any associated corrective action plans. The Contractor shall submit quarterly progress reports on the status of implementation of the corrective action plan.

6.3. If Condition B or Condition C exists, the Contractor shall submit an annual financial audit performed by an independent CPA within 120 days after the close of the Contractor's fiscal year.

6.4. In addition to, and not in any way in limitation of obligations of the Agreement, it is understood and agreed by the Contractor that the Contractor shall be held liable for any state or federal audit exceptions and shall return to the Department all payments made under the Agreement to which exception has been taken, or which have been disallowed because of such an exception.

A. Payment Terms Respective to Traditional Home Visiting Services for the Division of Public Health Services (DPHS):

7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with

the approved line items, as specified in Exhibits C-1, Budget through C-10, Budget.

8. The Contractor shall submit an invoice with supporting documentation to the Department no later than the fifteenth (15th) working day of the month following the month in which the services were provided. The Contractor shall ensure each invoice:

8.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.

8.2. Is submitted in a form that is provided by or otherwise acceptable to the Department.

8.3. Identifies and requests payment for allowable costs incurred in the previous month.

8.4. Includes supporting documentation of allowable costs with each invoice that may include, but are not limited to, time sheets, payroll records, receipts for purchases, and proof of expenditures, as applicable.

8.5. Is completed, dated and returned to the Department with the supporting documentation for allowable expenses to initiate payment.

8.6. Is assigned an electronic signature, includes supporting documentation, and is emailed to DPHSContractBilling@dhhs.nh.gov or mailed to:

Financial Manager
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

B. Payment Terms Respective to Child Welfare Protocols for the Division for Children, Youth and Families (DCYF) for direct services:

9. Payment shall be for services provided in fulfillment of this Agreement, as specified in Exhibit B, Scope of Work Section 3.4, and in accordance with the following:

9.1. Weekly Rate: For the purposes of this Agreement, a weekly rate shall be paid in the amount of $404.39 per client (family) once per week.

9.2. Payment shall be made on a monthly basis and follow a process determined by the Department.

9.3. The Contractor cannot exceed the maximum allotment for weekly rate expenditure by Fiscal Year, which is as follows:

State Fiscal Year	Amount
SFY 2023	$89,168
SFY 2024	$108,983

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SFY 2025	$54,711
Sub-Total	$252,862

9.4. The Contractor shall submit non-clinical expenses via the Website: https://business.nh.gov/beb/PaOes/Index.asDx.

9.5. The Contractor must provide the services in Exhibit B, Scope of Services, in compliance with funding requirements.

C. Payment Terms Respective to Child Welfare Protocols for the Division for Children, Youth and Families (DCYF) for administrative services:

10. The Contractor shall submit an invoice with supporting documentation to the Department no later than the fifteenth (15th) working day of the month following the month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The Contractor shall ensure each invoice is completed, dated and returned to the Department in order to initiate payment.

10.1. Maximum allotment for contract expenditures by Fiscal Year is as follows:

State Fiscal Year	Amount
2023	$74,965
2024	$109,862
2025	$0*
Sub-Total	$184,827
*The Contractor will only bill for direct services in SFY 25.	

10.2. In lieu of hard invoice copies, all invoices may be assigned an electronic signature and emailed to DCYFInvoices@dhhs.nh.gov, or invoices may be mailed to:

Financial Manager
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

10.3. The Contractor must provide the services in Exhibit B, Scope of Services, in compliance with funding requirements.

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New Hampshire Department of Health and Human Services

Contractor Name: *The Family Resource Center at Gorham*

Budget Request for: *Home Visiting Services - Home Visiting Formula Grant*

Budget Period: *SFY 2023 (10/01/2022 - 06/30/2023)*

Indirect Cost Rate (if applicable): 9%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	157731.00
2. Fringe Benefits	34932.00
3. Consultants	4500.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	5000.00
5.(a) Supplies - Educational	
5.(b) Supplies - Lab	0.00
5.(c) Supplies - Pharmacy	0.00
5.(d) Supplies - Medical	0.00
5.(e) Supplies Office	2000.00
6. Travel	15000.00
7. Software	999.73
8. (a) Other - Marketing/ Communications	1000.00
8. (b) Other - Education and Training	5000.00
8. (c) Other - Other (specify below)	
Other (Occupancy)	12000.00
Other (Liability Insurance)	1200.00
Other (Postage)	300.00
Other (Audit & Legal)	1200.00
Other (Telephone)	3000.00
Other (Annual Fees)	1800.00
9. Subrecipient Contracts	0.00
Total Direct Costs	245662.73
Total Indirect Costs	24066.27
TOTAL	269729.00

Contractor Initials: PS

Date: 1/5/2023

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New Hampshire Department of Health and Human Services

Contractor Name: *The Family Resource Center at Gorham*

Budget Request for: *Home Visiting Services - Home Visiting Formula Grant*

Budget Period: *SFY 2024 (07/01/2023 - 06/30/2024)*

Indirect Cost Rate (if applicable): 8%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	252236.00
2. Fringe Benefits	68052.00
3. Consultants	5000.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	500.00
5.(a) Supplies - Educational	0.00
5.(b) Supplies - Lab	0.00
5.(c) Supplies - Pharmacy	0.00
5.(d) Supplies - Medical	0.00
5.(e) Supplies Office	715.64
6. Travel	5000.00
7. Software	150.00
8. (a) Other - Marketing/ Communications	100.00
8. (b) Other - Education and Training	550.00
8. (c) Other - Other (specify below)	
Other (Occupancy)	14000.00
Other (Liability Insurance)	2000.00
Other (Postage)	400.00
Other (Telephone)	4000.00
Other (Audit & Legal	1500.00
Other (Annual Fees)	1800.00
9. Subrecipient Contracts	0.00
Total Direct Costs	344003.64
Total Indirect Costs	34350.36
TOTAL	378354.00

Contractor Initials: PS

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New Hampshire Department of Health and Human Services

Contractor Name: *The Family Resource Center at Gorham*

Budget Request for: *Home Visiting Services - Home Visiting Formula Grant*

Budget Period: *SFY 2025 (07/01/2024 - 09/30/2024)*

Indirect Cost Rate (if applicable): 9%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	71389.09
2. Fringe Benefits	5098.00
3. Consultants	2572.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	250.00
5.(a) Supplies - Educational	0.00
5.(b) Supplies - Lab	0.00
5.(c) Supplies - Pharmacy	0.00
5.(d) Supplies - Medical	0.00
5.(e) Supplies Office	250.00
6. Travel	1000.00
7. Software	0.00
8. (a) Other - Marketing/ Communications	100.00
8. (b) Other - Education and Training	100.00
8. (c) Other - Other (specify below)	
Other (Occupancy)	2500.00
Other (Telephones)	700.00
Other (Liability Insurance)	0.00
Other (Annual Fees)	100.00
Other (Audit)	100.00
Other (Postage)	50.00
9. Subrecipient Contracts	0.00
Total Direct Costs	84189.09
Total Indirect Costs	8393.91
TOTAL	92583.00

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New Hampshire Department of Health and Human Services.

Contractor Name: *The Family Resource Center at Gorham*

Budget Request for: *Home Visiting Services - ARP - MIEC Home Visiting*

Budget Period: *SFY 2023 (10/01/2022 - 06/30/2023)*

Indirect Cost Rate (if applicable): 9%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	45809.00
2. Fringe Benefits	3272.00
3. Consultants	4000.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	500.00
5.(a) Supplies - Educational	0.00
5.(b) Supplies - Lab	0.00
5.(c) Supplies - Pharmacy	0.00
5.(d) Supplies - Medical	0.00
5.(e) Supplies Office	431.73
6. Travel	5000.00
7. Software	0.00
8. (a) Other - Marketing/ Communications	100.00
8. (b) Other - Education and Training	100.00
8. (c) Other - Other (specify below)	
Other (audit)	100.00
Other (Occupancy)	3000.00
Other (Telephone)	200.00
Other (please specify)	0.00
9. Subrecipient Contracts	0.00
Total Direct Costs	62512.73
Total Indirect Costs	6201.27
TOTAL	68714.00

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New Hampshire Department of Health and Human Services

Contractor Name: *The Family Resource Center at Gorham*

Budget Request for: *Home Visiting Services - ARP - MIEC Home Visiting*

Budget Period: *SFY 2024 (07/01/2023 - 06/30/2024)*

Indirect Cost Rate (if applicable): 9%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	33124.00
2. Fringe Benefits	2279.00
3. Consultants	1879.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	300.00
5.(a) Supplies - Educational	0.00
5.(b) Supplies - Lab	0.00
5.(c) Supplies - Pharmacy	0.00
5.(d) Supplies - Medical	0.00
5.(e) Supplies Office	499.82
6. Travel	2000.00
7. Software	0.00
8. (a) Other - Marketing/ Communications	200.00
8. (b) Other - Education and Training	300.00
8. (c) Other - Other (specify below)	
Other (occupancy)	4500.00
Other (audit)	300.00
Other (telephone)	300.00
Other (please specify)	0.00
9. Subrecipient Contracts	0.00
Total Direct Costs	45481.82
Total Indirect Costs	4518.18
TOTAL	50000.00

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Date: 1/5/2023

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New Hampshire Department of Health and Human Services

Contractor Name: *The Family Resource Center at Gorham*

Budget Request for: *Home Visiting Services - ARP - MIEC Home Visiting*

Budget Period: *SFY 2025 (07/01/2024 - 09/30/2024)*

Indirect Cost Rate (if applicable): 9%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	45567.70
2. Fringe Benefits	3395.03
3. Consultants	
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	0.00
5.(a) Supplies - Educational	0.00
5.(b) Supplies - Lab	0.00
5.(c) Supplies - Pharmacy	0.00
5.(d) Supplies - Medical	0.00
5.(e) Supplies Office	100.00
6. Travel	1000.00
7. Software	100.00
8. (a) Other - Marketing/ Communications	0.00
8. (b) Other - Education and Training	100.00
8. (c) Other - Other (specify below)	
Other (Occupancy)	1000.00
Other (Telephones)	100.00
Other (audit)	30.00
Other (please specify)	0.00
9. Subrecipient Contracts	0.00
Total Direct Costs	51392.73
Total Indirect Costs	5139.27
TOTAL	56532.00

Contractor Initials: PS

Date: 1/5/2023

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New Hampshire Department of Health and Human Services

Contractor Name: *The Family Resource Center at Gorham*

Budget Request for: *Home Visiting Services - Child Health, Health Div*

Budget Period: *SFY 2023 (10/01/2022 - 06/30/2023)*

Indirect Cost Rate (if applicable): 9%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	36000.00
2. Fringe Benefits	2389.00
3. Consultants	3000.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	1200.00
5.(a) Supplies - Educational	0.00
5.(b) Supplies - Lab	0.00
5.(c) Supplies - Pharmacy	0.00
5.(d) Supplies - Medical	0.00
5.(e) Supplies Office	1531.00
6. Travel	1650.00
7. Software	275.00
8. (a) Other - Marketing/ Communications	500.00
8. (b) Other - Education and Training	1000.00
8. (c) Other - Other (specify below)	
Other (occupancy)	3000.00
Other (Telephone)	500.00
Other (Audit & Legal)	100.45
Other (Dues & Fees)	100.00
9. Subrecipient Contracts	0.00
Total Direct Costs	51245.45
Total Indirect Costs	5004.55
TOTAL	56250.00

Contractor Initials: PS

Date: 1/5/2023

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New Hampshire Department of Health and Human Services

Contractor Name: *The Family Resource Center at Gorham*

Budget Request for: *Home Visiting Services - Child Health, Health Div*

Budget Period: *SFY 2024 (07/01/2023 - 06/30/2024)*

Indirect Cost Rate (if applicable): 8%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	56965.00
2. Fringe Benefits	4725.91
3. Consultants	500.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	100.00
5.(a) Supplies - Educational	0.00
5.(b) Supplies - Lab	0.00
5.(c) Supplies - Pharmacy	0.00
5.(d) Supplies - Medical	0.00
5.(e) Supplies Office	500.00
6. Travel	4000.00
7. Software	100.00
8. (a) Other - Marketing/ Communications	100.00
8. (b) Other - Education and Training	550.00
8. (c) Other - Other (specify below)	
Other (Occupancy)	200.00
Other (Telephone)	300.00
Other (Audit)	
Other (Dues & Fees)	150.00
9. Subrecipient Contracts	0.00
Total Direct Costs	68190.91
Total Indirect Costs	6809.09
TOTAL	75000.00

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New Hampshire Department of Health and Human Services

Contractor Name: *The Family Resource Center at Gorham*

Budget Request for: *Home Visiting Services - Child Health, Health Div*

Budget Period: *SFY 2025 (07/01/2024 - 09/30/2024)*

Indirect Cost Rate (if applicable): 9%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	6498.00
2. Fringe Benefits	1120.00
3. Consultants	500.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	250.00
5.(a) Supplies - Educational	0.00
5.(b) Supplies - Lab	0.00
5.(c) Supplies - Pharmacy	0.00
5.(d) Supplies - Medical	0.00
5.(e) - Supplies Office	500.00
6. Travel	3500.00
7. Software	0.00
8. (a) Other - Marketing/ Communications	500.18
8. (b) Other - Education and Training	1500.00
8. (c) Other - Other (specify below)	
Other (Occupancy)	1500.00
Other (Telephone)	700.00
Other (Annual Fees)	500.00
Other (please specify)	0.00
9. Subrecipient Contracts	0.00
Total Direct Costs	17068.18
Total Indirect Costs	1681.82
TOTAL	18750.00

Contractor Initials: PS

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New Hampshire Department of Health and Human Services

Contractor Name: *The Family Resource Center at Gorham*

Budget Request for: *Home Visiting Services - PH COVID-19 Health Disparities*

Budget Period: *SFY 2023 (10/01/2022 - 06/30/2023)*

Indirect Cost Rate (if applicable): 8%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	58313.00
2. Fringe Benefits	4287.00
3. Consultants	3000.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	2164.00
5.(a) Supplies - Educational	0.00
5.(b) Supplies - Lab	0.00
5.(c) Supplies - Pharmacy	0.00
5.(d) Supplies - Medical	0.00
5.(e) Supplies Office	2000.00
6. Travel	4000.00
7. Software	500.00
8. (a) Other - Marketing/ Communications	200.00
8. (b) Other - Education and Training	2000.00
8. (c) Other - Other (specify below)	
Other (Occupancy)	2000.00
Other (Phone)	200.00
Other (Postage)	200.00
Other (please specify)	0.00
9. Subrecipient Contracts	0.00
Total Direct Costs	78844.00
Total Indirect Costs	7668.00
TOTAL	86512.00

Contractor Initials: PS

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New Hampshire Department of Health and Human Services

Contractor Name: The Family Resource Center at Gilsum

Budget Request for: Home Visiting Services

Budget Period: SFY 2023 (7/1/22-6/30/23) 6 Months

Indirect Cost Rate (if applicable): 8.81%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	39482.00
2. Fringe Benefits	7367.90
3. Consultants	2000.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	1000.00
5.(a) Supplies - Educational	0.00
5.(b) Supplies - Lab	0.00
5.(c) Supplies - Pharmacy	0.00
5.(d) Supplies - Medical	0.00
5.(e) Supplies Office	2500.00
6. Travel	6134.50
7. Software	0.00
8. (a) Other - Marketing/ Communications	1700.00
8. (b) Other - Education and Training	2500.00
8. (c) Other - Other (specify below)	
Other (Occupancy)	2700.00
Other (Phone)	1500.00
Other (Postage)	500.00
9. Subrecipient Contracts	0.00
Total Direct Costs	67386.50
Total Indirect Costs	7386.50
TOTAL	74883.00

Contractor Initials: PS

Date: 1/5/2023

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New Hampshire Department of Health and Human Services

Contractor Name: The Family Resource Center at Gorham

Budget Request for: Home Visiting Services

Budget Period: SFY 2024 (7/1/23-6/30/24) 12 Months

Indirect Cost Rate (If applicable): 8.73%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	60370.58
2. Fringe Benefits	18355.22
3. Consultants	4500.00
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	2500.00
5.(a) Supplies - Educational	0.00
5.(b) Supplies - Lab	0.00
5.(c) Supplies - Pharmacy	0.00
5.(d) Supplies - Medical	0.00
5.(e) Supplies Office	4500.00
6. Travel	18000.00
7. Software	
8. (a) Other - Marketing/ Communications	3500.00
8. (b) Other - Education and Training	6000.00
9. (c) Other - Other (specify below)	
Other (Occupancy)	6500.00
Other (Phone)	2500.00
Other (Postage)	300.00
Other (Liability Insurance)	1300.00
9. Subrecipient Contracts	0.00
Total Direct Costs	86175.80
Total Indirect Costs	10756.70
TOTAL	101841.00

Contractor Initials PS

Date 12/5/2023

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CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Vendor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

ALTERNATIVE I - FOR GRANTEES OTHER THAN INDIVIDUALS

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

This certification is required by the regulations implementing Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.). The January 31, 1989 regulations were amended and published as Part II of the May 25, 1990 Federal Register (pages 21681-21691), and require certification by grantees (and by inference, sub-grantees and sub-contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a grantee (and by inference, sub-grantees and sub-contractors) that is a State may elect to make one certification to the Department in each federal fiscal year in lieu of certificates for each grant during the federal fiscal year covered by the certification. The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment. Contractors using this form should send it to:

Commissioner
NH Department of Health and Human Services
129 Pleasant Street,
Concord, NH 03301-6505

1. The grantee certifies that it will or will continue to provide a drug-free workplace by:
   1.1. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
   1.2. Establishing an ongoing drug-free awareness program to inform employees about
      1.2.1. The dangers of drug abuse in the workplace;
      1.2.2. The grantee's policy of maintaining a drug-free workplace;
      1.2.3. Any available drug counseling, rehabilitation, and employee assistance programs; and
      1.2.4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
   1.3. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
   1.4. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will
      1.4.1. Abide by the terms of the statement; and
      1.4.2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
   1.5. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph 1.4.2 from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer on whose grant activity the convicted employee was working, unless the Federal agency

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has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

1.6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 1.4.2, with respect to any employee who is so convicted

1.6.1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

1.6.2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

1.7. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1.1, 1.2, 1.3, 1.4, 1.5, and 1.6.

2. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant.

Place of Performance (street address, city, county, state, zip code) (list each location)

Check ☐ if there are workplaces on file that are not identified here.

Vendor Name: The Family Resource Center at Gorham

1/5/2023
Date

Signed by:
Patricia Stolte
Name: Patricia Stolte
Title: Executive Director

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CERTIFICATION REGARDING LOBBYING

The Vendor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

Programs (indicate applicable program covered):
*Temporary Assistance to Needy Families under Title IV-A
*Child Support Enforcement Program under Title IV-D
*Social Services Block Grant Program under Title XX
*Medicaid Program under Title XIX
*Community Services Block Grant under Title VI
*Child Care Development Block Grant under Title IV

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor).

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, attached and identified as Standard Exhibit E-I.)

3. The undersigned shall require that the language of this certification be included in the award document for sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Vendor Name: The Family Resource Center at Gorham

1/5/2023
Date

DocuSigned by:
Patricia Stolte
Name: Patricia Scolte
Title: Executive Director

PS
Vendor Initials
1/5/2023
Date

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CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Executive Office of the President, Executive Order 12549 and 45 CFR Part 76 regarding Debarment, Suspension, and Other Responsibility Matters, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal (contract), the prospective primary participant is providing the certification set out below.

2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. If necessary, the prospective participant shall submit an explanation of why it cannot provide the certification. The certification or explanation will be considered in connection with the NH Department of Health and Human Services' (DHHS) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

3. The certification in this clause is a material representation of fact upon which reliance was placed when DHHS determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, DHHS may terminate this transaction for cause or default.

4. The prospective primary participant shall provide immediate written notice to the DHHS agency to whom this proposal (contract) is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549: 45 CFR Part 76. See the attached definitions.

6. The prospective primary participant agrees by submitting this proposal (contract) that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by DHHS.

7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," provided by DHHS, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or involuntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List (of excluded parties).

9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and

Contractor Initials PS
Date 2/5/2023

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information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal government, DHHS may terminate this transaction for cause or default.

PRIMARY COVERED TRANSACTIONS

11. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
    11.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
    11.2. have not within a three-year period preceding this proposal (contract) been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or a contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
    11.3. are not presently indicted for otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (l)(b) of this certification; and
    11.4. have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

12. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal (contract).

LOWER TIER COVERED TRANSACTIONS

13. By signing and submitting this lower tier proposal (contract), the prospective lower tier participant, as defined in 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:
    13.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
    13.2. where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal (contract).

14. The prospective lower tier participant further agrees by submitting this proposal (contract) that it will include this clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions," without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

Contractor Name: The Family Resource Center at Gorham

1/5/2023
Date

Docusigned by:
Patricia Stolte
Name: Patricia Stolte
Title: Executive Director

Contractor Initials PS
Date 1/5/2023

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CERTIFICATION OF COMPLIANCE WITH REQUIREMENTS PERTAINING TO FEDERAL NONDISCRIMINATION, EQUAL TREATMENT OF FAITH-BASED ORGANIZATIONS AND WHISTLEBLOWER PROTECTIONS

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

Contractor will comply, and will require any subgrantees or subcontractors to comply, with any applicable federal nondiscrimination requirements, which may include:

- the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. Section 3789d) which prohibits recipients of federal funding under this statute from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act requires certain recipients to produce an Equal Employment Opportunity Plan;

- the Juvenile Justice Delinquency Prevention Act of 2002 (42 U.S.C. Section 5672(b)) which adopts by reference, the civil rights obligations of the Safe Streets Act. Recipients of federal funding under this statute are prohibited from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act includes Equal Employment Opportunity Plan requirements;

- the Civil Rights Act of 1964 (42 U.S.C. Section 2000d, which prohibits recipients of federal financial assistance from discriminating on the basis of race, color, or national origin in any program or activity);

- the Rehabilitation Act of 1973 (29 U.S.C. Section 794), which prohibits recipients of Federal financial assistance from discriminating on the basis of disability, in regard to employment and the delivery of services or benefits, in any program or activity;

- the Americans with Disabilities Act of 1990 (42 U.S.C. Sections 12131-34), which prohibits discrimination and ensures equal opportunity for persons with disabilities in employment, State and local government services, public accommodations, commercial facilities, and transportation;

- the Education Amendments of 1972 (20 U.S.C. Sections 1681, 1683, 1685-86), which prohibits discrimination on the basis of sex in federally assisted education programs;

- the Age Discrimination Act of 1975 (42 U.S.C. Sections 6106-07), which prohibits discrimination on the basis of age in programs or activities receiving Federal financial assistance. It does not include employment discrimination;

- 28 C.F.R. pt. 31 (U.S. Department of Justice Regulations – OJJDP Grant Programs); 28 C.F.R. pt. 42 (U.S. Department of Justice Regulations – Nondiscrimination; Equal Employment Opportunity; Policies and Procedures); Executive Order No. 13279 (equal protection of the laws for faith-based and community organizations); Executive Order No. 13559, which provide fundamental principles and policy-making criteria for partnerships with faith-based and neighborhood organizations;

- 28 C.F.R. pt. 38 (U.S. Department of Justice Regulations – Equal Treatment for Faith-Based Organizations); and Whistleblower protections 41 U.S.C. §4712 and The National Defense Authorization Act (NDAA) for Fiscal Year 2013 (Pub. L. 112-239, enacted January 2, 2013) the Pilot Program for Enhancement of Contract Employee Whistleblower Protections, which protects employees against reprisal for certain whistle blowing activities in connection with federal grants and contracts.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment.

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Certification of Compliance with requirements pertaining to Federal Nondiscrimination, Equal Treatment of Faith-Based Organizations and Whistleblower protections

Date 1/5/2023

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In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, or sex against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, to the applicable contracting agency or division within the Department of Health and Human Services, and to the Department of Health and Human Services Office of the Ombudsman.

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this proposal (contract) the Contractor agrees to comply with the provisions indicated above.

Contractor Name: The Family Resource Center at Gorham

1/5/2023
Date

Patricia Stolte
Name: Patricia Stolte
Title: Executive Director

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CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to $1000 per day and/or the imposition of an administrative compliance order on the responsible entity.

The Contractor identified in Section 1.3 of the General Provisions agrees, by signature of the Contractor's representative as identified in Section 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this contract, the Contractor agrees to make reasonable efforts to comply with all applicable provisions of Public Law 103-227, Part C, known as the Pro-Children Act of 1994.

Contractor Name: The Family Resource Center at Gorham

1/5/2023
Date

Patricia Stolte
Name: Patricia Stolte
Title: Executive Director

Contractor Initials PS
Date 1/5/2023

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HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement agrees to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191 and with the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160 and 164 applicable to business associates. As defined herein, "Business Associate" shall mean the Contractor and subcontractors and agents of the Contractor that receive, use or have access to protected health information under this Agreement and "Covered Entity" shall mean the State of New Hampshire, Department of Health and Human Services.

(1) Definitions.

a. "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.

b. "Business Associate" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.

c. "Covered Entity" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.

d. "Designated Record Set" shall have the same meaning as the term "designated record set" in 45 CFR Section 164.501.

e. "Data Aggregation" shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.

f. "Health Care Operations" shall have the same meaning as the term "health care operations" in 45 CFR Section 164.501.

g. "HITECH Act" means the Health Information Technology for Economic and Clinical Health Act, TitleXIII, Subtitle D, Part 1 & 2 of the American Recovery and Reinvestment Act of 2009.

h. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164 and amendments thereto.

i. "Individual" shall have the same meaning as the term "individual" in 45 CFR Section 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR Section 164.501(g).

j. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.

k. "Protected Health Information" shall have the same meaning as the term "protected health information" in 45 CFR Section 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

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l. "Required by Law" shall have the same meaning as the term "required by law" in 45 CFR Section 164.103.

m. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his/her designee.

n. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 CFR Part 164, Subpart C, and amendments thereto.

o. "Unsecured Protected Health Information" means protected health information that is not secured by a technology standard that renders protected health information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.

p. Other Definitions - All terms not otherwise defined herein shall have the meaning established under 45 C.F.R. Parts 160, 162 and 164, as amended from time to time, and the HITECH Act.

(2) Business Associate Use and Disclosure of Protected Health Information.

a. Business Associate shall not use, disclose, maintain or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under Exhibit A of the Agreement. Further, Business Associate, including but not limited to all its directors, officers, employees and agents, shall not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.

b. Business Associate may use or disclose PHI:
   I. For the proper management and administration of the Business Associate;
   II. As required by law, pursuant to the terms set forth in paragraph d. below; or
   III. For data aggregation purposes for the health care operations of Covered Entity.

c. To the extent Business Associate is permitted under the Agreement to disclose PHI to a third party, Business Associate must obtain, prior to making any such disclosure, (i) reasonable assurances from the third party that such PHI will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the third party; and (ii) an agreement from such third party to notify Business Associate, in accordance with the HIPAA Privacy, Security, and Breach Notification Rules of any breaches of the confidentiality of the PHI, to the extent it has obtained knowledge of such breach.

d. The Business Associate shall not, unless such disclosure is reasonably necessary to provide services under Exhibit A of the Agreement, disclose any PHI in response to a request for disclosure on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity has an opportunity to object to the disclosure and to seek appropriate relief. If Covered Entity objects to such disclosure, the Business

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Associate shall refrain from disclosing the PHI until Covered Entity has exhausted all remedies.

c. If the Covered Entity notifies the Business Associate that Covered Entity has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Business Associate shall be bound by such additional restrictions and shall not disclose PHI in violation of such additional restrictions and shall abide by any additional security safeguards.

(3) Obligations and Activities of Business Associate.

a. The Business Associate shall notify the Covered Entity's Privacy Officer immediately after the Business Associate becomes aware of any use or disclosure of protected health information not provided for by the Agreement including breaches of unsecured protected health information and/or any security incident that may have an impact on the protected health information of the Covered Entity.

b. The Business Associate shall immediately perform a risk assessment when it becomes aware of any of the above situations. The risk assessment shall include, but not be limited to:

- The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;
- The unauthorized person used the protected health information or to whom the disclosure was made;
- Whether the protected health information was actually acquired or viewed.
- The extent to which the risk to the protected health information has been mitigated.

The Business Associate shall complete the risk assessment within 48 hours of the breach and immediately report the findings of the risk assessment in writing to the Covered Entity.

c. The Business Associate shall comply with all sections of the Privacy, Security, and Breach Notification Rule.

d. Business Associate shall make available all of its internal policies and procedures, books and records relating to the use and disclosure of PHI received from, or created or received by the Business Associate on behalf of Covered Entity to the Secretary for purposes of determining Covered Entity's compliance with HIPAA and the Privacy and Security Rule.

e. Business Associate shall require all of its business associates that receive, use or have access to PHI under the Agreement, to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein, including the duty to return or destroy the PHI as provided under Section 3 (l). The Covered Entity shall be considered a direct third party beneficiary of the Contractor's business associate agreements with Contractor's intended business associates, who will be receiving PHI.

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pursuant to this Agreement, with rights of enforcement and indemnification from such business associates who shall be governed by standard Paragraph #13 of the standard contract provisions (P-37) of this Agreement for the purpose of use and disclosure of protected health information.

f. Within five (5) business days of receipt of a written request from Covered Entity, Business Associate shall make available during normal business hours at its offices all records, books, agreements, policies and procedures relating to the use and disclosure of PHI to the Covered Entity, for purposes of enabling Covered Entity to determine Business Associate's compliance with the terms of the Agreement.

g. Within ten (10) business days of receiving a written request from Covered Entity, Business Associate shall provide access to PHI in a Designated Record Set to the Covered Entity, or as directed by Covered Entity, to an individual in order to meet the requirements under 45 CFR Section 164.524.

h. Within ten (10) business days of receiving a written request from Covered Entity for an amendment of PHI or a record about an individual contained in a Designated Record Set, the Business Associate shall make such PHI available to Covered Entity for amendment and incorporate any such amendment to enable Covered Entity to fulfill its obligations under 45 CFR Section 164.526.

i. Business Associate shall document such disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR Section 164.528.

j. Within ten (10) business days of receiving a written request from Covered Entity for a request for an accounting of disclosures of PHI, Business Associate shall make available to Covered Entity such information as Covered Entity may require to fulfill its obligations to provide an accounting of disclosures with respect to PHI in accordance with 45 CFR Section 164.528.

k. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within two (2) business days forward such request to Covered Entity. Covered Entity shall have the responsibility of responding to forwarded requests. However, if forwarding the individual's request to Covered Entity would cause Covered Entity or the Business Associate to violate HIPAA and the Privacy and Security Rule, the Business Associate shall instead respond to the individual's request as required by such law and notify Covered Entity of such response as soon as practicable.

l. Within ten (10) business days of termination of the Agreement, for any reason, the Business Associate shall return or destroy, as specified by Covered Entity, all PHI received from, or created or received by the Business Associate in connection with the Agreement, and shall not retain any copies or back-up tapes of such PHI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, Business Associate shall continue to extend the protections of the Agreement, to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business

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Associate maintains such PHI. If Covered Entity, in its sole discretion, requires that the Business Associate destroy any or all PHI, the Business Associate shall certify to Covered Entity that the PHI has been destroyed.

(4) Obligations of Covered Entity

a. Covered Entity shall notify Business Associate of any changes or limitation(s) in its Notice of Privacy Practices provided to individuals in accordance with 45 CFR Section 164.520, to the extent that such change or limitation may affect Business Associate's use or disclosure of PHI.

b. Covered Entity shall promptly notify Business Associate of any changes in, or revocation of permission provided to Covered Entity by individuals whose PHI may be used or disclosed by Business Associate under this Agreement, pursuant to 45 CFR Section 164.506 or 45 CFR Section 164.508.

c. Covered entity shall promptly notify Business Associate of any restrictions on the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 CFR 164.522, to the extent that such restriction may affect Business Associate's use or disclosure of PHI.

(5) Termination for Cause

In addition to Paragraph 10 of the standard terms and conditions (P-37) of this Agreement the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a breach by Business Associate of the Business Associate Agreement set forth herein as Exhibit I. The Covered Entity may either immediately terminate the Agreement or provide an opportunity for Business Associate to cure the alleged breach within a timeframe specified by Covered Entity. If Covered Entity determines that neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.

(6) Miscellaneous

a. Definitions and Regulatory References. All terms used, but not otherwise defined herein, shall have the same meaning as those terms in the Privacy and Security Rule, amended from time to time. A reference in the Agreement, as amended to include this Exhibit I, to a Section in the Privacy and Security Rule means the Section as in effect or as amended.

b. Amendment. Covered Entity and Business Associate agree to take such action as is necessary to amend the Agreement, from time to time as is necessary for Covered Entity to comply with the changes in the requirements of HIPAA, the Privacy and Security Rule, and applicable federal and state law.

c. Data Ownership. The Business Associate acknowledges that it has no ownership rights with respect to the PHI provided by or created on behalf of Covered Entity.

d. Interpretation. The parties agree that any ambiguity in the Agreement shall be resolved to permit Covered Entity to comply with HIPAA, the Privacy and Security Rule.

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e. Segregation. If any term or condition of this Exhibit I or the application thereof to any person(s) or circumstance is held invalid, such invalidity shall not affect other terms or conditions which can be given effect without the invalid term or condition; to this end the terms and conditions of this Exhibit I are declared severable.

f. Survival. Provisions in this Exhibit I regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the Agreement in section (3) I, the defense and indemnification provisions of section (3) e and Paragraph 13 of the standard terms and conditions (P-37), shall survive the termination of the Agreement.

IN WITNESS WHEREOF, the parties hereto have duly executed this Exhibit I.

Department of Health and Human Services	The Family Resource Center at Gorham
The State	Name of the Contractor
Patricia M. Tilley	Patricia Stolte
Signature of Authorized Representative	Signature of Authorized Representative
Patricia M. Tilley	Patricia Stolte
Name of Authorized Representative	Name of Authorized Representative
Director	Executive Director
Title of Authorized Representative	Title of Authorized Representative
1/6/2023	1/5/2023
Date	Date

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New Hampshire Department of Health and Human Services
Exhibit J

CERTIFICATION REGARDING THE FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA) COMPLIANCE

The Federal Funding Accountability and Transparency Act (FFATA) requires prime awardees of individual Federal grants equal to or greater than $25,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $25,000 or more. If the initial award is below $25,000 but subsequent grant modifications result in a total award equal to or over $25,000, the award is subject to the FFATA reporting requirements, as of the date of the award.

In accordance with 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), the Department of Health and Human Services (DHHS) must report the following information for any subaward or contract award subject to the FFATA reporting requirements:

1. Name of entity
2. Amount of award
3. Funding agency
4. NAICS code for contracts / CFDA program number for grants
5. Program source
6. Award title descriptive of the purpose of the funding action
7. Location of the entity
8. Principle place of performance
9. Unique identifier of the entity (UEI #)
10. Total compensation and names of the top five executives if:
    - 10.1. More than 80% of annual gross revenues are from the Federal government, and those revenues are greater than $25M annually and
    - 10.2. Compensation information is not already available through reporting to the SEC.

Prime grant recipients must submit FFATA required data by the end of the month, plus 30 days, in which the award or award amendment is made.

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of The Federal Funding Accountability and Transparency Act, Public Law 109-282 and Public Law 110-252, and 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

The below named Contractor agrees to provide needed information as outlined above to the NH Department of Health and Human Services and to comply with all applicable provisions of the Federal Financial Accountability and Transparency Act.

Contractor Name: The Family Resource Center at Gorham

1/5/2023
Date

Patricia Stolte
Name: Patricia Stolte
Title: Executive Director

Contractor Initials PS
Date 1/5/2023

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FORM A

As the Contractor identified in Section 1.3 of the General Provisions, I certify that the responses to the below listed questions are true and accurate.

1. The UEI (SAM.gov) number for your entity is: 019150817/S0402

2. In your business or organization's preceding completed fiscal year, did your business or organization receive (1) 80 percent or more of your annual gross revenue in U.S. federal contracts, subcontracts, loans, grants, sub-grants, and/or cooperative agreements; and (2) $25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

   _X_ NO _____ YES

   If the answer to #2 above is NO, stop here

   If the answer to #2 above is YES, please answer the following:

3. Does the public have access to information about the compensation of the executives in your business or organization through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C.78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

   _____ NO _____ YES

   If the answer to #3 above is YES, stop here

   If the answer to #3 above is NO, please answer the following:

4. The names and compensation of the five most highly compensated officers in your business or organization are as follows:

   Name: _____ Amount: _____

   Name: _____ Amount: _____

   Name: _____ Amount: _____

   Name: _____ Amount: _____

   Name: _____ Amount: _____

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New Hampshire Department of Health and Human Services

Exhibit K

DHHS Information Security Requirements

A. Definitions

The following terms may be reflected and have the described meaning in this document:

1. "Breach" means the loss of control, compromise, unauthorized disclosure, unauthorized acquisition, unauthorized access, or any similar term referring to situations where persons other than authorized users and for an other than authorized purpose have access or potential access to personally identifiable information, whether physical or electronic. With regard to Protected Health Information, "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.

2. "Computer Security Incident" shall have the same meaning "Computer Security Incident" in section two (2) of NIST Publication 800-61, Computer Security Incident Handling Guide, National Institute of Standards and Technology, U.S. Department of Commerce.

3. "Confidential Information" or "Confidential Data" means all confidential information disclosed by one party to the other such as all medical, health, financial, public assistance benefits and personal information including without limitation, Substance Abuse Treatment Records, Case Records, Protected Health Information and Personally Identifiable Information.

   Confidential Information also includes any and all information owned or managed by the State of NH - created, received from or on behalf of the Department of Health and Human Services (DHHS) or accessed in the course of performing contracted services - of which collection, disclosure, protection, and disposition is governed by state or federal law or regulation. This information includes, but is not limited to Protected Health Information (PHI), Personal Information (PI), Personal Financial Information (PFI), Federal Tax Information (FTI), Social Security Numbers (SSN), Payment Card Industry (PCI), and or other sensitive and confidential information.

4. "End User" means any person or entity (e.g., contractor, contractor's employee, business associate, subcontractor, other downstream user, etc.) that receives DHHS data or derivative data in accordance with the terms of this Contract.

5. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996 and the regulations promulgated thereunder.

6. "Incident" means an act that potentially violates an explicit or implied security policy, which includes attempts (either failed or successful) to gain unauthorized access to a system or its data, unwanted disruption or denial of service, the unauthorized use of a system for the processing or storage of data; and changes to system hardware, firmware, or software characteristics without the owner's knowledge, instruction, or consent. Incidents include the loss of data through theft or device misplacement, loss or misplacement of hardcopy documents, and misrouting of physical or electronic

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mail, all of which may have the potential to put the data at risk of unauthorized access, use, disclosure, modification or destruction.

7. "Open Wireless Network" means any network or segment of a network that is not designated by the State of New Hampshire's Department of Information Technology or delegate as a protected network (designed, tested, and approved, by means of the State, to transmit) will be considered an open network and not adequately secure for the transmission of unencrypted PI, PFI, PHI or confidential DHHS data.

8. "Personal Information" (or "PI") means information which can be used to distinguish or trace an individual's identity, such as their name, social security number, personal information as defined in New Hampshire RSA 359-C:19, biometric records, etc., alone, or when combined with other personal or identifying information which is linked or linkable to a specific individual, such as date and place of birth, mother's maiden name, etc.

9. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 C.F.R. Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.

10. "Protected Health Information" (or "PHI") has the same meaning as provided in the definition of "Protected Health Information" in the HIPAA Privacy Rule at 45 C.F.R. § 160.103.

11. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 C.F.R. Part 164, Subpart C, and amendments thereto.

12. "Unsecured Protected Health Information" means Protected Health Information that is not secured by a technology standard that renders Protected Health Information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.

I. RESPONSIBILITIES OF DHHS AND THE CONTRACTOR

A. Business Use and Disclosure of Confidential Information.

1. The Contractor must not use, disclose, maintain or transmit Confidential Information except as reasonably necessary as outlined under this Contract. Further, Contractor, including but not limited to all its directors, officers, employees and agents, must not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.

2. The Contractor must not disclose any Confidential Information in response to a

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request for disclosure on the basis that it is required by law, in response to a subpoena, etc., without first notifying DHHS so that DHHS has an opportunity to consent or object to the disclosure.

3. If DHHS notifies the Contractor that DHHS has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Contractor must be bound by such additional restrictions and must not disclose PHI in violation of such additional restrictions and must abide by any additional security safeguards.
4. The Contractor agrees that DHHS Data or derivative there from disclosed to an End User must only be used pursuant to the terms of this Contract.
5. The Contractor agrees DHHS Data obtained under this Contract may not be used for any other purposes that are not indicated in this Contract.
6. The Contractor agrees to grant access to the data to the authorized representatives of DHHS for the purpose of inspecting to confirm compliance with the terms of this Contract.

II. METHODS OF SECURE TRANSMISSION OF DATA

1. Application Encryption. If End User is transmitting DHHS data containing Confidential Data between applications, the Contractor attests the applications have been evaluated by an expert-knowledgeable in cyber security and that said application's encryption capabilities ensure secure transmission via the internet.
2. Computer Disks and Portable Storage Devices. End User may not use computer disks or portable storage devices, such as a thumb drive, as a method of transmitting DHHS data.
3. Encrypted Email. End User may only employ email to transmit Confidential Data if email is encrypted and being sent to and being received by email addresses of persons authorized to receive such information.
4. Encrypted Web Site. If End User is employing the Web to transmit Confidential Data, the secure socket layers (SSL) must be used and the web site must be secure. SSL encrypts data transmitted via a Web site.
5. File Hosting Services, also known as File Sharing Sites. End User may not use file hosting services, such as Dropbox or Google Cloud Storage, to transmit Confidential Data.
6. Ground Mail Service. End User may only transmit Confidential Data via *certified* ground mail within the continental U.S. and when sent to a named individual.
7. Laptops and PDA. If End User is employing portable devices to transmit Confidential Data said devices must be encrypted and password-protected.
8. Open Wireless Networks. End User may not transmit Confidential Data via an open

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wireless network. End User must employ a virtual private network (VPN) when remotely transmitting via an open wireless network.

9. Remote User Communication. If End User is employing remote communication to access or transmit Confidential Data, a virtual private network (VPN) must be installed on the End User's mobile device(s) or laptop from which information will be transmitted or accessed.

10. SSH File Transfer Protocol (SFTP), also known as Secure File Transfer Protocol. If End User is employing an SFTP to transmit Confidential Data, End User will structure the Folder and access privileges to prevent inappropriate disclosure of information. SFTP folders and sub-folders used for transmitting Confidential Data will be coded for 24-hour auto-deletion cycle (i.e. Confidential Data will be deleted every 24 hours).

11. Wireless Devices. If End User is transmitting Confidential Data via wireless devices, all data must be encrypted to prevent inappropriate disclosure of information.

III. RETENTION AND DISPOSITION OF IDENTIFIABLE RECORDS

The Contractor will only retain the data and any derivative of the data for the duration of this Contract. After such time, the Contractor will have 30 days to destroy the data and any derivative in whatever form it may exist, unless, otherwise required by law or permitted under this Contract. To this end, the parties must:

A. Retention

1. The Contractor agrees it will not store, transfer or process data collected in connection with the services rendered under this Contract outside of the United States. This physical location requirement shall also apply in the implementation of cloud computing, cloud service or cloud storage capabilities, and includes backup data and Disaster Recovery locations.

2. The Contractor agrees to ensure proper security monitoring capabilities are in place to detect potential security events that can impact State of NH systems and/or Department confidential information for contractor provided systems.

3. The Contractor agrees to provide security awareness and education for its End Users in support of protecting Department confidential information.

4. The Contractor agrees to retain all electronic and hard copies of Confidential Data in a secure location and identified in section IV. A.2

5. The Contractor agrees Confidential Data stored in a Cloud must be in a FedRAMP/HITECH compliant solution and comply with all applicable statutes and regulations regarding the privacy and security. All servers and devices must have currently-supported and hardened operating systems, the latest anti-viral, anti-hacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a

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whole, must have aggressive intrusion-detection and firewall protection.

6. The Contractor agrees to and ensures its complete cooperation with the State's Chief Information Officer in the detection of any security vulnerability of the hosting infrastructure.

8. Disposition

1. If the Contractor will maintain any Confidential Information on its systems (or its sub-contractor systems), the Contractor will maintain a documented process for securely disposing of such data upon request or contract termination; and will obtain written certification for any State of New Hampshire data destroyed by the Contractor or any subcontractors as a part of ongoing, emergency, and or disaster recovery operations. When no longer in use, electronic media containing State of New Hampshire data shall be rendered unrecoverable via a secure wipe program in accordance with industry-accepted standards for secure deletion and media sanitization, or otherwise physically destroying the media (for example, degaussing) as described in NIST Special Publication 800-88, Rev 1, Guidelines for Media Sanitization, National Institute of Standards and Technology, U. S. Department of Commerce. The Contractor will document and certify in writing at time of the data destruction, and will provide written certification to the Department upon request. The written certification will include all details necessary to demonstrate data has been properly destroyed and validated. Where applicable, regulatory and professional standards for retention requirements will be jointly evaluated by the State and Contractor prior to destruction.
2. Unless otherwise specified, within thirty (30) days of the termination of this Contract, Contractor agrees to destroy all hard copies of Confidential Data using a secure method such as shredding.
3. Unless otherwise specified, within thirty (30) days of the termination of this Contract, Contractor agrees to completely destroy all electronic Confidential Data by means of data erasure, also known as secure data wiping.

IV. PROCEDURES FOR SECURITY

A. Contractor agrees to safeguard the DHHS Data received under this Contract, and any derivative data or files, as follows:

1. The Contractor will maintain proper security controls to protect Department confidential information collected, processed, managed, and/or stored in the delivery of contracted services.
2. The Contractor will maintain policies and procedures to protect Department confidential information throughout the information lifecycle, where applicable, (from creation, transformation, use, storage and secure destruction) regardless of the media used to store the data (i.e., tape, disk, paper, etc.).

Contractor Initials: PS

Date: 1/5/2023

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3. The Contractor will maintain appropriate authentication and access controls to contractor systems that collect, transmit, or store Department confidential information where applicable.

4. The Contractor will ensure proper security monitoring capabilities are in place to detect potential security events that can impact State of NH systems and/or Department confidential information for contractor provided systems.

5. The Contractor will provide regular security awareness and education for its End Users in support of protecting Department confidential information.

6. If the Contractor will be sub-contracting any core functions of the engagement supporting the services for State of New Hampshire, the Contractor will maintain a program of an internal process or processes that defines specific security expectations, and monitoring compliance to security requirements that at a minimum match those for the Contractor, including breach notification requirements.

7. The Contractor will work with the Department to sign and comply with all applicable State of New Hampshire and Department system access and authorization policies and procedures, systems access forms, and computer use agreements as part of obtaining and maintaining access to any Department system(s). Agreements will be completed and signed by the Contractor and any applicable sub-contractors prior to system access being authorized.

8. If the Department determines the Contractor is a Business Associate pursuant to 45 CFR 160.103, the Contractor will execute a HIPAA Business Associate Agreement (BAA) with the Department and is responsible for maintaining compliance with the agreement.

9. The Contractor will work with the Department at its request to complete a System Management Survey. The purpose of the survey is to enable the Department and Contractor to monitor for any changes in risks, threats, and vulnerabilities that may occur over the life of the Contractor engagement. The survey will be completed annually, or an alternate time frame at the Departments discretion with agreement by the Contractor, or the Department may request the survey be completed when the scope of the engagement between the Department and the Contractor changes.

10. The Contractor will not store, knowingly or unknowingly, any State of New Hampshire or Department data offshore or outside the boundaries of the United States unless prior express written consent is obtained from the Information Security Office leadership member within the Department.

11. Data Security Breach Liability. In the event of any security breach Contractor shall make efforts to investigate the causes of the breach, promptly take measures to prevent future breach and minimize any damage or loss resulting from the breach. The State shall recover from the Contractor all costs of response and recovery from

PS

Contractor Initials

1/5/2023

Date

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the breach, including but not limited to: credit monitoring services, mailing costs and costs associated with website and telephone call center services necessary due to the breach.

12. Contractor must, comply with all applicable statutes and regulations regarding the privacy and security of Confidential Information, and must in all other respects maintain the privacy and security of PI and PHI at a level and scope that is not less than the level and scope of requirements applicable to federal agencies, including, but not limited to, provisions of the Privacy Act of 1974 (5 U.S.C. § 552a), DHHS Privacy Act Regulations (45 C.F.R. §5b), HIPAA Privacy and Security Rules (45 C.F.R. Parts 160 and 164) that govern protections for individually identifiable health information and as applicable under State law.

13. Contractor agrees to establish and maintain appropriate administrative, technical, and physical safeguards to protect the confidentiality of the Confidential Data and to prevent unauthorized use or access to it. The safeguards must provide a level and scope of security that is not less than the level and scope of security requirements established by the State of New Hampshire, Department of Information Technology. Refer to Vendor Resources/Procurement at https://www.nh.gov/doit/vendor/index.htm for the Department of Information Technology policies, guidelines, standards, and procurement information relating to vendors.

14. Contractor agrees to maintain a documented breach notification and incident response process. The Contractor will notify the State's Privacy Officer and the State's Security Officer of any security breach immediately, at the email addresses provided in Section VI. This includes a confidential information breach, computer security incident, or suspected breach which affects or includes any State of New Hampshire systems that connect to the State of New Hampshire network.

15. Contractor must restrict access to the Confidential Data obtained under this Contract to only those authorized End Users who need such DHHS Data to perform their official duties in connection with purposes identified in this Contract.

16. The Contractor must ensure that all End Users:

    a. comply with such safeguards as referenced in Section IV A. above, implemented to protect Confidential Information that is furnished by DHHS under this Contract from loss, theft or inadvertent disclosure.

    b. safeguard this information at all times.

    c. ensure that laptops and other electronic devices/media containing PHI, PI, or PFI are encrypted and password-protected.

    d. send emails containing Confidential Information only if encrypted and being sent to and being received by email addresses of persons authorized to receive such information.

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e. limit disclosure of the Confidential Information to the extent permitted by law.

f. Confidential Information received under this Contract and individually identifiable data derived from DHHS Data, must be stored in an area that is physically and technologically secure from access by unauthorized persons during duty hours as well as non-duty hours (e.g., door locks, card keys, biometric identifiers, etc.).

g. only authorized End Users may transmit the Confidential Data, including any derivative files containing personally identifiable information, and in all cases, such data must be encrypted at all times when in transit, at rest, or when stored on portable media as required in section IV above.

h. in all other instances Confidential Data must be maintained, used and disclosed using appropriate safeguards, as determined by a risk-based assessment of the circumstances involved.

i. understand that their user credentials (user name and password) must not be shared with anyone. End Users will keep their credential information secure. This applies to credentials used to access the site directly or indirectly through a third party application.

Contractor is responsible for oversight and compliance of their End Users. DHHS reserves the right to conduct onsite inspections to monitor compliance with this Contract, including the privacy and security requirements provided in herein, HIPAA, and other applicable laws and Federal regulations until such time the Confidential Data is disposed of in accordance with this Contract.

V. LOSS REPORTING

The Contractor must notify the State's Privacy Officer and Security Officer of any Security Incidents and Breaches immediately, at the email addresses provided in Section VI.

The Contractor must further handle and report Incidents and Breaches involving PHI in accordance with the agency's documented Incident Handling and Breach Notification procedures and in accordance with 42 C.F.R. §§ 431.300 - 306. In addition to, and notwithstanding, Contractor's compliance with all applicable obligations and procedures, Contractor's procedures must also address how the Contractor will:

1. Identify Incidents;
2. Determine if personally identifiable information is involved in Incidents;
3. Report suspected or confirmed Incidents as required in this Exhibit or P-37;
4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and

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5. Determine whether Breach notification is required, and, if so, identify appropriate Breach notification methods, timing, source, and contents from among different options, and bear costs associated with the Breach notice as well as any mitigation measures.

Incidents and/or Breaches that implicate PI must be addressed and reported, as applicable, in accordance with NH RSA 359-C:20.

VI. PERSONS TO CONTACT

A. DHHS Privacy Officer:

DHHSPrivacyOfficer@dhhs.nh.gov

B. DHHS Security Officer:

DHHSInformationSecurityOffice@dhhs.nh.gov

State of New Hampshire
Department of Health and Human Services
Amendment #3

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Waypoint ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item #39), as amended on May 1, 2024 (Item #18), and as amended on September 25, 2024 (Item #16), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8., Price Limitation, to read:

   $16,734,456

2. Modify Exhibit B, Scope of Services, Section 3.7.2., to read:

   3.7.2. Utilize evidence-based curricula to support prenatal individuals and newly parenting families including but not limited to:

   3.7.2.1. Parents as Teachers (PAT), as an annually trained "Approved user"; or

   3.7.2.2. Growing Great Kids (GGK) with certification of training.

3. Modify Exhibit C, Payment Terms; Section 1, to read:

   1. This Agreement is funded by:

   1.1. 70.48% Federal funds from:

   1.1.1. 40.27% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the DHHS Health Resources and Services Administration (HRSA), Assistance Listing Number (ALN) 93.870, FAIN X10MC43595; and as awarded on September 2, 2022, FAIN X10MC46878; and as awarded on August 29, 2023, FAIN X10MC50315; and as awarded on August 27, 2024, FAIN X10MC53631.

   1.1.2. 26.36% Foster Care Title IV-E, as awarded on October 1, 2022, by the Administration of Children Youth & Families (ACF), ALN 93.658, FAIN (FFPSA) 2301NHFOST and FAIN 2201NHFOST.

   1.1.3. 2.28% American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the DHHS HRSA, ALN 93.870, FAIN X11MC41935; and as awarded on October 28, 2021, FAIN X11MC45263.

   1.1.4. 1.57% Centers for Disease Control and Prevention (CDC), as awarded on May 27, 2021, by the NH Initiative to Address Covid-19 Health Disparities, ALN 93.391, FAIN NB75OT000031.

   1.2. 28.88% General funds.

   1.3. .64% Other Funds (Governor's Commission Funds).

4. Modify Exhibit C, Payment Terms, Section 7, to read:

   7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement and shall be in accordance with the approved line items as

specified in Exhibits C-1, Budget through C-9, SFY 2029 Budget Sheet - Amendment #3.

5. Modify Exhibit C-3, SFY 2025 Budget Sheet – Amendment #2, by replacing it in its entirety with Exhibit C-3, SFY 2025 Budget Sheet – Amendment #3, which is attached hereto and incorporated by reference herein.
6. Modify Exhibit C-6, Budget Sheet, SFY 2026 – Amendment #2, by replacing it in its entirety with Exhibit C-6, Budget Sheet, SFY 2026 – Amendment #3, which is attached hereto and incorporated by reference herein.
7. Modify Exhibit C-7, Budget Sheet, SFY 2027 – Amendment #2, by replacing it in its entirety with Exhibit C-7, Budget Sheet, SFY 2027 – Amendment #3, which is attached hereto and incorporated by reference herein.
8. Modify Exhibit C-8, Budget Sheet, SFY 2028 – Amendment #2, by replacing it in its entirety with Exhibit C-8, Budget Sheet, SFY 2028 – Amendment #3, which is attached hereto and incorporated by reference herein.
9. Modify Exhibit C-9, Budget Sheet, SFY 2029 – Amendment #2, by replacing it in its entirety with Exhibit C-9, Budget Sheet, SFY 2029 – Amendment #3, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment remain in full force and effect. This Amendment shall be effective upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

4/4/2025
Date

DocuSigned by:
Iain Watt
D778B650F9704C7...
Name: Iain Watt
Title: Director – DPHS

Waypoint

4/4/2025
Date

Signed by:
Borja Alvarez de Toledo
2EBCBA2641C6F4B0...
Name: Borja Alvarez de Toledo
Title: president and CEO

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

4/16/2025
Date

DocuSigned by:
Robyn Guarino
748734844941460...
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Exhibit C-3, SFY 2025 Budget Sheet - Amendment #3

New Hampshire Department of Health and Human Services

Contractor Name: *Waypoint*
Budget Request for: *Home Visiting Services*
Budget Period: *SFY 2025 (7/1/24 - 6/30/25)*
Indirect Cost Rate (if applicable): 17.40%

Line Item	HOME VISITING FORMULA GNT AND GENERAL FUNDS
1. Salary & Wages	$672,242
2. Fringe Benefits	$193,470
3. Consultants	$34,900
4. Equipment *Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.*	
5.(a) Supplies - Educational	
5.(b) Supplies - Lab	
5.(c) Supplies - Pharmacy	
5.(d) Supplies - Medical	
5.(e) Supplies Office	$4,800
6. Travel	$36,450
7. Software	$19,200
8. (a) Other - Marketing/Communications	
8. (b) Other - Education and Training	$12,000
8. (c) Other - Other (specify below)	
Organization/Membership Dues	$10,250
Occupancy	$56,140
Phones	$18,300
Insurance	$12,900
Other (please specify)	
Other (please specify)	
Other (please specify)	
Other (please specify)	
9. Subrecipient Contracts	
Total Direct Costs	$1,070,652
Total Indirect Costs	$186,294
Subtotals	**$1,256,946**
TOTAL	**$1,256,946**

Contractor Initials: BAT (Initial)

Date: 4/4/2025

Exhibit C-6, Budget Sheet, SFY 2026 - Amendment #3

New Hampshire Department of Health and Human Services	
Contractor Name:	Waypoint
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/25 - 6/30/26
Indirect Cost Rate (if applicable)	18.60%
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$796,723
2. Fringe Benefits	$199,181
3. Consultants	$10,000
4. EquipmentIndirect cost rate cannot be a	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies - Office	$588
6. Travel	$24,290
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$743
8. (c) Other - Other (specify below)	$0
Occupancy	$45,420
Phones	$0
Insurance	$11,640
Organization/Membership dues	$6,000
9. Subrecipient Contracts	$0
Total Direct Costs	$1,094,585
Total Indirect Costs	$203,593
TOTAL	$1,298,178

Contractor Initials: BAT

Date: 4/4/2025

Exhibit C-7, Budget Sheet, SFY 2027 - Amendment #3

New Hampshire Department of Health and Human Services	
Contractor Name:	Waypoint
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/26 - 6/30/27
Indirect Cost Rate (if applicable)	18.60%
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$751,962
2. Fringe Benefits	$187,990
3. Consultants	$405
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$0
6. Travel	$16,046
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$200
8. (c) Other - Other (specify below)	$0
Occupancy	$2,100
Phones	$1,650
Organization Dues	$8,000
9. Subrecipient Contracts	$0
Total Direct Costs	$968,353
Total Indirect Costs	$180,114
TOTAL	$1,148,467

Contractor Initials: BAT

Date: 4/4/2025

Exhibit C-8, Budget Sheet, SFY 2028 - Amendment #3

New Hampshire Department of Health and Human Services	
Contractor Name:	Waypoint
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/27 - 6/30/28
Indirect Cost Rate (if applicable)	18.60%
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$830,940
2. Fringe Benefits	$216,042
3. Consultants	$33,000
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$3,600
6. Travel	$34,920
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$11,650
8. (c) Other - Other (specify below)	$0
Organization/Membership Dues	$8,000
Occupancy	$48,350
Phones	$16,316
Insurance	$6,720
9. Subrecipient Contracts	$0
Total Direct Costs	$1,209,538
Total Indirect Costs	$224,974
TOTAL	$1,434,512

Contractor Initials: BAT

Date: 4/4/2025

Exhibit C-9, Budget Sheet, SFY 2029 - Amendment #3

New Hampshire Department of Health and Human Services	
Contractor Name:	Waypoint
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/28 - 9/30/28
Indirect Cost Rate (if applicable)	18.60%
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$195,288
2. Fringe Benefits	$52,845
3. Consultants	$6,000
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies - Office	$800
6. Travel	$7,725
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$0
8. (c) Other - Other (specify below)	$0
Occupancy	$9,000
Phones	$3,000
Insurance	$262
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$274,920
Total Indirect Costs	$51,135
TOTAL	$326,055

Contractor Initials: BAT

Date: 4/4/2025

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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 WAYPOINT is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on September 25, 1914. 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: **62585**

Certificate Number: **0006775282**



IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 10th day of September A.D. 2024.

David M. Scanlan
Secretary of State

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WAYPOINT
Help Along the Way

Formerly
CHILD AND FAMILY SERVICES

CERTIFICATE OF VOTE

I, MARK C. ROUVALIS, Board Chair, do hereby certify that:

1. I am a duly elected Officer of WAYPOINT.

2. The following are true copies of two resolutions duly adopted at a meeting of the Board of Directors of the Agency duly held on 12/4/18:

RESOLVED: That this corporation enters into a contract with the State of New Hampshire, and any of its Agencies or Departments.

RESOLVED: That the PRESIDENT AND CEO is hereby authorized on behalf of this Agency to enter into the said contract with the State and to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, as he/she may deem necessary, desirable or appropriate.

BORJA ALVAREZ DE TOLEDO is the duly elected PRESIDENT/CEO of the Agency.

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.

4/7/25
Date

Mark C. Rouvalis, Board Chair
Mark C. Rouvalis

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 04/07/2025

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 Cross Insurance-Manchester 1100 Elm Street Manchester NH 03101	CONTACT NAME: Stephanie Peffer PHONE (A/C, No, Ext): (603) 669-3218 FAX (A/C, No): (603) 645-4331 E-MAIL ADDRESS: manch.certs@crossagency.com
INSURED Waypoint Po Box 448 Manchester NH 03105	INSURER(S) AFFORDING COVERAGE — NAIC # INSURER A: Philadelphia Indemnity Ins Co — 18058 INSURER B: Granite State Health Care and Human Services Self- INSURER C: Travelers Cas. & Surety Co of America — 31194 INSURER D: INSURER E: INSURER F:

COVERAGES **CERTIFICATE NUMBER:** 24-25 All 25-26 WC **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	[X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [X] POLICY [ ] PRO-JECT [ ] LOC [X] OTHER: Professional Liability			PHPK2570618	07/01/2024	07/01/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG Each incident $1M	$ 1,000,000 $ 100,000 $ 5,000 $ 1,000,000 $ 3,000,000 $ 3,000,000 $ 3,000,000 - agg
A	AUTOMOBILE LIABILITY [X] ANY AUTO [ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS [ ] HIRED AUTOS ONLY [ ] NON-OWNED AUTOS ONLY			PHPK2570610	07/01/2024	07/01/2025	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ 1,000,000 $ $ $
A	[X] UMBRELLA LIAB [X] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [X] RETENTION $ 10,000			PHUB869967	07/01/2024	07/01/2025	EACH OCCURRENCE AGGREGATE	$ 4,000,000 $ 4,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N [N] If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		R01710HCHS2025-01 (3a.) NH	01/01/2025	01/01/2026	[X] PER STATUTE [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ 1,000,000 $ 1,000,000 $ 1,000,000
C	Fidelity & Forgery			105912196	04/01/2024	04/01/2027	Limit Deductible	500,000 5,000

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

Refer to policy for exclusionary endorsements and special provisions.

CERTIFICATE HOLDER

State of NH Department of Health & Human Services
129 Pleasant Street
Concord NH 03301-3857

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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WAYPOINT
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Formerly
CHILD AND FAMILY SERVICES

MISSION STATEMENT:

Empowering people of all ages through an array of human services and advocacy

HEADQUARTERS
toll free (800) 640.6486
office (603) 518.4000
fax (603) 668.6260

464 Chestnut Street
PO Box 448
Manchester, NH 03105
waypointnh.org

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WAYPOINT

CONSOLIDATED FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION

FOR THE YEAR ENDED DECEMBER 31, 2023

WAYPOINT

Help Along the Way

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WAYPOINT

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MARCUM
ACCOUNTANTS ▲ ADVISORS

INDEPENDENT AUDITORS' REPORT

To the Board of Trustees
Waypoint

Report on the Audit of the Consolidated Financial Statements

Opinion

We have audited the consolidated financial statements of Waypoint, which comprise the consolidated statement of financial position as of December 31, 2023, and the related consolidated statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the consolidated financial statements.

In our opinion, the accompanying consolidated financial statements present fairly, in all material respects, the consolidated financial position of Waypoint as of December 31, 2023, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) 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 Auditors' Responsibilities for the Audit of the Consolidated Financial Statements section of our report. We are required to be independent of Waypoint and to meet our other ethical responsibilities, in accordance with the 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 audit opinion.

Responsibilities of Management for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of the consolidated 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 consolidated financial statements that are free from material misstatement, whether due to fraud or error.

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

Marcum LLP | 9 Executive Park Drive | Suite 100 | Merrimack, NH 03054 | Phone 603.882.1111 | marcumllp.com

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Auditors' Responsibilities for the Audit of the Consolidated Financial Statements

Our objectives are to obtain reasonable assurance about whether the consolidated financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' 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 GAAS 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 consolidated financial statements.

In performing an audit in accordance with GAAS 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 consolidated 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 consolidated 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 Waypoint'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 consolidated financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Waypoint'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 audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The Consolidated Schedules of Operating Expenses for 2023 and 2022 are presented for purposes of additional analysis and are not a required part of the consolidated 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 consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards

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generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

Report on Summarized Comparative Information

The consolidated financial statements of Waypoint as of and for the year ended December 31, 2022, were audited by Melanson, whose report dated May 10, 2023 expressed an unmodified opinion on those statements. In our opinion, the summarized comparative information presented herein as of and for the year ended December 31, 2022 is consistent, in all material respects, with the audited consolidated financial statements from which it has been derived.

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated May 20, 2024 on our consideration of Waypoint'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 solely 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 Waypoint'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 Waypoint's internal control over financial reporting and compliance.

Marcum LLP

Merrimack, NH
May 20, 2024

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WAYPOINT

CONSOLIDATED STATEMENT OF FINANCIAL POSITION

DECEMBER 31, 2023

(with comparative totals as of December 31, 2022)

	2023			
	Without Donor Restrictions	With Donor Restrictions	2023 Total	2022 Total
Assets				
Current Assets				
Cash and cash equivalents	$ 5,649,783	$ --	$ 5,649,783	$ 712,445
Restricted cash	70,644	--	70,644	76,756
Accounts receivable, net of allowance for credit losses of $11,667 and $300	1,141,771	--	1,141,771	801,732
Grants receivable	1,649,265	--	1,649,265	1,274,880
Contributions receivable	88,258	--	88,258	--
Prepaid expenses	198,073	--	198,073	587,001
Total Current Assets	8,797,794	--	8,797,794	3,452,814
Noncurrent Assets				
Investments	16,966,133	4,428,622	21,394,755	18,568,769
Beneficial interest held in trusts	--	2,165,143	2,165,143	2,020,741
Property and equipment, net	9,675,555	--	9,675,555	10,105,143
Operating right-of-use assets, net	293,239	--	293,239	334,034
Total Noncurrent Assets	26,934,927	6,593,765	33,528,692	31,028,687
Total Assets	$ 35,732,721	$ 6,593,765	$ 42,326,486	$ 34,481,501
Liabilities and Net Assets				
Current Liabilities				
Accounts payable	$ 185,519	$ --	$ 185,519	$ 246,312
Accrued payroll and related liabilities	713,461	--	713,461	891,489
Other liabilities	58,649	--	58,649	205,887
Current portion of bonds payable	180,000	--	180,000	175,000
Current portion of operating lease liabilities	172,933	--	172,933	175,381
Refundable advances	316,902	--	316,902	443,742
Total Current Liabilities	1,627,464	--	1,627,464	2,137,811
Noncurrent Liabilities				
Bonds payable, net of current portion	3,175,167	--	3,175,167	3,355,167
Operating lease liabilities, net of current portion	124,897	--	124,897	160,212
Deferred loans - NHHFA	1,250,000	--	1,250,000	1,250,000
Interest rate swap agreements	380,838	--	380,838	399,935
Total Noncurrent Liabilities	4,930,902	--	4,930,902	5,165,314
Total Liabilities	6,558,366	--	6,558,366	7,303,125
Net Assets				
Without donor restrictions	29,174,355	--	29,174,355	21,485,716
With donor restrictions	--	6,593,765	6,593,765	5,692,660
Total Net Assets	29,174,355	6,593,765	35,768,120	27,178,376
Total Liabilities and Net Assets	$ 35,732,721	$ 6,593,765	$ 42,326,486	$ 34,481,501

The accompanying notes are an integral part of these consolidated financial statements.

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WAYPOINT

CONSOLIDATED STATEMENT OF ACTIVITIES

FOR THE YEAR ENDED DECEMBER 31, 2023

(with summarized comparative totals for the year ended December 31, 2022)

	2023			
	Without Donor Restrictions	With Donor Restrictions	2023 Total	2022 Total
Support and Revenue				
Support:				
Government grants	$ 8,404,728	$ 1,207,675	$ 9,612,403	$ 9,800,690
Contributions	1,387,432	2,331,849	3,719,281	2,840,961
In-kind contributions	77,736	--	77,736	48,536
Special events:				
Gross revenue	22,449	415,806	438,255	616,955
Less cost of direct benefit to donors	(120,158)	--	(120,158)	(153,690)
Net special events revenue	(97,709)	415,806	318,097	463,265
Revenue:				
Service fees, net	8,084,807	--	8,084,807	6,200,380
Rental income	15,641	--	15,641	--
Other income	119,368	--	119,368	40,684
Net Assets Released From Restrictions:				
Program releases	3,538,472	(3,538,472)	--	--
Endowment releases	80,643	(80,643)	--	--
Endowment Transfer to Support Operations	868,594	--	868,594	842,559
Total Support and Revenue	22,479,712	336,215	22,815,927	20,237,075
Operating Expenses				
Program services	17,015,721	--	17,015,721	15,261,737
Management and general	3,382,989	--	3,382,989	2,816,820
Fundraising	465,528	--	465,528	795,129
Total Operating Expenses	20,864,238	--	20,864,238	18,873,686
Change in Net Assets From Operations	1,615,474	336,215	1,951,689	1,363,389
Nonoperating Activities				
Investment income (loss), net	2,573,760	420,488	2,994,248	(4,096,650)
Unrealized gain on interest rate swap	19,097	--	19,097	593,622
(Loss) gain on the sale of asset	(4,136)	--	(4,136)	241,592
Change in beneficial interest	--	144,402	144,402	(413,854)
Interest income	297,174	--	297,174	4,744
Endowment transfer to support operations	(868,594)	--	(868,594)	(842,559)
Employee retention tax credit, net	4,055,864	--	4,055,864	--
Transfer of assets from Richie McFarland Children's Center	--	--	--	2,521,803
Total Nonoperating Activities	6,073,165	564,890	6,638,055	(1,991,302)
Change in Net Assets	7,688,639	901,105	8,589,744	(627,913)
Net Assets, Beginning of Year	21,485,716	5,692,660	27,178,376	27,806,289
Net Assets, End of Year	$ 29,174,355	$ 6,593,765	$ 35,768,120	$ 27,178,376

The accompanying notes are an integral part of these consolidated financial statements.

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WAYPOINT

CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 2023

(with summarized comparative totals for the year ended December 31, 2022)

	2023				
	Program Services	Management and General	Fundraising	2023 Total	2022 Total
Personnel expense:					
Salaries and wages	$ 9,649,650	$ 1,634,614	$ 309,418	$ 11,593,682	$ 10,719,413
Employee benefits	1,723,526	176,591	37,744	1,937,861	1,525,300
Retirement plan	119,524	35,604	5,325	160,453	121,399
Payroll taxes and other	990,399	127,664	23,934	1,141,997	1,026,086
Subtotal personnel expense	12,483,099	1,974,473	376,421	14,833,993	13,392,198
Professional fees:					
Accounting	75	45,570	--	45,645	51,130
Legal	6,784	70,873	--	77,657	18,661
Contracted services	418,189	406,788	52,603	877,580	1,179,448
Subtotal professional fees	425,048	523,231	52,603	1,000,882	1,249,239
Assistance to individuals	1,300,225	551	45,000	1,345,776	1,150,805
Communications	191,563	47,124	6,242	244,929	230,090
Conferences, conventions, meetings, and trainings	125,001	39,610	8,667	173,278	185,314
Depreciation	369,348	198,363	6,964	574,675	499,935
Insurance	118,173	63,652	2,282	184,107	97,877
Interest	286,008	40,704	5,449	332,161	251,392
Membership dues	29,654	16,084	--	45,738	56,711
Miscellaneous	52,471	113,285	5,414	171,170	81,163
Occupancy	827,313	70,603	12,193	910,109	799,844
Printing and publications	14,402	48,572	59,996	122,970	126,413
Equipment rental and maintenance	188,633	212,005	1,127	401,765	341,559
Supplies	149,564	12,586	2,190	164,340	159,595
Travel	455,219	22,146	1,138	478,503	405,241
Total Expenses By Function	17,015,721	3,382,989	585,686	20,984,396	19,027,376
Less expenses included on the Statement of Activities:					
Cost of direct benefits to donors	--	--	(120,158)	(120,158)	(153,690)
Total Expenses Reported on the Statement of Activities	$ 17,015,721	$ 3,382,989	$ 465,528	$ 20,864,238	$ 18,873,686

The accompanying notes are an integral part of these consolidated financial statements.

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WAYPOINT

CONSOLIDATED STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED DECEMBER 31, 2023

(with comparative totals for the year ended December 31, 2022)

	2023	2022
Cash Flows from Operating Activities		
Change in net assets	$ 8,589,744	$ (627,913)
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	574,675	499,935
Disposals of fixed assets	36,625	242,906
Amortization of operating right-of-use assets	212,581	173,740
Contributions restricted for endowment	(34,963)	(71,249)
Donation of closely held securities	(750,000)	--
Realized gain on investments	(308,748)	(171,631)
Unrealized (gain) loss on investments	(2,155,130)	4,768,167
Change in beneficial interest in trusts	(144,402)	413,854
Change in interest rate swap	(19,097)	(593,622)
RMCC fixed assets and beneficial interest	--	(1,332,247)
Changes in operating assets and liabilities:		
Accounts receivable	(340,039)	(151,075)
Grants receivable	(374,385)	(635,646)
Contributions receivable	(88,258)	--
Prepaid expenses	388,928	(275,337)
Accounts payable	(60,793)	(44,066)
Accrued payroll and related liabilities	(178,028)	292,661
Other liabilities	(147,238)	142,188
Refundable advances	(126,840)	(217,195)
Operating lease liabilities	(209,548)	(172,182)
Net Cash Provided by Operating Activities	4,865,084	2,241,288
Cash Flows from Investing Activities		
Purchases of investments	(561,345)	(571,135)
Proceeds from sale of investments	949,237	932,262
Purchase of fixed assets	(181,713)	(3,070,755)
Net Cash Provided by (Used in) Investing Activities	206,179	(2,709,628)
Cash Flows from Financing Activities		
Contributions restricted for endowment	34,963	71,249
Proceeds from line of credit	5,505,906	--
Principal payments on line of credit	(5,505,906)	--
Payment of long-term debt	(175,000)	(224,833)
Net Cash Used in Financing Activities	(140,037)	(153,584)
Net Change in Cash and Cash Equivalents and Restricted Cash	4,931,226	(621,924)
Cash and Cash Equivalents, and Restricted Cash, Beginning of Year	789,201	1,411,125
Cash and Cash Equivalents, and Restricted Cash, End of Year	$ 5,720,427	$ 789,201
Supplemental Disclosure of Cash Flow Information:		
Cash paid during the year for interest	$ 332,161	$ 251,392
Supplemental Disclosure of Non-cash Investing Activity:		
RMCC fixed assets and beneficial interest	$ --	$ 1,332,247
As reported in the Consolidated Statement of Financial Position, cash balance consists of:		
Cash and cash equivalents	$ 5,649,783	$ 712,445
Restricted cash	70,644	76,756
Total Cash, Cash Equivalents, and Restricted Cash	$ 5,720,427	$ 789,201

The accompanying notes are an integral part of these consolidated financial statements.

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NOTE 1 - ORGANIZATION

Waypoint (the Organization) is a nonprofit organization, founded in 1850, with a mission to empower people of all ages through an array of human services and advocacy. Waypoint adheres to the highest standards of practice and is the only organization in New Hampshire to be accredited by the Council on Accreditation.

Waypoint has historically been the first service provider to respond to the state's most pressing needs – responding to child labor of the 1900s, child abuse in the 1940s, the spike in youth homelessness in the 1960s, human trafficking in the 2010s, and continues that trend today. Each year we serve an average of 7,500 individuals, children, and families across New Hampshire. Nearly 90% of our clients live in poverty or with very low incomes.

These services span the life cycle from prenatal to seniors, and fall under four core care areas:

FAMILY PRESERVATION AND STRENGTHENING

Intensive home-based programs in partnership with the Division of Children, Youth, and Families to restore positive family functioning for youth and families involved with the child welfare and juvenile justice systems as well as voluntary services for families that are at risk to stabilize families. Programs are delivered in the home, schools, or community, and include mental health counseling and substance abuse treatment, as well as a complex system of family stabilization and preservation programs. Waypoint empowers families with the skills and resources they need to provide for their children and become self-sufficient.

EARLY CHILDHOOD AND FAMILY SUPPORT

Education and support to improve parenting, strengthen families, prevent child abuse, and neglect, and ensure the healthy development of children are provided in homes and through Family Resource Centers throughout New Hampshire. This includes home visiting services that support families and support and therapy for infants and toddlers with, or at-risk of, developmental disabilities and delays. Waypoint also operates a childcare center (the Children's Place and Parent Education Center) providing a unique combination of educational and family support. Young children starting life at a disadvantage receive critical services to ensure a good beginning and to optimize their chances for life-long success.

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NOTE 1 - ORGANIZATION (CONTINUED)

HOMELESS YOUTH AND YOUNG ADULTS

A continuum of care designed to support youth and young adults (12-25) in exiting homelessness and finding long-term independence and stability. Services feature street-based outreach, basic needs fulfillment at drop-in centers, crisis intervention, educational and vocational advocacy, housing, and case management. Waypoint operates the only low-barrier emergency shelter specifically for adults aged 18-24 who are experiencing or are at-risk of homelessness.

HOMECARE

In-home support for seniors and adults with disabilities so they can maintain their independence safely in their community, and family-strengthening support and resources, for children with chronic health condition and their families. Waypoint provides services delivered by personal care service providers, nurses, and LNAs in homes that help with everything from cooking and cleaning to personal hygiene, medication reminders, mobility, and help with daily tasks.

Waypoint provides additional support for children, families, and individuals through a strong advocacy program, established in 1971. The combination of advocacy and direct service practice uniquely positions Waypoint to serve the best interests of New Hampshire children.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The following is a summary of significant accounting policies used in preparing and presenting the accompanying consolidated financial statements.

BASIS OF FINANCIAL STATEMENT PRESENTATION

The consolidated financial statements of the Organization have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (GAAP).

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NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

CHANGE IN ACCOUNTING PRINCIPLE

ASC 326, Current Expected Credit Losses

In June 2016, the Financial Accounting Standards Board (FASB) issued Accounting Standards Codification (ASC) 326, *Current Expected Credit Losses,* which changed how entities will measure credit losses for most financial assets and certain other instruments that are not measured at fair value through net income. The most significant change in this standard is a shift from the incurred loss model to the expected loss model. Under the standard, disclosures are required to provide users of the financial statements with useful information in analyzing an entity's exposure to credit risk and the measurement of credit losses. Financial assets held by the Organization that are subject to the guidance in FASB ASC 326 are trade accounts receivable.

The Organization adopted the standard effective January 1, 2023. The impact of the adoption was not considered material to the consolidated financial statements and primarily resulted in new/enhanced disclosures only.

PRINCIPLES OF CONSOLIDATION

The consolidated financial statements include Waypoint and Child and Family Realty Corporation, commonly controlled organizations. All inter-organization transactions have been eliminated. Unless otherwise noted, these consolidated entities are hereinafter referred to as "the Organization".

COMPARATIVE FINANCIAL INFORMATION

The accompanying consolidated financial statements include certain prior-year summarized comparative information in total, but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with GAAP Accordingly, such information should be read in conjunction with the audited consolidated financial statements for the year ended December 31, 2022, from which the summarized information was derived.

CASH AND CASH EQUIVALENTS

All cash and highly liquid financial instruments with original maturities of three months or less, and which are neither held for nor restricted by donors for long-term purposes, are considered to be cash and cash equivalents. Cash and highly liquid financial instruments invested for long-term purposes, including endowments that are perpetual in nature, are excluded from this definition.

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NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

ACCOUNTS RECEIVABLE AND CREDIT POLICIES

At the end of each reporting period, the Organization estimates the current expected credit loss (CECL) per ASC 326. The Organization utilizes the loss rate methodology to determine historical credit losses. The loss rate method estimate is derived from a review of the Organization's historical write-offs as a percentage of average accounts receivable. The estimate is adjusted for management's assessment of current conditions, reasonable and supportable forecasts regarding future events, and any other factors deemed relevant. The Organization believes historical loss information is a reasonable starting point for calculating the expected allowance for credit losses, as the Organization's programs have remained consistent since inception. Based on economic indicators, including 2023 and general overall economic conditions, the Organization is not anticipating a change in the historical credit loss rate from what it has been in the past.

GRANTS RECEIVABLE

Grants receivable, 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 substantially met. Amounts recorded as grants receivable represent cost-reimbursable contracts and grants, which the incurrence of allowable qualifying expenses and/or the performance of certain requirements have been met or performed. The allowance for uncollectible grants receivable is based on historical experience and a review of subsequent collections. Management has determined that no allowance is necessary.

CONTRIBUTIONS RECEIVABLE

Unconditional contributions that are expected to be collected within one year are recorded at net realizable value. Unconditional contributions that are expected to be collected in future years are initially recorded at fair value using present value techniques incorporating risk-adjusted discount rates designed to reflect the assumptions market participants would use in pricing the asset. In subsequent years, amortization of the discounts is included in contribution revenue in the Consolidated Statement of Activities. The allowance for uncollectable contributions is based on historical experience, an assessment of economic conditions, and a review of subsequent collections. Contributions are written off when deemed uncollectable. Management has determined that no allowance is necessary.

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NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

INVESTMENTS

Investment purchases are recorded at cost, or if donated, at fair value on the date of donation. Thereafter, investments are reported at their fair value in the Consolidated Statement of Financial Position. Net investment return/(loss) is reported in the Consolidated Statement of Activities and consists of interest and dividend income, realized and unrealized gains and losses, less external investment expenses.

The Organization maintains pooled investment accounts for its endowment. Realized and unrealized gains and losses are allocated to the individual endowments based on the relationship of the market value of each endowment to the total market value of the pooled investment accounts, as adjusted for additions to or deductions from those accounts, and taking into consideration donor restrictions related to the treatment of investment earnings.

BENEFICIAL INTEREST HELD IN TRUSTS

The Organization is the beneficiary of perpetual charitable trusts. The beneficial interest in trusts is reported at its fair value, which is estimated as the fair value of the underlying trust assets. Distributions of income from trust assets are restricted as to use and are reported as increases in net assets with donor restrictions until expended in accordance with restrictions. The value of the beneficial interest in the trusts is adjusted annually for the change in its estimated fair value. Those changes in value are reported as increases in net assets with donor restrictions. The assets in the trusts will never be distributed to the Organization.

PROPERTY AND EQUIPMENT, NET

Property and equipment additions over $5,000 are recorded at cost, if purchased, and at fair value at the date of donation, if donated. Depreciation is computed using the straight-line method over the estimated useful lives of the assets ranging from 5 to 50 years. When assets are sold or otherwise disposed of, the cost and related depreciation is removed, and any resulting gain or loss is included in the Consolidated Statement of Activities. Costs of maintenance and repairs that do not improve or extend the useful lives of the respective assets are expensed. Assets not in service are not depreciated.

The carrying values of property and equipment are reviewed for impairment whenever events or circumstances indicate that the carrying value of an asset may not be recoverable from the estimated future cash flows expected to result from its use and eventual disposition. When considered impaired, an impairment loss is recognized to the extent carrying value exceeds the fair value of the asset. There were no indicators of asset impairment in 2023 or 2022.

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NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

LEASES

The Organization is a lessee in several noncancellable operating leases, for office space and equipment. The Organization determines if an arrangement is a lease, or contains a lease, at inception of a contract and when the terms of an existing contract are changed. The Organization recognizes a lease liability and a right-of-use (ROU) asset at the commencement date of the lease. The lease liability is initially and subsequently recognized based on the present value of its future lease payments. Variable payments are included in the future lease payments when those variable payments depend on an index or a rate. The Organization generally does not have access to the rate implicit in the lease and, therefore, the Organization utilizes a risk-free rate as the discount rate at the lease commencement date for all classes of underlying assets. The ROU asset is subsequently measured throughout the lease term at the amount of the remeasured lease liability (i.e., present value of the remaining lease payments), plus unamortized initial direct costs, plus (minus) any prepaid (accrued) lease payments, less the unamortized balance of lease incentives received, and any impairment recognized. Lease cost for lease payments is recognized on a straight-line basis over the lease term.

The Organization has elected, for all underlying classes of assets, to not recognize ROU assets and lease liabilities for short-term leases that have a lease term of 12 months or less at lease commencement, and do not include an option to purchase the underlying asset that the Organization is reasonably certain to exercise. The Organization recognizes lease costs associated with short-term leases on a straight-line basis over the lease term.

The Organization has lease agreements with lease and non-lease components, which are generally accounted for separately. The Organization has elected, for all underlying classes of assets, to account for each separate lease component of a contract and its associated non-lease components (repairs and maintenance) as a single lease component. For arrangements accounted for as a single lease component, there may be variability in future lease payments as the amount of the non-lease components is typically revised from one period to the next. These variable lease payments are recognized in operating expenses in the period in which the obligation for those payments was incurred.

INTEREST RATE SWAP

An interest rate swap is utilized to mitigate interest rate risk on bonds payable. The related liability is reported at fair value in the Consolidated Statement of Financial Position, and unrealized gains or losses are included in the Consolidated Statement of Activities.

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NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

NET ASSETS

Net assets, revenues, gains, and losses are classified based on the existence or absence of donor or grantor-imposed restrictions.

Net Assets Without Donor Restrictions

Net assets without donor restrictions are net assets available for use in general operations and not subject to donor (or certain grantor) imposed restrictions. The Board has designated, from net assets without donor restrictions, net assets for a Board-designated endowment.

Net Assets With Donor Restrictions

Net assets with donor restrictions are 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 while permitting the Organization to expend the income generated by the assets in accordance with the provisions of additional donor-imposed stipulations or a Board approved spending policy. 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.

The Organization recognizes revenue from contributions and grants that were initially conditional, which became unconditional with restrictions during the reporting period, and for which those restrictions were met during the reporting period, as net assets without donor restrictions.

REVENUE RECOGNITION

A portion of the Organization's revenue is derived from cost-reimbursable contracts and grants, which are conditioned upon certain performance requirements and/or the incurrence of allowable qualifying expenses. Amounts received are recognized as revenue when the Organization has incurred expenditures in compliance with specific contract or grant provisions. Amounts received prior to incurring qualifying expenditures are reported as refundable advances in the Consolidated Statement of Financial Position.

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NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

REVENUE RECOGNITION (CONTINUED)

The Organization recognizes contributions when cash, securities or other assets; an unconditional promise to give; or a notification of a beneficial interest 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 Organization records special events revenue equal to the fair value of direct benefits to donors, and contribution income for the excess received when the event takes place.

Revenues derived from providing program services are recognized as the services are provided. Program service fees paid in advance are deferred to the period to which they relate. All other amounts paid in advance are deferred to the period in which the underlying event or rental takes place. Due to the nature and timing of the performance and/or transfer of services, certain contract liabilities at December 31 of each year are recognized in the following year.

DONATED SERVICES AND IN-KIND CONTRIBUTIONS

Volunteers contribute significant amounts of time to program services, administration, and fundraising and development activities; however, the financial statements do not reflect the value of these contributed services because they do not meet recognition criteria prescribed by GAAP. GAAP allows recognition of contributed services only if (a) the services create or enhance nonfinancial assets or (b) the services would have been purchased if not provided by contribution, require specialized skills, and are provided by individuals possessing those skills.

Donated professional services are recorded at the respective fair value of the services received. Contributed goods are recorded at fair value at the date of donation and as expenses when placed in service or distributed. Donated use of facilities is reported as a contribution and as an expense at the estimated fair value of similar space for rent under similar conditions. If the use of the space is promised unconditionally for a period greater than one year, the amount is reported as a contribution and an unconditional promise to give at the date of the gift, and the expense is reported over the term of use.

ADVERTISING COSTS

Advertising costs are expensed as incurred and are reported in the Consolidated Statement of Activities and Consolidated Statement of Functional Expenses.

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NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

FUNCTIONAL ALLOCATION OF EXPENSES

The costs of program and supporting services activities have been summarized on a functional basis in the Consolidated Statement of Activities. The Consolidated Statement of Functional Expenses presents the natural classification detail of expenses by function.

The consolidated financial statements report certain categories of expenses that are attributed to more than one program or supporting function. Therefore, expenses require allocation on a reasonable basis that is consistently applied. The expenses that are allocated include salary and benefits, which are allocated based on time and effort estimates, and occupancy costs and depreciation which are allocated based on personnel count at the location.

MEASURE OF OPERATIONS

The Consolidated Statement of Activities reports all changes in net assets, including changes in net assets from operating and nonoperating activities. Operating activities consist of those items attributable to the Organization's ongoing programs and services and include the Organization's annual endowment transfer to support operations. Nonoperating activities are limited to resources outside of those programs and services and are comprised of non-recurring gains and losses on sales and dispositions, investment income, changes in the value of beneficial interests and interest rate swaps, and employee retention tax credit net of applicable expenses.

INCOME TAXES

Waypoint has been recognized by the Internal Revenue Service (IRS) as exempt from federal income taxes under Internal Revenue Code (IRC) Section 501(a) as an organization described in IRC Section 501(c)(3), qualifies for charitable contribution deductions, and has been determined not to be a private foundation. Child and Family Realty Corporation is exempt from federal income tax under Section 501(a) of the IRC as an organization described in Section 501(c)(25).

Each entity is annually required to file a Return of Organization Exempt from Income Tax (Form 990) with the IRS. In addition, each is subject to income tax on net income that is derived from business activities that are unrelated to their exempt purpose.

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NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

INCOME TAXES (CONTINUED)

The Organization accounts for uncertain tax provisions under FASB ASC 740, *Income Taxes*, which provides a framework for how entities should recognize, measure, present, and disclose uncertain tax positions in their financial statements. The Organization may recognize the tax benefit from an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by the taxing authorities, based on the technical merits of the position. Management has reviewed the Organization's reporting and believes they have not taken tax positions that are more likely than not to be determined to be incorrect by the IRS and, therefore, no adjustments or disclosures are required. The Organization is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods pending or in progress.

ESTIMATES

The preparation of consolidated financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the consolidated financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results may differ from those estimates.

FINANCIAL INSTRUMENTS AND CREDIT RISK

Deposit concentration risk is managed by placing cash deposits with financial institutions believed to be creditworthy. At times, amounts on deposit may exceed insured limits. To date, no losses have been experienced in any of these accounts. Credit risk associated with receivables is considered to be limited due to high historical collection rates. Investments are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such change could materially affect the amounts reported in the Consolidated Statement of Financial Position. Although the fair value of investments are subject to fluctuation on a year-to-year basis, the Investment Committee believes that the investment policies and guidelines are prudent for the long-term welfare of the Organization.

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NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

FAIR VALUE MEASUREMENTS AND DISCLOSURES

Certain assets and liabilities are reported at fair value in the consolidated financial statements. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction in the principal, or most advantageous, market at the measurement date under current market conditions regardless of whether that price is directly observable or estimated using another valuation technique. Inputs used to determine fair value refer broadly to the assumptions that market participants would use in pricing the asset or liability, including assumptions about risk. Inputs may be observable or unobservable. Observable inputs are inputs that reflect the assumptions market participants would use in pricing the asset or liability based on market data obtained from sources independent of the reporting entity. Unobservable inputs are inputs that reflect the reporting entity's own assumptions about the assumptions market participants would use in pricing the asset or liability based on the best information available. A three-tier hierarchy categorizes the inputs as follows:

- Level 1 – Quoted prices (unadjusted) in active markets for identical assets or liabilities that are accessible at the measurement date.
- Level 2 – Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly. These include quoted prices for similar assets or liabilities in active markets, quoted prices for identical or similar assets or liabilities in markets that are not active, inputs other than quoted prices that are observable for the asset or liability, and market-corroborated inputs.
- Level 3 – Unobservable inputs for the asset or liability. In these situations, inputs are developed using the best information available in the circumstances.

In some cases, the inputs used to measure the fair value of an asset or a liability might be categorized within different levels of the fair value hierarchy. In those cases, the fair value measurement is categorized in its entirety at the same level of the fair value hierarchy as the lowest level input that is significant to the entire measurement. Assessing the significance of a particular input to entire measurement requires judgment, taking into account factors specific to the asset or liability. The categorization of an asset or liability within the hierarchy is based upon the pricing transparency of the asset or liability and does not necessarily correspond to the assessment of the quality, risk, or liquidity profile of the asset or liability.

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NOTE 3 - LIQUIDITY AND AVAILABILITY

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the date of the Consolidated Statement of Financial Position, were comprised of the following at December 31, 2023 and 2022:

	2023	2022
Financial assets at year end:		
Cash and cash equivalents	$ 5,649,783	$ 712,445
Restricted cash	70,644	76,756
Accounts receivable	1,141,771	801,732
Grants receivable	1,649,265	1,274,880
Contributions receivable	88,258	--
Investments	21,394,755	18,568,769
Beneficial interest held in trusts	2,165,143	2,020,741
Total financial assets	32,159,619	23,455,323
Less amounts not available to be used within one year:		
Restricted cash not available for general expenditure	70,644	76,756
Net assets with donor restrictions	6,593,765	5,692,660
Less:		
Net assets with purpose restrictions to be met in less than a year	(1,515,563)	(1,133,668)
Donor-restricted endowment subject to spending policy rate and appropriation	(73,998)	(73,998)
Closely held securities	750,000	--
Board-designated - ERTC funds	4,261,566	--
Board-designated endowment	16,173,416	14,896,850
Less:		
Board-designated endowment annual spending policy rate and appropriation	(899,141)	(868,594)
Total amounts not available to be used within one year	25,360,689	18,590,006
Financial assets available to meet general expenditures over the next year	$ 6,798,930	$ 4,865,317

Endowment funds consist of donor-restricted endowments and funds designated by the Board to function as endowments. Income from donor-restricted endowments is restricted for specific purposes. The portion of endowment funds that are perpetual in nature are not available for general expenditure.

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NOTE 3 - LIQUIDITY AND AVAILABILITY (CONTINUED)

The Board-designated endowment is subject to an annual spending rate as determined by the Board. Although there is no intention to spend from the Board-designated endowment (other than amounts appropriated for general expenditure as part of the Board's annual budget approval and appropriation), these amounts could be made available if necessary.

As part of its liquidity management plan, the Organization also has a $1,500,000 revolving line of credit available to meet cash flow needs.

NOTE 4 - INVESTMENTS

Investments measured at fair value on a recurring basis, consisted of the following at December 31, 2023 and 2022:

	2023	2022	Fair Value Hierarchy
Mutual funds	$ 20,644,755	$ 18,568,769	Level 1
Closely held securities	750,000	--	Level 3
Total	$ 21,394,755	$ 18,568,769	

During 2023 and 2022, the Organization recognized $2,463,878 and $(4,596,536), respectively, of net gains and (losses) on investments. Of those amounts, $2,155,130 and $(4,768,167) were recognized as unrealized gains and (losses) on investments of equity securities held at December 31, 2023 and 2022, respectively.

Under the terms of the Organization's line of credit agreement (Note 7), the Organization has agreed not to pledge the mutual funds as security on any other debt.

The Organization's policy is to avail itself of a Board-approved percentage of investment income from mutual fund investments for operations with any remaining interest, dividends, or appreciation reinvested. The spending policy approved by the Board of Trustees is a percentage of the average total endowment value over the previous 12 quarters, with a 1% contingency margin with Board approval. In 2023 and 2022, the approved rate was 5.00%.

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NOTE 5 - BENEFICIAL INTEREST HELD IN TRUSTS

The Organization is the sole beneficiary of four funds that are administered by the New Hampshire Charitable Foundation (NHCF). Income from the funds is to provide assistance to children attending camp and for capital improvements to the camp, and to support the Early Supports and Services program based in the Stratham office. The fund's resolutions provide that distributions from the funds can be made at the discretion of the NHCF Board of Directors.

At December 31, 2023 and 2022, the fair market value of the funds, which approximates the present value of future benefits expected to be received, was $1,245,254 and $1,152,876, respectively.

In addition, the Organization has a split-interest in three charitable remainder trusts. The assets are held in trust by banks as permanent trustees of the trusts. The fair value of these beneficial interests is determined by applying the Organization's percentage interest to the fair value of the trust assets as reported by the trustee.

Trust	Percentage Interest	2023	2022
Greenleaf	100%	$ 353,987	$ 335,096
Spaulding	100%	324,126	300,889
Cogswell	50%	241,776	231,880
Total		$ 919,889	$ 867,865

Beneficial interest held in trusts is reported at fair value, which is estimated as the present value of expected future cash inflows on a recurring basis. As discussed in Note 2, the valuation technique used by the Organization is a Level 3 measure because there are no observable market transactions.

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NOTE 6 - PROPERTY AND EQUIPMENT, NET

Property and equipment, net was comprised of the following at December 31, 2023 and 2022:

	2023	2022
Land and land improvements	$ 958,884	$ 958,884
Buildings and improvements	11,072,089	10,995,856
Furniture, fixtures, and equipment	657,629	962,064
Vehicles	68,761	68,761
Software	465,730	503,924
Construction in progress	82,075	15,220
Assets held for sale (Camp Spaulding)	2,069,677	2,069,667
Subtotal	15,374,845	15,574,376
Less accumulated depreciation	(5,699,290)	(5,469,233)
Total	$ 9,675,555	$ 10,105,143

In March 2023, the Organization entered into a purchase and sales agreement to sell the Camp Spaulding asset held for sale. The sale is expected to close in 2024.

NOTE 7 - LINE OF CREDIT

The Organization has a $1,500,000 revolving line of credit agreement with a bank, which is payable on demand. The line is secured by a first lien on accounts receivable, double negative pledge on all investments of the borrower, and carries a variable rate of interest at the Wall Street Journal prime rate (8.5% at December 31, 2023), adjusted daily. At December 31, 2023 and 2022, there was no outstanding balance on this line of credit.

NOTE 8 - BONDS PAYABLE

During 2007, the New Hampshire Health and Education Facilities Authority (the "Authority") sold $5,540,000 of its Revenue Bonds, Child and Family Services Issue, Series 2007, and loaned the proceeds of the bonds to the Organization to refund its Series 1999 Series Bonds and to finance certain improvements to the Organization's facilities. The Series 2007 Bonds were issued with a variable interest rate determined on a weekly basis. Prior to issuing the Bonds, the Organization entered into an interest rate swap agreement (the "Swap Agreement") with Citizens Bank of NH (the "Counterparty") for the life of the bond issue to hedge the interest rate risk associated with the Series 2007 Bonds. The interest rate swap agreement requires the Organization to pay the Counterparty a rate of interest per annum equal to the product of (a) .68 multiplied by (b) the sum of Term SOFR, plus 2.75%".

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NOTE 8 - BONDS PAYABLE (CONTINUED)

Counterparty payments to the Organization were intended to offset the Organization's payments of variable rate interest to bondholders. Counterparty credit worthiness and market variability can impact the variable rates received and paid by the Organization, with the potential of increasing Organization's interest payments. As a result, the cost of the interest rate swap for 2023 and 2022 is added to interest expense in the Consolidated Statement of Functional Expenses. The bonds mature in 2038 and can be repaid at any time.

The Organization is required to include the fair value of the swap in the Consolidated Statement of Financial Position, and annual changes, if any, in the fair value of the swap in the Consolidated Statement of Activities. For example, during the bond's 30-year holding period, the annually calculated value of the swap will be reported as an asset if interest rates increase above those in effect on the date of the swap was entered into (and as an unrealized gain in the Consolidated Statement of Activities), which will generally be indicative that the net fixed rate the Organization is paying on the swap is below market expectations of rates during the remaining term of the swap. The swap will be reported as a liability (and as an unrealized loss in the Consolidated Statement of Activities) if interest rates decrease below those in effect on the date the swap was entered into, which will generally be indicative that the net fixed rate the Organization is paying on the swap is above market expectations of rates during the remaining term of the swap. The annual accounting adjustments of value changes in the swap transaction are non-cash recognition requirements, the net effect of which will be zero at the end of the bond's 30-year term. At December 31, 2023 and 2022, the Organization recorded the swap liability position of $380,838 and $399,935, respectively. During 2009, there occurred a downgrading of the credit rating of the Counterparty to the letter of credit reimbursement agreement, which triggered a mandatory tender of the Series 2007 Bonds in whole and a temporary conversion of one hundred percent of the principal amount to a bank purchase mode under the terms of said letter of credit reimbursement agreement. Since it became evident that the credit markets would not soon return to normalcy, the Organization elected to convert the Series 2007 Bonds from a weekly rate mode to a bank purchase mode. This new bank purchase mode created a rate period in which the Series 2007 Bonds bear interest at the tax adjusted bank purchase rate of 68% of the sum of the term secured overnight financing rate (SOFR) plus 275 basis points. The bank purchase mode commenced on July 31, 2009 and expired on July 31, 2014; however, the expiration date was extended by the Counterparty and the Organization had the option to convert back to the weekly rate mode. The Series 2007 Bond documents require the Organization to comply with certain financial covenants. As of December 31, 2023 and 2022, the Organization was in compliance with these covenants.

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NOTE 8 - BONDS PAYABLE (CONTINUED)

The following is a summary of future payments on the previously mentioned bonds payable:

Year	Amount
2024	$ 180,000
2025	195,000
2026	200,000
2027	205,000
2028	220,000
Thereafter	2,355,167
Total	$ 3,355,167

NOTE 9 - LEASES

The Organization rents property and equipment under non-cancelable operating lease agreements with monthly payments ranging from $1,430 to $4,500. The leases expire at various dates through May 2026.

While all agreements provide minimum lease payments, some include payments adjusted for inflation or variable common area maintenance charges. Variable payments are not determinable at the lease commencement and are not included in the measurement of lease assets and liabilities. The lease agreements do not include any material residual value guarantees or restrictive covenants.

The components of operating lease expense that are included in the Statement of Activities for the years ended December 31, 2023 and 2022 were as follows:

	2023	2022
Fixed lease cost	$ 213,799	$ 176,300
Variable lease cost	38,797	57,396
Short-term lease cost	–	14,000
Total lease cost	$ 252,596	$ 247,696

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NOTE 9 - LEASES (CONTINUED)

During the years ended December 31, 2023 and 2022, the Organization had the following cash and non-cash activities related to operating leases:

	2023	2022
Cash paid for amounts included in the measurement of lease liabilities:		
Operating cash flows for operating leases	$ 213,799	$ 176,600
Non-cash investing and financing activities:		
Lease assets obtained in exchange for lease liabilities:		
Operating leases	$ 168,666	$ 507,774

Weighted average lease term and discount rate at December 31, 2023 and 2022, were as follows:

	2023	2022
Weighted average remaining lease term (years)	1.86	2.14
Weighted average discount rate	1.36%	1.04%

Future payments due under operating leases as of December 31, 2023, were as follows for the years ending December 31:

Year	Amount
2024	$ 175,923
2025	102,400
2026	23,750
Total lease payments	302,073
Less imputed interest	4,243
Present value of lease liabilities	$ 297,830

NOTE 10 - REFUNDABLE ADVANCES

Refundable advances totaling $316,902 and $443,742 at December 31, 2023 and 2022, respectively, primarily include grant funds received in advance from the New Hampshire Department of Health and Human Services for community-based voluntary services and American Rescue Plan Act funds. Revenues will be recognized as the conditions of the grants are met.

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NOTE 11 - DEFERRED LOANS – NHHFA

Deferred loans at December 31, 2023 and 2022 were comprised of the following:

Note payable to the New Hampshire Housing and Finance Authority (NHHFA) dated June 7, 2005. The face amount of the note is $550,000, does not require the payment of interest, and is due in 30 years. The note is secured by real estate located in Dover, New Hampshire. In line with the regulatory agreement related to the note payable, the Organization has remitted to NHHFA funds to establish an operating and replacement reserve. The balance of this reserve is reported as restricted cash on the Consolidated Statement of Financial Position. The restricted cash balance related to this note as of December 31, 2023 and 2022 totaled $30,255 and $33,336, respectively.

Note payable to the NHHFA dated May 22, 2007. The face amount of the note is $700,000, does not require the payment of interest, and is due in 30 years. The note is secured by real estate located in Manchester, New Hampshire. In line with the regulatory agreement related to the note payable, the Organization has remitted to NHHFA funds to establish an operating and replacement reserve. The balance of this reserve is reported as restricted cash on the Consolidated Statement of Financial Position. The restricted cash balance as of December 31, 2023 and 2022 related to this note totaled $40,389 and $43,420, respectively.

NOTE 12 - ENDOWMENT FUNDS

TYPES OF FUNDS

The Organization's endowment consists of various individual funds established for a variety of purposes. The endowment includes both donor-restricted funds and funds designated by the Board of Trustees to function as endowments. As required by GAAP, net assets associated with endowment funds, including funds designated by the Board of Trustees to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions.

Board-Designated Endowment

As of December 31, 2023 and 2022, the Board of Trustees had designated $16,173,416 and $14,896,850, respectively, of net assets without donor restrictions as a general endowment fund to support the mission of the Organization.

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NOTE 12 - ENDOWMENT FUNDS (CONTINUED)

TYPES OF FUNDS (CONTINUED)

Donor-Designated Endowments

The Board of Trustees of the Organization has interpreted the Uniform Prudent Management of Institutional Funds Act (UPMIFA) as requiring the preservation of the fair value of the original gift as of the gift date for donor-restricted perpetual endowment funds, absent explicit donor stipulations to the contrary. As a result of this interpretation, the Organization classifies as perpetually restricted net assets (a) the original value of gifts donated to the endowment, (b) the original value of subsequent gifts to the endowment, and (c) accumulations to the endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added. The remaining portion of the donor-restricted endowment fund that is not classified as perpetually restricted is classified as net assets with donor restrictions until those amounts are appropriated for expenditure by the Organization in a manner consistent with the standard of prudence prescribed by UPMIFA. In accordance with UPMIFA, the Organization considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds: (1) the duration and preservation of the various funds, (2) the purposes of the donor-restricted endowment funds, (3) general economic conditions, (4) the possible effect of inflation and deflation, (5) the expected total return from income and the appreciation of investments, (6) other resources of the Organization, and (7) the Organization's investment policies.

FUNDS WITH DEFICIENCIES

The Organization considers a fund to be underwater if the fair value of the fund is less than the sum of (a) the original value of initial and subsequent gift amounts donated to the fund, and (b) any accumulations to the fund that are required to be maintained in perpetuity in accordance with the direction of the applicable donor gift instrument. The Organization complies with UPMIFA and has interpreted UPMIFA to permit spending from underwater funds in accordance with prudent measures required under the law. The Organization had no underwater endowment funds at December 31, 2023 or 2022.

INVESTMENT POLICY

The Organization has adopted an investment and spending policy to ensure a total return (income plus capital change) necessary to preserve and enhance the principal of the fund and, at the same time, provide a dependable source of support for current operations and programs. The withdrawal from endowment funds in support of current operations is expected to remain a constant percentage of the endowment funds, adjusted for new gifts to the endowment fund.

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NOTE 12 - ENDOWMENT FUNDS (CONTINUED)

INVESTMENT POLICY (CONTINUED)

In recognition of the prudence required of fiduciaries, reasonable diversification is sought where possible. Experience has shown financial markets and inflation rates are cyclical and, therefore, control of volatility will be achieved through investment styles. Asset allocation parameters have been developed for various funds within the structure, based on investment objectives, liquidity needs, and time horizon for intended use.

Measurement of investment performance against policy objectives will be computed on a total return basis, net of management fees and transaction costs. Total return is defined as dividend or interest income plus realized and unrealized capital appreciation or depreciation at fair market value.

SPENDING POLICY

The Organization's spending policy rate is a percentage of the average total endowment value over the trailing 12 quarters with a 1% contingency margin with Board approval. This includes interest and dividends paid out to the Organization. In 2023 and 2022, the approved rate was 5.00%.

CHANGES IN ENDOWMENT NET ASSETS

The net asset composition of endowment net assets as of December 31, 2023 and changes in endowment net assets for the year ended December 31, 2023 were as follows:

		With Donor Restrictions				Total
	Without Donor Restrictions	Purpose Restricted	Cumulative Appreciation	Perpetually Restricted	Total	Endowment Net Assets
Endowment net assets, beginning of year	$ 14,896,850	$ 1,133,668	$ 788,401	$ 1,749,850	$ 3,671,919	$ 18,568,769
Contributions	--	--	--	34,963	34,963	34,963
Appropriations from endowment	(868,594)	--	(80,643)	--	(80,643)	(949,237)
Temporary appropriation for purpose-restricted net assets	(381,895)	381,895	--	--	381,895	--
Investment income, net	2,527,055	--	420,488	--	420,488	2,947,543
Endowment net assets, end of year	$ 16,173,416	$ 1,515,563	$ 1,128,246	$ 1,784,813	$ 4,428,622	$ 20,602,038

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NOTE 12 - ENDOWMENT FUNDS (CONTINUED)

CHANGES IN ENDOWMENT NET ASSETS (CONTINUED)

The net asset composition of endowment net assets as of December 31, 2022 and changes in endowment net assets for the year ended December 31, 2022 were as follows:

	Without Donor Restrictions	With Donor Restrictions				Total Endowment Net Assets
		Purpose Restricted	Cumulative Appreciation	Perpetually Restricted	Total	
Endowment net assets, beginning of year	$ 18,842,135	$ 1,678,535	$ 1,327,161	$ 1,678,601	$ 4,684,297	$ 23,526,432
Contributions	--	--	--	71,249	71,249	71,249
Appropriations from endowment	(842,559)	--	(89,703)	--	(89,703)	(932,262)
Temporary appropriation for purpose-restricted net assets	544,867	(544,867)	--	--	(544,867)	--
Investment loss, net	(3,647,593)	--	(449,057)	--	(449,057)	(4,096,650)
Endowment net assets, end of year	$ 14,896,850	$ 1,133,668	$ 788,401	$ 1,749,850	$ 3,671,919	$ 18,568,769

NOTE 13 - NET ASSETS

NET ASSETS WITHOUT DONOR RESTRICTIONS

Net assets without donor restrictions were comprised of the following at December 31, 2023 and 2022:

	2023	2022
Undesignated net assets	$ 8,739,373	$ 6,588,866
Board-designated ERTC funds	4,261,566	--
Board-designated endowment	16,173,416	14,896,850
Total	$ 29,174,355	$ 21,485,716

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NOTE 13 - NET ASSETS (CONTINUED)

NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions were comprised of the following at December 31, 2023 and 2022:

	2023	2022
Subject to expenditure for specified purpose:		
Camp	$ 7,689	$ 59,441
Family support	124,891	77,825
Family resource center	341,896	236,029
Homecare	231,618	151,410
Other projects	104,158	12,544
Runaway and homeless youth	698,184	581,804
The Children's Place	7,127	14,615
	1,515,563	1,133,668
Accumulated earnings restricted by donors for:		
General operations	189,575	158,281
Camp operations	386,004	252,769
Other purposes	552,667	377,351
	1,128,246	788,401
Original gift restricted by donors for:		
General operations	136,529	136,532
Camp operations	581,042	548,183
Other purposes	1,067,242	1,065,135
	1,784,813	1,749,850
Not subject to spending policy or appropriation:		
Beneficial interest in trusts	2,165,143	2,020,741
Total	$ 6,593,765	$ 5,692,660

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NOTE 13 - NET ASSETS (CONTINUED)

NET ASSETS WITH DONOR RESTRICTIONS (CONTINUED)

Net assets were released from donor restrictions by incurring expenses satisfying the restricted purpose or by occurrence of the passage of time or other events specified by the donors as follows for the years ended December 31, 2023 and 2022:

	2023	2022
Satisfaction of purpose restrictions:		
Camp	$ 66,451	$ 46,947
Runaway and homeless youth	2,450,535	1,918,666
Family support	181,115	233,742
Homecare	456,292	339,340
Family resource center	158,981	234,362
Other projects	143,893	150,258
The Children's Place	81,205	42,806
	3,538,472	2,966,121
Restricted purpose spending-rate distributions and appropriations:		
General operations	17,039	15,259
Other purposes	63,604	74,444
	80,643	89,703
Total	$ 3,619,115	$ 3,055,824

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NOTE 14 - CONTRIBUTED NONFINANCIAL ASSETS

The Organization received the following contributions of nonfinancial assets for the years ended December 31, 2023 and 2022:

	Revenue Recognized		Utilization in	Valuation Techniques
	2023	2022	Programs/Activities	and Inputs
Food	$ 44,631	$ 27,599	Family Preservation & Strenthening, Homecare, and Homeless Youth & Young Adults.	U.S. retail prices of identical products using pricing data under a 'like-kind' methodology considering the good's conditions and utility for use at the time of contribution.
Supplies	5,399	11,751	Administration, Family Preservation & Strenthening, and Homeless Youth & Young Adults.	U.S. retail prices of identical products using pricing data under a 'like-kind' methodology considering the good's conditions and utility for use at the time of contribution.
Storage	--	297	Homeless Youth & Young Adults	Valued at the estimated fair value based on current rates for similar storage space.
Toys	2,617	777	Family Preservation & Strenthening	U.S. retail prices of identical products using pricing data under a 'like-kind' methodology considering the good's conditions and utility for use at the time of contribution.
Services	10,841	4,057	Family Preservation & Strenthening	Contributed professional services are valued at the estimated fair value based on current rates for similar services.
Items for assistance to individuals	14,248	4,055	Early Childhood & Family Support and Homeless Youth & Young Adults	U.S. retail prices of identical products using pricing data under a 'like-kind' methodology considering the good's conditions and utility for use at the time of contribution.
Total	$ 77,736	$ 48,536		

There were no associated donor restrictions with the above contributed nonfinancial assets.

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NOTE 15 - EMPLOYEE RETENTION TAX CREDIT (ERTC)

The Employee Retention Tax Credit (ERTC), established as part of the Coronavirus Aid, Relief and Economic Security Act (CARES Act), enacted March 27, 2020, amended by the Consolidated Appropriations Act, 2021 (CAA), enacted on December 27, 2020, and further amended by the American Rescue Plan Act (ARPA), enacted March 11, 2021, provides for financial relief to eligible employers through refundable tax credits. The ERTC is a refundable tax credit against certain employment taxes equal to 70% of eligible wages and certain health insurance benefits up to $28,000 per employee and $10,000 per quarter through September 30, 2021. Eligible employers can get immediate access to the credit by reducing employment tax deposits they are otherwise required to make. Employers are eligible if they operate a trade or business during January 1, 2021 through September 30, 2021 and experience either: 1) full or partial suspension of the operation of their trade or business during this period because of governmental orders limiting commerce, travel or group meetings due to COVID-19, or 2) decline in gross receipts in a calendar quarter in 2021 where the gross receipts of that calendar quarter are less than 80% of the gross receipts in the same calendar quarter in 2019. For the year ended December 31, 2023, the Organization recognized $4,736,776 of ERTC as income, net of $680,912 of applicable expenses.

NOTE 16 - ASSISTANCE TO INDIVIDUALS

Assistance to individuals was comprised of the following for the years ended December 31, 2023 and 2022:

	2023	2022
Payment to parents of foster children	$ 13,317	$ 79,831
Housing assistance to youth at risk of homelessness	388,607	259,436
Gift cards provided to families during holiday season	45,000	50,000
Food for at risk youth	100,322	36,872
In-kind assistances	77,736	48,536
Other assistance such as medical, childcare, transportation, and family activities	720,794	676,130
Total	$ 1,345,776	$ 1,150,805

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NOTE 17 - DEFINED CONTRIBUTION PLAN

The Organization maintains a 403(b) Thrift Plan (the Plan). The Plan is a defined contribution plan that all eligible employees may immediately make elective participant contributions to upon hire. A pretax voluntary contribution is permitted by employees up to limits imposed by the IRC and other limitations specified in the Plan. Contributions made to the Plan by the Organization for the years ended December 31, 2023 and 2022 totaled $160,453 and $121,399, respectively.

NOTE 18 - RELATED PARTY TRANSACTIONS

The Organization procures a portion of their legal services from a local law firm that employs an attorney who also serves on the Organization's Board of Trustees. The attorney Board member does not personally perform the legal services. For the years ended December 31, 2023 and 2022, the total legal expense paid to related parties was $55,702 and $10,190, respectively.

NOTE 19 - CONCENTRATION OF RISK

The majority of the Organization's grants are received from agencies of the State of New Hampshire. As such, the Organization's ability to generate resources via grants is dependent upon the economic health of that area and of the State of New Hampshire. An economic downturn could cause a decrease in grants that coincides with an increase in demand for the Organization's services.

NOTE 20 - SUBSEQUENT EVENTS

Subsequent events have been evaluated through May 20, 2024, the date the consolidated financial statements were available to be issued.

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WAYPOINT

CONSOLIDATED SCHEDULE OF OPERATING EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 2023

	Family Preservation & Strengthening	Early Childhood & Family Support	Homeless Youth & Young Adults	Homecare	Advocacy	Camp	Total Program Services	Management and General	Fundraising	2023 Total
Personnel Expenses:										
Salaries and wages	$ 3,276,308	$ 3,406,925	$ 1,727,259	$ 1,081,739	$ 157,419	$ –	$ 9,649,650	$ 1,634,614	$ 309,418	$ 11,593,682
Employee benefits	668,164	636,824	314,704	99,446	4,388	–	1,723,526	176,591	37,744	1,937,861
Retirement plan	44,366	47,304	16,143	8,358	3,353	–	119,524	35,604	5,325	160,453
Payroll taxes and other	333,426	348,753	172,439	123,588	12,193	–	990,399	127,664	23,934	1,141,997
Subtotal personnel expense	4,322,264	4,439,806	2,230,545	1,313,131	177,353	–	12,483,099	1,974,473	376,421	14,833,993
Professional fees:										
Accounting	–	–	75	–	–	–	75	45,570	–	45,645
Legal	–	–	–	–	–	6,784	6,784	70,873	–	77,657
Other professional fees	90,150	190,276	175,231	5,532	17,000	–	418,189	406,788	52,603	877,580
Subtotal professional fees	90,150	190,276	175,306	5,532	17,000	6,784	425,048	523,231	52,603	1,000,882
Assistance to individuals	281,676	389,772	628,737	37	3	–	1,300,225	551	45,000	1,345,776
Communications	68,431	53,962	49,394	18,090	1,629	57	191,563	47,124	6,242	244,929
Conferences, conventions, meetings, and trainings	8,098	44,336	2,246	271	2,143	67,907	125,001	39,610	8,667	173,278
Depreciation	75,495	99,794	176,047	12,968	4,502	542	369,348	198,363	6,964	574,675
Insurance	32,624	34,202	29,342	12,176	964	4,865	118,173	63,652	2,282	184,107
Interest	59,073	78,086	134,755	10,147	3,523	424	286,008	40,704	5,449	332,161
Membership dues	6,075	10,961	5,930	6,023	665	–	29,654	16,084	–	45,738
Miscellaneous	9,227	20,721	10,471	12,032	20	–	52,471	113,285	5,414	171,170
Occupancy	212,555	133,492	457,554	12,513	3,775	7,424	827,313	70,603	12,193	910,109
Printing and publications	2,055	8,203	2,465	1,624	55	–	14,402	48,572	59,996	122,970
Equipment rental and maintenance	92,750	56,765	36,234	421	34	429	186,633	212,005	1,127	401,765
Supplies	25,468	35,629	62,830	3,362	1,275	–	149,564	12,586	2,190	164,340
Travel	230,601	144,066	54,165	26,151	34	–	455,219	22,146	1,138	478,503
Total	$ 5,456,544	$ 5,765,071	$ 4,058,021	$ 1,434,678	$ 212,975	$ 88,432	$ 17,015,721	$ 3,382,989	$ 585,666	$ 20,984,396

See independent auditors' report.

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WAYPOINT

CONSOLIDATED SCHEDULE OF OPERATING EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 2022

	Family Preservation & Strengthening	Early Childhood & Family Support	Homeless Youth & Young Adults	Homecare	Advocacy	Camp	Total Program Services	Management and General	Fundraising	2022 Total
Personnel Expenses:										
Salaries and wages	$ 2,933,799	$ 3,187,125	$ 1,135,714	$ 1,385,070	$ 127,338	$ –	$ 8,769,046	$ 1,441,503	$ 508,864	$ 10,719,413
Employee benefits	505,006	481,385	174,838	158,266	4,709	–	1,324,206	156,284	44,810	1,525,300
Retirement plan	29,154	39,168	11,168	10,704	1,840	–	92,034	20,467	8,898	121,399
Payroll taxes and other	298,323	323,621	107,985	134,635	9,505	–	874,069	112,764	39,253	1,026,086
Subtotal personnel expense	3,766,284	4,031,299	1,429,705	1,688,675	143,392	–	11,059,355	1,731,018	601,825	13,392,198
Professional fees:										
Accounting	–	–	75	–	–	–	75	51,055	–	51,130
Legal	–	1,656	–	–	–	388	2,044	16,617	–	18,661
Other professional fees	35,039	222,122	339,713	9,155	42,550	–	648,579	370,654	160,215	1,179,448
Subtotal professional fees	35,039	223,778	339,788	9,155	42,550	388	650,698	438,326	160,215	1,249,239
Assistance to individuals	324,486	374,691	400,529	349	–	16	1,100,071	717	50,017	1,150,805
Communications	63,406	51,845	50,477	17,468	1,136	12	184,344	32,955	12,811	230,090
Conferences, conventions, meetings, and trainings	20,785	48,452	6,601	1,868	8,183	46,929	132,818	49,868	2,628	185,314
Depreciation	59,324	100,813	110,895	45,113	1,579	–	320,715	170,620	8,600	499,935
Insurance	30,297	22,469	22,800	3,272	713	–	79,551	15,794	2,532	97,877
Interest	44,070	74,891	67,022	35,742	1,173	–	222,898	22,105	6,388	251,392
Membership dues	825	7,870	13,655	5,704	50	–	28,105	26,169	2,437	56,711
Miscellaneous	9,455	21,098	6,366	1,156	–	–	38,075	34,413	8,675	81,163
Occupancy	242,992	148,368	285,994	50,155	1,259	4,229	732,997	54,952	11,895	799,844
Printing and publications	4,873	17,729	4,445	267	2,373	–	29,688	29,232	67,493	126,413
Equipment rental and maintenance	79,252	26,162	50,974	1,341	37	–	157,766	174,987	8,806	341,559
Supplies	23,140	62,896	50,656	6,969	134	77	143,892	12,963	2,740	159,595
Travel	201,207	98,119	39,421	41,827	190	–	380,764	22,720	1,757	405,241
Total	$ 4,905,435	$ 5,310,480	$ 2,879,321	$ 1,912,081	$ 202,769	$ 51,651	$ 15,261,737	$ 2,816,820	$ 940,819	$ 19,027,376

See independent auditors' report.

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INDEPENDENT AUDITORS' 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*

To the Board of Trustees
Waypoint

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 consolidated financial statements of Waypoint, (the Organization), which comprise the consolidated statement of financial position as of December 31, 2023, and the related consolidated statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the consolidated financial statements, and have issued our report thereon dated May 20, 2024.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the consolidated financial statements, we considered the Organization'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 the Organization's internal control. Accordingly, we do not express an opinion on the effectiveness of the Organization'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.

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Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Organization'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 Organization'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 Organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Marcum LLP

Merrimack, NH
May 20, 2024

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INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM; REPORT ON INTERNAL CONTROL OVER COMPLIANCE; AND REPORT ON SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS REQUIRED BY THE UNIFORM GUIDANCE

To the Board of Trustees
Waypoint

Report on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Waypoint's (the Organization) 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 the Organization's major federal programs for the year ended December 31, 2023. The Organization's major federal programs are identified in the summary of auditors' results section of the accompanying Schedule of Findings and Questioned Costs.

In our opinion, Waypoint complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended December 31, 2023.

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 (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States *(Government Auditing Standards);* 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 Auditors' Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of the Organization 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 the Organization's compliance with the compliance requirements referred to above.

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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 the Organization's federal programs.

Auditors' 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 the Organization'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 GAAS, *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 the Organization's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, *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 the Organization'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 the Organization'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 the Organization'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

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compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or 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 Auditors' 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.

Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

We have audited the consolidated financial statements of Waypoint as of and for the year ended December 31, 2023, and have issued our report thereon dated May 20, 2024, which contained an unmodified opinion on those consolidated financial statements. Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The accompanying Schedule of Expenditures of Federal Awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the consolidated 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 consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated 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 consolidated financial statements as a whole.

Marcum LLP

Merrimack, NH
May 20, 2024

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WAYPOINT

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

FOR THE YEAR ENDED DECEMBER 31, 2023

Federal Agency Cluster Pass through Agency Program Title	Federal AL Number	Pass Through Identifying Number	Federal Expenditures	Passed Through to Subrecipient
U.S. Department of Housing and Urban Development				
CDBG - Entitlement Grants Cluster				
Passed Through the City of Manchester				
Community Development Block Grants/Entitlement Grants	14.218	211023-M	$ 4,000	$ -
Passed Through the City of Rochester				
Community Development Block Grants/Entitlement Grants	14.218	Unknown	13,500	-
Total Community Development Block Grants/Entitlement Grants			17,500	-
Total CDBG - Entitlement Grants Cluster			17,500	-
Passed Through the City of Manchester				
Emergency Solutions Grant Program	14.231	211423	20,000	-
Emergency Solutions Grant Program	14.231	611024	44,500	-
Total Emergency Solutions Grant Program			64,500	-
Direct Federal Program				
Economic Development Initiative, Community Project Funding and Miscellaneous Grants	14.251	N/A	685,714	-
Direct Federal Program				
Continuum of Care Program	14.267	N/A	99,941	-
Passed Through the State of New Hampshire				
Continuum of Care Program	14.267	05-95-42-423010-7927	212,881	-
Continuum of Care Program	14.267	05-95-42-423010-79270000	172,336	-
Total Continuum of Care Program			485,158	-
Direct Federal Program				
Youth Homelessness Demonstration Program	14.276	N/A	331,696	43,745
Passed Through the State of New Hampshire				
Youth Homelessness Demonstration Program	14.276	05-95-42-423010-79270000	124,529	-
Total Youth Homelessness Demonstration Program			456,225	43,745
Total U.S. Department of Housing and Urban Development			1,709,097	43,745
U.S. Department of Justice				
Passed Through the NH Department of Justice				
Children of Incarcerated Parents	16.831	2021FCC01	136,176	33,190
Passed Through the Manchester Police Department				
Comprehensive Opioid, Stimulant, and Other Substances Use Program	16.838	Unknown	8,642	-
Total U.S. Department of Justice			144,818	33,190
U.S. Department of Treasury				
Passed Through the City of Manchester				
COVID-19 Coronavirus Relief Fund	21.019	611321	43,003	-
Passed Through the State of New Hampshire				
COVID-19 Coronavirus State and Local Fiscal Recovery Funds	21.027	Unknown	400,000	-
Passed Through the County of Rockingham				
COVID-19 Coronavirus State and Local Fiscal Recovery Funds	21.027	Unknown	10,000	-
Passed Through the County of Merrimack				
COVID-19 Coronavirus State and Local Fiscal Recovery Funds	21.027	Unknown	16,548	-
Total COVID-19 Coronavirus State and Local Fiscal Recovery Funds			426,548	-
Total U.S. Department of Treasury			469,551	-
U.S. Department of Small Business Administration				
Passed Through Merrimack Valley Day Care				
COVID-19 Disaster Assistance Loans	59.008	Unknown	8,818	-
Total U.S. Department of Small Business Administration			8,818	-
U.S. Department of Education				
Passed Through the City of Manchester				
Education for Homeless Children and Youth	84.196A	02370156-00	1,500	-
Education for Homeless Children and Youth	84.196A	2470149	500	-
Total Education for Homeless Children and Youth			2,000	-
Passed Through NH Department of Education				
Education Stabilization Fund	84.425W	06-56-56-562010-24920000-102-500731	178,627	109,934
Total U.S. Department of Education			180,627	109,934

The accompanying notes are an integral part of this schedule.

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WAYPOINT

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS (CONTINUED)

FOR THE YEAR ENDED DECEMBER 31, 2023

Federal Agency Cluster Pass through Agency Program Title	Federal AL Number	Pass Through Identifying Number	Federal Expenditures	Passed Through to Subrecipient
U.S. Department of Health and Human Services				
Aging Cluster				
Passed Through the NH Department of Health and Human Services				
Special Programs for the Aging, Title III, Part B, Grants for Supportive Services and Senior Centers	93.044	05-95-48-481010-9255	44,349	-
Total Aging Cluster			44,349	-
Passed Through the City of Manchester				
Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances (SED)	93.104	6H79SM082210-04M002	155,025	14,435
Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances (SED)	93.104	5H79SM082210-02	11,293	-
Total Comprehensive Community mental Health Services for Children with Serious Emotional Disturbances (SED)			166,318	14,435
Passed Through New Hampshire Children's Trust				
Injury Prevention and Control, Community-Based Programs	93.136	SS-2022-DEHS-01-NEWHA-01-803	72,789	-
Passed Through New Hampshire Children's Trust				
Health Department Response to Public Health or Healthcare Crisis	93.391	SS-2022-DEHS-01-NEWHA-01-803	70,713	-
Passed Through the NH Division of Community and Public Health				
COVID-19 Health Department Response to Public Health or Healthcare Crisis	93.391	05-95-09-901010-5771	172,835	-
Total Health Department Response to Public Health or Healthcare Crisis			243,548	-
Direct Federal Program				
Transitional Living for Homeless Youth	93.550	N/A	479,568	-
Passed Through the NH Division of DCYF				
MaryLee Allen Promoting Safe and Stable Families Program	93.556	05-095-042-421010-29730000-102-500734-42107306	95,213	-
Passed Through New Hampshire Children's Trust				
MaryLee Allen Promoting Safe and Stable Families Program	93.556	SS-2022-DEHS-01-NEWHA-01-803	20,959	-
Total MaryLee Allen Promoting Safe and Stable Families Program			116,172	-
Direct Federal Program				
Education and Prevention Grants to Reduce Sexual Abuse of Runaway, Homeless and Street Youth	93.557	N/A	296,642	-
Passed Through the NH Division of DCYF				
Temporary Assistance for Needy Families	93.558	05-095-045-450010-61460000-502-500891-45030206	496,534	-
Passed Through the NH Division of Economic Housing Stability				
Temporary Assistance for Needy Families	93.558	05-95-42-450010-61460000	75,000	-
Total Temporary Assistance for Needy Families			571,534	-
Passed Through New Hampshire Children's Trust				
Community Based Child Abuse Prevention Grant	93.590	2001NHBCAP	19,204	-
COVID-19 Community Based Child Abuse Prevention Grant	93.590	2001-NHBCC6	20,075	-
Total Community Based Child Abuse Prevention Grant			39,279	-
Direct Federal Program				
Basic Center Grant	93.623	N/A	171,676	-
Passed Through the NH Division of DCYF				
Stephanie Tubbs Jones Child Welfare Services Program	93.645	05-095-042-421010-29680000-102-500734-42106802	12,150	-
Passed Through Amoskeag Health				
Adoption Opportunities	93.652	05-95-9090-902010-7047	1,243	-
Passed Through the NH Division of DCYF				
Foster Care Title IV-E	93.658	05-95-042-421010-2958	126,689	-
Passed Through the NH Division of Community Based Care				
Social Services Block Grant	93.667	05-95-93-930010-7858	164,249	-
Passed Through the NH Division of DCYF				
Social Services Block Grant	93.667	05-095-042-421010-29660000-102-500734-42106603	226,370	30,000
Passed Through the NH Department of Health and Human Services				
Social Services Block Grant	93.667	05-95-48-481010-9255	462,622	-
Passed Through the NH Division of Long Term Supports and Services				
Social Services Block Grant	93.667	05-95-93-930010-7858	171,386	-
Total Social Services Block Grant			1,024,627	30,000
Passed Through the NH Division of Community and Public Health				
Maternal, Infant and Early Childhood Home Visiting Grant	93.870	05-95-90-902010-2451	103,515	-
Maternal, Infant and Early Childhood Home Visiting Grant	93.870	05-95-90-902010-5896	940,768	-
Total Maternal, Infant and Early Childhood Home Visiting Grant			1,044,283	-
Passed Through the NH Division Long Term Supports and Services				
Maternal and Child Health Services Block Grant to the States	93.994	05-95-93-930010-5191	19,237	-
Passed Through the NH Division of DCYF				
Maternal and Child Health Services Block Grant to the States	93.994	05-095-090-902010-51900000-102-500731-90004009	15,740	-
Total Maternal and Child Health Services Block Grant			34,977	-
Medicaid Cluster				
Passed Through the NH Division of Long Term Supports and Services				
Medical Assistance Program	93.778	Unknown	155,913	-
Total Medicaid Cluster			155,913	-
Total U.S. Department of Health and Human Services			4,601,757	44,435
Total Federal Expenditures			$ 7,114,668	$ 231,304

The accompanying notes are an integral part of this schedule.

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WAYPOINT

NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

FOR THE YEAR ENDED DECEMBER 31, 2023

NOTE 1 - BASIS OF PRESENTATION

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal award activity of Waypoint, (the Organization) under programs of the federal government for the year ended December 31, 2023. The information in the Schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* (CFR) 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 Waypoint, it is not intended to and does not present the financial position, changes in net assets, or cash flows of Waypoint.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited to reimbursement.

NOTE 3 - DE MINIMIS COST RATE

The Organization has elected not to use the 10-percent de minimis indirect cost rate as allowed under the Uniform Guidance.

NOTE 4 - DONATED PERSONAL PROTECTIVE EQUIPMENT (PPE) (UNAUDITED)

During the year ended December 31, 2023, the Organization did not receive donated PPE from federal sources.

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SCHEDULE OF FINDINGS AND QUESTIONED COSTS

FOR THE YEAR ENDED DECEMBER 31, 2023

SECTION I - SUMMARY OF AUDITORS' RESULTS

FINANCIAL STATEMENTS

Type of auditors' report issued on whether the financial statements audited were prepared in accordance with GAAP:	*Unmodified*
Internal control over financial reporting:	
Material weakness(es) identified?	___ Yes ✓ No
Significant deficiency(ies) identified?	___ Yes ✓ None reported
Noncompliance material to financial statements noted?	___ Yes ✓ No

FEDERAL AWARDS

Internal control over major federal programs:	
Material weakness(es) identified?	___ Yes ✓ No
Significant deficiency(ies) identified?	___ Yes ✓ None reported
Type of auditors' 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 ✓ No

Identification of major federal programs:

NAME OF FEDERAL PROGRAM OR CLUSTER	*ASSISTANCE LISTING NUMBER(S)*
COVID-19 Coronavirus State and Local Fiscal Recovery Funds	21.027
Maternal, Infant, and Early Childhood Home Visiting Grant	93.870

Dollar threshold used to distinguish between type A and type B programs:	$750,000
Auditee qualified as low-risk auditee?	✓ Yes ___ No

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SCHEDULE OF FINDINGS AND QUESTIONED COSTS (CONTINUED)

FOR THE YEAR ENDED DECEMBER 31, 2023

SECTION II - FINANCIAL STATEMENT FINDINGS

None.

SECTION III - FEDERAL AWARDS FINDINGS AND QUESTIONED COSTS

None.

SECTION IV - SCHEDULE OF PRIOR YEAR FINDINGS

There were no findings in the prior year.

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Waypoint Trustees
2024

Janet Ackerman

Melissa Biron, Treasurer

William Conrad

Helen Crowe

Rob Dapice

Jane E. Gile, *Secretary*

Emily Hammond

Marc Lubelczyk

Marilyn T. Mahoney

Holly P. Mintz

Zach Palmer

Mark C. Rouvalis, *Chair*

Jennifer Stebbins, *Vice Chair*

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Borja Alvarez de Toledo, M.Ed.

[redacted]

Professional Profile

- A seasoned leader with more than 18 years of senior level non-profit management experience.
- Strong business acumen with emphasis on developing processes to ensure the alignment of strategy, operations, and outcomes with a strength based approach to leadership development.
- Collaborative leader using systemic and strategic framework in program development, supervision and conflict resolution.

Professional Experience

Waypoint, ***formerly Child and Family Services of New Hampshire***
Manchester, NH — December 2013- Present

~ President and CEO

- Responsible for program planning and development, insuring that Waypoint meets the community needs.
- Advance the public profile of Waypoint by developing innovative approaches and building productive relationships with government, regional and national constituencies.
- Acts as advisor to the Board of Directors and maintains relationships with the regional Boards
- Responsible for all aspects of financial planning, sustainability and oversight of Waypoint's assets
- Work with Development staff and Board of Directors to design and implement all fundraising activities, including cultivation and solicitation of key individuals, foundations and corporations

Riverside Community Care
Dedham, MA — 2009- 2013

~ Division Director, Child and Family Services

- Responsible for strategic vision, planning and implementation of the programmatic, operational and financial sustainability of a $17M division with more than 300 employees.
- In partnership with The Guidance Center, Inc.'s board of directors, played leadership role in successfully merging with Riverside Community Care, through a process that involved strategic planning, analysis and selection of a viable partner.
- Provide supervision to managers using a strength based approach and a collaborative coaching model to leadership development.

The Guidance Center, Inc.
Cambridge, MA — 1998 - 2009

~ Chief Operating Officer — 2007 - 2009

- Hired initially as Director of an intensive home-based family program and through successive promotions became responsible for all operations in the organization.
- Responsible for supervision of Division Directors, strategic planning and development of new initiatives.
- Developed strategic relationships with state and local funders, and partnered with community agencies to support the healthy growth of children and families.

Private Practice in Psychotherapy and Clinical Consultation
Madrid, Spain — 1992 - 1998

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Universidad Pontificia de Comillas
Madrid, Spain 1991 - 1998

~Adjunct Faculty

- Taught graduate level courses in Family and Couples Therapy program
- Practicum program supervisor: Supervised first year Master's Degree students through live supervision in the treatment of multi-problem families.

Centro Médico-Psicopedagógico
Madrid, Spain 1994 - 1997

~Clinical Coordinator/Director of Training.

- Member of a multi-disciplinary team that provided assessment and treatment to families victims of terrorism and had developed Post Traumatic Stress Disorder.

ITAD (Institute for Alcohol and Drug Treatment),
Madrid, Spain 1991- 1994

~ Senior Drug and Alcohol Counselor, Drug and Alcohol Program

- Provided evaluation and treatment for chemically dependent adults and their families.

~ Senior Family Therapist, Couples and Family Therapy Program

- Worked as a family therapist in the evaluation and treatment of adolescents and families.

Charles River Health Management
Boston, MA 1989 - 1991

~ Senior Family Therapist, Home Based Family Treatment Program.

Education

Graduate Certificate of Business
University of Massachusetts, Lowell, 2000.
Master's Degree in Education
Counseling Psychology Program. Boston University, 1989.
B.A. in Clinical Psychology
Universidad Pontificia de Comillas, Madrid, Spain. 1988

Publications

2009 Ayers,S & Alvarez de Toledo, B. Community Based Mental Health with Children and Families. In A. R. Roberts (Ed.) ,*Social Worker's Desk Reference* (2nd ed.),New York: Oxford University Press, 2009

2006 *Topical Discussion: Advancing Community-Based Clinical Practice and Research: Learning in the Field.* Presented at the 19th Annual Research Conference: A System of Care for Children's Mental Health: Expanding the Research Base, February 2006, Tampa, FL.

2001 Lyman, D.R.; Siegel, R.; Alvarez de Toledo, B.; Ayers, S.; Mikula, J. *How to be little and still think big: Creating a grass roots, evidence based system of care.* Symposium presented at the 14th Annual Research Conference in Children's Mental Health, Research and Training Center for Children's Mental Health, February 2001, Tampa, FL.

2006 Lyman, D.R., B. Alvarez de Toledo, *The Ecology of Intensive community based Intervention.* In Lightburn, A., P. Sessions. Handbook of Community Based Clinical Practice. Oxford University Press, 2006, England.

2001 Lyman, D.R., B. Alvarez de Toledo (2001) *Risk factors and treatment outcomes in a strategic intensive family program.* In Newman, .C, C. Liberton, K. Kutash and R. Friedman, (Eds.) A System of Care for Children's Mental Health: Expanding the Research Base (2002), pp. 55-58. Research and Training Center for Children's Mental Health, University of South Florida, Tampa, FL.

1994-98 Research papers and professional presentations in peer reviewed journals in Spain

Languages

Fluent in Spanish, French and Italian.

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COLLEEN M. IVES

[redacted]

CHIEF OPERATING OFFICER

Proactive executive with a formidable record of driving systemic change and business expansion. Nimble administrator with strategic planning, business process improvement, cost controls and performance management experience. Collaborative leader with inspirational and decisive management style who achieves exceptional, rather than expected, results. Catalyst for open communications towards a climate of learning to benefit company and individuals.

PROFESSIONAL EXPERIENCE

WAYPOINT, Manchester, NH • 2018-Present
Statewide private nonprofit that works to advance the well-being of children and families through an array of community-based services.

Chief Operating Officer
- Oversees all aspects of program delivery including; fiscal and personnel management, quality assurance and program development

ROCKPORT MORTGAGE CORPORATION, Gloucester, MA • 2008-2017
Leading national lender of US Housing & Urban Development insured commercial loans in healthcare, multifamily and affordable housing sectors.

Vice President, Operations & Quality Control
- Report to principals with overall responsibility for achieving strategic objectives through oversight of the day-to-day operations of five multi-disciplinary underwriting teams by providing support at the transactional level as well as in the development of procedures and operating practices to match RMC's continued growth.
- Ensure RMC'S compliance with their federally mandated Quality Control Plan through employee development initiatives, monitoring of RMC'S operational practices while integrating new HUD directives into RMC'S existing best practices.

IVES DEVELOPMENT ASSOCIATES, Manchester, NH • 2005-2016
Consultancy providing strategic planning and leadership development to public, private and nonprofit companies throughout New England.

Principal
Design and facilitate customized corporate retreats, including strategic planning sessions, executive and Board of Directors' training and development, creation or re-affirmation of vision, mission and values and efforts to re-align leadership around key priorities and future direction of the organization. Integrate opportunities to shift organizational culture to more open and candid communications.
- Led an 18-month comprehensive change initiative that:
  - Resulted in the development of a transition plan for the assimilation of an Interim Executive Director including an operations plan that aimed to recalibrate the culture;
- Transformed climate of accountability for a $55M client by implementing Balanced Scorecard strategic measurement system. Designed, coordinated and facilitated on-site internal and external analysis of 11 retail locations in 9 states, analyzing threats and weaknesses in business to build a platform for growth.

CAREER NOTE: Concurrent with consulting enterprise (2006 – 2010), designed and taught introductory and upper level psychology and sociology courses at Granite State College in Concord, Manchester and Portsmouth, New Hampshire.

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GRANITE STATE INDEPENDENT LIVING, Concord, NH • 2001-2005
Statewide nonprofit offering long-term care, employment, transportation, advocacy, and other community-based services.

Acting Executive Director & Chief Operating Officer
Led internal operations, including service and program delivery, finance, human resources, fundraising and marketing. Transformed organization's culture by promoting a climate of excellence, systemic solutions and learning that benefited the organization and individual employees. Evaluated operational results and facilitated business processes and controls that promoted efficiency and internal information flow. Developed short- and long-range operating plans. Supported up to 14 management-level employees, staff of 90, and $13M annual operating budget. Held complete performance management authority as well as autonomy to engage in private and state/federal contracts.

- Increased revenue by 78% with more effective grant administration, successful applications for new competitive grants, initiating a comprehensive development / fundraising plan, and increasing the fee-for-service lines of business.
- Increased consumers served from 400 to 3,000+ individuals within three-year period by restructuring existing programs, developing new programs and increasing program accountability with monthly management reports.
- Established foundation for 36-month capacity building plan to enhance infrastructure and overall operations by conducting full organizational audit and successfully presenting to Board of Directors.
- Expanded services and leveraged long-term grant opportunity through company acquisition. Successfully integrated organizational cultures and business practices, including human resource policies, management teams and compensation/benefits.
- Recommended, designed and implemented internal controls and operating procedures for all departments (Human Resources, Finance, Public Relations/ Development, Long-Term Care, Community Living and Employment Services).
- Increased efficiency, raised credibility of financial reporting and reduced headcount by implementing state of the art technology with expertise of retained IT consultant.

NEW HAMPSHIRE DEPARTMENT OF EDUCATION, VOCATIONAL REHABILITATION, SERVICES FOR BLIND AND VISUALLY IMPAIRED, Concord, NH • 1992-2000
Statewide organization providing Registry of Legal Blindness, Sight Services for Independent Living, Vocational Rehabilitation and a Business Enterprise program.

Statewide Director
Managed professional staff of 8 to deliver services that included 15 statewide rehabilitative support groups, career counseling and vending machine/food service enterprises in State and Federal buildings.

- Awarded $1.2M 3-year federal grant to provide peer support services in 15 locations across the state
- Led Department to highest rank in standards and benchmarks among 7 other regional offices.
- Enhanced team atmosphere by integrating 4 distinct statewide programs into a cohesive unit.
- Cultivated relationships and formal partnerships with various stakeholders in the statewide network of social and human services and employment arenas.

EDUCATION

Doctorate in Human and Organizational Systems
Master of Arts in Human Development
Fielding Graduate University, Santa Barbara, California

Master of Arts/CAGS in Rehabilitation Counseling
Bachelor of Arts in Psychology and Philosophy
Assumption College, Worcester, Massachusetts

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DENISE A. BENNETT

[redacted]

WORK EXPERIENCE

Director of Finance

04/2023 to Present
Waypoint
464 Chestnut Street, Manchester, NH 03101

Responsible for managing all aspects of the Accounting Department. Create and maintain agency budget of $20 million. Work with directors and senior management on finances for the agency. Responsible for recording the investment activity as well as overseeing the real estate holding company. Review and approve all outgoing contract billings.

Controller

09/1993 to 04/2023
Waypoint
464 Chestnut Street, Manchester, NH 03101

Oversaw the Accounting department including payroll, a/p & a/r. Assisted senior management in preparing the annual budget for a $20 million agency. Prepared month end financial statements for all programs. Met with Directors to review financials monthly. Responsible for all outside audits.

Office Manager

07/1990 to 02/1992
TRW
Bedford, NH

Managed regional sales office. Assistant to regional sales manager.

SKILLS

Budgeting - 10+ years

Financial Reporting - 10+ years

Month End Closing - 10+ years

Responsible for all audits - 10+ years

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EDUCATION

Southern NH University

Bachelor's
Business Management
Manchester, NH
09/1985 to 05/1988

Southern NH University

Associate
Accounting
Manchester, NH
09/1983 to 05/1985

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NH Department of Health and Human Services

KEY PERSONNEL

List those primarily responsible for meeting the terms and conditions of the agreement.

Job descriptions not required for vacant positions.

Contractor Name: Waypoint

NAME	JOB TITLE	ANNUAL AMOUNT PAID FROM THIS CONTRACT	ANNUAL SALARY
Borja Alvarez de Toledo	President and CEO	$0.00	.$200,000
Colleen Ives	COO	$0.00	$160,160.
Denise Bennett	Director of Finance	$0.00	$115,440
		$0.00	$0.00
		$0.00	$0.00
		$0.00	$0.00

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH SERVICES

Lori A. Weaver
Commissioner

Iain N. Watt
Director

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

September 10, 2024

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into amendments to existing contracts with the Contractors listed below to continue providing home visiting services, by exercising contract renewal options by increasing the total price limitation by $16,911,354 from $9,788,971 to $26,700,325 and by extending the completion dates from September 30, 2024 to September 30, 2028, effective October 1, 2024, upon Governor and Council approval. 70% Federal Funds. 30% General Funds.

The individual contracts were approved by Governor and Council as specified in the table below.

Contractor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
Community Action Partnership of Stafford County Dover, NH	177200-B004	Rochester Catchment Area	$1,224,446	$2,131,968	$3,356,414	O: 2/8/23 Item #39
Granite VNA, Inc. Concord, NH	174069-R001	Conway and Laconia Catchment Areas	$1,065,241	$1,968,315	$3,033,556	O: 2/8/23 Item #39; A1: 6/14/23 Item #26; A2: 5/1/24 Item #18
The Family Resource Center at Gorham Gorham, NH	162412-B001	Berlin and Littleton Catchment Areas	$1,845,113	$2,904,538	$4,749,651	O: 2/8/23 Item #39; A1: 6/14/23 Item #27; A2: 5/1/24 Item #18
Waypoint Manchester, NH	177166-B002	Concord, Manchester, Seacoast and Southern Catchment Areas	$5,654,171	$9,906,533	$15,560,704	O: 2/8/23 Item #39; A1: 5/1/24 Item #18

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		Total:	$9,788,971	$16,911,354	$26,700,325	

Funds are available in the following accounts for State Fiscal Years 2025 and are anticipated to be available in State Fiscal Years 2026, 2027, 2028 and 2029, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details.

EXPLANATION

The purpose of this request is to allow the Contractors to continue providing voluntary home visiting services to pregnant individuals and families with children up to five (5) years of age within designated Division of Child, Youth, and Families (DCYF) catchment areas. In addition, the Contractor will pursue expansion of the program making it available to a broader population of families, including those already involved in New Hampshire's child welfare system.

The Contractors provide voluntary home visiting services utilizing the Healthy Families America (HFA) evidence-based Home Visiting model, its Child Welfare Protocols, and an approved Registered Nurse (RN) home visit model enhancement. The HFA model has shown to improve positive parenting practices, maternal and child health, school readiness, economic self-sufficiency and parental educational attainment, and to increase linkages and referrals to valuable community resources. In addition, families who participate in the HFA model experience less child maltreatment and family violence than their non-HFA counterparts. The HFA model is currently being provided in every county in New Hampshire.

Approximately 246 families will be served during State Fiscal Years 2025, 2026, 2027, 2028, and 2029.

As referenced in Exhibit A, Revisions to Standard Agreement Provisions, of the original agreements, the parties have the option to extend the agreements for up to four (4) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and Governor and Council approval. The Department is exercising its option to renew services for four (4) years of the four (4) years available.

Should the Governor and Executive Council not authorize this request, more than 200 families will experience a lapse in services that serve to prevent child abuse and neglect, family violence, and poor maternal and child health outcomes.

Source of Federal Funds: Assistance Listing Number (ALN) 93.870, FAIN X10MC50315; ALN 93.658, FAIN (FFPSA) 2301NHFOST

In the event that the Federal Funds become no longer available, additional General Funds will not be requested to support this program.

Respectfully submitted,

Lori A. Weaver
Commissioner

Docusign Envelope ID: C15BCFE3-7285-4846-BB49-7D83218725D3

Fiscal Detail Sheets
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-3896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, HOME VISITING FORMULA GNT
94% Federal Funds 6% General Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$192,620.00	$0.00	$192,620.00
2023	102-500731	Contracts for Program Services	90083208	$16,995.00	$0.00	$16,995.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$317,840.00	$0.00	$317,840.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$79,410.00	$0.00	$79,410.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$238,230.00	$238,230.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$60,598.00	$60,598.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$181,793.00	$181,793.00
2026	102-500731	Contracts for Program Svcs	90005896	$0.00	$52,456.00	$52,456.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$54,327.00	$54,327.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$162,981.00	$162,981.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$54,327.00	$54,327.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$162,981.00	$162,981.00
2028	102-500731	Contracts for Program Svcs	90005896	$0.00	$45,028.00	$45,028.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$54,327.00	$54,327.00
			SUBTOTAL:	$606,865.00	$1,067,048.00	$1,673,713.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$692,250.00	$0.00	$692,250.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$950,000.00	$0.00	$950,000.00
2024	102-500731	Contracts for Program Services	90005896	$54,682.00	$0.00	$54,682.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$237,500.00	$0.00	$237,500.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$712,500.00	$712,500.00
2025	102-500731	Contracts for Program Services	90005896	$27,341.00	$0.00	$27,341.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$230,356.00	$230,356.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$691,068.00	$691,068.00
2026	102-500731	Contracts for Program Services	90005896	$0.00	$167,050.00	$167,050.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$227,975.00	$227,975.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$683,924.00	$683,924.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$227,975.00	$227,975.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$683,924.00	$683,924.00
2028	102-500731	Contracts for Program Services	90005896	$0.00	$172,618.00	$172,618.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	227,975.00	$227,975.00
			Subtotal:	$1,961,773.00	$4,025,565.00	$5,987,338.00

Fiscal Detail Sheets
Home Visiting Services
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Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$80,533.00	$0.00	$80,533.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$340,529.00	$0.00	$340,529.00
2024	102-500731	Contracts for Program Services	90005896	$6,667	$0.00	$6,667.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$85,311.00	$0.00	85,311.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$252,640.00	252,640.00
2025	102-500731	Contracts for Program Services	90005896	$3,333.00	$0.00	$3,333.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$80,326.00	$80,326.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$180,976.00	$180,976.00
2026	102-500731	Contracts for Program Services	90005896	$0.00	$34,869.00	$34,869.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$51,997.00	$51,997.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$155,991.00	$155,991.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$51,997.00	$51,997.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$155,991.00	$155,991.00
2028	102-500731	Contracts for Program Services	90005896	$0.00	$40,243.00	$40,243.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$51,997.00	$51,997.00
			Subtotal:	$516,373.00	$1,037,027.00	1,553,400.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$269,729.00	$0.00	$269,729.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$378,354.00	$0.00	$378,354.00
2024	102-500731	Contracts for Program Svcs	90005896	$33,571	$0.00	$33,571.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$92,583.00	$0.00	$92,583.00
2025	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$277,749.00	$277,749.00
2025	102-500731	Contracts for Program Svcs	90005896	$25,179	$0.00	$25,179.00
2026	074-500589	Grants for Pub Asst and Rel	90083211	$0.00	$117,573.00	$117,573.00
2026	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$352,718.00	$352,718.00
2026	102-500731	Contracts for Program Svcs	90005896	$0.00	$57,079.00	$57,079.00
2027	074-500589	Grants for Pub Asst and Rel	90083212	$0.00	$125,903.00	$125,903.00
2027	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$377,707.00	$377,707.00
2028	074-500589	Grants for Pub Asst and Rel	90083213	$0.00	$125,903.00	$125,903.00
2028	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$377,707.00	$377,707.00
2028	102-500731	Contracts for Program Svcs	90005896	$0.00	$90,920.00	$90,920.00
2029	074-500589	Grants for Pub Asst and Rel	90083214	$0.00	$125,903.00	$125,903.00
			Subtotal:	$799,416.00	$2,029,162.00	2,828,578.00
			TOTAL:	$3,884,227.00	$8,158,802.00	$12,043,029.00

05-95-92-920510-3382 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIVISION, BUREAU OF DRUG & ALCOHOL SVCS; GOVERNOR COMMISSION FUNDS
100% Other Funds

Waypoint - Vendor #177166-B002

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Fiscal Detail Sheets
Home Visiting Services
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State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	92057502	$108,000.00	$0.00	$108,000.00
			Subtotal:	$108,000.00	$0.00	$108,000.00
			TOTAL:	$108,000.00	$0.00	$108,000.00

05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, MATERNAL - CHILD HEALTH,
100% General Funds

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	102-500731	Contracts for Program Svcs	90004019	$56,250.00	$0.00	$56,250.00
2024	102-500731	Contracts for Program Svcs	90004019	$75,000.00	$0.00	$75,000.00
2025	102-500731	Contracts for Program Svcs	90004019	$0.00		$0.00
			Subtotal:	$131,250.00	$0.00	$131,250.00
			TOTAL:	$131,250.00	$0.00	$131,250.00

05-95-09-901010-5771 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF HEALTHCARE ACCESS, EQUITY & POLICY, COVID-19 HEALTH DISPARITIES
100% Federal Funds

Waypoint, - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577100	$105,000.00	$0.00	$105,000.00
2023	074-500589	Grants for Pub Asst and Relief	90577150	$157,500.00	$0.00	$157,500.00
			Subtotal:	$262,500.00	$0.00	$ 262,500.00

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Relief	90577150	$15,000.00	$0.00	$15,000
2023	074-500589	Grants for Pub Asst and Relief	90577150	$101,512.00	$0.00	101,512.00
2024	074-500589	Grants for Pub Asst and Relief	90577150	$85,000.00	$0.00	$85,000
2024	074-500589	Grants for Pub Asst and Relief	90577150	$100,000.00	$0.00	100,000.00
			Subtotal:	$301,512.00	$0.00	301,512.00
			TOTAL:	$564,012.00	$0.00	$564,012.00

05-95-90-902010-2451-HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, ARP - MIEC HOME VISITING
100% Federal Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$17,532.00	$0.00	$17,532.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$54,231.00	$0.00	$54,231.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$13,558.00	$0.00	$13,558.00
			Subtotal:	$85,321.00	$0.00	$85,321.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$114,064.00	$0.00	$114,064.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$125,000.00	$0.00	$125,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$142,350.00	$0.00	$142,350.00
			Subtotal:	$381,414.00	$0.00	381,414.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class / Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount

Fiscal Detail Sheets
Home Visiting Services
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2023	074-500589	Grants for Pub Asst and Rel	90083206	$72,591.00	$0.00	$72,591.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$8504.00	$0.00	$8,504.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$2130.00	$0.00	$2,130.00
			Subtotal:	$83,225.00	$0.00	$83,225.00

Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$68,714.00	$0.00	$68,714.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$50,000.00	$0.00	$50,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$56,532.00	$0.00	$56,532.00
			Subtotal:	$175,246.00	$0.00	$175,246.00
			TOTAL:	$725,206.00	$0.00	$725,206.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-29580000, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD – FAMILY SERVICES
50% Federal Funds

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$199,673.00	$0.00	$199,673.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00	$0.00	$266,230.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$66,557.00	$199,673.00	$266,230.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$266,230.00	$266,230.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$266,230.00	$266,230.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$266,230.00	$266,230.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$66,557.00	$66,557.00
			Subtotal:	$532,460.00	$1,064,920.00	$1,597,380.00

Granite VNA - Vendor #174089-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$125,960.00	$0	$125,960.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$271,746.00	$0	$271,746.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$67,937.00	$164,885	$232,822.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 232,822.00	$ 232,822.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 232,822.00	$ 232,822.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 232,822.00	$ 232,822.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 67,937.00	$ 67,937.00
			Subtotal:	$465,643.00	$931,288	$1,396,931.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$164,133.00	$0	$164,133.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,845.00	$0	$218,845.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$54,711.00	$164,133	$218,844.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 218,844.00	$ 218,844.00

Fiscal Detail Sheets
Home Visiting Services
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2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 218,844.00	$ 218,844.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 218,844.00	$ 218,844.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$ 54,711.00	$ 54,711.00
			Subtotal:	$437,688.00	$875,376	$1,313,065.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current	Increase (Decrease)	Amount
2023	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,102,682.00	$0.00	$1,102,682.00
2024	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00	$0.00	$1,470,242.00
2025	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$367,560.00	$1,102,682.00	$1,470,242.00
2026	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$1,470,242.00	$1,470,242.00
2027	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$1,470,242.00	$1,470,242.00
2028	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$1,470,242.00	$1,470,242.00
2029	637-504181	TITLE IV- E FOSTER CARE SERVICE	42105869	$ -	$367,560.00	$367,560.00
			Subtotal:	$2,940,484.00	$5,880,968.00	$8,821,452.00
			TOTAL:	$4,376,276.00	$8,752,552.00	$13,128,828.00

GRAND TOTAL:	$9,788,971.00	$16,911,354.00	$26,700,325.00

State of New Hampshire
Department of Health and Human Services
Amendment #2

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Waypoint ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item #39), as amended on May 1, 2024 (Item #18), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37 General Provisions, Block 1.7, Completion Date, to read:

   September 30, 2028

2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $15,560,704

3. Modify Exhibit B, Scope of Services; Subsection 3.3., to read:

   3.3. The Contractor must service a portion of families utilizing the Healthy Families America (HFA) Child Welfare Protocols (CWP) in the Concord, Manchester, Seacoast and Southern DCYF Catchment Areas, which is attached as Attachment 1. Virtual home visits may also be accommodated, in compliance with HFA requirements. The Contractor must ensure families being served utilizing the CWP have an expanded enrollment window, allowing for enrollment of families with a child up to twenty-four (24) months of age, referred by the child welfare system, who are participating in the service voluntarily. The Contractor shall exhaust all reasonable efforts to serve thirty-six (36) DCYF families in the Concord Catchment Area, twenty-eight (28) DCYF families in Seacoast Catchment Area, thirty-nine (39) DCYF families in Southern Catchment Area, and thirty-nine (39) DCYF families in the Manchester Catchment Area, serving no less than 70% of the identified families for each region before the end of the contract period.

4. Modify Exhibit B, Scope of Services, Subsection 3.5.4., to read:

   3.5.4. Families with an open DCYF case who have recently reunified, or where the child remains at home with their family and not in an out-of-home placement.

5. Modify Exhibit B, Scope of Services, Subsection 3.7.1.2., to read:

   3.7.1.2. Have HFA CWP available in the Concord, Manchester, Seacoast, and Southern DCYF Catchment Areas.

   3.7.1.2.1. Should the Contractor be unable to provide services through the HFA CWP, a corrective action plan must be developed by the Contractor and approved by the Department.

   3.7.1.2.1.1. In the event that the Contractor is unable to provide services using the CWP, the Contractor must enter into a subcontract or MOA with an approved, accredited HFA provider to provide this service, no later than thirty (30) business days from the date of discontinuation.

DS
BAT

Contractor Initials _____
9/10/2024
Date _____

6. Modify Exhibit C, Payment Terms, Section 1, to read:

1. This Agreement is funded by:

1.1. 68.25% Federal funds from:

1.1.1. 52.40% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the United States Department of Health and Human Services (US DHHS), Health Resources and Services Administration (HRSA), Assistance Listing Number (ALN) 93.870, FAIN X10MC43595 and as awarded on September 2, 2022, FAIN X10MC46878 and as awarded on August 29, 2023, FAIN X10MC50315.

1.1.2. 3.59% American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the US DHHS, HRSA, ALN 93.870, FAIN X11MC41935 and as awarded on October 28, 2021, FAIN X11MC45263.

1.1.3. 2.48% New Hampshire Intiative to Address COVID-19 Health Disparaties, as awarded on June 1, 2021, by the US DHHS, Centers for Disease Control and Prevention, ALN 93.391, FAIN NH75OT000031.

1.1.4. 41.53% Administration of Children Youth & Families (ACF), as awarded on October 1, 2022, by the US DHHS, ALN 93.658, FAIN 2201NHFOST.

1.2. 31.06% General funds.

1.3. 0.69% Other funds Governor Commission Funds.

7. Modify Exhibit C, Payment Terms Section 7, to read:

7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement and shall be in accordance with the approved line items as specified in Exhibits C-1, Budget through C-9, SFY 2029 Budget Sheet - Amendment #2.

8. Modify Exhibit C, Payment Terms, Section 9.3, to read:

9.3. The Contractor cannot exceed the maximum allotment for weekly rate expenditure by Fiscal Year, which is as follows:

State Fiscal Year	Amount
SFY 2023	$182,154
SFY 2024	$364,307
SFY 2025	$1,470,242
SFY 2026	$1,470,242
SFY 2027	$1,470,242
SFY 2028	$1,470,242
SFY 2029	$367,560
Subtotal	**$6,794,989**

9. Modify Exhibit C, Payment Terms, by deleting Section 10 in its entirety.

10. Modify Exhibit C-3, SFY 2025 Budget Sheet – Amendment #1, by replacing it in its entirety with Exhibit C-3, SFY 2025 Budget Sheet – Amendment #2, which is attached hereto and incorporated by reference herein.
11. Add Exhibit C-6, Budget Sheet, SFY 2026 – Amendment #2, which is attached hereto and incorporated by reference herein.
12. Add Exhibit C-7, Budget Sheet, SFY 2027– Amendment #2, which is attached hereto and incorporated by reference herein.
13. Add Exhibit C-8, Budget Sheet, SFY 2028– Amendment #2, which is attached hereto and incorporated by reference herein.
14. Add Exhibit C-9, Budget Sheet, SFY 2029– Amendment #2, which is attached hereto and incorporated by reference herein.

DS
Contractor Initials BLT
Date 9/10/2024

All terms and conditions of the Contract and prior amendments not modified by this Amendment remain in full force and effect. This Amendment shall be effective October 1, 2024, upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

9/10/2024
Date

DocuSigned by:
Iain Watt
Name: Iain Watt
Title: Director - DPHS

Waypoint

9/10/2024
Date

DocuSigned by:
Borja Alvarez de Toledo
Name: Borja Alvarez de Toledo
Title: president and CEO

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

9/10/2024
Date

DocuSigned by:
Robyn Guarino
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Exhibit C-3, SFY 2025 Budget Sheet- Amendment #2

New Hampshire Department of Health and Human Services
Contractor Name: *Waypoint*
Budget Request for: *Home Visiting Services*
Budget Period: *SFY 2025 (7/1/24 - 6/30/25)*
Indirect Cost Rate (if applicable): 17.40%

Line Item	HOME VISITING FORMULA GNT AND GENERAL FUNDS
1. Salary & Wages	$509,003
2. Fringe Benefits	$152,695
3. Consultants	$22,000
4. Equipment *Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.*	
5.(a) Supplies - Educational	
5.(b) Supplies - Lab	
5.(c) Supplies - Pharmacy	
5.(d) Supplies - Medical	
5.(e) Supplies Office	$3,300
6. Travel	$30,000
7. Software	$19,200
8. (a) Other - Marketing/Communications	
8. (b) Other - Education and Training	$12,000
8. (c) Other - Other (specify below)	
Organization/Membership Dues	$10,250
Occupancy	$47,040
Phones	$15,600
Insurance	$11,400
Other (please specify)	
Other (please specify)	
Other (please specify)	
Other (please specify)	
9. Subrecipient Contracts	
Total Direct Costs	$832,488
Total Indirect Costs	$144,853
Subtotals	$977,341
TOTAL	$977,341

Contractor Initials: BAT

Date: 9/10/2024

Exhibit C-6, Budget Sheet, SFY 2026 - Amendment #2

New Hampshire Department of Health and Human Services	
Contractor Name:	Waypoint
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/25 - 6/30/26
Indirect Cost Rate (If applicable)	0.174
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$594,388
2. Fringe Benefits	$190,204
3. Consultants	$36,000
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$3,000
6. Travel	$31,500
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$12,000
8. (c) Other - Other (specify below)	$0
Other (please specify)	$36,000
Other (please specify)	$0
Other (please specify)	$13,500
Other (please specify)	$10,250
9. Subrecipient Contracts	$0
Total Direct Costs	$927,150
Total Indirect Costs	$161,324
TOTAL	$1,088,474

Contractor Initials: DS BAT

Date: 9/10/2024

Exhibit C-7, Budget Sheet, SFY 2027 - Amendment #2

New Hampshire Department of Health and Human Services	
Contractor Name:	Waypoint
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/26 - 6/30/27
Indirect Cost Rate (if applicable)	0.174
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$542,115
2. Fringe Benefits	$162,630
3. Consultants	$12,000
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$0
6. Travel	$16,000
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$4,000
8. (c) Other - Other (specify below)	$0
Other (please specify)	$20,000
Other (please specify)	$2,400
Other (please specify)	$9,600
Other (please specify)	$8,000
9. Subrecipient Contracts	$0
Total Direct Costs	$776,745
Total Indirect Costs	$135,154
TOTAL	$911,899

Contractor Initials: BAT (DS)

Date: 9/10/2024

Exhibit C-8, Budget Sheet, SFY 2028 - Amendment #2

New Hampshire Department of Health and Human Services	
Contractor Name:	Waypoint
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/27 - 6/30/28
Indirect Cost Rate (if applicable)	0.174
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$602,147
2. Fringe Benefits	$192,687
3. Consultants	$19,756
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$2,000
6. Travel	$29,000
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$12,000
8. (c) Other - Other (specify below)	$0
Other (please specify)	$8,000
Other (please specify)	$38,825
Other (please specify)	$12,710
Other (please specify)	$6,825
9. Subrecipient Contracts	$0
Total Direct Costs	$923,950
Total Indirect Costs	$160,767
TOTAL	$1,084,717

Contractor Initials: DS BAT

Date: 9/10/2024

Exhibit C-9, Budget Sheet, SFY 2029 – Amendment #2

New Hampshire Department of Health and Human Services	
Contractor Name:	Waypoint
Budget Request for:	Home Visiting Services - Home Visiting Services Grant
Budget Period	7/1/28 - 9/30/28
Indirect Cost Rate (if applicable)	0.174003275
Line Item	**Program Cost - Funded by DHHS**
1. Salary & Wages	$129,941
2. Fringe Benefits	$38,982
3. Consultants	$4,938
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$0
6. Travel	$7,725
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$0
8. (c) Other - Other (specify below)	$0
Other (please specify)	$9,000
Other (please specify)	$3,000
Other (please specify)	$600
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$194,186
Total Indirect Costs	$33,789
TOTAL	$227,975

Contractor Initials: BAT (OS)

Date: 9/10/2024

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ARC

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Lori A. Weaver
Commissioner

Iain N. Watt
Interim Director

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

March 12, 2024

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into **Sole Source** amendments to existing contracts with the Contractors listed below **in bold** to continue providing home visiting services, by increasing the total price limitation by $132,023 from $9,656,948 to $9,788,971 with no change to the contract completion dates of September 30, 2024, effective upon Governor and Council approval. 100% General Funds.

The individual contracts were approved by Governor and Council as specified in the table below.

Contractor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
Community Action Partnership of Strafford County Dover, NH	177200-B004	Rochester Catchment Area	$1,224,446	$0	$1,224,446	O: February 8, 2023, Item #39
Granite VNA, Inc. Concord, NH	**174069-R001**	**Conway Catchment Area**	**$1,055,241**	**$10,000**	**$1,065,241**	O: February 8, 2023, Item #39 A1: June 14, 2023, Item #26
The Family Resource Center at Gorham Gorham, NH	**162412-B001**	**Berlin and Littleton Catchment Areas**	**$1,805,113**	**$40,000**	**$1,845,113**	O: February 8, 2023, Item #39 A1: June 14, 2023, Item #27
Waypoint Manchester, NH	**177166-B002**	**Concord, Manchester, Seacoast& Southern Catchment Areas**	**$5,572,148**	**$82,023**	**$5,654,171**	O: February 8, 2023, Item #39
		Total:	$9,656,948	$132,023	$9,788,971	

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Funds are available in the following accounts for State Fiscal Years 2024 and 2025, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details.

EXPLANATION

This request is **Sole Source** to allow the Department to add funding to amend the scope of services for one (1) of the Contractors, The Family Resource Center at Gorham, to add a Family Engagement Specialist. In addition, the Department is adding funding to increase staffing allocations for the other two (2) Contractors for fiscal management and oversight activities.

The purpose of this request is to increase the number of families enrolled and retained in home visiting services in the North Country by The Family Resource Center at Gorham by supporting a Family Engagement Specialist position. The Family Engagement Specialist will engage new and existing referral partners and maintain community and family relationships. In addition, the funding will allow Granite VNA and Waypoint to support staffing for fiscal management to comply with added reporting requirements in the current contract year.

Approximately 357 families will be served during State Fiscal Years 2024 and 2025.

The Contractors provide voluntary home visiting services to pregnant individuals and families with children up to five (5) years of age, by utilizing the Healthy Families America (HFA) evidence-based Home Visiting model and its Child Welfare protocols. This nationally recognized model demonstrates positive outcomes for families in the areas of positive parenting practices, improved maternal and child health, improved school readiness, increased economic self-sufficiency and parental educational attainment, and increased linkages and referrals to valuable community resources. In addition, the HFA model has demonstrated a reduction in child maltreatment and family violence. HFA is currently being provided in every county in New Hampshire.

The Department will continue to monitor services through:

- Data reviews to evaluate capacity utilization, service delivery by region, and demographic data to ensure equitable provision of services.
- Quarterly data reviews of program performance across 19 federally defined performance measures.
- Quarterly review of data entered into model-specific tracking documents by the contractor to ensure fidelity to the requirements of the evidence-based model.
- Quarterly data reviews to ensure that at least seventy-five percent (75%) of expected home visits occur based upon the individual level of service to which each family is assigned.
- Annual sub-recipient monitoring site visits to ensure compliance with contract and model requirements, utilizing tools developed by the home visiting program and the Healthy Families America model.

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Should the Governor and Council not authorize this request, The Family Resource Center at Gorham will be unable to increase the number of families enrolled and retained in home visiting services in the North Country. In addition, Granite VNA and Waypoint will not have the ability to improve fiscal management and oversight activities.

Respectfully submitted,

Lori A. Weaver
Commissioner

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Fiscal Detail Sheet
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, HOME VISITING FORMULA GNT
96% Federal Funds 4% General Funds
Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$192,620.00	$0.00	$192,620.00
2023	102-500731	Contracts for Program Services	90083208	$18,995.00	$0.00	$18,995.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$317,840.00	$0.00	$317,840.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$79,410.00	$0.00	$79,410.00
			SUBTOTAL:	$608,865.00	$0.00	$608,865.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$692,250.00	$0.00	$692,250.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$950,000.00	$0.00	$950,000.00
2024	102-500731	Contracts for Program Services	90005896	$0.00	$54,682.00	$54,682.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$237,500.00	$0.00	$237,500.00
2025	102-500731	Contracts for Program Services	90005896	$0.00	$27,341.00	$27,341.00
			SUBTOTAL:	$1,879,750.00	$82,023.00	$1,961,773.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$80,533.00	$0.00	$80,533.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$340,529.00	$0.00	$340,529.00
2024	102-500731	Contracts for Program Services	90005896	$0	$6,667.00	$6,667.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$85,311.00	$0.00	$85,311.00
2025	102-500731	Contracts for Program Services	90005896	$0	$3,333.00	$3,333.00
			SUBTOTAL:	$508,373.00	$10,000.00	$518,373.00

The Family Resource Center at Gorham - Vendor #182412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083208	$289,729.00	$0.00	$289,729.00
2024	074-500589	Grants for Pub Asst and Rel	90083210	$378,354.00	$0.00	$378,354.00
2024	102-500731	Contracts for Program Svcs	90005896	$0	$33,571.00	$33,571.00
2025	074-500589	Grants for Pub Asst and Rel	90083210	$92,583.00	$0.00	$92,583.00
2025	102-500731	Contracts for Program Svcs	90005896	$0	$25,179.00	$25,179.00
			SUBTOTAL:	$740,666.00	$58,750.00	799,416.00
			Total:	$3,733,454.00	$150,773.00	$3,884,227.00

05-95-92-920510-3382 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
BEHAVIORAL HEALTH DIVISION, BUREAU OF DRUG & ALCOHOL SVCS, GOVERNOR COMMISSION FUNDS
100% Other Funds
Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	92057502	$108,000.00	$0.00	$108,000.00
			SUBTOTAL:	$108,000.00	$0.00	$108,000.00
			TOTAL:	$108,000.00	$0.00	$108,000.00

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Fiscal Detail Sheet
Home Visiting Services
RFP-2023-DPHS-01-HOMEV

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Amount
2023	074-500589	Grants for Pub Asst and Rel	90083206	$68,714.00	$0.00	$68,714.00
2024	074-500589	Grants for Pub Asst and Rel	90083207	$50,000.00	$0.00	$50,000.00
2025	074-500589	Grants for Pub Asst and Rel	90083207	$56,532.00	$0.00	$56,532.00
			SUBTOTAL:	$175,246.00	$0.00	$175,246.00
			TOTAL:	$725,206.00	$0.00	$725,206.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-29560000, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD – FAMILY SERVICES
50% Federal Funds
Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	037-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$199,873.00	$0.00	$199,873.00
2024	037-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00	$0.00	$266,230.00
2025	037-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$66,557.00	$0.00	$66,557.00
			SUBTOTAL:	$532,460.00	$0.00	$532,460.00

Granite VNA - Vendor #174069-R001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	037-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$125,060.00	$0	$125,060.00
2024	037-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$271,746.00	$0	$271,746.00
2025	037-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$87,937.00	$0	$87,937.00
			SUBTOTAL:	$484,643.00	$0	$484,643.00

The Family Resource Center at Gorham - Vendor #182412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	037-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$184,133.00	$0	$184,133.00
2024	037-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,845.00	$0	$218,845.00
2025	037-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$54,711.00	$0	$54,711.00
			SUBTOTAL:	$437,689.00	$0	$437,689.00

Waypoint - Vendor #177186-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Current Modified	Increase (Decrease)	Revised Modified
2023	037-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,102,682.00	$0.00	$1,102,682.00
2024	037-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00	$0.00	$1,470,242.00
2025	037-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$367,560.00	$0.00	$367,560.00
			SUBTOTAL:	$2,940,484.00	$0.00	$2,940,484.00
			TOTAL:	$4,378,276.00	$0.00	$4,378,276.00
			GRAND TOTAL:	$9,658,948.00	$132,023.00	$9,788,971.00

State of New Hampshire
Department of Health and Human Services
Amendment #1

This Amendment to the Home Visiting Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Waypoint ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on February 8, 2023 (Item #39), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $5,654,171

2. Modify Exhibit C, Payment Terms Section 1, to read:

   1. This Agreement is funded by:

      1.1. 71% Federal funds from:

         1.1.1. 17% Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the United States Department of Health and Human Services (US DHHS), Health Resources and Services Administration (HRSA), Assistance Listing Number (ALN) 93.870, FAIN X10MC43595.

         1.1.2. 30% Maternal, Infant and Early Childhood Homevisiting Grant Program, as awarded on September 2, 2022, by the US DHHS, HRSA, ALN 93.870, FAIN X10MC46878.

         1.1.3. 3% American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the US DHHS, HRSA, ALN 93.870, FAIN X11MC41935.

         1.1.4. 7% American Rescue Plan Act Funding for Home Visiting, as awarded on October 28, 2021, by the US DHHS, HRSA, ALN 93.870, FAIN X11MC45263.

         1.1.5. 7% New Hampshire Intiative to Address COVID-19 Health Disparaties, as awarded on June 1, 2021, by the US DHHS, Centers for Disease Control and Prevention, ALN 93.391, FAIN NH75OT000031.

         1.1.6. 36% Administration of Children Youth & Families (ACF), as awarded on October 1, 2022, by the US DHHS, ALN 93.658, FAIN 2201NHFOST.

      1.2. 27% General funds.

      1.3. 2% Other funds.

3. Modify Exhibit C, Payment Terms Section 7, to read:

   7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1, Budget through C-3, SFY 2025 Budget Sheet - Amendment #1.

4. Modify Exhibit C-2, SFY 2024 Budget Sheet, by replacing it in its entirety with Exhibit C-2, SFY 2024 Budget Sheet – Amendment #1, which is attached hereto and incorporated by reference

All terms and conditions of the Contract not modified by this Amendment remain in full force and effect. This Amendment shall be effective upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

3/26/2024
Date

DocuSigned by:
Iain Watt
Name: Iain Watt
Title: Interim Director - DPHS

Waypoint

3/26/2024
Date

DocuSigned by:
Borja Alvarez de Toledo
Name: Borja Alvarez de Toledo
Title: president and CEO

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

3/27/2024
Date

DocuSigned by:
Robyn Guarino
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

_____
Date

_____
Name:
Title:

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New Hampshire Department of Health and Human Services
Contractor Name: *Waypoint*
Budget Request for: *Home Visiting Services*
Budget Period: *G&C Approval - June 30, 2024*
Indirect Cost Rate (if applicable): 14.62%

Line Item	HOME VISITING FORMULA GNT AND GENERAL FUNDS	ARP - MIEC HOME VISITIING
1. Salary & Wages	$567,423	$75,920
2. Fringe Benefits	$170,227	$22,776
3. Consultants	$17,622	$378
4. Equipment *Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.*		
5.(a) Supplies - Educational		
5.(b) Supplies - Lab		
5.(c) Supplies - Pharmacy		
5.(d) Supplies - Medical		
5.(e) Supplies Office		
6. Travel	$27,600	$7,400
7. Software	$16,000	
8. (a) Other - Marketing/Communications		
8. (b) Other - Education and Training	$15,000	
8. (c) Other - Other (specify below)		
Phones	$17,051.00	
Occupancy	$24,854	
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
9. Subrecipient Contracts		
Total Direct Costs	$855,777	$106,474
Total Indirect Costs	$148,905	$18,526
Subtotals	$1,004,682	$125,000
TOTAL		$1,129,682

Contractor Initials: DS BAT

Date: 4/17/2024

Exhibit C-3, SFY 2025 Budget Sheet - Amendment #1

New Hampshire Department of Health and Human Services
Contractor Name: *Waypoint*
Budget Request for: *Home Visiting Services*
Budget Period: *July 1, 2024 - September 30, 2024*
Indirect Cost Rate (if applicable): 17.40%

Line Item	HOME VISITING FORMULA GNT AND GENERAL FUNDS	ARP - MIEC HOME VISITING
1. Salary & Wages	$154,704	$94,863
2. Fringe Benefits	$45,621	$26,389
3. Consultants	$3,500	
4. Equipment *Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.*		
5.(a) Supplies - Educational		
5.(b) Supplies - Lab		
5.(c) Supplies - Pharmacy		
5.(d) Supplies - Medical		
5.(e) Supplies Office		
6. Travel	$4,500	
7. Software	$4,005	
8. (a) Other - Marketing/Communications		
8. (b) Other - Education and Training		
8. (c) Other - Other (specify below)		
Organization Dues		
Occupancy	$12,448	
Phones	$810	
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
9. Subrecipient Contracts		
Total Direct Costs	$225,589	$121,252
Total Indirect Costs	$39,252	$21,098
Subtotals	$264,841	$142,350
TOTAL		$407,191

DS
Contractor Initials: BAT

Date: 4/17/2024

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ARC

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Lori A. Weaver
Interim Commissioner

Patricia M. Tilley
Director

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

December 29, 2022

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, and the Division of Children, Youth and Families, to enter into **Retroactive** contracts with the contractors listed below in an amount not to exceed $8,847,771 to provide home visiting services, with the option to renew for up to four (4) additional years, effective retroactive to October 1, 2022, upon Governor and Council approval through September 30, 2024. 73.67% Federal Funds, 25.11% General Funds, 1.22% Other Funds.

Contractor Name	Vendor Code	Area Served*	Contract Amount
Community Action Partnership of Strafford County	177200-B004	Rochester Catchment Area	$1,224,446
Granite VNA, Inc.	177244-B002	Conway Catchment Area	$481,084
The Family Resource Center at Gorham	182412-B001	Berlin and Littleton Catchment Areas	$1,590,113
Waypoint	177166-B002	Concord, Manchester, Seacoast and Southern Catchment Areas	$5,572,148
		Total:	**$8,847,771**

* Note the Department did not receive vendor responses for some areas of the state and is currently in the process of re-soliciting for those remaining regions to ensure statewide coverage.

Funds are available in the following accounts for State Fiscal Year 2023, and are anticipated to be available in State Fiscal Years 2024 and 2025, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

Because the Bridges System is used to process and monitor payments for these agreements, no purchase order number is assigned. The New Hampshire First System will not be used to encumber these funds. Depending on the eligibility of the client, funding type is determined at the time of the payment.

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See attached fiscal details.

EXPLANATION

This request is **Retroactive** to avoid any interruption in these services and to allow for continuity of care for families in these regions. This was a complex procurement collaboratively sought by the Division of Public Health Services and the Division for Children, Youth and Families with multiple funding sources. The Department needed additional time to confirm funding details and finalize the contracts and therefore did not have executed contracts in time to present to Governor and Council to prevent the previous contracts from expiring.

The purpose of this request is to provide home visiting services to pregnant individuals, and families with children up to age five (5), by utilizing the evidence-based home visiting model from Healthy Families America and its' Child Welfare Protocols. This nationally recognized program demonstrates positive outcomes for families in the areas of positive parenting practices, improved maternal and child health, improved school readiness, increased economic self-sufficiency and parental educational attainment, and increased linkages and referrals to valuable community resources. This model has also demonstrated reduction in child maltreatment and family violence. Healthy Families America is currently being provided in every County in New Hampshire. The purpose of this request is to ensure continuity of services, while supporting expansion of the program, making it available to a broader population of families, including those involved in New Hampshire's child welfare system.

Approximately 354 individuals will be served during State Fiscal Years 2023, 2024, and 2025.

The Division of Public Health Services will monitor services by:

- Conducting monthly, quarterly, and annual data reviews to evaluate capacity utilization, service delivery by region, and demographic data to ensure equitable provision of services.
- Conducting quarterly and annual data reviews of program performance across 19 federally-defined performance measures.
- Reviewing data entered into model-specific tracking documents by each sub-contractor to ensure fidelity to the requirements of the evidence-based model.

The Division for Children, Youth, and Families will monitor services using the following performance measures:

[1] HFA Evidence of Effectiveness 2022 Website.pdf (healthyfamiliesamerica.org)

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- Referrals
  - Share of families who are referred to Healthy Families America form Division for Children, Youth and Families. (Number of families currently enrolled in Healthy Families America Child Welfare Protocols and percentage of Healthy Families America Child Welfare Protocol slots currently used.)
  - Share of Division for Children, Youth and Families-referred families that were enrolled between three (3) and twenty-four (24) months of age.
  - Share of Division for Children, Youth and Families-referred families with a recent assessment of a Substance Exposed Infant.
- Enrollments
  - Average time to enrollment from the time and date of referral.
  - Number of days from referral date to the first home visit.
  - Share of families that are offered Healthy Family America and percentage of offered families who decide to receive Healthy Family America.
  - Proportion of families that are retained in the program over specified periods of time, (3 months, 6 months, and every 6 months thereafter) after receiving a first home visit.
  - Proportion of families who receive at least seventy-five percent (75%) of the appropriate number of home visits based upon the individual level of service to which they are assigned.
- Program Completion
  - Share of families who do not complete the program, including, reason for non-completion and/or discharge.
  - Share of families that discharged who completed a minimum of specified periods of service. (Starting at 6 months, and every 6 months thereafter up until 36 months of service.)
- Short-term Outcomes
  - Share of families with a new case opened to the Division for Children, Youth and Families, or a new report of maltreatment, within 6 months after discharge.
  - Share of children who enter out-of-home placement within 6 months after discharge, including breakdown of placement type.
  - Share of children who enter any form of out-of-home placement within 12 months of discharge.
  - Differences in outcomes outlined above (i.e., prevention of out of home removal, decreases in risk/needs) by racial/ethnic and geographic characteristics.

The Department selected the contractors through a competitive bid process using a Request for Proposals (RFP) that was posted on the Department's website from June 29, 2022 through August 2, 2022. The Department received four (4) responses that were reviewed and scored by a team of qualified individuals. The Scoring Sheet is attached.

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As referenced in Exhibit A, of the attached agreements, the parties have the option to extend the agreements for up to four (4) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties, and Governor and Council approval.

Should the Governor and Council not authorize this request over 200 New Hampshire families will experience a lapse in preventive services they've come to depend on, leaving vulnerable families without access to proven support for preventing child abuse and neglect, family violence, low birth weight, maternal depression, and developmental delays.

Source of Federal Funds: Assistance Listing Number # 93.870, FAIN # X1043595, X1046878, X1145263; Assistance Listing Number # 93.658, FAIN # (FFPSA) 2201NHFOST; and Assistance Listing Number # 93.391, FAIN # NH75OT000031

In the event that the Federal or Other Funds become no longer available, additional General Funds will not be requested to support this program.

Respectfully submitted,

Lori A. Weaver
Interim Commissioner

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FISCAL DETAIL SHEET

SFY 23, 24 & 25 HOME VISITING SERVICES CONTRACTS

DIVISION OF PUBLIC HEALTH (DPHS) FUNDS

05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: PUBLIC HEALTH DIV, BUREAU OF COMM & HEALTH SERV, HOME VISITING FORMULA GNT

100% FEDERAL CFDA #93.870 FAIN # X1043595, X1046878

Community Action Partnership of Strafford County - Vendor #177200-B004

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$192,620.00
2023 (10/1/22 - 6/30/23)	102-500731	Contracts for Program Services	90083208	$16,995.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$317,840.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$79,410.00
			SUBTOTAL:	$606,865.00

Waypoint - Vendor #177166-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$692,250.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$950,000.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$237,500.00
			SUBTOTAL:	$1,879,750.00

Starfio VNA - Vendor 0177244-B002

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$80,533.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$109,446.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$27,540.00
			SUBTOTAL:	$217,519.00

The Family Resource Center at Gorham - Vendor #162412-B001

State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083208	$269,729.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$378,354.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083210	$92,583.00
			SUBTOTAL:	$740,666.00
			Total of AU 5896	$3,444,800.00

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05-95-92-920510-3382 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIVISION, BUREAU OF DRUG & ALCOHOL SVCS, GOVERNOR COMMISSION FUNDS

100% OTHER FUNDS

Waypoint - Vendor #177166-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023	074-500589	Grants for Pub Asst and Rel	92057502	$108,000.00
			SUBTOTAL:	$108,000.00
			TOTAL OF AU 3382	$108,000.00

05-95-09-902010-5190 HEALTH AND SOCIAL SERVICES. HEALTH AND HUMAN SVCS, HHS: PUBLIC BUREAU OF COMM & HEALTH SERV, MATERNAL - CHILD HEALTH, HEALTH DIV

100% GENERAL FUNDS

Family Resource Center at Gorham - Vendor #162412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	102-500731	Contracts for Program Svcs	90004019	$56,250.00
2024 (7-1-23-6/30/24)	102-500731	Contracts for Program Svcs	90004019	$75,000.00
2025 (7/1/24-9/30/24)	102-500731	Contracts for Program Svcs	90004019	$18,750.00
			SUBTOTAL:	$150,000.00
			TOTAL OF AU 5190	$150,000.00

05-95-09-901010-5771 HEALTH AND SOCIAL SERVICES. HEALTH AND HUMAN SVCS, HHS: PUBLIC HEALTH DIV, BUREAU OF POLICY & PERFORMANCE, PH COVID-19 HEALTH DISPARITIES

100% FEDERAL FUNDS CFDA #93.391 FAIN#NH75OT000031

Waypoint - Vendor #177166-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Relief	90577160	$105,000.00
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Relief	90577150	$157,500.00
			SUBTOTAL:	$262,500.00

Family Resource Center at Gorham - Vendor #162412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Relief	90577150	$86,512.00
			SUBTOTAL:	$86,512.00
			TOTAL OF AU 5771	$349,012.00

05-95-90-902010-2451 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: PUBLIC HEALTH DIV, BUEAU OF COMM & HEALTH SERV, ARP - MIEC HOME VISITING 100% FEDERAL FUNDS CFDA #93.870, FAIN# X1141935 & X1145263

Community Action Partnership of Strafford County - Vendor #177200-B004				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Asst and Rel	90083206	$17,532.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$54,231.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Asst and Rel	90083207	$13,558.00
			SUBTOTAL:	$85,321.00

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Waypoint - Vendor #177166-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Assi and Rel	90083205	$114,064.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$125,000.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$142,350.00
			SUBTOTAL:	$381,414.00

Strafford VNA - Vendor #177244-B002				
State Fiscal Year	Class / Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Assi and Rel	90083206	$11,452.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$0.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$0.00
			SUBTOTAL:	$11,452.00

Family Resource Center at Gorham - Vendor #162412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	074-500589	Grants for Pub Assi and Rel	90083206	$68,714.00
2024 (7-1-23-6/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$50,000.00
2025 (7/1/24-9/30/24)	074-500589	Grants for Pub Assi and Rel	90083207	$56,532.00
			SUBTOTAL:	$175,246.00
			TOTAL OF AU 2451	$653,433.00

DPHS SUBTOTAL: $4,705,045.00

DIVISION FOR CHILDREN, YOUTH AND FAMILIES (DCYF) FUNDS

05-95-042-421010-2958, HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES DIV, CHILD PROTECTION, CHILD – FAMILY SERVICES
50% FEDERAL CFDA #93.658 FAIN # 2201NHFOST

Community Action Partnership of Strafford County - Vendor #177200-B004				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$199,673.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$266,230.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$66,557.00
			SUBTOTAL:	$532,460.00

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Granite VNA - Vendor #177243-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$87,035.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$116,046.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$29,012.00
			SUBTOTAL:	$232,093.00

The Family Resource Center at Gorham - Vendor #162412-B001				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$164,133.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$218,845.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$54,711.00
			SUBTOTAL:	$437,689.00

Waypoint - Vendor #177166-B002				
State Fiscal Year	Class/Account	Class Title	Job Number	Budget Amounts
2023 (10/1/22 - 6/30/23)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,102,682.00
2024 (7-1-23-6/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$1,470,242.00
2025 (7/1/24-9/30/24)	637-504181	TITLE IV-E FOSTER CARE SERVICE	42105869	$367,560.00
			SUBTOTAL:	$2,940,484.00
			Total of AU 2958	$4,142,726.00

DCYF SUBTOTAL:	**$4,142,726.00**
COMBINED HOME VISITING SERVICES CONTRACT TOTAL:	**$8,847,771.00**

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New Hampshire Department of Health and Human Services
Division of Finance and Procurement
Bureau of Contracts and Procurement
Scoring Sheet

Project ID # RFP-2023-DPHS-01-HOMEV

Project Title Home Visiting Services

	Maximum Points Available	Community Action Partnership of Strafford County	Granite VNA, Inc.	The Family Resource Center at Gorham	Waypoint
Technical					
Experience	30	25	24	30	28
Organizational Capacity	35	30	29	33	30
Performance Improvement	25	20	22	24	24
Subtotal - Technical	90	75	75	87	82
Cost					
Budget Sheet (Appendix F & F-1)	5	3	3	4	3
Program Staff List (Appendix G)	5	3	3	4	4
Subtotal - Cost	10	6	6	8	7
TOTAL POINTS	100	81	81	95	89
TOTAL PROPOSED VENDOR COST		$1,064,920	$464,186	$1,750,754	$5,880,968

	Reviewer Name	Title
1	Gayleen Smith	Administrator III, Finance
2	Lisa Cacciola (Lampron)	Administrator II, DPHS Finance
3	Kristi Hart	Program Specialist IV, DPHS
4	Ashley Janos	Program Specialist IV, DCYF
5	Kelly McCormac	Assessment Supervisor IV, DCYF
6	Aurelia Moran	Supervisor V, DPHS

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FORM NUMBER P-37 (version 12/11/2019)

Subject: Home Visiting Services / RFP-2023-DPHS-01-HOMEV-04

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 Health and Human Services		1.2 State Agency Address 129 Pleasant Street Concord, NH 03301-3857	
1.3 Contractor Name Waypoint		1.4 Contractor Address 464 Chestnut Street, PO Box 448 Manchester, NH 03105	
1.5 Contractor Phone Number 603-518-4212	1.6 Account Number 05-095-090-902010-5896 05-095-092-920510-3382 05-095-090-901010-5771 05-095-090-902010-2451 05-095-042-421010-2958	1.7 Completion Date 9/30/2024	1.8 Price Limitation $5,572,148.00
1.9 Contracting Officer for State Agency Robert W. Moore, Director		1.10 State Agency Telephone Number (603) 271-9631	
1.11 Contractor Signature DocuSigned by: Borja Alvarez de Toledo Date: 1/17/2023		1.12 Name and Title of Contractor Signatory Borja Alvarez de Toledo president and CEO	
1.13 State Agency Signature DocuSigned by: Patricia M. Tilley Date: 1/17/2023		1.14 Name and Title of State Agency Signatory Patricia M. Tilley Director	
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: DocuSigned by: Robyn Guarino On: 1/25/2023			
1.17 Approval by the Governor and Executive Council *(if applicable)* G&C Item number: G&C Meeting Date:			

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Date 1/17/2023

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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 as indicated in block 1.17, 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. 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 affected 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. 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, 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 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. The State shall have no liability to the Contractor other than the contract price.

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 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.

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. 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 race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3. 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 all rules, regulations and orders, and 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 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

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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) days from the date of the notice; and if the Event of Default is not timely cured, terminate this Agreement, effective two (2) 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.

8.3. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

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) 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) 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. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT B. In addition, at the State's discretion, the Contractor shall, within 15 days of notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement.

10. DATA/ACCESS/CONFIDENTIALITY/ PRESERVATION.

10.1 As used in this Agreement, the word "data" shall mean all 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 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data 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 The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice, which shall be provided to the State at least fifteen (15) days prior to the assignment, and a written consent of the State. For purposes of this paragraph, 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.

12.2 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State. 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. Unless otherwise exempted by law, the Contractor shall indemnify and hold harmless the State, its officers and employees, from and against any and all claims, liabilities and costs for any personal injury or property damages, patent or copyright infringement, or other claims asserted against the State, its officers or employees, which arise out of (or which may be claimed to arise out of) the acts or omissions of the

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Contractor, or subcontractors, including but not limited to the negligence, reckless or intentional conduct. 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 sovereign immunity of the State, 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 his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than ten (10) days prior to the expiration date of each insurance policy. 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 his or her 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. 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.

17. 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.

18. CHOICE OF LAW AND FORUM. This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. 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. Any actions arising out of this Agreement shall be brought and maintained in New Hampshire Superior Court which shall have exclusive jurisdiction thereof.

19. CONFLICTING TERMS. In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and/or attachments and amendment thereof, the terms of the P-37 (as modified in EXHIBIT A) shall control.

20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

21. 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.

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

23. 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.

24. 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.

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EXHIBIT A

Revisions to Standard Agreement Provisions

1. Revisions to Form P-37, General Provisions

1.1. Paragraph 3, Subparagraph 3.1; Effective Date/Completion of Services, is amended as follows:

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 as indicated in block 1.17, this Agreement, and all obligations of the parties hereunder, shall become effective October 1, 2022, ("Effective Date").

1.2. Paragraph 3, Effective Date/Completion of Services, is amended by adding subparagraph 3.3 as follows:

3.3. The parties may extend the Agreement for up to four (4) additional years from the Completion Date, contingent upon satisfactory delivery of services, available funding, agreement of the parties, and approval of the Governor and Executive Council.

1.3. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.3 as follows:

12.3. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions. The Contractor shall have written agreements with all subcontractors, specifying the work to be performed, and if applicable, a Business Associate Agreement in accordance with the Health Insurance Portability and Accountability Act. Written agreements shall specify how corrective action shall be managed. The Contractor shall manage the subcontractor's performance on an ongoing basis and take corrective action as necessary. The Contractor shall annually provide the State with a list of all subcontractors provided for under this Agreement and notify the State of any inadequate subcontractor performance.

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EXHIBIT B

Scope of Services

1. Introduction

1.1. The Contractor must provide services in accordance with Department requirements and the Healthy Families America (HFA) program, which is designed to reduce the risk of child maltreatment by strengthening parent-child relationships, promoting healthy childhood growth, and enhancing family functioning and protective factors. Families enroll voluntarily with HFA, and meet regularly with a Family Support Specialist and receive services tailored to their needs.

HFA is both culturally-inclusive and trauma-informed, and teaches parents about healthy child development and appropriate activities for keeping their child(ren) healthy and thriving. The Contractor must provide services to assist in:

- Increasing caregivers' ability to build attachments with their child(ren);
- Creating foundations for nurturing relationships;
- Enhancing family functioning through reducing risk and increasing protective factors; and
- Developing connections to additional resources, which include, but are not limited to:
  - Housing.
  - Food.
  - Various forms of treatment.
  - School readiness.
  - Childcare.
  - Access to diapers and other supplies.

1.2. The Department, through this Agreement, seeks to assess needs more holistically, and to create crucial linkages across systems that touch vulnerable populations to seamlessly connect them to supports and enhance available services at all levels of needs. The Department's Division of Public Health Services (DPHS) in conjunction with the Division for Children, Youth and Families (DCYF) are collaborating their efforts to achieve this goal. The Contractor must provide services using the HFA program to children and families on behalf of both Divisions.

1.3. For the purposes of this Agreement, all references to day(s) mean Monday through Friday, business days, excluding state and federal holidays.

2. Key Definitions & Terminology

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2.1. **Begin Date of Services** –The date the Contractor initiated contact with the client/family, and corresponds with the date listed as "begin date of services" on the Division for Children, Youth and Families (DCYF) Service Authorization Form.

2.2. **CPS** – Child Protective Services.

2.3. **CQI** – Continuous Quality Improvement.

2.4. **Cultural Humility** – Maintaining a willingness to suspend what you know, or what you think you know, about a person based on generalizations about their culture. Rather what you learn about a participant's culture stems from being open to what they themselves have determined is their personal expression of their heritage and culture.

2.5. **CWP** – Child Welfare Protocols.

2.6. **DCYF** – Division for Children, Youth and Families.

2.7. **DHHS** – Department of Health and Human Services.

2.8. **DPHS** – Division of Public Health Services.

2.9. **DO** – District Office.

2.10. **Face-to-face** – An in-person or virtual interaction or home visit (defined below) following the date on which the referral was made in which a provider begins working with the families to deliver HFA.

2.11. **FFPSA** – Family First Prevention Services Act.

2.12. **FTE** – Full time equivalent is a figure calculated from the number of full-time and part-time employees in an organization that represents these workers as a comparable number of full-time employees.

2.13. **GGK** – Growing Healthy Kids is a user friendly and truly comprehensive strength-based approach to growing nurturing parent-child relationships and supporting healthy childhood development.

2.14. **HFA** – Healthy Families America.

2.15. **HFA model** – A well-supported practice that provides home visiting designed to work with families who may have histories of trauma, intimate partner violence, mental health challenge, and/or substance use disorders. HFA services are delivered voluntarily, intensively, and over the long-term.

2.16. **HFA BPS** – Healthy Families America Best Practice Standards.

2.17. **HFA CWP model** – A set of protocols that requires the existing model requirements be provided, while offering additional guidance related to enrollment, caseload management, and establishing a formal MOU with child welfare in order to best serve families. Services are offered for a minimum of three years, regardless of the age of the child at intake, and supports families

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with children through age five, which allows sites to enroll families referred by child welfare up to age twenty-four months.

2.18. **HRSA** – Health Resource and Services Administration is the primary Federal agency for improving access to health care services for people who are uninsured, isolated, or medically vulnerable and the funding source of the MIECHV.

2.19. **MIECHV** – Maternal, Infant and Early Childhood Home Visiting – a program that supports pregnant individuals and families and helps at-risk parents of children from birth to kindergarten entry to tap the resources and hone the skills they need to raise children who are physically, socially and emotionally healthy and ready to learn.

2.20. **MOU/MOA** – Memorandum of Understanding/Memorandum of Agreement – a written agreement between two (2) parties to provide certain services.

2.21. **Open Assessment** – Any report of concern received by DCYF that is screened in by DCYF's central intake, and is being investigated by child protection staff.

2.22. **Open Case** – Any case opened to DCYF, including community-based/internal voluntary cases.

2.23. **Out-of-Home Placement** – The removal of a child from their normal place of residence to reside in a court-ordered substitute care setting under the placement and care responsibility of DCYF.

2.24. **PAT** – Parents As Teachers – a foundational curriculum used as an approach to working with families that is relationship-based and parenting-focused.

2.25. **PII** – Personally Identifiable Information.

2.26. **QA** – Quality Assurance.

2.27. **Virtual Home Visit** - A home visit, as described in an applicable service delivery model that is conducted solely by the use of electronic information and telecommunications technologies.[1]

2.28. **Well-supported practice** – An evidence-based service that has at least two (2) contrasts, with non-overlapping samples in studies carried out in usual care or practice settings that achieve a rating of moderate or high on design and execution and demonstrate favorable effects in a target outcome domain. At least one (1) of the contrasts must demonstrate a sustained favorable effect of at least 12 months beyond the end of treatment on at least one (1) target outcome.

3. Statement of Work

3.1. The Contractor must provide face-to-face voluntary home visiting services to

[1] Text - H.R.133 - 116th Congress (2019-2020): Consolidated Appropriations Act, 2021 | Congress.gov | Library of Congress

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pregnant individuals and families with children up to age five (5) by utilizing the evidence-based home visiting model from HFA.

3.2. The Contractor must ensure a minimum of 80% of families served using the traditional HFA model are enrolled in services prenatally or by when the child is 3-months old. The Contractor must offer services in compliance with HFA requirements after enrollment. Eligible families for traditional HFA services (as managed by the Division of Public Heather Services) must fall within one (1) or more of the federally defined priority populations below:

3.2.1. Are first-time parents.

3.2.2. Have income of less than one hundred eighty-five percent (<185%) of the U.S. Department of Health and Human Services (USDHHS) Poverty Guidelines.

3.2.3. Are less than twenty-one (21) years of age.

3.2.4. Have a history of child abuse or neglect, or have had interactions with child welfare services.

3.2.5. Have a history of substance misuse or need substance use disorder treatment.

3.2.6. Are users of tobacco products in the home.

3.2.7. Have or have had a child(ren) with low student achievement.

3.2.8. Have a child(ren) with developmental delays or disabilities.

3.2.9. Are in families that include individuals who are serving or have formerly served in the armed forces.

3.3. The Contractor must service a portion of families utilizing the HFA Child Welfare Protocols (CWP) in the Concord, Manchester, Seacoast and Southern DCYF Catchment Areas, which is attached as Attachment 1. Virtual home visits may also be accommodated, in compliance with HFA requirements. The Contractor must ensure families being served utilizing the CWP have an expanded enrollment window, allowing for enrollment of families with a child up to twenty-four (24) months old, referred by the child welfare system, who are participating in the service voluntarily. The Contractor must serve no less than 24 DCYF families during the first six (6) months of the contract period and no less than 89 families thereafter through the end of the contract period.

3.4. The Contractor must serve families under the traditional HFA model by DCYF Catchment Area as follows: Concord - 16 families, Manchester - 36 families, Seacoast - 24 families, and Southern - 25 families.

3.5. Eligible families for HFA CWP services must fall within one (1) of more of the following DCYF FFPSA priority populations:

3.5.1. Pregnant or parenting youth in foster care.

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3.5.2. Families with an infant born exposed to substances.

3.5.3. Families assessed by DCYF where the assessment will be closed unfounded.

3.5.4. Families with an open DCYF case who have recently reunified.

3.6. The Contractor must provide services with the goal of reducing risk of maltreatment for children assessed by the DCYF by:

3.6.1. Serving families involved with DCYF through open assessments or open cases, and also beyond their DCYF involvement.

3.6.2. Strengthening parent-child relationships.

3.6.3. Promoting healthy childhood growth.

3.6.4. Enhancing family functioning and protective factors both during and beyond their DCYF involvement with a long-term outcome goal of decreasing future system involvement and the need for out-of-home placement.

3.7. The Contractor must provide services that address the diverse needs of children and families in order to improve health and development outcomes for priority populations through evidence-based home visiting programs, with fidelity to the HFA model BPS. The Contractor must:

3.7.1. Be approved through the HFA model to provide services under this Agreement. The Contractor must:

3.7.1.1. Be approved through HFA, to implement the HFA CWP, which allows enrollment into HFA for DCYF referred families up to twenty-four (24) months of age.

3.7.1.2. Have HFA CWP available in the Concord, Manchester, Seacoast and Southern DCYF Catchment Areas within six (6) months of Governor and Executive Council approval of this Agreement.

3.7.1.2.1 Should the Contractor be unable to begin providing services through the HFA CWP by the date specified above, a corrective action plan must be developed by the Contractor and approved by the Department.

3.7.1.2.1.1. In the event that the HFA National Office denies the Contractor use of the CWP, the Contract must develop a subcontract or MOA with an approved, accredited HFA provider to provide this service, no later than

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thirty (30) business days from the date of the denial.

3.7.2. Select and implement an evidence-based curriculum to support prenatal individuals and newly parenting families. Family Support Specialists (FSS) must be trained within six (6) months of hire on the following:

3.7.2.1. Parents as Teachers (PAT), as an annually trained "Approved user;" or

3.7.2.2. Growing Great Kids (GGK) with certification of training.

3.7.3. Collaborate with other early childhood and social service agencies to support linkages to services beneficial to families.

3.7.4. Ensure the twelve (12) critical elements that make up the essential components of the HFA model are addressed in agency policies.

3.7.5. Enter personally identifiable information (PII) for all participants served under this Agreement into the Department's designated Home Visiting Data System.

3.8. The Contractor must identify positive ways to establish relationships with each family and keep families engaged and connected over time, as participants may be reluctant to engage in services and may have difficulty building trusting relationships. The Contractor must use creative outreach strategies, such as Motivational Interviewing, to re-engage families who have disengaged.

3.9. The Contractor must adhere to HFA's site requirements by ensuring weekly individual supervision is received by all direct service staff.

3.10. The Contractor must provide monthly reflective consultation groups for direct service staff and supervisors with a skilled Infant Mental Health consultant.

3.11. The Contractor must offer home visits by licensed nurses (registered nurse (RN) or greater education level) during the prenatal and post-partum periods at a frequency of once per trimester prenatally, and once per quarter during the first year post-partum.

3.12. The Contractor must offer services that are comprehensive and focus on supporting the parent/caregiver, as well as supporting the parent-child interaction and child development. Additionally, all families must be linked to a medical provider and other services, as appropriate.

3.13. The Contractor must obtain all necessary authorizations for release of information. All forms developed for authorization for release of information must be made available for review by the Department during site visits for selected case reviews.

3.14. The Contractor must coordinate, where possible, with other local service providers including, but not limited to:

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3.14.1. Health care providers.

3.14.2. Social workers.

3.14.3. Social services.

3.14.4. Early interventionists.

3.15. The Contractor must develop and maintain an advisory group comprised of community partners, family participants, and agency staff with a wide range of skills and abilities, including representatives with diverse skills, strengths, community knowledge, professions, and cultural diversity. The Contractor must:

3.15.1. Promote equity in all facets of operations with families, staff, and community.

3.15.2. Maintain policy or other written guidance expressing the Contractor's commitment to respectful staff interactions and supporting staff to continually strengthen their relational skills focused on diversity, equity, and inclusion.

3.15.3. Gather information to reflect on and better understand issues impacting staff and families served and to examine the effectiveness of its equity strategies.

3.15.4. Develop an equity plan based on what it learns about itself, from an equity perspective, in the way it supports its staff, the families it serves, and the community it works within, to set a course for continuous improvement to achieve greater equity in all facets of its work.

3.16. The Contractor must evaluate the progress of each program participant, as well as the performance of programs and services provided.

3.17. The Contractor must ensure that they:

3.17.1. Collaborate with relevant DCYF staff and related stakeholders when a valid release of information has been signed or a subpoena has been issued by the court.

3.17.2. Make reports to DCYF Central Intake if they suspect child abuse or neglect, consistent with their responsibility, as mandated reporters under New Hampshire law.

3.18. The Contractor must actively and regularly collaborate monthly, with both Divisions, to enhance contract management, improve results, and adjust program delivery and policy, based on successful outcomes.

3.19. **Compliance Standards**

3.19.1. The Contractor must offer services to all families referred by the Department unless that family is identified as ineligible for HFA under

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model specifications and requirements.

3.19.2. The Contractor must ensure referrals are accepted from multiple sources within the child welfare system including, but not limited to:

3.19.2.1. DCYF Juvenile Justice Services.

3.19.2.2. DCYF Child Protective Services (CPS).

3.19.3. The Contractor must adhere to all specifications and requirements, in compliance with NH DCYF's 5-year prevention plan and the Family First Prevention Service Act (FFPSA), for HFA CWP cases, including but not limited to:

3.19.3.1. All data reporting;

3.19.3.2. Record keeping and retention;

3.19.3.3. Fiscal compliance;

3.19.3.4. Maintenance of an evidence-based program identified as well-supported through the Title IV-E Clearinghouse;

3.19.3.5. Documented prevention type on the DCYF service authorization (which will be completed by the Department); and

Submitting a completed prevention plan every twelve (12) months for every DCYF- referred family. DCYF staff will complete the initial prevention plan for families, and the Contractor must update the plans at the 12-month mark and annually. The Department will distribute associated guidance after DCYF's 5-year plan is reviewed and approved.

3.19.4. The Contractor must collaborate with the Department to ensure that all program policies, procedures, and documents align with NH DCYF and DPHS policies, NH state law, and Department needs.

3.19.5. The Contractor must identify staff responsible for submitting reports and data to the Department within 30 days of the Agreement effective date.

3.20. Staffing:

3.20.1. The Contractor must follow all HFA Essential and Safety standards for staffing, hiring, training, and supervision, as outlined in HFA BPS.

3.20.2. The Contractor must ensure HFA home visiting staff have at least a high school diploma or equivalent, experience providing services to families, and knowledge of child development. Supervisors and Program Managers must have at least a Bachelor's degree with three (3) years prior experience.

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3.20.3. The Contractor must ensure FSSs receive extensive training in the program model before delivering the service and on a recurring basis. Training must comply with all HFA model specifications and requirements, including but not limited to:

3.20.3.1. Attending a four-day core training that is specialized based on role (assessors, home visitors, and supervisors).

3.20.3.2. Supervisors attending one (1) additional day for the core training and an optional three (3) days of training that focuses on building reflective supervision skills.

3.20.3.3. Program managers are required to attend core training plus three (3) days of training focused on how to implement the model to fidelity using the HFA BPS.

3.20.4. The Contractor must ensure additional available training is beneficial to the staff in delivering HFA. Training and conferences topics must include but are not limited to:

3.20.4.1. Substance use.

3.20.4.2. Childhood Maltreatment (Abuse/Neglect).

3.20.4.3. Parenting techniques.

3.20.4.4. Cultural competence/humility.

3.20.4.5. Childhood and generational trauma (Trauma-Informed).

3.20.4.6. Engagement strategies.

3.20.5. The Contractor must ensure each Family Support Specialist (FSS) maintains a caseload of no more than ten (10) to twelve (12) families per one (1) FTE for the first two (2) years of employment and no more than fifteen (15) to twenty (20) families per one (1) FTE after completing 24 months of employment for traditional HFA; and no more than ten (10) to twelve (12) families at any time for HFA CWP. These caseload maximums shall be prorated per HFA requirements for staff with less than 40 hours per week dedicated to the role of FSS.

3.21. The Contractor must maintain HFA accreditation and follow all BPS related to hiring, staffing levels, training, and supervision among other components of the model.

3.22. **Discharge from HFA services:**

3.22.1. The Contractor must develop a discharge plan for each family, beginning at the time of admission and continuing throughout service.

3.22.2. The Contractor must not discharge any family referred by the Department without following a protocol specified by the Department.

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3.23. Extending HFA services:

3.23.1. The Contractor must offer HFA Services to the child and family, for a minimum of three (3) years in total.

3.24. Reporting

3.24.1. The Contractor must complete a Monthly Capacity Analysis Report, which is attached as Attachment 2 on a form provided by the Department. This document must be submitted to DPHS no later than the 15th of each month, containing the prior month's data.

3.24.2. The Contractor, on a quarterly (January, April, July, and October) and annual (October) basis, must submit to DCYF:

3.24.2.1. Form 1, which is attached as Attachment 3.

3.24.2.2. Form 2, which is attached as Attachment 4.

3.24.3. The Contractor may be required to provide new data reporting requirements, or other key data and metrics including client-level demographic, performance, and service data to the Department in a format specified by the Department.

3.25. Background Checks

3.25.1. For all Contractor employees, interns, volunteers, and any subcontractor employees, interns, and volunteers providing services under this Agreement, the Contractor must, at its own expense, after obtaining a signed and notarized authorization form the individual(s) for whom information is being sought:

3.25.1.1. Submit the person's name for review against the Bureau of Elderly Adult Services (BEAS) state registry maintained pursuant to RSA 161-F:49;

3.25.1.2. Submit the person's name for review against the Division for Children, Youth and Families (DCYF) center registry pursuant to RSA 169-C:35;

3.25.1.3. Complete a criminal records check to ensure that the person has no history of:

3.25.1.3.1. Felony conviction; or

3.25.1.3.2. Any misdemeanor conviction involving:

3.25.1.3.2.1. Physical or sexual assault;

3.25.1.3.2.2. Violence;

3.25.1.3.2.3. Exploitation;

3.25.1.3.2.4. Child pornography.

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3.25.1.3.2.5. Threatening or reckless conduct;

3.25.1.3.2.6. Theft;

3.25.1.3.2.7. Driving under the influence of drugs or alcohol; or

3.25.1.3.2.8. Any other conduct that represents evidence of behaviors that could endanger the well-being of any individual served under this Agreement; and

3.25.2. Unless approval is granted by the Department, the Contractor must not permit any employee, volunteer, intern, or subcontractor to provide services under this Agreement until the Contractor has confirmed:

3.25.2.1. The individual's name is not on the BEAS state registry;

3.25.2.2. The individual's name is not on the DCYF central registry;

3.25.2.3. The individual does not have a record of a felony conviction; or

3.25.2.4. The individual does not have a record of any misdemeanors as specified above.

3.26. Confidential Data

3.26.1. The Contractor must meet all information security and privacy requirements as set by the Department and in accordance with the Department's Exhibit K, DHHS Information Security Requirements.

3.26.2. The Contractor must ensure any staff and/or volunteers involved in delivering services through this Agreement, sign an attestation agreeing to access, view, store, and discuss Confidential Data in accordance with federal and state laws and regulations and the Department's Exhibit K. The Contractor must ensure said individuals have a justifiable business need to access confidential data. The Contractor must provide attestations upon Department request.

3.26.3. Upon request, the Contractor must allow the Department to conduct a Privacy Impact Assessment (PIA) of its system. To conduct the PIA the Contractor must provide the Department access to applicable systems and documentation sufficient to allow the Department to asses, at minimum, the following:

3.26.3.1. How PII is gathered and stored;

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3.26.3.2. Who will have access to PII;

3.26.3.3. How PII will be used in the system;

3.26.3.4. How individual consent will be achieved and revoked and

3.26.3.5. Privacy practices.

3.26.4. The Department may conduct follow-up PIAs in the event there are either significant process changes or new technologies impacting the collection, processing or storage of PII.

3.27. Contract End-of-Life Transition Services.

3.27.1. If applicable, upon termination or expiration of the Agreement, the Parties agree to cooperate in good faith to effectuate a smooth secure transition of the services from the Contractor to the Department and, if applicable, the Contractor engaged by the Department to assume the services previously performed by the Contractor for this section the new Contractor shall be known as ("Recipient"). Ninety (90) days prior to the end-of the contract or unless otherwise specified by the Department, the Contractor must begin working with the Department and if applicable, the new Recipient to develop a Data Transition Plan (DTP) on a template provided by the Department.

3.27.2. The Contractor must use reasonable efforts to assist the Recipient, in connection with the transition from the performance of Services by the Contractor and their Affiliates to the performance of such Services. This may include assistance with the secure transfer of records (electronic and hard copy), transition of historical data (electronic and hard copy), the transition of such Service from the hardware, software, network and telecommunications equipment and internet-related information technology infrastructure ("Internal IT Systems") of Contractor to the Internal IT Systems of the Recipient and cooperation with an assistance to any third-party consultants engaged by Recipient in connection with the Transition Services.

3.27.3. If a system, database, hardware, software, and/or software license ("Tools") was purchased or created to manage, track, and/or store State Data in relationship to this Contract, said Tools will be inventoried and returned to the Department, along with the inventory document, once transition of State Data is complete.

3.27.4. The internal planning of the Transition Services by the Contractor and its Affiliates must be provided to the Department and if applicable, the Recipient in a timely manner. Any such Transition Services must be deemed to be Services for purposes of this Contract.

3.27.5. Should the Data Transition extend beyond the end of the Contract, the Contractor and its Affiliates agree Contract Information Security

Requirements, and if applicable, the Department's Business Associates Agreement terms and conditions remain in effect until the Data Transition is accepted as complete by the Department.

3.27.6. In the event where the Contractor has comingled Department Data and the destruction of Transition of said data is not feasible, the Department and Contractor will jointly evaluate regulatory and professional standards for retention requirements prior to destruction.

3.28. Website and Social Media

3.28.1. Contractor agrees that if performance of services on behalf of the Department involves using social media or a website to solicit information of individuals, or Confidential data, the Contractor must work with the Department's Communication Bureau to ensure that any social media or website designed, created, or managed on behalf of the Department meets all of the Department's and NH Department of Information Technology's website and social media requirements and policies.

3.28.2. Contractor agrees that protected health information (PHI), personal identifiable information (PII), or other confidential information solicited either by social media or the website that is maintained, stored or captured must not be further disclosed, unless expressly provided in the Contract. The solicitation or disclosure of PHI, PII, or other confidential information is subject to the Information Security Requirements Exhibit, the Business Associates Agreement Exhibit and all applicable state rules and state and federal laws. Unless specifically required by the Contract and unless clear notice is provided to users of the website or social media, the Contractor agrees that site visitation will not be tracked, disclosed or used for website or social medial analytics or marketing.

3.29. Performance Measures

3.29.1. For services provided for DPHS, the Department will monitor Contractor performance by reviewing indicated reporting requirements on Form 1, which is attached as Attachment 3, and Form 2, which is attached as Attachment 4, and working with the Contractor to select areas to improve upon utilizing CQI strategies through a data driven process.

3.29.2. For services provided for DCYF, the Department will focus on specific data points collected through its internal data systems, monthly, quarterly and annual submissions via email, and existing HFA data collection reports on DCYF Key Performance Metrics, which are attached as Attachment 5.

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4. Exhibits Incorporated

4.1. The Contractor must use and disclose Protected Health Information in compliance with the Standards for Privacy of Individually Identifiable Health Information (Privacy Rule) (45 CFR Parts 160 and 164) under the Health Insurance Portability and Accountability Act (HIPAA) of 1996, and in accordance with the attached Exhibit I, Business Associate Agreement, which has been executed by the parties.

4.2. The Contractor must manage all confidential data related to this Agreement in accordance with the terms of Exhibit K, DHHS Information Security Requirements.

4.3. The Contractor must comply with all Exhibits D through K, which are attached hereto and incorporated by reference herein.

5. Additional Terms

5.1. Impacts Resulting from Court Orders or Legislative Changes

5.1.1. The Contractor agrees that, to the extent future state or federal legislation or court orders may have an impact on the Services described herein, the State has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

5.2. Federal Civil Rights Laws Compliance: Culturally and Linguistically Appropriate Programs and Services

5.2.1. The Contractor must submit, within ten (10) days of the Agreement Effective Date, a detailed description of the communication access and language assistance services to be provided to ensure meaningful access to programs and/or services to individuals with limited English proficiency; individuals who are deaf or have hearing loss; individuals who are blind or have low vision; and individuals who have speech challenges.

5.3. Credits and Copyright Ownership

5.3.1. All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Agreement must include the following statement, "The preparation of this (report, document etc.) was financed under an Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services."

5.3.2. All materials produced or purchased under the Agreement must have

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prior approval from the Department before printing, production, distribution or use.

5.3.3. The Department must retain copyright ownership for any and all original materials produced, including, but not limited to:

5.3.3.1. Brochures.

5.3.3.2. Resource directories.

5.3.3.3. Protocols or guidelines.

5.3.3.4. Posters.

5.3.3.5. Reports.

5.3.4. The Contractor must not reproduce any materials produced under the Agreement without prior written approval from the Department.

5.4. Operation of Facilities: Compliance with Laws and Regulations

5.4.1. In the operation of any facilities for providing services, the Contractor must comply with all laws, orders and regulations of federal, state, county and municipal authorities and with any direction of any Public Officer or officers pursuant to laws which must impose an order or duty upon the contractor with respect to the operation of the facility or the provision of the services at such facility. If any governmental license or permit must be required for the operation of the said facility or the performance of the said services, the Contractor will procure said license or permit, and will at all times comply with the terms and conditions of each such license or permit. In connection with the foregoing requirements, the Contractor hereby covenants and agrees that, during the term of this Agreement the facilities must comply with all rules, orders, regulations, and requirements of the State Office of the Fire Marshal and the local fire protection agency, and must be in conformance with local building and zoning codes, by-laws and regulations.

6. Records

6.1. The Contractor must keep records that include, but are not limited to:

6.1.1. Books, records, documents and other electronic or physical data evidencing and reflecting all costs and other expenses incurred by the Contractor in the performance of the Contract, and all income received or collected by the Contractor.

6.1.2. All records must be maintained in accordance with accounting procedures and practices, which sufficiently and properly reflect all such costs and expenses, and which are acceptable to the Department, and to include, without limitation, all ledgers, books, records, and original

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evidence of costs such as purchase requisitions and orders, vouchers, requisitions for materials, inventories, valuations of in-kind contributions, labor time cards, payrolls, and other records requested or required by the Department.

6.1.3. Statistical, enrollment, attendance or visit records for each recipient of services, which records must include all records of application and eligibility (including all forms required to determine eligibility for each such recipient), records regarding the provision of services and all invoices submitted to the Department to obtain payment for such services.

6.2. During the term of this Agreement and the period for retention hereunder, the Department, the United States Department of Health and Human Services, and any of their designated representatives must have access to all reports and records maintained pursuant to the Agreement for purposes of audit, examination, excerpts and transcripts. If, upon review of the Final Expenditure Report the Department must disallow any expenses claimed by the Contractor as costs hereunder the Department must retain the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

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Attachment 1:
DCYF Catchment Area Locations

Berlin *(650 Main Street Suite 200, Berlin NH 03570)*		
Serving the cities, towns, and locations of:		
▪ Atkinson and Gilmanton Academy Grant	▪ Dummer	▪ Pittsburg
▪ Bean's Grant	▪ Errol	▪ Randolph
▪ Bean's Purchase	▪ Ervings Location	▪ Riverton
▪ Berlin	▪ Fabyan Gorham	▪ Sargent's Purchase
▪ Bretton Woods	▪ Grange Greens Grant	▪ Second College Grant
▫ Cambridge	▪ Groveton	▫ Shelburne
▪ Carroll	▪ Hadley's Purchase	▪ South Lancaster
▪ Cascade	▪ Jefferson	▪ Stark
▪ Chandlers Purchase	▪ Kilkenny	▪ Stewartstown
▪ Clarksville	▪ Lancaster	▪ Stratford
▪ Colebrook	▪ Low and Burbank's Grant	▪ Stratford Hollow
▪ Columbia	▫ Maplewood	▪ Success
▪ Coos Junction	▪ Martin's Location	▪ Thompson & Meserve's Purchase
▪ Crawford's Purchase	▪ Milan	▪ Twin Mountain
▪ Crystal	▪ Millsfield	▪ Wentworth's Location
▪ Cutt's Grant	▪ North Stratford	▪ West Milan
▪ Dalton	▪ Northumberland	▪ West Stewartstown
▪ Dix's Grant	▫ Odell	▪ Whitefield
▪ Dixville	▪ Percy	
	▪ Pinkham's Grant	

Littleton *(80 North Littleton Road, Littleton, NH 03561)*	
Serving the cities, towns, and locations of:	
▪ Apthorp	▪ Lisbon
▪ Bath	▪ Littleton
▪ Benton	▪ Livermore
▪ Bethlehem	▪ Lyman
▫ Bethlehem Junction	▪ Monroe
▪ Center Haverhill	▪ North Haverhill
▪ East Haverhill	▪ North Woodstock
▪ Easton	▪ Pierce Bridge
▫ Franconia	▪ Piermont
▪ Glencliff	▪ Pike
▪ Haverhill	▪ Sugar Hill
▫ Landaff	▪ Warren
▪ Lincoln	▪ Woodstock
	▪ Woodsville

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Attachment 1:
DCYF Catchment Area Locations

Conway
(71 Hobbs Street, Conway NH 03818)

Serving the cities, towns, and locations of:

- Albany
- Bartlett
- Brookfield
- Center Conway
- Center Effingham
- Center Ossipee
- Center Sandwich
- Center Tuftonboro
- Chatham
- Chocorua
- Conway
- East Conway
- East Wakefield
- Eaton
- Effingham
- Freedom
- Glen
- Granite
- Hale's Location
- Hart's Location
- Intervale
- Jackson
- Kearsarge
- Madison
- Melvin Village
- Mirror Lake
- Moultonborough
- Moultonville
- North Conway
- North Sandwich
- Ossipee
- Redstone
- Sanbornville
- Sandwich
- Silver Lake
- Snowville
- South Chatham
- South Effingham
- South Tamworth
- Tamworth
- Tuftonboro
- Union
- Wakefield
- West Ossipee
- Wolfeboro
- Wolfeboro Falls
- Wonalancet

Claremont
(17 Water Street, Suite 301, Claremont NH 03743)

Serving the cities, towns, and locations of:

- Acworth
- Beauregard Village
- Burkehaven
- Canaan
- Charlestown
- Claremont
- Cornish
- Cornish Flat
- Croydon
- East Lempster
- Enfield
- Enfield Center
- Etna
- Georges Mills
- Goshen
- Grafton
- Grantham
- Guild
- Hanover
- Langdon
- Lebanon
- Lempster
- Lyme
- Lyme Center
- Meriden
- Mount Sunapee
- Newport
- Orange
- Orford
- Plainfield
- South Acworth
- South Charlestown
- Springfield
- Sunapee
- Unity
- Washington
- West Canaan
- West Lebanon
- West Springfield
- West Unity

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Attachment 1:
DCYF Catchment Area Locations

Keene
(111 Key Road, Keene NH 03431)

Serving the cities, towns, and locations of:

- Alstead
- Antrim
- Ashuelot
- Bennington
- Chesterfield
- Deering
- Drewsville
- Dublin
- East Sullivan
- East Swanzey
- East Westmoreland
- Fitzwilliam
- Gilsum
- Greenfield
- Greenville
- Hancock
- Harrisville
- Hillsborough
- Hillsborough Upper Village
- Hinsdale
- Jaffrey
- Keene
- Marlborough
- Marlow
- Munsonville
- Nelson
- New Ipswich
- North Swanzey
- North Walpole
- Peterborough
- Richmond
- Rindge
- Roxbury
- Sharon
- Spofford
- Stoddard
- Sullivan
- Surry
- Swanzey
- Temple
- Troy
- Walpole
- West Chesterfield
- West Deering
- West Peterborough
- West Swanzey
- Westmoreland
- Westport
- Winchester
- Windsor

Laconia
(65 Beacon Street West, Laconia NH 03246)

Serving the cities, towns, and locations of:

- Alexandria
- Alton
- Alton Bay
- Ashland
- Barnstead
- Bear Island
- Belmont
- Bridgewater
- Bristol
- Campton
- Center Barnstead
- Center Harbor
- Dorchester
- East Holderness
- Ellsworth
- Gilford
- Gilmanton
- Gilmanton Corners
- Gilmanton Iron Works
- Glendale
- Governor Isle
- Groton
- Hebron
- Holderness
- Laconia
- Lakeport
- Lochmere
- Lower Gilmanton
- Meredith
- Meredith Center
- New Hampton
- North Sanbornton
- Plymouth
- Quincy
- Rumney
- Sanbornton
- Thornton
- Tilton
- Waterville Valley
- Weirs
- Wentworth
- West Alton
- West Rumney
- Winnisquam

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Attachment 1:
DCYF Catchment Area Locations

Concord *(40 Terrill Park Drive, Concord NH 03301)*		
Serving the cities, towns, and locations of:		
▪ Allenstown	▪ Epsom	▪ Penacook
▪ Andover	▪ Francestown	▪ Pinardville
▪ Blodgett Landing	▪ Franklin	▫ Pittsfield
▪ Boscawen	▪ Gerrish	▪ Potter Place
▪ Bow	▪ Goffstown	▪ Salisbury
▪ Bradford	▪ Gossville	▪ Short Falls
▪ Canterbury	▫ Henniker	▪ South Danbury
▪ Chichester	▪ Hill	▪ South Sutton
▫ Concord	▪ Hooksett	▫ Suncook
▪ Contoocook	▪ Hopkinton	▪ Sutton
▪ Danbury	▪ Loudon	▪ Warner
▫ Davisville	▫ New Boston	▪ Weare
▪ Dunbarton	▪ New London	▪ Webster
▪ East Andover	▪ Newbury	▪ Webster Lake
▪ East Concord	▪ North Sutton	▫ West Franklin
▪ East Sutton	▪ North Wilmot	▪ Wilmot
▪ Elkins	▪ Northfield	▪ Wilmot Flat
	▪ Pembroke	

Manchester *(1050 Perimeter, Suite 501, Manchester, NH 03103)*
Serving the city of: Manchester

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Attachment 1:
DCYF Catchment Area Locations

Rochester
(150 Wakefield Street Suite 22, Rochester NH 03867)

Serving the cities, towns, and locations of:

- Barrington
- Center Strafford
- Dover
- Durham
- East Rochester
- Farmington
- Gonic
- Lee
- Madbury
- Middleton
- Milton
- Milton Mills
- New Durham
- Rochester
- Rollinsford
- Strafford

Seacoast
(19 Rye St. Portsmouth, NH 03801)

Serving the cities, towns, and locations of:

- Auburn
- Brentwood
- Candia
- Danville
- Deerfield
- East Kingston
- Epping
- Exeter
- Fremont
- Greenland
- Hampton
- Hampton Beach
- Hampton Falls
- Kensington
- Kingston
- New Castle
- Newfields
- Newington
- Newmarket
- Newton
- Newton Junction
- North Hampton
- Northwood
- Nottingham
- Portsmouth
- Raymond
- Rye
- Rye Beach
- Seabrook
- Somersworth
- South Hampton
- Stratham
- West Nottingham

Southern
(26 Whipple St. Nashua, NH 03060)

<u>District Office</u> serving the cities, towns, and locations of:

- Amherst
- Bedford
- Brookline
- Hollis
- Hudson
- Litchfield
- Lyndeborough
- Mason
- Merrimack
- Milford
- Mont Vernon
- Nashua
- North Salem
- Pelham
- Reeds Ferry
- Salem
- Wilton
- Windham

<u>Southern Telework</u> serving the cities, towns, and locations of:

- Atkinson
- Chester
- Derry
- East Derry
- East Hampstead
- Hampstead
- Londonderry
- Plaistow
- Sandown

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Attachment 2 - Capacity Analysis Report

CASELOAD AND CAPACITY ANALYSIS - to be completed for each month of the contract period

INTRODUCTION & NOTES

This Excel tool has been adapted to streamline the caseload and capacity analysis and reporting processes, for both the Local Implementing Agency and the State Team; and to standardize the way metrics are calculated across all LIAs. Please do not copy this workbook to use next month. Instead, open the file named for monthly data you are reporting (i.e. in early January, use the file named "2021-12 to report December 2021 data). Please do not change the name of the file when emailing the report to NH DPHS. The "New Home Visitor" tab has been designed for home visitors in their first 24 months to better accommodate new HFA BPs.

USE

1. Click on a home visitor worksheet (HV) tab, below. Enter the home visitor's information into the GREEN CELLS only: their Name, # hours per week paid by HFA, and % of HFA time as a home visitor.
2. Enter the number of families on each level that the home visitor saw in the reporting month.
3. Repeat Steps 1-2 for each home visitor allocated to HFA Home Visiting during the month, in the separate tabs provided.
4. If you have a home visitor position that is currently vacant, please indicate this using "RECRUITMENT" instead of the home visitor's name.
5. Click the "Capacity Analysis" worksheet tab to review the analysis for your Local Implementing Agency this month.

NOTE: to optimize your case-assignment planning, use next month's workbook to model your family and case-weight numbers, and see what your performance results will be!

MAINTENANCE

PLEASE FOLLOW IF YOUR FAMILY SERVICE WORKER CHANGED IN THE REPORTING MONTH

If your HFA home visiting staff changed, but the number of HFA home visitors did not exceed 5, simply change the "Name of staff member" in Cell B2. Return to USE, Step 1.

If the number of HFA home visitors during the reporting month was greater than 5, contact the State Team for technical assistance, OR:

1. Duplicate the last FSW worksheet tab (right-click, select "move or copy", click box "create a copy", move to "before Capacity Analysis")
2. Update formulas in the Capacity Analysis worksheet tab to include the new FSW worksheet:
   a. # families served, per case weight category (cells E3:I3)
   b. % of monthly home visitor capacity utilized (cells E7, F7)
   c. Service Utilization % (cells, E10, F10)

Note: The # of hours paid should be the salaried or expected contracted hours for HFA only, regardless of vacation days, out of office, sick, etc.

Note: The % of time spent home visiting should be the % of time - of the HFA hours recorded above - doing home visiting work. For FSWs who are NOT also doing FAW work, the % will be 100%

Once the green cells are filled, all orange fields and the Capacity Analysis worksheet will auto-calculate for the individual home visitors and for your LIA

If the total number of families or the total weighted caseload is above the maximum, the corresponding field will turn red

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Attachment 2 - Capacity Analysis Report

Month for Caseload Analysis	January 2022				Permanent Special Circumstances (PSC) families should be captured at the IP level, AND in this section if they have any of the following: need an interpreter, have multiple births (twins, triplets, etc.), have significant additional travel time, or a child with special needs						
Hire Date (New Hire under 24 months emp)		6/28/2022									
Name of staff member					# of families with additional caseweight due to PSCs						
# hours per week worked for HFA only											
Of the hours above, % time as HFA home visitor											
Caseload multiplier	0.00										
Levels	Description	Number of families on Level	Weight	Weighted Caseload per Level	0.5	1	1.5	2	2.5	3	Extra Case Weight
Level 1P	Prenatal - visits every other week during first and second trimester		2.00	0		-					0
Level 1P	Prenatal - visits every week in third trimester (or earlier if needed)		2.00	0		-					0
Level 1	First 6 months after birth or enrollment - visits every week		1.00	0		-					0
Level 2	Visits every other week		1.00	0		-					0
Level 3	Visits once per month		0.50	0		-					0
Level 1SS	Crisis intervention - visits weekly, or more if needed		1.00	0							
Level 4	Visits once per quarter		0.25	0							
Creative Outreach (CO)	Creative Outreach (CO) is for families that completed at least one										
Level CO1	home visit but became disengaged.		2.00	0							
Level CO2	CO families are given the same caseweight they had prior to going on		1.00	0							
Level CO3	CO, to ensure space if re-engaged.		0.50	0							
Temporary Assignments (TO, TR)	Temporarily Out of Area (TO): for up to 3 months, families are given										
Level TO1	the same caseweight they had prior to going on CO, to ensure space if		2.00	0							
Level TO2	re-engaged.		1.00	0							
Level TO3	Temporary Re-Assignment (TR): for up to 3 months, families accept		0.50	0							
Level TR	voluntary re-assignment to another FSW due to leave or turnover		0.50	0							
	Actual totals	0		0	Total additional PSC caseweights						
	Maximum for Oldfey	0		0	0						
	HFA CAPACITY CALCULATION	#DIV/0!									
	FSW Contribution to HRSA CAPACITY CALCULATION	0.0%									

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Attachment 2 - Capacity Analysis Report

Month for Caseload Analysis		6/28/2023			Permanent Special Circumstances (PSC) families should be captured above at their level AND in this section if they have any of the following: need an interpreter, have multiple births (twins, triplets, etc.), have significant additional travel time, or a child with special needs							
Hire Date (New Hire under 24 months resp)					# of families with additional caseweights due to PSCs							
Name of staff member												
# hours per week worked by HFA only												
Of the hours above, % time as HFA home visitor												
Caseload multiplier	0.00											
Levels	Description	Number of Families on Level	Weight	Weighted Caseload per Level	0.5	1	1.5	2	2.5	3	Extra Case Weight	
Level 2P	Prenatal - visits every other week during first and second trimester		2.00	0							0	
Level 1P	Prenatal - visits every week in third trimester (or earlier if needed) -		2.00	0							0	
Level 1	First 6 months after birth or enrollment - visits every week		2.00	0							0	
Level 2	Visits every other week		1.00	0							0	
Level 3	Visits once per month		0.50	0							0	
Level 1SS	Crisis intervention - visits weekly, or more if needed		3.00	0								
Level 4	Visits once per quarter		0.25	0								
Creative Outreach (CO)	Creative Outreach (CO) is for families that completed at least one											
Level CO1	home visit but became disengaged.		2.00	0								
Level CO2	CO families are given the same caseweight they had prior to going on		1.00	0								
Level CO3	CO, to ensure space if re-engaged.		0.50	0								
Temporary Assignments (TO/TR)	Temporarily Out of Area (TO): for up to 3 months, families are given											
Level TO1	the same caseweight they had prior to going on CO, to ensure space if		2.00	0								
Level TO2	re-engaged.		1.00	0								
Level TO3	Temporary Re-Assignment (TR): for up to 3 months, families accept		0.50	0								
Level TR	voluntary re-assignment to another FSW due to leave or turnover		0.50	0								
	Actual totals:	0		0	Total additional PSC caseweights							
	Maximum for fidelity:	0		0	0							
	HFA CAPACITY CALCULATION	#DIV/0!										
	FSW Contribution to HRSA CAPACITY CALCULATION	0.0%										

not applicable

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Attachment 2 - Capacity Analysis Report

Month for Caseload Analysis	
Name of staff member	
# hours per week worked for HFA only	
Of the hours above, % time as HFA home visitor	
Caseload multiplier	0.00

Permanent Special Circumstances (PSC) families should be captured above at their level. ANDI in this section if they have any of the following: need an interpreter, have multiple births (twins, triplets, etc.), have significant additional travel time, or a child with special needs

"Levels"	Description	Number of Families on Level	Weight	Weighted Caseload per Level	# of families with additional caseweight due to PSCs: 0.5	1	1.5	2	2.5	3	Extra Case Weights
Level LP	Prenatal - visits every other week during first and second trimester		2.00	0							0
Level LP	Prenatal - visits every week in third trimester (or earlier if needed)		2.00	0							0
Level 1	First 6 months after birth or enrollment - visits every week		2.00	0							0
Level 2	Visits every other week		1.00	0							0
Level 3	Visits once per month		0.50	0							0
Level LSS	Crisis intervention - visits weekly, or more if needed		3.00	0							
Level 4	Visits once per quarter		0.25	0							
Creative Outreach (CO)	Creative Outreach (CO) is for families that completed at least one										
Level CO1	home visit but become disengaged.		2.00	0							
Level CO2	CO families are given the same caseweight they had prior to going on		1.00	0							
Level CO3	CO, to ensure space if re-engaged.		0.50	0							
Temporary Assignments (TO, TR)	Temporarily Out of Area (TO): for up to 3 months, families are given										
Level TO1	the same caseweight they had prior to going on CO, to ensure space		2.00	0							
Level TO1	if re-engaged.		1.00	0							
Level TO3	Temporary Re-Assignment (TR): for up to 3 months, families accept		0.50	0							
Level TR	voluntary re-assignment to another FSW due to leave or turnover		0.50	0							
	Actual totals:	0		0	Total additional PSC caseweights:						
	Maximums for Fidelity:	0		0	0						
	HFA CAPACITY CALCULATION:	#DIV/0!									
	FSW Contribution to HFSA CAPACITY CALCULATION:	0.0%									

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Attachment 2 - Capacity Analysis Report

Month for Caseload Analysis	
Name of staff member	
# hours per week worked for HFA only	
Of the hours above, % that is HFA home visitor	
Caseload multiplier	0.00

Levels	Description	Number of Families on Level	Weight	Weighted Caseload per Level
Level EP	Prenatal - visits every other week during first and second trimester		2.00	0
Level LP	Prenatal - visits every week in third trimester (or earlier if needed)		2.00	0
Level 1	First 6 months after birth or enrollment - visits every week		1.00	0
Level 2	Visits every other week		1.00	0
Level 3	Visits once per month		0.50	0
Level LSS	Crisis intervention - visits weekly, or more if needed		3.00	0
Level 4	Visits once per quarter		0.25	0
Creative Outreach (CO)	Creative Outreach (CO) is for families that completed at least one home visit but became disengaged. CO families are given the same caseweight they had prior to going on CO, to ensure space if re-engaged.			
Level CO1			2.00	0
Level CO2			1.00	0
Level CO3			0.50	0
Temporary Assignments (TO, TR)	Temporarily Out of Area (TO): for up to 3 months, families are given the same caseweight they had prior to going on CO, to ensure space if re-engaged. Temporary Re-Assignment (TR): for up to 3 months, families accept voluntary re-assignment to another FSW due to leave or turnover			
Level TO1			2.00	0
Level TO2			1.00	0
Level TO3			0.50	0
Level TR			0.50	0
	Actual totals			0
	Maximum for fidelity	0		0
	HFA CAPACITY CALCULATION	#DIV/0!		
	FSW Contribution to HFSA CAPACITY CALCULATION	0.0%		

Permanent Special Circumstances (PSC) families should be captured above at their level, AND in this section if they have any of the following: need an interpreter, have multiple births (twins, triplets, etc.), have significant additional travel time, or a child with special needs

# of families with additional caseweight due to PSCs						
0.5	1	1.5	2	2.5	3	Extra Case Weight
						0
						0
						0
						0
						0

Total additional PSC caseweights: 0

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Attachment 2 - Capacity Analysis Report

Month for Caseload Analysis	
Name of HFA member	
# hours per week worked for HFA only	
Of the hours above, % time as HFA home visitor	
Caseload multiplier	0.00

Levels	Description	Number of Families on Level	Weight	Weighted Caseload per Level
Level 2P	Prenatal - visits every other week during first and second trimester		2.00	0
Level 1P	Prenatal - visits every week in third trimester (or earlier if needed)		2.00	0
Level 1	First 6 months after birth or enrollment - visits every week		2.00	0
Level 2	Visits every other week		1.00	0
Level 3	Visits once per month		0.50	0
Level 3SS	Crisis intervention - visits weekly, or more if needed		1.00	0
Level 4	Visits once per quarter		0.25	0
Creative Outreach (CO)	Creative Outreach (CO) is for families that completed all program			
Level CO1	home visit but became disengaged.		2.00	0
Level CO2	CO families are given the same caseweight they had prior to going on		1.00	0
Level CO3	CO, to ensure space if re-engaged.		0.50	0
Temporary Assignments (TO, TR)	Temporarily Out of Area (TO): for up to 3 months, families are given			
Level TO1	the same caseweight they had prior to going on CO, to ensure space		2.00	0
Level TO2	if re-engaged.		1.00	0
Level TO3	Temporary Re-Assignment (TR): for up to 3 months, families accept		0.50	0
Level TR	voluntary re-assignment to another FSW due to leave or turnover		0.50	0
	Actual totals	0		0
	Maximum for Fidelity	0		0
	HFA CAPACITY CALCULATION	#DIV/0!		
	FSW Contribution to NFSA CAPACITY CALCULATION	0.0%		

Permanent Special Circumstances (PSC) families should be captured above at their level, AND in this section if they have any of the following: need an interpreter, have multiple births (twins, triplets, etc.), have significant additional travel time, or a child with special needs

# of families with additional caseweight due to PSCs						
0.5	1	1.5	2	2.5	3	Extra Case Weight
						0
						0
						0
						0
						0

Total additional PSC caseweights: 0

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Attachment 2 - Capacity Analysis Report

Month for Caseload Analysis	
Name of staff member	
# hours per week worked for HFA only	
Of the hours above, % time as HFA home visitor	
Caseload multiplier	0.00

Levels	Description	Number of Families on Level	Weight	Weighted Caseload per Level
Level 2P	Prenatal - visits every other week during first and second trimester	-	2.00	0
Level 1P	Prenatal - visits every week in third trimester (or earlier if needed)		2.00	0
Level 1	First 6 months after birth or enrollment - visits every week		2.00	0
Level 2	Visits every other week		1.00	0
Level 3	Visits once per month		0.50	0
Level LSS	Crisis intervention - visits weekly, or more if needed		3.00	0
Level 4	Visits once per quarter		0.25	0
Creative Outreach (CO)	Creative Outreach (CO) is for families that completed at least one home visit but became disengaged. CO families are given the same caseweight they had prior to going on CO, to ensure space if re-engaged.			
Level CO1			2.00	0
Level CO2			1.00	0
Level CO3			0.50	0
Temporary Assignments (TO, TR)	Temporarily Out of Area (TO): for up to 3 months, families are given the same caseweight they had prior to going on CO, to ensure space if re-engaged. Temporary Re-Assignment (TR): for up to 3 months, families receive voluntary re-assignment to another FSW due to leave or turnover			
Level TO1			2.00	0
Level TO2			1.00	0
Level TO3			0.50	0
Level TR			0.50	0
	Actual totals	0		0
	Maximum for Fidelity	0		0
	HFA CAPACITY CALCULATION	#DIV/0!		
	FSW Contribution to HRSA CAPACITY CALCULATION	0.0%		

Permanent Special Circumstances (PSC) families should be captured above at their level, AND in this section if they have any of the following: need an interpreter, have multiple births (twins, triplets, etc.), have significant additional travel time, or a child with special needs

# of families with additional caseweight due to PSCs							
	0.5	1	1.5	2	2.5	3	Extra Case Weight
Level 2P							0
Level 1P							0
Level 1							0
Level 2							0
Level 3							0
Level LSS							0

0% families

Total additional PSC caseweights
0

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Attachment 2: Capacity Analysis Report

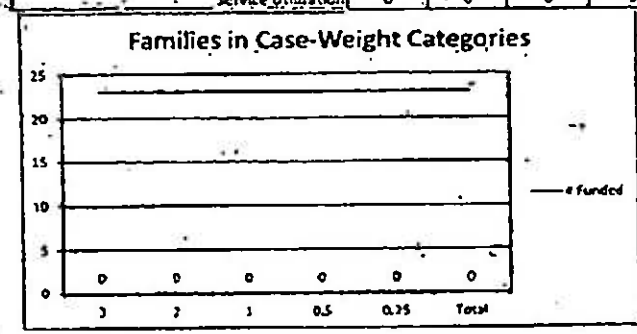
LIA MONTHLY CAPACITY ANALYSIS

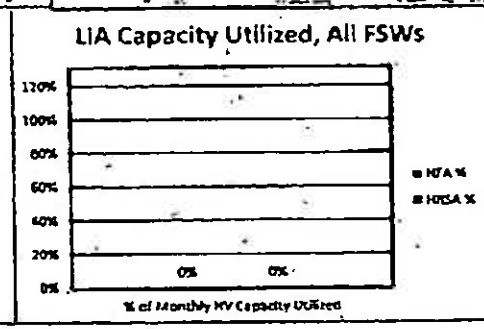
Case-Weight Categories:

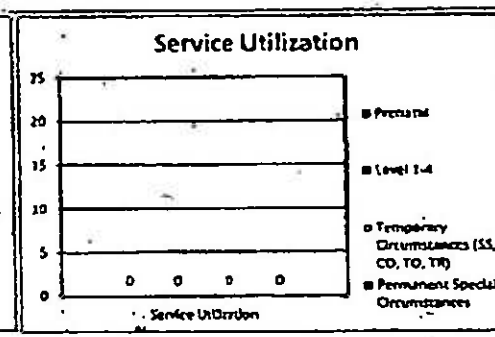
	3	2	1	0.5	0.25	Total
# Families Served per category	0	0	0	0	0	0
# Funded	[illegible]	7	[illegible]	[illegible]	[illegible]	23

% of Monthly HV Capacity Utilized	HFA %	MRSA %	Difference
	#DIV/0!	0%	#DIV/0!

Service Utilization	Prenatal	Level 1-4	Temporary	Permanent
	0	0	0	0







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Attachment 3 - FORM 1

THE MATERNAL, INFANT, AND EARLY CHILDHOOD HOME VISITING PROGRAM

DEMOGRAPHIC, SERVICE UTILIZATION, AND SELECT CLINICAL INDICATORS

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0906-0017. Public reporting burden for this collection of information is estimated to average 560 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-29, Rockville, Maryland, 20857.

July 24, 2018

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Attachment 3 - Form 1

SECTION A: PARTICIPANT DEMOGRAPHICS

Table 1: Unduplicated Count of New and Continuing Program Participants Served by MIECHV

Participants	Number Newly Enrolled	Number Continuing During Reporting Period	Total
Pregnant Women			
Female Caregivers			
Male Caregivers			
All Adults (Auto Calculate)			
Female Index Children			
Male Index Children			
All Index Children (Auto Calculate)			

Notes:

Table 2: Unduplicated Count of Households Served by MIECHV

Households	Number Newly Enrolled	Number Continuing During Reporting Period	Total
Number of Households			

Notes:

Table 3: Unduplicated Count of Participants and Households Served by State Home Visiting Programs (non-MIECHV)

Participants and Households	Total Number Served during Reporting Period
Pregnant Women	
Female Caregivers	
Male Caregivers	
All Adults (Auto Calculate)	
Female Index Children	
Male Index Children	
All Index Children (Auto Calculate)	
Number of Households	

Notes:

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Table 4: Adult Participants by Age

Adult Participants	≤17	18-19	20-21	22-24	25-29	30-34	35-44	45-54	55-64	≥65	Unknown/Did not Report*	Total
Pregnant Women												
Female Caregivers												
Male Caregivers												
All Adults (Auto Calculate)												

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 5: Index Children by Age

Index Children	<1 year	1-2 years	3-4 years	5-6 years	Unknown/Did not Report*	Total
Female Index Children						
Male Index Children						
All Index Children (Auto Calculate)						

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 6: Participants by Ethnicity

Participants	Hispanic or Latino	Not Hispanic or Latino	Unknown/Did not Report*	Total
Pregnant Women				
Female Caregivers				
Male Caregivers				
All Adults (Auto Calculate)				
Female Index Children				
Male Index Children				
All Index Children (Auto Calculate)				

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Notes:

Table 7: Participants by Race

Participants	American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or Other Pacific Islander	White	More than one race	Unknown/Did not Report*	Total
Pregnant Women								
Female Caregivers								
Male Caregivers								
All Adults (Auto Calculate)								
Female Index Children								
Male Index Children								
All Index Children (Auto Calculate)								

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 8: Adult Participants by Marital Status

Adult Participants	Never Married (Excluding Not Married but Living Together with Partner)	Married	Not Married but Living Together with Partner	Separated/Divorced/Widowed	Unknown/Did not Report*	Total
Pregnant Women						
Female Caregivers						
Male Caregivers						
All Adults (Auto Calculate)						

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Notes:

Table 9: Adult Participants by Educational Attainment

Adult Participants	Less than HS diploma	HS Diploma/GED	Some college/ training	Technical training or certification	Associate's Degree	Bachelor's Degree or higher	Other	Unknown/Did not Report*	Total
Pregnant Women									
Female Caregivers									
Male Caregivers									
All Adults (Auto Calculate)									

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 10: Adult Participants by Employment Status

Adult Participants	Employed Full Time	Employed Part-Time	Not employed	Unknown/Did not Report*	Total
Pregnant Women					
Female Caregivers					
Male Caregivers					
All Adults (Auto Calculate)					

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

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Table 11: Adult Participants by Housing Status

	Not Homeless					Total Not Homeless	Homeless			Total Homeless	Unknown/Did not Report*	Total
Adult Participants	Owns or shares own home, condominium, or apartment	Rents or shares own home or apartment	Lives in public housing	Lives with parent or family member	Some other arrangement		Homeless and sharing housing	Homeless and living in an emergency or transitional shelter	Some other arrangement			
Pregnant Women												
Female Caregivers												
Male Caregivers												
All Adults (Auto Calculate)												

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 12: Primary Language Spoken at Home

Index Children	Number	Percent
English		
Spanish		
Other		
Unknown/Did Not Report*		
All Index Children (Auto Calculate)		100

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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Notes:

Table 13: Household Income in Relation to Federal Poverty Guidelines

Households	Number of Households	Percent
50% and under		
51-100%		
101-133%		
134-200%		
201-300%		
>300%		
Unknown/Did not Report*		
All Households (Auto Calculate)		100

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 14: For Each Household Indicate the Priority Population Characteristics

Households	Yes	No	Unknown/Did not Report*	Total
1. Low income household				
2. Household contains an enrollee who is pregnant and under age 21				
3. Household has a history of child abuse or neglect or has had interactions with child welfare services				
4. Household has a history of substance abuse or needs substance abuse treatment				
5. Someone in the household uses tobacco products in the home				
6. Someone in the household has attained low student achievement or has a child with low student achievement				
7. Household has a child with developmental delays or disabilities				
8. Household includes individuals who are serving or formerly served in the US armed forces				

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

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SECTION B: SERVICE UTILIZATION

Table 15: Service Utilization

Home Visits	Number
Total Number of Home Visits completed	

Notes:

Table 16: Family Engagement by Household

Households	Number of Households	Percent
Currently receiving services		
Completed program		
Stopped services before completion		
Enrolled but not currently receiving services/Other		
Unknown/Did not Report*		
All Categories (Auto Calculate)		

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 17: Unduplicated Count of Households by Evidence-Based Home Visiting Model or Promising Approach

Home Visiting Model (Select One per Row – Add Rows for Additional Models)	Number Newly Enrolled	Number Continuing During Reporting Period	Total

Notes:

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SECTION C: INSURANCE AND CLINICAL INDICATORS

Table 18: Participants by Type of Health Insurance Coverage

Participants	No Insurance Coverage	Medicaid or CHIP	Tri-Care	Private or Other	Unknown/Did not Report*	Total
Pregnant Women						
Female Caregivers						
Male Caregivers						
All Adults (Auto Calculate)						
Female Index Children						
Male Index Children						
All Index Children (Auto Calculate)						

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

Table 19: Index Children by Usual Source of Medical Care

Index Children	Doctor's/Nurse Practitioner's Office	Hospital Emergency Room	Hospital Outpatient	Federally Qualified Health Center	Retail Store or Minute Clinic	Other	None	Unknown/Did not Report*	Total
Female Index Children									
Male Index Children									
All Index Children (Auto Calculate)									

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

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Table 20: Index Children (≥ 12 months of age) by Usual Source of Dental Care

Index Children	Have a Usual Source of Dental Care	Do not have a Usual Source of Dental Care	Unknown/Did not Report*	Total
Female Index Children				
Male Index Children				
All Index Children (Auto Calculate)				

* When the percent of data that is "Unknown/Did not Report" is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

Notes:

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DEFINITIONS OF KEY TERMS

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Table Number	Field	Key Terms Requiring Definitions"
All Tables		**MIECHV Household:** For the purposes of reporting to HRSA on Form 1, a "MIECHV household" is defined as a family served during the reporting period by a trained home visitor implementing services with fidelity to the model and that is identified as a MIECHV household at enrollment. HRSA has identified two different methods that can be used to identify MIECHV households that are described below: 1. Home Visitor Personnel Cost Method (preferred method): Households are designated as MIECHV at enrollment based on the designation of the home visitor they are assigned. Using this methodology, recipients designate all households as MIECHV that are served by home visitors for whom at least 25 percent of his/her personnel costs (salary/wages including benefits) are paid for with MIECHV funding. 2. Enrollment Slot Method (temporary option): Households are designated as MIECHV households based on the slot they are assigned to at enrollment. Using this methodology, recipients identify certain slots as MIECHV-funded and assign households to these slots at enrollment in accordance with the terms of the contractual agreement between the MIECHV state recipient and the LIA regardless of the percentage of the slot funded by MIECHV. Once designated as a MIECHV household, the household is tracked for the purposes of data collection through the tenure of household participation in the program.
1	Unduplicated Count of New and Continuing Program Participants Served by MIECHV	**New Participant:** A participant, including a pregnant woman, female caregiver, or male caregiver, who signs up to participate in the home visiting program at any time during the reporting period who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). **Continuing Participant:** A participant, including a pregnant woman, female caregiver, or male caregiver, who was signed up and actively enrolled in the home visiting program prior to the beginning of the reporting period who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). **Pregnant women** are participants who were either pregnant at enrollment or pregnant at the annual update of information in a subsequent reporting period. **Female caregivers** are those female household members who are enrolled in the program during the reporting period, are considered a caregiver of the index child, and were not pregnant at the time of enrollment or the annual update of this information (e.g., biological mothers, adoptive mothers, foster mothers, grandmothers).

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		Male caregivers include those male household members (e.g. expectant fathers, biological fathers, step-fathers, and partners) who also meet the definition of an enrollee. Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified.
2	Unduplicated Count of Household Served by MIECHV	New Household: A household, including a pregnant woman, female caregiver, and/or male caregiver who signs up to participate in the home visiting program at any time during the reporting period. The household may include multiple caregivers depending on model-specific definitions. Continuing Household: A household, including a pregnant woman, female caregiver, and/or male caregiver who were signed up and actively enrolled in the home visiting program prior to the beginning of the reporting period. The household may include multiple caregivers depending on model-specific definitions.
3	Unduplicated Count of Participants and Households Served by State Home Visiting Programs (non-MIECHV)	Participant Served by a State Home Visiting Program (non-MIECHV): A participant, including a pregnant woman, female caregiver, or male caregiver, who signs up to participate in the home visiting program at any time during the reporting period who was identified as being part of a non-MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms).
4	Adult Participants by Age	Adult Participants: includes the person or persons in the household who signed up to participate in the home visiting program (e.g., a teenage parent would be counted as an adult participant but not an index child). The category can include more than one member of the household if more than one individual are enrolled in the program (e.g., a father and a mother have both signed up to participate). It should include at a minimum for every household the primary caregiver of the index child.
5	Index Children by Age	Index Child (Birth – Kindergarten Entry): the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified.
6	Participants by Ethnicity	The responses regarding ethnicity should reflect what the person considers herself/himself to be and are not based on percentages of ancestry. If ethnicity is unknown or not reported for some participants, enter that count in the respective "Unknown/Did not report" column.
7	Participants by Race	The responses regarding race should reflect what the person considers herself/himself to be and are not based on percentages of ancestry. Participants who select more than one race should be reported in the "More than one race" category. If ethnicity and race are unknown or not reported for some participants, enter that count in the respective "Unknown/Did not Report" columns.
8	Adult Participants by Marital Status	Adult Participants: includes the person or persons in the household who signed up to participate in the home visiting program (e.g., a teenage parent would be counted as an adult participant but not an index child). The category can include more than one member of the household if more than one individual are enrolled in the program (e.g., a father and a mother have both signed up to participate). It should include at a minimum for every household the primary caregiver of the index child.

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		If more than one individual is enrolled in the program, enter the status for all enrollees. For example, if a pregnant woman is enrolled with her spouse in the program, both participants would be counted under the married category.
9	**Adult Participants by Educational Attainment**	**Adult Participants:** includes the person or persons in the household who signed up to participate in the home visiting program (e.g., a teenage parent would be counted as an adult participant but not an index child). The category can include more than one member of the household if more than one individual are enrolled in the program (e.g., a father and a mother have both signed up to participate). It should include at a minimum for every household the primary caregiver of the index child. **Less than high school diploma** includes individuals who have not completed their high school education. The **Some college/training** category includes those who are currently enrolled and those who attended in the past. The **Technical training or certification** category includes those who received technical training or certification in the past. The **Associate's Degree** category includes those who obtained an Associate's Degree. The **Bachelor's Degree** category includes those who obtained a Bachelor's Degree. The **Other** category includes those individuals who did not fall into the specified categories.
10	**Adult Participants by Employment Status**	**Employed:** refers to whether the person is currently working for pay. **Employed Full Time:** an employee who works an average of at least 30 hours per week **Employed Part Time:** an employee who works an average of less than 30 hours per week[1] **Not Employed:** indicates that the person is not working for pay (this category may include, for example, students, homemakers and those enrollees actively seeking work but currently not employed)
11	**Adult Participants by Housing Status**	**Not homeless:** individuals who have a fixed, regular, and adequate nighttime residence (within the meaning of section 103(a)(1) of the McKinney-Vento Homeless Assistance Act); and **Not homeless and lives in public housing:** individuals who live in a public housing unit that is administered by a public housing agency (excludes individuals who utilize housing voucher programs) **Homeless:** individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of section 103(a)(1) of the McKinney-Vento Homeless Assistance Act); and

[1] Healthcare.gov Glossary. https://www.healthcare.gov/glossary/full-time-employee/

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		Homeless and sharing housing: individuals who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason **Homeless and living in an emergency or transitional shelter:** individuals who are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement **Homeless and some other arrangement:** individuals who are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; individuals who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of section 103(a)(2)(C)); individuals who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings[3]
12	**Primary Language Spoken at Home**	**Primary language:** the language used in the home, the majority of the time. **Index Child (Birth – Kindergarten Entry):** the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and was served by a trained home visitor implementing services with fidelity to the model who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified.
13	**Household Income in Relation to Federal Poverty Guidelines**	The appropriate category for a given family will depend both on household income and on the number of household members counted in the household (both home visiting enrollees and non-enrollees). Household income refers to the annual gross income for the household as defined in programmatic guidance, recorded at enrollment and annually thereafter. **Federal Poverty Guidelines:** Annual income data can be estimated from monthly data (monthly income x 12). The HHS Poverty Guidelines are updated annually in February and published in the Federal Register. See https://aspe.hhs.gov/poverty-guidelines .
14	**For Each Household Indicate the Priority Population Characteristics**	**Low-Income:** An individual or family with an income determined to be below the Federal Poverty Guidelines. The HHS Poverty Guidelines are updated annually in February and published in the Federal Register. See https://aspe.hhs.gov/poverty-guidelines. **Pregnant women under 21:** Households with expectant mothers who enroll in the program and are under 21 years old during the reporting period. **Have a history of child abuse or neglect or have had interactions with child welfare services:** Based on self-report, a household with members who have a history of abuse or neglect and have had involvement with child welfare services either as a child or as an adult.

[3] Administration for Children and Families, Early Childhood Learning and Knowledge Center, 2014. http://eclkc.ohs.acf.hhs.gov/hslc/data-system/family/family/HomelessJess/hmls/definition/definition-legal.html

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		Have a history of substance abuse or need substance abuse treatment: Based on self-report, a household with members who have a history of substance abuse or who have been identified as needing substance abuse services through a substance abuse screening administered upon enrollment. **Are users of tobacco products in the home:** Based on self-report, a household with members who use tobacco products in the home or who have been identified as using tobacco through a substance abuse screening administered during intake. Tobacco use is defined as combustibles (cigarettes, cigars, pipes, hookahs, bidis), non-combustibles (chew, dip, snuff, snus, and dissolvables), and electronic nicotine delivery systems (ENDS). **Have, or have children with, low student achievement:** Based on self-report, a household with members who have perceived themselves or their child(ren) as having low student achievement. **Have a child or children with developmental delays or disabilities:** Based on self-report or home visitor/staff observation, a household with members who have a child or children suspected of having a developmental delay or disability. **Are in families that are or have served in the armed forces:** Based on self-report, households that include individuals who are serving or formerly served in the Armed Forces, including such households that have members of the Armed Forces who have had multiple deployments outside of the United States. For this criterion, definition includes a military member's dependent acquired through marriage, adoption, or other action during the course of a member's current tour of assigned duty.
15	**Service Utilization**	Home visit refers to the definition of a completed home visit enacted by the various evidence-based home visiting models approved for implementation through the MIECHV program or a Promising Approach. Please refer to model-specific guidance for specific definitions.
16	**Family Engagement by Household**	**Currently receiving services** refers to families that are participating in services at the end of the reporting period. **Completed program** refers to families who have completed the program according to model-specific definitions and criteria during the reporting period. **Stopped services before completion** refers to families who left the program for any reason prior to completion. **Enrolled but not currently receiving services/Other** refers to those families who do not fall into the previous categories and may include unreachable participants (i.e. the family is not regularly participating but did not actively sever ties, etc.)
17	**Unduplicated Count of Households by Evidence-Based Home Visiting Model or Promising Approach**	A Household, including a pregnant woman, female caregiver, and/or male caregiver who were signed up and actively enrolled in the home visiting program prior to the beginning of or during the reporting period and continues enrollment during the reporting period. The household may include multiple caregivers depending on model-specific definitions.

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18	Participants by Type of Health Insurance Coverage	**Index Child (Birth – Kindergarten Entry):** the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified. The insurance coverage categories are mutually exclusive. No insurance coverage indicates that the individual is currently not covered by any source of insurance. This table is intended to capture insurance status, not health care access: receipt of care provided for instance by the Indian Health Service or another safety net health care provider such as a Federally Qualified Health Center does not constitute insurance coverage.
19	Index Children by Usual Source of Medical Care	**Index Child (Birth – Kindergarten Entry):** the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified. **Usual source of care:** the particular medical professional, doctor's office, clinic, health center, or other place where a person would usually go if sick or in need of advice about his or her health.
20	Index Children (≥ 12 months of age) by Usual Source of Dental Care	**Index Child (Birth – Kindergarten Entry):** the child (or children) in an individual household who is under the care of the enrollee(s) and who is enrolled in the program and who was identified as being part of a MIECHV household at enrollment (see definition of a MIECHV Household included at the beginning of the Definition of Key Terms). More than one index child per household can be identified. **Usual source of dental care:** a usual source of dental care, or dental home, is a place where a child can receive consistent, comprehensive, compassionate dental care. The concept of the Dental Home reflects the AAPD's clinical guidelines and best principles for the proper delivery of oral health care to all children, with a concentration on infant/age one patients and should be established no later than 12 months of age.[3]

[3] American Academy of Pediatric Dentistry. Dental Home Resource Center. http://www.aapd.org/advocacy/dentalhome/

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THE MATERNAL, INFANT, AND EARLY CHILDHOOD HOME VISITING PROGRAM

PERFORMANCE AND SYSTEMS OUTCOME MEASURES

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0906-0017. Public reporting burden for this collection of information is estimated to average 200 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-29, Rockville, Maryland, 20857.

July 19, 2018

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MEASURE 1

1. BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH CONSTRUCT: PRETERM BIRTH	
2. TYPE OF MEASURE Systems Outcome	
3. PERFORMANCE MEASURE Percent of infants (among mothers who enrolled in home visiting prenatally before 37 weeks) who are born preter following program enrollment	
4. SPECIFICATION NUMERATOR: Number of live births (index child or subsequent children among mothers who enrolled in home visiting prenatally before 37 weeks) born before 37 completed weeks of gestation and after enrollment DENOMINATOR: Number of live births after enrollment who were born to mothers enrolled in home visiting prenatally before 37 weeks	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. NOTES	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 2

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: BREASTFEEDING**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of infants (among mothers who enrolled in home visiting prenatally) who were breastfed any amount at 6 months of age	
4. **SPECIFICATION** **NUMERATOR:** Number of infants aged 6-12 months (index child among mothers who enrolled in home visiting prenatally) who were breastfed any amount at 6 months of age **DENOMINATOR:** Number of infants aged 6-12 months (index child among mothers who enrolled in home visiting prenatally) enrolled in home visiting for at least 6 months	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

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MEASURE 3

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: DEPRESSION SCREENING**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who are screened for depression using a validated tool within 3 months of enrollment (for those not enrolled prenatally) or within 3 months of delivery (for those enrolled prenatally)	
4. **SPECIFICATION** **NUMERATOR:** For those not enrolled prenatally, number of primary caregivers enrolled in home visiting who are screened for depression within the first 3 months since enrollment; for those enrolled prenatally, the number of primary caregivers screened for depression within 3 months of delivery **DENOMINATOR:** For those not enrolled prenatally, the number of primary caregivers enrolled in home visiting for at least 3 months; for those enrolled prenatally, the number of primary caregivers enrolled in home visiting for at least three months post delivery	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool, but all other data elements are known, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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7. NOTES
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure

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MEASURE 4

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: WELL CHILD VISIT**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting who received the last recommended visit based on the American Academy of Pediatrics (AAP) schedule	
4. **SPECIFICATION** **NUMERATOR:** Number of children (index child) enrolled in home visiting who received the last recommended well child visit based on the AAP schedule **DENOMINATOR:** Number of children (index child) enrolled in home visiting	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if a home visit occurred but the home visitor did not collect the data. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 5

1. **BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH** **CONSTRUCT: POSTPARTUM CARE**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks (56 days) of delivery	
4. **SPECIFICATION** **NUMERATOR:** Number of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks (56 days) of delivery **DENOMINATOR:** Number of mothers who enrolled in home visiting prenatally or within 30 days after delivery and remained enrolled for at least 8 weeks (56 days) after delivery	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

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MEASURE 6

1. BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH CONSTRUCT: TOBACCO CESSATION REFERRALS	
2. TYPE OF MEASURE Performance Indicator	
3. PERFORMANCE MEASURE Percent of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment.	
4. SPECIFICATION NUMERATOR: Number of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment DENOMINATOR: Number of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and were enrolled for at least 3 months	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether the primary caregiver used tobacco or cigarettes at enrollment since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are known and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator.	6.b. Value – Enter the number of cases missing from measure calculation:

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All cases of missing data should be excluded from the measure calculation.	
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MEASURE 7

1. **BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS** **CONSTRUCT: SAFE SLEEP**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of infants enrolled in home visiting that are always placed to sleep on their backs, without bed-sharing and without soft bedding	
4. **SPECIFICATION** **NUMERATOR:** Number of infants (index child aged less than 1 year) enrolled in home visiting whose primary caregiver reports that they are always placed to sleep on their backs, without bed-sharing and without soft bedding **DENOMINATOR:** Number of infants (index child) enrolled in home visiting who were aged less than 1 year during the reporting period	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

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MEASURE 8

1. **BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS** **CONSTRUCT: CHILD INJURY**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Rate of injury-related visits to the Emergency Department (ED) during the reporting period among children enrolled in home visiting	
4. **SPECIFICATION** **NUMERATOR:** Number of parent-reported nonfatal injury-related visits to the ED during the reporting period among children (index child) enrolled in home visiting **DENOMINATOR:** Number of children (index child) enrolled in home visiting	
5. **VALUE FOR REPORTING PERIOD (rate)** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

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MEASURE 9

1. **BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS** **CONSTRUCT: CHILD MALTREATMENT**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with at least 1 investigated case of maltreatment following enrollment within the reporting period	
4. SPECIFICATION NUMERATOR: Number of children (index child) enrolled in home visiting with at least 1 investigated case of maltreatment following enrollment within the reporting period DENOMINATOR: Number of children (index child) enrolled in home visiting	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. NOTES	

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MEASURE 10

1. BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT CONSTRUCT: PARENT-CHILD INTERACTION	
2. TYPE OF MEASURE Performance Indicator	
3. PERFORMANCE MEASURE Percent of primary caregivers enrolled in home visiting who receive an observation of caregiver-child interaction by the home visitor using a validated tool	
4. SPECIFICATION NUMERATOR: Number of primary caregivers enrolled in home visiting who receive an observation of caregiver-chil interaction by the home visitor using a validated tool DENOMINATOR: Number of primary caregivers enrolled in home visiting with children reaching the target age range	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether the index child received an observation of caregiver-child interaction by the home visitor using a validated tool, but all other data elements are known, then the index child should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:.

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7. NOTES
8. Measurement Tool-Utilized Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 11

1. **BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT** **CONSTRUCT: EARLY LANGUAGE AND LITERACY ACTIVITIES**	
2. **TYPE OF MEASURE** **Performance Indicator**	
3. **PERFORMANCE MEASURE** **Percent of children enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories, and/or sang songs with their child daily, every day**	
4. **SPECIFICATION** **NUMERATOR: Number of children (index child) enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories, and/or sang songs with their child daily, every day** **DENOMINATOR: Number of children (index child) enrolled in home visiting**	
5. **VALUE FOR REPORTING PERIOD (percentage)** **Value:**	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition **Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.**	**6.b. Value – Enter the number of cases missing from measure calculation:**
7. **NOTES**	

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 12

1. **BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT** **CONSTRUCT: DEVELOPMENTAL SCREENING**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with a timely screen for developmental delays using a validated parent-completed tool	
4. **SPECIFICATION** **NUMERATOR:** Number of children (index child) enrolled in home visiting with at least one screening within the AAP-defined age groups during the reporting period **DENOMINATOR:** Number of children (index child) enrolled in home visiting reaching the specified time frame during the reporting period	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool, but all other data elements are known, then the child should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

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8. **Measurement Tool Utilized** Indicate the validated measurement tool(s) utilized to address this measure

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MEASURE 13

1. BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT CONSTRUCT: BEHAVIORAL CONCERNS	
2. TYPE OF MEASURE Performance Indicator	
3. PERFORMANCE MEASURE Percent of postnatal home visits where primary caregivers were asked if they have any concerns regarding their child's development, behavior, or learning	
4. SPECIFICATION NUMERATOR: Number of postnatal home visits where primary caregivers enrolled in home visiting were asked if they have any concerns regarding their child's development, behavior, or learning DENOMINATOR: Total number of postnatal home visits during the reporting period	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6. MISSING DATA 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. If a home visit occurred, but there is no documentation of whether the primary caregiver was asked about behavioral concerns, then the home visit should be included in the denominator (if eligible – i.e., postnatal visit), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. NOTES	

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MEASURE 14

1. **BENCHMARK AREA: CRIME OR DOMESTIC VIOLENCE** **CONSTRUCT: INTIMATE PARTNER VIOLENCE SCREENING**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who are screened for intimate partner violence (IPV) within 6 months of enrollment using a validated tool	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who are screened for IPV using a validated tool within 6 months of enrollment **DENOMINATOR:** Number of primary caregivers enrolled in home visiting for at least 6 months	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool (including if a screening did not occur because the caregiver was male and they only have validated tools for use among female caregivers), but all other data elements are known, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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7. NOTES
8. **Measurement Tool Utilized** Indicate the validated measurement tool(s) utilized to address this measure

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MEASURE 15

1. **BENCHMARK AREA: FAMILY ECONOMIC SELF-SUFFICIENCY** **CONSTRUCT: PRIMARY CAREGIVER EDUCATION**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of primary caregivers who enrolled in home visiting without a high school degree or equivalent who subsequently enrolled in or maintained continuous enrollment in middle school or high school, or completed high school or equivalent during their participation in home visiting	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers who enrolled in or maintained continuous enrollment in middle school or high school, or completed a high school degree or equivalent after enrollment in home visiting (and met the conditions specified in the denominator) **DENOMINATOR:** Number of primary caregivers without a high school degree or equivalent at enrollment	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

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MEASURE 16

1. **BENCHMARK AREA: FAMILY ECONOMIC SELF-SUFFICIENCY** **CONSTRUCT: CONTINUITY OF INSURANCE COVERAGE**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting who had continuous health insurance coverage for at least 6 consecutive months	
4. **SPECIFICATION** **NUMERATOR:** Number of primary caregivers enrolled in home visiting who reported having health insurance coverage for at least 6 consecutive months since enrollment in home visiting **DENOMINATOR:** Number of primary caregivers enrolled in home visiting for at least 6 months	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:
7. **NOTES**	

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MEASURE 17

1. **BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS** **CONSTRUCT: COMPLETED DEPRESSION REFERRALS**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of primary caregivers referred to services for a positive screen for depression who receive one or more service contacts	
4. SPECIFICATION NUMERATOR: Number of primary caregivers enrolled in home visiting who received recommended services for depression (and met the conditions specified in the denominator) DENOMINATOR: Number of primary caregivers enrolled in home visiting who had a positive screen for depression within 3 months of enrollment (for those not enrolled prenatally) or within 3 months of delivery (for those enrolled prenatally) and were referred for services	
5. VALUE FOR REPORTING PERIOD (percentage) Value:	Numerator: Denominator:
6: MISSING DATA* 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether a screening occurred using a validated tool, since inclusion in the denominator cannot be determined if the screening result is unknown. Data are also considered missing if there is no documentation of whether a referral was provided. All cases of missing data should be excluded from the measure calculation.	6.b. Value – Enter the number of cases missing from measure calculation:

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7. **NOTES**
8. **Measurement Tool Utilized** Indicate the validated measurement tool(s) utilized to address this measure

* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

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MEASURE 18

1. **BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS** **CONSTRUCT: COMPLETED DEVELOPMENTAL REFERRALS**	
2. **TYPE OF MEASURE** Systems Outcome	
3. **PERFORMANCE MEASURE** Percent of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool) who receive services in a timely manner	
4. **SPECIFICATION** **NUMERATOR:** Number of children enrolled in home visiting who a) received individualized developmental support from a home visitor; b) were referred to early intervention services and receive an evaluation within 45 days; OR c) were referred to other community services who received services within 30 days (and met the condition specified in the denominator) **DENOMINATOR:** Number of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool)	
5. **VALUE FOR REPORTING PERIOD (percentage)**:** Value:	Numerator: Denominator:
6. **MISSING DATA*** 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether a screening occurred using a validated tool, since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are available and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if	6.b. Value – Enter the number of cases missing from measure calculation:

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eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.	
7. NOTES	
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure	

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MEASURE 19

1. **BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS** **CONSTRUCT: INTIMATE PARTNER VIOLENCE REFERRALS**	
2. **TYPE OF MEASURE** Performance Indicator	
3. **PERFORMANCE MEASURE** Percent of primary caregivers enrolled in home visiting with positive screens for IPV (measured using a validated tool) who receive referral information to IPV resources	
4. **SPECIFICATION** NUMERATOR: Number of primary caregivers enrolled in home visiting who received referral information to IPV resources (and met the conditions specified in the denominator) DENOMINATOR: Number of primary caregivers enrolled in home visiting with positive screens for IPV (measured using a validated tool) within 6 months of enrollment	
5. **VALUE FOR REPORTING PERIOD** (percentage) Value:	Numerator: Denominator:
6. **MISSING DATA**[a] 6.a. Definition Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether a screening occurred using a validated tool, since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are available and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of	6.b. Value – Enter the number of cases missing from measure calculation:

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missing data should be excluded from the measure calculation.	
7. NOTES	
8. Measurement Tool Utilized Indicate the validated measurement tool(s) utilized to address this measure	

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DEFINITIONS OF KEY TERMS

July 19, 2018

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Construct Number	Construct	Key Term Definitions
1.	Preterm Birth	Preterm Birth: a birth before 37 completed weeks of gestation (defined as up to 36 weeks and 6 days).[1]
2.	Breastfeeding	Breastfeeding: in addition to breast milk fed directly from the mother to the infant, breastfeeding also includes feeding the infant pumped or expressed breast milk.
3.	Depression Screening	Depression: aligned with each grantee's validated depression screening tool's definition of depression.
4.	Well-Child Visit	AAP schedule for Well-Child Visits: Updated AAP 2017 Recommendations for Pediatric Preventive Health Care https://www.aap.org/en-us/Documents/periodicity_schedule.pdf
5.	Postpartum Care	Postpartum Care Visit: A postpartum visit is a visit between the woman and her health care provider to assess the mother's current physical health, including the status of pregnancy-related conditions like gestational diabetes, screen for postpartum depression, provide counseling on infant care and family planning as well as screening and referrals for the management of chronic conditions. Additionally, a provider may use this opportunity to conduct a breast exam and discuss breastfeeding. The American College of Obstetricians and Gynecologists recommends that mothers receive a postpartum care visit within 6 weeks after delivery. [2]
6.	Tobacco Cessation Referrals	Tobacco Use: combustibles (cigarettes, cigars, pipes, hookahs, bidis), non-combustibles (chew, dip, snuff, snus, and dissolvables), and ENDS.
7.	Safe Sleep	No definitions required
8.	Child Injury	Injury-related Emergency Department Visit: Injuries refer to the following causes of mechanisms of injury: motor vehicle, suffocation, drowning, poisoning, fire/burns, falls, sports and recreation, and intentional injuries, such as child maltreatment.[3]
9.	Child Maltreatment	Investigated Case: all children with an allegation of maltreatment that were screened-in for investigation or assessment and further received an investigation. [4] A screened-in report is one that is accepted for investigation or assessment based on the state's screen-in criteria. [5]
10.	Parent-Child Interaction	No definitions required
11.	Early Language and Literacy Activities	No definitions required
12.	Developmental Screening	Developmental Delay: delays in any or all areas including cognitive, social, language, sensory,

[1] Behrman R, Stith Butler A, eds. Preterm Birth: Causes, Consequences, and Prevention. Washington, DC: The National Academies Press, 2007.
[2] Optimizing postpartum care. Committee Opinion No. 666. American College of Obstetricians and Gynecologists. Obstet Gynecol 2016;127:e187–92. Retrieved from https://www.acog.org/-/media/Committee-Opinions/Committee-on-Obstetric-Practice/co666.pdf?dmc=1&ts=20180221T1421452301
[3] Centers for Disease Control and Prevention. National Action Plan for Child Injury Prevention. 2012. Retrieved from http://www.cdc.gov/safechild/NAP/background.html#uniint
[4] Child Welfare Information Gateway. Child Maltreatment 2015: Summary of Key Findings. Retrieved from https://www.childwelfare.gov/pubs/factsheets/canstats/
[5] Child Welfare Information Gateway. Screening and Intake. Retrieved from https://www.childwelfare.gov/topics/responding/iis/screening/

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		and emotional development.[5]
13.	Behavioral Concerns	No definitions required
14.	IPV Screening	Intimate Partner Violence: physical violence, sexual violence, stalking and psychological aggression (including coercive acts) by a current or former intimate partner. An intimate partner is a person with whom one has a close personal relationship that can be characterized by the following: emotional connectedness, regular contact, ongoing physical contact and sexual behavior, identity as a couple, familiarity and knowledge about each other's lives. [7]
15.	Primary Caregiver Education	No definitions required
16.	Continuity of Insurance Coverage	Continuous Health Insurance Coverage: having health insurance coverage without any lapses.
17.	Completed Depression Referrals	Recommended services: specific techniques and intervention models delivered in the context of client characteristics, culture, and preferences that have shown to have positive effects on outcomes through rigorous evaluations and have demonstrated to achieve positive outcomes for the client.[8]
18.	Completed Developmental Referrals	Developmental Delay: delays in any or all areas including cognitive, social, language, sensory, and emotional development.[6]
19.	IPV Referrals	Intimate Partner Violence: physical violence, sexual violence, stalking and psychological aggression (including coercive acts) by a current or former intimate partner. An intimate partner is a person with whom one has a close personal relationship that can be characterized by the following: emotional connectedness, regular contact, ongoing physical contact and sexual behavior, identity as a couple, familiarity and knowledge about each other's lives. [7]

[5] U.S. National Library of Medicine, National Institutes of Health. Psychological Index Terms via Unified Medical Language System, 2015. Retrieved from http://phr.nlm.nih.gov/glossary=developmentaldelay
[7] Centers for Disease Control and Prevention, Injury Prevention and Control: Division of Violence Prevention, 2015. Retrieved from http://www.cdc.gov/violenceprevention/intimatepartnerviolence/definitions.html
[8] Home Visiting Collaborative Improvement and Innovation Network.

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Attachment 5 - DCYF Key Performance Metrics

Key Performance Metrics
Referrals
Share of families who are referred to HFA from DCYF. (# of families currently enrolled in HFA CWP and % of HFA CWP slots currently used)
Share of DCYF-referred families that were enrolled between three (3) and twenty-four (24) months of age.
Share of DCYF-referred families with a recent assessment of a Substance Exposed Infant (SEI).
Enrollments
Average time to enrollment from the time and date of referral.
of days from referral date to the first home visit.
Share of families that are offered HFA and % of offered families who decide to receive HFA.
Relative rate of families enrolled by racial/ethnic and geographic characteristics.
Proportion of families that are retained in the program over specified periods of time (6 months, 12 months, 24 months, 36 months, etc.) after receiving a first home visit.
Proportion of families who receive at least seventy-five (75%) percent of the appropriate number of home visits based upon the individual level of service to which they are assigned.
Program Completion
Share of families who do not complete the program (incl. reason for non-completion/discharge).
Share of families that discharged who completed a minimum of specified periods of service. (3 months, 6 months, 12 months, 18 months, 24 months, 30 months, 36 months).
Proportion of families who complete program by racial/ethnic and geographic characteristics.
Short-term Outcomes
Share of families with a new case opened to DCYF, or a new report of maltreatment, within six months after discharge.
Share of children who enter out-of-home placement within six months after discharge (incl. breakdown of placement type).
Share of children who enter any form of out-of-home placement within 12 months of discharge.
Differences in outcomes outlined above (i.e., prevention of out of home removal, decreases in risk/needs) by racial/ethnic and geographic characteristics.

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EXHIBIT C

Payment Terms

1. This Agreement is funded by:
   1.1. 61.5% Federal funds from:
      1.1.1. Maternal, Infant and Early Childhood Home Visiting Grant Program, as awarded on September 7, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X10MC43595.
      1.1.2. Maternal, Infant and Early Childhood Homevisiting Grant Program, as awarded on September 2, 2022, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X10MC46878.
      1.1.3. American Rescue Plan Act Funding for Home Visiting, as awarded on April 30, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X11MC41935.
      1.1.4. American Rescue Plan Act Funding for Home Visiting, as awarded on October 28, 2021, by the DHHS Health Resources and Services Administration, CFDA 93.870, FAIN X11MC45263.
      1.1.5. New Hampshire Intiative to Address COVID-19 Health Disparaties, as awarded on May 27, 2021, by the Centers for Disease Control and Prevention, CFDA 93.391, FAIN NH75OT000031.
      1.1.6. Administration of Children Youth & Families (ACF), as awarded on October 1, 2022, CFDA 93.658, FAIN 2201NHFOST.
   1.2. 38.5% General funds.
2. For the purposes of this Agreement the Department has identified:
   2.1. The Contractor as a Subrecipient, in accordance with 2 CFR 200.331.
   2.2. The Agreement as NON-R&D, in accordance with 2 CFR §200.332.
3. The Department shall make payments to the Contractor within thirty (30) days of receipt of each invoice and supporting documentation for authorized expenses, subsequent to approval of the submitted invoice.
4. The final invoice and supporting documentation for authorized expenses shall be due to the Department no later than forty (40) days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.
5. Notwithstanding Paragraph 17 of the General Provisions Form P-37, changes limited to adjusting amounts within the price limitation and adjusting encumbrances between State Fiscal Years and budget class lines through the

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Budget Office may be made by written agreement of both parties, without obtaining approval of the Governor and Executive Council, if needed and justified.

6. Audits

6.1. The Contractor must email an annual audit to dhhs.act@dhhs.nh.gov if any of the following conditions exist:

6.1.1. Condition A - The Contractor expended $750,000 or more in federal funds received as a subrecipient pursuant to 2 CFR Part 200, during the most recently completed fiscal year.

6.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b, pertaining to charitable organizations receiving support of $1,000,000 or more.

6.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

6.2. If Condition A exists, the Contractor shall submit an annual Single Audit performed by an independent Certified Public Accountant (CPA) to dhhs.act@dhhs.nh.gov within 120 days after the close of the Contractor's fiscal year, conducted in accordance with the requirements of 2 CFR Part 200, Subpart F of the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal awards.

6.2.1. The Contractor shall submit a copy of any Single Audit findings and any associated corrective action plans. The Contractor shall submit quarterly progress reports on the status of implementation of the corrective action plan.

6.3. If Condition B or Condition C exists, the Contractor shall submit an annual financial audit performed by an independent CPA within 120 days after the close of the Contractor's fiscal year.

6.4. In addition to, and not in any way in limitation of obligations of the Agreement, it is understood and agreed by the Contractor that the Contractor shall be held liable for any state or federal audit exceptions and shall return to the Department all payments made under the Agreement to which exception has been taken, or which have been disallowed because of such an exception.

A. Payment Terms Respective to Traditional Home Visiting Services for the Division of Public Health Services (DPHS):

7. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with

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the approved line items, as specified in Exhibits C-1, Budget through C-3, Budget.

8. The Contractor shall submit an invoice with supporting documentation to the Department no later than the fifteenth (15th) working day of the month following the month in which the services were provided. The Contractor shall ensure each invoice:

   8.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.

   8.2. Is submitted in a form that is provided by or otherwise acceptable to the Department.

   8.3. Identifies and requests payment for allowable costs incurred in the previous month.

   8.4. Includes supporting documentation of allowable costs with each invoice that may include, but are not limited to, time sheets, payroll records, receipts for purchases, and proof of expenditures, as applicable.

   8.5. Is completed, dated and returned to the Department with the supporting documentation for allowable expenses to initiate payment.

   8.6. Is assigned an electronic signature, includes supporting documentation, and is emailed to DPHSContractBilling@dhhs.nh.gov or mailed to:

   Financial Manager
   Department of Health and Human Services
   129 Pleasant Street
   Concord, NH 03301

B. Payment Terms Respective to Child Welfare Protocols for the Division for Children, Youth and Families (DCYF) for direct services:

9. Payment shall be for services provided in fulfillment of this Agreement, as specified in Exhibit B, Scope of Work Section 3.4, and in accordance with the following:

   9.1. Weekly Rate: For the purposes of this Agreement, a weekly rate shall be paid in the amount of of $265.53 per client (family) once per week.

   9.2. Payment shall be made on a monthly basis and follow a process determined by the Department.

   9.3. The Contractor cannot exceed the maximum allotment for weekly rate expenditure by Fiscal Year, which is as follows:

State Fiscal Year	Amount
SFY 2023	$182,154
SFY 2024	$364,307

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SFY 2025	$367,560
Sub-Total	**$914,021**

9.4. The Contractor shall submit non-clinical expenses via the Website: https://business.nh.gov/beb/PaQes/Index.asDx.

9.5. The Contractor must provide the services in Exhibit B, Scope of Services, in compliance with funding requirements.

C. Payment Terms Respective to Child Welfare Protocols for the Division for Children, Youth and Families (DCYF) for administrative services:

10. The Contractor shall submit an invoice with supporting documentation to the Department no later than the fifteenth (15th) working day of the month following the month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The Contractor shall ensure each invoice is completed, dated and returned to the Department in order to intiate payment.

10.1. Maximum allotment for contract expenditures by Fiscal Year is as follows:

State Fiscal Year	Amount
2023	$920,528
2024	$1,105,935
2025	$0*
Sub-Total	**$2,026,463**
***The Contractor will only bill for direct services in SFY 25.**	

10.2. In lieu of hard invoice copies, all invoices may be assigned an electronic signature and emailed to DCYFInvoices@dhhs.nh.gov, or invoices may be mailed to:

Financial Manager
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

10.3. The Contractor must provide the services in Exhibit B, Scope of Services, in compliance with funding requirements.

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New Hampshire Department of Health and Human Services
Contractor Name: *Waypoint*
Budget Request for: *Home Visiting Services*
Budget Period: *SFY 2023 (October 1, 2022 - June 30, 2023)*
Indirect Cost Rate (if applicable): 14.82%

Line Item	HOME VISITING FORMULA GNT	GOVERNOR COMMISSION FUNDS	PH COVID-19 HEALTH DISPARITIES	ARP - NIEC HOME VISITING
Funding Source	100% FEDERAL - CFDA #93.870, FAIN # X1043596 & X1046078	100% OTHER FUNDS	100% FEDERAL FUNDS - CFDA #93.391, FAIN # NH75OT000031	100% FEDERAL FUNDS CFDA #93.870, FAIN # X1141935 & X1145263
1. Salary & Wages	$413,162		$182,182	$77,918
2. Fringe Benefits	$123,888		$48,647	$19,243
3. Consultants		$22,483	$66	
4. Equipment *Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.*		$8,000		
5.(a) Supplies - Educational		$2,000		
5.(b) Supplies - Lab				
5.(c) Supplies - Pharmacy				
5.(d) Supplies - Medical				
5.(e) Supplies Office		$6,000		
6. Travel	$18,000		$12,700	
7. Software		$12,000		
8. (a) Other - Marketing/Communications				
8. (b) Other - Education and Training		$21,000		
8. (c) Other - Other (specify below)				
Organizational Dues		$6,000		
Occupancy	$16,600	$12,900		
Phones	$18,000			
Insurance		$4,500		
Other (please specify)				
Other (please specify)				
Other (please specify)				
Other (please specify)				
9. Subrecipient Contracts				
Total Direct Costs	$569,651	$92,883	$223,595	$97,159
Total Indirect Costs	$102,599	$15,118	$38,905	$16,906
Subtotals	$692,250	$108,000	$262,500	$114,064
TOTAL	$1,176,816			

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New Hampshire Department of Health and Human Services
Contractor Name: Waypoint
Budget Request for: Home Visiting Services
Budget Period: SFY 2024 (July 1, 2023 - June 30, 2024)
Indirect Cost Rate (if applicable): 14.82%

Line Item Funding Source	HOME VISITING FORMULA GNT 100% FEDERAL CFDA 93.870, FAIN # X10A3595 & X10A8678	ARP - MIEC HOME VISITING 100% FEDERAL FUNDS,CFDA #93.870, FAIN # X11A1935 & X11A3703
1. Salary & Wages	$550,713	$75,920
2. Fringe Benefits	$105,214	$22,776
3. Consultants	$17,672	$376
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.		
5.(a) Supplies - Educational		
5.(b) Supplies - Lab		
5.(c) Supplies - Pharmacy		
5.(d) Supplies - Medical		
5.(e) Supplies Office		
6. Travel	$27,600	$7,400
7. Software	$18,000	
8. (a) Other - Marketing/Communications	$15,000	
8. (b) Other - Education and Training		
8. (c) Other - Other (specify below)	$17,051	
Phones		
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
9. Subrecipient Contracts		
Total Direct Costs	$809,199	$106,474
Total Indirect Costs	$140,801	$18,526
Subtotals	$950,000	$125,000
TOTAL	$1,075,000	

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New Hampshire Department of Health and Human Services
Contractor Name: *Waypoint*
Budget Request for: *Home Visiting Services*
Budget Period: *SFY 2025 (July 1, 2024 - September 30, 2024)*
Indirect Cost Rate (if applicable): 14.82%

Line Item Funding Source	HOME VISITING FORMULA GNT 100% FEDERAL CFDA #93.870, FAIN # X1043598 & X1048878	ARP - MIEC HOME VISITING 100% FEDERAL FUNDS CFDA #93.870, FAIN # X1041936 & X1045283
1. Salary & Wages	$146,892	$94,883
2. Fringe Benefits	$43,308	$26,369
3. Consultants	$3,600	
4. Equipment *Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.*		
5.(a) Supplies - Educational		
5.(b) Supplies - Lab		
5.(c) Supplies - Pharmacy		
5.(d) Supplies - Medical		
5.(e) Supplies Office		
6. Travel	$4,500	
7. Software	$4,000	
8. (a) Other - Marketing/Communications		
8. (b) Other - Education and Training		
8. (c) Other - Other (specify below)		
Organization Dues		
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
Other (please specify)		
9. Subrecipient Contracts		
Total Direct Costs	$202,300	$121,252
Total Indirect Costs	$35,200	$21,088
Subtotals	$237,600	$142,360
TOTAL	$379,860	

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New Hampshire Department of Health and Human Services

Contractor Name: Waypoint

Budget Request for: Home Visiting Services

Budget Period: SFY 2023 (1/1/23-6/30/23) 6 Months

Indirect Cost Rate (if applicable): 14.42%

Line Item	Program Cost - Funded by DHHS.
1. Salary & Wages	$482,894
2. Fringe Benefits	$138,866
3. Consultants	$15,000
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$25,000
5.(a) Supplies - Educational	$6,000
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$19,439
6. Travel	$25,000
7. Software	$0
8. (a) Other - Marketing/ Communications	$64,000
8. (b) Other - Education and Training	$21,000
8. (c) Other - Other (specify below)	$8,500
Occupancy	$4,100
Phones	$0
Insurance	$0
Other (please specify)	$787,801
9. Subrecipient Contracts	$132,727
Total Direct Costs	$920,528
Total Indirect Costs	$0
TOTAL	

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Exhibit C-5 Budget Sheet, SFY 2024

New Hampshire Department of Health and Human Services
Contractor Name: Waypoint
Budget Request for: Home Visiting Services
Budget Period: SFY 2024 (7/1/23-6/30/24) 12 Months
Indirect Cost Rate (if applicable): 14.82%

Line Item	Program Cost - Funded by DHHS
1. Salary & Wages	$707,704
2. Fringe Benefits	$212,311
3. Consultants	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0
5.(a) Supplies - Educational	$0
5.(b) Supplies - Lab	$0
5.(c) Supplies - Pharmacy	$0
5.(d) Supplies - Medical	$0
5.(e) Supplies Office	$0
6. Travel	$22,008
7. Software	$0
8. (a) Other - Marketing/ Communications	$0
8. (b) Other - Education and Training	$0
8. (c) Other - Other (specify below)	
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
Other (please specify)	$0
9. Subrecipient Contracts	$0
Total Direct Costs	$942,023
Total Indirect Costs	$163,912
TOTAL	$1,105,935

$0

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CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Vendor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

ALTERNATIVE I - FOR GRANTEES OTHER THAN INDIVIDUALS

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

This certification is required by the regulations implementing Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701.et seq.). The January 31, 1989 regulations were amended and published as Part II of the May 25, 1990 Federal Register (pages 21681-21691), and require certification by grantees (and by inference, sub-grantees and sub-contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a grantee (and by inference, sub-grantees and sub-contractors) that is a State may elect to make one certification to the Department in each federal fiscal year in lieu of certificates for each grant during the federal fiscal year covered by the certification. The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment. Contractors using this form should send it to:

Commissioner
NH Department of Health and Human Services
129 Pleasant Street,
Concord, NH 03301-6505

1. The grantee certifies that it will or will continue to provide a drug-free workplace by:
   - 1.1. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
   - 1.2. Establishing an ongoing drug-free awareness program to inform employees about
     - 1.2.1. The dangers of drug abuse in the workplace;
     - 1.2.2. The grantee's policy of maintaining a drug-free workplace;
     - 1.2.3. Any available drug counseling, rehabilitation, and employee assistance programs; and
     - 1.2.4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
   - 1.3. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
   - 1.4. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will
     - 1.4.1. Abide by the terms of the statement; and
     - 1.4.2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
   - 1.5. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph 1.4.2 from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer on whose grant activity the convicted employee was working, unless the Federal agency

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has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

1.6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 1.4.2, with respect to any employee who is so convicted

1.6.1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

1.6.2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

1.7. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1.1, 1.2, 1.3, 1.4, 1.5, and 1.6.

2. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant.

Place of Performance (street address, city, county, state, zip code) (list each location)

Check ☐ if there are workplaces on file that are not identified here.

Vendor Name: waypoint

DocuSigned by:
Borja Alvarez de Toledo

1/17/2023
Date

Name: Borja Alvarez de Toledo
Title: president and CEO

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CERTIFICATION REGARDING LOBBYING

The Vendor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

Programs (indicate applicable program covered):
*Temporary Assistance to Needy Families under Title IV-A
*Child Support Enforcement Program under Title IV-D
*Social Services Block Grant Program under Title XX
*Medicaid Program under Title XIX
*Community Services Block Grant under Title VI
*Child Care Development Block Grant under Title IV

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor).

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, attached and identified as Standard Exhibit E-I.)

3. The undersigned shall require that the language of this certification be included in the award document for sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Vendor Name: Waypoint

1/17/2023
Date

DocuSigned by:
Borja Alvarez de Toledo
Name: Borja Alvarez de Toledo
Title: president and CEO

BAT
Vendor Initials
1/17/2023
Date

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CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Executive Office of the President, Executive Order 12549 and 45 CFR Part 76 regarding Debarment, Suspension, and Other Responsibility Matters, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal (contract), the prospective primary participant is providing the certification set out below.

2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. If necessary, the prospective participant shall submit an explanation of why it cannot provide the certification. The certification or explanation will be considered in connection with the NH Department of Health and Human Services' (DHHS) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

3. The certification in this clause is a material representation of fact upon which reliance was placed when DHHS determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, DHHS may terminate this transaction for cause or default.

4. The prospective primary participant shall provide immediate written notice to the DHHS agency to whom this proposal (contract) is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549: 45 CFR Part 76. See the attached definitions.

6. The prospective primary participant agrees by submitting this proposal (contract) that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by DHHS.

7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," provided by DHHS, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or involuntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List (of excluded parties).

9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and

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information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal government, DHHS may terminate this transaction for cause or default.

PRIMARY COVERED TRANSACTIONS

11. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
    - 11.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
    - 11.2. have not within a three-year period preceding this proposal (contract) been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or a contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
    - 11.3. are not presently indicted for otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (I)(b) of this certification; and
    - 11.4. have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

12. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal (contract).

LOWER TIER COVERED TRANSACTIONS

13. By signing and submitting this lower tier proposal (contract), the prospective lower tier participant, as defined in 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:
    - 13.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
    - 13.2. where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal (contract).

14. The prospective lower tier participant further agrees by submitting this proposal (contract) that it will include this clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions," without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

Contractor Name: Waypoint

1/17/2023
Date

DocuSigned by:
Borja Alvarez de Toledo
Name: Borja Alvarez de Toledo
Title: president and CEO

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CERTIFICATION OF COMPLIANCE WITH REQUIREMENTS PERTAINING TO FEDERAL NONDISCRIMINATION, EQUAL TREATMENT OF FAITH-BASED ORGANIZATIONS AND WHISTLEBLOWER PROTECTIONS

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

Contractor will comply, and will require any subgrantees or subcontractors to comply, with any applicable federal nondiscrimination requirements, which may include:

- the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. Section 3789d) which prohibits recipients of federal funding under this statute from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act requires certain recipients to produce an Equal Employment Opportunity Plan;

- the Juvenile Justice Delinquency Prevention Act of 2002 (42 U.S.C. Section 5672(b)) which adopts by reference, the civil rights obligations of the Safe Streets Act. Recipients of federal funding under this statute are prohibited from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act includes Equal Employment Opportunity Plan requirements;

- the Civil Rights Act of 1964 (42 U.S.C. Section 2000d, which prohibits recipients of federal financial assistance from discriminating on the basis of race, color, or national origin in any program or activity);

- the Rehabilitation Act of 1973 (29 U.S.C. Section 794), which prohibits recipients of Federal financial assistance from discriminating on the basis of disability, in regard to employment and the delivery of services or benefits, in any program or activity;

- the Americans with Disabilities Act of 1990 (42 U.S.C. Sections 12131-34), which prohibits discrimination and ensures equal opportunity for persons with disabilities in employment, State and local government services, public accommodations, commercial facilities, and transportation;

- the Education Amendments of 1972 (20 U.S.C. Sections 1681, 1683, 1685-86), which prohibits discrimination on the basis of sex in federally assisted education programs;

- the Age Discrimination Act of 1975 (42 U.S.C. Sections 6106-07), which prohibits discrimination on the basis of age in programs or activities receiving Federal financial assistance. It does not include employment discrimination;

- 28 C.F.R. pt. 31 (U.S. Department of Justice Regulations – OJJDP Grant Programs); 28 C.F.R. pt. 42 (U.S. Department of Justice Regulations – Nondiscrimination; Equal Employment Opportunity; Policies and Procedures); Executive Order No. 13279 (equal protection of the laws for faith-based and community organizations); Executive Order No. 13559, which provide fundamental principles and policy-making criteria for partnerships with faith-based and neighborhood organizations;

- 28 C.F.R. pt. 38 (U.S. Department of Justice Regulations – Equal Treatment for Faith-Based Organizations); and Whistleblower protections 41 U.S.C. §4712 and The National Defense Authorization Act (NDAA) for Fiscal Year 2013 (Pub. L. 112-239, enacted January 2, 2013) the Pilot Program for Enhancement of Contract Employee Whistleblower Protections, which protects employees against reprisal for certain whistle blowing activities in connection with federal grants and contracts.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment.

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Contractor Initials

Date 1/17/2023

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In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, or sex against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, to the applicable contracting agency or division within the Department of Health and Human Services, and to the Department of Health and Human Services Office of the Ombudsman.

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this proposal (contract) the Contractor agrees to comply with the provisions indicated above.

Contractor Name: waypoint

1/17/2023
Date

DocuSigned by:
Borja Alvarez de Toledo
Name: Borja Alvarez de Toledo
Title: president and CEO

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CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to $1000 per day and/or the imposition of an administrative compliance order on the responsible entity.

The Contractor identified in Section 1.3 of the General Provisions agrees, by signature of the Contractor's representative as identified in Section 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this contract, the Contractor agrees to make reasonable efforts to comply with all applicable provisions of Public Law 103-227, Part C, known as the Pro-Children Act of 1994.

Contractor Name: Waypoint

1/17/2023
Date

DocuSigned by:
Borja Alvarez de Toledo
Name: Borja Alvarez de Toledo
Title: president and CEO

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HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement agrees to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191 and with the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160 and 164 applicable to business associates. As defined herein, "Business Associate" shall mean the Contractor and subcontractors and agents of the Contractor that receive, use or have access to protected health information under this Agreement and "Covered Entity" shall mean the State of New Hampshire, Department of Health and Human Services.

(1) Definitions.

a. "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.

b. "Business Associate" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.

c. "Covered Entity" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.

d. "Designated Record Set" shall have the same meaning as the term "designated record set" in 45 CFR Section 164.501.

e. "Data Aggregation" shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.

f. "Health Care Operations" shall have the same meaning as the term "health care operations" in 45 CFR Section 164.501.

g. "HITECH Act" means the Health Information Technology for Economic and Clinical Health Act, TitleXIII, Subtitle D, Part 1 & 2 of the American Recovery and Reinvestment Act of 2009.

h. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164 and amendments thereto.

i. "Individual" shall have the same meaning as the term "individual" in 45 CFR Section 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR Section 164.501(g).

j. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.

k. "Protected Health Information" shall have the same meaning as the term "protected health information" in 45 CFR Section 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

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l. "Required by Law" shall have the same meaning as the term "required by law" in 45 CFR Section 164.103.

m. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his/her designee.

n. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 CFR Part 164, Subpart C, and amendments thereto.

o. "Unsecured Protected Health Information" means protected health information that is not secured by a technology standard that renders protected health information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.

p. Other Definitions - All terms not otherwise defined herein shall have the meaning established under 45 C.F.R. Parts 160, 162 and 164, as amended from time to time, and the HITECH Act.

(2) Business Associate Use and Disclosure of Protected Health Information.

a. Business Associate shall not use, disclose, maintain or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under Exhibit A of the Agreement. Further, Business Associate, including but not limited to all its directors, officers, employees and agents, shall not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.

b. Business Associate may use or disclose PHI:
   I. For the proper management and administration of the Business Associate;
   II. As required by law, pursuant to the terms set forth in paragraph d. below; or
   III. For data aggregation purposes for the health care operations of Covered Entity.

c. To the extent Business Associate is permitted under the Agreement to disclose PHI to a third party, Business Associate must obtain, prior to making any such disclosure, (i) reasonable assurances from the third party that such PHI will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the third party; and (ii) an agreement from such third party to notify Business Associate, in accordance with the HIPAA Privacy, Security, and Breach Notification Rules of any breaches of the confidentiality of the PHI, to the extent it has obtained knowledge of such breach.

d. The Business Associate shall not, unless such disclosure is reasonably necessary to provide services under Exhibit A of the Agreement, disclose any PHI in response to a request for disclosure on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity has an opportunity to object to the disclosure and to seek appropriate relief. If Covered Entity objects to such disclosure, the Business

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Associate shall refrain from disclosing the PHI until Covered Entity has exhausted all remedies.

e. If the Covered Entity notifies the Business Associate that Covered Entity has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Business Associate shall be bound by such additional restrictions and shall not disclose PHI in violation of such additional restrictions and shall abide by any additional security safeguards.

(3) Obligations and Activities of Business Associate.

a. The Business Associate shall notify the Covered Entity's Privacy Officer immediately after the Business Associate becomes aware of any use or disclosure of protected health information not provided for by the Agreement including breaches of unsecured protected health information and/or any security incident that may have an impact on the protected health information of the Covered Entity.

b. The Business Associate shall immediately perform a risk assessment when it becomes aware of any of the above situations. The risk assessment shall include, but not be limited to:

- The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;
- The unauthorized person used the protected health information or to whom the disclosure was made;
- Whether the protected health information was actually acquired or viewed
- The extent to which the risk to the protected health information has been mitigated.

The Business Associate shall complete the risk assessment within 48 hours of the breach and immediately report the findings of the risk assessment in writing to the Covered Entity.

c. The Business Associate shall comply with all sections of the Privacy, Security, and Breach Notification Rule.

d. Business Associate shall make available all of its internal policies and procedures, books and records relating to the use and disclosure of PHI received from, or created or received by the Business Associate on behalf of Covered Entity to the Secretary for purposes of determining Covered Entity's compliance with HIPAA and the Privacy and Security Rule.

e. Business Associate shall require all of its business associates that receive, use or have access to PHI under the Agreement, to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein, including the duty to return or destroy the PHI as provided under Section 3 (l). The Covered Entity shall be considered a direct third party beneficiary of the Contractor's business associate agreements with Contractor's intended business associates, who will be receiving PHI.

Contractor Initials BH

Date 1/17/2023

pursuant to this Agreement, with rights of enforcement and indemnification from such business associates who shall be governed by standard Paragraph #13 of the standard contract provisions (P-37) of this Agreement for the purpose of use and disclosure of protected health information.

f. Within five (5) business days of receipt of a written request from Covered Entity, Business Associate shall make available during normal business hours at its offices all records, books, agreements, policies and procedures relating to the use and disclosure of PHI to the Covered Entity, for purposes of enabling Covered Entity to determine Business Associate's compliance with the terms of the Agreement.

g. Within ten (10) business days of receiving a written request from Covered Entity, Business Associate shall provide access to PHI in a Designated Record Set to the Covered Entity, or as directed by Covered Entity, to an individual in order to meet the requirements under 45 CFR Section 164.524.

h. Within ten (10) business days of receiving a written request from Covered Entity for an amendment of PHI or a record about an individual contained in a Designated Record Set, the Business Associate shall make such PHI available to Covered Entity for amendment and incorporate any such amendment to enable Covered Entity to fulfill its obligations under 45 CFR Section 164.526.

i. Business Associate shall document such disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR Section 164.528.

j. Within ten (10) business days of receiving a written request from Covered Entity for a request for an accounting of disclosures of PHI, Business Associate shall make available to Covered Entity such information as Covered Entity may require to fulfill its obligations to provide an accounting of disclosures with respect to PHI in accordance with 45 CFR Section 164.528.

k. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within two (2) business days forward such request to Covered Entity. Covered Entity shall have the responsibility of responding to forwarded requests. However, if forwarding the individual's request to Covered Entity would cause Covered Entity or the Business Associate to violate HIPAA and the Privacy and Security Rule, the Business Associate shall instead respond to the individual's request as required by such law and notify Covered Entity of such response as soon as practicable.

l. Within ten (10) business days of termination of the Agreement, for any reason, the Business Associate shall return or destroy, as specified by Covered Entity, all PHI received from, or created or received by the Business Associate in connection with the Agreement, and shall not retain any copies or back-up tapes of such PHI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, Business Associate shall continue to extend the protections of the Agreement, to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business

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Associate maintains such PHI. If Covered Entity, in its sole discretion, requires that the Business Associate destroy any or all PHI, the Business Associate shall certify to Covered Entity that the PHI has been destroyed.

(4) Obligations of Covered Entity

a. Covered Entity shall notify Business Associate of any changes or limitation(s) in its Notice of Privacy Practices provided to individuals in accordance with 45 CFR Section 164.520, to the extent that such change or limitation may affect Business Associate's use or disclosure of PHI.

b. Covered Entity shall promptly notify Business Associate of any changes in, or revocation of permission provided to Covered Entity by individuals whose PHI may be used or disclosed by Business Associate under this Agreement, pursuant to 45 CFR Section 164.508 or 45 CFR Section 164.508.

c. Covered entity shall promptly notify Business Associate of any restrictions on the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 CFR 164.522, to the extent that such restriction may affect Business Associate's use or disclosure of PHI.

(5) Termination for Cause

In addition to Paragraph 10 of the standard terms and conditions (P-37) of this Agreement the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a breach by Business Associate of the Business Associate Agreement set forth herein as Exhibit I. The Covered Entity may either immediately terminate the Agreement or provide an opportunity for Business Associate to cure the alleged breach within a timeframe specified by Covered Entity. If Covered Entity determines that neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.

(6) Miscellaneous

a. Definitions and Regulatory References. All terms used, but not otherwise defined herein, shall have the same meaning as those terms in the Privacy and Security Rule, amended from time to time. A reference in the Agreement, as amended to include this Exhibit I, to a Section in the Privacy and Security Rule means the Section as in effect or as amended.

b. Amendment. Covered Entity and Business Associate agree to take such action as is necessary to amend the Agreement, from time to time as is necessary for Covered Entity to comply with the changes in the requirements of HIPAA, the Privacy and Security Rule, and applicable federal and state law.

c. Data Ownership. The Business Associate acknowledges that it has no ownership rights with respect to the PHI provided by or created on behalf of Covered Entity.

d. Interpretation. The parties agree that any ambiguity in the Agreement shall be resolved to permit Covered Entity to comply with HIPAA, the Privacy and Security Rule.

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e. Segregation. If any term or condition of this Exhibit I or the application thereof to any person(s) or circumstance is held invalid; such invalidity shall not affect other terms or conditions which can be given effect without the invalid term or condition; to this end the terms and conditions of this Exhibit I are declared severable.

f. Survival. Provisions in this Exhibit I regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the Agreement in section (3) I, the defense and indemnification provisions of section (3) e and Paragraph 13 of the standard terms and conditions (P-37), shall survive the termination of the Agreement.

IN WITNESS WHEREOF, the parties hereto have duly executed this Exhibit I.

Department of Health and Human Services	Waypoint
The State	Name of the Contractor
Patricia M. Tilley	Borja Alvarez de Toledo
Signature of Authorized Representative	Signature of Authorized Representative
Patricia M. Tilley	Borja Alvarez de Toledo
Name of Authorized Representative	Name of Authorized Representative
Director	president and CEO
Title of Authorized Representative	Title of Authorized Representative
1/17/2023	1/17/2023
Date	Date

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CERTIFICATION REGARDING THE FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA) COMPLIANCE

The Federal Funding Accountability and Transparency Act (FFATA) requires prime awardees of individual Federal grants equal to or greater than $25,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $25,000 or more. If the initial award is below $26,000 but subsequent grant modifications result in a total award equal to or over $25,000, the award is subject to the FFATA reporting requirements, as of the date of the award.
In accordance with 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), the Department of Health and Human Services (DHHS) must report the following information for any subaward or contract award subject to the FFATA reporting requirements:

1. Name of entity
2. Amount of award
3. Funding agency
4. NAICS code for contracts / CFDA program number for grants
5. Program source
6. Award title descriptive of the purpose of the funding action
7. Location of the entity
8. Principle place of performance
9. Unique identifier of the entity (UEI #)
10. Total compensation and names of the top five executives if:
    - 10.1. More than 80% of annual gross revenues are from the Federal government, and those revenues are greater than $25M annually and
    - 10.2. Compensation information is not already available through reporting to the SEC.

Prime grant recipients must submit FFATA required data by the end of the month, plus 30 days, in which the award or award amendment is made.
The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of The Federal Funding Accountability and Transparency Act, Public Law 109-282 and Public Law 110-252, and 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:
The below named Contractor agrees to provide needed information as outlined above to the NH Department of Health and Human Services and to comply with all applicable provisions of the Federal Financial Accountability and Transparency Act.

Contractor Name: waypoint

DocuSigned by:
Borja Alvarez de Toledo

1/17/2023
Date

Name: Borja Alvarez de Toledo
Title: president and CEO

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FORM A

As the Contractor identified in Section 1.3 of the General Provisions, I certify that the responses to the below listed questions are true and accurate.

1. The UEI (SAM.gov) number for your entity is: QX4YNCN4JYK5

2. In your business or organization's preceding completed fiscal year, did your business or organization receive (1) 80 percent or more of your annual gross revenue in U.S. federal contracts, subcontracts, loans, grants, sub-grants, and/or cooperative agreements; and (2) $25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

   X NO _____ YES

   If the answer to #2 above is NO, stop here

   If the answer to #2 above is YES, please answer the following:

3. Does the public have access to information about the compensation of the executives in your business or organization through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C.78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

   _____ NO _____ YES

   If the answer to #3 above is YES, stop here

   If the answer to #3 above is NO, please answer the following:

4. The names and compensation of the five most highly compensated officers in your business or organization are as follows:

   Name: _____ Amount: _____

   Name: _____ Amount: _____

   Name: _____ Amount: _____

   Name: _____ Amount: _____

   Name: _____ Amount: _____

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New Hampshire Department of Health and Human Services

Exhibit K

DHHS Information Security Requirements

A. Definitions

The following terms may be reflected and have the described meaning in this document:

1. "Breach" means the loss of control, compromise, unauthorized disclosure, unauthorized acquisition, unauthorized access, or any similar term referring to situations where persons other than authorized users and for an other than authorized purpose have access or potential access to personally identifiable information, whether physical or electronic. With regard to Protected Health Information, " Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.

2. "Computer Security Incident" shall have the same meaning "Computer Security Incident" in section two (2) of NIST Publication 800-61, Computer Security Incident Handling Guide, National Institute of Standards and Technology, U.S. Department of Commerce.

3. "Confidential Information" or "Confidential Data" means all confidential information disclosed by one party to the other such as all medical, health, financial, public assistance benefits and personal information including without limitation, Substance Abuse Treatment Records, Case Records, Protected Health Information and Personally Identifiable Information.

   Confidential Information also includes any and all information owned or managed by the State of NH - created, received from or on behalf of the Department of Health and Human Services (DHHS) or accessed in the course of performing contracted services - of which collection, disclosure, protection, and disposition is governed by state or federal law or regulation. This information includes, but is not limited to Protected Health Information (PHI), Personal Information (PI), Personal Financial Information (PFI), Federal Tax Information (FTI), Social Security Numbers (SSN), Payment Card Industry (PCI), and or other sensitive and confidential information.

4. "End User" means any person or entity (e.g., contractor, contractor's employee, business associate, subcontractor, other downstream user, etc.) that receives DHHS data or derivative data in accordance with the terms of this Contract.

5. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996 and the regulations promulgated thereunder.

6. "Incident" means an act that potentially violates an explicit or implied security policy, which includes attempts (either failed or successful) to gain unauthorized access to a system or its data, unwanted disruption or denial of service, the unauthorized use of a system for the processing or storage of data; and changes to system hardware, firmware, or software characteristics without the owner's knowledge, instruction, or consent. Incidents include the loss of data through theft or device misplacement, loss or misplacement of hardcopy documents, and misrouting of physical or electronic

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mail, all of which may have the potential to put the data at risk of unauthorized access, use, disclosure, modification or destruction.

7. "Open Wireless Network" means any network or segment of a network that is not designated by the State of New Hampshire's Department of Information Technology or delegate as a protected network (designed, tested, and approved, by means of the State, to transmit) will be considered an open network and not adequately secure for the transmission of unencrypted PI, PFI, PHI or confidential DHHS data.

8. "Personal Information" (or "PI") means information which can be used to distinguish or trace an individual's identity, such as their name, social security number, personal information as defined in New Hampshire RSA 359-C:19, biometric records, etc., alone, or when combined with other personal or identifying information which is linked or linkable to a specific individual, such as date and place of birth, mother's maiden name, etc.

9. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 C.F.R. Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.

10. "Protected Health Information" (or "PHI") has the same meaning as provided in the definition of "Protected Health Information" in the HIPAA Privacy Rule at 45 C.F.R. § 160.103.

11. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 C.F.R. Part 164, Subpart C, and amendments thereto.

12. "Unsecured Protected Health Information" means Protected Health Information that is not secured by a technology standard that renders Protected Health Information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.

I. RESPONSIBILITIES OF DHHS AND THE CONTRACTOR

A. Business Use and Disclosure of Confidential Information.

1. The Contractor must not use, disclose, maintain or transmit Confidential Information except as reasonably necessary as outlined under this Contract. Further, Contractor, including but not limited to all its directors, officers, employees and agents, must not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.

2. The Contractor must not disclose any Confidential Information in response to a

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request for disclosure on the basis that it is required by law, in response to a subpoena, etc., without first notifying DHHS so that DHHS has an opportunity to consent or object to the disclosure.

3. If DHHS notifies the Contractor that DHHS has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Contractor must be bound by such additional restrictions and must not disclose PHI in violation of such additional restrictions and must abide by any additional security safeguards.
4. The Contractor agrees that DHHS Data or derivative there from disclosed to an End User must only be used pursuant to the terms of this Contract.
5. The Contractor agrees DHHS Data obtained under this Contract may not be used for any other purposes that are not indicated in this Contract.
6. The Contractor agrees to grant access to the data to the authorized representatives of DHHS for the purpose of inspecting to confirm compliance with the terms of this Contract.

II. METHODS OF SECURE TRANSMISSION OF DATA

1. Application Encryption. If End User is transmitting DHHS data containing Confidential Data between applications, the Contractor attests the applications have been evaluated by an expert knowledgeable in cyber security and that said application's encryption capabilities ensure secure transmission via the internet.
2. Computer Disks and Portable Storage Devices. End User may not use computer disks or portable storage devices, such as a thumb drive, as a method of transmitting DHHS data.
3. Encrypted Email. End User may only employ email to transmit Confidential Data if email is encrypted and being sent to and being received by email addresses of persons authorized to receive such information.
4. Encrypted Web Site. If End User is employing the Web to transmit Confidential Data, the secure socket layers (SSL) must be used and the web site must be secure. SSL encrypts data transmitted via a Web site.
5. File Hosting Services, also known as File Sharing Sites. End User may not use file hosting services, such as Dropbox or Google Cloud Storage, to transmit Confidential Data.
6. Ground Mail Service. End User may only transmit Confidential Data via *certified* ground mail within the continental U.S. and when sent to a named individual.
7. Laptops and PDA. If End User is employing portable devices to transmit Confidential Data said devices must be encrypted and password-protected.
8. Open Wireless Networks. End User may not transmit Confidential Data via an open

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wireless network. End User must employ a virtual private network (VPN) when remotely transmitting via an open wireless network.

9. Remote User Communication. If End User is employing remote communication to access or transmit Confidential Data, a virtual private network (VPN) must be installed on the End User's mobile device(s) or laptop from which information will be transmitted or accessed.
10. SSH File Transfer Protocol (SFTP), also known as Secure File Transfer Protocol. If End User is employing an SFTP to transmit Confidential Data, End User will structure the Folder and access privileges to prevent inappropriate disclosure of information. SFTP folders and sub-folders used for transmitting Confidential Data will be coded for 24-hour auto-deletion cycle (i.e. Confidential Data will be deleted every 24 hours).
11. Wireless Devices. If End User is transmitting Confidential Data via wireless devices, all data must be encrypted to prevent inappropriate disclosure of information.

III. RETENTION AND DISPOSITION OF IDENTIFIABLE RECORDS

The Contractor will only retain the data and any derivative of the data for the duration of this Contract. After such time, the Contractor will have 30 days to destroy the data and any derivative in whatever form it may exist, unless, otherwise required by law or permitted under this Contract. To this end, the parties must:

A. Retention

1. The Contractor agrees it will not store, transfer or process data collected in connection with the services rendered under this Contract outside of the United States. This physical location requirement shall also apply in the implementation of cloud computing, cloud service or cloud storage capabilities, and includes backup data and Disaster Recovery locations.
2. The Contractor agrees to ensure proper security monitoring capabilities are in place to detect potential security events that can impact State of NH systems and/or Department confidential information for contractor provided systems.
3. The Contractor agrees to provide security awareness and education for its End Users in support of protecting Department confidential information.
4. The Contractor agrees to retain all electronic and hard copies of Confidential Data in a secure location and identified in section IV. A.2
5. The Contractor agrees Confidential Data stored in a Cloud must be in a FedRAMP/HITECH compliant solution and comply with all applicable statutes and regulations regarding the privacy and security. All servers and devices must have currently-supported and hardened operating systems, the latest anti-viral, anti-hacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a

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whole, must have aggressive intrusion-detection and firewall protection.

6. The Contractor agrees to and ensures its complete cooperation with the State's Chief Information Officer in the detection of any security vulnerability of the hosting infrastructure.

B. Disposition

1. If the Contractor will maintain any Confidential Information on its systems (or its sub-contractor systems), the Contractor will maintain a documented process for securely disposing of such data upon request or contract termination; and will obtain written certification for any State of New Hampshire data destroyed by the Contractor or any subcontractors as a part of ongoing, emergency, and or disaster recovery operations. When no longer in use, electronic media containing State of New Hampshire data shall be rendered unrecoverable via a secure wipe program in accordance with industry-accepted standards for secure deletion and media sanitization, or otherwise physically destroying the media (for example, degaussing) as described in NIST Special Publication 800-88, Rev 1, Guidelines for Media Sanitization, National Institute of Standards and Technology, U. S. Department of Commerce. The Contractor will document and certify in writing at time of the data destruction, and will provide written certification to the Department upon request. The written certification will include all details necessary to demonstrate data has been properly destroyed and validated. Where applicable, regulatory and professional standards for retention requirements will be jointly evaluated by the State and Contractor prior to destruction.

2. Unless otherwise specified, within thirty (30) days of the termination of this Contract, Contractor agrees to destroy all hard copies of Confidential Data using a secure method such as shredding.

3. Unless otherwise specified, within thirty (30) days of the termination of this Contract, Contractor agrees to completely destroy all electronic Confidential Data by means of data erasure, also known as secure data wiping.

IV. PROCEDURES FOR SECURITY

A. Contractor agrees to safeguard the DHHS Data received under this Contract, and any derivative data or files, as follows:

1. The Contractor will maintain proper security controls to protect Department confidential information collected, processed, managed, and/or stored in the delivery of contracted services.

2. The Contractor will maintain policies and procedures to protect Department confidential information throughout the information lifecycle, where applicable, (from creation, transformation, use, storage and secure destruction) regardless of the media used to store the data (i.e., tape, disk, paper, etc.).

Contractor Initials DS BAT

Date 1/17/2023

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3. The Contractor will maintain appropriate authentication and access controls to contractor systems that collect, transmit, or store Department confidential information where applicable.

4. The Contractor will ensure proper security monitoring capabilities are in place to detect potential security events that can impact State of NH systems and/or Department confidential information for contractor provided systems.

5. The Contractor will provide regular security awareness and education for its End Users in support of protecting Department confidential information.

6. If the Contractor will be sub-contracting any core functions of the engagement supporting the services for State of New Hampshire, the Contractor will maintain a program of an internal process or processes that defines specific security expectations, and monitoring compliance to security requirements that at a minimum match those for the Contractor, including breach notification requirements.

7. The Contractor will work with the Department to sign and comply with all applicable State of New Hampshire and Department system access and authorization policies and procedures, systems access forms, and computer use agreements as part of obtaining and maintaining access to any Department system(s). Agreements will be completed and signed by the Contractor and any applicable sub-contractors prior to system access being authorized.

8. If the Department determines the Contractor is a Business Associate pursuant to 45 CFR 160.103, the Contractor will execute a HIPAA Business Associate Agreement (BAA) with the Department and is responsible for maintaining compliance with the agreement.

9. The Contractor will work with the Department at its request to complete a System Management Survey. The purpose of the survey is to enable the Department and Contractor to monitor for any changes in risks, threats, and vulnerabilities that may occur over the life of the Contractor engagement. The survey will be completed annually, or an alternate time frame at the Departments discretion with agreement by the Contractor, or the Department may request the survey be completed when the scope of the engagement between the Department and the Contractor changes.

10. The Contractor will not store, knowingly or unknowingly, any State of New Hampshire or Department data offshore or outside the boundaries of the United States unless prior express written consent is obtained from the Information Security Office leadership member within the Department.

11. Data Security Breach Liability. In the event of any security breach Contractor shall make efforts to investigate the causes of the breach, promptly take measures to prevent future breach and minimize any damage or loss resulting from the breach. The State shall recover from the Contractor all costs of response and recovery from

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the breach, including but not limited to: credit monitoring services, mailing costs and costs associated with website and telephone call center services necessary due to the breach.

12. Contractor must, comply with all applicable statutes and regulations regarding the privacy and security of Confidential Information, and must in all other respects maintain the privacy and security of PI and PHI at a level and scope that is not less than the level and scope of requirements applicable to federal agencies, including, but not limited to, provisions of the Privacy Act of 1974 (5 U.S.C. § 552a), DHHS Privacy Act Regulations (45 C.F.R. §5b), HIPAA Privacy and Security Rules (45 C.F.R. Parts 160 and 164) that govern protections for individually identifiable health information and as applicable under State law.

13. Contractor agrees to establish and maintain appropriate administrative, technical, and physical safeguards to protect the confidentiality of the Confidential Data and to prevent unauthorized use or access to it. The safeguards must provide a level and scope of security that is not less than the level and scope of security requirements established by the State of New Hampshire, Department of Information Technology. Refer to Vendor Resources/Procurement at https://www.nh.gov/doit/vendor/index.htm for the Department of Information Technology policies, guidelines, standards, and procurement information relating to vendors.

14. Contractor agrees to maintain a documented breach notification and incident response process. The Contractor will notify the State's Privacy Officer and the State's Security Officer of any security breach immediately, at the email addresses provided in Section VI. This includes a confidential information breach, computer security incident, or suspected breach which affects or includes any State of New Hampshire systems that connect to the State of New Hampshire network.

15. Contractor must restrict access to the Confidential Data obtained under this Contract to only those authorized End Users who need such DHHS Data to perform their official duties in connection with purposes identified in this Contract.

16. The Contractor must ensure that all End Users:

    a. comply with such safeguards as referenced in Section IV A. above, implemented to protect Confidential Information that is furnished by DHHS under this Contract from loss, theft or inadvertent disclosure.

    b. safeguard this information at all times.

    c. ensure that laptops and other electronic devices/media containing PHI, PI, or PFI are encrypted and password-protected.

    d. send emails containing Confidential Information only if encrypted and being sent to and being received by email addresses of persons authorized to receive such information.

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e. limit disclosure of the Confidential Information to the extent permitted by law.

f. Confidential Information received under this Contract and individually identifiable data derived from DHHS Data, must be stored in an area that is physically and technologically secure from access by unauthorized persons during duty hours as well as non-duty hours (e.g., door locks, card keys, biometric identifiers, etc.).

g. only authorized End Users may transmit the Confidential Data, including any derivative files containing personally identifiable information, and in all cases, such data must be encrypted at all times when in transit, at rest, or when stored on portable media as required in section IV above.

h. in all other instances Confidential Data must be maintained, used and disclosed using appropriate safeguards, as determined by a risk-based assessment of the circumstances involved.

i. understand that their user credentials (user name and password) must not be shared with anyone. End Users will keep their credential information secure. This applies to credentials used to access the site directly or indirectly through a third party application.

Contractor is responsible for oversight and compliance of their End Users. DHHS reserves the right to conduct onsite inspections to monitor compliance with this Contract, including the privacy and security requirements provided in herein, HIPAA, and other applicable laws and Federal regulations until such time the Confidential Data is disposed of in accordance with this Contract.

V. LOSS REPORTING

The Contractor must notify the State's Privacy Officer and Security Officer of any Security Incidents and Breaches immediately, at the email addresses provided in Section VI.

The Contractor must further handle and report Incidents and Breaches involving PHI in accordance with the agency's documented Incident Handling and Breach Notification procedures and in accordance with 42 C.F.R. §§ 431.300 - 306. In addition to, and notwithstanding, Contractor's compliance with all applicable obligations and procedures, Contractor's procedures must also address how the Contractor will:

1. Identify Incidents;
2. Determine if personally identifiable information is involved in Incidents;
3. Report suspected or confirmed Incidents as required in this Exhibit or P-37;
4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and

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5. Determine whether Breach notification is required, and, if so, identify appropriate Breach notification methods, timing, source, and contents from among different options, and bear costs associated with the Breach notice as well as any mitigation measures.

Incidents and/or Breaches that implicate PI must be addressed and reported, as applicable, in accordance with NH RSA.359-C:20.

VI. PERSONS TO CONTACT

A. DHHS Privacy Officer:

DHHSPrivacyOfficer@dhhs.nh.gov

B. DHHS Security Officer:

DHHSInformationSecurityOffice@dhhs.nh.gov