STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH

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

May 11, 2026

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, to enter into contracts with the Contractors listed below in an amount not to exceed $14,626,020 to provide home visiting services to pregnant and parenting women, as well as families with children up to the age of 18 years of age, with the option to renew for up to four (4) additional years, effective July 1, 2026, upon Governor and Council approval through June 30, 2029. 89% Federal Funds. 11% General Funds.

Contractor Name	Vendor Code	Area Served	Contract Amount
Children Unlimited, Inc. Conway, NH	156114	Conway	$1,136,607
Community Action Partnership of Strafford County Dover, NH	177200	Rochester	$1,128,674
Greater Seacoast Community Health Portsmouth, NH	154703	Seacoast	$1,525,260
VNA at HCS, Inc. Keene, NH	177274	Keene	$1,525,638
Lakes Region Community Services Council Laconia, NH	177251	Laconia	$1,296,427
The Family Resource Center at Gorham Berlin, NH	162412	Berlin and Littleton	$2,594,990
TLC Family Resource Center	170625	Claremont	$1,603,569

Claremont, NH			
Waypoint Manchester, NH	177166	Concord, Manchester and Southern	$3,814,855
		Total:	**$14,626,020**

Funds are available in the following accounts for State Fiscal Year 2027, and are anticipated to be available in State Fiscal Years 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 for the Contractors to provide statewide home visiting services that support pregnant and parenting women, as well as families with children up to 18 years of age. The Contractors implement home visiting services under the Comprehensive Family Support (CFS) program, using the Family Check Up (FCU) model. The evidence-based FCU model provides family-based, preventative services that are designed to empower families, improve child well-being, and address support needs through home visiting, parent education, and resource coordination. These services are voluntary and provided at no cost to any pregnant and parenting women and families with children up to age 18 who reside in New Hampshire.

Through the CFS program, families can access a range of services including parenting support, education, screenings for child development and maternal depression, and referrals to resources such as nutrition and financial support programs. Contractor services promote and strengthen family health and wellness, as well prevent child maltreatment. Child welfare outcomes are monitored for three years after CFS discharge. Over the past 6 years more than 90% of CFS participant children have no founded DCYF event of abuse or neglect.

Services will be offered through New Hampshire's 11 district office catchment areas to ensure families statewide can participate. Approximately 1,225 families will be served annually with an average of 2,072 children and 1,520 adults in total receiving services. The program has received 640 referrals from DCYF in SFY 26.

The Department will monitor outcomes including reduction in child welfare involvement, increase in completed screenings for child development and maternal depression, and improvement in access to support services. Additionally, the Department will monitor services by:

- Fidelity monitoring to review implementation of Family Check Up services.
- Reviewing Contractor expenditures and conduct data quality assurance activities monthly.
- Reviewing consumer satisfaction data, which must indicate an 80% above favorable rating at a minimum.

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 February 5, 2026, through March 6, 2026. The Department received 11 responses that were reviewed and scored by a team of qualified individuals. The Scoring Sheet is attached.

As referenced in Exhibit A, Revision to Standard Contract Provisions, 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, there will be a lack of available community-based home visiting services for children and families statewide, which may lead to enhanced instance of child maltreatment and demand on child welfare and other social service programs.

Area served: Statewide.

Source of Funds: ALN: 93.558, 93.667 FAIN: 2401NHTANF, 2501NHSOSR.

Respectfully submitted,

For:

Lori A. Weaver
Commissioner

FISCAL DETAILS
COMPREHENSIVE FAMILY SUPPORT

05-095-093-930510-36750000-102-500731-93053675 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF HHS:DLTSS-DEVELOPMENTAL SVCS, BUR-FAMILY CENTERED SERVICES, SOCIAL SERVICES BLOCK GRANT-SSBG

100% Federal Funds, CFDA #93.667, Title XX Grant 2501NHSOSR

WAYPOINT VENDOR# 177166-B002

FISCAL YEAR	CLASS	TITLE	JOB NUMBER	Total Budget
2027	102-500731	Grants for Pub Asst	93053675	$206,838
2028	102-500731	Grants for Pub Asst	93053675	$206,838
2029	102-500731	Grants for Pub Asst	93053675	$206,838
			Subtotal:	**$620,514**

CHILDREN UNLIMITED, INC. (CONWAY DISTRICT OFFICE SERVICE AREA) VENDOR # 156114-B001

FISCAL YEAR	CLASS	TITLE	JOB NUMBER	Total Budget
2027	102-500731	Grants for Pub Asst	93053675	$61,622
2028	102-500731	Grants for Pub Asst	93053675	$61,622
2029	102-500731	Grants for Pub Asst	93053675	$61,622
			Subtotal:	**$184,866**

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY (ROCHESTER DISTRICT OFFICE SERVICE AREA) VENDOR # 177200-B004

FISCAL YEAR	CLASS	TITLE	JOB NUMBER	Total Budget
2027	102-500731	Grants for Pub Asst	93053675	$61,222
2028	102-500731	Grants for Pub Asst	93053675	$61,222
2029	102-500731	Grants for Pub Asst	93053675	$61,222
			Subtotal:	**$183,666**

GREATER SEACOAST COMMUNITY HEALTH (F/K/A Families First) (SEACOAST DISTRICT OFFICE SERVICE AREA) VENDOR# 154703-B001

FISCAL YEAR	CLASS	TITLE	JOB NUMBER	Total Budget
2027	102-500731	Grants for Pub Asst	93053675	$82,716
2028	102-500731	Grants for Pub Asst	93053675	$82,716
2029	102-500731	Grants for Pub Asst	93053675	$82,716
			Subtotal:	**$248,148**

TLC FAMILY RESOURCE CENTER(Claremont) VENDOR# 170625-B001

FISCAL YEAR	CLASS	TITLE	JOB NUMBER	Total Budget
2027	102-500731	Grants for Pub Asst	93053675	$86,919
2028	102-500731	Grants for Pub Asst	93053675	$86,919
2029	102-500731	Grants for Pub Asst	93053675	$86,919
			Subtotal:	**$260,757**

VNA at HCS, Inc. (KEENE DISTRICT OFFICE SERVICE AREA) VENDOR # 177274-B002

FISCAL YEAR	CLASS	TITLE	JOB NUMBER	Total Budget
2027	102-500731	Grants for Pub Asst	93053675	$82,716
2028	102-500731	Grants for Pub Asst	93053675	$82,716
2029	102-500731	Grants for Pub Asst	93053675	$82,716
			Subtotal:	**$248,148**

LAKES REGION COMMUNITY SERVICES COUNCIL (LACONIA DISTRICT OFFICE SERVICE AREA) VENDOR # 177251- B001

FISCAL YEAR	CLASS	TITLE	JOB NUMBER	Total Budget
2027	102-500731	Grants for Pub Asst	93053675	$70,266
2028	102-500731	Grants for Pub Asst	93053675	$70,266
2029	102-500731	Grants for Pub Asst	93053675	$70,266
			Subtotal:	**$210,798**

THE FAMILY RESOURCE CENTER AT GORHAM (BERLIN & LITTLETON) VENDOR # 162412-B001

FISCAL YEAR	CLASS	TITLE	JOB NUMBER	Total Budget
2027	102-500731	Grants for Pub Asst	93053675	$140,691
2028	102-500731	Grants for Pub Asst	93053675	$140,691
2029	102-500731	Grants for Pub Asst	93053675	$140,691
			Subtotal:	**$422,073**
			TOTAL:	**$2,378,970**

05-095-045-450010-61460000-102-500731-45030353 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: DIV ECONOMIC STABILITY, BUR OF FAMILY ASSISTANCE, TEMP ASSISTNC TO NEEDY FAMILIES

100% Federal Funds, CFDA 93.558, Federal Funds from U.S Department of Health and Human Services, Temporary Assistance for Needy Families; FAIN 2401NHTANF

WAYPOINT VENDOR# 177166-B002

FISCAL YEAR	CLASS	TITLE	JOB NUMBER	Total Budget
2027	102-500731	Grants for Pub Asst	45030353	$905,614
2028	102-500731	Grants for Pub Asst	45030353	$923,872
2029	102-500731	Grants for Pub Asst	45030353	$949,955
			Subtotal:	**$2,779,441**

CHILDREN UNLIMITED, INC. (CONWAY DISTRICT OFFICE SERVICE AREA) VENDOR # 156114-B001

FISCAL YEAR	CLASS	TITLE	JOB NUMBER	Total Budget
2027	102-500731	Grants for Pub Asst	45030353	$269,033
2028	102-500731	Grants for Pub Asst	45030353	$274,473
2029	102-500731	Grants for Pub Asst	45030353	$282,244
			Subtotal:	**$825,750**

FISCAL DETAILS
COMPREHENSIVE FAMILY SUPPORT

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY (ROCHESTER DISTRICT OFFICE SERVICE AREA) VENDOR # 177200-B004				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Grants for Pub Asst	45030353	$267,054
2028	102-500731	Grants for Pub Asst	45030353	$272,456
2029	102-500731	Grants for Pub Asst	45030353	$280,173
			Subtotal:	**$819,683**

GREATER SEACOAST COMMUNITY HEALTH (F/K/A Families First) (SEACOAST DISTRICT OFFICE SERVICE AREA) VENDOR# 154703-B001				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Grants for Pub Asst	45030353	$363,545
2028	102-500731	Grants for Pub Asst	45030353	$370,843
2029	102-500731	Grants for Pub Asst	45030353	$381,273
			Subtotal:	**$1,115,661**

TLC FAMILY RESOURCE CENTER(Claremont) VENDOR# 170625-B001				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Grants for Pub Asst	45030353	$382,661
2028	102-500731	Grants for Pub Asst	45030353	$390,336
2029	102-500731	Grants for Pub Asst	45030353	$401,299
			Subtotal:	**$1,174,296**

VNA at HCS, Inc. (KEENE DISTRICT OFFICE SERVICE AREA) VENDOR # 177274-B002				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Grants for Pub Asst	45030353	$363,668
2028	102-500731	Grants for Pub Asst	45030353	$370,970
2029	102-500731	Grants for Pub Asst	45030353	$381,401
			Subtotal:	**$1,116,039**

LAKES REGION COMMUNITY SERVICES COUNCIL (LACONIA DISTRICT OFFICE SERVICE AREA) VENDOR # 177251- B001				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Grants for Pub Asst	45030353	$307,941
2028	102-500731	Grants for Pub Asst	45030353	$314,146
2029	102-500731	Grants for Pub Asst	45030353	$323,010
			Subtotal:	**$945,097**

THE FAMILY RESOURCE CENTER AT GORHAM (BERLIN & LITTLETON) VENDOR # 162412-B001				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Grants for Pub Asst	45030353	$616,343
2028	102-500731	Grants for Pub Asst	45030353	$628,763
2029	102-500731	Grants for Pub Asst	45030353	$646,504
			Subtotal:	**$1,891,610**
			TOTAL:	**$10,667,577**

05-95-090-902010-70470000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: PUBLIC HEALTH DIV, BUREAU OF FAMILY HEALTH & NUTRITION, COMMUNITY COLLABORATION

100% General Funds

WAYPOINT VENDOR# 177166-B002				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Contracts for Program Serv	90070475	$138,300
2028	102-500731	Contracts for Program Serv	90070475	$138,300
2029	102-500731	Contracts for Program Serv	90070475	$138,300
			Subtotal:	**$414,900**

CHILDREN UNLIMITED, INC. (CONWAY DISTRICT OFFICE SERVICE AREA) VENDOR # 156114-B001				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Contracts for Program Serv	90070475	$41,997
2028	102-500731	Contracts for Program Serv	90070475	$41,997
2029	102-500731	Contracts for Program Serv	90070475	$41,997
			Subtotal:	**$125,991**

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY (ROCHESTER DISTRICT OFFICE SERVICE AREA) VENDOR # 177200-B004				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Contracts for Program Serv	90070475	$41,775
2028	102-500731	Contracts for Program Serv	90070475	$41,775
2029	102-500731	Contracts for Program Serv	90070475	$41,775
			Subtotal:	**$125,325**

GREATER SEACOAST COMMUNITY HEALTH (F/K/A Families First) (SEACOAST DISTRICT OFFICE SERVICE AREA) VENDOR# 154703-B001				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Contracts for Program Serv	90070475	$53,817
2028	102-500731	Contracts for Program Serv	90070475	$53,817
2029	102-500731	Contracts for Program Serv	90070475	$53,817
			Subtotal:	**$161,451**

TLC FAMILY RESOURCE CENTER(Claremont) VENDOR# 170625-B001				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Contracts for Program Serv	90070475	$56,172
2028	102-500731	Contracts for Program Serv	90070475	$56,172

FISCAL DETAILS
COMPREHENSIVE FAMILY SUPPORT

2029	102-500731	Contracts for Program Serv	90070475	$56,172
			Subtotal:	**$168,516**

VNA at HCS, Inc. (KEENE DISTRICT OFFICE SERVICE AREA) VENDOR # 177274-B002				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Contracts for Program Serv	90070475	$53,817
2028	102-500731	Contracts for Program Serv	90070475	$53,817
2029	102-500731	Contracts for Program Serv	90070475	$53,817
			Subtotal:	**$161,451**

LAKES REGION COMMUNITY SERVICES COUNCIL (LACONIA DISTRICT OFFICE SERVICE AREA) VENDOR # 177251- B001				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Contracts for Program Serv	90070475	$46,844
2028	102-500731	Contracts for Program Serv	90070475	$46,844
2029	102-500731	Contracts for Program Serv	90070475	$46,844
			Subtotal:	**$140,532**

THE FAMILY RESOURCE CENTER AT GORHAM (BERLIN & LITTLETON) VENDOR # 162412-B001				
FISCAL YEAR	**CLASS**	**TITLE**	**JOB NUMBER**	**Total Budget**
2027	102-500731	Contracts for Program Serv	90070475	$93,769
2028	102-500731	Contracts for Program Serv	90070475	$93,769
2029	102-500731	Contracts for Program Serv	90070475	$93,769
			Subtotal:	**$281,307**
			TOTAL:	**$1,579,473**

CONTRACT TOTAL:	**$14,626,020**

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

Project ID # RFP-2027-DPH-05-COMPR

Project Title Comprehensive Family Support (CFS)

	Maximum Points Available	Children Unlimited, Inc.- Conway	Community Action Partnership of Strafford County- Rochester	Greater Seacoast Community Health-Seacoast	VNA at HCS, Inc.- Keene	Lakes Region Community Services Council- Laconia	The Family Resource Center at Gorham- Berlin	The Family Resource Center at Gorham- Littleton	Waypoint - Manchester	TLC Family Resource Center- Claremont	Waypoint- Southern	Waypoint- Concord
Technical												
Q1 - Experience and Knowledge	**125**	120	115	124	80	120	120	120	124	115	124	124
Q2 - Ability	**300**	275	270	299	200	275	290	290	295	285	295	295
Q3 - Accessibility and Family Engagement	**100**	95	95	100	80	100	95	95	90	100	90	90
Q4 - Capacity	**175**	170	140	174	100	170	160	160	165	170	170	170
Subtotal - Technical	**700**	**660**	**620**	**697**	**460**	**665**	**665**	**665**	**674**	**670**	**679**	**679**
If a Vendor fails to achieve the minimum Technical score stated within the RFP, it will receive no further consideration from the evaluation team and the Vendor's Cost Proposal will remain unopened.												
Cost												
Vendor Cost	**250**	218	220	163	162	191	155	250	203	155	191	191
Vendor Budget Evaluation	**50**	40	35	40	30	45	45	45	40	35	40	45
Subtotal - Cost	**300**	**258**	**255**	**203**	**192**	**236**	**200**	**295**	**243**	**190**	**231**	**236**
TOTAL POINTS	**1000**	**918**	**875**	**900**	**652**	**901**	**865**	**960**	**917**	**860**	**910**	**915**
TOTAL PROPOSED VENDOR COST		$1,136,607	$1,128,674	$1,525,260	$1,525,638	$1,296,031	$1,603,568	$991,420	$1,221,014	$1,603,568	$1,297,567	$1,296,274

	Reviewer Name	Title
1	Virginia Jones	Primary Prevention Administrator
2	Olivia Conner	Comprehensive Family Support (CFS) Program Manager
3	Lisa Lampron	Administrator II - Finance
5	Athena Cote	Section Chief Family & Community Health
6	Hannah Scott	Nutrition Coordinator

FORM NUMBER P-37 (version 2/23/2023)

Subject: Comprehensive Family Support (CFS) (RFP-2027-DPH-05-COMPR-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 Children Unlimited, Inc.		1.4 Contractor Address 182 West Main Street Conway, NH 03818	
1.5 Contractor Phone Number 603-447-6356	1.6 Account Unit and Class TBD	1.7 Completion Date June 30, 2029	1.8 Price Limitation $1,136,607
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: Ardis Yahna FDE76134D89E4AC... Date: 4/28/2026		1.12 Name and Title of Contractor Signatory Ardis Yahna Executive Director	
1.13 State Agency Signature DocuSigned by: Iain Watt D778BB63F9704C7... Date: 4/29/2026		1.14 Name and Title of State Agency Signatory Iain Watt Director - DPH	
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 748734844941460... On: 5/5/2026			
1.17 Approval by the Governor and Executive Council *(if applicable)* G&C Item number:		G&C Meeting Date:	

Contractor Initials: DS AY
Date: 4/28/2026

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

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

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

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

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

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

4. CONDITIONAL NATURE OF AGREEMENT.

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

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

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

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

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

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

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

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

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

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

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

7. PERSONNEL.

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

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

Contractor Initials: DS AY

Date: 4/28/2026

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

8. EVENT OF DEFAULT/REMEDIES.

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

8.1.1 failure to perform the Services satisfactorily or on schedule;

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

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

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

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

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

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

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

9. TERMINATION.

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

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

10. PROPERTY OWNERSHIP/DISCLOSURE.

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

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

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

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

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

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

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

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

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

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

Contractor Initials: DS

Date: 4/28/2026

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

14. INSURANCE.
14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:
14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than $1,000,000 per occurrence and $2,000,000 aggregate or excess; and
14.1.2 special cause of loss coverage form covering all Property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the Property.
14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.
14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or any successor, a certificate(s) of insurance for all insurance required under this Agreement. At the request of the Contracting Officer, or any successor, the Contractor shall provide certificate(s) of insurance for all renewal(s) of insurance required under this Agreement. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

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

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

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

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

19. CHOICE OF LAW AND FORUM.
19.1 This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire except where the Federal supremacy clause requires otherwise. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.
19.2 Any actions arising out of this Agreement, including the breach or alleged breach thereof, may not be submitted to binding arbitration, but must, instead, be brought and maintained in the Merrimack County Superior Court of New Hampshire which shall have exclusive jurisdiction thereof.

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

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

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

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

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

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

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

Contractor Initials: AY
Date: 4/28/2026

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

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, this Agreement, and all obligations of the parties hereunder, shall become effective on July 1, 2026 (“Effective Date”).

1.2. Paragraph 3, Effective Date/Completion of Services, is amended by deleting subparagraph 3.3., in its entirety and replacing it as follows:

3.3. Contractor must complete all Services by the Completion Date specified in block 1.7. 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 6, Compliance by Contractor with Laws and Regulations/Equal Employment Opportunity, Subparagraph 6.1., is amended as follows:

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, RSA 151:21 Patients’ Bill of Rights, civil rights and equal employment opportunity laws, and the Governor’s order on Respect and Civility in the Workplace, Executive Order 2020-01. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

1.4. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.5., as follows:

12.5. 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.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

1. Statement of Work

1.1. The Contractor must provide the Comprehensive Family Support (CFS) Program. The Contractor must provide services to pregnant and parenting women as well as other families with children up to eighteen (18) years of age who are:

1.1.1. Experiencing, or at risk of experiencing difficulty with:

1.1.1.1. Pregnancy;

1.1.1.2. Health and nutrition;

1.1.1.3. Education and employment;

1.1.1.4. Parenting challenges;

1.1.1.5. Social isolation;

1.1.1.6. Substance use disorders;

1.1.1.7. Mental health events;

1.1.1.8. Child abuse and neglect; and

1.1.1.9. Substance exposed infants.

1.1.2. Perinatal families of substance exposed infants.

1.1.3. At risk for child abuse and neglect.

1.1.4. Seeking Comprehensive Family Support (CFS) in a voluntary manner.

1.2. The Contractor must ensure all services are provided in the following DHHS Catchment area: Conway District Office. The Contractor must maintain a physical office located within the Catchment Area. The Contractor must ensure:

1.2.1. The office is accessible to families and staff at least five (5) days per week Monday through Friday during standard business hours of 8:00 am to 4:00 pm, excluding state holidays.

1.2.1.1. Evening hours are available at least one (1) night per week.

1.2.2. Families are provided flexible opportunities to meet in the home or community.

1.2.3. The office location remains in compliance with the Americans with Disabilities Act (ADA) accessibility requirements.

1.2.4. No duplication of services.

1.3. The Contractor must meet the Standards of Quality for Family Strengthening &

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Support as defined by the National Family Support Network. This includes:

1.3.1. Maintaining a current status throughout the term of the Agreement of having completed a New Hampshire self-assessment and received designation as a Family Resource Center (FRC) of Quality.

1.4. Comprehensive Family Support (CFS) Home Visiting Program

1.4.1. The Contractor must deliver high-quality, responsive CFS home visiting services to New Hampshire families with children ages 0-18, based on their emerging needs. The Contractor must ensure that families enrolled in CFS have access to all FRC services, home visiting services, parent education, parent support groups, father groups, parent cafes, information and referral, and case management. The Contractor must work collaboratively with the Department to deliver statewide CFS home visiting services that:

1.4.1.1. Promote healthy pregnancy and birth outcomes.

1.4.1.2. Support safe and nurturing environments for children and adolescents.

1.4.1.3. Improve maternal and child health.

1.4.1.4. Encourage positive parenting practices.

1.4.1.5. Reduce child maltreatment.

1.4.1.6. Increase linkages and referrals to community resources and supports.

1.4.2. The Contractor must ensure each family has a completed Individual Service Plan (ISP) that identifies and addresses barriers to achieving optimal health, well-being, and resiliency. The Contractor must use the ISP template provided by the Department and must include information about the education and support services that will be delivered across key outcome domains, which may include but are not limited to:

1.4.2.1. Maternal Health.

1.4.2.2. Child Health.

1.4.2.3. Child Development and School Readiness.

1.4.2.4. Community Linkages and Referrals.

1.4.2.5. Family Economic Self Sufficiency.

1.4.2.6. Positive Parenting Practices.

1.4.2.7. Preventative Child Care Scholarship.

1.4.3. The Contractor must provide CFS services using the Strengthening Families Framework developed by the Center for the Study of Social

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Policy (CSSP), addressing the five (5) Protective Factors which are:

1.4.3.1. Parental Resilience.

1.4.3.2. Social Connections.

1.4.3.3. Knowledge of parenting and child development.

1.4.3.4. Concrete supports in times of need.

1.4.3.5. Social and emotional competence of children.

1.4.4. The Contractor must ensure CFS services are delivered through a variety of methods, including but not limited to:

1.4.4.1. Home visiting services.

1.4.4.2. Educational workshops.

1.4.4.3. Peer-led or professionally facilitated support groups.

1.4.4.4. Parenting education and family support activities.

1.4.4.5. Trauma-informed services that recognize and respond to the impact of adverse experiences.

1.4.4.6. Access to concrete resources in times of need.

1.4.5. The Contractor must provide home visiting services that are respectful of the families served, strengths-based and family-centered, ensuring participation is voluntary and addresses each family's values, traditions, and needs.

1.4.6. The Contractor must collaborate with program participants to develop individualized, goal-oriented plans that improve economic self-sufficiency and long-term family stability. These goals may include, but are not limited to:

1.4.6.1. Planning future pregnancies.

1.4.6.2. Continuing education or vocational training.

1.4.6.3. Securing and maintaining employment.

1.4.6.4. Strengthening the family's Protective Factors.

1.4.6.5. Obtaining safe and stable housing.

1.4.6.6. Accessing community-based services and supports.

1.4.6.7. Participating in parenting education on topics such as:

1.4.6.7.1. Child development.

1.4.6.7.2. Child behavior and emotional regulation.

1.4.6.7.3. Child health and wellness.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

1.4.6.7.4. Coping strategies and problem-solving skills.

1.4.6.7.5. Home and child safety.

1.4.6.7.6. Positive parenting techniques.

1.4.7. The Contractor must promote education on health and safety topics including, but not limited to:

1.4.7.1. Providing child safety education through handouts and discussion using evidence-based curricula, including resources from the Centers for Disease Control (CDC) covering a wide range of topics such as:

1.4.7.1.1. Car seat safety and installation checks.

1.4.7.1.2. Use of safety gates and fall prevention.

1.4.7.1.3. Safe use of portable cribs and sleep environments.

1.4.7.1.4. Safe sleep practices to reduce the risk of Sudden Unexpected Infant Death Syndrome (SUID).

1.4.7.1.5. Lead poisoning prevention, including identification of environmental hazards.

1.4.7.1.6. Home safety strategies, including the use of window guards.

1.4.7.1.7. Oral health education for infants, children, and adolescents.

1.4.7.1.8. Understanding Adverse Childhood Experiences (ACEs) and building Protective Factors.

1.4.7.1.9. Smoking cessation education and referrals.

1.4.7.1.10. Educating families on the importance of primary care and preventative health services, including:

1.4.7.1.11. Access to preventative health care.

1.4.7.1.12. Immunizations.

1.4.7.1.13. Establishing a medical home for ongoing care coordination.

1.4.7.1.14. Improving child safety and health outcomes through regular well-child visits.

1.4.7.1.15. Postpartum health care follow up and planning for future pregnancies.

1.4.8. The Contractor must ensure all women have access to validated

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

screening tools, listed in 1.6.3, for prenatal and postpartum depression, and must refer all women who screen positive for maternal depression to appropriate follow-up care. The Contractor must provide support for participant enrollment in primary care and pediatric services.

1.4.9. The Contractor must complete and renew a Release of Information (ROI) form annually with all CFS participants for all programs, regardless of the type of services they are enrolled in. The ROI must include but is not limited to:

1.4.9.1. Acknowledgement of data collection within the Department's Family and Community Health Data System (FCH-DS).

1.4.9.2. Acknowledgement of sharing personal identifiable information with the Department.

1.4.9.3. Acknowledgement of the purpose of releasing data to the Department to review program outcomes and facilitate quality improvement activities.

1.4.9.4. Acknowledgement that Family Service Record outcome data will be kept and tracked for three (3) subsequent years following discharge.

1.4.9.5. All video recording, storage, access, and sharing requirements set forth elsewhere in this Scope of Services are contingent upon and governed by the participant consent requirements described in Section 1.7. The Contractor must use a paper coaching tool for participants that do not consent to video recording.

1.5. CFS Newborn Navigation Services

1.5.1. The Contractor must provide Newborn Navigation services as part of the CFS home visiting program. The purpose of newborn navigation services is to engage newborn families as early as possible in early childhood home visiting programs, community resources linkage, and services.

1.5.2. The Contractor must engage with families during pregnancy or within six (6) months of birth and provide at minimum one (1) voluntary CFS home visit within that timeframe. The visit must include care coordination services for pregnant and newborn families, with priority given to:

1.5.2.1. Family household at or below 250% of the federal poverty

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

level.

1.5.2.2. Single-parent households.

1.5.2.3. First time parents.

1.5.2.4. Families with other children under three (3) years of age.

1.5.2.5. Parents under twenty-five (25) years of age.

1.5.2.6. Parents with limited educational attainment.

1.5.3. The Contractor must make initial contact with families during pregnancy, prior to hospital discharge, or no later than six (6) months following birth to:

1.5.3.1. Schedule the initial home visit and collect intake prescreening information determined by the Department for follow-up; or

1.5.3.2. Provide FRC information to families who decline the home visit.

1.5.4. The Contractor must collect prescreening intake information and enter it into the FCH-DS prior to conducting the home visit.

1.5.5. For families who consent to CFS Newborn Navigation services, the Contractor must provide a Welcome Newborn Family bag, which includes Department-approved information and resources on topics such as:

1.5.5.1. WIC.

1.5.5.2. Medicaid.

1.5.5.3. Supplemental Nutrition Assistance Program (SNAP).

1.5.5.4. FRC services.

1.5.5.5. Lead poisoning prevention.

1.5.5.6. Safe sleep.

1.5.5.7. Infant nutrition.

1.5.5.8. Additional items as identified by the CFS agency and approved by the Department.

1.5.6. The Contractor must ensure enrolled families may receive up to three (3) Newborn Navigator home visits, all of which must occur within (6) months of enrollment.

1.5.7. The initial CFS Newborn Navigation home visit includes a comprehensive Family Needs Assessment and support services,

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

including but not limited to:

1.5.7.1. Maternal depression screening.

1.5.7.2. Developmental screening.

1.5.7.3. Referrals based on identified family needs.

1.5.7.4. Parent education and child safety (e.g., safe sleep, lead poisoning prevention, home safety).

1.5.7.5. Breastfeeding and lactation support.

1.5.7.6. Postpartum planning future pregnancies.

1.5.7.7. Infant feeding and nutrition support.

1.5.7.8. Positive parenting practices, including attachment.

1.5.7.9. Completion of release of information forms for referrals and sharing programmatic data with the Department.

1.5.8. Information and referral support to enroll in HFA or FCU programs. The CFS family support specialist delivering newborn navigation services must work with families to identify ongoing support needs and facilitate referrals to appropriate services and programs.

1.5.9. These include, but are not limited to:

1.5.9.1. Family Resource Center services,

1.5.9.2. Family Check Up,

1.5.9.3. Healthy Families America (HFA),

1.5.9.4. The Supplemental Nutrition Program for Woman, Infants and Children (WIC), and

1.5.9.5. Birth to Three Early Supports and Services.

1.5.10. The Contractor must ensure data related to CFS Newborn Navigation services is collected in the Department owned FCH-DS and reported in coordination with the Department.

1.5.11. The Contractor must collaborate with, build partnerships, and coordinate enrollment planning with local healthcare agencies to promote referrals from healthcare providers to CFS's Newborn Navigation services. Partners and collaboration examples include, but

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

are not limited to:

1.5.11.1. Birthing hospitals.

1.5.11.2. OB/GYN providers.

1.5.11.3. Pediatric healthcare providers.

1.5.11.4. Family medicine and primary care providers.

1.5.11.5. Community Health Centers.

1.5.12. The Contractor must offer satellite health office hours to increase accessibility, as needed.

1.5.13. The Contractor must distribute CFS Newborn Navigation informational and printed materials, as appropriate.

1.5.14. The Contractor must also collaborate and build partnerships with local early care and education programs that serve newborn families to coordinate services, prevent duplication. and enhance care coordination. These programs include, but are not limited to:

1.5.14.1. WIC.

1.5.14.2. Birth to Three Early Supports and Services.

1.5.14.3. Healthy Families America (HFA).

1.5.14.3.1. CFS staff delivering Newborn Navigation services must maintain an active collaboration with HFA, including a clearly defined referral and enrollment process to ensure that families who may be better served through HFA are appropriately connected.

1.5.14.3.2. Pregnant and newborn families identified as having high-risk factors or who meet eligibility criteria for HFA must be engaged and referred or enrolled into HFA through joint home visits and warm handoffs.

1.5.15. The Contractor must work in close collaboration with the Department's Quality Improvement Coordinator to ensure all readiness activities are completed prior to program implementation and support ongoing quality improvement and program oversight. This includes, but is not limited to:

1.5.15.1. Completion of CFS onboarding training.

1.5.15.2. Development and implementation of a family recruitment and

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

enrollment plan.

1.5.15.3. Creation of a health provider and community engagement strategy to align services and strengthen referral pathways.

1.5.15.4. Participation in monthly Community of Practice.

1.5.15.5. Execution of additional activities that support continuous quality improvement.

1.5.15.6. Collection of program data, including administration of a Department-approved post-participant survey, which may include, but is not limited to:

1.5.15.6.1. Assessment of participant knowledge related to community resources, postpartum depression, and newborn care following the initial home visit.

1.5.15.6.2. Evaluation of referrals made and connections established with community resources.

1.5.15.6.3. Measurement of participant satisfaction and likelihood to recommend Newborn Navigation services to others.

1.5.15.6.4. Collection of additional feedback to inform and enhance continuous quality improvement efforts.

1.5.16. The Contractor must collaborate with the Department to provide timely and accurate information related to program evaluation and other data requests necessary to support the Department's goals and reporting requirements. The Contractor must be prepared to share information with various divisions within the Department, including but not limited to:

1.5.16.1. Division of Public Health.

1.5.16.2. Division of Economic Stability.

1.5.16.3. Division of Long Term Supports and Services.

1.6. CFS Assessments and Referrals

1.6.1. The Contractor must actively engage and collaborate with the Department, including the Division for Children, Youth and Families (DCYF), and community partners such as schools, community mental health centers and health clinics to promote referrals into the program and prioritize enrollment of families who may be experiencing

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

circumstances that include, but are not limited to:

1.6.1.1. A previous or current founded or unfounded report to child protective services.

1.6.1.2. Having a child with low birth weight and/or neurodevelopmental delays.

1.6.1.3. A history of, or current, parental or caregiver substance abuse.

1.6.1.4. A history of, or current, mental health concerns affecting the parent, caregiver, or child(ren).

1.6.1.5. Household income at or below 250% of the Federal Poverty Level.

1.6.1.6. A family history of intimate partner violence.

1.6.1.7. Evidence of insecure attachment in the child's early years.

1.6.1.8. Pregnancy; birth of a child within the past twelve (12) months; anticipated birth of an additional child within the next six (6) months; or the birth or expected birth of a child with special healthcare needs.

1.6.1.9. Pregnant participants with prenatal substance use concerns, and families with substance-exposed infants.

1.6.1.10. Pregnant or post-partum participants with a Plan of Safe Care, or those in need of support to develop one.

1.6.1.11. Families with more than one (1) child under the age of three (3).

1.6.1.12. Experiences of physical or social isolation, or any other factors contributing to unhealthy social and emotional outcomes.

1.6.1.13. Home conditions that present a health and/or safety risk to family members.

1.6.1.14. A child or family member with chronic health, behavioral, or developmental conditions that impact parenting.

1.6.1.15. Results from the Ages and Stages Questionnaire (ASQ) or Ages and Stages Questionnaire Social Emotional (ASQ-SE) indicating developmental delays.

1.6.1.16. Families impacted by traumatic events.

1.6.1.17. Families receiving Temporary Assistance to Needy Families (TANF) cash assistance or enrolled in any

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Medicaid program.

1.6.1.18. Engagement with Substance Use Disorder (SUD) services.

1.6.2. The Contractor must complete a comprehensive Family Needs Assessment identified by the Department for each family served utilizing an intake assessment tool as identified by the Department within the first three (3) home visits, in order to identify family strengths, potential risk factors, and current and emerging needs. The Contractor must also conduct reassessments in accordance with the Family Check Up (FCU) model schedule, at a minimum of every six (6) months and again at twelve (12) months, or as otherwise directed by the Department.

1.6.3. The Contractor must utilize additional validated screening tools to support families and ensure budgeting to access tools, which may include, but are not limited to:

1.6.3.1. The Ages and Stages Questionnaires (ASQ-3 and ASQ:SE).

1.6.3.2. Brief System Inventory (BSI)

1.6.3.3. Edinburg Postnatal Depression Scale. (EPDS)

1.6.3.4. Developmental and social-emotional screenings for children ages one (1) month through five (5) years.

1.6.4. The Contractor must report on a monthly basis the number of families who received ASQ-3 and ASQ:SE screenings in a format specified by the Department.

1.6.5. The Contractor must provide expedited warm hand off referrals to appropriate community-based services and other resources that support families within their home communities, which may include, but are not limited to:

1.6.5.1. Childcare Aware of New Hampshire.

1.6.5.2. The Department's District Offices for assistance with program eligibility determinations.

1.6.5.3. Specialized Medicaid services, including Birth to Three Early Supports and Services.

1.6.5.4. The Supplemental Nutrition Program for Women, Infants and Children (WIC), Nutrition programs for breastfeeding

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

support, nutrition education, and access to healthy foods.

1.6.5.5. NH Employment Security.

1.6.5.6. Local school districts.

1.6.5.7. Family violence prevention agencies.

1.6.5.8. Mental health services.

1.6.5.9. Nutrition education and healthy foods.

1.6.5.10. Financial literacy and money management programs.

1.6.5.11. Smoking cessation programs.

1.6.5.12. Independent living skills programs.

1.6.5.13. Adult education programs.

1.6.5.14. Literacy education services.

1.6.5.15. Employment services.

1.6.5.16. Vocational rehabilitation services.

1.7. CFS Family Check Up Services

1.7.1. The Contractor must implement Northwest Prevention Science's Family Check-Up® (FCU) model, including the FCU portal. The Contactor must execute an agreement with Northwest Prevention Science Inc. before accessing the FCU portal or entering data.

1.7.2. The Contractor must provide at least one (1) trained staff per Catchment Area to implement the FCU model, within year one (1) of this Agreement. Training requirements include but are not limited to:

1.7.2.1. Motivational interviewing.

1.7.2.2. Everyday Parenting Curriculum, provided by the Department.

1.7.2.3. CFS onboarding and orientation training, provided by the Department.

1.7.3. The Contractor must work with the Department to support the implementation of the evidence-based FCU model to enhance the Department's CFS home visiting program services.

1.7.4. The Contractor must obtain all materials and resources required by the Department to successfully implement and deliver the FCU model with fidelity, including but not limited to a FCU informational flyer and/or brochure available for use with families and referral sources according to the FCU model resources.

1.7.5. The Contractor must provide access to computers, laptops, or other devices to use for video recordings, coding interaction os,

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

downloading and compiling assessment data. To meet these requirements, the Contractor must ensure the availability of the following specific materials, tools, and resources:

1.7.5.1. Devices with video recording capability to support the following activities:

1.7.5.1.1. Contractor video recording families during family interaction tasks, which are part of the FCU assessment process.

1.7.5.1.2. Contractor video recording family session monthly to share with their Supervisor-Trainers for fidelity checks.

1.7.5.1.3. Supervisor-Trainer's video recording family sessions, supervision, and trainings for the FCU certification process.

1.7.5.2. Devices for families to complete FCU questionnaires on the FCU Portal Website online. Devices must be capable of establishing an internet connection independently or through hotspots. Contractor agrees that while families may use their own devices for the FCU questionnaire, Contractor-provided devices during assessment sessions streamline the process and increase the likelihood of questionnaire completion.

1.7.5.3. Devices must have the following capabilities:

1.7.5.3.1. Able to stand alone on a surface or on a tripod during the video recording process.

1.7.5.3.2. Secure access to prevent unauthorized viewing of confidential information, since providers will leave the room while families complete interaction tasks.

1.7.5.3.3. HIPAA-compliant video storage.

1.7.5.4. Contractor must provide consent forms that must cover consent for the family for video recording, with separate sections or forms addressing Family Interaction Tasks and session recordings. Consents must clearly outline:

1.7.5.4.1. The purpose of videos.

1.7.5.4.2. Who may access them.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

1.7.5.4.3. The timeline for destruction of videos, in accordance with HIPAA retention requirements .

1.7.5.4.4. A statement that consent to video recording is not required for program participation.

1.7.6. The Contractor must ensure all video recording adheres to the requirements outlined in Exhibit E: DHHS Information Security Requirements.

1.7.7. Contractor must provide toys for family interaction tasks, including:

1.7.7.1. Toys appropriate for children ages two (2) to nine (9) years old.

1.7.7.2. A basket large enough to hold toys for younger children.

1.7.7.3. Several puzzles of varying difficulty.

1.7.7.4. Blocks sufficient to build a tower.

1.7.7.5. Paper and colored pens or crayons.

1.7.8. The Contractor must adapt FRC documentation and intake procedures to integrate FCU model activities. This includes the completion of FCU family questionnaires via the FCU portal.

1.7.9. Until all CFS home visitors are trained to deliver FCU, the Contractor's FCU Specialist must enroll families with children ages 0-18 on a voluntary basis. The target population for the FCU model includes, and priority enrollment through an intake process is given to, families referred to CFS who meet the following criteria:

1.7.9.1. Parents or caregivers with a diagnosed mental illness, and/or families with children who have a diagnosed mental illness.

1.7.9.2. Families with a history of child abuse or neglect or at risk of foster care placement.

1.7.9.3. Families with a history of substance use disorders or those in need of substance use disorder treatment.

1.7.9.4. Families with children experiencing low student achievement.

1.7.9.5. All families with children ages 0-5.

1.7.9.6. Families who meet eligibility criteria for Healthy Families America (HFA) will be enrolled in the Department's HFA

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

program when appropriate and available.

1.7.10. The Contractor must ensure that dedicated FCU staff and supervisors implement the model with fidelity and actively engage with the Department in fidelity monitoring and quality assurance activities. Services must include, but are not limited to:

1.7.10.1. Conducting in-person visits with each FCU-enrolled family, including a minimum of three (3) structured intake and assessment sessions, followed by ongoing support and documentation. These sessions must include:

1.7.10.1.1. An Initial Intake Session to establish rapport, gather information about the family system, and identify existing strengths and challenges.

1.7.10.1.2. A Second Assessment Session in which the Contractor assists the family in completing standardized questionnaires and assessment tools to evaluate needs and areas requiring support.

1.7.10.1.3. A Third Assessment Session focused on collaborative goal setting, which must include:

1.7.10.1.4. Development of a service plan incorporating Everyday Parenting sessions;

1.7.10.1.5. Referral and linkage to appropriate community-based resources; and

1.7.10.1.6. Identification and prioritization of the family's goals and service needs.

1.7.10.2. Following the initial session, within 30 business days, the Contractor's FCU Specialist must:

1.7.10.2.1. Conduct follow-up visits using strategies from the Everyday Parenting curriculum, tailored to the results of the family's assessments.

1.7.10.2.2. Ensure accurate and timely documentation in the FCH-DS and FCU online assessment tools, summarizing recommendations and next steps.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

1.7.10.2.3. Review family goals and progress on a quarterly basis in collaboration with the family.

1.7.10.2.4. Assess the family's readiness to change as part of ongoing engagement and service planning.

1.7.11. The Contractor must ensure the following:

1.7.11.1. Provide the Department with access to video-recorded family sessions to support monitoring of implementation and fidelity to the model, upon consent granted by the family in Section 1.7.3.4.

1.7.11.2. Provide the Department with a written policy regarding the use of video recording for the purpose of home visits. The Contractor must ensure all staff and subcontractors sign a confidentiality agreement and adhere to the confidentiality policy outlined in the written policy, and notify staff and subcontractors that violations may result in disciplinary action.

1.7.11.3. Obtain and document individual consent for all video-recorded sessions, including consent to share recordings with the Department for quality improvement purposes.

1.7.11.4. Ensure that appropriate equipment is available and maintained for home visitors to conduct video recordings, such as video camera, tablet, or other device with recording capabilities. The Contractor must ensure that staff does not use personal cell phones or other personal devices to conduct video recording.

1.7.12. The Contractor must only use marketing materials that have been reviewed and approved by the Department.

1.7.13. The Contractor must collaborate with the Department's CFS Program Manager, Quality Improvement and Training Coordinator, and FCU Model experts to ensure all readiness activities are completed prior to program implementation, including but not limited to:

1.7.13.1. Completion of FCU Model training.

1.7.13.2. Completion of Everyday Parenting Curriculum training.

1.7.13.3. Completion of Motivational Interviewing training.

1.7.13.4. Implementation of data collection processes, including a

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Department-approved participant post-survey.

1.7.13.5. Participation in monthly Supervisor Consultation, facilitated by the Department, to support implementation and fidelity to the FCU model.

1.8. Staffing and Training

1.8.1. The Contractor must designate at least one (1) dedicated FCU Specialist position as part of the CFS home visiting program. The FCU Specialist must initially allocate a minimum of 20% of their workload to family enrollment and model implementation activities.

1.8.2. The Contractor must:

1.8.2.1. Ensure that all relevant staff participate in and complete these trainings as scheduled, and maintain documentation of completion for Department review.

1.8.2.2. Ensure that all relevant staff are trained in Motivational Interviewing.

1.8.2.3. Budget for additional staff development opportunities based on the needs of their team, as identified in collaboration with the Department's Quality Improvement and Training Coordinator.

1.8.3. The Contractor must ensure the FCU Specialist transitions to dedicating 100% of their workload to the implementation of the FCU model by June 30, 2027.

1.8.4. The Contractor may elect to designate more than one (1) FCU Specialist to implement the model during the first year of program implementation.

1.8.5. The Contractor must identify additional CFS staff to participate in being trained to implement the FCU model in year two and again in year three of program implementation, to support sustainability and build long-term capacity.

1.8.6. The Contractor must ensure all CFS home visitors complete Department provided training in and utilize the Everyday Parenting Curriculum and CFS Program Manual, which is:

1.8.6.1. The Everyday Parenting Manual, Everyday Parenting: A Professional's Guide to Building Family Management Skills (2nd edition). Available at www.researchpress.com

1.8.7. The Contractor must ensure all CFS home visitors are trained in core CFS competencies and collaborate with the Department's Continuous Quality Improvement (CQI) and training coordinator to implement a

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

comprehensive staff training plan that ensures a qualified workforce and identifies training needs and gaps. CFS home visitors must complete Department provided training which will include at a minimum, Everyday Parenting and CFS onboarding training.

1.8.8. The Contractor must identify a qualified supervisor for the FCU staff be trained in the FCU model and be responsible for ensuring adherence to the model's implementation standards. The FCU supervisor must fulfill the following responsibilities:

1.8.8.1. Participate in monthly FCU supervisor consultation meetings, as scheduled by the Department, to enhance supervisory capacity and support fidelity monitoring of the FCU implementation.

1.8.8.2. A, The Contractor must ensure the FCU supervisor is trained and certified by Northwest Prevention Science as a FCU supervisor. The FCU supervisor must provide implementation support to FCU staff, including but not limited to individualized consultation, direct observation, and performance evaluation, to ensure fidelity to the model.

1.8.9. The Contractor must ensure that both the FCU specialist and FCU supervisor receive training in the Family Check-Up model, Motivational Interviewing, Newborn Navigation Core Training, and Everyday Parenting curriculum, and that they meet the minimum educational qualifications required for their roles.

1.8.10. The Contractor must use the FCU model, Motivational Interviewing and Everyday Parenting curriculum training to support effective implementation.

1.8.11. The Contractor must ensure that all staff, subcontractors, and volunteers undergo the required criminal background checks registry checks, as described in Section 1.12.

1.8.12. If the Contractor provides transportation for individuals served under this Agreement, the Contractor must ensure:

1.8.12.1. The enrolled parent or caregiver must be present for all sessions.

1.8.12.2. All drivers have a valid State Issued and a safe driving record;

1.8.12.2.1. All vehicles are approved by the Contractor and meet applicable safety standards;

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

1.8.12.2.2. Compliance with all applicable local, state, and federal transportation safety rules and standards;

1.8.12.2.3. Proof of valid automobile insurance is provided to the Department that includes bodily injury and property damage in amounts of not less than $100,000 per occurrence and $300,000 aggregate or excess, for all owned, hired, or non-owned vehicles used to provide transportation.

1.8.13. The Contractor must ensure staff complete required training in the principles of family support, maternal and child health, HIPAA as well as the child welfare system, with concentrations in service array and working in multidisciplinary teams.

1.8.14. The Contractor must consistently engage in purposeful staff development activities that support professional growth and improve the quality of services provided. These activities must include, but are not limited to, training and enrichment in the following areas: Skills necessary to understand and respond to the unique needs, strengths, and resources of the families and communities served.

1.8.14.1. The ability to exercise empathy, with an understanding of the complex family dynamics and stressors experienced by parents and caregivers.

1.8.14.2. The use of effective, evidence-informed home visiting practices, including strategies that are grounded in research and adapted to family needs, as well as standards for documentation and reporting.

1.8.15. The Contractor must provide an adequate number of home visitors to implement the CFS program, as approved by the Department. All staffing vacancies, transitions, or changes in personnel assignments must be reported to the Department in a timely manner.

1.8.16. The Contractor must ensure the CFS program director, supervisor, or program managers have:

1.8.16.1. A Bachelor's degree in public health, early childhood, social work, human services administration, or a related field focused on supporting children and families, with four (4) years of experience working with families and children in a social service, home health, or other early childhood program setting, including supervisory experience;

1.8.16.2. An Associate degree with five (5) years of prior experience working with families and children in a social service, home

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

health, or early childhood program setting, including supervisory experience;

1.8.16.3. Or at a minimum, high school diploma or equivalent with six (6) years of relevant lived and professional experience working with families and children in a social service, home health, or other early childhood program setting, including supervisory responsibilities, and written approval from the Department to fulfill the duties of the position.

1.8.17. The Contractor must ensure CFS Home Visitors have:

1.8.17.1. An Associate degree with four (4) years of prior experience working with families and children in a social service, home health, or other early childhood program setting;

1.8.17.2. Or at a minimum, a high school diploma or equivalent with five (5) years of experience providing services to families in a social service, home health, or other early childhood program setting; and demonstrated lived and professional experience aligned with this role, with written approval from the Department.

1.8.18. The Contractor must ensure the CFS Family Check Up Home Visitor has at a minimum:

1.8.18.1. A Bachelor's degree or higher; and

1.8.18.2. Two (2) years of experience providing services to families in a social service, home health, or other early childhood program setting.

1.8.18.2.1. If a Bachelor's-level staff is not available, the Contractor may recommend qualified team members to perform FCU. A training plan and summary of relevant skills and clinical experience must be submitted with the application and approved by the Department.

1.8.19. The Contractor must ensure all CFS home visitors across all CFS programs are trained in the "Everyday Parenting" curriculum and Motivational Interviewing and adhere to its requirements within six (6) months of program implementation.

1.8.19.1. Although not required, the Contractor may allocate funding to train staff in additional evidence-based early childhood curricula, such as Growing Great Kids or Parents as Teachers.

1.8.20. The Contractor must demonstrate capacity and readiness to be trained

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

in and implement the Family Check Up model.

1.8.21. Staffing requirements are subject to change, contingent upon the Department's written approval.

1.9. Reporting

1.9.1. The Contractor must submit comprehensive quarterly reports highlighting program activities by the 15th calendar day of the month following the end of each reporting period. The first report is due by October 15, 2026, and must include:

1.9.1.1. The progress in achieving the stated outcomes; and

1.9.1.2. Feedback from families regarding the effectiveness, accessibility, and satisfaction of the services provided through participant surveys or post service delivery interviews.

1.9.2. The Contractor must submit an annual performance report to the Department by July 31st of each year, with the first report due on July 31, 2027, which includes, but is not limited to:

1.9.2.1. A summary of program accomplishments and key activities.

1.9.2.2. Staff training plan for each CFS home visitor.

1.9.2.3. Recommendations for service development, program enhancements, and outcome improvements.

1.9.2.4. Identification of systemic barriers impacting service delivery or access.

1.9.2.5. Results of family satisfaction surveys and analysis of trends.

1.9.3. The Contractor must transmit all data in a secure and encrypted format approved by the Department.

1.9.4. The Contractor must designate an FRC staff member to serve as the primary liaison for all programmatic communication between the Department and the Contractor, including, but not limited to:

1.9.4.1. Clinical updates.

1.9.4.2. Program announcements.

1.9.4.3. Reporting changes, errors, and requests.

1.9.4.4. Contract oversight.

1.9.4.5. Oversight of program operations and compliance

1.9.5. The Contractor must evaluate both the progress of parents and caregivers and the effectiveness of the programs and services provided.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

1.9.6. The Contractor must maintain a comprehensive and confidential Family Service Record for each family, in compliance with all Health Insurance Portability and Accountability Act (HIPAA) Privacy Rules. The Family Service Record must include, but is not limited to:

1.9.6.1. Participant names (Parent(s) and Child(ren)).

1.9.6.2. Participant DOBs (Parent (s) and Child(ren)).

1.9.6.3. Residence.

1.9.6.4. Primary language spoken in the home.

1.9.6.5. Educational level of parent(s) or guardian(s).

1.9.6.6. Digital Resources (phone, laptop, cell).

1.9.6.7. Source of referral.

1.9.6.8. Referral details and contact information.

1.9.6.9. Signed release of information form(s).

1.9.6.10. Household income.

1.9.6.11. Household size.

1.9.6.12. Employment status of parent(s) or guardian(s).

1.9.6.13. Access to prenatal and post-partum healthcare.

1.9.6.14. Home visits conducted and screening tools completed.

1.9.6.15. Topics reviewed during service delivery, including but not limited to:

1.9.6.15.1. Maternal depression screening.

1.9.6.15.2. Planning for future pregnancies.

1.9.6.15.3. Positive parenting practices.

1.9.6.15.4. Breastfeeding/lactation support.

1.9.6.15.5. Nutrition.

1.9.6.15.6. Child health.

1.9.6.15.7. Maternal health and self-care.

1.9.6.15.8. Referrals made for service linkage, including but not limited to:

1.9.6.15.9. Concrete supports (e.g., housing, utilities, transportation).

1.9.6.15.10. Childcare resources.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

1.9.6.15.11. Healthcare access and coordination.

1.9.6.15.12. Community-based supports and services.

1.9.6.15.13. Home visiting programs and service type.

1.9.6.15.14. Discharge date and reason for discharge.

1.9.6.15.15. Completion of post-service surveys.

1.9.6.15.16. Family needs assessment.

1.9.6.15.17. Child/Family Individualized Service Plan (ISP).

1.9.6.15.18. Documentation of prenatal and postpartum healthcare received.

1.9.6.15.19. Medicaid and other health insurance coverage.

1.9.6.15.20. Linkages with community-based resources.

1.9.6.16. Receipt of public benefits, including but not limited to:

1.9.6.16.1. SNAP.

1.9.6.16.2. New Hampshire Child Care Scholarship.

1.9.6.16.3. Medicaid.

1.9.6.16.4. Social Security Disability Insurance (SSDI).

1.9.6.16.5. Supplemental Security Income (SSI).

1.9.6.16.6. Temporary Assistance for Needy Families (TANF).

1.9.6.16.7. Special Supplemental Nutrition Program for WIC.

1.9.6.17. Participant service data, including but not limited to:

1.9.6.17.1. Date of service.

1.9.6.17.2. Participants present during service delivery.

1.9.6.17.3. Type of service provided and topics reviewed.

1.10. Performance Measures

1.10.1. The Contractor must provide performance data in a format and at a frequency specified by the Department. The following performance measures will be used to evaluate program effectiveness:

1.10.1.1. A minimum of 80% of participants must report a favorable

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

rating on satisfaction surveys administered by the Contractor.

1.10.1.2. At least 70% of referred families must enroll in services within 30 days of referral.

1.10.1.3. A minimum of 65% of enrolled families must complete the full service cycle as defined by the program model.

1.10.2. The Contractor must demonstrate annual improvement in outreach to high-risk populations, as measured by year-over-year increases in engagement rates.

1.10.3. The Contractor must submit data to support evaluation of long-term outcomes, including family stability, child health indicators, and service retention, as defined by the Department.

1.11. Meetings, Collaboration, and Data Sharing

1.11.1. The Contractor must participate in regular performance review meetings with the Department and peer providers to analyze data, share best practices, and identify areas for improvement.

1.11.2. The Contractor must collect and transmit all required data, including client-level demographic, service utilization, and outcome data, in a secure format specified by the Department.

1.11.3. The Contractor must participate in monthly check-in meetings and Communities of Practice (CoP) for the Department's Comprehensive Family Support (CFS) home visiting program, as scheduled by the Department. CoPs are structured, recurring gatherings of professionals and stakeholders involved in CFS to share best practices, address challenges, and support continuous quality improvement.

1.11.4. The Contractor must participate in monthly meetings with the Department, or as otherwise requested by the Department.

1.11.5. The Contractor may be required to participate in on-site program and file reviews conducted by the Department, as requested.

1.11.6. The Contractor must participate in monthly fidelity reviews of family sessions with the Department for the Family Check Up model.

1.11.7. The Contractor may be required to facilitate annual file reviews conducted by the Department, or as otherwise requested, which may

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

include, but are not limited to:

1.11.7.1. Compliance and documentation standards.

1.11.7.2. Service Delivery alignment and model fidelity.

1.11.7.3. Verification of data entry and reporting accuracy.

1.11.8. The Contractor must ensure Family Service Records are accurately summarized and entered into the Department's Family and Community Health Data System (FCH-DS) in real time and must comply with the confidentiality provisions of RSA 170-G:8-a.

1.11.9. The Contractor must provide the Department with a list of staff (End Users, as defined in Exhibit D) who will be responsible for entering Family Service Record data into the FCH-DS.

1.11.10. The Contractor must notify the Department immediately, and no more than 24 hours of staff changes, to ensure access to the FCH-DS is removed in a timely manner.

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

1.11.12. The Contractor must utilize the Department's closed loop referral system, at an agreed upon start date, whenever applicable to the services they provide for referrals between health and/or human service providers within New Hampshire for referral management and client care coordination. Utilization includes inputting information and data as necessary into the Department's referral solution as part of the NH Care Connections Network to facilitate referrals to participating providers, signing required Network Participation Agreement(s), and obtaining a participant specific consent for services.

1.11.13. The Contractor must utilize the Department's admission, discharge, transfer, and shared care insights solution whenever applicable to the services they provide for client care coordination and management between health providers within New Hampshire. Utilization includes inputting information and data as necessary into the Department's admission, discharge, transfer, and shared care insights platform as part of the NH Care Connections Network to facilitate referrals to participating providers and signing required Participation Agreement(s) for the admission, discharge, transfer, and shared care insights solution

1.11.13.1. The Department's contracts with the closed loop referral and admission, discharge, and transfer vendors incorporate the costs of developing and maintaining the standards-based interface from which the Contractor may

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

choose to configure their systems to communicate securely with the Department's NH Care Connections Network solutions. The Contractor may choose to interface with the Department's closed loop referral and/or the admission discharge transfer solution utilizing a Smart on FHIR or HL-7 standard interface process to connect individuals to health and social service providers. The costs for the Contractor's system or team to develop or utilize the standard Smart on FHIR or HL-7 based interface are the sole responsibility of the Contractor.

1.12. Background Checks

1.12.1. Prior to permitting any individual to provide services under this Agreement, the Contractor must ensure that said individual has undergone:

1.12.1.1. A criminal background check, at the Contractor's expense, and has no convictions for crimes that represent evidence of behavior that could endanger individuals served under this Agreement;

1.12.1.2. A name search of the Department's Bureau of Adult and Aging Services (BAAS) State Registry, pursuant to RSA 161-F:49, with results indicating no evidence of behavior that could endanger individuals served under this Agreement; and

1.12.1.3. A name search of the Department's DCYF Central Registry pursuant to RSA 169-C:35, with results indicating no evidence of behavior that could endanger individuals served under this Agreement.

1.13. Confidential Data

1.13.1. The Contractor must meet all information security and privacy requirements as set by the Department and in accordance with the Department's Information Security Requirements Exhibit as referenced below.

1.13.2. The Contractor must ensure any individuals involved in delivering services through this Agreement contract 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 Information Security Requirements Exhibit. The Contractor must ensure said individuals have a justifiable business need to access confidential data. The Contractor must provide attestations upon

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Department request.

1.14. Privacy Impact Assessment

1.14.1. Upon request, the Contractor must allow and assist the Department in conducting a Privacy Impact Assessment (PIA) of its system(s)/application(s)/web portal(s)/website(s) or Department system(s)/application(s)/web portal(s)/website(s) hosted by the Contractor, if Personally Identifiable Information (PII) is collected, used, accessed, shared, or stored. To conduct the PIA the Contractor must provide the Department access to applicable systems and documentation sufficient to allow the Department to assess, at minimum, the following:

1.14.1.1. How PII is gathered and stored;

1.14.1.2. Who will have access to PII;

1.14.1.3. How PII will be used in the system;

1.14.1.4. How participant consent will be achieved and revoked; and

1.14.1.5. Privacy practices.

1.14.2. 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.

1.15. Department Owned Devices, Systems and Network Usage

1.15.1. Contractor End Users, defined in the Department's Information Security Requirements Exhibit that is incorporated into this Agreement, authorized by the Department's Information Security Office to use a Department issued device (e.g. computer, tablet, mobile telephone) or access the Department network in the fulfilment of this Agreement, each must:

1.15.1.1. Sign and abide by applicable Department and New Hampshire Department of Information Technology (NH DoIT) use agreements, policies, standards, procedures and guidelines, and complete applicable trainings as required;

1.15.1.2. Use the information that they have permission to access solely for conducting official Department business and agree that all other use or access is strictly forbidden including, but not limited, to personal or other private and non-Department use, and that at no time shall they access or attempt to access information without having the express authority of the Department to do so;

1.15.1.3. Not access or attempt to access information in a manner

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

inconsistent with the approved policies, procedures, and/or agreement relating to system entry/access;

1.15.1.4. Not copy, share, distribute, sub-license, modify, reverse engineer, rent, or sell software licensed, developed, or being evaluated by the Department, and at all times must use utmost care to protect and keep such software strictly confidential in accordance with the license or any other agreement executed by the Department;

1.15.1.5. Only use equipment, software, or subscription(s) authorized by the Department's Information Security Office or designee;

1.15.1.6. Not install non-standard software on any Department equipment unless authorized by the Department's Information Security Office or designee;

1.15.1.7. Agree that email and other electronic communication messages created, sent, and received on a Department-issued email system are the property of the Department of New Hampshire and to be used for business purposes only. Email is defined as "internal email systems" or "Department-funded email systems."

1.15.1.8. Agree that use of email must follow Department and NH DoIT policies, standards, and/or guidelines; and

1.15.1.9. Agree when utilizing the Department's email system:

1.15.1.9.1. To only use a Department email address assigned to them with a "@ affiliate.DHHS.NH.Gov".

1.15.1.9.2. Include in the signature lines information identifying the End User as a non-Department workforce member; and

1.15.1.9.3. Ensure the following confidentiality notice is embedded underneath the signature line:

CONFIDENTIALITY NOTICE: "This message may contain information that is privileged and confidential and is intended only for the use of the individual(s) to whom it is addressed. If you receive this message in error, please notify the sender immediately and delete this electronic message and any attachments from your system. Thank you for your cooperation."

1.15.1.10. Contractor End Users with a Department issued email, access or potential access to Confidential Data, and/or a

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

workspace in a Department building/facility, must:

1.15.1.10.1. Complete the Department's Annual Information Security & Compliance Awareness Training prior to accessing, viewing, handling, hearing, or transmitting Department Data or Confidential Data.

1.15.1.10.2. Sign the Department's Business Use and Confidentiality Agreement and Asset Use Agreement, and the NH DoIT Department wide Computer Use Agreement upon execution of the Agreement and annually thereafter.

1.15.1.10.3. Only access the Department's intranet to view the Department's Policies and Procedures and Information Security webpages.

1.15.1.10.4. Contractor agrees, if any End User is found to be in violation of any of the above terms and conditions, said End User may face removal from the Agreement, and/or criminal and/or civil prosecution, if the act constitutes a violation of law.

1.15.1.10.5. Contractor agrees to notify the Department a minimum of three business days prior to any upcoming transfers or terminations of End Users who possess Department credentials and/or badges or who have system privileges. If End Users who possess Department credentials and/or badges or who have system privileges resign or are dismissed without advance notice, the Contractor agrees to notify the Department's Information Security Office or designee immediately.

1.16. Contract End-of-Life Transition Services

1.16.1. General Requirements

1.16.1.1. If applicable, upon early termination or expiration of the Agreement the parties agree to cooperate in good faith to effectuate a secure transition of the services ("Transition Services") from the Contractor to the Department and, if applicable, the new Contractor ("Recipient") engaged by the Department to assume the services. Ninety (90) days prior to the end-of the contract or unless otherwise specified by the

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Department, the Contractor must begin working with the Department and if applicable, the Recipient to develop a Data Transition Plan (DTP). The Department shall provide the DTP template to the Contractor.

1.16.1.2. The Contractor must assist the Recipient, in connection with the transition from the performance of Services by the Contractor and its End Users 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 any 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 and assistance to any third-party consultants engaged by Recipient in connection with the Transition Services.

1.16.1.3. If a system, database, hardware, software, and/or software licenses (Tools) was purchased or created to manage, track, and/or store Department Data in relationship to this contract said Tools will be inventoried and returned to the Department, along with the inventory document, once transition of Department data is complete. The internal planning of the Transition Services by the Contractor and its End Users shall be provided to the Department and if applicable the Recipient in a timely manner. Any such Transition Services shall be deemed to be Services for purposes of this Agreement.

1.16.1.4. In the event the data Transition extend beyond the end of the Agreement, the Contractor agrees that the Information Security Requirements, and if applicable, the Department's Business Associate Agreement terms and conditions remain in effect until the Data Transition is accepted as complete by the Department.

1.16.1.5. In the event the Contractor has comingled Department Data and the destruction or Transition of said data is not feasible, the Department and Contractor will jointly evaluate regulatory and professional standards for retention requirements prior to destruction, refer to the terms and conditions of the Department's DHHS Information Security Requirements Exhibit.

1.17. Completion of Transition Services

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

1.17.1. Each service or transition phase shall be deemed completed (and the transition process finalized) at the end of fifteen (15) business days after the product, resulting from the Service, is delivered to the Department and/or the Recipient in accordance with the mutually agreed upon Transition plan, unless within said fifteen (15) business day term the Contractor notifies the Department of an issue requiring additional time to complete said product.

1.17.2. Once all parties agree the data has been migrated the Contractor will have thirty (30) days to destroy the data per the terms and conditions of the Department's Information Security Requirements Exhibit.

1.18. Disagreement over Transition Services Results

1.18.1. In the event the Department is not satisfied with the results of the Transition Service, the Department shall notify the Contractor, in writing, stating the reason for the lack of satisfaction within fifteen (15) business days of the final product or at any time during the data Transition process. The Parties shall discuss the actions to be taken to resolve the disagreement or issue. If an agreement is not reached, at any time the Department shall be entitled to initiate actions in accordance with the Agreement.

2. Exhibits Incorporated

2.1. The Contractor must comply with all Exhibit D Federal Requirements, which are attached hereto and incorporated by reference herein.

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

2.3. 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 F, Business Associate Agreement, which has been executed by the parties.

3. Additional Terms

3.1. Impacts Resulting from Court Orders or Legislative Changes

3.1.1. 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.

3.2. Federal Civil Rights Laws Compliance: Culturally and Linguistically App[illegible]ate

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Programs and Services

3.2.1. The Contractor must submit:

3.2.1.1. A detailed description of the language assistance services, within ten (10) days of the Effective Date of the Agreement, 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.

3.2.1.2. A written attestation, within forty-five (45) days of the Effective Date of the Agreement and annually thereafter, that all personnel involved the provision of services to individuals under this Agreement have completed, within the last twelve (12) months, the Contractor Required Training Video on Civil Rights-related Provisions in DHHS Procurement Processes, which is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors); and

3.2.1.3. The Department's Federal Civil Rights Compliance Checklist within ten (10) days of the Effective Date of the Agreement. The Federal Civil Rights Compliance Checklist must have been completed within the last twelve (12) months and is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors).

3.3. Credits and Copyright Ownership

3.3.1. 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."

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

3.3.3. The Department must retain copyright ownership for any and all original materials produced, including, but not limited to reports, protocols,

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

guidelines, brochures, posters, and resource directories.

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

3.4. Operation of Facilities: Compliance with Laws and Regulations

3.4.1. 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.

4. Records

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

4.1.1. 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.

4.1.2. 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.

4.2. 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.

4.3. If, upon further review, the Department must disallow any expenses claimed by

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

the Contractor as costs hereunder, the Department retains the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Payment Terms

1. This Agreement is funded by:
   1.1. 73% Federal funds, TEMPORARY ASSISTANCE FOR NEEDY FAMILIES, as awarded on choose a date, December 16, 2025 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.558, FAIN 2601 NHTANF.
   1.2. 16% Federal funds, SOCIAL SERVICES BLOCK GRANT, as awarded on choose a date, October 1, 2023 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.667, FAIN 2501NHSOSR.
   1.3. 11% General funds.
2. For the purposes of this Agreement the Department has identified:
   2.1. The Contractor as a Subrecipient, based on criteria specified in 2 CFR §200.331.
   2.2. The Agreement as NON-R&D, in accordance with 2 CFR §200.332.
   2.3. The Indirect Cost Rate for this Agreement in the attached Budget Sheet(s).
3. Payment shall be on a cost reimbursement basis for actual allowable expenditures incurred under this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1, Budget.
4. The Contractor shall submit an invoice 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:
   4.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.
   4.2. Is submitted in a format as provided by or otherwise acceptable to the Department.
   4.3. Identifies and requests payment in accordance with Section 3 above.
   4.4. Includes supporting documentation with each invoice, including, but not limited to, proof of expenditures, receipts for purchases, time sheets, and payroll records, as applicable.
   4.5. Is completed, dated and returned to the Department to initiate payment.
   4.6. Is assigned an electronic signature and is emailed to BFAinvoices@dhhs.nh.gov or mailed to:

   Financial Manager
   Department of Health and Human Services
   129 Pleasant Street

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Concord, NH 03301

5. The Department shall make payments to the Contractor within thirty (30) calendar days of receipt of each invoice and any required supporting documentation, subsequent to approval of the submitted invoice.

6. The final invoice and any required supporting documentation shall be due to the Department no later than forty (40) calendar days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.

7. Notwithstanding Paragraph 18 of the General Provisions Form P-37, changes limited to adjusting direct and indirect cost 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.

8. If applicable, the Contractor must notify the Department of any revisions, updates, or extensions to the Contractor's federal negotiated indirect cost rate agreement (NICRA) by submitting a copy of the revised NICRA to the Department within five (5) business days of the Contractor's receipt of the NICRA from the cognizant federal agency.

9. Audits

9.1. The Contractor must email an annual audit to dhhs.act@dhhs.nh.gov if any of the following conditions exist:

9.1.1. Condition A - The Contractor is subject to a Single Audit pursuant to 2 CFR 200.501 Audit Requirements.

9.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b.

9.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

9.2. If Condition A exists, the Contractor must 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.

9.2.1. The Contractor must submit a copy of any Single Audit findings and any associated corrective action plans. The Contractor

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

must submit quarterly progress reports on the status of implementation of the corrective action plan.

9.3. If Condition B or Condition C exists, the Contractor must submit an annual financial audit performed by an independent CPA within 120 days after the close of the Contractor's fiscal year.

9.4. The Contractor, regardless of the funding source and/or whether Conditions A, B, or C exist, may be required to submit annual financial audits performed by an independent CPA upon request by the Department.

9.5. 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 must 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, within sixty (60) days.

10. If applicable, the Contractor must request disposition instructions from the Department for any equipment, based on 2 CFR 200.313, purchased using funds provided under this Agreement.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Exhibit C-1 Budget

New Hampshire Department of Health and Human Services			
Contractor Name:	*Children Unlimited, Inc.*		
Budget Request for:	*Comprehensive Family Support (Conway)*		
Budget Period:	*July 1, 2026 - June 30, 2029*		
Indirect Cost Rate (if applicable)	4.60%		
Line Item	**Program Cost - Funded by DHHS - SFY 27**	**Program Cost - Funded by DHHS - SFY 28**	**Program Cost - Funded by DHHS - SFY 29**
1. Salary & Wages	$248,263	$259,195	$270,097
2. Fringe Benefits	$62,066	$64,799	$67,525
3. Consultants	$0	$0	$0
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$500	$0	$0
5.(a) Supplies - Educational	$2,000	$1,000	$1,000
5.(b) Supplies - Lab	$0	$0	$0
5.(c) Supplies - Pharmacy	$0	$0	$0
5.(d) Supplies - Medical	$0	$0	$0
5.(e) Supplies - Office	$0	$0	$0
6. Travel	$10,320	$11,000	$11,000
7. Software	$0	$0	$0
8. (a) Other - Marketing/Communications	$1,000	$1,000	$1,000
8. (b) Other - Education and Training	$1,500	$1,500	$1,000
8. (c) Other - Other (specify below)	$0	$0	$0
Family Check Up/Online Training Portal (per staff)	$2,800	$1,810	$1,810
0	$0	$0	$0
Other (please specify)	$0	$0	$0
Other (please specify) Telephone	$3,000	$3,000	$3,000
Other (please specify)	$0	$0	$0
Other (please specify) Lease	$18,000	$18,000	$18,000
9. Subrecipient Contracts	$0	$0	$0
Total Direct Costs	$349,449	$361,304	$374,432
Total Indirect Costs	$23,203	$16,788	$11,431
Subtotals	$372,652	$378,092	$385,863
		TOTAL	**$ 1,136,607**

DS

Contractor Initials: _____

Date: 4/28/2026

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

SECTION A: CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Contractor 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 CONTRACTORS 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 contractors (and by inference, sub- contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a contractor (and by inference, 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 Agreement 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 Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, 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 Contractor 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 Contractor'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 Contractor'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 Agreement 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 Agreement, 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;

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

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 contract officer on whose contract activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected Agreement;

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 Contractor may insert in the space provided below the site(s) for the performance of work done in connection with the specific Agreement.

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.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

SECTION B: CERTIFICATION REGARDING LOBBYING

The Contractor 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 Byrd Anti-Lobbying Amendment (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, loan, or cooperative agreement (and by specific mention 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, loan, or cooperative agreement (and by specific mention sub- contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, see https://omb.report/icr/201009-0348-022/doc/20388401

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, 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.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

SECTION C: 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 12689 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 Agreement, 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 Agreement 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 https://www.govinfo.gov/app/details/CFR-2004-title45-vol1/CFR-2004-title45-vol1-part76/context.

6. The prospective primary participant agrees by submitting this Agreement 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) https://www.ecfr.gov/current/title-22/chapter-V/part-513.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

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 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 (Agreement) 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 (Agreement), 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 (Agreement).

14. The prospective lower tier participant further agrees by submitting this proposal (Agreement) 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.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

SECTION D: CERTIFICATION OF COMPLIANCE WITH FEDERAL REQUIREMENTS

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:

The Contractor will comply, and will require any subcontractors to comply, with any applicable federal requirements, which may include but are not limited to:

1. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR 200).
2. 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;
3. 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;
4. 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);
5. 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;
6. 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;
7. 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;
8. 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;
9. 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;
10. 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.
11. The Clean Air Act (42 U.S.C. 7401-7671q.) which seeks to protect human health and the environment from emissions that pollute ambient, or outdoor, air.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

12. The Clean Water Act (33 U.S.C. 1251-1387) which establishes the basic structure for regulating discharges of pollutants into the waters of the United States and regulating quality standards for surface waters.
13. Civilian Agency Acquisition Council and the Defense Acquisition Regulations Council (Councils) (41 U.S.C. 1908) which establishes administrative, contractual, or legal remedies in instances where contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate.
14. Contract Work Hours and Safety Standards Act (40 U.S.C. 3701–3708) which establishes that all contracts awarded by the non-Federal entity in excess of $100,000 that involve the employment of mechanics or laborers must include a provision for compliance with 40 U.S.C. 3702 and 3704, as supplemented by Department of Labor regulations (29 CFR Part 5).
15. Rights to Inventions Made Under a Contract or Agreement 37 CFR § 401.2 (a) which establishes the recipient or subrecipient wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that “funding agreement,” the recipient or subrecipient must comply with the requirements of 37 CFR Part 401, “Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements,” and any implementing regulations issued by the awarding agency.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, or government wide suspension or debarment.

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 Agreement, the Contractor agrees to comply with the provisions indicated above.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

SECTION E: 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 Agreement, 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.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

SECTION F: 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 $30,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $30,000 or more. If the initial award is below $30,000 but subsequent grant modifications result in a total award equal to or over $30,000, 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 sub award 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 Entity Identifier (SAM UEI; DUNS#)
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.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

New Hampshire Department of Health and Human Services
Exhibit D – Federal Requirements

FORM A

As the Grantee 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: MFVENZ1ADJF4

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: _____

Contractor Name: Children Unlimited, Inc.

4/28/2026
Date:

DocuSigned by:
Ardis Yahna
FDE76134D89E4AC...
Name: Ardis Yahna
Title: Executive Director

New Hampshire Department of Health and Human Services

Exhibit E

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

Contractor Initials DS AY

Date 4/28/2026

or misplacement of hardcopy documents, and misrouting of physical or electronic 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.

Contractor Initials DS AY

Date 4/28/2026

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.

Contractor Initials DS AY

Date 4/28/2026

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, antihacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a whole, must have aggressive intrusion-detection and firewall protection.

Contractor Initials DS AY

Date 4/28/2026

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 AY

Date 4/28/2026

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

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.

Contractor Initials DS AY

Date 4/28/2026

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;

Contractor Initials DS AY

Date 4/28/2026

4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and
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

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement (Form P-37) ("Agreement"), and any of its agents who receive use or have access to protected health information (PHI), as defined herein, shall be referred to as the "Business Associate." The State of New Hampshire, Department of Health and Human Services, "Department" shall be referred to as the "Covered Entity," The Contractor and the Department are collectively referred to as "the parties."

The parties agree, to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191, the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162, and 164 (HIPAA), provisions of the HITECH Act, Title XIII, Subtitle D, Parts 1&2 of the American Recovery and Reinvestment Act of 2009, 42 USC 17934, et sec., applicable to business associates, and as applicable, to be bound by the provisions of the Confidentiality of Substance Use Disorder Patient Records, 42 USC s. 290 dd-2, 42 CFR Part 2, (Part 2), as any of these laws and regulations may be amended from time to time.

(1) Definitions

a. The following terms shall have the same meaning as defined in HIPAA, the HITECH Act, and Part 2, as they may be amended from time to time:

"Breach," "Designated Record Set," "Data Aggregation," Designated Record Set," "Health Care Operations," "HITECH Act," "Individual," "Privacy Rule," "Required by law," "Security Rule," and "Secretary."

b. Business Associate Agreement, (BAA) means the Business Associate Agreement that includes privacy and confidentiality requirements of the Business Associate working with PHI and as applicable, Part 2 record(s) on behalf of the Covered Entity under the Agreement.

c. "Constructively Identifiable," means there is a reasonable basis to believe that the information could be used, alone or in combination with other reasonably available information, by an anticipated recipient to identify an individual who is a subject of the information.

d. "Protected Health Information" ("PHI") as used in the Agreement and the BAA, means protected health information defined in HIPAA 45 CFR 160.103, limited to the information created, received, or used by Business Associate from or on behalf of Covered Entity, and includes any Part 2 records, if applicable, as defined below.

e. "Part 2 record" means any patient "Record," relating to a "Patient," and "Patient Identifying Information," as defined in 42 CFR Part 2.11.

f. "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.

(2) Business Associate Use and Disclosure of Protected Health Information

a. Business Associate shall not use, disclose, maintain, store, or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under the Agreement. Further, Business Associate, including bu

Contractor Initials DS AY

Date 4/28/2026

limited to all its directors, officers, employees, and agents, shall protect any PHI as required by HIPPA and 42 CFR Part 2, and not use, disclose, maintain, store, or transmit PHI in any manner that would constitute a violation of HIPAA or 42 CFR Part 2.

b. Business Associate may use or disclose PHI, as applicable:

I. For the proper management and administration of the Business Associate;

II. As required by law, according to the terms set forth in paragraph c. and d. below;

III. According to the HIPAA minimum necessary standard;

IV. For data aggregation purposes for the health care operations of the Covered Entity; and

V. Data that is de-identified or aggregated and remains constructively identifiable may not be used for any purpose outside the performance of the Agreement.

c. To the extent Business Associate is permitted under the BAA or the Agreement to disclose PHI to any third party or subcontractor prior to making any disclosure, the Business Associate must obtain, a business associate agreement or other agreement with the third party or subcontractor, that complies with HIPAA and ensures that all requirements and restrictions placed on the Business Associate as part of this BAA with the Covered Entity, are included in those business associate agreements with the third party or subcontractor.

d. The Business Associate shall not, disclose any PHI in response to a request or demand for disclosure, such as by a subpoena or court order, on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity can determine how to best protect the PHI. If Covered Entity objects to the disclosure, the Business Associate agrees to refrain from disclosing the PHI and shall cooperate with the Covered Entity in any effort the Covered Entity undertakes to contest the request for disclosure, subpoena, or other legal process. If applicable relating to Part 2 records, the Business Associate shall resist any efforts to access part 2 records in any judicial proceeding.

(3) Obligations and Activities of Business Associate

a. Business Associate shall implement appropriate safeguards to prevent unauthorized use or disclosure of all PHI in accordance with HIPAA Privacy Rule and Security Rule with regard to electronic PHI, and Part 2, as applicable.

b. The Business Associate shall immediately notify the Covered Entity's Privacy Officer at the following email address, DHHSPrivacyOfficer@dhhs.nh.gov after the Business Associate has determined that any use or disclosure not provided for by its contract, including any known or suspected privacy or security incident or breach has occurred potentially exposing or compromising the PHI. This includes inadvertent or accidental uses or disclosures or breaches of unsecured protected health information.

c. In the event of a breach, the Business Associate shall comply with the terms of this Business Associate Agreement, all applicable state and federal laws and regulations and any additional requirements of the Agreement.

d. The Business Associate shall perform a risk assessment, based on the information available at the time it becomes aware of any known or suspected priva

DS

Contractor Initials AY

4/28/2026

Date

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

security breach as described above and communicate the risk assessment to the Covered Entity. The risk assessment shall include, but not be limited to:

I. The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;

II. The unauthorized person who accessed, used, disclosed, or received the protected health information;

III. Whether the protected health information was actually acquired or viewed; and

IV. How the risk of loss of confidentiality to the protected health information has been mitigated.

e. The Business Associate shall complete a risk assessment report at the conclusion of its incident or breach investigation and provide the findings in a written report to the Covered Entity as soon as practicable after the conclusion of the Business Associate's investigation.

f. 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 US Secretary of Health and Human Services for purposes of determining the Business Associate's and the Covered Entity's compliance with HIPAA and the Privacy and Security Rule, and Part 2, if applicable.

g. Business Associate shall require all of its business associates that receive, use or have access to PHI under the BAA to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein.

h. Within ten (10) 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 BAA and the Agreement.

i. 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.

j. 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.

k. Business Associate shall document any disclosures of PHI and information related to any 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.

l. 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 P

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

accordance with 45 CFR Section 164.528.

m. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within five (5) 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.

n. Within thirty (30) 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-ups of such PHI in any form or platform.

VI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, or if retention is governed by state or federal law, 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 as long as the Business 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 post a current version of the Notice of the Privacy Practices on the Covered Entity's website:

https://www.dhhs.nh.gov/oos/hipaa/publications.htm in accordance with 45 CFR Section 164.520.

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 BAA, 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 of Agreement for Cause

a. In addition to the General Provisions (P-37) of the Agreement, the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a material breach by Business Associate of the Business Associate Agreement. 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.

(6) Miscellaneous

a. Definitions, Laws, and Regulatory References. All laws and regulations

Contractor Initials DS AY

Date 4/28/2026

herein, shall refer to those laws and regulations as amended from time to time. A reference in the Agreement, as amended to include this Business Associate Agreement, to a Section in HIPAA or 42 Part 2, means the Section as in effect or as amended.

b. **Change in law** - Covered Entity and Business Associate agree to take such action as is necessary from time to time for the Covered Entity and/or Business Associate to comply with the changes in the requirements of HIPAA, 42 CFR Part 2 other 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 BAA and the Agreement shall be resolved to permit Covered Entity and the Business Associate to comply with HIPAA and 42 CFR Part 2.

e. **Segregation** - If any term or condition of this BAA 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 BAA are declared severable.

f. **Survival** - Provisions in this BAA regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the BAA in section (3) g. and (3) n.l., and the defense and indemnification provisions of the General Provisions (P-37) of the Agreement, shall survive the termination of the BAA.

IN WITNESS WHEREOF, the parties hereto have duly executed this Business Associate Agreement.

Department of Health and Human Services	Children Unlimited, Inc.
The State	Name of the Contractor
DocuSigned by: Iain Watt D778BB63F9704C7...	DocuSigned by: Ardis Yahna FDE76134D89E4AC...
Signature of Authorized Representative	Signature of Authorized Representative
Iain Watt	Ardis Yahna
Name of Authorized Representative	Name of Authorized Representative
Director - DPH	Executive Director
Title of Authorized Representative	Title of Authorized Representative
4/29/2026	4/28/2026
Date	Date

Contractor Initials DS AY

Date 4/28/2026

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

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 CHILDREN UNLIMITED, INC. is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on May 02, 1986. 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: **87329**
Certificate Number: **0007904645**

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 April A.D. 2026.

David M. Scanlan
Secretary of State

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

CERTIFICATE OF AUTHORITY

I, Barbara W Campbell, hereby certify that:
(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Clerk/Secretary/Officer of Children Unlimited Inc.
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on March 19, 20 26, at which a quorum of the Directors/shareholders were present and voting.
(Date)

VOTED: That Ardis Yahna, Executive Director (may list more than one person)
(Name and Title of Contract Signatory)

is duly authorized on behalf of Children Unlimited Inc to enter into contracts or agreements with the State
(Name of Corporation/ LLC)

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 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: April 27, 2026

Signature of Elected Officer
Name: Barbara W Campbell
Title: President, Board of Directors

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 04/10/2026

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 Chalmers Insurance Group - North Conway PO Box 2480 North Conway NH 03860	**CONTACT NAME:** Samantha Khiel **PHONE (A/C, No, Ext):** (603) 356-6926 **FAX (A/C, No):** (603) 356-6934 **E-MAIL ADDRESS:** skhiel@chalmersinsurancegroup.com
INSURED Children Unlimited, Inc. PO Box 986 Conway NH 03818-0986	**INSURER(S) AFFORDING COVERAGE** / **NAIC #** **INSURER A :** Philadelphia Indemnity Insurance Co / 18058 **INSURER B :** Wesco Insurance Company / 25011 **INSURER C :** **INSURER D :** **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** 25-26 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 GEN'L AGGREGATE LIMIT APPLIES PER: [X] POLICY [ ] PRO-JECT [ ] LOC [ ] OTHER:			PHPK2571806	07/01/2025	07/01/2026	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 $ 100,000 $ 5,000 $ 1,000,000 $ 3,000,000 $ 3,000,000
	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** [X] OCCUR [ ] **EXCESS LIAB** [ ] CLAIMS-MADE [ ] DED [X] RETENTION $ 10,000			PHUB870470	07/01/2025	07/01/2026	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: Y If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		WWC3791350	07/01/2025	07/01/2026	[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

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

Early intervention of children.

Barbara Campbell, Nadine Armstrong and Sarah Parsons are excluded from workers compensation coverage.

CERTIFICATE HOLDER

State of New Hampshire 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

© 1988-2015 ACORD CORPORATION. All rights reserved.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

NONPROFIT COVER SHEET

A. Entity Name: CHILDREN UNLIMITED, INC.

B. Entity's Contact Information:

For Records Requests (e.g., resumes of key personnel; audited financial statements):

Name / Phone / Email: Ardis Yahna, (603) 901-3045, ayahna@childrenunlimitedinc.org

Person responsible for Accuracy and Completeness of information provided:
Name: Ardis Yahna Title: Executive Director
Signature: Ardis Yahna

C. List Board of Directors and Affiliations

Name (Identify any additional role(s) in Parentheses) E.g., John Doe (President)	Affiliations
Barbara Campbell (President)	
Abbey Moore (Vice-President)	
Ralph Lutjen (Treasurer)	
Gail Yalenezian (Secretary)	
Ivette Emery	
Victoria Laracy	Employer-Office of Congressman Chris Pappas, Policy and Outreach
Laura Lemieux	
Natasha Gonzalez	
Elizabeth Scruton	Employer-Granite United Way
Michelle Cruz	Employer-Division of Travel and Tourism Development; Department of Business and Economic Affairs; State of NH

D. List Key Personnel (Resumes must be available upon request to the person(s) listed in section B or may be attached)**:**

Name	Role	Annual Salary	Amount Paid From This Contract
Ardis Yahna	Executive Director	$95,493	$9,549
Holly Murphy	Bookkeeper	$52,998	$5,300
Cathy Livingston	Director, FCRC	$69,888	$53,040
Samantha Jones	Family Support Provider (FSP)	$60,320	$15,080
Ariel Callanan	Newborn Navigator, FSP	$56,160	$56,160

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Ellery Hunt	FSP, CHW, FCU	$52,000	$52,000
New Hire	FSP	$49,920	$49,920
Kara Couture	Community Engagement	$79,268	$7,927

DISCLOSURE OF LEGAL ACTIVITIES INVOLVING THE STATE OF NEW HAMPSHIRE OR ANOTHER GOVERNMENT ENTITY

E. Check one of the following:

[X] The entity is **not currently or has not been** party to any legal proceeding involving the State of New Hampshire (or any agency or subdivision thereof) or any other state/federal government entity before any adjudicative body in any jurisdiction **OR**

[ ] The entity is or has been party to one or more legal proceedings as set forth above. Identify the jurisdiction, court or other adjudicative body, case number, and briefly describe the nature of the proceeding (Attached extra sheet if necessary).

CHARITABLE TRUSTS UNIT COMPLIANCE CERTIFICATION

F. Check one of the following:

[X] is registered and in good standing with the New Hampshire Department of Justice Charitable Trusts Unit (** see note below) **or** has submitted a complete application for registration to the Charitable Trusts Unit and is awaiting a registration determination **OR**

[ ] is not required to register with the Charitable Trusts Unit because it is neither tax-exempt under section 501(c)(3) of the Internal Revenue Code nor engages in charitable solicitations in the State of New Hampshire **OR**

[ ] is exempt from registration with the Charitable Trusts Unit because it is a federal or state government, agency, or subdivision or is a religious organization, an integrated auxiliary of a religious organization, or is a convention or association of churches.

** Note: Attached screen shot from the DOJ Registered Charities List found at:

https://mm.nh.gov/files/uploads/doj/remote-docs/registered-charities.pdf

3023	Children Unlimited, Inc.	PO Box 986	Conway	NH	03818	G	11/14/2026

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

FINANCIAL DISCLOSURES

G. Check one the following:

[X] The organization hired an outside firm to audit its financial statements or to prepare GAAP-compliant financial statements for its most recently completed fiscal year. If so, please ensure that the financial statements and audit results are available to be requested from the contact listed on Page 1 (audited financials may be attached) **OR**

[ ] The above does not apply, but the organization filed an IRS Form 990 or Form 990-EZ for its most recently completed fiscal year. Please attach that IRS Form 990 or Form 990-EZ to the submission. (Form 990 Schedule B is not required) **OR**

[ ] ***If neither of the above apply***, complete the Income Statement and Balance Sheet below with the following basic financial information from the organization's most recently completed fiscal year:

1. INCOME STATEMENT

	Revenue		Expenses
Grants	$	*Compensation of officers, directors, and key personnel*	$
Donations	$		
Program Services Revenue	$	*Other salaries & wages*	$
Interest & Dividends	$	*Payroll taxes & employee benefits*	$
All other Revenue	$	*Occupancy, rent, utilities, and insurance*	$
Total Revenue	$	*Printing, publications, postage, office supplies, and IT*	$
		All other expenses	$
		Total Expenses	$

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

2. BALANCE SHEET

Assets		Liabilities	
Cash & Equivalents	$	*Accounts Payable*	$
Investments	$	*Loans Payable*	$
Real Estate (less any depreciation)	$	*All other liabilities*	$
Other Property & Equipment (less any depreciation)	$	Total Liabilities	$
Pledges, grants, accounts receivable	$		
All other assets	$		
Total Assets	$		

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

CHILDREN Unlimited INC.
NURTURING HEARTS AND MINDS ONE AT A TIME.

Children Unlimited, Inc. Mission Statement:
To foster and strengthen meaningful relationships that will provide a foundation for each child and each family to be happy, healthy and engaged members of their community.

Family Connections Resource Center at Children Unlimited, Mission Statement:
To promote family wellness and decrease family stressors in order to prevent child abuse and neglect.

182 West Main Street • PO Box 986 • Conway, NH 03818
children@childrenunlimitedinc.org • www.childrenunlimitedinc.org
Tax ID: 02-0399161

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

CHILDREN UNLIMITED, INC.

Financial Statements

June 30, 2024 and 2023

and

Independent Auditor's Report

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

CHILDREN UNLIMITED, INC.
FINANCIAL STATEMENTS
June 30, 2024 and 2023

TABLE OF CONTENTS

	Page(s)
INDEPENDENT AUDITOR'S REPORT	1-2
FINANCIAL STATEMENTS	
Statements of Financial Position	3
Statements of Activities	4
Statements of Functional Expenses	5-6
Statements of Cash Flows	7
NOTES TO FINANCIAL STATEMENTS	8-14

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

VACHON CLUKAY & COMPANY PC

CERTIFIED PUBLIC ACCOUNTANTS
608 Chestnut Street • Manchester, New Hampshire 03104
(603) 622-7070 • Fax: (603) 622-1452 • www.vachonclukay.com

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Children Unlimited, Inc.

Opinion

We have audited the accompanying financial statements of Children Unlimited, Inc. (a 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 referred to above present fairly, in all material respects, the financial position of Children Unlimited, Inc., 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. 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 Children Unlimited, 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.

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 Children Unlimited, Inc.'s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards 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

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

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 judgement made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgement 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 and 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 Children Unlimited, 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 judgement, there are conditions or events, considered in the aggregate, that raise substantial doubt about Children Unlimited, 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.

Vachon Clukay & Company PC

Manchester, New Hampshire
February 7, 2025

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

CHILDREN UNLIMITED, INC.
Statements of Financial Position
June 30, 2024 and 2023

	2024	2023
ASSETS		
CURRENT ASSETS:		
Cash	$ 543,979	$ 436,363
Accounts receivable, net	228,279	200,788
TOTAL CURRENT ASSETS	772,258	637,151
PROPERTY AND EQUIPMENT:		
Construction in process		
Land	103,956	103,956
Playground	35,831	142,197
Buildings and improvements	1,464,417	1,470,444
Furniture and fixtures	30,481	10,788
Equipment	39,012	50,817
	1,673,697	1,778,202
Less accumulated depreciation	(609,476)	(682,988)
PROPERTY AND EQUIPMENT, NET	1,064,221	1,095,214
TOTAL ASSETS	$ 1,836,479	$ 1,732,365
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES:		
Accounts payable	$ 1,582	$ 23,328
Accrued expenses	75,466	84,199
TOTAL CURRENT LIABILITIES	77,048	107,527
TOTAL LIABILITIES	77,048	107,527
NET ASSETS:		
Without donor restrictions:		
Undesignated	1,646,106	1,539,580
Board designated funds for building purposes	29,070	50,901
With donor restrictions:		
Purpose restrictions	84,255	34,357
TOTAL NET ASSETS	1,759,431	1,624,838
TOTAL LIABILITIES AND NET ASSETS	$ 1,836,479	$ 1,732,365

See notes to financial statements

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

CHILDREN UNLIMITED, INC.
Statements of Activities
For the Years Ended June 30, 2024 and 2023

	2024	2023
CHANGES IN NET ASSETS WITHOUT DONOR RESTRICTIONS:		
SUPPORT AND REVENUE:		
Grant income	$ 508,076	$ 866,167
Contributions of cash and other financial assets	116,625	103,561
Annual appeal	9,755	17,230
Tuition income	586,640	503,564
Therapy income	411,693	417,870
Town support	43,152	43,152
Interest	3,779	200
Fundraising events	11,409	59,194
Contributions of nonfinancial assets		10,878
Other revenue	60,255	9,819
Net assets released from donor restrictions	10,333	44,581
TOTAL SUPPORT AND REVENUE WITHOUT DONOR RESTRICTIONS	1,761,717	2,076,216
EXPENSES:		
Program services:		
Child care	522,571	526,136
Preschool	250,244	247,030
Children's clinic	192,403	211,282
Family resource center	336,168	297,036
Region 7	49,104	415,529
Total program services	1,350,490	1,697,013
Supporting services:		
General administration	326,428	328,459
Fundraising	104	148
Total supporting services	326,532	328,607
TOTAL EXPENSES	1,677,022	2,025,620
TOTAL INCREASE IN NET ASSETS WITHOUT DONOR RESTRICTIONS	84,695	50,596
CHANGES IN NET ASSETS WITH DONOR RESTRICTIONS:		
Fees and grants	41,501	12,556
Contributions of cash and other financial assets	18,730	
Net assets released from donor restrictions	(10,333)	(44,581)
TOTAL INCREASE (DECREASE) IN NET ASSETS WITH DONOR RESTRICTIONS	49,898	(32,025)
CHANGE IN NET ASSETS	134,593	18,571
NET ASSETS - JULY 1	1,624,838	1,606,267
NET ASSETS - JUNE 30	$ 1,759,431	$ 1,624,838

See notes to financial statements

CHILDREN UNLIMITED, INC.
Statement of Functional Expenses
For the Year Ended June 30, 2024

	Program Services						Supporting Services		
	Child Care Services	Preschool Services	Children's Clinic Services	Family Resource Center	Region 7 Program	Total Program Services	General Administration	Fundraising	Total Supporting Services
SALARIES AND RELATED EXPENSES:									
Salaries	$ 412,726	$ 230,243	$ 163,678	$ 239,090	$ 8,836	$ 1,054,573	$ 119,484		$ 119,484
Payroll taxes	32,174	18,219	12,334	17,919	685	81,331	9,529		9,529
Employee benefits	42,516	600	629	500		44,245	28,691		28,691
	487,416	249,062	176,641	257,509	9,521	1,180,149	157,704	$ -	157,704
OTHER EXPENSES:									
Staff training				1,900	5,400	7,300			-
Consulting	525		2,562			3,087	150		150
Dues and subscriptions	1,309					1,309	1,218		1,218
Fundraising costs						-		104	104
Advertising				126		126	150		150
Food	161					161			-
Supplies	2,340					2,340	2,351		2,351
Insurance						-	27,619		27,619
Maintenance	7,342	461	544	2,728		11,075	23,147		23,147
Postage	6					6	589		589
Program education			16	332		348	18		18
Telephone	600			3,900		4,500	11,076		11,076
Travel	270	681	1,406	8,980	338	11,675	73		73
Utilities						-	16,954		16,954
Depreciation						-	55,921		55,921
Bookkeeping						-	8,143		8,143
Legal and accounting						-	11,511		11,511
Office supplies	759	40	746	41		1,586	4,142		4,142
Miscellaneous	534			785		1,319	132		132
Credit loss expense	842		10,390	270		11,502			-
Scholarships awarded	19,105					19,105			-
Interest expense	1,362		98			1,460	83		83
Kinship navigator				5,670		5,670			-
Region 7					33,845	33,845			-
Trestle funds				51,181		51,181			-
Raising the Valley Coalition				2,746		2,746			-
Loss on disposal						-	5,447		5,447
Total	$ 522,571	$ 250,244	$ 192,403	$ 336,168	$ 49,104	$ 1,350,490	$ 326,428	$ 104	$ 326,532

See notes to financial statements

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

CHILDREN UNLIMITED, INC.
Statement of Functional Expenses
For the Year Ended June 30, 2023

	Program Services						Supporting Services		
	Child Care Services	Preschool Services	Children's Clinic Services	Family Resource Center	Region 7 Program	Total Program Services	General Administration	Fundraising	Total Supporting Services
SALARIES AND RELATED EXPENSES:									
Salaries	$ 413,100	$ 223,904	$ 189,316	$ 220,402	$ 35,721	$ 1,082,443	$ 111,828		$ 111,828
Payroll taxes	32,696	16,800	14,395	16,694	2,740	83,325	8,553		8,553
Employee benefits	49,182	700	700	500		51,082	15,999		15,999
	494,978	241,404	204,411	237,596	38,461	1,216,850	136,380	$ -	136,380
OTHER EXPENSES:									
Staff training	432	306	2,805	3,040	20,000	26,583	150		150
Dues and subscriptions						-	1,510		1,510
Fundraising costs						-		148	148
Advertising		698		175	10,175	11,048			-
Food	226	51				277	334		334
Supplies	3,053					3,053	1,847		1,847
Insurance						-	25,884		25,884
Maintenance	13,203	1,512	324	1,407		16,446	39,600		39,600
Postage						-	1,198		1,198
Telephone	300	2,136	575	6,759		9,770	12,530		12,530
Travel	14	806	1,021	7,118	297	9,256			-
Utilities						-	21,314		21,314
Depreciation						-	48,289		48,289
Bookkeeping						-	7,634		7,634
Legal and accounting					87	87	25,798		25,798
Office supplies	459	87	13	12	64	635	4,397		4,397
Miscellaneous	431	30		125		586	424		424
Credit loss expense			1,751			1,751			-
Scholarships awarded	6,415					6,415			-
Interest expense	6,625		382			7,007	559		559
Kinship navigator				6,614		6,614			-
Region 7					345,217	345,217			-
Trestle funds				29,710		29,710			-
Raising the Valley				4,480	1,228	5,708	611		611
Total	$ 526,136	$ 247,030	$ 211,282	$ 297,036	$ 415,529	$ 1,697,013	$ 328,459	$ 148	$ 328,607

See notes to financial statements

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

CHILDREN UNLIMITED, INC.
Statements of Cash Flows
For the Years Ended June 30, 2024 and 2023

	2024	2023
CASH FLOWS FROM OPERATING ACTIVITIES:		
Cash received from grants and contributions	$ 1,708,588	$ 1,727,592
Interest income received	3,779	200
Other income received	60,255	9,819
Cash paid to employees	(1,180,619)	(1,202,251)
Cash paid to suppliers and others	(452,469)	(725,164)
Interest paid	(1,543)	(7,566)
Net cash provided (used) by operating activities	137,991	(197,370)
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchase of property and equipment	(30,675)	(117,119)
Proceeds from sale of property and equipment	300	
Net cash used for investing activities	(30,375)	(117,119)
Net increase (decrease) in cash and cash equivalents	107,616	(314,489)
CASH AND EQUIVALENTS - July 1	436,363	750,852
CASH AND EQUIVALENTS - June 30	$ 543,979	$ 436,363
SUPPLEMENTAL DATA:		
Net book value of disposed property and equipment	$ 5,747	$ -

See notes to financial statements

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

NOTE 1—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Activities

Children Unlimited, Inc. (the Organization) was organized as a nonprofit entity under Section 501(c)(3) of the Internal Revenue Code on November 24, 1986. The Organization was established for the purpose of providing developmental, educational, and therapeutic services to serve the needs of children from birth through five years of age and their families.

Child Care

We offer a childcare program for infants, toddlers, and preschoolers from ages 6 weeks to 6 years old with special emphasis on nurturing secure relationships and developing early friendships. We have an Infant Room, a Little Tots Room, a Toddler Room, and two Preschool-age rooms. We are designated in New Hampshire as a Granite Steps for Quality System- Step 1 childcare facility which is a quality rating system that recognizes New Hampshire childcare programs for efforts to improve the quality of care for young children and rewards programs that strive to improve their practices and staff qualifications. Our program includes daily activities that focus on all aspects of child development while providing an inclusive environment with professional support that allows children with typical development and children with special needs to play and learn together. Our goal is to offer children a "home away from home." The child-care staff benefits from consultations with the educational and therapeutic teams who are familiar with the children and their families.

Children's Clinic

Our professional staff has extensive pediatric training and experience in Early Childhood and Special Education, Speech/Language Pathology, Occupational and Physical Therapy, and Early Childhood Mental Health Therapy. We provide a variety of therapeutic services in-home or in our clinic which includes Speech/Physical/Occupational Therapy, Child-Directed, and Parent-Child Relationship Therapy. Play therapy services are provided by a licensed mental health counselor to children between ages 3 and 18. The children use toys for words, and their play is their language. For children who struggle in a school setting, a consultation can be provided to classroom staff or other service providers for a better continuum of care.

Family Resource Center

The Family Resource Center's mission is to promote family wellness and decrease family stressors to prevent child abuse and neglect. We are certified in New Hampshire as a resource center of quality. Services can be accessed by self-referral or through a referral from health care providers, local schools, or other community agencies. Our staff provides services to all families with children from birth to age 21 who live in Carroll County. We meet in their home or in the community to assess their needs, identify their strengths, and assist them in accessing local and state resources. The services we provide include home visits, parent education, family counseling, life skills training, resource navigation, and crisis intervention.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Preschool

Our unique preschool program offers classrooms where children with typical development and children with special needs learn and play together. Our curriculum is language-based and literacy-rich to enhance pre-academic skills while promoting friendship and empathy. Evidence-based strategies are used to provide individualized programming for children with developmental, emotional, and behavioral challenges.

Accounting Policies

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

Basis of Accounting

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

Basis of Presentation

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

Net Assets Without Donor Restrictions – Net assets available for use in general operations and not subject to donor or certain grantor restrictions. The governing board has designated, from net assets without donor restrictions, net assets for building purposes.

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

Recognition of Contributions and Donor Restrictions

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

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Revenue and Revenue Recognition

The Organization recognizes contributions and miscellaneous income when cash is received or based on donor restrictions as described above. The Organization recognizes revenue from contracts with customers in the form of tuition and therapy services. Revenue from contracts with customers is recognized when the monthly services are rendered. The Organization recognizes revenue from town support once approved at the local municipalities' annual meetings. In addition, the Organization recognizes revenue from annual appeals, fundraising, and interest when received.

The Organization also has revenue derived from cost-reimbursable federal and state contracts and grants, which are conditional upon certain performance requirements and/or incurrence of allowable qualifying expenses. Amounts received are recognized as revenue without donor restrictions when the Organization has incurred expenditures or completed performance requirements in compliance with the specific contract or grant provisions. Amounts received prior to incurring qualifying expenditures or completing performance requirements are reported as revenue with donor restrictions and amounts not yet received, but already awarded are recorded as grants and contract receivables. For grants and contributions with a right of return, amounts received prior to incurring qualifying expenditures are reported as advances from grantors in the statements of financial position.

Cash

Cash consists of demand deposits, cash on hand and all highly liquid investments with a maturity of ninety days or less.

Property and Equipment

Property and equipment are recorded at cost for purchased items and at fair value for donated items at the date of donation. The Organization's policy is to capitalize expenditures for major improvements and to charge to operations expenditures which do not extend the lives of related assets in the period incurred. Depreciation is computed using the straight-line method over the following estimated useful lives:

	Years
Playground	5-20
Buildings and improvements	5-39
Furniture and fixtures	5-10
Equipment	5-15

Depreciation expense for the years ending June 30, 2024 and 2023 was $55,921 and $48,289, respectively.

Accrued Earned Time

Full-time and part-time employees are eligible to accrue earned time as they provide services. Eligible employees must be scheduled for a minimum of 20 hours per week. Earned time is accrued as the following: employees with length of service between 60 days and 4 years can accrue earned time at a rate of .0577/hour, employees with length of service between 5 and 9 years can accrue earned time at a rate of .0654/hour, and employees with 10 or more years of service can accrue earned time at a rate of .0769/hour. The Executive Director is eligible to accrue earned time at a rate of .0962/hour. Earned time

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

may be accrued to a maximum of 240 hours. Upon termination of employment, any accrued/unused earned time will be paid at current rates of pay, except for employees who have been employed for less than 60 days.

Credit Loss Expense

The Organization uses the reserve method for accounting for credit losses. It is the Organization's policy to charge off uncollectible receivables when management determines the receivable will not be collected. For the years ending June 30, 2024 and 2023, the Organization reserved $7,000 and $5,000, respectively, as an allowance for uncollectible receivables.

Recognition of Contributed Nonfinancial Assets

The Organization receives donated professional services which are recorded as both revenue and expenses at estimated fair value. Donated services recognized as revenue and expenses in the Statements of Activities for the years ending June 30, 2024 and 2023 was $0 and $10,878, respectively.

Functional Allocation of Expenses

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

The financial statements report certain categories of expenses that are attributed to more than one program or supporting function. Accordingly, certain administrative costs have been allocated among the programs and supporting services benefited, based primarily on percentage allocations calculated based on a flat percentage rate. The expenses that are allocated include salaries, payroll taxes, and employee benefits.

Income Taxes

The Organization is exempt from Federal income taxes under Section 501(c)(3) of the Internal Revenue Code and is also exempt from State of New Hampshire income taxes and, therefore, has made no provision for Federal or State income taxes. In addition, the Organization has been determined by the Internal Revenue Service page not to be a "Private Foundation" within the meaning of Section 509(a) of the Code.

The Organization is annually required to file a Return of Organization Exempt from Income Tax (Form 990) with the IRS. FASB Accounting Standards Codification Topic 740 entitled *Accounting for Income Taxes* requires the Organization to report uncertain tax positions for financial reporting purposes. The Entity had no uncertain tax positions as of June 30, 2024 and, accordingly does not have any unrecognized tax benefits that need to be recognized or disclosed in the financial statements.

Estimates

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

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Fair Value of Financial Instruments

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

NOTE 2—ADOPTION OF ACCOUNTING STANDARDS

In June 2016, the FASB issued ASU 2016-13, *Financial Instruments – Credit Losses* (Topic 326). The objective of Topic 326 is to provide useful information for decision making, by considering expected credit losses on financial instruments. It requires financial assets which are measured on an amortized cost basis to be presented at the net amount expected to be collected. The adoption of Topic 326 did not have a material impact on the Organization's statements of financial position, functional expenses, or the statements of cash flows.

NOTE 3—LIQUIDITY AND AVAILABILITY

The Organization regularly monitors the availability of resources required to meet its operating needs and other contractual commitments, while also striving to maximize the investment of its available funds. Sources of liquidity include cash and accounts receivable.

The following table reflects the Organization's financial assets as of June 30, 2024 and 2023, reduced by amounts that are not available to meet general expenditures within one year of the statement of financial position date because of donor restrictions or internal board designations. In the event the need arises to utilize the board designated reserve funds for liquidity purposes, the reserve could be drawn upon through board resolution.

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

	2024	2023
Cash	$ 543,979	$ 436,363
Accounts receivable, net	228,279	200,788
Total Financial Assets	772,258	637,151
Less:		
Net assets with donor restrictions	(84,255)	(34,357)
Board designated reserve	(29,070)	(50,901)
Financial Assets Available to Meet Cash Needs for General Expenditures Within One Year	$ 658,933	$ 551,893

NOTE 4—CONCENTRATION OF CREDIT RISK

The Organization maintains its cash balances in two financial institutions. The balances are insured by the Federal Deposit Insurance Corporation up to a combined total of $250,000 per financial institution as of June 30, 2024 and 2023. The bank balances may, at times, materially exceed federally insured limits. The Organization has not experienced any losses on such accounts. The Organization's cash was uninsured in the amount of $0 and $5,943 as of June 30, 2024 and 2023, respectively.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

NOTE 5—ACCOUNTS RECEIVABLE

Accounts receivable consist of the following at June 30, 2024 and 2023:

	2024	2023
Grants	$ 40,029	$ 30,241
Contributions	50,000	
Town support	21,100	19,100
Contracts with customers	124,150	156,447
Allowance for credit losses	(7,000)	(5,000)
	$ 228,279	$ 200,788

NOTE 6—NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions consist of the following at June 30, 2024 and 2023:

	2024	2023
Silver anniversary fund	$ 8,016	$ 9,660
Scholarship funds	2,445	9,442
Youthwell	10,000	
Farmer's Market	14,725	
Behavioral Health	10,000	
Mentor Program	13,100	
Safety Equipment Grant		274
Child Care Achieving Stabilization Program		1,426
Trestle funds	25,969	13,555
	$ 84,255	$ 34,357

NOTE 7—ECONOMIC DEPENDENCE

The Organization’s primary source of revenues is fees and grants received from the State of New Hampshire and the New Hampshire Children’s Trust. During the year ended June 30, 2024 and 2023, the Organization received $549,577 (30.34%) and $878,723 (42.99%), respectively, of its revenues in the form of fees and grants.

Revenue is recognized as earned under the terms of the grant contracts and is received on a cost reimbursement basis and/or satisfaction of certain performance requirements. Other support originates from other program services, contributions, Town support, and other income.

NOTE 8—REVENUE FROM CONTRACTS WITH CUSTOMERS

The following table provides information about balances of receivables, contract assets, and contract liabilities associated with contracts with customers for the years ended June 30, 2024, 2023 and 2022:

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

	Receivables	Contract Assets	Contract Liabilities
June 30, 2024	$ 124,150	$ -	$ -
June 30, 2023	$ 156,447	$ -	$ -
June 30, 2022	$ 82,109	$ -	$ -

NOTE 9—CONTINGENCIES

The Organization participates in a number of Federal and State assisted grant programs and contracts. Such programs may be subject to financial and compliance audits by the grantors or their representatives. The amounts, if any, of expenses which may be disallowed by a grantor agency cannot be determined at this time, although the Organization expects such amounts, if any, to be immaterial.

NOTE 10—SUBSEQUENT EVENTS

Subsequent events have been evaluated through February 7, 2025, which is the date the financial statements were available to be issued.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Ardis Yahna

Experience

Occupational Therapist Registered/Licensed in NH

Children Unlimited, Conway, NH

9/1997 – Present

Executive Director at Children Unlimited (7/1/2018-Present) **Child Care Center Director**, manage department heads for Family Resource Center and Outpatient Children's Clinic, and oversee all operations and financial management of the center.

Assistant Director at Children Unlimited (7/1/2017-6/30/2018) Supported the Executive Director with daily operations. Coordinated trainings for child care staff as worked toward Licensing Plus 2.0.

Family Centered Early Supports and Services (FCESS) Program Director (7/1/2016-6/30/2017) Coordinated services for 70+ families ensuring timely services, appropriate therapies, and documentation. Kept NH Leads database for CU ESS Program current and in compliance with Part C rules and regulations.

Served on two initiatives through NH Part C

- SEE Change (Sustainable Early Engagement for Change):
  received training in the SEE Change model (with a focus on implementing, sustaining and scaling up evidence-based practices to improve child outcomes) and currently serve on the leadership team with Northern Human Services
- COS (Child Outcomes Summary):
  received intensive training on the COS process (a system for states to summarize data on children at entry and exit from ESS for federal reporting purposes) with a plan to become a team of trainers who will roll-out updated training to all FCESS programs in NH to begin 3/2017

Provide occupational therapy services to children in both FCESS program and preschool special education, including evaluation and therapy.

Collaboratively develop and implement IFSP's and IEP's with CU team of therapists, educators, and support staff, as well as families and local school districts.

Served as Program Coordinator for Pediatric Evaluation Clinic at CU (PECCU) from 1/2010-12/2013. The clinic evaluated, diagnosed and provided recommendations for children suspected of being on the Autism spectrum.

Supervised Fieldwork level I and II students from University of New Hampshire.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Education	**Professional development and training**
	Ongoing
	Master of Occupational Therapy, University of Puget Sound, Tacoma, WA
	12/93
	Bachelor of Science, James Madison University, Harrisonburg, VA
	8/88
Leadership	Regional Lead for the Region 7 (Northern Lakes and Mountains) Early Childhood Partnership
	Advisory Committee, NH TEACH/ECAP
	Advisory Committee, WMCC Early Childhood Programs
	Advisory Council, Carroll County Coalition for Public Health
	Member, Statewide Child Care Director Network
	Co-facilitator, Raising the Valley Early Childhood Coalition
	Co-facilitator, Mount Washington Valley Child Care Director Network

Ardis Yahna
310 Kearsarge Rd., North Conway, NH 03860 – 603-986-8885 –
ayahna@childrenunlimitedinc.org

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

HOLLY MURPHY

PROFESSIONAL SUMMARY

Experienced Bookkeeper and Payroll Professional with a strong background in healthcare and nonprofit financial operations. Skilled in bi-weekly payroll processing, bookkeeping, billing, collections, grant support, and confidential financial record management. Known for accuracy, discretion, and the ability to work independently in remote environments. Adept at supporting leadership, maintaining compliance, and managing multiple systems with minimal oversight.

CORE COMPETENCIES

- Bookkeeping & General Ledger Support
- Bi-Weekly Payroll Processing (34 Employees)
- QuickBooks Online & Paylocity
- Accounts Payable & Accounts Receivable
- Clinical Billing & Collections
- Grant Processing & Financial Support
- Financial Reconciliations & Reporting
- Confidential & HIPAA-Compliant Records
- Process Improvement & Documentation
- Microsoft Excel (Advanced), Word, PowerPoint

PROFESSIONAL EXPERIENCE

Children Unlimited

Bookkeeper & Payroll Specialist | August 18, 2025 – Present

- Manage full-cycle bookkeeping operations using **QuickBooks Online**, including daily bank and credit card monitoring, deposits, reconciliations, and journal entries

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

- Process **bi-weekly payroll for 34 employees** through **Paylocity**, including reimbursements, deductions, and payroll posting to QuickBooks
- Administer employee benefits reporting, including **403(b) contributions (Vanguard)**, payroll deductions, and annual compliance filings
- Maintain accounts payable and accounts receivable, enter vendor payables, issue checks, and manage ACH payments
- Oversee **clinical billing and collections** using **MedUSA** and **AdvanceMD**, including reconciliation of ACH deposits and EOB documentation
- Bill state and federal programs (NH & ME), including childcare assistance, Medicaid, grants, and contracted services, ensuring accuracy and compliance
- Support **grant billing and financial tracking**, ensuring expenses are properly recorded prior to reimbursement
- Prepare **monthly financial statements** and written summaries for the Executive Director and Board of Directors
- Complete **monthly bank reconciliations** for leadership review and approval
- Assist with **annual budgeting**, audit preparation, tax documentation, and regulatory filings (1099-NEC, W-2 benefit reporting, 5500 filing)
- Maintain employee onboarding and personnel records, ensuring compliance with payroll, tax, and benefit requirements
- Coordinate with leadership, department heads, insurers, and external partners to resolve financial, billing, and compliance issues

---

Genesis HealthCare – Mineral Springs

Business Office Manager | July 2020 – July 2025

- Directed business office operations including payroll preparation, bookkeeping, AP/AR, and cash management
- Managed resident trust funds and maintained confidential financial files
- Oversaw cash deposits, billing adjustments, refunds, and third-party payments
- Supervised, trained, and mentored administrative staff

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

- Supported audits and ensured compliance with internal and external regulations
- Improved efficiency of financial workflows and reporting processes

---

Memorial Hospital – MaineHealth

Patient Financial Advocate | 2015 – 2020

- Assisted patients with Medicaid resources and hospital financial assistance programs
- Counseled patients on payment plans and monitored account compliance
- Maintained accurate financial documentation while handling sensitive data

Registration / Medical Records Technician (Detail)

- Verified insurance eligibility and entered patient data across multiple systems
- Managed medical record documentation, scanning, and release-of-information protocols
- Responded to record requests from patients, legal entities, and government agencies

---

Internal Revenue Service – Taxpayer Advocate Service

Administrative Assistant (GS-05) | 2008 – 2014

- Provided administrative and technical support to senior advisors
- Processed priority and Congressional taxpayer cases
- Trained new employees on internal automated systems
- Maintained strict confidentiality and accuracy in financial documentation

---

EDUCATION

Bridgewater State University – Bridgewater, MA
Completed Prerequisites for Master's Program (Communication Disorders) | GPA 4.0

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Pine Manor College – Chestnut Hill, MA
Bachelor of Arts, Double Major: Psychology & English | GPA 3.8
Honors: Summa Cum Laude, Dean's List, Alpha Chi National Honor Society

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Cathleen A. Livingston

Education: B.A. in Psychology Ithaca College Ithaca, NY 1988
Minors: Exercise Science and Sport Studies

Professional Experience:

2021-present: Family Connections Resource Center, Children Unlimited Center **Director of Resource Center**

Provide supervision of family support providers and kinship navigators, home visiting, parent education and support, including parenting classes, case management, resource and referral, collaboration and networking with community and state agencies.

2011-2021: Family Connections Resource Center, Children Unlimited **Family Support Provider**

Provide parent education, home visiting, support and education with community resources. Identify family strengths, assess needs, develop and implement an action plan to achieve success at home and in the community. Child Health Support Provider: in-home support for children and families in conjunction with Division of Children, Youth and Families, family counseling from a strength-based, solution focused model, behavioral health management, referrals, supervised visitation and crisis intervention.

2002-2011: Starting Point **Direct Service Administrator/ Shelter Manager**

Oversee daily functioning of emergency shelter. Provide case management services to shelter clients, provide court, hospital and support line advocacy. Co-facilitate trauma support group. Manage, recruit and train all volunteers and maintain current files.

1997-2002: Northern Human Services **Children's Case Manager**

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Responsible for a caseload of over 20 families, wrote and implemented treatment plans, provided outreach services to children and families, member of the treatment team, acted as liaison and advocate in schools for identified children. Maintained files in accordance with state regulations.

1993-1996: Bartlett Community Preschool **Teacher's Assistant**

Responsible for assisting head teacher/director in leading educational activities for children aged 3-6 years. Planned field trips and managed the lunch program. Provided after school care for children aged 3- 12 years.

1990-1991: Pine Tree Elementary School **Special Education Aide**

Aide for a kindergarten child with autism. Provided support in all classroom activities. Attended all IEP meetings.

1989-1990: Conway Elementary School **Special Education Aide**

Provided individual and small group instruction for three students in the second grade in reading and math. Assisted classroom teacher with daily activities.

Associations:

Member of the White Mountain Milers
Sigma XI Honor Society

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Samantha L Jones

Work Experience

Family Support Provider/Kinship Coordinator/Community Health Worker
Children Unlimited-Conway, NH
September 2020-Present

Trauma-informed, strength based family engagement
Relationship-building with diverse families and caregivers
Service referral and coordination
Advocacy for family needs across agencies
Resource navigation and community partnership development
Clear, compassionate communication
Accurate documentation and compliance with state guidelines
Strong organization and time-manangement skills
Cultural humility and respect for family dynamics

Night audit/Front Desk Agent
The Grand Summit at Attitash-Bartlett, NH
June 2024-Present

Guest service and hospitality professionalism
Reservation management and RDP proficiency
Cash handling and financial accuracy
Night audit and daily revenue balancing
Conflict resolution and guest recovery
Multitasking in high-traffic environment
Clear, friendly communication
Problem-solving and independent decision-making
Strong organization and administrative skills

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Store Manager
Olympia Sports-North Conway, NH
August 2018-September 2020

Leadership and staff development
Customer service excellence
Inventory and loss prevention
Sales forecasting and KPI analysis
Visual merchandising
Conflict resolution and problem-solving
Cash handling and financial accuracy
Scheduling and labor management
Strong communication and ability to multitask
Operation and administrative efficiency

Assistant Store Manager
Olympia Sports-North Conway, NH
February 2017-August 2018

Strong ability to motivate and support team members
Skilled in training, coaching and onboarding new staff
Maintaining a positive, productive store culture
Reliable second-in-command to store manager
Friendly, solution-focused customer service
Experience with ordering, receiving shipment and vendor coordination

In-Home Personal Care Attendant
Northern Human Services-Conway, NH
February 2014-April 2017

Compassionate, youth-centered caregiving
Behavioral support and de-escalation
Assistance with daily living and mobility
Skilled at adapting communication techniques
Experience with community outings, sensory activities, and therapeutic play
Clear communication with parents, guardians and care team

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Rehabilitation Specialist/Special Education Assistant
Lakeview NeuroRehabilitation-Freedom, NH
March 2013-November 2015

Client-centered support and therapeutic assistance
Academic and behavioral support for youth
Clear communication with multidisciplinary teams
Documentation, behavioral and progress tracking
Positive reinforcement and de-escalation strategies
Patience,empathy and professionalism

Education

Psychology (Bachelor's Degree)
Minor in Human Services
Granite State College-Conway, NH
September 2015N

Behavioral Science (Associate's Degree)
Granite State College-Conway, NH
December 2013

High School Diploma
Kingswood Regional High School-Wolfeboro, NH
May 2011

Licensed Community Health Worker
May 2025

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Ariel Callanan

WORK EXPERIENCE

Family Support Provider/Newborn Navigator May 2022- present

Children Unlimited

Responsible for following and creating treatment plans for families being served through the family resource center

Responsible for running playgroups and parenting classes

Server August 2021- May 2024

May Kelly's Irish Cottage

Server at restaurant, responsible for dealings with customers

Server/ Bartender July 2019- August 2021

Red fox Bar and Grille

Server at restaurant, responsible for dealings with customers

Assistant Teacher February 2020- July 2020

Josiah Bartlett Elementary School

Assistant teacher in a kindergarten classroom. Responsible for assisting the classroom teacher with many tasks.

Substitute Teacher

Jackson Grammar School September 2019- February 2020

Filled in for teachers on an as needed basis.

Preschool Lead Teacher August 2018- June 2019

Lilliputian Montessori School

Lead teacher in a Montessori preschool classroom. Responsible for curriculum planning and parent communication.

Preschool Teacher

Bartlett Community Preschool October 2017- June 2018

Working 1:1 with a preschool student to assist them through their school day

LNA

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Timberland Homecare August 2017- Dec 2017

Overnight staff for an elderly woman who needed 24/7 care

HHA

Connected Homecare April 2017- July 2017

In-home elder care, assisted elderly with activities of daily living to maintain independence

Patient Care Technician

Emerson Hospital February 2015- April 2017
Experience working in the Emergency department and MEd/surg. Responsible for assisting the nursing staff with many different care needs. Including but not limited to, toileting, changing incontinent patients, cleaning patients, transporting patients to different departments, wound care, splinting, and vitals.

Northern Human Services November 2008 to May 2011

Supervise Direct Care staff in residential homes for adults with developmental disabilities

Responsible for overseeing and developing goals for ISP's

- Responsible for overseeing staff in assisting individuals with ADL's and medical care, med administration according to MAP
- Oversaw 26 staff
- Payroll, staff supervision, scheduling, and running trainings

EDUCATION

Master's of Elementary Education January 2019

Minor in Early Childhood Education

Concordia University

Bachelors of Social Work

Regis College May 2001

Associates of Science

Middlesex Community College December 1999

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Ellery Hunt

Education

University of New Hampshire— Master of Social Work | August 2024- December 2025

Plymouth State University— Bachelor of Science in Social Work, GPA 3.92 | August 2020 - May 2023

Professional Experience

Family Support Provider/Kinship Navigator/Community Health Worker — Family Connections Resource Center at Children Unlimited, Conway, NH | June 2023 - Present

- Assessed and supported caregivers from diverse backgrounds by providing resource navigation, parenting support, and referrals to local and state services.
- Maintained accurate and timely documentation in the agency's database.
- Facilitated community outreach through organizing and leading playgroups, parenting classes, and support groups.
- Collaborated with other agencies to address needs in the community. Including food insecurity, diaper insecurity, youth mental health, and the housing crisis.
- Maintained caseload and conducted home visits with families.

MSW Intern — Maplestone School, Acton, ME | January 2025 - December 2025

- Supported adolescent students in a children's day treatment setting through individual and group counseling.
- Provided one-on-one counseling to middle and high school students with emotional, behavioral, social, and learning challenges.
- Co-facilitated group counseling sessions incorporating adventure-based therapy.
- Utilize evidence-based interventions, including CBT, DBT, and solution-focused techniques.
- Attended and contributed to IEP meetings as part of the interdisciplinary team.
- Maintained accurate and timely documentation.

Social Work Intern — Whole Village Family Resource Center, Plymouth, NH | January 2023 - May 2023

- Connected individuals and families with appropriate community resources to meet their needs.
- Assisted in facilitating playgroups and supported parent education sessions.
- Conducted research to identify new and existing resources, providing valuable information to staff.

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

- Collected and entered accurate data into the organization's database to support case management and reporting.
- Observed family case management processes and gained experience with nonprofit grant procedures.

NASW JEDI Conference — National Association of Social Work, Concord, NH | December 2022

- Presented a research poster on housing inequities in Central Carroll County, New Hampshire.
- Proposed the implementation of home sharing as a strategic approach to address the housing crisis within the state.

Direct Support Professional — Next Steps Community Services, Conway, NH | May 2022 - August 2022

- Supported individuals with intellectual and developmental disabilities in meeting their daily needs.
- Provided emotional support and utilized de-escalation techniques to manage challenging situations.
- Administered medications following proper protocols.
- Maintained accurate documentation of care and incidents.
- Trained in Management of Aggressive Behaviors (MOAB) and applied techniques as needed.

Associate — Walmart, Plymouth, NH & Oxford, ME | September 2021- June 2023

- Provided customer service.
- Maintained inventory of items.
- Collaborated with other departments and management.

Skills

-Organized	-Problem-solving	- Collaboration
- Dependable	- Time Management	- Critical Thinking
- Active listening	- Adaptability	- Google and Microsoft

Certifications

- Licensed NH Community Health Worker
- Foundational Motivational Interviewing
- Growing Great Kids Next Generation Preschool
- Grandfamilies Leadership

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

KARA COUTURE

PROFESSIONAL SUMMARY

Dedicated Occupational Therapist and Community Engagement professional with over 20 years of experience in program development, pediatric services, and community outreach. Proven ability to support young children with developmental needs while building strong community partnerships through strategic engagement, fundraising, and events. Collaborative, adaptable, and highly organized leader committed to improving outcomes for children and families.

CORE COMPETENCIES

Pediatric Occupational Therapy (IEPs) / Community Engagement & Outreach / Program Development & Implementation / Fundraising & Event Coordination / Team Leadership & Staff Training / Cross-functional Collaboration / Social Media & Public Relations

PROFESSIONAL EXPERIENCE

Children Unlimited, Inc. - Conway, NH
June 2022 - Present

Occupational Therapist

- Deliver school-based occupational therapy services to preschool-aged children with IEPs
- Support development of fine motor, sensory processing, and self-regulation skills
- Collaborate with educators, families, and interdisciplinary teams to achieve student goals
- Modify classroom environments and tasks to increase independence and participation

Community Engagement Coordinator *(June 2023 - Present)*

- Lead social media strategy to enhance visibility and community engagement
- Plan and execute fundraising initiatives and community-based events
- Build and maintain partnerships with local organizations and stakeholders
- Develop marketing and outreach materials to promote programs and services

Docusign Envelope ID: FB17738C-8603-8E7F-827A-3FD5E8C6498C

Carroll County YMCA / Camp Huckins - Freedom, NH
February 2004 - Present

Director of Community Outreach / Leadership Division Leader

- Develop and implement youth and family programs serving the Carroll County community
- Co-manage a residential summer camp serving 1,400+ campers and staff annually
- Recruit and coordinate participation in the NH YMCA Youth & Government Program
- Support fundraising campaigns, alumni relations, and volunteer engagement efforts
- Design and facilitate training programs for 100+ seasonal staff
- Supervise, mentor, and evaluate staff performance

EDUCATION

University of New Hampshire - Durham, NH
Bachelor of Science, Occupational Therapy
GPA: 3.67

CERTIFICATIONS & PROFESSIONAL DEVELOPMENT

- YMCA Team Leader Certification, 2019
- ACA Standards Visitor, 2019
- Wilderness First Aid & CPR Certified, 2004-Present
- Leadership MWV, 2015-2016

VOLUNTEER EXPERIENCE

- Kennett High School Project Graduation, Committee Member (2025-2026)
- Pequawket Foundation, Board Member (2024- Present)
- Eastern Slope Ski Club, Board Member (202–Present)
- MWV Children's Museum – Board of Directors (2013-2022), Co-President (2016)
- Pine Tree Elementary School PTA (2013-2024)

FORM NUMBER P-37 (version 2/23/2023)

Subject: Comprehensive Family Support (CFS) (RFP-2027-DPH-05-COMPR-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 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	1.6 Account Unit and Class TBD	1.7 Completion Date June 30, 2029	1.8 Price Limitation $1,128,674
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 85195ADCCB0646E... Date: 5/7/2026		1.12 Name and Title of Contractor Signatory Betsey Andrews Parker CEO	
1.13 State Agency Signature DocuSigned by: Iain Watt D778BB63F9704C7... Date: 5/7/2026		1.14 Name and Title of State Agency Signatory Iain Watt Director - DPH	
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 748734844941460... On: 5/8/2026			
1.17 Approval by the Governor and Executive Council *(if applicable)* G&C Item number:		G&C Meeting Date:	

Contractor Initials: DS BAP
Date: 5/7/2026

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

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

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

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

4. CONDITIONAL NATURE OF AGREEMENT.

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

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

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

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

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

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

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

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

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

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

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

7. PERSONNEL.

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

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

Contractor Initials: DS BAP
Date: 5/7/2026

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

8. EVENT OF DEFAULT/REMEDIES.

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

8.1.1 failure to perform the Services satisfactorily or on schedule;

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

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

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

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

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

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

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

9. TERMINATION.

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

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

10. PROPERTY OWNERSHIP/DISCLOSURE.

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

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

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

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

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

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

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

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

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

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

Contractor Initials DS BAP

Date 5/7/2020

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

14. INSURANCE.
14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:
14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than $1,000,000 per occurrence and $2,000,000 aggregate or excess; and
14.1.2 special cause of loss coverage form covering all Property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the Property.
14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.
14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or any successor, a certificate(s) of insurance for all insurance required under this Agreement. At the request of the Contracting Officer, or any successor, the Contractor shall provide certificate(s) of insurance for all renewal(s) of insurance required under this Agreement. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

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

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

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

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

19. CHOICE OF LAW AND FORUM.
19.1 This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire except where the Federal supremacy clause requires otherwise. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.
19.2 Any actions arising out of this Agreement, including the breach or alleged breach thereof, may not be submitted to binding arbitration, but must, instead, be brought and maintained in the Merrimack County Superior Court of New Hampshire which shall have exclusive jurisdiction thereof.

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

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

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

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

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

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

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

Contractor Initials: DS BAP
Date: 5/7/2026

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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, this Agreement, and all obligations of the parties hereunder, shall become effective on July 1, 2026 (“Effective Date”).

1.2. Paragraph 3, Effective Date/Completion of Services, is amended by deleting subparagraph 3.3., in its entirety and replacing it as follows:

3.3. Contractor must complete all Services by the Completion Date specified in block 1.7. 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 6, Compliance by Contractor with Laws and Regulations/Equal Employment Opportunity, Subparagraph 6.1., is amended as follows:

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, RSA 151:21 Patients’ Bill of Rights, civil rights and equal employment opportunity laws, and the Governor’s order on Respect and Civility in the Workplace, Executive Order 2020-01. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

1.4. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.5., as follows:

12.5. 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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

1. Statement of Work

1.1. The Contractor must provide the Comprehensive Family Support (CFS) Program. The Contractor must provide services to pregnant and parenting women as well as other families with children up to eighteen (18) years of age who are:

1.1.1. Experiencing, or at risk of experiencing difficulty with:

1.1.1.1. Pregnancy;

1.1.1.2. Health and nutrition;

1.1.1.3. Education and employment;

1.1.1.4. Parenting challenges;

1.1.1.5. Social isolation;

1.1.1.6. Substance use disorders;

1.1.1.7. Mental health events;

1.1.1.8. Child abuse and neglect; and

1.1.1.9. Substance exposed infants.

1.1.2. Perinatal families of substance exposed infants.

1.1.3. At risk for child abuse and neglect.

1.1.4. Seeking Comprehensive Family Support (CFS) in a voluntary manner.

1.2. The Contractor must ensure all services are provided in the following DHHS Catchment area: Rochester District Office. The Contractor must maintain a physical office located within the Catchment Area. The Contractor must ensure:

1.2.1. The office is accessible to families and staff at least five (5) days per week Monday through Friday during standard business hours of 8:00 am to 4:00 pm, excluding state holidays.

1.2.1.1. Evening hours are available at least one (1) night per week.

1.2.2. Families are provided flexible opportunities to meet in the home or community.

1.2.3. The office location remains in compliance with the Americans with Disabilities Act (ADA) accessibility requirements.

1.2.4. No duplication of services.

1.3. The Contractor must meet the Standards of Quality for Family Strengthening & Support as defined by the National Family Support Network. This includes:

1.3.1. Maintaining a current status throughout the term of the Agree[illegible]f

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

having completed a New Hampshire self-assessment and received designation as a Family Resource Center (FRC) of Quality.

1.4. Comprehensive Family Support (CFS) Home Visiting Program

1.4.1. The Contractor must deliver high-quality, responsive CFS home visiting services to New Hampshire families with children ages 0-18, based on their emerging needs. The Contractor must ensure that families enrolled in CFS have access to all FRC services, home visiting services, parent education, parent support groups, father groups, parent cafes, information and referral, and case management. The Contractor must work collaboratively with the Department to deliver statewide CFS home visiting services that:

1.4.1.1. Promote healthy pregnancy and birth outcomes.

1.4.1.2. Support safe and nurturing environments for children and adolescents.

1.4.1.3. Improve maternal and child health.

1.4.1.4. Encourage positive parenting practices.

1.4.1.5. Reduce child maltreatment.

1.4.1.6. Increase linkages and referrals to community resources and supports.

1.4.2. The Contractor must ensure each family has a completed Individual Service Plan (ISP) that identifies and addresses barriers to achieving optimal health, well-being, and resiliency. The Contractor must use the ISP template provided by the Department and must include information about the education and support services that will be delivered across key outcome domains, which may include but are not limited to:

1.4.2.1. Maternal Health.

1.4.2.2. Child Health.

1.4.2.3. Child Development and School Readiness.

1.4.2.4. Community Linkages and Referrals.

1.4.2.5. Family Economic Self Sufficiency.

1.4.2.6. Positive Parenting Practices.

1.4.2.7. Preventative Child Care Scholarship.

1.4.3. The Contractor must provide CFS services using the Strengthening Families Framework developed by the Center for the Study of Social

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Policy (CSSP), addressing the five (5) Protective Factors which are:

1.4.3.1. Parental Resilience.

1.4.3.2. Social Connections.

1.4.3.3. Knowledge of parenting and child development.

1.4.3.4. Concrete supports in times of need.

1.4.3.5. Social and emotional competence of children.

1.4.4. The Contractor must ensure CFS services are delivered through a variety of methods, including but not limited to:

1.4.4.1. Home visiting services.

1.4.4.2. Educational workshops.

1.4.4.3. Peer-led or professionally facilitated support groups.

1.4.4.4. Parenting education and family support activities.

1.4.4.5. Trauma-informed services that recognize and respond to the impact of adverse experiences.

1.4.4.6. Access to concrete resources in times of need.

1.4.5. The Contractor must provide home visiting services that are respectful of the families served, strengths-based and family-centered, ensuring participation is voluntary and addresses each family's values, traditions, and needs.

1.4.6. The Contractor must collaborate with program participants to develop individualized, goal-oriented plans that improve economic self-sufficiency and long-term family stability. These goals may include, but are not limited to:

1.4.6.1. Planning future pregnancies.

1.4.6.2. Continuing education or vocational training.

1.4.6.3. Securing and maintaining employment.

1.4.6.4. Strengthening the family's Protective Factors.

1.4.6.5. Obtaining safe and stable housing.

1.4.6.6. Accessing community-based services and supports.

1.4.6.7. Participating in parenting education on topics such as:

1.4.6.7.1. Child development.

1.4.6.7.2. Child behavior and emotional regulation.

1.4.6.7.3. Child health and wellness.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

1.4.6.7.4. Coping strategies and problem-solving skills.

1.4.6.7.5. Home and child safety.

1.4.6.7.6. Positive parenting techniques.

1.4.7. The Contractor must promote education on health and safety topics including, but not limited to:

1.4.7.1. Providing child safety education through handouts and discussion using evidence-based curricula, including resources from the Centers for Disease Control (CDC) covering a wide range of topics such as:

1.4.7.1.1. Car seat safety and installation checks.

1.4.7.1.2. Use of safety gates and fall prevention.

1.4.7.1.3. Safe use of portable cribs and sleep environments.

1.4.7.1.4. Safe sleep practices to reduce the risk of Sudden Unexpected Infant Death Syndrome (SUID).

1.4.7.1.5. Lead poisoning prevention, including identification of environmental hazards.

1.4.7.1.6. Home safety strategies, including the use of window guards.

1.4.7.1.7. Oral health education for infants, children, and adolescents.

1.4.7.1.8. Understanding Adverse Childhood Experiences (ACEs) and building Protective Factors.

1.4.7.1.9. Smoking cessation education and referrals.

1.4.7.1.10. Educating families on the importance of primary care and preventative health services, including:

1.4.7.1.11. Access to preventative health care.

1.4.7.1.12. Immunizations.

1.4.7.1.13. Establishing a medical home for ongoing care coordination.

1.4.7.1.14. Improving child safety and health outcomes through regular well-child visits.

1.4.7.1.15. Postpartum health care follow up and planning for future pregnancies.

1.4.8. The Contractor must ensure all women have access to v[illegible]d

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

screening tools, listed in 1.6.3, for prenatal and postpartum depression, and must refer all women who screen positive for maternal depression to appropriate follow-up care. The Contractor must provide support for participant enrollment in primary care and pediatric services.

1.4.9. The Contractor must complete and renew a Release of Information (ROI) form annually with all CFS participants for all programs, regardless of the type of services they are enrolled in. The ROI must include but is not limited to:

1.4.9.1. Acknowledgement of data collection within the Department's Family and Community Health Data System (FCH-DS).

1.4.9.2. Acknowledgement of sharing personal identifiable information with the Department.

1.4.9.3. Acknowledgement of the purpose of releasing data to the Department to review program outcomes and facilitate quality improvement activities.

1.4.9.4. Acknowledgement that Family Service Record outcome data will be kept and tracked for three (3) subsequent years following discharge.

1.4.9.5. All video recording, storage, access, and sharing requirements set forth elsewhere in this Scope of Services are contingent upon and governed by the participant consent requirements described in Section 1.7. The Contractor must use a paper coaching tool for participants that do not consent to video recording.

1.5. CFS Newborn Navigation Services

1.5.1. The Contractor must provide Newborn Navigation services as part of the CFS home visiting program. The purpose of newborn navigation services is to engage newborn families as early as possible in early childhood home visiting programs, community resources linkage, and services.

1.5.2. The Contractor must engage with families during pregnancy or within six (6) months of birth and provide at minimum one (1) voluntary CFS home visit within that timeframe. The visit must include care coordination services for pregnant and newborn families, with priority given to:

1.5.2.1. Family household at or below 250% of the federal poverty

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

level.

1.5.2.2. Single-parent households.

1.5.2.3. First time parents.

1.5.2.4. Families with other children under three (3) years of age.

1.5.2.5. Parents under twenty-five (25) years of age.

1.5.2.6. Parents with limited educational attainment.

1.5.3. The Contractor must make initial contact with families during pregnancy, prior to hospital discharge, or no later than six (6) months following birth to:

1.5.3.1. Schedule the initial home visit and collect intake prescreening information determined by the Department for follow-up; or

1.5.3.2. Provide FRC information to families who decline the home visit.

1.5.4. The Contractor must collect prescreening intake information and enter it into the FCH-DS prior to conducting the home visit.

1.5.5. For families who consent to CFS Newborn Navigation services, the Contractor must provide a Welcome Newborn Family bag, which includes Department-approved information and resources on topics such as:

1.5.5.1. WIC.

1.5.5.2. Medicaid.

1.5.5.3. Supplemental Nutrition Assistance Program (SNAP).

1.5.5.4. FRC services.

1.5.5.5. Lead poisoning prevention.

1.5.5.6. Safe sleep.

1.5.5.7. Infant nutrition.

1.5.5.8. Additional items as identified by the CFS agency and approved by the Department.

1.5.6. The Contractor must ensure enrolled families may receive up to three (3) Newborn Navigator home visits, all of which must occur within (6) months of enrollment.

1.5.7. The initial CFS Newborn Navigation home visit includes a comprehensive Family Needs Assessment and support services,

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

including but not limited to:

1.5.7.1. Maternal depression screening.

1.5.7.2. Developmental screening.

1.5.7.3. Referrals based on identified family needs.

1.5.7.4. Parent education and child safety (e.g., safe sleep, lead poisoning prevention, home safety).

1.5.7.5. Breastfeeding and lactation support.

1.5.7.6. Postpartum planning future pregnancies.

1.5.7.7. Infant feeding and nutrition support.

1.5.7.8. Positive parenting practices, including attachment.

1.5.7.9. Completion of release of information forms for referrals and sharing programmatic data with the Department.

1.5.8. Information and referral support to enroll in HFA or FCU programs. The CFS family support specialist delivering newborn navigation services must work with families to identify ongoing support needs and facilitate referrals to appropriate services and programs.

1.5.9. These include, but are not limited to:

1.5.9.1. Family Resource Center services,

1.5.9.2. Family Check Up,

1.5.9.3. Healthy Families America (HFA),

1.5.9.4. The Supplemental Nutrition Program for Woman, Infants and Children (WIC), and

1.5.9.5. Birth to Three Early Supports and Services.

1.5.10. The Contractor must ensure data related to CFS Newborn Navigation services is collected in the Department owned FCH-DS and reported in coordination with the Department.

1.5.11. The Contractor must collaborate with, build partnerships, and coordinate enrollment planning with local healthcare agencies to promote referrals from healthcare providers to CFS's Newborn Navigation services. Partners and collaboration examples include, but

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

are not limited to:

1.5.11.1. Birthing hospitals.

1.5.11.2. OB/GYN providers.

1.5.11.3. Pediatric healthcare providers.

1.5.11.4. Family medicine and primary care providers.

1.5.11.5. Community Health Centers.

1.5.12. The Contractor must offer satellite health office hours to increase accessibility, as needed.

1.5.13. The Contractor must distribute CFS Newborn Navigation informational and printed materials, as appropriate.

1.5.14. The Contractor must also collaborate and build partnerships with local early care and education programs that serve newborn families to coordinate services, prevent duplication. and enhance care coordination. These programs include, but are not limited to:

1.5.14.1. WIC.

1.5.14.2. Birth to Three Early Supports and Services.

1.5.14.3. Healthy Families America (HFA).

1.5.14.3.1. CFS staff delivering Newborn Navigation services must maintain an active collaboration with HFA, including a clearly defined referral and enrollment process to ensure that families who may be better served through HFA are appropriately connected.

1.5.14.3.2. Pregnant and newborn families identified as having high-risk factors or who meet eligibility criteria for HFA must be engaged and referred or enrolled into HFA through joint home visits and warm handoffs.

1.5.15. The Contractor must work in close collaboration with the Department's Quality Improvement Coordinator to ensure all readiness activities are completed prior to program implementation and support ongoing quality improvement and program oversight. This includes, but is not limited to:

1.5.15.1. Completion of CFS onboarding training.

1.5.15.2. Development and implementation of a family recruitment and

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

enrollment plan.

1.5.15.3. Creation of a health provider and community engagement strategy to align services and strengthen referral pathways.

1.5.15.4. Participation in monthly Community of Practice.

1.5.15.5. Execution of additional activities that support continuous quality improvement.

1.5.15.6. Collection of program data, including administration of a Department-approved post-participant survey, which may include, but is not limited to:

1.5.15.6.1. Assessment of participant knowledge related to community resources, postpartum depression, and newborn care following the initial home visit.

1.5.15.6.2. Evaluation of referrals made and connections established with community resources.

1.5.15.6.3. Measurement of participant satisfaction and likelihood to recommend Newborn Navigation services to others.

1.5.15.6.4. Collection of additional feedback to inform and enhance continuous quality improvement efforts.

1.5.16. The Contractor must collaborate with the Department to provide timely and accurate information related to program evaluation and other data requests necessary to support the Department's goals and reporting requirements. The Contractor must be prepared to share information with various divisions within the Department, including but not limited to:

1.5.16.1. Division of Public Health.

1.5.16.2. Division of Economic Stability.

1.5.16.3. Division of Long Term Supports and Services.

1.6. CFS Assessments and Referrals

1.6.1. The Contractor must actively engage and collaborate with the Department, including the Division for Children, Youth and Families (DCYF), and community partners such as schools, community mental health centers and health clinics to promote referrals into the program and prioritize enrollment of families who may be experiencing

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

circumstances that include, but are not limited to:

1.6.1.1. A previous or current founded or unfounded report to child protective services.

1.6.1.2. Having a child with low birth weight and/or neurodevelopmental delays.

1.6.1.3. A history of, or current, parental or caregiver substance abuse.

1.6.1.4. A history of, or current, mental health concerns affecting the parent, caregiver, or child(ren).

1.6.1.5. Household income at or below 250% of the Federal Poverty Level.

1.6.1.6. A family history of intimate partner violence.

1.6.1.7. Evidence of insecure attachment in the child's early years.

1.6.1.8. Pregnancy; birth of a child within the past twelve (12) months; anticipated birth of an additional child within the next six (6) months; or the birth or expected birth of a child with special healthcare needs.

1.6.1.9. Pregnant participants with prenatal substance use concerns, and families with substance-exposed infants.

1.6.1.10. Pregnant or post-partum participants with a Plan of Safe Care, or those in need of support to develop one.

1.6.1.11. Families with more than one (1) child under the age of three (3).

1.6.1.12. Experiences of physical or social isolation, or any other factors contributing to unhealthy social and emotional outcomes.

1.6.1.13. Home conditions that present a health and/or safety risk to family members.

1.6.1.14. A child or family member with chronic health, behavioral, or developmental conditions that impact parenting.

1.6.1.15. Results from the Ages and Stages Questionnaire (ASQ) or Ages and Stages Questionnaire Social Emotional (ASQ-SE) indicating developmental delays.

1.6.1.16. Families impacted by traumatic events.

1.6.1.17. Families receiving Temporary Assistance to Needy Families (TANF) cash assistance or enrolled in any

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Medicaid program.

1.6.1.18. Engagement with Substance Use Disorder (SUD) services.

1.6.2. The Contractor must complete a comprehensive Family Needs Assessment identified by the Department for each family served utilizing an intake assessment tool as identified by the Department within the first three (3) home visits, in order to identify family strengths, potential risk factors, and current and emerging needs. The Contractor must also conduct reassessments in accordance with the Family Check Up (FCU) model schedule, at a minimum of every six (6) months and again at twelve (12) months, or as otherwise directed by the Department.

1.6.3. The Contractor must utilize additional validated screening tools to support families and ensure budgeting to access tools, which may include, but are not limited to:

1.6.3.1. The Ages and Stages Questionnaires (ASQ-3 and ASQ:SE).

1.6.3.2. Brief System Inventory (BSI)

1.6.3.3. Edinburg Postnatal Depression Scale. (EPDS)

1.6.3.4. Developmental and social-emotional screenings for children ages one (1) month through five (5) years.

1.6.4. The Contractor must report on a monthly basis the number of families who received ASQ-3 and ASQ:SE screenings in a format specified by the Department.

1.6.5. The Contractor must provide expedited warm hand off referrals to appropriate community-based services and other resources that support families within their home communities, which may include, but are not limited to:

1.6.5.1. Childcare Aware of New Hampshire.

1.6.5.2. The Department's District Offices for assistance with program eligibility determinations.

1.6.5.3. Specialized Medicaid services, including Birth to Three Early Supports and Services.

1.6.5.4. The Supplemental Nutrition Program for Women, Infants and Children (WIC), Nutrition programs for breastfeeding

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

support, nutrition education, and access to healthy foods.

1.6.5.5. NH Employment Security.

1.6.5.6. Local school districts.

1.6.5.7. Family violence prevention agencies.

1.6.5.8. Mental health services.

1.6.5.9. Nutrition education and healthy foods.

1.6.5.10. Financial literacy and money management programs.

1.6.5.11. Smoking cessation programs.

1.6.5.12. Independent living skills programs.

1.6.5.13. Adult education programs.

1.6.5.14. Literacy education services.

1.6.5.15. Employment services.

1.6.5.16. Vocational rehabilitation services.

1.7. CFS Family Check Up Services

1.7.1. The Contractor must implement Northwest Prevention Science's Family Check-Up® (FCU) model, including the FCU portal. The Contactor must execute an agreement with Northwest Prevention Science Inc. before accessing the FCU portal or entering data.

1.7.2. The Contractor must provide at least one (1) trained staff per Catchment Area to implement the FCU model, within year one (1) of this Agreement. Training requirements include but are not limited to:

1.7.2.1. Motivational interviewing.

1.7.2.2. Everyday Parenting Curriculum, provided by the Department.

1.7.2.3. CFS onboarding and orientation training, provided by the Department.

1.7.3. The Contractor must work with the Department to support the implementation of the evidence-based FCU model to enhance the Department's CFS home visiting program services.

1.7.4. The Contractor must obtain all materials and resources required by the Department to successfully implement and deliver the FCU model with fidelity, including but not limited to FCU informational flyer and/or brochure available for use with families and referral sources according to the FCU model resources.

1.7.5. The Contractor must provide access to computers, laptops, or other devices to use for video recordings, coding interaction ,

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

downloading, and compiling assessment data. To meet these requirements, the Contractor must ensure the availability of the following specific materials, tools, and resources:

1.7.5.1. Devices with video recording capability to support the following activities:

1.7.5.1.1. Contractor video recording families during family interaction tasks, which are part of the FCU assessment process.

1.7.5.1.2. Contractor video recording family session monthly to share with their Supervisor-Trainers for fidelity checks.

1.7.5.1.3. Supervisor-Trainer's video recording family sessions, supervision, and trainings for the FCU certification process.

1.7.5.2. Devices for families to complete FCU questionnaires on the FCU Portal Website online. Devices must be capable of establishing an internet connection independently or through hotspots. Contractor agrees that while families may use their own devices for the FCU questionnaire, Contractor-provided devices during assessment sessions streamline the process and increase the likelihood of questionnaire completion.

1.7.5.3. Devices must have the following capabilities:

1.7.5.3.1. Able to stand alone on a surface or on a tripod during the video recording process.

1.7.5.3.2. Secure access to prevent unauthorized viewing of confidential information, since providers will leave the room while families complete interaction tasks.

1.7.5.3.3. HIPAA-compliant video storage.

1.7.5.4. Contractor must provide consent forms that must cover consent for the family for video recording, with separate sections or forms addressing Family Interaction Tasks and session recordings. Consents must clearly outline:

1.7.5.4.1. The purpose of videos.

1.7.5.4.2. Who may access them.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

1.7.5.4.3. The timeline for destruction of videos, in accordance with HIPAA retention requirements.

1.7.5.4.4. A statement that consent to video recording is not required for program participation.

1.7.6. The Contractor must ensure all video recording adheres to the requirements outlined in Exhibit E: DHHS Information Security Requirements.

1.7.7. Contractor must provide toys for family interaction tasks, including:

1.7.7.1. Toys appropriate for children ages two (2) to nine (9) years old.

1.7.7.2. A basket large enough to hold toys for younger children.

1.7.7.3. Several puzzles of varying difficulty.

1.7.7.4. Blocks sufficient to build a tower.

1.7.7.5. Paper and colored pens or crayons.

1.7.8. The Contractor must adapt FRC documentation and intake procedures to integrate FCU model activities. This includes the completion of FCU family questionnaires via the FCU portal.

1.7.9. Until all CFS home visitors are trained to deliver FCU, the Contractor's FCU Specialist must enroll families with children ages 0-18 on a voluntary basis. The target population for the FCU model includes, and priority enrollment through an intake process is given to, families referred to CFS who meet the following criteria:

1.7.9.1. Parents or caregivers with a diagnosed mental illness, and/or families with children who have a diagnosed mental illness.

1.7.9.2. Families with a history of child abuse or neglect or at risk of foster care placement.

1.7.9.3. Families with a history of substance use disorders or those in need of substance use disorder treatment.

1.7.9.4. Families with children experiencing low student achievement.

1.7.9.5. All families with children ages 0-5.

1.7.9.6. Families who meet eligibility criteria for Healthy Families America (HFA) will be enrolled in the Department's HFA

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

program when appropriate and available.

1.7.10. The Contractor must ensure that dedicated FCU staff and supervisors implement the model with fidelity and actively engage with the Department in fidelity monitoring and quality assurance activities. Services must include, but are not limited to:

1.7.10.1. Conducting in-person visits with each FCU-enrolled family, including a minimum of three (3) structured intake and assessment sessions, followed by ongoing support and documentation. These sessions must include:

1.7.10.1.1. An Initial Intake Session to establish rapport, gather information about the family system, and identify existing strengths and challenges.

1.7.10.1.2. A Second Assessment Session in which the Contractor assists the family in completing standardized questionnaires and assessment tools to evaluate needs and areas requiring support.

1.7.10.1.3. A Third Assessment Session focused on collaborative goal setting, which must include:

1.7.10.1.4. Development of a service plan incorporating Everyday Parenting sessions;

1.7.10.1.5. Referral and linkage to appropriate community-based resources; and

1.7.10.1.6. Identification and prioritization of the family's goals and service needs.

1.7.10.2. Following the initial session, within 30 business days, the Contractor's FCU Specialist must:

1.7.10.2.1. Conduct follow-up visits using strategies from the Everyday Parenting curriculum, tailored to the results of the family's assessments.

1.7.10.2.2. Ensure accurate and timely documentation in the FCH-DS and FCU online assessment tools, summarizing recommendations and next steps.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

1.7.10.2.3. Review family goals and progress on a quarterly basis in collaboration with the family.

1.7.10.2.4. Assess the family's readiness to change as part of ongoing engagement and service planning.

1.7.11. The Contractor must ensure the following:

1.7.11.1. Provide the Department with access to video-recorded family sessions to support monitoring of implementation and fidelity to the model, upon consent granted by the family in Section 1.7.3.4.

1.7.11.2. Provide the Department with a written policy regarding the use of video recording for the purpose of home visits. The Contractor must ensure all staff and subcontractors sign a confidentiality agreement and adhere to the confidentiality policy outlined in the written policy, and notify staff and subcontractors that violations may result in disciplinary action.

1.7.11.3. Obtain and document individual consent for all video-recorded sessions, including consent to share recordings with the Department for quality improvement purposes.

1.7.11.4. Ensure that appropriate equipment is available and maintained for home visitors to conduct video recordings, such as video camera, tablet, or other device with recording capabilities. The Contractor must ensure that staff does not use personal cell phones or other personal devices to conduct video recording.

1.7.12. The Contractor must only use marketing materials that have been reviewed and approved by the Department.

1.7.13. The Contractor must collaborate with the Department's CFS Program Manager, Quality Improvement and Training Coordinator, and FCU Model experts to ensure all readiness activities are completed prior to program implementation, including but not limited to:

1.7.13.1. Completion of FCU Model training.

1.7.13.2. Completion of Everyday Parenting Curriculum training.

1.7.13.3. Completion of Motivational Interviewing training.

1.7.13.4. Implementation of data collection processes, including a

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Department-approved participant post-survey.

1.7.13.5. Participation in monthly Supervisor Consultation, facilitated by the Department, to support implementation and fidelity to the FCU model.

1.8. Staffing and Training

1.8.1. The Contractor must designate at least one (1) dedicated FCU Specialist position as part of the CFS home visiting program. The FCU Specialist must initially allocate a minimum of 20% of their workload to family enrollment and model implementation activities.

1.8.2. The Contractor must:

1.8.2.1. Ensure that all relevant staff participate in and complete these trainings as scheduled, and maintain documentation of completion for Department review.

1.8.2.2. Ensure that all relevant staff are trained in Motivational Interviewing.

1.8.2.3. Budget for additional staff development opportunities based on the needs of their team, as identified in collaboration with the Department's Quality Improvement and Training Coordinator.

1.8.3. The Contractor must ensure the FCU Specialist transitions to dedicating 100% of their workload to the implementation of the FCU model by June 30, 2027.

1.8.4. The Contractor may elect to designate more than one (1) FCU Specialist to implement the model during the first year of program implementation.

1.8.5. The Contractor must identify additional CFS staff to participate in being trained to implement the FCU model in year two and again in year three of program implementation, to support sustainability and build long-term capacity.

1.8.6. The Contractor must ensure all CFS home visitors complete Department provided training in and utilize the Everyday Parenting Curriculum and CFS Program Manual, which is:

1.8.6.1. The Everyday Parenting Manual, Everyday Parenting: A Professional's Guide to Building Family Management Skills (2nd edition). Available at www.researchpress.com

1.8.7. The Contractor must ensure all CFS home visitors are trained in core CFS competencies and collaborate with the Department's Continuous Quality Improvement (CQI) and training coordinator to imple[illegible] a

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

comprehensive staff training plan that ensures a qualified workforce and identifies training needs and gaps. CFS home visitors must complete Department provided training which will include at a minimum, Everyday Parenting and CFS onboarding training.

1.8.8. The Contractor must identify a qualified supervisor for the FCU staff be trained in the FCU model and be responsible for ensuring adherence to the model's implementation standards. The FCU supervisor must fulfill the following responsibilities:

1.8.8.1. Participate in monthly FCU supervisor consultation meetings, as scheduled by the Department, to enhance supervisory capacity and support fidelity monitoring of the FCU implementation.

1.8.8.2. The Contractor must ensure the FCU supervisor is trained and certified by Northwest Prevention Science as a FCU supervisor. The FCU supervisor must provide implementation support to FCU staff, including but not limited to individualized consultation, direct observation, and performance evaluation, to ensure fidelity to the model.

1.8.9. The Contractor must ensure that both the FCU specialist and FCU supervisor receive training in the Family Check-Up model, Motivational Interviewing, Newborn Navigation Core Training, and Everyday Parenting curriculum, and that they meet the minimum educational qualifications required for their roles.

1.8.10. The Contractor must use the FCU model, Motivational Interviewing and Everyday Parenting curriculum training to support effective implementation.

1.8.11. The Contractor must ensure that all staff, subcontractors, and volunteers undergo the required criminal background checks registry checks, as described in Section 1.12.

1.8.12. If the Contractor provides transportation for individuals served under this Agreement, the Contractor must ensure:

1.8.12.1. The enrolled parent or caregiver must be present for all sessions.

1.8.12.2. All drivers have a valid State Issued and a safe driving record;

1.8.12.2.1. All vehicles are approved by the Contractor and meet applicable safety standards;

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

1.8.12.2.2. Compliance with all applicable local, state, and federal transportation safety rules and standards;

1.8.12.2.3. Proof of valid automobile insurance is provided to the Department that includes bodily injury and property damage in amounts of not less than $100,000 per occurrence and $300,000 aggregate or excess, for all owned, hired, or non-owned vehicles used to provide transportation.

1.8.13. The Contractor must ensure staff complete required training in the principles of family support, maternal and child health, HIPAA as well as the child welfare system, with concentrations in service array and working in multidisciplinary teams.

1.8.14. The Contractor must consistently engage in purposeful staff development activities that support professional growth and improve the quality of services provided. These activities must include, but are not limited to, training and enrichment in the following areas: Skills necessary to understand and respond to the unique needs, strengths, and resources of the families and communities served.

1.8.14.1. The ability to exercise empathy, with an understanding of the complex family dynamics and stressors experienced by parents and caregivers.

1.8.14.2. The use of effective, evidence-informed home visiting practices, including strategies that are grounded in research and adapted to family needs, as well as standards for documentation and reporting.

1.8.15. The Contractor must provide an adequate number of home visitors to implement the CFS program, as approved by the Department. All staffing vacancies, transitions, or changes in personnel assignments must be reported to the Department in a timely manner.

1.8.16. The Contractor must ensure the CFS program director, supervisor, or program managers have:

1.8.16.1. A Bachelor's degree in public health, early childhood, social work, human services administration, or a related field focused on supporting children and families, with four (4) years of experience working with families and children in a social service, home health, or other early childhood program setting, including supervisory experience;

1.8.16.2. An Associate degree with five (5) years of prior experience working with families and children in a social service

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

health, or early childhood program setting, including supervisory experience;

1.8.16.3. Or at a minimum, high school diploma or equivalent with six (6) years of relevant lived and professional experience working with families and children in a social service, home health, or other early childhood program setting, including supervisory responsibilities, and written approval from the Department to fulfill the duties of the position.

1.8.17. The Contractor must ensure CFS Home Visitors have:

1.8.17.1. An Associate degree with four (4) years of prior experience working with families and children in a social service, home health, or other early childhood program setting;

1.8.17.2. Or at a minimum, a high school diploma or equivalent with five (5) years of experience providing services to families in a social service, home health, or other early childhood program setting; and demonstrated lived and professional experience aligned with this role, with written approval from the Department.

1.8.18. The Contractor must ensure the CFS Family Check Up Home Visitor has at a minimum:

1.8.18.1. A Bachelor's degree or higher; and

1.8.18.2. Two (2) years of experience providing services to families in a social service, home health, or other early childhood program setting.

1.8.18.2.1. If a Bachelor's-level staff is not available, the Contractor may recommend qualified team members to perform FCU. A training plan and summary of relevant skills and clinical experience must be submitted with the application and approved by the Department.

1.8.19. The Contractor must ensure all CFS home visitors across all CFS programs are trained in the "Everyday Parenting" curriculum and Motivational Interviewing and adhere to its requirements within six (6) months of program implementation.

1.8.19.1. Although not required, the Contractor may allocate funding to train staff in additional evidence-based early childhood curricula, such as Growing Great Kids or Parents as Teachers.

1.8.20. The Contractor must demonstrate capacity and readiness to be [illegible]d

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

in and implement the Family Check Up model.

1.8.21. Staffing requirements are subject to change, contingent upon the Department's written approval.

1.9. Reporting

1.9.1. The Contractor must submit comprehensive quarterly reports highlighting program activities by the 15th calendar day of the month following the end of each reporting period. The first report is due by October 15, 2026, and must include:

1.9.1.1. The progress in achieving the stated outcomes; and

1.9.1.2. Feedback from families regarding the effectiveness, accessibility, and satisfaction of the services provided through participant surveys or post service delivery interviews.

1.9.2. The Contractor must submit an annual performance report to the Department by July 31st of each year, with the first report due on July 31, 2027, which includes, but is not limited to:

1.9.2.1. A summary of program accomplishments and key activities.

1.9.2.2. Staff training plan for each CFS home visitor.

1.9.2.3. Recommendations for service development, program enhancements, and outcome improvements.

1.9.2.4. Identification of systemic barriers impacting service delivery or access.

1.9.2.5. Results of family satisfaction surveys and analysis of trends.

1.9.3. The Contractor must transmit all data in a secure and encrypted format approved by the Department.

1.9.4. The Contractor must designate an FRC staff member to serve as the primary liaison for all programmatic communication between the Department and the Contractor, including, but not limited to:

1.9.4.1. Clinical updates.

1.9.4.2. Program announcements.

1.9.4.3. Reporting changes, errors, and requests.

1.9.4.4. Contract oversight.

1.9.4.5. Oversight of program operations and compliance

1.9.5. The Contractor must evaluate both the progress of parents and caregivers and the effectiveness of the programs and services provided.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

1.9.6. The Contractor must maintain a comprehensive and confidential Family Service Record for each family, in compliance with all Health Insurance Portability and Accountability Act (HIPAA) Privacy Rules. The Family Service Record must include, but is not limited to:

- 1.9.6.1. Participant names (Parent(s) and Child(ren)).
- 1.9.6.2. Participant DOBs (Parent (s) and Child(ren)).
- 1.9.6.3. Residence.
- 1.9.6.4. Primary language spoken in the home.
- 1.9.6.5. Educational level of parent(s) or guardian(s).
- 1.9.6.6. Digital Resources (phone, laptop, cell).
- 1.9.6.7. Source of referral.
- 1.9.6.8. Referral details and contact information.
- 1.9.6.9. Signed release of information form(s).
- 1.9.6.10. Household income.
- 1.9.6.11. Household size.
- 1.9.6.12. Employment status of parent(s) or guardian(s).
- 1.9.6.13. Access to prenatal and post-partum healthcare.
- 1.9.6.14. Home visits conducted and screening tools completed.
- 1.9.6.15. Topics reviewed during service delivery, including but not limited to:
  - 1.9.6.15.1. Maternal depression screening.
  - 1.9.6.15.2. Planning for future pregnancies.
  - 1.9.6.15.3. Positive parenting practices.
  - 1.9.6.15.4. Breastfeeding/lactation support.
  - 1.9.6.15.5. Nutrition.
  - 1.9.6.15.6. Child health.
  - 1.9.6.15.7. Maternal health and self-care.
  - 1.9.6.15.8. Referrals made for service linkage, including but not limited to:
  - 1.9.6.15.9. Concrete supports (e.g., housing, utilities, transportation).
  - 1.9.6.15.10. Childcare resources.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

1.9.6.15.11. Healthcare access and coordination.

1.9.6.15.12. Community-based supports and services.

1.9.6.15.13. Home visiting programs and service type.

1.9.6.15.14. Discharge date and reason for discharge.

1.9.6.15.15. Completion of post-service surveys.

1.9.6.15.16. Family needs assessment.

1.9.6.15.17. Child/Family Individualized Service Plan (ISP).

1.9.6.15.18. Documentation of prenatal and postpartum healthcare received.

1.9.6.15.19. Medicaid and other health insurance coverage.

1.9.6.15.20. Linkages with community-based resources.

1.9.6.16. Receipt of public benefits, including but not limited to:

1.9.6.16.1. SNAP.

1.9.6.16.2. New Hampshire Child Care Scholarship.

1.9.6.16.3. Medicaid.

1.9.6.16.4. Social Security Disability Insurance (SSDI).

1.9.6.16.5. Supplemental Security Income (SSI).

1.9.6.16.6. Temporary Assistance for Needy Families (TANF).

1.9.6.16.7. Special Supplemental Nutrition Program for WIC.

1.9.6.17. Participant service data, including but not limited to:

1.9.6.17.1. Date of service.

1.9.6.17.2. Participants present during service delivery.

1.9.6.17.3. Type of service provided and topics reviewed.

1.10. Performance Measures

1.10.1. The Contractor must provide performance data in a format and at a frequency specified by the Department. The following performance measures will be used to evaluate program effectiveness:

1.10.1.1. A minimum of 80% of participants must report a favorable

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

rating on satisfaction surveys administered by the Contractor.

1.10.1.2. At least 70% of referred families must enroll in services within 30 days of referral.

1.10.1.3. A minimum of 65% of enrolled families must complete the full service cycle as defined by the program model.

1.10.2. The Contractor must demonstrate annual improvement in outreach to high-risk populations, as measured by year-over-year increases in engagement rates.

1.10.3. The Contractor must submit data to support evaluation of long-term outcomes, including family stability, child health indicators, and service retention, as defined by the Department.

1.11. Meetings, Collaboration, and Data Sharing

1.11.1. The Contractor must participate in regular performance review meetings with the Department and peer providers to analyze data, share best practices, and identify areas for improvement.

1.11.2. The Contractor must collect and transmit all required data, including client-level demographic, service utilization, and outcome data, in a secure format specified by the Department.

1.11.3. The Contractor must participate in monthly check-in meetings and Communities of Practice (CoP) for the Department's Comprehensive Family Support (CFS) home visiting program, as scheduled by the Department. CoPs are structured, recurring gatherings of professionals and stakeholders involved in CFS to share best practices, address challenges, and support continuous quality improvement.

1.11.4. The Contractor must participate in monthly meetings with the Department, or as otherwise requested by the Department.

1.11.5. The Contractor may be required to participate in on-site program and file reviews conducted by the Department, as requested.

1.11.6. The Contractor must participate in monthly fidelity reviews of family sessions with the Department for the Family Check Up model.

1.11.7. The Contractor may be required to facilitate annual file reviews conducted by the Department, or as otherwise requested, which may

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

include, but are not limited to:

1.11.7.1. Compliance and documentation standards.

1.11.7.2. Service Delivery alignment and model fidelity.

1.11.7.3. Verification of data entry and reporting accuracy.

1.11.8. The Contractor must ensure Family Service Records are accurately summarized and entered into the Department's Family and Community Health Data System (FCH-DS) in real time and must comply with the confidentiality provisions of RSA 170-G:8-a.

1.11.9. The Contractor must provide the Department with a list of staff (End Users, as defined in Exhibit D) who will be responsible for entering Family Service Record data into the FCH-DS.

1.11.10. The Contractor must notify the Department immediately, and no more than 24 hours of staff changes, to ensure access to the FCH-DS is removed in a timely manner.

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

1.11.12. The Contractor must utilize the Department's closed loop referral system, at an agreed upon start date, whenever applicable to the services they provide for referrals between health and/or human service providers within New Hampshire for referral management and client care coordination. Utilization includes inputting information and data as necessary into the Department's referral solution as part of the NH Care Connections Network to facilitate referrals to participating providers, signing required Network Participation Agreement(s), and obtaining a participant specific consent for services.

1.11.13. The Contractor must utilize the Department's admission, discharge, transfer, and shared care insights solution whenever applicable to the services they provide for client care coordination and management between health providers within New Hampshire. Utilization includes inputting information and data as necessary into the Department's admission, discharge, transfer, and shared care insights platform as part of the NH Care Connections Network to facilitate referrals to participating providers and signing required Participation Agreement(s) for the admission, discharge, transfer, and shared care insights solution

1.11.13.1. The Department's contracts with the closed loop referral and admission, discharge, and transfer vendors incorporate the costs of developing and maintaining the standards-based interface from which the Contractor may

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

choose to configure their systems to communicate securely with the Department's NH Care Connections Network solutions. The Contractor may choose to interface with the Department's closed loop referral and/or the admission discharge transfer solution utilizing a Smart on FHIR or HL-7 standard interface process to connect individuals to health and social service providers. The costs for the Contractor's system or team to develop or utilize the standard Smart on FHIR or HL-7 based interface are the sole responsibility of the Contractor.

1.12. Background Checks

1.12.1. Prior to permitting any individual to provide services under this Agreement, the Contractor must ensure that said individual has undergone:

1.12.1.1. A criminal background check, at the Contractor's expense, and has no convictions for crimes that represent evidence of behavior that could endanger individuals served under this Agreement;

1.12.1.2. A name search of the Department's Bureau of Adult and Aging Services (BAAS) State Registry, pursuant to RSA 161-F:49, with results indicating no evidence of behavior that could endanger individuals served under this Agreement; and

1.12.1.3. A name search of the Department's DCYF Central Registry pursuant to RSA 169-C:35, with results indicating no evidence of behavior that could endanger individuals served under this Agreement.

1.13. Confidential Data

1.13.1. The Contractor must meet all information security and privacy requirements as set by the Department and in accordance with the Department's Information Security Requirements Exhibit as referenced below.

1.13.2. The Contractor must ensure any individuals involved in delivering services through this Agreement contract 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 Information Security Requirements Exhibit. The Contractor must ensure said individuals have a justifiable business need to access confidential data. The Contractor must provide attestations upon

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Department request.

1.14. Privacy Impact Assessment

1.14.1. Upon request, the Contractor must allow and assist the Department in conducting a Privacy Impact Assessment (PIA) of its system(s)/application(s)/web portal(s)/website(s) or Department system(s)/application(s)/web portal(s)/website(s) hosted by the Contractor, if Personally Identifiable Information (PII) is collected, used, accessed, shared, or stored. To conduct the PIA the Contractor must provide the Department access to applicable systems and documentation sufficient to allow the Department to assess, at minimum, the following:

1.14.1.1. How PII is gathered and stored;

1.14.1.2. Who will have access to PII;

1.14.1.3. How PII will be used in the system;

1.14.1.4. How participant consent will be achieved and revoked; and

1.14.1.5. Privacy practices.

1.14.2. 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.

1.15. Department Owned Devices, Systems and Network Usage

1.15.1. Contractor End Users, defined in the Department's Information Security Requirements Exhibit that is incorporated into this Agreement, authorized by the Department's Information Security Office to use a Department issued device (e.g. computer, tablet, mobile telephone) or access the Department network in the fulfilment of this Agreement, each must:

1.15.1.1. Sign and abide by applicable Department and New Hampshire Department of Information Technology (NH DoIT) use agreements, policies, standards, procedures and guidelines, and complete applicable trainings as required;

1.15.1.2. Use the information that they have permission to access solely for conducting official Department business and agree that all other use or access is strictly forbidden including, but not limited, to personal or other private and non-Department use, and that at no time shall they access or attempt to access information without having the express authority of the Department to do so;

1.15.1.3. Not access or attempt to access information in a r

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

inconsistent with the approved policies, procedures, and/or agreement relating to system entry/access;

1.15.1.4. Not copy, share, distribute, sub-license, modify, reverse engineer, rent, or sell software licensed, developed, or being evaluated by the Department, and at all times must use utmost care to protect and keep such software strictly confidential in accordance with the license or any other agreement executed by the Department;

1.15.1.5. Only use equipment, software, or subscription(s) authorized by the Department's Information Security Office or designee;

1.15.1.6. Not install non-standard software on any Department equipment unless authorized by the Department's Information Security Office or designee;

1.15.1.7. Agree that email and other electronic communication messages created, sent, and received on a Department-issued email system are the property of the Department of New Hampshire and to be used for business purposes only. Email is defined as "internal email systems" or "Department-funded email systems."

1.15.1.8. Agree that use of email must follow Department and NH DoIT policies, standards, and/or guidelines; and

1.15.1.9. Agree when utilizing the Department's email system:

1.15.1.9.1. To only use a Department email address assigned to them with a "@ affiliate.DHHS.NH.Gov".

1.15.1.9.2. Include in the signature lines information identifying the End User as a non-Department workforce member; and

1.15.1.9.3. Ensure the following confidentiality notice is embedded underneath the signature line:

CONFIDENTIALITY NOTICE: "This message may contain information that is privileged and confidential and is intended only for the use of the individual(s) to whom it is addressed. If you receive this message in error, please notify the sender immediately and delete this electronic message and any attachments from your system. Thank you for your cooperation."

1.15.1.10. Contractor End Users with a Department issued email, access or potential access to Confidential Data, a[illegible] a

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

workspace in a Department building/facility, must:

1.15.1.10.1. Complete the Department's Annual Information Security & Compliance Awareness Training prior to accessing, viewing, handling, hearing, or transmitting Department Data or Confidential Data.

1.15.1.10.2. Sign the Department's Business Use and Confidentiality Agreement and Asset Use Agreement, and the NH DoIT Department wide Computer Use Agreement upon execution of the Agreement and annually thereafter.

1.15.1.10.3. Only access the Department's intranet to view the Department's Policies and Procedures and Information Security webpages.

1.15.1.10.4. Contractor agrees, if any End User is found to be in violation of any of the above terms and conditions, said End User may face removal from the Agreement, and/or criminal and/or civil prosecution, if the act constitutes a violation of law.

1.15.1.10.5. Contractor agrees to notify the Department a minimum of three business days prior to any upcoming transfers or terminations of End Users who possess Department credentials and/or badges or who have system privileges. If End Users who possess Department credentials and/or badges or who have system privileges resign or are dismissed without advance notice, the Contractor agrees to notify the Department's Information Security Office or designee immediately.

1.16. Contract End-of-Life Transition Services

1.16.1. General Requirements

1.16.1.1. If applicable, upon early termination or expiration of the Agreement the parties agree to cooperate in good faith to effectuate a secure transition of the services ("Transition Services") from the Contractor to the Department and, if applicable, the new Contractor ("Recipient") engaged by the Department to assume the services. Ninety (90) days prior to the end-of the contract or unless otherwise specified by the

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Department, the Contractor must begin working with the Department and if applicable, the Recipient to develop a Data Transition Plan (DTP). The Department shall provide the DTP template to the Contractor.

1.16.1.2. The Contractor must assist the Recipient, in connection with the transition from the performance of Services by the Contractor and its End Users 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 any 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 and assistance to any third-party consultants engaged by Recipient in connection with the Transition Services.

1.16.1.3. If a system, database, hardware, software, and/or software licenses (Tools) was purchased or created to manage, track, and/or store Department Data in relationship to this contract said Tools will be inventoried and returned to the Department, along with the inventory document, once transition of Department data is complete. The internal planning of the Transition Services by the Contractor and its End Users shall be provided to the Department and if applicable the Recipient in a timely manner. Any such Transition Services shall be deemed to be Services for purposes of this Agreement.

1.16.1.4. In the event the data Transition extend beyond the end of the Agreement, the Contractor agrees that the Information Security Requirements, and if applicable, the Department's Business Associate Agreement terms and conditions remain in effect until the Data Transition is accepted as complete by the Department.

1.16.1.5. In the event the Contractor has comingled Department Data and the destruction or Transition of said data is not feasible, the Department and Contractor will jointly evaluate regulatory and professional standards for retention requirements prior to destruction, refer to the terms and conditions of the Department's DHHS Information Security Requirements Exhibit.

1.17. Completion of Transition Services

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

1.17.1. Each service or transition phase shall be deemed completed (and the transition process finalized) at the end of fifteen (15) business days after the product, resulting from the Service, is delivered to the Department and/or the Recipient in accordance with the mutually agreed upon Transition plan, unless within said fifteen (15) business day term the Contractor notifies the Department of an issue requiring additional time to complete said product.

1.17.2. Once all parties agree the data has been migrated the Contractor will have thirty (30) days to destroy the data per the terms and conditions of the Department's Information Security Requirements Exhibit.

1.18. Disagreement over Transition Services Results

1.18.1. In the event the Department is not satisfied with the results of the Transition Service, the Department shall notify the Contractor, in writing, stating the reason for the lack of satisfaction within fifteen (15) business days of the final product or at any time during the data Transition process. The Parties shall discuss the actions to be taken to resolve the disagreement or issue. If an agreement is not reached, at any time the Department shall be entitled to initiate actions in accordance with the Agreement.

2. Exhibits Incorporated

2.1. The Contractor must comply with all Exhibit D Federal Requirements, which are attached hereto and incorporated by reference herein.

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

2.3. 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 F, Business Associate Agreement, which has been executed by the parties.

3. Additional Terms

3.1. Impacts Resulting from Court Orders or Legislative Changes

3.1.1. 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.

3.2. Federal Civil Rights Laws Compliance: Culturally and Linguistically App e

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Programs and Services

3.2.1. The Contractor must submit:

3.2.1.1. A detailed description of the language assistance services, within ten (10) days of the Effective Date of the Agreement, 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.

3.2.1.2. A written attestation, within forty-five (45) days of the Effective Date of the Agreement and annually thereafter, that all personnel involved the provision of services to individuals under this Agreement have completed, within the last twelve (12) months, the Contractor Required Training Video on Civil Rights-related Provisions in DHHS Procurement Processes, which is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors); and

3.2.1.3. The Department's Federal Civil Rights Compliance Checklist within ten (10) days of the Effective Date of the Agreement. The Federal Civil Rights Compliance Checklist must have been completed within the last twelve (12) months and is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors).

3.3. Credits and Copyright Ownership

3.3.1. 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."

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

3.3.3. The Department must retain copyright ownership for any and all original materials produced, including, but not limited to reports, protocols,

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

guidelines, brochures, posters, and resource directories.

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

3.4. Operation of Facilities: Compliance with Laws and Regulations

3.4.1. 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.

4. Records

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

4.1.1. 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.

4.1.2. 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.

4.2. 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.

4.3. If, upon further review, the Department must disallow any expenses cla y

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

the Contractor as costs hereunder, the Department retains the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Payment Terms

1. This Agreement is funded by:
   1.1. 73% Federal funds, TEMPORARY ASSITANCVE FOR NEEDFY FAMILIES, as awarded on choose a date December 16, 2025 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, , ALN 93.558, FAIN 2601NHTANF.
   1.2. 16% Federal funds, SOCIAL SERVICES BLOCK GRANT, as awarded on choose a date oCTOBER 1, 2023 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, , ALN 93.667, FAIN 2501NHSOSR
   1.3. 11% General funds.
2. For the purposes of this Agreement the Department has identified:
   2.1. The Contractor as a Subrecipient, based on criteria specified in 2 CFR §200.331.
   2.2. The Agreement as NON-R&D, in accordance with 2 CFR §200.332.
   2.3. The Indirect Cost Rate for this Agreement in the attached Budget Sheet(s).
3. Payment shall be on a cost reimbursement basis for actual allowable expenditures incurred under this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1 Budget.
4. The Contractor shall submit an invoice 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:
   4.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.
   4.2. Is submitted in a format as provided by or otherwise acceptable to the Department.
   4.3. Identifies and requests payment in accordance with Section 3 above.
   4.4. Includes supporting documentation with each invoice, including, but not limited to, proof of expenditures, receipts for purchases, time sheets, and payroll records, as applicable.
   4.5. Is completed, dated and returned to the Department to initiate payment.
   4.6. Is assigned an electronic signature and is emailed to BFAinvoices@dhhs.nh.gov or mailed to:

   Financial Manager
   Department of Health and Human Services
   129 Pleasant Street

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Concord, NH 03301

5. The Department shall make payments to the Contractor within thirty (30) calendar days of receipt of each invoice and any required supporting documentation, subsequent to approval of the submitted invoice.

6. The final invoice and any required supporting documentation shall be due to the Department no later than forty (40) calendar days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.

7. Notwithstanding Paragraph 18 of the General Provisions Form P-37, changes limited to adjusting direct and indirect cost 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.

8. If applicable, the Contractor must notify the Department of any revisions, updates, or extensions to the Contractor's federal negotiated indirect cost rate agreement (NICRA) by submitting a copy of the revised NICRA to the Department within five (5) business days of the Contractor's receipt of the NICRA from the cognizant federal agency.

9. Audits

9.1. The Contractor must email an annual audit to dhhs.act@dhhs.nh.gov if any of the following conditions exist:

9.1.1. Condition A - The Contractor is subject to a Single Audit pursuant to 2 CFR 200.501 Audit Requirements.

9.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b.

9.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

9.2. If Condition A exists, the Contractor must 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.

9.2.1. The Contractor must submit a copy of any Single Audit findings and any associated corrective action plans. The Contractor

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

must submit quarterly progress reports on the status of implementation of the corrective action plan.

9.3. If Condition B or Condition C exists, the Contractor must submit an annual financial audit performed by an independent CPA within 120 days after the close of the Contractor's fiscal year.

9.4. The Contractor, regardless of the funding source and/or whether Conditions A, B, or C exist, may be required to submit annual financial audits performed by an independent CPA upon request by the Department.

9.5. 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 must 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, within sixty (60) days.

10. If applicable, the Contractor must request disposition instructions from the Department for any equipment, based on 2 CFR 200.313, purchased using funds provided under this Agreement.

Docusign Envelope ID: 1C435A88-3CC5-8ABA-82B8-7F510F10F94E

Exhibit C-1 Budget

New Hampshire Department of Health and Human Services			
Contractor Name:	*Community Action Partnership of Strafford County*		
Budget Request for:	*Comprehensive Family Services (CFS)*		
Budget Period:	*SFYS 2027-2029*		
Indirect Cost Rate (if applicable)	15.90%		
Line Item	**Program Cost - Funded by DHHS - SFY 27**	**Program Cost - Funded by DHHS - SFY 28**	**Program Cost - Funded by DHHS - SFY 29**
1. Salary & Wages	$216,230	$239,242	$246,420
2. Fringe Benefits	$46,110	$47,032	$47,126
3. Consultants	$2,200	$450	$450
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0	$0	$0
5.(a) Supplies - Educational	$2,000	$500	$375
5.(b) Supplies - Lab	$0	$0	$0
5.(c) Supplies - Pharmacy	$0	$0	$0
5.(d) Supplies - Medical	$0	$0	$0
5.(e) Supplies - Office	$6,000	$2,000	$1,742
6. Travel	$6,025	$5,750	$5,750
7. Software	$3,500	$0	$0
8. (a) Other - Marketing/Communications	$4,000	$506	$250
8. (b) Other - Education and Training	$8,540	$3,360	$3,500
8. (c) Other - Other (specify below)	$0	$0	$0
Family Check Up/Online Training Portal (per staff)	$1,680	$1,870	$1,560
	$0	$0	$0
Other (please specify) Telephone/Internet	$7,000	$7,086	$7,130
Other (please specify) Occupancy	$1,680	$15,150	$15,302
Other (please specify) Insurance	$0	$1,000	$1,000
9. Subrecipient Contracts	$15,000	$0	$0
	$0	$0	$0
Total Direct Costs	$319,285	$323,946	$330,604
Total Indirect Costs	$50,766	$51,507	$52,566
Subtotals	$370,051	$375,453	$383,170
		TOTAL	**$ 1,128,674**

DS

Contractor Initials: BAP

Date: 5/11/2026

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

SECTION A: CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Contractor 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 CONTRACTORS 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 contractors (and by inference, sub- contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a contractor (and by inference, 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 Agreement 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 Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, 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 Contractor 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 Contractor'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 Contractor'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 Agreement 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 Agreement, 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 ion;

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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 contract officer on whose contract activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected Agreement;

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 Contractor may insert in the space provided below the site(s) for the performance of work done in connection with the specific Agreement.

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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

SECTION B: CERTIFICATION REGARDING LOBBYING

The Contractor 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 Byrd Anti-Lobbying Amendment (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, loan, or cooperative agreement (and by specific mention 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, loan, or cooperative agreement (and by specific mention sub- contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, see https://omb.report/icr/201009-0348-022/doc/20388401

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, 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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

SECTION C: 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 12689 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 Agreement, 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 Agreement 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 https://www.govinfo.gov/app/details/CFR-2004-title45-vol1/CFR-2004-title45-vol1-part76/context.

6. The prospective primary participant agrees by submitting this Agreement 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) https://www.ecfr.gov/current/title-22/chapter-V/part-513.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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 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 (Agreement) 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 (Agreement), 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 (Agreement).

14. The prospective lower tier participant further agrees by submitting this proposal (Agreement) 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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

SECTION D: CERTIFICATION OF COMPLIANCE WITH FEDERAL REQUIREMENTS

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:

The Contractor will comply, and will require any subcontractors to comply, with any applicable federal requirements, which may include but are not limited to:

1. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR 200).
2. 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;
3. 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;
4. 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);
5. 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;
6. 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;
7. 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;
8. 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;
9. 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;
10. 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.
11. The Clean Air Act (42 U.S.C. 7401-7671q.) which seeks to protect human health and the environment from emissions that pollute ambient, or outdoor, air.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

12. The Clean Water Act (33 U.S.C. 1251-1387) which establishes the basic structure for regulating discharges of pollutants into the waters of the United States and regulating quality standards for surface waters.
13. Civilian Agency Acquisition Council and the Defense Acquisition Regulations Council (Councils) (41 U.S.C. 1908) which establishes administrative, contractual, or legal remedies in instances where contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate.
14. Contract Work Hours and Safety Standards Act (40 U.S.C. 3701–3708) which establishes that all contracts awarded by the non-Federal entity in excess of $100,000 that involve the employment of mechanics or laborers must include a provision for compliance with 40 U.S.C. 3702 and 3704, as supplemented by Department of Labor regulations (29 CFR Part 5).
15. Rights to Inventions Made Under a Contract or Agreement 37 CFR § 401.2 (a) which establishes the recipient or subrecipient wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that “funding agreement,” the recipient or subrecipient must comply with the requirements of 37 CFR Part 401, “Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements,” and any implementing regulations issued by the awarding agency.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, or government wide suspension or debarment.

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 Agreement, the Contractor agrees to comply with the provisions indicated above.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

SECTION E: 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 Agreement, 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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

SECTION F: 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 $30,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $30,000 or more. If the initial award is below $30,000 but subsequent grant modifications result in a total award equal to or over $30,000, 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 sub award 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 Entity Identifier (SAM UEI; DUNS#)
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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

FORM A

As the Grantee 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: _____

Contractor Name: Community Action Partnership of Strafford County

5/7/2026
_____
Date:

DocuSigned by:
Betsey Andrews Parker
85195ADCCB0646E...
_____
Name: Betsey Andrews Parker
Title: CEO

New Hampshire Department of Health and Human Services

Exhibit E

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

Contractor Initials DS BAP

Date 5/7/2026

or misplacement of hardcopy documents, and misrouting of physical or electronic 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.

Contractor Initials DS BAP

Date 5/7/2026

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, antihacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a whole, must have aggressive intrusion-detection and firewall protection.

Contractor Initials DS BAP

Date 5/7/2026

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 BAP

Date 5/7/2026

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

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;

Contractor Initials DS BAP

Date 5/7/2026

4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and
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

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement (Form P-37) ("Agreement"), and any of its agents who receive use or have access to protected health information (PHI), as defined herein, shall be referred to as the "Business Associate." The State of New Hampshire, Department of Health and Human Services, "Department" shall be referred to as the "Covered Entity," The Contractor and the Department are collectively referred to as "the parties."

The parties agree, to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191, the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162, and 164 (HIPAA), provisions of the HITECH Act, Title XIII, Subtitle D, Parts 1&2 of the American Recovery and Reinvestment Act of 2009, 42 USC 17934, et sec., applicable to business associates, and as applicable, to be bound by the provisions of the Confidentiality of Substance Use Disorder Patient Records, 42 USC s. 290 dd-2, 42 CFR Part 2, (Part 2), as any of these laws and regulations may be amended from time to time.

(1) Definitions

a. The following terms shall have the same meaning as defined in HIPAA, the HITECH Act, and Part 2, as they may be amended from time to time:

"Breach," "Designated Record Set," "Data Aggregation," Designated Record Set," "Health Care Operations," "HITECH Act," "Individual," "Privacy Rule," "Required by law," "Security Rule," and "Secretary."

b. Business Associate Agreement, (BAA) means the Business Associate Agreement that includes privacy and confidentiality requirements of the Business Associate working with PHI and as applicable, Part 2 record(s) on behalf of the Covered Entity under the Agreement.

c. "Constructively Identifiable," means there is a reasonable basis to believe that the information could be used, alone or in combination with other reasonably available information, by an anticipated recipient to identify an individual who is a subject of the information.

d. "Protected Health Information" ("PHI") as used in the Agreement and the BAA, means protected health information defined in HIPAA 45 CFR 160.103, limited to the information created, received, or used by Business Associate from or on behalf of Covered Entity, and includes any Part 2 records, if applicable, as defined below.

e. "Part 2 record" means any patient "Record," relating to a "Patient," and "Patient Identifying Information," as defined in 42 CFR Part 2.11.

f. "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.

(2) Business Associate Use and Disclosure of Protected Health Information

a. Business Associate shall not use, disclose, maintain, store, or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under the Agreement. Further, Business Associate, including bu

DS

Contractor Initials BAP

Date 5/7/2026

limited to all its directors, officers, employees, and agents, shall protect any PHI as required by HIPPA and 42 CFR Part 2, and not use, disclose, maintain, store, or transmit PHI in any manner that would constitute a violation of HIPAA or 42 CFR Part 2.

b. Business Associate may use or disclose PHI, as applicable:

I. For the proper management and administration of the Business Associate;

II. As required by law, according to the terms set forth in paragraph c. and d. below;

III. According to the HIPAA minimum necessary standard;

IV. For data aggregation purposes for the health care operations of the Covered Entity; and

V. Data that is de-identified or aggregated and remains constructively identifiable may not be used for any purpose outside the performance of the Agreement.

c. To the extent Business Associate is permitted under the BAA or the Agreement to disclose PHI to any third party or subcontractor prior to making any disclosure, the Business Associate must obtain, a business associate agreement or other agreement with the third party or subcontractor, that complies with HIPAA and ensures that all requirements and restrictions placed on the Business Associate as part of this BAA with the Covered Entity, are included in those business associate agreements with the third party or subcontractor.

d. The Business Associate shall not, disclose any PHI in response to a request or demand for disclosure, such as by a subpoena or court order, on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity can determine how to best protect the PHI. If Covered Entity objects to the disclosure, the Business Associate agrees to refrain from disclosing the PHI and shall cooperate with the Covered Entity in any effort the Covered Entity undertakes to contest the request for disclosure, subpoena, or other legal process. If applicable relating to Part 2 records, the Business Associate shall resist any efforts to access part 2 records in any judicial proceeding.

(3) Obligations and Activities of Business Associate

a. Business Associate shall implement appropriate safeguards to prevent unauthorized use or disclosure of all PHI in accordance with HIPAA Privacy Rule and Security Rule with regard to electronic PHI, and Part 2, as applicable.

b. The Business Associate shall immediately notify the Covered Entity's Privacy Officer at the following email address, DHHSPrivacyOfficer@dhhs.nh.gov after the Business Associate has determined that any use or disclosure not provided for by its contract, including any known or suspected privacy or security incident or breach has occurred potentially exposing or compromising the PHI. This includes inadvertent or accidental uses or disclosures or breaches of unsecured protected health information.

c. In the event of a breach, the Business Associate shall comply with the terms of this Business Associate Agreement, all applicable state and federal laws and regulations and any additional requirements of the Agreement.

d. The Business Associate shall perform a risk assessment, based on the information available at the time it becomes aware of any known or suspected priva

DS

BAP

Contractor Initials

5/7/2026

Date

security breach as described above and communicate the risk assessment to the Covered Entity. The risk assessment shall include, but not be limited to:

I. The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;

II. The unauthorized person who accessed, used, disclosed, or received the protected health information;

III. Whether the protected health information was actually acquired or viewed; and

IV. How the risk of loss of confidentiality to the protected health information has been mitigated.

e. The Business Associate shall complete a risk assessment report at the conclusion of its incident or breach investigation and provide the findings in a written report to the Covered Entity as soon as practicable after the conclusion of the Business Associate's investigation.

f. 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 US Secretary of Health and Human Services for purposes of determining the Business Associate's and the Covered Entity's compliance with HIPAA and the Privacy and Security Rule, and Part 2, if applicable.

g. Business Associate shall require all of its business associates that receive, use or have access to PHI under the BAA to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein.

h. Within ten (10) 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 BAA and the Agreement.

i. 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.

j. 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.

k. Business Associate shall document any disclosures of PHI and information related to any 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.

l. 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 P

DS
BAP
Contractor Initials

5/7/2026
Date

accordance with 45 CFR Section 164.528.

m. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within five (5) 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.

n. Within thirty (30) 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-ups of such PHI in any form or platform.

VI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, or if retention is governed by state or federal law, 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 as long as the Business 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 post a current version of the Notice of the Privacy Practices on the Covered Entity's website:

https://www.dhhs.nh.gov/oos/hipaa/publications.htm in accordance with 45 CFR Section 164.520.

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 BAA, 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 of Agreement for Cause

a. In addition to the General Provisions (P-37) of the Agreement, the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a material breach by Business Associate of the Business Associate Agreement. 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.

(6) Miscellaneous

a. Definitions, Laws, and Regulatory References. All laws and regulations

DS
BAP
Contractor Initials

5/7/2026
Date

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

herein, shall refer to those laws and regulations as amended from time to time. A reference in the Agreement, as amended to include this Business Associate Agreement, to a Section in HIPAA or 42 Part 2, means the Section as in effect or as amended.

b. **Change in law** - Covered Entity and Business Associate agree to take such action as is necessary from time to time for the Covered Entity and/or Business Associate to comply with the changes in the requirements of HIPAA, 42 CFR Part 2 other 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 BAA and the Agreement shall be resolved to permit Covered Entity and the Business Associate to comply with HIPAA and 42 CFR Part 2.

e. **Segregation** - If any term or condition of this BAA 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 BAA are declared severable.

f. **Survival** - Provisions in this BAA regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the BAA in section (3) g. and (3) n.l., and the defense and indemnification provisions of the General Provisions (P-37) of the Agreement, shall survive the termination of the BAA.

IN WITNESS WHEREOF, the parties hereto have duly executed this Business Associate Agreement.

Department of Health and Human Services	Community Action Partnership of Strafford County
The State	Name of the Contractor
DocuSigned by: Iain Watt D778BB63F9704C7...	DocuSigned by: Betsey Andrews Parker 85195ADCCB0646E...
Signature of Authorized Representative	Signature of Authorized Representative
Iain Watt	Betsey Andrews Parker
Name of Authorized Representative	Name of Authorized Representative
Director - DPH	CEO
Title of Authorized Representative	Title of Authorized Representative
5/7/2026	5/7/2026
Date	Date

Contractor Initials DS BAP

Date 5/7/2026

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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: **0007900344**

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 6th day of April A.D. 2026.

David M. Scanlan
Secretary of State

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

CERTIFICATE OF AUTHORITY

I, _____Steve Trozinski _____, hereby certify that:
(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Treasurer/Officer of Community Action Partnership of Strafford County_____.
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on ___November 19, __, 2025____, at which a quorum of the Directors/shareholders were present and voting.
(Date)

VOTED: That _Betsey Andrews Parker, Chief Executive Officer, Jamie Swan, Chief Program Officer, and Leslie Craigen, Chief Finance Officer is duly authorized on behalf of 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 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 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: 4/7/26

Signature of Elected Officer
Name: Steve Trozinski
Title: Board Treasurer

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 11/03/2025

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	

INSURED	INSURER(S) AFFORDING COVERAGE	NAIC #
Community Action Partnership of Strafford County 577 Central St, Ste 10 Dover 03820	INSURER A : Hanover Insurance Company	22292
	INSURER B : Eastern Alliance	10724
	INSURER C : Philadelphia Indemnity	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** 25-26 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 [ ] LOC [ ] OTHER:			ZHVA192135 12	07/01/2025	07/01/2026	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	07/01/2025	07/01/2026	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) Medical Payments	$ 1,000,000 $ $ $ $ 5,000
A	[X] UMBRELLA LIAB [X] OCCUR EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [X] RETENTION $ NIL			UHVA192136	07/01/2025	07/01/2026	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		01000011379-2025	07/01/2025	07/01/2026	[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	Management Liability with Crime			PHSD1807749	07/01/2025	07/01/2026	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 & Human Services
129 Pleasant Street
Concord NH 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

© 1988-2015 ACORD CORPORATION. All rights reserved.

ACORD 25 (2016/03) **The ACORD name and logo are registered marks of ACORD**

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

NONPROFIT COVER SHEET

A. Entity Name: Community Action Partnership of Strafford County

B. Entity's Contact Information:

For Records Requests (e.g., resumes of key personnel; audited financial statements):

Name / Phone / Email: Betsey Andrews Parker, 603-435-2500, bandrewsparker@StraffordCAP.org

Person responsible for Accuracy and Completeness of information provided:

Name: Betsey Andrews Parker Title: CEO

Signature: Betsey Andrews Parker

C. List Board of Directors and Affiliations

Name (Identify any additional role(s) in Parentheses) E.g., John Doe (President)	Affiliations
Terry Jarvis	Town Of New Durham, Elected Official
Katrin Kasper	Town Of Lee, Elected Official
Sarah Kuhl	Banking Representative
Steve Trozinski	Community Member Dover, NH
Nate Bernitz	UNH Cooperative Extension
Heather Blumenfeld	Triangle Club
Bekki Carlson	Childcare
Anthony Carr	Legal Representative
Leah Chrouser	NHPD
Robert Harrington	MGB/WDH
Jessica Lamontagne	Elected State Representative
Brandi McKay Berry	Town of Barrington, Elected official
Ian Oneail	Banking Representative
Roxanne Osgood	Rochester Housing Authority
Rich Plourde	Revo Casino
James Rathbun	Community Member Farmington, NH
Tom Southworth	Elected State Representative
Mark Toussaint	City of Rochester, Elected Official
Christi-Anne Walter	Community Member
Jeff Warach	City of Dover, Elected Official
Robert Warach	City of Dover, Elected Official

D. List Key Personnel (Resumes must be available upon request to the person(s) listed in section B or may be attached**):**

Name	Role	Annual Salary	Amount Paid From This Contract

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Renee Couture	Family Services Director	$87,174	$28,768
Danielle Bah	Home Visiting Manager	$61,915	$29,100
Melissa Hogan	CFS Home Visitor	$48,697	$43,827
Brittney Pelletier	CFS Home Visitor	$48,075	$43,268
Arianna Newman	Newborn Navigator/ FCU Specialist	$55,724	$20,061

DISCLOSURE OF LEGAL ACTIVITIES INVOLVING THE STATE OF NEW HAMPSHIRE OR ANOTHER GOVERNMENT ENTITY

E. Check one of the following:

[X] The entity is **not currently or has not been** party to any legal proceeding involving the State of New Hampshire (or any agency or subdivision thereof) or any other state/federal government entity before any adjudicative body in any jurisdiction **OR**

[ ] The entity is or has been party to one or more legal proceedings as set forth above. Identify the jurisdiction, court or other adjudicative body, case number, and briefly describe the nature of the proceeding (Attached extra sheet if necessary).

CHARITABLE TRUSTS UNIT COMPLIANCE CERTIFICATION

F. Check one of the following:

[X] is registered and in good standing with the New Hampshire Department of Justice Charitable Trusts Unit (** see note below) **or** has submitted a complete application for registration to the Charitable Trusts Unit and is awaiting a registration determination **OR**

[ ] is not required to register with the Charitable Trusts Unit because it is neither tax-exempt under section 501(c)(3) of the Internal Revenue Code nor engages in charitable solicitations in the State of New Hampshire **OR**

[ ] is exempt from registration with the Charitable Trusts Unit because it is a federal or state government, agency, or subdivision or is a religious organization, an integrated auxiliary of a religious organization, or is a convention or association of churches.

** Note: Attached screen shot from the DOJ Registered Charities List found at:

https://mm.nh.gov/files/uploads/doj/remote-docs/registered-charities.pdf

2857	Community Action Partnership of Strafford County	PO Box 160	Dover	NH	03821-0160	G	5/15/2026

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

FINANCIAL DISCLOSURES

G. Check one the following:

[X] The organization hired an outside firm to audit its financial statements or to prepare GAAP-compliant financial statements for its most recently completed fiscal year. If so, please ensure that the financial statements and audit results are available to be requested from the contact listed on Page 1 (audited financials may be attached) **OR**

[ ] The above does not apply, but the organization filed an IRS Form 990 or Form 990-EZ for its most recently completed fiscal year. Please attach that IRS Form 990 or Form 990-EZ to the submission. (Form 990 Schedule B is not required) **OR**

[ ] ***If neither of the above apply***, complete the Income Statement and Balance Sheet below with the following basic financial information from the organization's most recently completed fiscal year:

1. INCOME STATEMENT

REVENUE	
GRANTS	$14,421,951
DONATIONS	$268,446
PROGRAM SERVICES REVENUE	$1,251,930
INTEREST & DIVIDENDS	$2,364
ALL OTHER REVENUE	$2,452,412
TOTAL REVENUE	$18,397,103

EXPENSES	
COMPENSATION OF OFFICERS, DIRECTORS, AND KEY PERSONNEL	$391,320
OTHER SALARIES & WAGES	$6,015,394
PAYROLL TAXES & EMPLOYEE BENEFITS	$1,032,816
OCCUPANCY, RENT, UTILITIES, AND INSURANCE	$400,394
PRINTING, PUBLICATIONS, POSTAGE, OFFICE SUPPLIES, AND IT	$274,866
ALL OTHER EXPENSES	$9,195,957
TOTAL EXPENSES	$17,310,747

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

2. BALANCE SHEET

Assets	
Cash & Equivalents	$1,458,112
Investments	$26,798
Real Estate (less any depreciation)	$7,993,215
Other Property & Equipment (less any depreciation)	$
Pledges, grants, accounts receivable	$387,795
All other assets	$2,276,456
Total Assets	$12,142,376

Liabilities	
Accounts Payable	$219,706
Loans Payable	$2,711,019
All other liabilities	$9,211,651
Total Liabilities	$12,142,376

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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 Street, 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 VISION &VALUES

Our Mission: To educate, advocate and assist people in Strafford County to help meet their basic needs and promote self-sufficiency.

Our Vision: To eliminate poverty in Strafford County.

Our Values: Compassion, Education, Sufficiency, Transparency, Accountability, Teamwork, Client Focus and Professionalism

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Financial Statements

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEARS ENDED
DECEMBER 31, 2024 AND 2023
AND
INDEPENDENT AUDITORS' REPORTS AND REPORTS ON COMPLIANCE AND INTERNAL CONTROL

Leone, McDonnell & Roberts
PROFESSIONAL ASSOCIATION

CERTIFIED PUBLIC ACCOUNTANTS

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2024 AND 2023

TABLE OF CONTENTS

	Page(s)
Independent Auditors' Report	1 - 3
Financial Statements:	
Consolidated Statements of Financial Position	4
Consolidated Statements of Activities	5 - 6
Consolidated Statements of Functional Expenses	7 - 8
Consolidated Statements of Cash Flows	9
Consolidated Notes to Financial Statements	10 - 23
Supplementary Information:	
Consolidating Statement of Financial Position	24
Consolidating Statement of Activities	25
Schedule of Expenditures of Federal Awards	26 - 27
Notes to Schedule of Expenditures of Federal Awards	28
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	29 - 30
Independent Auditors' Report on Compliance for Each Major Program and on Internal Control Over Compliance Required by the Uniform Guidance	31 - 33
Schedule of Findings and Questioned Costs	34

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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, 2024 and 2023, 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, 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.

We did not audit the financial statements of Academy Street Family Housing, LLC a wholly owned subsidiary, for the year ended December 31, 2024, which statements reflect total assets constituting 7.87 percent of consolidated total assets at December 31, 2024, and total revenues constituting 0.36 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 the 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 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 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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The accompanying consolidating schedules and 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 July 23, 2025, 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.

Leone, McDonnell & Roberts
Professional Association

Dover, New Hampshire
July 23, 2025

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED STATEMENTS OF FINANCIAL POSITION
DECEMBER 31, 2024 AND 2023

ASSETS

	2024	2023
CURRENT ASSETS		
Cash and cash equivalents	$ 1,484,910	$ 1,806,373
Accounts receivable	1,767,593	1,875,336
Contributions receivable	20,100	20,000
Due from Gafney Home, L.P.	387,795	519,890
Inventory	275,443	413,604
Prepaid expenses	10,074	11,972
Total current assets	3,945,915	4,647,175
NONCURRENT ASSETS		
Restricted cash	31,335	36,215
Security deposits	8,312	8,375
Property, net of accumulated depreciation	7,993,215	6,374,340
Other noncurrent assets	26,798	25,503
Right of use asset	136,801	81,312
Total noncurrent assets	8,196,461	6,525,745
TOTAL ASSETS	$ 12,142,376	$ 11,172,920

LIABILITIES AND NET ASSETS

CURRENT LIABILITIES		
Current portion of long term debt	$ 110,327	$ 99,121
Accounts payable	219,706	1,295,505
Accrued payroll and related taxes	198,594	128,546
Accrued compensated absences	183,856	193,093
Refundable advances	112,535	849,145
Other current liabilities	14,533	36,309
Current portion of right of use liability	65,895	36,264
Total current liabilities	905,446	2,637,983
NONCURRENT LIABILITIES		
Long term debt, less current portion shown above	3,221,454	3,057,976
Security deposits	2,855	2,853
Right of use liability, less current portion shown above	70,906	45,048
Total noncurrent liabilities	3,295,215	3,105,877
Total liabilities	4,200,661	5,743,860
NET ASSETS		
Without donor restrictions	7,716,482	5,253,075
With donor restrictions	225,233	175,985
Total net assets	7,941,715	5,429,060
TOTAL LIABILITIES AND NET ASSETS	$ 12,142,376	$ 11,172,920

See Notes to Financial Statements

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2024

	Without Donor Restrictions	With Donor Restrictions	Total
CHANGE IN NET ASSETS			
REVENUES AND OTHER SUPPORT			
Grant revenue	$ 14,421,951	$ -	$ 14,421,951
Fees for service	1,251,930	-	1,251,930
Rent revenue	78,293	-	78,293
Public support	1,013,958	173,699	1,187,657
In-kind donations	1,256,707	-	1,256,707
Interest	2,364	-	2,364
Fundraising	268,446	-	268,446
Other revenue	103,454	-	103,454
Total revenues and other support	18,397,103	173,699	18,570,802
NET ASSETS RELEASED FROM RESTRICTIONS	124,451	(124,451)	-
Total revenues, other support, and net assets released from restrictions	18,521,554	49,248	18,570,802
EXPENSES			
Program services			
Child services	6,253,985	-	6,253,985
Community services	2,332,090	-	2,332,090
Energy assistance	4,433,054	-	4,433,054
Housing	1,378,466	-	1,378,466
Weatherization	1,277,962	-	1,277,962
Total program services	15,675,557	-	15,675,557
Supporting activities			
Management and general	1,365,044	-	1,365,044
Fundraising	270,146	-	270,146
Total expenses	17,310,747	-	17,310,747
CHANGE IN NET ASSETS BEFORE ACQUISITION OF PROPERTY AND LAND	1,210,807	49,248	1,260,055
ACQUISITION OF PROPERTY AND LAND	1,252,600	-	1,252,600
CHANGE IN NET ASSETS	2,463,407	49,248	2,512,655
NET ASSETS, BEGINNING OF YEAR	5,253,075	175,985	5,429,060
NET ASSETS, END OF YEAR	$ 7,716,482	$ 225,233	$ 7,941,715

See Notes to Financial Statements

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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
Gain 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

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2024

	Child Services	Community Services	Energy Assistance	Housing	Weatherization	Total Program Services	Intermediate (Allocation) Pools	Management and General	Fundraising	Total
Payroll	$ 3,697,447	$ 684,319	$ 447,485	$ 390,071	$ 267,529	$ 5,486,851	$ 11,228	$ 806,083	$ 102,552	$ 6,406,714
Payroll taxes	293,717	54,558	34,778	30,969	20,477	434,499	996	75,100	8,357	518,952
Fringe benefits	272,943	33,249	46,289	27,168	29,217	408,866	128	60,106	4,711	473,811
Retirement	18,436	4,849	3,003	3,682	4,387	34,357	39	5,165	492	40,053
Weatherization material, fuel and client assistance	67,912	19,631	3,811,179	631,357	860,732	5,390,811	-	-	-	5,390,811
In-kind expenses	303,168	896,130	-	43,936	500	1,243,734	-	-	13,025	1,256,759
Consultants and contract labor	129,787	29,247	74	51,460	415	210,983	94,370	116,453	48,186	469,992
Consumable supplies	258,331	326,625	5,761	4,983	3,682	599,382	72,200	4,091	5,251	680,924
Occupancy	693,212	82,940	45,712	73,430	29,409	924,703	(510,137)	84,414	13,027	512,007
Repairs and maintenance	164,400	25,798	13,112	32,721	829	236,860	340,203	2,814	6,830	586,707
Insurance	24,124	33,089	999	10,889	554	69,655	15,169	55,005	372	140,201
Training and conferences	111,386	22,054	21	407	27,964	161,832	2,198	2,482	53,215	219,727
Depreciation	95,247	62,829	391	47,033	721	206,221	-	87,398	-	293,619
Travel and transportation	30,651	19,745	212	22,722	8,096	81,426	(23,707)	11,578	1,216	70,513
Printing and postage	357	571	9,679	180	183	10,970	-	4,068	8,014	23,052
Equipment and computer	38,925	939	40	80	13,660	53,644	14,443	-	665	68,752
Interest expense	13,146	10,766	8,134	6,205	4,161	42,412	3,177	50,287	2,844	98,720
Other program support	40,796	24,751	6,185	1,173	5,446	78,351	(20,307)	-	1,389	59,433
Total expenses	$ 6,253,985	$ 2,332,090	$ 4,433,054	$ 1,378,466	$ 1,277,962	$ 15,675,557	$ -	$ 1,365,044	$ 270,146	$ 17,310,747

See Notes to Financial Statements

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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	42,466	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

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATED STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED DECEMBER 31, 2024 AND 2023

	2024	2023
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	$ 2,512,655	$ 488,413
Adjustment to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	293,619	248,629
Amortization of debt issuance costs	3,376	3,376
Acquisition of property and land	(1,502,600)	(945,514)
Acquisition of long term debt	250,000	225,000
Transfer of property to Gafney Home, L.P.	288	129,397
Loss (gain) on disposal of property	-	79,338
Decrease (increase) in assets:		
Accounts receivable	107,743	681,516
Contributions receivable	(100)	30,000
Due from Gafney Home, L.P.	132,095	(519,890)
Inventory	138,161	88,148
Prepaid expenses	1,898	40,074
Other noncurrent assets	(1,295)	-
Security deposits	63	52
Increase (decrease) in liabilities:		
Accounts payable	(1,075,799)	849,547
Accrued payroll and related taxes	70,048	(472)
Accrued compensated absences	(9,237)	(12,435)
Refundable advances	(736,610)	(732,629)
Other current liabilities	(21,776)	(37,153)
Security deposits	2	(348)
NET CASH PROVIDED BY OPERATING ACTIVITIES	162,531	615,049
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of property	(410,182)	(100,594)
Proceeds on sale of property	-	19,023
NET CASH USED IN INVESTING ACTIVITIES	(410,182)	(81,571)
CASH FLOWS FROM FINANCING ACTIVITIES		
Payments made on long term debt	(78,692)	(75,453)
NET CASH USED IN FINANCING ACTIVITIES	(78,692)	(75,453)
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	(326,343)	458,025
CASH AND RESTRICTED CASH, BEGINNING OF YEAR	1,842,588	1,384,563
CASH AND RESTRICTED CASH, END OF YEAR	$ 1,516,245	$ 1,842,588
CASH AND RESTRICTED CASH		
Cash	$ 1,484,910	$ 1,806,373
Restricted cash:		
Insurance escrow	5,907	13,477
Tax escrow	5,972	5,931
Replacement reserves	8,928	6,580
Operating reserve	10,528	10,227
Total cash and restricted cash	$ 1,516,245	$ 1,842,588
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION		
Cash paid during the year for interest	$ 98,720	$ 94,274
SUPPLEMENTAL DISCLOSURE OF NONCASH INVESTING AND AND FINANCING ACTIVITIES		
Acquired property and land	$ 1,502,600	$ 945,514
Acquired long term debt	$ 250,000	$ 225,000

See Notes to Financial Statements

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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 reduce barriers to help clients improve their economic stability and well-being through education, advocacy, and partnerships. 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 with the Agency, as the Agency is the 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, 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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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, 2024 and 2023, 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.

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 net assets with donor restrictions. However, if a restriction is fulfilled in the same period in which the contribution is received, the Agency reports the support as unrestricted.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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 $293,619 and $248,629 for the years ended December 31, 2024 and 2023, respectively.

Accrued Earned Time

The Agency has accrued a liability of $183,856 and $193,093 at December 31, 2024 and 2023, respectively, for future compensated leave time that its employees have earned and which is vested with the employee.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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. For the years ended December 31, 2024 and 2023 cash and cash equivalents totaled $1,484,910 and $1,806,373, respectively.

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, 2024 and 2023 amounted to $15,342 and $10,426, respectively.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Debt Issuance Costs

As required under FASB Accounting Standards Update No. 2015-03, amortization expense for the years ended December 31, 2024 and 2023 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 $170,732 and $103,356 for the years ended December 31, 2024 and 2023, 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 $552,346 and $412,602, respectively, for the year ended December 31, 2024. For the year ended December 31, 2023, the estimated fair value of these food commodities and goods was determined to be $457,049 and $116,368, 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 $121,027 for the year ended December 31, 2024. The estimated fair value of these services was determined to be $90,451 for the year ended December 31, 2023.

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

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

NOTE 2. PROPERTY

As of December 31, 2024 and 2023, property consisted of the following:

	2024	2023
Land, buildings and improvements	$ 8,641,414	$ 6,900,857
Furniture, equipment and machinery	590,886	418,949
Vehicles	315,682	315,682
Total	9,547,982	7,635,488
Less accumulated depreciation	1,554,767	1,261,148
Net property	$ 7,993,215	$ 6,374,340

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, 2024 and 2023.

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 2024 and 2023.

Insurance and Real Estate Tax Escrows

Academy Street is required to establish a reserve to fund tax and insurance payments for the project. Amounts are to be deposited on a monthly basis to accrue a sufficient balance to pay future tax and insurance bills for the project. As of December 31, 2024 and 2023, the balance in the reserves for tax and insurance escrows was properly funded.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

NOTE 4. LIQUIDITY AND AVAILABILITY

The following represents the Agency's financial assets as of December 31:

	2024	2023
Financial assets at year end:		
Cash and cash equivalents	$ 1,484,910	$ 1,806,373
Accounts receivable	1,767,593	1,875,336
Contributions receivable	20,100	20,000
Due from Gafney Home, L.P.	387,795	519,890
Restricted cash	31,335	36,215
Total financial assets	3,691,733	4,257,814
Less amounts not available to be used within one year:		
Restricted cash	31,335	36,215
Financial assets available to meet general expenditures over the next twelve months	$ 3,660,398	$ 4,221,599

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

All accounts receivable are stated at the amount management expects to collect from balances outstanding at year-end. The Organization uses historical loss information based on the aging of receivables as the basis to determine expected credit losses from receivables and believes that the composition of receivables at year-end is consistent with historical conditions as credit terms and practices and the client base has not changed significantly.

The allowance for uncollectible accounts was estimated to be zero at December 31, 2024 and 2023. The Agency has no policy for charging interest on overdue accounts.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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:

	2024	2023
Within one year	$ 20,100	$ 20,000

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 amount included in due from Gafney Home, L.P. on the consolidated statement of financial position represents amounts that the Agency has paid on behalf of Gafney for the construction that is underway. For the years ended December 31, 2024 and 2023 the amount totaled $387,795 and $519,890, respectively.

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. The note is payable upon demand. Interest is stated at the prime rate plus 1% which resulted in an interest rate of 8.50% at December 31, 2024 and 9.50% at December 31, 2023. 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, 2024 and 2023.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

NOTE 10. LONG TERM DEBT

The long term debt at December 31, 2024 and 2023 consisted of the following:

	2024	2023
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.	$ 1,731,559	$ 1,790,164
5.00% note 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.	367,658	387,745
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	225,000
Note payable to the City of Dover. The note is not subject to interest or principal amortization and will be forgiven in 2029 provided that the property is used for transitional housing. The note is secured by real estate.	250,000	-
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

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

	2024	2023
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	25,756
Total long term debt before current portion of long term debt and unamortized debt issuance costs	3,385,861	3,214,554
Current portion of long term debt	(110,327)	(99,121)
Unamortized debt issuance costs	(54,080)	(57,457)
Total long term debt	$ 3,221,454	$ 3,057,976

The schedule of maturities of long term debt at December 31, 2024 is as follows:

Year Ended December 31	Amount
2025	$ 110,327
2026	86,563
2027	90,488
2028	94,592
2029	573,883
Thereafter	2,430,008
Total	$ 3,385,861

NOTE 11. NET ASSETS

At December 31, 2024 and 2023, net assets with donor restrictions consisted of the following:

	2024	2023
Whole family	$ 38,194	$ 39,286
Delta dental	5,000	-
CCFG & ARPA quality incentive	54,623	-
Maternal health grant	19,430	-
Fuel assistance	107,986	136,699
Total	$ 225,233	$ 175,985

During the years ended December 31, 2024 and 2023 $124,451 and $161,314 were released from net assets with donor restrictions, respectively.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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, 2024 and 2023, the annual lease/rent expense for the leased facilities was $69,901.

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, 2024 was 3.75%, which is based upon the risk-free borrowing rates commensurate with the lease terms. At December 31, 2024, the ROU asset and lease liability is $136,801. At December 31, 2023, the ROU asset and lease liability is $81,312.

The weighted average lease term at December 31, 2024 is 3.47 years. The weighted average discount rate at December 31, 2024 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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Lease liability maturities as of December 31, 2024 is as follows:

Year Ending December 31	Amount
2025	$ 69,901
2026	38,401
2027	6,901
2028	6,901
2029	6,901
Thereafter	17,244
Total undiscounted lease liability	146,249
Less imputed interest	(9,448)
Total lease liability	$ 136,801

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, for the year ended December 31, 2024 the Agency provides a matching contribution equal to 100% of the employee's contribution up to 2% of the employee's compensation. For the year ended December 31, 2023 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, 2024 and 2023 totaled $40,053 and $33,241, 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, 2024 and 2023, approximately 79% and 89%, 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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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, 2024 and 2023.

NOTE 17. RENTAL INCOME RECEIVABLE

During the year ended December 31, 2024, 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 July 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, 2024 and 2023, $3,447 and $2,587, 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
2025	$ 25,526

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

NOTE 18. ACQUISITION OF PROPERTY AND LAND

During the year ended December 31, 2024, the Agency acquired property and land relating to the Home for Now Homeless Shelter from another nonprofit organization. The value of the building and land received in the acquisition totaled $386,507 and $1,116,093, respectively. 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.

As part of the acquisition of the property and land during the year ended December 31, 2024, the Agency also acquired the related note payable of $250,000, payable to the City of Dover (see **Note 10**). The Agency has been running the operations of the Home for Now program since the acquisition.

As part of the acquisition of the property and land during the year ended December 31, 2023, 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 July 23, 2025, the date the consolidated financial statements were available for issuance.

Subsequent to year end, the Agency became entitled to $1,000,000 from HUD. This amount is related to the support needed to complete the project at the Bradley Commons Innovative Center. This support will assist in paying down the mortgage, create 42 workforce housing units, provide capacity to serve nearly 5,000 additional community members in need, and consolidate the offices occupied by the Agency.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATING STATEMENT OF FINANCIAL POSITION
DECEMBER 31, 2024

	Community Action Partnership of Strafford County	Academy Street Family Housing, LLC	Total	Consolidating Adjustments	Consolidated
ASSETS					
CURRENT ASSETS					
Cash and cash equivalents	$ 1,382,497	$ 102,413	$ 1,484,910	$ -	$ 1,484,910
Accounts receivable	1,764,146	3,447	1,767,593	-	1,767,593
Contributions receivable	20,100	-	20,100	-	20,100
Due from affiliate	9,249	-	9,249	(9,249)	-
Due from Gafney Home, L.P.	387,795	-	387,795	-	387,795
Inventory	275,443	-	275,443	-	275,443
Prepaid expenses	10,074	-	10,074	-	10,074
Total current assets	3,849,304	105,860	3,955,164	(9,249)	3,945,915
NONCURRENT ASSETS					
Restricted cash	-	31,335	31,335	-	31,335
Security deposits	5,107	3,205	8,312	-	8,312
Property, net of accumulated depreciation	7,178,184	815,031	7,993,215	-	7,993,215
Other noncurrent assets	26,798	-	26,798	-	26,798
Right of use asset	136,801	-	136,801	-	136,801
Total noncurrent assets	7,346,890	849,571	8,196,461	-	8,196,461
TOTAL ASSETS	$ 11,196,194	$ 955,431	$ 12,151,625	$ (9,249)	$ 12,142,376
LIABILITIES AND NET ASSETS					
CURRENT LIABILITIES					
Current portion of long term debt	$ 82,809	$ 27,518	$ 110,327	$ -	$ 110,327
Accounts payable	214,239	5,467	219,706	-	219,706
Accrued payroll and related taxes	198,594	-	198,594	-	198,594
Accrued compensated absences	183,856	-	183,856	-	183,856
Due to affiliate	-	9,249	9,249	(9,249)	-
Refundable advances	112,535	-	112,535	-	112,535
Other current liabilities	9,974	4,559	14,533	-	14,533
Current portion of right of use liability	65,895	-	65,895	-	65,895
Total current liabilities	867,902	46,793	914,695	(9,249)	905,446
NONCURRENT LIABILITIES					
Long term debt, less current portion shown above	2,451,161	770,293	3,221,454	-	3,221,454
Security deposits	-	2,855	2,855	-	2,855
Right of use liability, less current portion shown above	70,906	-	70,906	-	70,906
Total noncurrent liabilities	2,522,067	773,148	3,295,215	-	3,295,215
Total liabilities	3,389,969	819,941	4,209,910	(9,249)	4,200,661
NET ASSETS					
Without donor restrictions	7,580,992	135,490	7,716,482	-	7,716,482
With donor restrictions	225,233	-	225,233	-	225,233
Total net assets	7,806,225	135,490	7,941,715	-	7,941,715
TOTAL LIABILITIES AND NET ASSETS	$ 11,196,194	$ 955,431	$ 12,151,625	$ (9,249)	$ 12,142,376

See Independent Auditors' Report

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY AND AFFILIATE

CONSOLIDATING STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2024

	Community Action Partnership of Strafford County	Academy Street Family Housing, LLC	Consolidated
CHANGE IN NET ASSETS			
REVENUES AND OTHER SUPPORT			
Grant revenue	$ 14,421,951	$ -	$ 14,421,951
Fees for service	1,251,930	-	1,251,930
Rent revenue	12,523	65,770	78,293
Public support	1,187,657	-	1,187,657
In-kind donations	1,256,707	-	1,256,707
Interest	1,540	824	2,364
Fundraising	268,446	-	268,446
Other revenue	103,454	-	103,454
Total revenues and other support	18,504,208	66,594	18,570,802
EXPENSES			
Program services			
Child services	6,253,985	-	6,253,985
Community services	2,332,090	-	2,332,090
Energy assistance	4,433,054	-	4,433,054
Housing	1,312,979	65,487	1,378,466
Weatherization	1,277,962	-	1,277,962
Total program services	15,610,070	65,487	15,675,557
Supporting activities			
Management and general	1,365,044	-	1,365,044
Fundraising	270,146	-	270,146
Total expenses	17,245,260	65,487	17,310,747
CHANGE IN NET ASSETS BEFORE ACQUISITION OF PROPERTY AND LAND	1,258,948	1,107	1,260,055
ACQUISITION OF PROPERTY AND LAND	1,252,600	-	1,252,600
CHANGE IN NET ASSETS	2,511,548	1,107	2,512,655
NET ASSETS, BEGINNING OF YEAR	5,294,677	134,383	5,429,060
NET ASSETS, END OF YEAR	$ 7,806,225	$ 135,490	$ 7,941,715

See Independent Auditors' Report

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS AND NON-FEDERAL AWARDS
FOR THE YEAR ENDED DECEMBER 31, 2024

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		$ 166,261
Child Nutrition Cluster					
Summer Food Service Program for Children	10.559	State of New Hampshire Department of Education	4300-ZZZ	$ 93,713	
National School Lunch Program	10.555	State of New Hampshire Department of Education	At-Risk After School Care Centers	16,974	110,687
Food Distribution Cluster					
Emergency Food Assistance Program	10.569	Belknap-Merrimack Community Action Partnership	None	4,146	
Emergency Food Assistance Program (Food Commodities)	10.569	Belknap-Merrimack Community Action Partnership	None	550,771	554,917
Total U.S. Department of Agriculture					$ 831,865
U.S. Department of Housing and Urban Development					
Supportive Housing for the Elderly	14.157	Dover Housing Authority	Dover Housing Authority		$ 33,004
CDBG Entitlement Grants Cluster					
Community Development Block Grants / Entitlement Grants	14.218	City of Dover, New Hampshire	City of Dover	$ 29,849	
Community Development Block Grants / Entitlement Grants	14.218	City of Rochester, New Hampshire	City of Rochester	87,497	117,346
Emergency Solutions Grant Program	14.231	State of New Hampshire Department of Health and Human Services	05-95-42-423010-7927		88,400
Economic Development Initiative, Community Project Funding & Misc Grants	14.251		B-23-CP-NH-0959		328,196
Continuum of Care	14.267	State of New Hampshire Department of Health and Human Services	SS-2020-BHS-04PERNA-11	29,286	
Continuum of Care	14.267	State of New Hampshire Department of Health and Human Services	COC DV	210,676	
Continuum of Care	14.267	State of New Hampshire Department of Health and Human Services	COC RRH	177,595	417,557
Supportive Housing Program	14.235	State of New Hampshire Department of Health and Human Services	010-092-7176-102-0415		39,178
Total U.S. Department of Housing and Urban Development					$ 1,023,681
U.S Department of Homeland Security			593800-035		$ 5,779
Emergency Food and Shelter National Program	97.024	United Way			
Total U.S. Department of Homeland Security					$ 5,779
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	$ 253,296	
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	140,992	$ 394,288
Total U.S. Department of Energy					$ 394,288

See Notes to Schedule of Expenditures of Federal Awards

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS AND NON-FEDERAL AWARDS
FOR THE YEAR ENDED DECEMBER 31, 2024

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	$ 35,955	
Special Programs for the Aging - Title III, Part B	93.044	State of New Hampshire Division of Elderly and Adult Services	010-048-7872-512-0352	5,948	$ 41,903
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		161,940
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		124,607
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		3,052
Temporary Assistance for Needy Families	93.558	State of New Hampshire, DHHS, Division for Children, Youth and Families	05-095-045-450010-61460000-502-500891-42106603		205,904
Low-Income Home Energy Assistance	93.568	State of New Hampshire Governor's Office of Energy & Planning	01-02-02-024010-77050000-074-500587	$ 4,061,976	
Low-Income Home Energy Assistance	93.568	State of New Hampshire Governor's Office of Energy & Planning	01-02-02-024010-77050000-074-500587	345,658	4,407,634
Low-Income Water Assistance Program	93.499	State of New Hampshire Governor's Office of Energy & Planning	02-52-52-52010-19880000-500587		103,374
Community Services Block Grant	93.569	State of New Hampshire, DHHS, DFA	010-045-7148-093-0415	501,467	
Community Services Block Grant	93.569	Southern NH Services	RPIC	10,000	511,467
CCDF Cluster					
ARPA - Child Care and Development Block Grant	93.575	State of New Hampshire, DHHS	177200 & H79TI084759		329,909
Head Start Cluster					
Head Start	93.600	Direct Funding	01CH01149602 & 603		4,496,495
Substance Abuse and Mental Health Services Administration	93.243	Hope on Haven Hill	H79TI084759		35,825
Community-Based Child Abuse Prevention Grants	93.590	NH Childrens Trust	Trestle Impletementation & Concrete Supports		6,523
Activities to Support STLT Health Dept Response to Public Health or Healthcare Crises	93.391	NH Childrens Trust			24,399
Social Services Research and Demonstration	93.647		90EDA0017		329,758
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		7,306
Stephanie Tubbs Jones Child Welfare Program	93.645	State of New Hampshire, DHHS, Division for Children, Youth and Families	05-095-042-421010-29680000-102-500734-42106802		1,287
Social Services Block Grant	93.667	State of New Hampshire, DHHS, Division for Children, Youth and Families	05-095-042-421010-29660000-102-500734-42106603		60,209
Total U.S. Department of Health & Human Services					$ 10,851,592
TOTAL					**$ 13,107,205**
NON-FEDERAL AWARDS					
Electrical Assistance Program		NH Public Utilities Company			$ 242,065

See Notes to Schedule of Expenditures of Federal Awards

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS FOR THE YEAR ENDED DECEMBER 31, 2024

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, 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 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, 2024.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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, 2024 and 2023, 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 July 23, 2025.

Report on 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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether 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
July 23, 2025

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Leone, McDonnell & Roberts
Professional Association
CERTIFIED PUBLIC ACCOUNTANTS
DOVER • WOLFEBORO
NORTH CONWAY

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, 2024. 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, 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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

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
July 23, 2025

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

SCHEDULE OF FINDINGS AND QUESTIONED COSTS
FOR THE YEAR ENDED DECEMBER 31, 2024

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. No significant deficiencies 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, Head Start, ALN 93.600 and Social Services Research and Demonstration, ALN 93.647, NON-FEDERAL, NH Public Utilities Corporation, Electrical Assistance Program.

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 be a low-risk auditee.

B. FINDINGS – FINANCIAL STATEMENTS AUDIT

None

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

None

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Renee Couture, MSW, Director of Family Services
Community Action Partnership of Strafford County
[redacted] [redacted]

Work Experience

Director of Family Services, Community Action Partnership of Strafford County, Dover, NH, July 2025 - present

- Leadership and management of CAPSC family support programs, including CFSS and HFA home visiting, Kinship and Newborn Navigation services, Family Resource Centers, and the statewide Diaper Distribution Pilot Program.
- Ensuring full compliance with all State and Federal regulations, while developing and maintaining systems and procedures that adhere to mandated standards.
- Grants oversight and management, ensuring contractual obligations—such as finance, service provision, and deliverables—are met.
- Responding to RFPs within the Family Services program portfolio, preparing grant applications and related material.
- Upholding high-quality programmatic standards and overseeing continuous improvement initiatives.

Executive Director, Krempels Brain Injury Center, Portsmouth, NH, 2009-2024

- Ensured effective and efficient management of business operations and personnel, overseeing continuous improvement and growth of programs, services, and financial sustainability.
- Directed the development, execution, and evaluation of multiple strategic plans, in collaboration with the board of directors and key personnel.
- Stewarded long-standing partnership with University of New Hampshire, leveraging relationships for program evaluation and research, board membership, and access to current research and best practices.
- Directed the evolution of finance, human resources, and telecommunications systems and processes to ensure smooth, cost-effective operations and regulatory compliance.
- Evolved founder/organizing board of 11 to a governing board of 15 strategically recruited professionals from diverse and relevant backgrounds and industries.
- Matured fitness and focus of board by establishing infrastructure and processes to support effective recruitment, purposeful and productive engagement, and leadership succession.
- Partnered with local entrepreneur and with an idea for a mission-based, peer-to-peer fundraiser, establishing and growing the King Challenge cycling event, raising $1.25 million over 13 years.
- Ensured financial soundness and sustainability by improving cash and cash reserves by 200%, exceeding minimum best practice for reserve funds while simultaneously investing in organization's growth per strategic initiatives.

Education

Master of Social Work, University of New England, Biddeford, ME, 2000

Bachelor of Science, Social Work and Outdoor Education, University of New Hampshire, Durham, 1994

Community Organizations

Member, Board of Directors, Family Resource Center Network of NH, February 2026 - present

Member, Board of Directors, Chamber Collaborative of Greater Portsmouth, May 2021 – February 2025

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Danielle E. Bah, Home Visiting Manager
Community Action Partnership of Strafford County
[redacted] [redacted]

Work Experience

Community Action Partnership of Strafford County, Dover NH

Home Visiting Manager, April 2025 – Present

- Provide strategic and operational oversight for the Healthy Families, Kinship, and Comprehensive Family Supports (CFSS) programs, managing all aspects of case management, service delivery, and program implementation.
- Deliver ongoing reflective supervision to home visiting staff and supervisors in early childhood development, prenatal services, parenting education, nutrition, and family support; ensure accountability, fidelity to model standards, and achievement of program objectives.
- Oversee referral review and enrollment decisions, prioritizing families with the highest needs and coordinating applications to external programs including Early Head Start.
- Monitor caseload distribution and directly observe home visitor practice to ensure quality, consistency, and compliance with program standards.
- Ensure adherence to all relevant home visiting model and contractual requirements; recommend policy updates, revise procedures, and maintain accurate supervisory documentation within the data management system.
- Conduct quarterly participant file audits to ensure completeness, accuracy, and regulatory compliance.
- Lead staff meetings and provide team direction to maintain program alignment, performance focus, and continuous quality improvement.
- Develop and monitor work plans to achieve targeted performance measures; contribute to grant proposals and support contract compliance.
- Manage aspects of program invoicing and fiscal procedures; provide input to the Family Services Director on annual budgets and monthly expense review.
- Maintain collaborative partnerships with referral sources and community agencies (e.g., Head Start/Early Head Start, social service agencies, schools, and state partners) to ensure coordinated, non-duplicative services and full enrollment.
- Co-maintain the Community Advisory Committee in compliance with model requirements.
- Facilitate mandated reporting to DCYF and provide direct family support or crisis intervention as needed.
- Attend and represent the program at HFA, HVNH, MCH, CFSS, FSNH, and assigned community, state, regional, and national meetings and trainings.
- Collaborate with the Family Resource Center to support parent education initiatives and playgroups that promote socialization, child development, and family engagement.

FRC Manager, June 2024 – April 2025

- Managed overall resource navigation and service coordination components of the Family Resource Center, ensuring responsive, family-centered support.
- Provided ongoing reflective supervision and leadership to Family Services staff in early childhood development, prenatal services, parenting education, nutrition, and family support; ensured role clarity, accountability, and achievement of program objectives.
- Maintained up-to-date knowledge of program policies and procedures; ensured staff adherence and implemented updates as needed to maintain compliance.
- Oversaw written and electronic documentation, maintaining accurate records and supervisory notes within the data management system.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

- Reviewed referrals, determined appropriate service pathways, and ensured completion of external referrals and required feedback surveys.
- Developed and monitored work plans aligned with contractual performance measures and funding requirements.
- Established and maintained the FRC Community Advisory Council in compliance with FRC Designation Status, convening quarterly meetings to strengthen community voice and engagement.
- Built and sustained collaborative partnerships with referral sources and community agencies, including Head Start/Early Head Start, local social service agencies, schools, and state partners to ensure coordinated, non-duplicative services and full enrollment.
- Ensured timely and appropriate reporting of suspected child abuse and neglect to DCYF in accordance with mandated reporting requirements.
- Contributed to grant proposal development and funding applications related to home visiting and family support services.
- Led regular staff meetings and provided team direction to maintain program focus and alignment.
- Supported parent education initiatives and playgroups promoting socialization, child development, and community engagement.
- Provided direct services to families as needed, including crisis intervention and resource linkage.
- Attended required state, regional, and national meetings, trainings, and conferences.

Healthy Families America Supervisor, December 2022 – June 2024

- Supervised Healthy Families America home visiting staff, providing weekly reflective supervision in early childhood development, prenatal services, parenting education, family support, and nutrition in alignment with HFA model requirements.
- Met weekly with the HFA Program Manager for reflective supervision when carrying a caseload and monthly when not carrying a caseload.
- Collaborated with the Program Manager and Outreach & Enrollment Coordinator to maintain full enrollment and prioritize services for families with the highest needs.
- Reviewed HFA screenings and Parent Surveys to determine eligibility and enrollment decisions.
- Observed and documented home visitor practice; monitored caseloads and ensured fidelity to HFA standards and policies.
- Ensured adherence to all HFA Home Visiting program requirements, recommending procedural updates and revising forms as needed.
- Maintained oversight of written and electronic records; conducted semi-annual file audits to ensure compliance, accuracy, and completeness.
- Facilitated timely and appropriate reports of suspected child abuse and neglect to DCYF in accordance with mandated reporting requirements.
- Assisted in developing and monitoring work plans tied to targeted performance measures and continuous quality improvement goals.
- Maintained a limited caseload, providing direct home visiting services, resources, referrals, and family support.
- Facilitated ongoing parent groups in collaboration with the Family Resource Center to promote protective factors, socialization, and child development.
- Completed required administrative tasks, supervision documentation, reporting, and Medicaid billing (CFSS) in a timely and accurate manner.
- Attended HFA/CFSS state meetings, trainings, and assigned community, regional, state, and national conferences.

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

- Supported onboarding and professional development of new home visiting staff.
- Performed additional duties as assigned to support program operations and organizational goals.

Healthy Families of America Home Visitor, Oct 2021 – December 2022

- Assessed family needs using a variety of reflective strategies such as: relationship building, motivational interviewing, problem talk, explore and wonder, and accentuate the positive.
- Educated parents in child development, child and maternal health, safety and parenting skills based on individual needs prenatally up to age 3.
- Developed client led family goals and service plans collaboratively with parents/caregivers
- Supported the development of nurturing relationships and parental self-efficacy through reinforcing and modeling positive, nurturing, and responsive parent-child interactions, skills, and relationships.
- Facilitated resource & referral based on community supports and expressed family needs
- Establishes and facilitates strength-based, trusting relationships with families through home-based services
- Supported families in developing and capitalizing on necessary parenting skills needed to support the physical, emotional, social, and overall developmental needs of their children.
- Translated and utilized 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
- Maintained a caseload of 8-15 families based on frequency of visits determined by family needs
- Conducted initial meetings with families to determine eligibility for program
- Advocated for clients by coordinating care with and providing outreach to community partners on behalf of families
- Documented individual and family demographic information using ETO
- Facilitated various routine screenings such as: (ASQ) developmental screening, (EPDS) depression screening, and (RAT) relationship assessment tool.

Education/Certifications

Bachelor of Science, Public Health, Coastal Carolina University, Conway, SC, 2015

Trust-Based Relational Intervention Caregiver Training, Salem Family Resource Center, 2025

Certified Lactation Counselor, ALPP, 2023

Logic Model Certification, Coastal Carolina University, 2013

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Melissa Hogan, Comprehensive Family Support Services Home Visitor & Kinship Navigator
Community Action Partnership of Strafford County
[redacted] [redacted]

Work Experience

Comprehensive Family Support Services Home Visitor & Kinship Navigator, Community Action Partnership of Strafford County, Rochester NH, December 2024 – present

- Delivers home-based case management and crisis support to families and kinship caregivers using trauma-informed, solution-focused approaches.
- Develops and maintain Individual Family Support Plans with family-led goal setting and monitoring.
- Facilitates parenting education, developmental screenings, and community events.
- Connects families with resources and advocate for those facing social, emotional, and systemic challenges.
- Documents confidential casework in accordance with program standards and attend ongoing training in family systems and child development.

Family Support Supervisor, Criminal Justice Support Supervisor, and Peer Support Specialist, SOS Recovery Community Organization, June 2022 – December 2023

- Supervised and trained peer support staff assisting individuals affected by substance misuse and criminal justice involvement.
- Built strong partnerships with community agencies to ensure continuity of care.
- Delivered direct peer support and recovery coaching.
- Promoted empowerment through advocacy and recovery-oriented planning.

Professional Trainings

- Child Development & Health: ASQ-3, Home Visiting 101–103, Maternal Health
- CRSW Core: Peer-Assisted Recovery, Motivational Interviewing, Suicide & HIV Prevention, Co-occurring Disorders
- Cultural Competency: LGBTQIA+ Inclusion, Cultural Humility (Immigrant & Dual-Language Families), Compassionate Communication
- Family & Trauma Support: Trauma-Informed Care, ACES, Child Abuse Prevention, Parenting a Second Time Around
- Systems Training: NH EASY, Empowor, BFA

Education/Certifications

Certification, Standards of Quality for Family Strengthening and Support, NH Children's Trust, February 2025

Certification, Mental Health First Aid, Cornerstone VNA, January 2025

Certification, First Aid/CPR/AED, American Red Cross, January 2025

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Brittney Pelletier, Comprehensive Family Support Services Home Visitor, Kinship Home Visitor
Community Action Partnership of Strafford County
[redacted] [redacted]

Work Experience

Comprehensive Family Support Services / Kinship Home Visitor, Community Action Partnership of Strafford County, Rochester, NH, August 2024 – Present

•Provide comprehensive, strength-based home visit and case management services to families working toward stability and self-sufficiency.
• Conduct assessments and develop individualized family service plans addressing parenting education, housing stability, employment, healthcare access, financial security, and behavioral health needs.
• Apply the Protective Factors Framework to promote parental resilience, social connections, knowledge of child development, concrete support in times of need, and children's social and emotional competence.
• Coordinate care with healthcare providers, early childhood programs, housing agencies, schools, and community partners.
• Maintain detailed documentation, progress notes, and compliance records in alignment with agency and program standards.
• Advocate for families while promoting dignity, independence, and long-term prevention-focused outcomes.
• Established the Invitation to Change Support Group for Kinship Caregivers, trained colleagues in facilitation, and handed the program over to the current facilitator and attendees for ongoing success, consistent attendance, and positive feedback.

Recovery Center Supervisor / Family Support Specialist, SOS Recovery Community Organization, Rochester, Dover, Exeter, NH, August 2022 – July 2024

• Supervised and supported staff delivering recovery-oriented and behavioral health services across multiple locations.
• Nurturing Parenting Curriculum Certified Facilitator
• Provided reflective supervision, staff training, and performance support.
• Delivered peer-informed family support services grounded in lived experience in long-term recovery.
• Coordinated referrals for substance use treatment, mental health counseling, housing assistance, employment services, and reentry supports.
• Collaborated with healthcare providers, probation and parole officers, legal professionals, and social service agencies to support community reintegration.
• Ensured accurate documentation, reporting, and program compliance.
• Developed and facilitated family education and parenting initiatives.
• Managed the nonprofit's newsletter, maintained sponsor and donor relations, and managed all social media accounts.
• Led fundraising, community events, and marketing for the organization.
• Managed volunteers and maintained community relations.

Education/Certifications/Other Experience

High School Diploma, Noble High School, North Berwick, ME, 2013
Leadership Seacoast Graduate, Leadership Seacoast, 2024
Certified Recovery Support Worker (expired Dec 2025)
Brings lived experience in long-term recovery, strong behavioral health knowledge, and a deep commitment to empowering families through prevention-focused, culturally responsive practices.

Organizations

Certified SOS Trainer, Connor's Climb, NH, 2024 – Present
Volunteer, Somersworth Children's Festival Association, Somersworth, NH, 2013 – Present

community Action PARTNERSHIP of Strafford County

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Arianna Newman MSW, RPC-I, Healthy Families America Supervisor & Newborn Navigator
Community Action Partnership of Strafford County
[redacted] [redacted]

Work Experience

Newborn Navigator, Community Action Partnership of Strafford County, Rochester NH, December 2025 – present

- Reaches out to all Newborn Navigator Referrals within the contract timeline
- Completes Prescreen with NN families once connected/assesses interest in home visiting
- Describes program to families and assesses need
- Schedules 1-3 home visits with interested families
- Completes required assessments and consents with families
- Prioritizes family need
- Provides concrete support and parenting support related to the prenatal, perinatal and postpartum periods
- Assess families interest in extending home visiting services with other CAPSC home visiting programs
- Facilitates warm hand off with home visiting services if the family desires this
- Completes Family Satisfaction Survey's at conclusion of NN home visiting
- Enters data into FSDS and Empowor databases
- Analyzes data and reports findings to HV program manager and Director

Healthy Families America Supervisor, Community Action Partnership of Strafford County, Rochester NH, August 2024 – present

- Supervises HFA Family Support Specialists (FSSs) and HFA Family Resource Specialists (FRSs)
- Reviews FSS and FRS case notes, assessments, service plans, and referrals
- Meets weekly with FSS and FRS for reflective supervision and completes supervision notes
- Uses HFA reflective strategies with FSS/FRS in formal and informal supervision
- Manages oversight of FSS/FRS caseloads
- Collaboratively reviews FRS FROG assessments with FRS
- Gathers HFA data and inputs into CAPSC required spreadsheets/state required spreadsheets/HFA required spreadsheets
- Pulls and submits quarterly reports to state
- Attends CAPSC, state and national meetings and trainings pertaining to HFA
- Collaborates with Family Services team to plan/build Family Resource Center groups and events
- Plans and facilitates Family Resource Center Groups
- Collaborates with HFA program manager related to Community Advisory Committee
- Interviews HFA FSS/FRS job candidates
- Shadows FSS/FRS during home visits
- Develops and implements onboarding and training schedules for new HFA staff
- Maintains a small family caseload and conducts responsibilities related to direct support

Healthy Families America Family Support Specialist, Community Action Partnership of Strafford County, Rochester NH, June 2023 – August 2024

- Maintained caseload of 12-15 families
- Met families in their homes and in the community as appropriate

Docusign Envelope ID: 705EC138-4777-80BC-83A4-F2A36C95BCA6

Arianna Newman MSW, Healthy Families America Supervisor & Newborn Navigator
Community Action Partnership of Strafford County
[redacted] [redacted]

- Developed and updated HFA service plans
- Utilized HFA Reflective Strategies to build trust with families
- Facilitated family goal planning and supports in families reaching goals
- Utilized ETO and Empowor note keeping systems to complete visit notes, document assessments, and track referrals
- Implemented Parents As Teachers Curriculum with families to drive visit planning/support parent child interactions and child development
- Completed assessments (FROG, EPDS, ASQ-3/ASQ-SE, CCI)
- Referred families to community resources and CAPSC consultants
- Worked with Family Services team to develop, facilitate, and implement outreach activities (playgroups, community baby shower, etc.)
- Followed HFA and CAPSC policies and procedures
- Participated in reflective supervision and reflective mental health consultation

Participant in HFA, raising infants and toddlers, April 2020 – June 2023

Family Intervention Specialist, Youth Villages, Manchester, NH, January 2019 – January 2020

- Maintained caseload of four to five families
- Met with children and their families in the home/community three times per week
- Documented sessions collaboratively with families
- Used Youth Villages assessment tools collaboratively with families
- Utilized Youth Villages approved DBT, CBT curriculum to develop treatment plans for children and 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 2 weeks to meet changing family dynamics
- Taught life skills, anxiety management skills, and anger management skills
- Utilized motivational interviewing with parents experiencing IPV
- Collaborated with DCYF CPSWs, teachers, school administrators, group home counselors, CASA volunteers, PCPs, and families
- Provided crisis intervention during sessions and on an on-call basis
- Wrote client reports for DCYF court case, attended court hearings, and reported to a judge

Education/Certifications

Credential in Early Childhood Infant Mental Health/Reflective Practice Consultant I, November 2025

Master's of Social Work, Texas State University, San Marcos, TX, 2018

Bachelor's of Arts, Psychology, Texas State University, San Marcos, TX, 2014

FORM NUMBER P-37 (version 2/23/2023)

Subject: Comprehensive Family Support (CFS) (RFP-2027-DPH-05-COMPR-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 Greater Seacoast Community Health		1.4 Contractor Address 8 Greenleaf Woods Drive, Suite 100 Portsmouth, NH 03801	
1.5 Contractor Phone Number 603-422-8208	1.6 Account Unit and Class TBD	1.7 Completion Date June 30, 2029	1.8 Price Limitation $1,525,260
1.9 Contracting Officer for State Agency Robert W. Moore, Director		1.10 State Agency Telephone Number (603) 271-9631	
1.11 Contractor Signature Signed by: Justin Saint-Jacques 5579C270F0E1450... Date: 4/28/2026		1.12 Name and Title of Contractor Signatory Justin Saint-Jacques Justin Saint-Jacques	
1.13 State Agency Signature DocuSigned by: Iain Watt D778BB63F9704C7... Date: 5/1/2026		1.14 Name and Title of State Agency Signatory Iain Watt Director - DPH	
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 748734844941460... On: 5/1/2026			
1.17 Approval by the Governor and Executive Council *(if applicable)* G&C Item number:		G&C Meeting Date:	

Contractor Initials: Initial JS
Date: 4/28/2026

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

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

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

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

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

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

4. CONDITIONAL NATURE OF AGREEMENT.

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

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

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

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

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

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

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

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

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

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

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

7. PERSONNEL.

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

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

Initial JS

Contractor Initials

Date 4/28/2026

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

8. EVENT OF DEFAULT/REMEDIES.

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

8.1.1 failure to perform the Services satisfactorily or on schedule;

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

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

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

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

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

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

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

9. TERMINATION.

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

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

10. PROPERTY OWNERSHIP/DISCLOSURE.

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

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

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

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

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

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

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

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

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

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

Contractor Initials Initial JS

Date 4/28/2026

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

14. INSURANCE.
14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:
14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than $1,000,000 per occurrence and $2,000,000 aggregate or excess; and
14.1.2 special cause of loss coverage form covering all Property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the Property.
14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.
14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or any successor, a certificate(s) of insurance for all insurance required under this Agreement. At the request of the Contracting Officer, or any successor, the Contractor shall provide certificate(s) of insurance for all renewal(s) of insurance required under this Agreement. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

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

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

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

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

19. CHOICE OF LAW AND FORUM.
19.1 This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire except where the Federal supremacy clause requires otherwise. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.
19.2 Any actions arising out of this Agreement, including the breach or alleged breach thereof, may not be submitted to binding arbitration, but must, instead, be brought and maintained in the Merrimack County Superior Court of New Hampshire which shall have exclusive jurisdiction thereof.

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

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

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

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

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

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

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

Contractor Initials Initial JS
Date 4/28/2026

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

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, this Agreement, and all obligations of the parties hereunder, shall become effective on July 1, 2026 (“Effective Date”).

1.2. Paragraph 3, Effective Date/Completion of Services, is amended by deleting subparagraph 3.3., in its entirety and replacing it as follows:

3.3. Contractor must complete all Services by the Completion Date specified in block 1.7. 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 6, Compliance by Contractor with Laws and Regulations/Equal Employment Opportunity, Subparagraph 6.1., is amended as follows:

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, RSA 151:21 Patients’ Bill of Rights, civil rights and equal employment opportunity laws, and the Governor’s order on Respect and Civility in the Workplace, Executive Order 2020-01. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

1.4. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.5., as follows:

12.5. 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.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

1. Statement of Work

1.1. The Contractor must provide the Comprehensive Family Support (CFS) Program. The Contractor must provide services to pregnant and parenting women as well as other families with children up to eighteen (18) years of age who are:

1.1.1. Experiencing, or at risk of experiencing difficulty with:

1.1.1.1. Pregnancy;

1.1.1.2. Health and nutrition;

1.1.1.3. Education and employment;

1.1.1.4. Parenting challenges;

1.1.1.5. Social isolation;

1.1.1.6. Substance use disorders;

1.1.1.7. Mental health events;

1.1.1.8. Child abuse and neglect; and

1.1.1.9. Substance exposed infants.

1.1.2. Perinatal families of substance exposed infants.

1.1.3. At risk for child abuse and neglect.

1.1.4. Seeking Comprehensive Family Support (CFS) in a voluntary manner.

1.2. The Contractor must ensure all services are provided in the following DHHS Catchment Area: Seacoast District Office. The Contractor must maintain a physical office located within the Catchment Area. The Contractor must ensure::

1.2.1. The office is accessible to families and staff at least five (5) days per week Monday through Friday during standard business hours of 8:00 am to 4:00 pm, excluding state holidays.

1.2.1.1. Evening hours are available at least one (1) night per week.

1.2.2. Families are provided flexible opportunities to meet in the home or community.

1.2.3. The office location remains in compliance with the Americans with Disabilities Act (ADA) accessibility requirements.

1.2.4. No duplication of services.

1.3. The Contractor must meet the Standards of Quality for Family Strengthening &

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Support as defined by the National Family Support Network. This includes:

1.3.1. Maintaining a current status throughout the term of the Agreement of having completed a New Hampshire self-assessment and received designation as a Family Resource Center (FRC) of Quality.

1.4. Comprehensive Family Support (CFS) Home Visiting Program

1.4.1. The Contractor must deliver high-quality, responsive CFS home visiting services to New Hampshire families with children ages 0-18, based on their emerging needs. The Contractor must ensure that families enrolled in CFS have access to all FRC services, home visiting services, parent education, parent support groups, father groups, parent cafes, information and referral, and case management. The Contractor must work collaboratively with the Department to deliver statewide CFS home visiting services that:

1.4.1.1. Promote healthy pregnancy and birth outcomes.

1.4.1.2. Support safe and nurturing environments for children and adolescents.

1.4.1.3. Improve maternal and child health.

1.4.1.4. Encourage positive parenting practices.

1.4.1.5. Reduce child maltreatment.

1.4.1.6. Increase linkages and referrals to community resources and supports.

1.4.2. The Contractor must ensure each family has a completed Individual Service Plan (ISP) that identifies and addresses barriers to achieving optimal health, well-being, and resiliency. The Contractor must use the ISP template provided by the Department and must include information about the education and support services that will be delivered across key outcome domains, which may include but are not limited to:

1.4.2.1. Maternal Health.

1.4.2.2. Child Health.

1.4.2.3. Child Development and School Readiness.

1.4.2.4. Community Linkages and Referrals.

1.4.2.5. Family Economic Self Sufficiency.

1.4.2.6. Positive Parenting Practices.

1.4.2.7. Preventative Child Care Scholarship.

1.4.3. The Contractor must provide CFS services using the Strengthening Families Framework developed by the Center for the Study of Social

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Policy (CSSP), addressing the five (5) Protective Factors which are:

1.4.3.1. Parental Resilience.

1.4.3.2. Social Connections.

1.4.3.3. Knowledge of parenting and child development.

1.4.3.4. Concrete supports in times of need.

1.4.3.5. Social and emotional competence of children.

1.4.4. The Contractor must ensure CFS services are delivered through a variety of methods, including but not limited to:

1.4.4.1. Home visiting services.

1.4.4.2. Educational workshops.

1.4.4.3. Peer-led or professionally facilitated support groups.

1.4.4.4. Parenting education and family support activities.

1.4.4.5. Trauma-informed services that recognize and respond to the impact of adverse experiences.

1.4.4.6. Access to concrete resources in times of need.

1.4.5. The Contractor must provide home visiting services that are respectful of the families served, strengths-based and family-centered, ensuring participation is voluntary and addresses each family's values, traditions, and needs.

1.4.6. The Contractor must collaborate with program participants to develop individualized, goal-oriented plans that improve economic self-sufficiency and long-term family stability. These goals may include, but are not limited to:

1.4.6.1. Planning future pregnancies.

1.4.6.2. Continuing education or vocational training.

1.4.6.3. Securing and maintaining employment.

1.4.6.4. Strengthening the family's Protective Factors.

1.4.6.5. Obtaining safe and stable housing.

1.4.6.6. Accessing community-based services and supports.

1.4.6.7. Participating in parenting education on topics such as:

1.4.6.7.1. Child development.

1.4.6.7.2. Child behavior and emotional regulation.

1.4.6.7.3. Child health and wellness.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

1.4.6.7.4. Coping strategies and problem-solving skills.

1.4.6.7.5. Home and child safety.

1.4.6.7.6. Positive parenting techniques.

1.4.7. The Contractor must promote education on health and safety topics including, but not limited to:

1.4.7.1. Providing child safety education through handouts and discussion using evidence-based curricula, including resources from the Centers for Disease Control (CDC) covering a wide range of topics such as:

1.4.7.1.1. Car seat safety and installation checks.

1.4.7.1.2. Use of safety gates and fall prevention.

1.4.7.1.3. Safe use of portable cribs and sleep environments.

1.4.7.1.4. Safe sleep practices to reduce the risk of Sudden Unexpected Infant Death Syndrome (SUID).

1.4.7.1.5. Lead poisoning prevention, including identification of environmental hazards.

1.4.7.1.6. Home safety strategies, including the use of window guards.

1.4.7.1.7. Oral health education for infants, children, and adolescents.

1.4.7.1.8. Understanding Adverse Childhood Experiences (ACEs) and building Protective Factors.

1.4.7.1.9. Smoking cessation education and referrals.

1.4.7.1.10. Educating families on the importance of primary care and preventative health services, including:

1.4.7.1.11. Access to preventative health care.

1.4.7.1.12. Immunizations.

1.4.7.1.13. Establishing a medical home for ongoing care coordination.

1.4.7.1.14. Improving child safety and health outcomes through regular well-child visits.

1.4.7.1.15. Postpartum health care follow up and planning for future pregnancies.

1.4.8. The Contractor must ensure all women have access to validated

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

screening tools, listed in 1.6.3, for prenatal and postpartum depression, and must refer all women who screen positive for maternal depression to appropriate follow-up care. The Contractor must provide support for participant enrollment in primary care and pediatric services.

1.4.9. The Contractor must complete and renew a Release of Information (ROI) form annually with all CFS participants for all programs, regardless of the type of services they are enrolled in. The ROI must include but is not limited to:

1.4.9.1. Acknowledgement of data collection within the Department's Family and Community Health Data System (FCH-DS).

1.4.9.2. Acknowledgement of sharing personal identifiable information with the Department.

1.4.9.3. Acknowledgement of the purpose of releasing data to the Department to review program outcomes and facilitate quality improvement activities.

1.4.9.4. Acknowledgement that Family Service Record outcome data will be kept and tracked for three (3) subsequent years following discharge.

1.4.9.5. All video recording, storage, access, and sharing requirements set forth elsewhere in this Scope of Services are contingent upon and governed by the participant consent requirements described in Section 1.7. The Contractor must use a paper coaching tool for participants that do not consent to video recording.

1.5. <u>CFS Newborn Navigation Services</u>

1.5.1. The Contractor must provide Newborn Navigation services as part of the CFS home visiting program. The purpose of newborn navigation services is to engage newborn families as early as possible in early childhood home visiting programs, community resources linkage, and services.

1.5.2. The Contractor must engage with families during pregnancy or within six (6) months of birth and provide at minimum one (1) voluntary CFS home visit within that timeframe. The visit must include care coordination services for pregnant and newborn families, with priority given to:

1.5.2.1. Family household at or below 250% of the federal poverty

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

level.

1.5.2.2. Single-parent households.

1.5.2.3. First time parents.

1.5.2.4. Families with other children under three (3) years of age.

1.5.2.5. Parents under twenty-five (25) years of age.

1.5.2.6. Parents with limited educational attainment.

1.5.3. The Contractor must make initial contact with families during pregnancy, prior to hospital discharge, or no later than six (6) months following birth to:

1.5.3.1. Schedule the initial home visit and collect intake prescreening information determined by the Department for follow-up; or

1.5.3.2. Provide FRC information to families who decline the home visit.

1.5.4. The Contractor must collect prescreening intake information and enter it into the FCH-DS prior to conducting the home visit.

1.5.5. For families who consent to CFS Newborn Navigation services, the Contractor must provide a Welcome Newborn Family bag, which includes Department-approved information and resources on topics such as:

1.5.5.1. WIC.

1.5.5.2. Medicaid.

1.5.5.3. Supplemental Nutrition Assistance Program (SNAP).

1.5.5.4. FRC services.

1.5.5.5. Lead poisoning prevention.

1.5.5.6. Safe sleep.

1.5.5.7. Infant nutrition.

1.5.5.8. Additional items as identified by the CFS agency and approved by the Department.

1.5.6. The Contractor must ensure enrolled families may receive up to three (3) Newborn Navigator home visits, all of which must occur within (6) months of enrollment.

1.5.7. The initial CFS Newborn Navigation home visit includes a comprehensive Family Needs Assessment and support services,

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

including but not limited to:

1.5.7.1. Maternal depression screening.

1.5.7.2. Developmental screening.

1.5.7.3. Referrals based on identified family needs.

1.5.7.4. Parent education and child safety (e.g., safe sleep, lead poisoning prevention, home safety).

1.5.7.5. Breastfeeding and lactation support.

1.5.7.6. Postpartum planning future pregnancies.

1.5.7.7. Infant feeding and nutrition support.

1.5.7.8. Positive parenting practices, including attachment.

1.5.7.9. Completion of release of information forms for referrals and sharing programmatic data with the Department.

1.5.8. Information and referral support to enroll in HFA or FCU programs. The CFS family support specialist delivering newborn navigation services must work with families to identify ongoing support needs and facilitate referrals to appropriate services and programs.

1.5.9. These include but are not limited to:

1.5.9.1. Family Resource Center services,

1.5.9.2. Family Check Up,

1.5.9.3. Healthy Families America (HFA),

1.5.9.4. The Supplemental Nutrition Program for Woman, Infants and Children (WIC), and

1.5.9.5. Birth to Three Early Supports and Services.

1.5.10. The Contractor must ensure data related to CFS Newborn Navigation services is collected in the Department owned FCH-DS and reported in coordination with the Department.

1.5.11. The Contractor must collaborate with, build partnerships, and coordinate enrollment planning with local healthcare agencies to promote referrals from healthcare providers to CFS's Newborn Navigation services. Partners and collaboration examples include, but

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

are not limited to:

1.5.11.1. Birthing hospitals.

1.5.11.2. OB/GYN providers.

1.5.11.3. Pediatric healthcare providers.

1.5.11.4. Family medicine and primary care providers.

1.5.11.5. Community Health Centers.

1.5.12. The Contractor must offer satellite health office hours to increase accessibility, as needed.

1.5.13. The Contractor must distribute CFS Newborn Navigation informational and printed materials, as appropriate.

1.5.14. The Contractor must also collaborate and build partnerships with local early care and education programs that serve newborn families to coordinate services, prevent duplication. and enhance care coordination. These programs include, but are not limited to:

1.5.14.1. WIC.

1.5.14.2. Birth to Three Early Supports and Services.

1.5.14.3. Healthy Families America (HFA).

1.5.14.3.1. CFS staff delivering Newborn Navigation services must maintain an active collaboration with HFA, including a clearly defined referral and enrollment process to ensure that families who may be better served through HFA are appropriately connected.

1.5.14.3.2. Pregnant and newborn families identified as having high-risk factors or who meet eligibility criteria for HFA must be engaged and referred or enrolled into HFA through joint home visits and warm handoffs.

1.5.15. The Contractor must work in close collaboration with the Department's Quality Improvement Coordinator to ensure all readiness activities are completed prior to program implementation and support ongoing quality improvement and program oversight. This includes, but is not limited to:

1.5.15.1. Completion of CFS onboarding training.

1.5.15.2. Development and implementation of a family recruitment and

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

enrollment plan.

1.5.15.3. Creation of a health provider and community engagement strategy to align services and strengthen referral pathways.

1.5.15.4. Participation in monthly Community of Practice.

1.5.15.5. Execution of additional activities that support continuous quality improvement.

1.5.15.6. Collection of program data, including administration of a Department-approved post-participant survey, which may include, but is not limited to:

1.5.15.6.1. Assessment of participant knowledge related to community resources, postpartum depression, and newborn care following the initial home visit.

1.5.15.6.2. Evaluation of referrals made and connections established with community resources.

1.5.15.6.3. Measurement of participant satisfaction and likelihood to recommend Newborn Navigation services to others.

1.5.15.6.4. Collection of additional feedback to inform and enhance continuous quality improvement efforts.

1.5.16. The Contractor must collaborate with the Department to provide timely and accurate information related to program evaluation and other data requests necessary to support the Department's goals and reporting requirements. The Contractor must be prepared to share information with various divisions within the Department, including but not limited to:

1.5.16.1. Division of Public Health.

1.5.16.2. Division of Economic Stability.

1.5.16.3. Division of Long Term Supports and Services.

1.6. CFS Assessments and Referrals

1.6.1. The Contractor must actively engage and collaborate with the Department, including the Division for Children, Youth and Families (DCYF), and community partners such as schools, community mental health centers and health clinics to promote referrals into the program and prioritize enrollment of families who may be experiencing

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

circumstances that include, but are not limited to:

1.6.1.1. A previous or current founded or unfounded report to child protective services.

1.6.1.2. Having a child with low birth weight and/or neurodevelopmental delays.

1.6.1.3. A history of, or current, parental or caregiver substance abuse.

1.6.1.4. A history of, or current, mental health concerns affecting the parent, caregiver, or child(ren).

1.6.1.5. Household income at or below 250% of the Federal Poverty Level.

1.6.1.6. A family history of intimate partner violence.

1.6.1.7. Evidence of insecure attachment in the child's early years.

1.6.1.8. Pregnancy; birth of a child within the past twelve (12) months; anticipated birth of an additional child within the next six (6) months; or the birth or expected birth of a child with special healthcare needs.

1.6.1.9. Pregnant participants with prenatal substance use concerns, and families with substance-exposed infants.

1.6.1.10. Pregnant or post-partum participants with a Plan of Safe Care, or those in need of support to develop one.

1.6.1.11. Families with more than one (1) child under the age of three (3).

1.6.1.12. Experiences of physical or social isolation, or any other factors contributing to unhealthy social and emotional outcomes.

1.6.1.13. Home conditions that present a health and/or safety risk to family members.

1.6.1.14. A child or family member with chronic health, behavioral, or developmental conditions that impact parenting.

1.6.1.15. Results from the Ages and Stages Questionnaire (ASQ) or Ages and Stages Questionnaire Social Emotional (ASQ-SE) indicating developmental delays.

1.6.1.16. Families impacted by traumatic events.

1.6.1.17. Families receiving Temporary Assistance to Needy Families (TANF) cash assistance or enrolled in any

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Medicaid program.

1.6.1.18. Engagement with Substance Use Disorder (SUD) services.

1.6.2. The Contractor must complete a comprehensive Family Needs Assessment identified by the Department for each family served utilizing an intake assessment tool as identified by the Department within the first three (3) home visits, in order to identify family strengths, potential risk factors, and current and emerging needs. The Contractor must also conduct reassessments in accordance with the Family Check Up (FCU) model schedule, at a minimum of every six (6) months and again at twelve (12) months, or as otherwise directed by the Department.

1.6.3. The Contractor must utilize additional validated screening tools to support families and ensure budgeting to access tools, which may include, but are not limited to:

1.6.3.1. The Ages and Stages Questionnaires (ASQ-3 and ASQ:SE).

1.6.3.2. Brief System Inventory (BSI)

1.6.3.3. Edinburg Postnatal Depression Scale. (EPDS)

1.6.3.4. Developmental and social-emotional screenings for children ages one (1) month through five (5) years.

1.6.4. The Contractor must report on a monthly basis the number of families who received ASQ-3 and ASQ:SE screenings in a format specified by the Department.

1.6.5. The Contractor must provide expedited warm hand off referrals to appropriate community-based services and other resources that support families within their home communities, which may include, but are not limited to:

1.6.5.1. Childcare Aware of New Hampshire.

1.6.5.2. The Department's District Offices for assistance with program eligibility determinations.

1.6.5.3. Specialized Medicaid services, including Birth to Three Early Supports and Services.

1.6.5.4. The Supplemental Nutrition Program for Women, Infants and Children (WIC), Nutrition programs for breastfeeding

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

support, nutrition education, and access to healthy foods.

1.6.5.5. NH Employment Security.

1.6.5.6. Local school districts.

1.6.5.7. Family violence prevention agencies.

1.6.5.8. Mental health services.

1.6.5.9. Nutrition education and healthy foods.

1.6.5.10. Financial literacy and money management programs.

1.6.5.11. Smoking cessation programs.

1.6.5.12. Independent living skills programs.

1.6.5.13. Adult education programs.

1.6.5.14. Literacy education services.

1.6.5.15. Employment services.

1.6.5.16. Vocational rehabilitation services.

1.7. CFS Family Check Up Services

1.7.1. The Contractor must implement Northwest Prevention Science's Family Check-Up® (FCU) model, including the FCU portal. The Contactor must execute an agreement with Northwest Prevention Science Inc. before accessing the FCU portal or entering data.

1.7.2. The Contractor must provide at least one (1) trained staff per Catchment Area to implement the FCU model, within year one (1) of this Agreement. Training requirements include but are not limited to:

1.7.2.1. Motivational interviewing.

1.7.2.2. Everyday Parenting Curriculum, provided by the Department.

1.7.2.3. CFS onboarding and orientation training, provided by the Department.

1.7.3. The Contractor must work with the Department to support the implementation of the evidence-based FCU model to enhance the Department's CFS home visiting program services.

1.7.4. The Contractor must obtain all materials and resources required by the Department to successfully implement and deliver the FCU model with fidelity, including but not limited to a FCU informational flyer and/or brochure available for use with families and referral sources according to the FCU model resources.

1.7.5. The Contractor must provide access to computers, laptops, or other devices to use for video recordings, coding interaction videos,

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

downloading and compiling assessment data. To meet these requirements, the Contractor must ensure the availability of the following specific materials, tools, and resources:

1.7.5.1. Devices with video recording capability to support the following activities:

1.7.5.1.1. Contractor video recording families during family interaction tasks, which are part of the FCU assessment process.

1.7.5.1.2. Contractor video recording family session monthly to share with their Supervisor-Trainers for fidelity checks.

1.7.5.1.3. Supervisor-Trainer's video recording family sessions, supervision, and trainings for the FCU certification process.

1.7.5.2. Devices for families to complete FCU questionnaires on the FCU Portal Website online. Devices must be capable of establishing an internet connection independently or through hotspots. Contractor agrees that while families may use their own devices for the FCU questionnaire, Contractor-provided devices during assessment sessions streamline the process and increase the likelihood of questionnaire completion.

1.7.5.3. Devices must have the following capabilities:

1.7.5.3.1. Able to stand alone on a surface or on a tripod during the video recording process.

1.7.5.3.2. Secure access to prevent unauthorized viewing of confidential information, since providers will leave the room while families complete interaction tasks.

1.7.5.3.3. HIPAA-compliant video storage.

1.7.6. Contractor must provide consent forms that must cover consent for the family for video recording, with separate sections or forms addressing Family Interaction Tasks and session recordings. Consents must clearly outline:

1.7.6.1. The purpose of videos.

1.7.6.2. Who may access them.

1.7.6.3. The timeline for destruction of videos, in accordance with

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

HIPAA retention requirements .

1.7.6.4. A statement that consent to video recording is not required for program participation.

1.7.7. The Contractor must ensure all video recording adheres to the requirements outlined in Exhibit E: DHHS Information Security Requirements.

1.7.8. Contractor must provide toys for family interaction tasks, including:

1.7.8.1. Toys appropriate for children ages two (2) to nine (9) years old.

1.7.8.2. A basket large enough to hold toys for younger children.

1.7.8.3. Several puzzles of varying difficulty.

1.7.8.4. Blocks sufficient to build a tower.

1.7.8.5. Paper and colored pens or crayons.

1.7.9. The Contractor must adapt FRC documentation and intake procedures to integrate FCU model activities. This includes the completion of FCU family questionnaires via the FCU portal.

1.7.10. Until all CFS home visitors are trained to deliver FCU, the Contractor's FCU Specialist must enroll families with children ages 0-18 on a voluntary basis. The target population for the FCU model includes, and priority enrollment through an intake process is given to, families referred to CFS who meet the following criteria:

1.7.10.1. Parents or caregivers with a diagnosed mental illness, and/or families with children who have a diagnosed mental illness.

1.7.10.2. Families with a history of child abuse or neglect or at risk of foster care placement.

1.7.10.3. Families with a history of substance use disorders or those in need of substance use disorder treatment.

1.7.10.4. Families with children experiencing low student achievement.

1.7.10.5. All families with children ages 0-5.

1.7.10.6. Families who meet eligibility criteria for Healthy Families America (HFA) will be enrolled in the Department's HFA program when appropriate and available.

1.7.11. The Contractor must ensure that dedicated FCU staff and supervisors implement the model with fidelity and actively engage

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

with the Department in fidelity monitoring and quality assurance activities. Services must include, but are not limited to:

1.7.11.1. Conducting in-person visits with each FCU-enrolled family, including a minimum of three (3) structured intake and assessment sessions, followed by ongoing support and documentation. These sessions must include:

1.7.11.1.1. An Initial Intake Session to establish rapport, gather information about the family system, and identify existing strengths and challenges.

1.7.11.1.2. A Second Assessment Session in which the Contractor assists the family in completing standardized questionnaires and assessment tools to evaluate needs and areas requiring support.

1.7.11.1.3. A Third Assessment Session focused on collaborative goal setting, which must include:

1.7.11.1.3.1. Development of a service plan incorporating Everyday Parenting sessions;

1.7.11.1.3.2. Referral and linkage to appropriate community-based resources; and

1.7.11.1.3.3. Identification and prioritization of the family's goals and service needs.

1.7.11.2. Following the initial session, within 30 business days, the Contractor's FCU Specialist must:

1.7.11.2.1. Conduct follow-up visits using strategies from the Everyday Parenting curriculum, tailored to the results of the family's assessments.

1.7.11.2.2. Ensure accurate and timely documentation in the FCH-DS and FCU online assessment tools, summarizing recommendations and next steps.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

1.7.11.2.3. Review family goals and progress on a quarterly basis in collaboration with the family.

1.7.11.2.4. Assess the family's readiness to change as part of ongoing engagement and service planning.

1.7.12. The Contractor must ensure the following:

1.7.12.1. Provide the Department with access to video-recorded family sessions to support monitoring of implementation and fidelity to the model, upon consent granted by the family in Section 1.7.3.4.

1.7.12.2. Provide the Department with a written policy regarding the use of video recording for the purpose of home visits. The Contractor must ensure all staff and subcontractors sign a confidentiality agreement and adhere to the confidentiality policy outlined in the written policy, and notify staff and subcontractors that violations may result in disciplinary action.

1.7.12.3. Obtain and document individual consent for all video-recorded sessions, including consent to share recordings with the Department for quality improvement purposes.

1.7.12.4. Ensure that appropriate equipment is available and maintained for home visitors to conduct video recordings, such as video camera, tablet, or other device with recording capabilities. The Contractor must ensure that staff does not use personal cell phones or other personal devices to conduct video recording.

1.7.13. The Contractor must only use marketing materials that have been reviewed and approved by the Department.

1.7.14. The Contractor must collaborate with the Department's CFS Program Manager, Quality Improvement and Training Coordinator, and FCU Model experts to ensure all readiness activities are completed prior to program implementation, including but not limited to:

1.7.14.1. Completion of FCU Model training.

1.7.14.2. Completion of Everyday Parenting Curriculum training.

1.7.14.3. Completion of Motivational Interviewing training.

1.7.14.4. Implementation of data collection processes, inc g a

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Department-approved participant post-survey.

1.7.14.5. Participation in monthly Supervisor Consultation, facilitated by the Department, to support implementation and fidelity to the FCU model.

1.8. Staffing and Training

1.8.1. The Contractor must designate at least one (1) dedicated FCU Specialist position as part of the CFS home visiting program. The FCU Specialist must initially allocate a minimum of 20% of their workload to family enrollment and model implementation activities.

1.8.2. The Contractor must:

1.8.2.1. Ensure that all relevant staff participate in and complete these trainings as scheduled, and maintain documentation of completion for Department review.

1.8.2.2. Ensure that all relevant staff are trained in Motivational Interviewing.

1.8.2.3. Budget for additional staff development opportunities based on the needs of their team, as identified in collaboration with the Department's Quality Improvement and Training Coordinator.

1.8.3. The Contractor must ensure the FCU Specialist transitions to dedicating 100% of their workload to the implementation of the FCU model by June 30, 2027.

1.8.4. The Contractor may elect to designate more than one (1) FCU Specialist to implement the model during the first year of program implementation.

1.8.5. The Contractor must identify additional CFS staff to participate in being trained to implement the FCU model in year two and again in year three of program implementation, to support sustainability and build long-term capacity.

1.8.6. The Contractor must ensure all CFS home visitors complete Department provided training in and utilize the Everyday Parenting Curriculum and CFS Program Manual, which is:

1.8.6.1. The Everyday Parenting Manual, Everyday Parenting: A Professional's Guide to Building Family Management Skills (2nd edition). Available at www.researchpress.com

1.8.7. The Contractor must ensure all CFS home visitors are trained in core CFS competencies and collaborate with the Department's Continuous Quality Improvement (CQI) and training coordinator to implement a

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

comprehensive staff training plan that ensures a qualified workforce and identifies training needs and gaps. CFS home visitors must complete Department provided training which will include at a minimum, Everyday Parenting and CFS onboarding training.

1.8.8. The Contractor must identify a qualified supervisor for the FCU staff be trained in the FCU model and be responsible for ensuring adherence to the model's implementation standards. The FCU supervisor must fulfill the following responsibilities:

1.8.8.1. Participate in monthly FCU supervisor consultation meetings, as scheduled by the Department, to enhance supervisory capacity and support fidelity monitoring of the FCU implementation.

1.8.8.2. The Contractor must ensure the FCU supervisor is trained and certified by Northwest Prevention Science as a FCU supervisor. The FCU supervisor must provide implementation support to FCU staff, including but not limited to individualized consultation, direct observation, and performance evaluation, to ensure fidelity to the model.

1.8.9. The Contractor must ensure that both the FCU specialist and FCU supervisor receive training in the Family Check-Up model, Motivational Interviewing, Newborn Navigation Core Training, and Everyday Parenting curriculum, and that they meet the minimum educational qualifications required for their roles.

1.8.10. The Contractor must use the FCU model, Motivational Interviewing and Everyday Parenting curriculum training to support effective implementation.

1.8.11. The Contractor must ensure that all staff, subcontractors, and volunteers undergo the required criminal background checks registry checks, as described in Section 1.12.

1.8.12. If the Contractor provides transportation for individuals served under this Agreement, the Contractor must ensure:

1.8.12.1. The enrolled parent or caregiver must be present for all sessions.

1.8.12.2. All drivers have a valid State Issued and a safe driving record;

1.8.12.2.1. All vehicles are approved by the Contractor and meet applicable safety standards;

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

1.8.12.2.2. Compliance with all applicable local, state, and federal transportation safety rules and standards;

1.8.12.2.3. Proof of valid automobile insurance is provided to the Department that includes bodily injury and property damage in amounts of not less than $100,000 per occurrence and $300,000 aggregate or excess, for all owned, hired, or non-owned vehicles used to provide transportation.

1.8.13. The Contractor must ensure staff complete required training in the principles of family support, maternal and child health, HIPAA as well as the child welfare system, with concentrations in service array and working in multidisciplinary teams.

1.8.14. The Contractor must consistently engage in purposeful staff development activities that support professional growth and improve the quality of services provided. These activities must include, but are not limited to, training and enrichment in the following areas: Skills necessary to understand and respond to the unique needs, strengths, and resources of the families and communities served.

1.8.14.1. The ability to exercise empathy, with an understanding of the complex family dynamics and stressors experienced by parents and caregivers.

1.8.14.2. The use of effective, evidence-informed home visiting practices, including strategies that are grounded in research and adapted to family needs, as well as standards for documentation and reporting.

1.8.15. The Contractor must provide an adequate number of home visitors to implement the CFS program, as approved by the Department. All staffing vacancies, transitions, or changes in personnel assignments must be reported to the Department in a timely manner.

1.8.16. The Contractor must ensure the CFS program director, supervisor, or program managers have:

1.8.16.1. A Bachelor's degree in public health, early childhood, social work, human services administration, or a related field focused on supporting children and families, with four (4) years of experience working with families and children in a social service, home health, or other early childhood program setting, including supervisory experience;

1.8.16.2. An Associate degree with five (5) years of prior experience working with families and children in a social service, home

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

health, or early childhood program setting, including supervisory experience;

1.8.16.3. Or at a minimum, high school diploma or equivalent with six (6) years of relevant lived and professional experience working with families and children in a social service, home health, or other early childhood program setting, including supervisory responsibilities, and written approval from the Department to fulfill the duties of the position.

1.8.17. The Contractor must ensure CFS Home Visitors have:

1.8.17.1. An Associate degree with four (4) years of prior experience working with families and children in a social service, home health, or other early childhood program setting;

1.8.17.2. Or at a minimum, a high school diploma or equivalent with five (5) years of experience providing services to families in a social service, home health, or other early childhood program setting; and demonstrated lived and professional experience aligned with this role, with written approval from the Department.

1.8.18. The Contractor must ensure the CFS Family Check Up Home Visitor has at a minimum:

1.8.18.1. A Bachelor's degree or higher; and

1.8.18.2. Two (2) years of experience providing services to families in a social service, home health, or other early childhood program setting.

1.8.18.2.1. If a Bachelor's-level staff is not available, the Contractor may recommend qualified team members to perform FCU. A training plan and summary of relevant skills and clinical experience must be submitted with the application and approved by the Department.

1.8.19. The Contractor must ensure all CFS home visitors across all CFS programs are trained in the "Everyday Parenting" curriculum and Motivational Interviewing and adhere to its requirements within six (6) months of program implementation.

1.8.19.1. Although not required, the Contractor may allocate funding to train staff in additional evidence-based early childhood curricula, such as Growing Great Kids or Parents as Teachers.

1.8.20. The Contractor must demonstrate capacity and readiness to be trained

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

in and implement the Family Check Up model.

1.8.21. Staffing requirements are subject to change, contingent upon the Department's written approval.

1.9. Reporting

1.9.1. The Contractor must submit comprehensive quarterly reports highlighting program activities by the 15th calendar day of the month following the end of each reporting period. The first report is due by October 15, 2026, and must include:

1.9.1.1. The progress in achieving the stated outcomes; and

1.9.1.2. Feedback from families regarding the effectiveness, accessibility, and satisfaction of the services provided through participant surveys or post service delivery interviews.

1.9.2. The Contractor must submit an annual performance report to the Department by July 31st of each year, with the first report due on July 31, 2027, which includes, but is not limited to:

1.9.2.1. A summary of program accomplishments and key activities.

1.9.2.2. Staff training plan for each CFS home visitor.

1.9.2.3. Recommendations for service development, program enhancements, and outcome improvements.

1.9.2.4. Identification of systemic barriers impacting service delivery or access.

1.9.2.5. Results of family satisfaction surveys and analysis of trends.

1.9.3. The Contractor must transmit all data in a secure and encrypted format approved by the Department.

1.9.4. The Contractor must designate an FRC staff member to serve as the primary liaison for all programmatic communication between the Department and the Contractor, including, but not limited to:

1.9.4.1. Clinical updates.

1.9.4.2. Program announcements.

1.9.4.3. Reporting changes, errors, and requests.

1.9.4.4. Contract oversight.

1.9.4.5. Oversight of program operations and compliance

1.9.5. The Contractor must evaluate both the progress of parents and caregivers and the effectiveness of the programs and services provided.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

1.9.6. The Contractor must maintain a comprehensive and confidential Family Service Record for each family, in compliance with all Health Insurance Portability and Accountability Act (HIPAA) Privacy Rules. The Family Service Record must include, but is not limited to:

- 1.9.6.1. Participant names (Parent(s) and Child(ren)).
- 1.9.6.2. Participant DOBs (Parent (s) and Child(ren)).
- 1.9.6.3. Residence.
- 1.9.6.4. Primary language spoken in the home.
- 1.9.6.5. Educational level of parent(s) or guardian(s).
- 1.9.6.6. Digital Resources (phone, laptop, cell).
- 1.9.6.7. Source of referral.
- 1.9.6.8. Referral details and contact information.
- 1.9.6.9. Signed release of information form(s).
- 1.9.6.10. Household income.
- 1.9.6.11. Household size.
- 1.9.6.12. Employment status of parent(s) or guardian(s).
- 1.9.6.13. Access to prenatal and post-partum healthcare.
- 1.9.6.14. Home visits conducted and screening tools completed.
- 1.9.6.15. Topics reviewed during service delivery, including but not limited to:
  - 1.9.6.15.1. Maternal depression screening.
  - 1.9.6.15.2. Planning for future pregnancies.
  - 1.9.6.15.3. Positive parenting practices.
  - 1.9.6.15.4. Breastfeeding/lactation support.
  - 1.9.6.15.5. Nutrition.
  - 1.9.6.15.6. Child health.
  - 1.9.6.15.7. Maternal health and self-care.
  - 1.9.6.15.8. Referrals made for service linkage, including but not limited to:
  - 1.9.6.15.9. Concrete supports (e.g., housing, utilities, transportation).
  - 1.9.6.15.10. Childcare resources.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

1.9.6.15.11. Healthcare access and coordination.

1.9.6.15.12. Community-based supports and services.

1.9.6.15.13. Home visiting programs and service type.

1.9.6.15.14. Discharge date and reason for discharge.

1.9.6.15.15. Completion of post-service surveys.

1.9.6.15.16. Family needs assessment.

1.9.6.15.17. Child/Family Individualized Service Plan (ISP).

1.9.6.15.18. Documentation of prenatal and postpartum healthcare received.

1.9.6.15.19. Medicaid and other health insurance coverage.

1.9.6.15.20. Linkages with community-based resources.

1.9.6.16. Receipt of public benefits, including but not limited to:

1.9.6.16.1. SNAP.

1.9.6.16.2. New Hampshire Child Care Scholarship.

1.9.6.16.3. Medicaid.

1.9.6.16.4. Social Security Disability Insurance (SSDI).

1.9.6.16.5. Supplemental Security Income (SSI).

1.9.6.16.6. Temporary Assistance for Needy Families (TANF).

1.9.6.16.7. Special Supplemental Nutrition Program for WIC.

1.9.6.17. Participant service data, including but not limited to:

1.9.6.17.1. Date of service.

1.9.6.17.2. Participants present during service delivery.

1.9.6.17.3. Type of service provided and topics reviewed.

1.10. Performance Measures

1.10.1. The Contractor must provide performance data in a format and at a frequency specified by the Department. The following performance measures will be used to evaluate program effectiveness:

1.10.1.1. A minimum of 80% of participants must report a favorable

rating on satisfaction surveys administered by the Contractor.

1.10.1.2. At least 70% of referred families must enroll in services within 30 days of referral.

1.10.1.3. A minimum of 65% of enrolled families must complete the full service cycle as defined by the program model.

1.10.2. The Contractor must demonstrate annual improvement in outreach to high-risk populations, as measured by year-over-year increases in engagement rates.

1.10.3. The Contractor must submit data to support evaluation of long-term outcomes, including family stability, child health indicators, and service retention, as defined by the Department.

1.11. Meetings, Collaboration, and Data Sharing

1.11.1. The Contractor must participate in regular performance review meetings with the Department and peer providers to analyze data, share best practices, and identify areas for improvement.

1.11.2. The Contractor must collect and transmit all required data, including client-level demographic, service utilization, and outcome data, in a secure format specified by the Department.

1.11.3. The Contractor must participate in monthly check-in meetings and Communities of Practice (CoP) for the Department's Comprehensive Family Support (CFS) home visiting program, as scheduled by the Department. CoPs are structured, recurring gatherings of professionals and stakeholders involved in CFS to share best practices, address challenges, and support continuous quality improvement.

1.11.4. The Contractor must participate in monthly meetings with the Department, or as otherwise requested by the Department.

1.11.5. The Contractor may be required to participate in on-site program and file reviews conducted by the Department, as requested.

1.11.6. The Contractor must participate in monthly fidelity reviews of family sessions with the Department for the Family Check Up model.

1.11.7. The Contractor may be required to facilitate annual file reviews conducted by the Department, or as otherwise requested, which may

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

include, but are not limited to:

1.11.7.1. Compliance and documentation standards.

1.11.7.2. Service Delivery alignment and model fidelity.

1.11.7.3. Verification of data entry and reporting accuracy.

1.11.8. The Contractor must ensure Family Service Records are accurately summarized and entered into the Department's Family and Community Health Data System (FCH-DS) in real time and must comply with the confidentiality provisions of RSA 170-G:8-a.

1.11.9. The Contractor must provide the Department with a list of staff (End Users, as defined in Exhibit D) who will be responsible for entering Family Service Record data into the FCH-DS.

1.11.10. The Contractor must notify the Department immediately, and no more than 24 hours of staff changes, to ensure access to the FCH-DS is removed in a timely manner.

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

1.11.12. The Contractor must utilize the Department's closed loop referral system, at an agreed upon start date, whenever applicable to the services they provide for referrals between health and/or human service providers within New Hampshire for referral management and client care coordination. Utilization includes inputting information and data as necessary into the Department's referral solution as part of the NH Care Connections Network to facilitate referrals to participating providers, signing required Network Participation Agreement(s), and obtaining a participant specific consent for services.

1.11.13. The Contractor must utilize the Department's admission, discharge, transfer, and shared care insights solution whenever applicable to the services they provide for client care coordination and management between health providers within New Hampshire. Utilization includes inputting information and data as necessary into the Department's admission, discharge, transfer, and shared care insights platform as part of the NH Care Connections Network to facilitate referrals to participating providers and signing required Participation Agreement(s) for the admission, discharge, transfer, and shared care insights solution

1.11.13.1. The Department's contracts with the closed loop referral and admission, discharge, and transfer vendors incorporate the costs of developing and maintaining the standards-based interface from which the Contractor may

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

choose to configure their systems to communicate securely with the Department's NH Care Connections Network solutions. The Contractor may choose to interface with the Department's closed loop referral and/or the admission discharge transfer solution utilizing a Smart on FHIR or HL-7 standard interface process to connect individuals to health and social service providers. The costs for the Contractor's system or team to develop or utilize the standard Smart on FHIR or HL-7 based interface are the sole responsibility of the Contractor.

1.12. Background Checks

1.12.1. Prior to permitting any individual to provide services under this Agreement, the Contractor must ensure that said individual has undergone:

1.12.1.1. A criminal background check, at the Contractor's expense, and has no convictions for crimes that represent evidence of behavior that could endanger individuals served under this Agreement;

1.12.1.2. A name search of the Department's Bureau of Adult and Aging Services (BAAS) State Registry, pursuant to RSA 161-F:49, with results indicating no evidence of behavior that could endanger individuals served under this Agreement; and

1.12.1.3. A name search of the Department's DCYF Central Registry pursuant to RSA 169-C:35, with results indicating no evidence of behavior that could endanger individuals served under this Agreement.

1.13. Confidential Data

1.13.1. The Contractor must meet all information security and privacy requirements as set by the Department and in accordance with the Department's Information Security Requirements Exhibit as referenced below.

1.13.2. The Contractor must ensure any individuals involved in delivering services through this Agreement contract 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 Information Security Requirements Exhibit. The Contractor must ensure said individuals have a justifiable business need to access confidential data. The Contractor must provide attestations upon

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Department request.

1.14. Privacy Impact Assessment

1.14.1. Upon request, the Contractor must allow and assist the Department in conducting a Privacy Impact Assessment (PIA) of its system(s)/application(s)/web portal(s)/website(s) or Department system(s)/application(s)/web portal(s)/website(s) hosted by the Contractor, if Personally Identifiable Information (PII) is collected, used, accessed, shared, or stored. To conduct the PIA the Contractor must provide the Department access to applicable systems and documentation sufficient to allow the Department to assess, at minimum, the following:

1.14.1.1. How PII is gathered and stored;

1.14.1.2. Who will have access to PII;

1.14.1.3. How PII will be used in the system;

1.14.1.4. How participant consent will be achieved and revoked; and

1.14.1.5. Privacy practices.

1.14.2. 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.

1.15. Department Owned Devices, Systems and Network Usage

1.15.1. Contractor End Users, defined in the Department's Information Security Requirements Exhibit that is incorporated into this Agreement, authorized by the Department's Information Security Office to use a Department issued device (e.g. computer, tablet, mobile telephone) or access the Department network in the fulfilment of this Agreement, each must:

1.15.1.1. Sign and abide by applicable Department and New Hampshire Department of Information Technology (NH DoIT) use agreements, policies, standards, procedures and guidelines, and complete applicable trainings as required;

1.15.1.2. Use the information that they have permission to access solely for conducting official Department business and agree that all other use or access is strictly forbidden including, but not limited, to personal or other private and non-Department use, and that at no time shall they access or attempt to access information without having the express authority of the Department to do so;

1.15.1.3. Not access or attempt to access information in a manner

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

inconsistent with the approved policies, procedures, and/or agreement relating to system entry/access;

1.15.1.4. Not copy, share, distribute, sub-license, modify, reverse engineer, rent, or sell software licensed, developed, or being evaluated by the Department, and at all times must use utmost care to protect and keep such software strictly confidential in accordance with the license or any other agreement executed by the Department;

1.15.1.5. Only use equipment, software, or subscription(s) authorized by the Department's Information Security Office or designee;

1.15.1.6. Not install non-standard software on any Department equipment unless authorized by the Department's Information Security Office or designee;

1.15.1.7. Agree that email and other electronic communication messages created, sent, and received on a Department-issued email system are the property of the Department of New Hampshire and to be used for business purposes only. Email is defined as "internal email systems" or "Department-funded email systems."

1.15.1.8. Agree that use of email must follow Department and NH DoIT policies, standards, and/or guidelines; and

1.15.1.9. Agree when utilizing the Department's email system:

1.15.1.9.1. To only use a Department email address assigned to them with a "@ affiliate.DHHS.NH.Gov".

1.15.1.9.2. Include in the signature lines information identifying the End User as a non-Department workforce member; and

1.15.1.9.3. Ensure the following confidentiality notice is embedded underneath the signature line:

CONFIDENTIALITY NOTICE: "This message may contain information that is privileged and confidential and is intended only for the use of the individual(s) to whom it is addressed. If you receive this message in error, please notify the sender immediately and delete this electronic message and any attachments from your system. Thank you for your cooperation."

1.15.1.10. Contractor End Users with a Department issued email, access or potential access to Confidential Data, and/or a

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

workspace in a Department building/facility, must:

1.15.1.10.1. Complete the Department's Annual Information Security & Compliance Awareness Training prior to accessing, viewing, handling, hearing, or transmitting Department Data or Confidential Data.

1.15.1.10.2. Sign the Department's Business Use and Confidentiality Agreement and Asset Use Agreement, and the NH DoIT Department wide Computer Use Agreement upon execution of the Agreement and annually thereafter.

1.15.1.10.3. Only access the Department's intranet to view the Department's Policies and Procedures and Information Security webpages.

1.15.1.10.4. Contractor agrees, if any End User is found to be in violation of any of the above terms and conditions, said End User may face removal from the Agreement, and/or criminal and/or civil prosecution, if the act constitutes a violation of law.

1.15.1.10.5. Contractor agrees to notify the Department a minimum of three business days prior to any upcoming transfers or terminations of End Users who possess Department credentials and/or badges or who have system privileges. If End Users who possess Department credentials and/or badges or who have system privileges resign or are dismissed without advance notice, the Contractor agrees to notify the Department's Information Security Office or designee immediately.

1.16. Contract End-of-Life Transition Services

1.16.1. General Requirements

1.16.1.1. If applicable, upon early termination or expiration of the Agreement the parties agree to cooperate in good faith to effectuate a secure transition of the services ("Transition Services") from the Contractor to the Department and, if applicable, the new Contractor ("Recipient") engaged by the Department to assume the services. Ninety (90) days prior to the end-of the contract or unless otherwise specified by the

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Department, the Contractor must begin working with the Department and if applicable, the Recipient to develop a Data Transition Plan (DTP). The Department shall provide the DTP template to the Contractor.

1.16.1.2. The Contractor must assist the Recipient, in connection with the transition from the performance of Services by the Contractor and its End Users 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 any 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 and assistance to any third-party consultants engaged by Recipient in connection with the Transition Services.

1.16.1.3. If a system, database, hardware, software, and/or software licenses (Tools) was purchased or created to manage, track, and/or store Department Data in relationship to this contract said Tools will be inventoried and returned to the Department, along with the inventory document, once transition of Department data is complete. The internal planning of the Transition Services by the Contractor and its End Users shall be provided to the Department and if applicable the Recipient in a timely manner. Any such Transition Services shall be deemed to be Services for purposes of this Agreement.

1.16.1.4. In the event the data Transition extend beyond the end of the Agreement, the Contractor agrees that the Information Security Requirements, and if applicable, the Department's Business Associate Agreement terms and conditions remain in effect until the Data Transition is accepted as complete by the Department.

1.16.1.5. In the event the Contractor has comingled Department Data and the destruction or Transition of said data is not feasible, the Department and Contractor will jointly evaluate regulatory and professional standards for retention requirements prior to destruction, refer to the terms and conditions of the Department's DHHS Information Security Requirements Exhibit.

1.17. Completion of Transition Services

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

1.17.1. Each service or transition phase shall be deemed completed (and the transition process finalized) at the end of fifteen (15) business days after the product, resulting from the Service, is delivered to the Department and/or the Recipient in accordance with the mutually agreed upon Transition plan, unless within said fifteen (15) business day term the Contractor notifies the Department of an issue requiring additional time to complete said product.

1.17.2. Once all parties agree the data has been migrated the Contractor will have thirty (30) days to destroy the data per the terms and conditions of the Department's Information Security Requirements Exhibit.

1.18. Disagreement over Transition Services Results

1.18.1. In the event the Department is not satisfied with the results of the Transition Service, the Department shall notify the Contractor, in writing, stating the reason for the lack of satisfaction within fifteen (15) business days of the final product or at any time during the data Transition process. The Parties shall discuss the actions to be taken to resolve the disagreement or issue. If an agreement is not reached, at any time the Department shall be entitled to initiate actions in accordance with the Agreement.

2. Exhibits Incorporated

2.1. The Contractor must comply with all Exhibit D Federal Requirements, which are attached hereto and incorporated by reference herein.

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

2.3. 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 F, Business Associate Agreement, which has been executed by the parties.

3. Additional Terms

3.1. Impacts Resulting from Court Orders or Legislative Changes

3.1.1. 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.

3.2. Federal Civil Rights Laws Compliance: Culturally and Linguistically Appropriate

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Programs and Services

3.2.1. The Contractor must submit:

3.2.1.1. A detailed description of the language assistance services, within ten (10) days of the Effective Date of the Agreement, 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.

3.2.1.2. A written attestation, within forty-five (45) days of the Effective Date of the Agreement and annually thereafter, that all personnel involved the provision of services to individuals under this Agreement have completed, within the last twelve (12) months, the Contractor Required Training Video on Civil Rights-related Provisions in DHHS Procurement Processes, which is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors); and

3.2.1.3. The Department's Federal Civil Rights Compliance Checklist within ten (10) days of the Effective Date of the Agreement. The Federal Civil Rights Compliance Checklist must have been completed within the last twelve (12) months and is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors).

3.3. Credits and Copyright Ownership

3.3.1. 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."

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

3.3.3. The Department must retain copyright ownership for any and all original materials produced, including, but not limited to reports, protocols,

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

guidelines, brochures, posters, and resource directories.

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

3.4. Operation of Facilities: Compliance with Laws and Regulations

3.4.1. 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.

4. Records

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

4.1.1. 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.

4.1.2. 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.

4.2. 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.

4.3. If, upon further review, the Department must disallow any expenses cla[illegible] by

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

the Contractor as costs hereunder, the Department retains the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Payment Terms

1. This Agreement is funded by:
   1.1. 73% Federal funds, TEMPORARY ASSISTANCE FOR NEEDY FAMILIES, as awarded on choose a date, December 16, 2025 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.558, FAIN 2601NHTANF.
   1.2. 16% Federal funds, SOCIAL SERVICES BLOCK GRANT, as awarded on choose a date, October 1, 2023 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.667, FAIN 2501NHSOSR% General funds.
   1.3. 11% General Funds
2. For the purposes of this Agreement the Department has identified:
   2.1. The Contractor as a Subrecipient, based on criteria specified in 2 CFR §200.331.
   2.2. The Agreement as NON-R&D, in accordance with 2 CFR §200.332.
   2.3. The Indirect Cost Rate for this Agreement in the attached Budget Sheet(s).
3. Payment shall be on a cost reimbursement basis for actual allowable expenditures incurred under this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1, Budget.
4. The Contractor shall submit an invoice 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:
   4.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.
   4.2. Is submitted in a format as provided by or otherwise acceptable to the Department.
   4.3. Identifies and requests payment in accordance with Section 3 above.
   4.4. Includes supporting documentation with each invoice, including, but not limited to, proof of expenditures, receipts for purchases, time sheets, and payroll records, as applicable.
   4.5. Is completed, dated and returned to the Department to initiate payment.
   4.6. Is assigned an electronic signature and is emailed to BFAinvoices@dhhs.nh.gov or mailed to:

   Financial Manager
   Department of Health and Human Services

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

129 Pleasant Street
Concord, NH 03301

5. The Department shall make payments to the Contractor within thirty (30) calendar days of receipt of each invoice and any required supporting documentation, subsequent to approval of the submitted invoice.

6. The final invoice and any required supporting documentation shall be due to the Department no later than forty (40) calendar days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.

7. Notwithstanding Paragraph 18 of the General Provisions Form P-37, changes limited to adjusting direct and indirect cost 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.

8. If applicable, the Contractor must notify the Department of any revisions, updates, or extensions to the Contractor's federal negotiated indirect cost rate agreement (NICRA) by submitting a copy of the revised NICRA to the Department within five (5) business days of the Contractor's receipt of the NICRA from the cognizant federal agency.

9. Audits

9.1. The Contractor must email an annual audit to dhhs.act@dhhs.nh.gov if any of the following conditions exist:

9.1.1. Condition A - The Contractor is subject to a Single Audit pursuant to 2 CFR 200.501 Audit Requirements.

9.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b.

9.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

9.2. If Condition A exists, the Contractor must 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.

9.2.1. The Contractor must submit a copy of any Single Audit findings and any associated corrective action plans. The Contractor

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

must submit quarterly progress reports on the status of implementation of the corrective action plan.

9.3. If Condition B or Condition C exists, the Contractor must submit an annual financial audit performed by an independent CPA within 120 days after the close of the Contractor's fiscal year.

9.4. The Contractor, regardless of the funding source and/or whether Conditions A, B, or C exist, may be required to submit annual financial audits performed by an independent CPA upon request by the Department.

9.5. 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 must 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, within sixty (60) days.

10. If applicable, the Contractor must request disposition instructions from the Department for any equipment, based on 2 CFR 200.313, purchased using funds provided under this Agreement.

Exhibit C-1 Budget

New Hampshire Department of Health and Human Services			
Contractor Name:	*Greater Seacoast Community Health/ Families First Family Resource Center*		
Budget Request for:	*Family Resource Center Families First/Greater Seacoast Community Health*		
Budget Period:	*SFY 2027- 2029*		
Indirect Cost Rate (if applicable)	10.00%		
Line Item	**Program Cost - Funded by DHHS - SFY 27**	**Program Cost - Funded by DHHS - SFY 28**	**Program Cost - Funded by DHHS - SFY 29**
1. Salary & Wages	$346,770	$326,127	$318,684
2. Fringe Benefits	$79,757	$75,009	$73,297
3. Consultants	$0	$0	$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	$0	$0
5.(a) Supplies - Educational	$0	$0	$0
5.(b) Supplies - Lab	$0	$0	$0
5.(c) Supplies - Pharmacy	$0	$0	$0
5.(d) Supplies - Medical	$0	$0	$0
5.(e) Supplies - Office	$141	$2,000	$5,500
6. Travel	$2,000	$14,000	$15,500
7. Software	$0	$3,000	$5,000
8. (a) Other - Marketing/Communications	$100	$4,000	$4,500
8. (b) Other - Education and Training	$100	$1,781	$3,500
8. (c) Other - Other (specify below)	$0	$0	$0
Family Check Up/Online Training Portal (per staff)	$5,200	$5,200	$5,200
Suppliesz, furnishings for program space	$0	$0	$1,730
Telephones	$0	$3,000	$4,426
Program Supplies (groups/education/classes)	$1,000	$6,000	$7,000
Licenses and Membership Dues	$0	$1,000	$2,500
Language/ Sign Language Interpretation (Propio)	$0	$300	$3,654
9. Subrecipient Contracts	$0	$0	$0
Total Direct Costs	$435,068	$441,417	$450,491
Total Indirect Costs	$65,010	$65,959	$67,315
Subtotals	$500,078	$507,376	$517,806
		TOTAL	**$ 1,525,260**

Initial

Contractor Initials: JS

Date: 5/1/2026

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

SECTION A: CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Contractor 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 CONTRACTORS 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 contractors (and by inference, sub- contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a contractor (and by inference, 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 Agreement 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 Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, 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 Contractor 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 Contractor'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 Contractor'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 Agreement 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 Agreement, 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 suc ction;

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

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 contract officer on whose contract activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected Agreement;

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 Contractor may insert in the space provided below the site(s) for the performance of work done in connection with the specific Agreement.

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.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

SECTION B: CERTIFICATION REGARDING LOBBYING

The Contractor 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 Byrd Anti-Lobbying Amendment (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, loan, or cooperative agreement (and by specific mention 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, loan, or cooperative agreement (and by specific mention sub- contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, see https://omb.report/icr/201009-0348-022/doc/20388401

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, 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.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

SECTION C: 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 12689 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 Agreement, 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 Agreement 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 https://www.govinfo.gov/app/details/CFR-2004-title45-vol1/CFR-2004-title45-vol1-part76/context.

6. The prospective primary participant agrees by submitting this Agreement 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) https://www.ecfr.gov/current/title-22/chapter-V/part-513.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

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 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 (Agreement) 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 (Agreement), 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 (Agreement).

14. The prospective lower tier participant further agrees by submitting this proposal (Agreement) 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.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

SECTION D: CERTIFICATION OF COMPLIANCE WITH FEDERAL REQUIREMENTS

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:

The Contractor will comply, and will require any subcontractors to comply, with any applicable federal requirements, which may include but are not limited to:

1. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR 200).
2. 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;
3. 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;
4. 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);
5. 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;
6. 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;
7. 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;
8. 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;
9. 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;
10. 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.
11. The Clean Air Act (42 U.S.C. 7401-7671q.) which seeks to protect human health and the environment from emissions that pollute ambient, or outdoor, air.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

12. The Clean Water Act (33 U.S.C. 1251-1387) which establishes the basic structure for regulating discharges of pollutants into the waters of the United States and regulating quality standards for surface waters.
13. Civilian Agency Acquisition Council and the Defense Acquisition Regulations Council (Councils) (41 U.S.C. 1908) which establishes administrative, contractual, or legal remedies in instances where contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate.
14. Contract Work Hours and Safety Standards Act (40 U.S.C. 3701–3708) which establishes that all contracts awarded by the non-Federal entity in excess of $100,000 that involve the employment of mechanics or laborers must include a provision for compliance with 40 U.S.C. 3702 and 3704, as supplemented by Department of Labor regulations (29 CFR Part 5).
15. Rights to Inventions Made Under a Contract or Agreement 37 CFR § 401.2 (a) which establishes the recipient or subrecipient wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that “funding agreement,” the recipient or subrecipient must comply with the requirements of 37 CFR Part 401, “Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements,” and any implementing regulations issued by the awarding agency.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, or government wide suspension or debarment.

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 Agreement, the Contractor agrees to comply with the provisions indicated above.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

SECTION E: 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 Agreement, 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.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

SECTION F: 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 $30,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $30,000 or more. If the initial award is below $30,000 but subsequent grant modifications result in a total award equal to or over $30,000, 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 sub award 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 Entity Identifier (SAM UEI; DUNS#)
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.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

FORM A

As the Grantee 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: ZM91C8J2NY93

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: _____

Contractor Name: Justin Saint-Jacques

4/28/2026
Date:

Signed by:
Justin Saint-Jacques
5579C270F0E1450...
Name: Justin Saint-Jacques
Title: Justin Saint-Jacques

New Hampshire Department of Health and Human Services

Exhibit E

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

Contractor Initials Initial JS

Date 4/28/2026

or misplacement of hardcopy documents, and misrouting of physical or electronic 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.

Contractor Initials Initial JS

Date 4/28/2026

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.

Contractor Initials Initial JS

Date 4/28/2026

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, antihacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a whole, must have aggressive intrusion-detection and firewall protection.

Contractor Initials Initial JS

Date 4/28/2026

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 Initial JS

Date 4/28/2026

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

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.

Contractor Initials Initial JS

Date 4/28/2026

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;

Contractor Initials Initial JS

Date 4/28/2026

4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and
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

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement (Form P-37) ("Agreement"), and any of its agents who receive use or have access to protected health information (PHI), as defined herein, shall be referred to as the "Business Associate." The State of New Hampshire, Department of Health and Human Services, "Department" shall be referred to as the "Covered Entity," The Contractor and the Department are collectively referred to as "the parties."

The parties agree, to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191, the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162, and 164 (HIPAA), provisions of the HITECH Act, Title XIII, Subtitle D, Parts 1&2 of the American Recovery and Reinvestment Act of 2009, 42 USC 17934, et sec., applicable to business associates, and as applicable, to be bound by the provisions of the Confidentiality of Substance Use Disorder Patient Records, 42 USC s. 290 dd-2, 42 CFR Part 2, (Part 2), as any of these laws and regulations may be amended from time to time.

(1) Definitions

a. The following terms shall have the same meaning as defined in HIPAA, the HITECH Act, and Part 2, as they may be amended from time to time:

"Breach," "Designated Record Set," "Data Aggregation," Designated Record Set," "Health Care Operations," "HITECH Act," "Individual," "Privacy Rule," "Required by law," "Security Rule," and "Secretary."

b. Business Associate Agreement, (BAA) means the Business Associate Agreement that includes privacy and confidentiality requirements of the Business Associate working with PHI and as applicable, Part 2 record(s) on behalf of the Covered Entity under the Agreement.

c. "Constructively Identifiable," means there is a reasonable basis to believe that the information could be used, alone or in combination with other reasonably available information, by an anticipated recipient to identify an individual who is a subject of the information.

d. "Protected Health Information" ("PHI") as used in the Agreement and the BAA, means protected health information defined in HIPAA 45 CFR 160.103, limited to the information created, received, or used by Business Associate from or on behalf of Covered Entity, and includes any Part 2 records, if applicable, as defined below.

e. "Part 2 record" means any patient "Record," relating to a "Patient," and "Patient Identifying Information," as defined in 42 CFR Part 2.11.

f. "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.

(2) Business Associate Use and Disclosure of Protected Health Information

a. Business Associate shall not use, disclose, maintain, store, or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under the Agreement. Further, Business Associate, including bu

Initial JS

Contractor Initials _____

4/28/2026

Date _____

limited to all its directors, officers, employees, and agents, shall protect any PHI as required by HIPPA and 42 CFR Part 2, and not use, disclose, maintain, store, or transmit PHI in any manner that would constitute a violation of HIPAA or 42 CFR Part 2.

b. Business Associate may use or disclose PHI, as applicable:

I. For the proper management and administration of the Business Associate;

II. As required by law, according to the terms set forth in paragraph c. and d. below;

III. According to the HIPAA minimum necessary standard;

IV. For data aggregation purposes for the health care operations of the Covered Entity; and

V. Data that is de-identified or aggregated and remains constructively identifiable may not be used for any purpose outside the performance of the Agreement.

c. To the extent Business Associate is permitted under the BAA or the Agreement to disclose PHI to any third party or subcontractor prior to making any disclosure, the Business Associate must obtain, a business associate agreement or other agreement with the third party or subcontractor, that complies with HIPAA and ensures that all requirements and restrictions placed on the Business Associate as part of this BAA with the Covered Entity, are included in those business associate agreements with the third party or subcontractor.

d. The Business Associate shall not, disclose any PHI in response to a request or demand for disclosure, such as by a subpoena or court order, on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity can determine how to best protect the PHI. If Covered Entity objects to the disclosure, the Business Associate agrees to refrain from disclosing the PHI and shall cooperate with the Covered Entity in any effort the Covered Entity undertakes to contest the request for disclosure, subpoena, or other legal process. If applicable relating to Part 2 records, the Business Associate shall resist any efforts to access part 2 records in any judicial proceeding.

(3) Obligations and Activities of Business Associate

a. Business Associate shall implement appropriate safeguards to prevent unauthorized use or disclosure of all PHI in accordance with HIPAA Privacy Rule and Security Rule with regard to electronic PHI, and Part 2, as applicable.

b. The Business Associate shall immediately notify the Covered Entity's Privacy Officer at the following email address, DHHSPrivacyOfficer@dhhs.nh.gov after the Business Associate has determined that any use or disclosure not provided for by its contract, including any known or suspected privacy or security incident or breach has occurred potentially exposing or compromising the PHI. This includes inadvertent or accidental uses or disclosures or breaches of unsecured protected health information.

c. In the event of a breach, the Business Associate shall comply with the terms of this Business Associate Agreement, all applicable state and federal laws and regulations and any additional requirements of the Agreement.

d. The Business Associate shall perform a risk assessment, based on the information available at the time it becomes aware of any known or suspected priva

Initial JS

Contractor Initials _____

4/28/2026

Date _____

security breach as described above and communicate the risk assessment to the Covered Entity. The risk assessment shall include, but not be limited to:

I. The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;

II. The unauthorized person who accessed, used, disclosed, or received the protected health information;

III. Whether the protected health information was actually acquired or viewed; and

IV. How the risk of loss of confidentiality to the protected health information has been mitigated.

e. The Business Associate shall complete a risk assessment report at the conclusion of its incident or breach investigation and provide the findings in a written report to the Covered Entity as soon as practicable after the conclusion of the Business Associate's investigation.

f. 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 US Secretary of Health and Human Services for purposes of determining the Business Associate's and the Covered Entity's compliance with HIPAA and the Privacy and Security Rule, and Part 2, if applicable.

g. Business Associate shall require all of its business associates that receive, use or have access to PHI under the BAA to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein.

h. Within ten (10) 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 BAA and the Agreement.

i. 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.

j. 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.

k. Business Associate shall document any disclosures of PHI and information related to any 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.

l. 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 P

Initial JS

Contractor Initials _____

4/28/2026

Date _____

accordance with 45 CFR Section 164.528.

m. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within five (5) 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.

n. Within thirty (30) 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-ups of such PHI in any form or platform.

VI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, or if retention is governed by state or federal law, 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 as long as the Business 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 post a current version of the Notice of the Privacy Practices on the Covered Entity's website:

https://www.dhhs.nh.gov/oos/hipaa/publications.htm in accordance with 45 CFR Section 164.520.

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 BAA, 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 of Agreement for Cause

a. In addition to the General Provisions (P-37) of the Agreement, the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a material breach by Business Associate of the Business Associate Agreement. 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.

(6) Miscellaneous

a. Definitions, Laws, and Regulatory References. All laws and regulations

Initial JS

Contractor Initials _____

4/28/2026

Date _____

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

herein, shall refer to those laws and regulations as amended from time to time. A reference in the Agreement, as amended to include this Business Associate Agreement, to a Section in HIPAA or 42 Part 2, means the Section as in effect or as amended.

b. **Change in law** - Covered Entity and Business Associate agree to take such action as is necessary from time to time for the Covered Entity and/or Business Associate to comply with the changes in the requirements of HIPAA, 42 CFR Part 2 other 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 BAA and the Agreement shall be resolved to permit Covered Entity and the Business Associate to comply with HIPAA and 42 CFR Part 2.

e. **Segregation** - If any term or condition of this BAA 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 BAA are declared severable.

f. **Survival** - Provisions in this BAA regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the BAA in section (3) g. and (3) n.l., and the defense and indemnification provisions of the General Provisions (P-37) of the Agreement, shall survive the termination of the BAA.

IN WITNESS WHEREOF, the parties hereto have duly executed this Business Associate Agreement.

Department of Health and Human Services	Justin Saint-Jacques
The State	Name of the Contractor
DocuSigned by: Iain Watt D778BB63F9704C7...	Signed by: Justin Saint-Jacques 5579C270F0E1450...
Signature of Authorized Representative	Signature of Authorized Representative
Iain Watt	Justin Saint-Jacques
Name of Authorized Representative	Name of Authorized Representative
Director - DPH	Justin Saint-Jacques
Title of Authorized Representative	Title of Authorized Representative
5/1/2026	4/28/2026
Date	Date

Initial JS

Contractor Initials _____

4/28/2026

Date _____

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

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 GREATER SEACOAST COMMUNITY HEALTH is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on August 18, 1971. 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: **65587**
Certificate Number: **0007896739**

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 2nd day of April A.D. 2026.

David M. Scanlan
Secretary of State

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

CERTIFICATE OF AUTHORITY

I, Jennifer Glidden, Chair, of Greater Seacoast Community Health hereby certify that:

1. I am a duly elected Clerk/Secretary/Officer of Greater Seacoast Community Health.

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 April 20, 2026 at which a quorum of the Directors/shareholders were present and voting.

   VOTED: that Justin Saint-Jacques and Dean Correnti

   Are duly authorized on behalf of Greater Seacoast Community Health 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 amendments, revisions, or modifications thereto, which may in his/her judgement be desirable or necessary to effect the purpose of this vote. This authorization is on a temporary basis to cover the extended absence of the CEO, Jocelyn Caple, and covers the time period of April 20, 2026 through May 30, 2026.

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. The 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: 4/27/2026

DocuSigned by:
C358C10198084CE...

Jennifer Glidden
Chair

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 3/26/2026

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
Marsh & McLennan Agency, LLC
1 Sundial Ave
Suite 302N
Manchester NH 03103-7204

CONTACT NAME:
PHONE (A/C, No, Ext): **FAX (A/C, No):**
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : TRI-STATE INSURANCE COMPANY OF	31003
INSURER B : A.I.M. Mutual Insurance Compan	
INSURER C : AIX Specialty Insurance Compan	12833
INSURER D :	
INSURER E :	
INSURER F :	

INSURED GOODCOM-04
Greater Seacoast Community Center
ATTN: Accounts Payable
311 Route 108
Somersworth NH 03878

COVERAGES **CERTIFICATE NUMBER:** 2057581523 **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 [ ] OTHER:			ADV5564228-12	10/10/2025	10/10/2026	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 $ 300,000 $ 10,000 $ 1,000,000 $ 2,000,000 $ 2,000,000 $
A	**AUTOMOBILE LIABILITY** [X] ANY AUTO [ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS [X] HIRED AUTOS ONLY [X] NON-OWNED AUTOS ONLY			ADV5564228-12	10/10/2025	10/10/2026	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 [ ] RETENTION $			ADV5564228-12	10/10/2025	10/10/2026	EACH OCCURRENCE AGGREGATE 	$ 5,000,000 $ 5,000,000 $
B	**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY** Y / N ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [N] **(Mandatory in NH)** If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		WMZ-800-8008412-2026A	1/1/2026	1/1/2027	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 C	Professional Liability Professional Liability			L3VA671986 L3VA671986	1/1/2026 1/1/2026	1/1/2027 1/1/2027	Each Incident Aggregate	1,000,000 3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Professional Liability excludes coverage for claims that are covered under the FTCA

CERTIFICATE HOLDER

State of NH
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

© 1988-2015 ACORD CORPORATION. All rights reserved.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

NONPROFIT COVER SHEET

A. Entity Name: Greater Seacoast Community Health

B. Entity's Contact Information: Jocelyn Caple, MD, jcaple@goodwinch.org, 603.749.2346

For Records Requests (e.g., resumes of key personnel; audited financial statements):

Name / Phone / Email: Helen Long, 603.422.8208, hlong@goodwinch.org

Person responsible for Accuracy and Completeness of information provided:

Name: Helen Long Title: Grant Writer

Signature: Helen Long

C. List Board of Directors and Affiliations

Name (Identify any additional role(s) in Parentheses) E.g., John Doe (President)	Affiliations
Jennifer Glidden (Chair)	Program Specialist, USDA
Jody Hoffer Gittell (Vice Chair)	Professor, Brandeis University
Jim Sepanski (Treasurer)	Retired Financial Executive
Christine Perkins (Secretary)	Certified Public Accountant, Wipfli
Laura Belsky	Retired Nurse
Andrea Borowiecki	VP of Charitable Giving and Community Engagement, Rockland Trust
Salih Ileri	Retired Production Manager
Tim McNamara	Retired Healthcare Executive
Allison Mulligan	Self Employed
Michael Ponchak	Portfolio Manager, Rockland Trust
Kathy Scheu	Retired Medical Product Sales Manager
Marrielle Van Rossum	Attorney
Ramona Yuva	ESOL Teach, Dover School District

D. List Key Personnel (Resumes must be available upon request to the person(s) listed in section B or may be attached**):**

Name	Role	Annual Salary	Amount Paid From This Contract
Jess Garlough	Family Service Director	$108,160	$43,264 (16 hrs/wk)
JoAnn Clement	Family Center Manager	$72,940	$54,719 (30 hrs/wk)
Beth Searle-Spratt	Home Visitor	$46,410	$46,410 (28 hrs/wk)

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Heidi Crowell	Home Visitor	$55,118	$55,118 (40 hrs/wk)
Jillian Peacock	Home Visitor/ Newborn Navigator	$54,080	$54,080 (40 hrs/wk)
Ellen Michniewicz	Home Visitor/Kinship Navigator	$55,800	$11,160 (8 hrs/wk)
Carson Bear	Program Coordinator	$50,440	$50,440 (40 hrs/wk)
Patricia Keck	Program Facilitator	$17,004	$17,004 (15 hrs/wk)
Tiffany Jones	Program Facilitator	$14,575	$14,575 (15 hrs/wk)

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

DISCLOSURE OF LEGAL ACTIVITIES INVOLVING THE STATE OF NEW HAMPSHIRE OR ANOTHER GOVERNMENT ENTITY

E. Check one of the following:

[X] The entity is **not currently or has not been** party to any legal proceeding involving the State of New Hampshire (or any agency or subdivision thereof) or any other state/federal government entity before any adjudicative body in any jurisdiction **OR**

[ ] The entity is or has been party to one or more legal proceedings as set forth above. Identify the jurisdiction, court or other adjudicative body, case number, and briefly describe the nature of the proceeding (Attached extra sheet if necessary).

_____

_____

_____

CHARITABLE TRUSTS UNIT COMPLIANCE CERTIFICATION

F. Check one of the following:

[x] is registered and in good standing with the New Hampshire Department of Justice Charitable Trusts Unit (** see note below) **or** has submitted a complete application for registration to the Charitable Trusts Unit and is awaiting a registration determination **OR**

[ ] is not required to register with the Charitable Trusts Unit because it is neither tax-exempt under section 501(c)(3) of the Internal Revenue Code nor engages in charitable solicitations in the State of New Hampshire **OR**

[ ] is exempt from registration with the Charitable Trusts Unit because it is a federal or state government, agency, or subdivision or is a religious organization, an integrated auxiliary of a religious organization, or is a convention or association of churches.

** Note: Attached screen shot from the DOJ Registered Charities List found at:

https://mm.nh.gov/files/uploads/doj/remote-docs/registered-charities.pdf

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

FINANCIAL DISCLOSURES

G. Check one the following:

[X] The organization hired an outside firm to audit its financial statements or to prepare GAAP-compliant financial statements for its most recently completed fiscal year. If so, please ensure that the financial statements and audit results are available to be requested from the contact listed on Page 1 (audited financials may be attached) **OR**

[ ] The above does not apply, but the organization filed an IRS Form 990 or Form 990-EZ for its most recently completed fiscal year. Please attach that IRS Form 990 or Form 990-EZ to the submission. (Form 990 Schedule B is not required) **OR**

[ ] ***If neither of the above apply***, complete the Income Statement and Balance Sheet below with the following basic financial information from the organization's most recently completed fiscal year:

1. INCOME STATEMENT

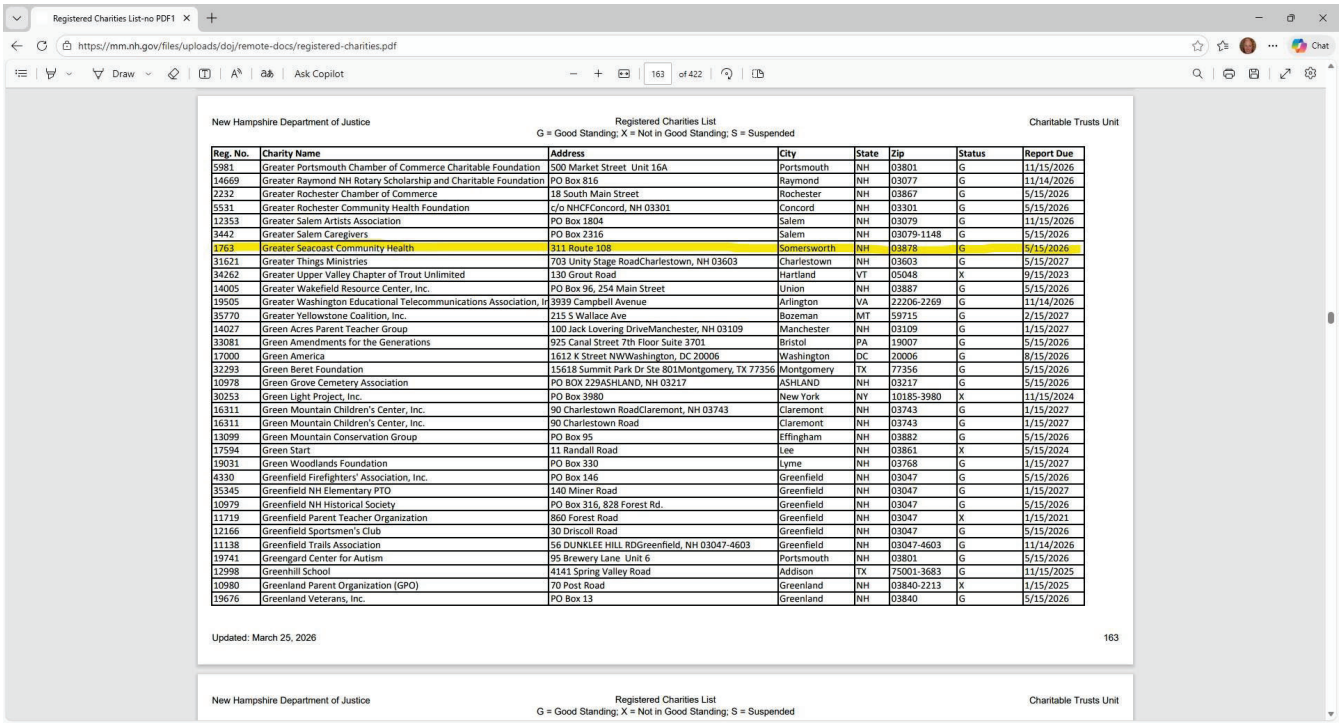
Revenue		Expenses	
Grants	$	*Compensation of officers, directors, and key personnel*	$
Donations	$		
Program Services Revenue	$	*Other salaries & wages*	$
Interest & Dividends	$	*Payroll taxes & employee benefits*	$
All other Revenue	$	*Occupancy, rent, utilities, and insurance*	$
Total Revenue	$	*Printing, publications, postage, office supplies, and IT*	$
		All other expenses	$
		Total Expenses	$

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

2. BALANCE SHEET

Assets		Liabilities	
Cash & Equivalents	$	*Accounts Payable*	$
Investments	$	*Loans Payable*	$
Real Estate (less any depreciation)	$	*All other liabilities*	$
Other Property & Equipment (less any depreciation)	$	Total Liabilities	$
Pledges, grants, accounts receivable	$		
All other assets	$		
Total Assets	$		

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87



Registered Charities List-no PDF1

https://mm.nh.gov/files/uploads/doj/remote-docs/registered-charities.pdf

New Hampshire Department of Justice

Registered Charities List
G = Good Standing; X = Not in Good Standing; S = Suspended

Charitable Trusts Unit

Reg. No.	Charity Name	Address	City	State	Zip	Status	Report Due
5981	Greater Portsmouth Chamber of Commerce Charitable Foundation	500 Market Street Unit 16A	Portsmouth	NH	03801	G	11/15/2026
14669	Greater Raymond NH Rotary Scholarship and Charitable Foundation	PO Box 816	Raymond	NH	03077	G	11/14/2026
2232	Greater Rochester Chamber of Commerce	18 South Main Street	Rochester	NH	03867	G	5/15/2026
5531	Greater Rochester Community Health Foundation	c/o NHCFConcord, NH 03301	Concord	NH	03301	G	5/15/2026
12353	Greater Salem Artists Association	PO Box 1804	Salem	NH	03079	G	11/15/2026
3442	Greater Salem Caregivers	PO Box 2316	Salem	NH	03079-1148	G	5/15/2026
1763	Greater Seacoast Community Health	311 Route 108	Somersworth	NH	03878	G	5/15/2026
31621	Greater Things Ministries	703 Unity Stage RoadCharlestown, NH 03603	Charlestown	NH	03603	G	5/15/2027
34262	Greater Upper Valley Chapter of Trout Unlimited	130 Grout Road	Hartland	VT	05048	X	9/15/2023
14005	Greater Wakefield Resource Center, Inc.	PO Box 96, 254 Main Street	Union	NH	03887	G	5/15/2026
19505	Greater Washington Educational Telecommunications Association, Ir	3939 Campbell Avenue	Arlington	VA	22206-2269	G	11/14/2026
35770	Greater Yellowstone Coalition, Inc.	215 S Wallace Ave	Bozeman	MT	59715	G	2/15/2027
14027	Green Acres Parent Teacher Group	100 Jack Lovering DriveManchester, NH 03109	Manchester	NH	03109	G	1/15/2027
33081	Green Amendments for the Generations	925 Canal Street 7th Floor Suite 3701	Bristol	PA	19007	G	5/15/2026
17000	Green America	1612 K Street NWWashington, DC 20006	Washington	DC	20006	G	8/15/2026
32293	Green Beret Foundation	15618 Summit Park Dr Ste 801Montgomery, TX 77356	Montgomery	TX	77356	G	5/15/2026
10978	Green Grove Cemetery Association	PO BOX 229ASHLAND, NH 03217	ASHLAND	NH	03217	G	5/15/2026
30253	Green Light Project, Inc.	PO Box 3980	New York	NY	10185-3980	X	11/15/2024
16311	Green Mountain Children's Center, Inc.	90 Charlestown RoadClaremont, NH 03743	Claremont	NH	03743	G	1/15/2027
16311	Green Mountain Children's Center, Inc.	90 Charlestown Road	Claremont	NH	03743	G	1/15/2027
13099	Green Mountain Conservation Group	PO Box 95	Effingham	NH	03882	G	5/15/2026
17594	Green Start	11 Randall Road	Lee	NH	03861	X	5/15/2024
19031	Green Woodlands Foundation	PO Box 330	Lyme	NH	03768	G	1/15/2027
4330	Greenfield Firefighters' Association, Inc.	PO Box 146	Greenfield	NH	03047	G	5/15/2026
35345	Greenfield NH Elementary PTO	140 Miner Road	Greenfield	NH	03047	G	1/15/2027
10979	Greenfield NH Historical Society	PO Box 316, 828 Forest Rd.	Greenfield	NH	03047	G	5/15/2026
11719	Greenfield Parent Teacher Organization	860 Forest Road	Greenfield	NH	03047	X	1/15/2021
12166	Greenfield Sportsmen's Club	30 Driscoll Road	Greenfield	NH	03047	G	5/15/2026
11138	Greenfield Trails Association	56 DUNKLEE HILL RDGreenfield, NH 03047-4603	Greenfield	NH	03047-4603	G	11/14/2026
19741	Greengard Center for Autism	95 Brewery Lane Unit 6	Portsmouth	NH	03801	G	5/15/2026
12998	Greenhill School	4141 Spring Valley Road	Addison	TX	75001-3683	G	11/15/2025
10980	Greenland Parent Organization (GPO)	70 Post Road	Greenland	NH	03840-2213	X	1/15/2025
19676	Greenland Veterans, Inc.	PO Box 13	Greenland	NH	03840	G	5/15/2026

Updated: March 25, 2026

New Hampshire Department of Justice

Registered Charities List
G = Good Standing; X = Not in Good Standing; S = Suspended

Charitable Trusts Unit

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Greater Seacoast Community Health

Families First
8 Greenleaf Woods Drive
Portsmouth NH 03801
603.422.8208

Goodwin Community Health
311 Route 108
Somersworth NH 03878
603.749.2346

Our mission

To deliver innovative, compassionate, integrated health services and support that are accessible to all in our community, regardless of ability to pay.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

BerryDunn

Greater Seacoast Community Health

FINANCIAL STATEMENTS

and

REPORTS IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS* AND THE UNIFORM GUIDANCE

December 31, 2024 and 2023

With Independent Auditor's Report

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

BerryDunn

BDMP Assurance, LLP

INDEPENDENT AUDITOR'S REPORT

Board of Directors
Greater Seacoast Community Health

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of Greater Seacoast Community Health (the Organization), which comprise the balance sheet as of December 31, 2024 and the related statements of operations, changes in net assets and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the 2024 financial statements referred to above present fairly, in all material respects, the financial position of the Organization as of December 31, 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.

Basis for Opinion

We conducted our audit 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. 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 the Organization 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 the Organization as of and for the year ended December 31, 2023 were audited by Berry, Dunn, McNeil & Parker, LLC whose report, dated May 20, 2024, expressed an unmodified opinion on those statements.

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. generally accepted accounting principles, 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.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

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 the Organization's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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. 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 the Organization'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 the Organization'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.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Board of Directors
Greater Seacoast Community Health

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 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.

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated May 19, 2025 on our consideration of the Organization'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 the Organization'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 the Organization's internal control over financial reporting and compliance.

BDMP Assurance, LLP

Manchester, New Hampshire
May 19, 2025

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

GREATER SEACOAST COMMUNITY HEALTH

Balance Sheets

December 31, 2024 and 2023

ASSETS

	2024	2023
Current assets		
Cash and cash equivalents	**$ 6,202,093**	$ 6,592,894
Patient accounts receivable	**1,051,140**	1,315,414
Grant and other receivables	**961,486**	893,205
Pledges receivable	**71,000**	63,050
Inventory	**71,042**	80,935
Other current assets	**204,527**	201,680
Total current assets	**8,561,288**	9,147,178
Investments	**2,914,361**	2,304,036
Assets limited as to use	**1,368,340**	1,350,630
Property and equipment, net	**7,252,412**	7,340,603
Finance lease right-of-use asset	**3,860,711**	4,170,016
Total assets	**$ 23,957,112**	$ 24,312,463

LIABILITIES AND NET ASSETS

Current liabilities		
Accounts payable and accrued expenses	**$ 378,822**	$ 327,555
Accrued payroll and related expenses	**1,044,324**	907,310
Patient deposits	**159,286**	178,160
Deferred revenue	**152,256**	80,930
Current portion of long-term debt	**29,873**	29,209
Current portion of finance lease liability	**253,884**	248,861
Total current liabilities	**2,018,445**	1,772,025
Long-term debt, less current portion	**146,269**	176,142
Finance lease liability, less current portion	**3,826,556**	4,069,173
Total liabilities	**5,991,270**	6,017,340
Net assets		
Without donor restrictions	**16,035,948**	16,398,719
With donor restrictions	**1,929,894**	1,896,404
Total net assets	**17,965,842**	18,295,123
Total liabilities and net assets	**$ 23,957,112**	$ 24,312,463

The accompanying notes are an integral part of these financial statements.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

GREATER SEACOAST COMMUNITY HEALTH

Statements of Operations

Years Ended December 31, 2024 and 2023

	2024	2023
Operating revenue and support		
Net patient service revenue	**$ 12,476,093**	$ 11,150,749
Grants, contracts and contributions	**7,477,853**	9,477,864
Other operating revenue	**601,605**	523,615
Net assets released from restriction for operations	**210,868**	162,640
Total operating revenue and support	**20,766,419**	21,314,868
Operating expenses		
Salaries and wages	**13,205,796**	13,118,826
Employee benefits	**2,067,365**	2,371,573
Contracted services	**664,588**	760,301
Program supplies	**2,452,258**	2,093,214
Information technology	**403,184**	725,345
Occupancy	**762,319**	795,981
Other	**1,188,814**	1,359,090
Depreciation and amortization	**787,113**	773,303
Interest expense	**88,273**	93,867
Total operating expenses	**21,619,710**	22,091,500
Operating loss	**(853,291)**	(776,632)
Other revenues, gains and expenses		
Investment income	**195,791**	120,364
Change in fair value of investments	**134,424**	186,366
Contribution expense	**-**	(348,971)
Total other revenues, gains and expenses	**330,215**	(42,241)
Deficiency of revenue over expenses	**(523,076)**	(818,873)
Grants received for capital acquisition, placed in service	**101,139**	168,522
Net assets released from restriction for capital acquisition, placed in service	**59,166**	48,921
Decrease in net assets without donor restrictions	**$ (362,771)**	$ (601,430)

The accompanying notes are an integral part of these financial statements.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

GREATER SEACOAST COMMUNITY HEALTH

Statements of Changes in Net Assets

Years Ended December 31, 2024 and 2023

	2024	2023
Net assets without donor restrictions		
Deficiency of revenue over expenses	**$ (523,076)**	$ (818,873)
Grants received for capital acquisition, placed in service	**101,139**	168,522
Net assets released from restriction for capital acquisition, placed in service	**59,166**	48,921
Decrease in net assets without donor restrictions	**(362,771)**	(601,430)
Net assets with donor restrictions		
Contributions	**174,050**	96,767
Investment income	**36,818**	32,322
Change in fair value of investments	**92,656**	139,819
Net assets released from restriction for operations	**(210,868)**	(162,640)
Net assets released from restriction for capital acquisition, placed in service	**(59,166)**	(48,921)
Increase in net assets with donor restrictions	**33,490**	57,347
Change in net assets	**(329,281)**	(544,083)
Net assets, beginning of year	**18,295,123**	18,839,206
Net assets, end of year	**$ 17,965,842**	$ 18,295,123

The accompanying notes are an integral part of these financial statements.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

GREATER SEACOAST COMMUNITY HEALTH

Statements of Cash Flows

Years Ended December 31, 2024 and 2023

	2024	2023
Cash flows from operating activities		
Change in net assets	**$ (329,281)**	$ (544,083)
Adjustments to reconcile change in net assets to net cash provided (used) by operating activities		
Depreciation and amortization	**787,113**	773,303
Amortization of operating lease right-of-use assets	**-**	38,064
Change in fair value of investments	**(227,080)**	(326,185)
Grants and contributions for long-term purposes	**(126,139)**	(168,522)
Decrease (increase) in		
Patient accounts receivable	**264,274**	(451,623)
Grant and other receivables	**(68,281)**	225,943
Pledges receivable	**(7,950)**	(22,572)
Inventory	**9,893**	9,571
Other current assets	**(2,847)**	(75,872)
Increase (decrease) in		
Accounts payable and accrued expenses	**51,267**	(79,188)
Accrued payroll and related expenses	**137,014**	(71,326)
Patient deposits	**(18,874)**	3,584
Deferred revenue	**71,326**	(42,971)
Operating lease liabilities	**-**	(39,075)
Net cash provided (used) by operating activities	**540,435**	(770,952)
Cash flows from investing activities		
Capital acquisitions	**(389,617)**	(270,830)
Proceeds from sale of investments	**6,179,403**	1,090,321
Purchase of investments	**(6,580,358)**	(1,176,650)
Net cash used by investing activities	**(790,572)**	(357,159)
Cash flows from financing activities		
Grants and contributions received for long-term purposes	**126,139**	367,688
Payments on long-term debt	**(29,209)**	(28,560)
Payments on finance lease liability	**(237,594)**	(243,723)
Net cash (used) provided by financing activities	**(140,664)**	95,405
Net decrease in cash and cash equivalents	**(390,801)**	(1,032,706)
Cash and cash equivalents, beginning of year	**6,592,894**	7,625,600
Cash and cash equivalents, end of year	**$ 6,202,093**	$ 6,592,894
Supplemental disclosures of cash flow information		
Cash paid for interest	**$ 88,273**	$ 93,867

The accompanying notes are an integral part of these financial statements.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Organization

Greater Seacoast Community Health (the Organization) is a not-for-profit corporation organized in New Hampshire. The Organization is a Federally Qualified Health Center (FQHC), providing fully integrated medical, behavioral, oral health, recovery services and social support for underserved populations. The Organization is a network of community health centers, which includes Families First Health & Support Center and Goodwin Community Health, providing healthcare services to individuals living within the greater seacoast area.

1. Summary of Significant Accounting Policies

Basis of Presentation

The financial statements of the Organization have been prepared in accordance with U.S. generally accepted accounting principles (U.S. GAAP), which requires the Organization to report information in the financial statements 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 Organization. These net assets may be used at the discretion of the Organization's management and the 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 Organization 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. 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. Estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Income Taxes

The Organization is a public charity under Section 501(c)(3) of the Internal Revenue Code (IRC). As a public charity, the Organization 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 Organization’s tax positions and concluded that the Organization has no unrelated business income or uncertain tax positions that require adjustment to the financial statements.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Cash and Cash Equivalents

Cash and cash equivalents consist of demand deposits and petty cash funds.

The Organization maintains cash and cash equivalents accounts at several financial institutions. The balances are insured by the Federal Deposit Insurance Corporation (FDIC) up to $250,000 per financial institution. At various times throughout the year, the Organization's balances may exceed FDIC insurance. The Organization has not experienced any losses in such accounts and management believes it is not exposed to any significant risk.

Revenue Recognition and Patient Accounts Receivable

Net patient service revenue is reported at the amount that reflects the consideration to which the Organization expects to be entitled in exchange for providing patient care. These amounts are due from patients and third-party payers (including commercial insurers and governmental programs). Generally, the Organization bills the patients and third-party payers several days after the services are performed. Revenue is recognized as performance obligations are satisfied.

Performance obligations are determined based on the nature of the services provided by the Organization. The Organization measures the performance obligations as follows:

- Medical, behavioral health, dental and ancillary services are measured from the commencement of an in-person or virtual encounter with a patient to the completion of the encounter. Ancillary services provided the same day are considered to be part of the performance obligation and are not deemed to be separate performance obligations.
- Contract 340B pharmacy program services are measured when the prescription is dispensed to the patient as reported by the pharmacy administrator.
- In-house pharmacy services are measured when the prescription is dispensed to the patient at one of the Organization's in-house pharmacies.

The majority of the Organization's performance obligations are satisfied at a point in time.

The Organization has determined that the nature, amount, timing and uncertainty of revenue and cash flows are affected by the payer. In assessing collectability, the Organization has elected the portfolio approach. The portfolio approach is being used as the Organization has a large volume of similar contracts with similar classes of customers (patients). The Organization 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, aggregating all the contracts (which are at the patient level) by the particular payer or group of payers will result in the recognition of the same amount of revenue as applying the analysis at the individual patient level. Payer concentrations are disclosed in Note 3.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

A summary of payment arrangements follows:

Medicare

The Organization is primarily reimbursed for medical, behavioral health and ancillary services provided to Medicare beneficiaries based on the lesser of actual charges or prospectively set rates which essentially provides a fixed payment for each patient visit, regardless of the specific services provided during that visit. Certain other services provided to patients are reimbursed based on predetermined payment rates for each Current Procedural Terminology (CPT) code, which may be less than the Organization's public fee schedule.

Medicaid

The Organization is primarily reimbursed for medical, behavioral health and ancillary services provided to Medicaid beneficiaries based on prospectively set rates which essentially provides a fixed payment for each patient visit, regardless of the specific services provided during that visit. Certain other services provided to patients are reimbursed based on predetermined payment rates for each CPT code, which may be less than the Organization's public fee schedule.

Commercial Payers

The Organization has also entered into payment agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. Under these arrangements, the Organization is reimbursed for services based on contractually obligated payment rates for each CPT code, which may be less than the Organization's public fee schedule.

Patients

The Organization provides care to patients who meet certain criteria under its sliding fee discount program. The Organization estimates the costs associated with providing this care by calculating the ratio of total cost to total charges, and then multiplying that ratio by the gross uncompensated charges associated with providing care to patients eligible for the sliding fee discount program. The estimated cost of providing services to patients under the Organization's sliding fee discount program was approximately $660,622 and $588,341 for the years ended December 31, 2024 and 2023, respectively. The Organization is able to provide these services with a component of funds received through federal and state grants and local support.

For uninsured patients who do not qualify under the Organization's sliding fee discount program, the Organization bills the patient based on the Organization's standard rates for services provided. Patient balances are typically due within 30 days of billing; however, the Organization does, in certain instances, enter into payment agreements with patients that allow payments in excess of one year. For those cases, the financing component is not deemed to be significant to the contract.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

340B Pharmacy Program Revenue

The Organization, as an FQHC, is eligible to participate in the 340B Drug Pricing Program. This program requires drug manufacturers to provide outpatient drugs to FQHCs and other covered entities at a reduced price. The Organization operates an in-house pharmacy and contracts with other local pharmacies under this program. The contract pharmacies dispense drugs to eligible patients of the Organization and bill Medicare and commercial insurances on behalf of the Organization. Reimbursement received by the contract pharmacies is remitted to the Organization, less dispensing and administrative fees. The Organization recognizes revenue in the amounts that reflect the consideration to which it expects to be entitled in exchange for the prescription.

Laws and regulations governing the Medicare, Medicaid and 340B programs are complex and subject to interpretation. Management believes that the Organization is in compliance with all laws and regulations. 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, Medicaid and 340B programs. Differences between amounts previously estimated and amounts subsequently determined to be recoverable or payable are included in patient service revenue in the year that such amounts become known.

The Organization's business could be impacted by federal and state legislation in the area of healthcare reform. Changes in these areas could adversely impact the Organization's operations in the future.

Patient Accounts Receivable

Patient accounts receivable are stated at the amount management expects to collect from outstanding balances and are reduced by explicit and implicit price concessions. Management estimates implicit price concessions based on its historical collection experience with patients. No additional valuation allowance is necessary for possible credit losses based on historical experience, current conditions, and reasonable and supportable forecasts.

Grant and Other Receivables, and Deferred Revenue

Grant and other receivables are stated at the amount management expects to collect from outstanding balances. All such amounts are considered collectible.

A portion of the Organization's revenue is derived from cost-reimbursable 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 met the performance requirements or incurred expenditures in compliance with specific contract or grant provisions, as applicable. Amounts received prior to incurring qualifying expenditures are reported as deferred revenue.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

The Organization receives a significant amount of grants from the U.S. Department of Health and Human Services (HHS). As with all government funding, these grants are subject to reduction or termination in future years. For the years ended December 31, 2024 and 2023, grants from HHS (including both direct awards and awards passed through other organizations) represented approximately 68% and 69%, respectively, of the total of grants, contracts, and contributions.

The Organization has been awarded cost reimbursable grants from HHS that have not been recognized at December 31, 2024 because qualifying expenditures have not yet been incurred as follows:

	Amount	Available Through
Health Center Program	$ 1,351,011	April 30, 2025
FY 2023 Early Childhood Development	226,300	August 31, 2025
FY 2023 Bridge Access Programs	14,786	June 30, 2025

Inventory

Inventory consists primarily of pharmaceuticals and is stated at the lower of cost or retail. Cost is determined on the first-in, first-out method.

Investments and Assets Limited as to Use

Assets limited as to use include investments held for others and donor-restricted contributions to be held in perpetuity and earnings thereon, subject to the Organization's spending policy as further discussed in Note 10.

The Organization reports investments at fair value. Investments include donor endowment funds and assets held for long-term purposes. Accordingly, investments have been classified as non-current assets in the accompanying balance sheets regardless of maturity or liquidity. The Organization has established policies governing long-term investments, which are held within several investment accounts, based on the purposes for those investment accounts and their earnings.

Investment income and the change in fair value are included in the deficiency of revenue over expenses, unless otherwise stipulated by the donor or State Law.

Investments, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility risks. As such, 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 balance sheets.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

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. Provision for depreciation is computed using the straight-line method over the useful lives of the related assets. Property and equipment costing less than $5,000 is charged to expense upon purchase.

Right-of-Use Assets and Lease Liabilities

U.S. GAAP requires lessees to recognize a lease liability and a right-of-use asset for all leases with terms greater than 12 months on its balance sheets. Whether an arrangement contains a lease is evaluated at the inception of the arrangement. The Organization estimates its lease liability at the present value of future rent payments required under a lease using the imputed rate when identifiable or a risk-free rate for a term approximating the lease term, including options to extend or terminate the lease that the Organization is reasonably certain to exercise. As the leases do not provide an implicit rate, the Organization elected the practical expedient to use the risk-free rate.

The Organization's right-of-use asset initially is equal to its lease liability, adjusted for any lease incentives received or lease payments made. Lease expense for operating leases is recorded on a straight-line basis over the term of a lease. For finance leases, right-of-use assets are amortized, with the depreciation and amortization of property and equipment, and interest costs are expensed on the lease liability throughout the lease term. Leases of 12 months or less at inception are not included in the Organization's right-of-use assets and lease liabilities.

Patient Deposits

Patient deposits primarily consist of payments made by patients in advance of significant dental work based on quotes for the work to be performed.

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 net assets 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 as net assets released from restriction. Pledges receivable are due in 2025.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

The Organization reports gifts of property and equipment as support without donor restrictions unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as support with donor restrictions. Absent explicit donor stipulations about how long those long-lived assets must be maintained, the Organization reports expirations of donor restrictions when the donated or acquired long-lived assets are placed in service.

Contribution Expense

In July 2023, the substance abuse recovery and treatment program, named SOS Recovery Community Organization (SOSRCO) that the Organization operated as a program became an independent 501(c)(3) non-profit organization. Operating leases and grant contracts associated with SOSRCO were transferred from the Organization. Additionally, the Organization transferred leasehold improvements of $196,782 and made a cash contribution of $152,189 to SOSRCO during the year ended December 31, 2023. The contributed assets are reported as contribution expense on the accompanying statements of operations.

Deficiency of Revenue over Expenses

The statements of operations reflect the deficiency of revenue over expenses. Changes in net assets without donor restrictions which are excluded from the deficiency of revenue over expenses include contributions of long-lived assets (including assets acquired using grants and contributions which, by donor restriction, were to be used for the purposes of acquiring such assets) and net assets released from restriction for capital acquisition.

Subsequent Events

For purposes of the preparation of these financial statements, management has considered transactions or events occurring through May 19, 2025, which is the date the financial statements were available to be issued. Management has not evaluated subsequent events after that date for inclusion in the financial statements.

2. Availability and Liquidity of Financial Assets

The Organization regularly monitors liquidity required to meet its operating needs and other contractual commitments. The Organization has various sources of liquidity at its disposal, including cash and cash equivalents and investments. The Organization had average days cash and cash equivalents on hand (based on normal expenditures) of 109 and 113 at December 31, 2024 and 2023, respectively.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Financial assets and liquidity resources available within one year for general expenditure, such as operating expenses, were as follows at December 31:

	2024	2023
Cash and cash equivalents	**$ 6,202,093**	$ 6,592,894
Investments	**2,914,361**	2,304,036
Patient accounts receivable	**1,051,140**	1,315,414
Grant and other receivables	**961,486**	893,205
Pledges receivable	**71,000**	63,050
Assets limited as to use	**1,368,340**	1,350,630
Less donor restricted assets	**(1,929,894)**	(1,896,404)
Financial assets available	**$ 10,638,526**	$ 10,622,825

3. Patient Accounts Receivable and Net Patient Service Revenue

Patient accounts receivable consisted of the following at December 31:

	2024	2023	2022
Patient accounts receivable	**$ 733,354**	$ 1,046,306	$ 757,642
In-house pharmacy receivables	**220,203**	200,268	61,671
Contract 340B pharmacy receivables	**97,583**	68,840	44,478
Total patient accounts receivable	**$ 1,051,140**	$ 1,315,414	$ 863,791

The Organization grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payer agreements. The accounts receivable from patients and third-party payers, net of contractual allowances, were as follows at December:

	2024	2023
Governmental plans		
Medicare	**14 %**	14 %
Medicaid	**42 %**	48 %
Commercial payers	**28 %**	25 %
Patient	**16 %**	13 %
Total	**100 %**	100 %

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Patient deposits amounted to the following at December 31:

	2024	2023	2022
Patient deposits	**$ 159,286**	$ 178,160	$ 174,576

Net patient service revenue by payer and program was as follows for the years ended December 31:

	2024		
	Medical, Behavioral Health and Dental Services	**Pharmacy Services**	**Total**
Governmental payers			
Medicare	**$ 719,851**	**$ -**	**$ 719,851**
Medicaid	**5,519,527**	**409,727**	**5,929,254**
Commercial payers	**3,117,774**	**1,585,810**	**4,703,584**
Patient	**-**	**250,035**	**250,035**
Net direct patient service revenue	**9,357,152**	**2,245,572**	**11,602,724**
340B contract pharmacy revenue	**-**	**873,369**	**873,369**
Net patient service revenue	**$ 9,357,152**	**$ 3,118,941**	**$ 12,476,093**

	2023		
	Medical, Behavioral Health and Dental Services	Pharmacy Services	Total
Governmental payers			
Medicare	$ 759,016	$ -	$ -
Medicaid	4,130,532	359,543	329,783
Commercial payers	3,273,636	1,459,261	872,636
Patient	-	200,743	200,743
Net direct patient service revenue	8,163,184	2,019,547	10,182,731
340B contract pharmacy revenue	-	968,018	1,370,340
Net patient service revenue	$ 8,163,184	$ 2,987,565	$ 11,150,749

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

4. Pledges Receivable

Pledges receivable consisted of the following at December 31:

	2024	2023
Capital projects that are in service	$ -	$ -
Donor restricted for program services	71,000	63,050
Total	$ 71,000	$ 63,050

5. Investments and Assets Limited as to Use

Investments, stated at fair value, consisted of the following at December 31:

	2024	2023
Long-term investments	$ 2,914,361	$ 2,304,036
Assets limited as to use	1,368,340	1,350,630
Total investments	$ 4,282,701	$ 3,654,666

Assets limited as to use are restricted for the following purposes at December 31:

	2024	2023
Assets held in trust under Section 457(b) deferred compensation plans	$ -	$ 73,482
Assets with donor restrictions	1,368,340	1,277,148
Total	$ 1,368,340	$ 1,350,630

Fair Value of Financial Instruments

U.S. GAAP defines fair value as the price that would be received to sell an asset or paid to transfer a liability (an exit price) in an orderly transaction between market participants and 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.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

U.S. GAAP distinguishes three levels of inputs that may be utilized when measuring 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 tables sets forth by level, within the fair value hierarchy, the Organization's investments at fair value at December 31:

	2024			
	Level 1	**Level 2**	**Level 3**	**Total**
Cash and cash equivalents	**$ 176,757**	**$ -**	**$ -**	**$ 176,757**
Certificates of deposit	**367,385**	**-**	**-**	**367,385**
Municipal bonds	**-**	**388,667**	**-**	**388,667**
Exchange traded funds	**1,647,222**	**-**	**-**	**1,647,222**
Mutual funds	**1,702,670**	**-**	**-**	**1,702,670**
Total investments	**$ 3,894,034**	**$ 388,667**	**$ -**	**$ 4,282,701**

	2023			
	Level 1	Level 2	Level 3	Total
Cash and cash equivalents	$ 419,626	$ -	$ -	$ 419,626
Municipal bonds	-	144,978	-	144,978
Exchange traded funds	1,279,551	-	-	1,279,551
Mutual funds	1,810,511	-	-	1,810,511
Total investments	$ 3,509,688	$ 144,978	$ -	$ 3,654,666

Municipal bonds are valued based on quoted market prices of similar assets.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

6. Property and Equipment

Property and equipment consisted of the following:

	2024	2023
Land	$ 718,427	$ 718,427
Building and improvements	6,708,076	6,499,881
Leasehold improvements	1,568,787	1,409,419
Furniture, fixtures and equipment	3,182,428	3,178,442
Total cost	12,177,718	11,806,169
Less accumulated depreciation	4,925,306	4,465,566
Property and equipment, net	$ 7,252,412	$ 7,340,603

Property and equipment acquired with Federal grant funds are subject to specific federal standards for sales and other dispositions. In many cases, the Federal government retains a residual ownership interest in the assets, requiring prior approval and restrictions on disposition.

Depreciation expense amounted to $466,735 and $454,576 for the years ended December 31, 2024 and 2023, respectively.

7. Long-Term Debt

Long-term debt consisted of the following at December 31:

	2024	2023
2.25% promissory note payable to New Hampshire Health and Education Facilities Authority through July 2030, paid in monthly installments of $2,794, including interest. Note is uncollateralized.	$ 176,142	$ 205,351
Less current portion	29,873	29,209
Long-term debt, less current portion	$ 146,269	$ 176,142

Maturities of long-term debt for the next five years and thereafter are as follows at December 31:

2025	$ 29,873
2026	30,552
2027	31,247
2028	31,957
2029	32,684
Thereafter	19,829
Total	$ 176,142

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

8. Leases

The Organization has a finance lease for a facility through 2037. This lease contains an annual escalating clause of 3 percent beginning in 2027 and has no renewal periods. Termination of the lease is generally prohibited unless there is a violation under the lease agreement. The weighted-average discount rate and weighted-average remaining lease term in years for the finance leases as of December 31, 2024 and 2023, were 2.00% and 13 years and 2.00% and 14 years, respectively.

Lease Cost

Lease cost, which approximates lease payments, was as follows for the years ended December 31:

	2024	2023
Finance lease		
Amortization of right-of-use asset	**$ 309,305**	$ 318,727
Interest on lease liability	**83,953**	88,897
Operating leases	**-**	37,330
Short-term lease expense	**8,928**	42,394
Total	**$ 402,186**	$ 487,348

Future Minimum Lease Payments and Reconciliation to the Balance Sheet

Future minimum payments due under the finance lease agreement are as follows for the years ending December 31:

2025	$ 332,620
2026	332,620
2027	341,767
2028	352,020
2029	362,581
Thereafter	2,898,979
Total future undiscounted lease payments	4,620,587
Less present value discount	540,147
Total lease liability	4,080,440
Current portion of lease liability	253,884
Lease liability, net of current portion	$ 3,826,556

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

9. Net Assets with Donor Restrictions

Net assets with donor restrictions was available for the following purposes at December 31:

	2024	2023
Specific purpose (temporary in nature)		
Program services	**$ 403,495**	$ 406,630
Building	**87,059**	149,576
Passage of time (temporary in nature)		
Pledges receivable	**71,000**	63,050
Earnings from endowment investments	**473,662**	407,470
Held in perpetuity (permanent in nature)		
Endowment	**894,678**	869,678
Total	**$ 1,929,894**	$ 1,896,404

Net assets released from net assets with donor restrictions were as follows at December 31:

	2024	2023
For operations		
Satisfaction of purpose - program services	**$ 41,536**	$ 37,420
Passage of time - pledges receivable	**106,050**	63,478
Passage of time - endowment earnings	**63,282**	61,352
	210,868	162,250
For capital acquisition, placed in service		
Satisfaction of purpose - purchase of capital assets	**59,166**	48,921
Total	**$ 270,034**	$ 211,561

10. Endowment

Interpretation of Relevant Law

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 of the donor-restricted endowment funds, absent explicit donor stipulations to the contrary. As a result of this interpretation, the Organization classifies as a donor-restricted endowment (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent donor-restricted endowment gifts, and (c) accumulations to the donor-restricted endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund, if any, is classified as net assets with donor restrictions until those amounts are appropriated for expenditure in a manner consistent with the standard of prudence prescribed by UPMIFA.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

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 fund;
(2) The purposes of the Organization and the donor-restricted endowment fund;
(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 investment policies of the Organization.

Spending Policy

The Organization has a policy of appropriating for expenditure an amount equal to 5% of the endowment fund's average fair market value over the prior 20 quarters. The earnings on the endowment fund are to be used for operations.

Funds with Deficiencies

From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the level that the donor requires the Organization to retain as a fund of perpetual duration (underwater). In the event the endowment becomes underwater, it is the Organization's policy to not appropriate expenditures from the endowment assets until the endowment is no longer underwater. There were no such deficiencies as of December 31, 2024 and 2023.

Return Objectives and Risk Parameters

The Organization has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets. Endowment assets include those assets of donor-restricted funds that the Organization must hold in perpetuity. Under this policy, as approved by the Board of Directors, the endowment assets are invested in a manner that is intended to produce results that exceed or meet designated benchmarks while incurring a reasonable and prudent level of investment risk.

Strategies Employed for Achieving Objectives

To satisfy its long-term rate-of-return objectives, the Organization relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Organization targets a diversified asset allocation that places a balanced emphasis on equity-based and income-based investments to achieve its long-term return objectives within prudent risk constraints.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Endowment Net Asset Composition by Type of Fund

The Organization's endowment consisted of assets with donor restrictions only and had the following related activities at December 31:

	2024	2023
Endowments, beginning of year	**$ 1,277,148**	$ 1,166,749
Contributions	**25,000**	-
Investment income	**36,818**	32,322
Change in fair value of investments	**92,656**	139,819
Spending policy appropriations	**(63,282)**	(61,742)
Endowments, end of year	**$ 1,368,340**	$ 1,277,148

11. Functional Expenses

The Organization provides various services to residents within its geographic location. Given the Organization is a service organization, expenses are allocated between healthcare, administrative and support and fundraising services based on the percentage of direct care wages to total wages, with the exception of program supplies which are 100% healthcare in nature.

Expenses related to providing these services were as follows:

	2024			
	Healthcare Services	Administrative and Support Services	Fundraising Services	Total
Salaries and wages	**$ 10,878,837**	**$ 1,903,668**	**$ 423,291**	**$ 13,205,796**
Employee benefits	**1,758,112**	**240,355**	**68,898**	**2,067,365**
Contracted services	**438,890**	**216,850**	**8,848**	**664,588**
Program supplies	**2,452,258**	**-**	**-**	**2,452,258**
Information technology	**342,872**	**46,875**	**13,437**	**403,184**
Occupancy	**648,285**	**88,629**	**25,405**	**762,319**
Other	**1,011,163**	**138,026**	**39,625**	**1,188,814**
Depreciation and amortization	**669,370**	**91,511**	**26,232**	**787,113**
Interest expense	**75,068**	**10,263**	**2,942**	**88,273**
Total	**$ 18,274,855**	**$ 2,736,177**	**$ 608,678**	**$ 21,619,710**

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

	2023			
	Healthcare Services	Administrative and Support Services	Fundraising Services	Total
Salaries and wages	$ 11,062,135	$ 1,561,970	$ 494,721	$ 13,118,826
Employee benefits	2,016,814	275,723	79,036	2,371,573
Contract services	494,344	255,388	10,569	760,301
Program supplies	2,093,214	-	-	2,093,214
Information technology	616,842	84,330	24,173	725,345
Occupancy	676,912	92,542	26,527	795,981
Other	1,155,786	158,011	45,293	1,359,090
Depreciation and amortization	657,626	89,905	25,772	773,303
Interest expense	79,826	10,913	3,128	93,867
Total	$ 18,853,499	$ 2,528,782	$ 709,219	$ 22,091,500

12. Retirement Plans

The Organization has a defined contribution plan under IRC Section 401(k) that covers substantially all employees. For the years ended December 31, 2024 and 2023, the Organization contributed $223,611 and $245,423, respectively, to the plan. A portion of the 2024 contribution was funded by the use of $68,697 in available plan forfeitures. The Organization did not use any plan forfeitures to help fund the 2023 contribution.

The Organization has an unqualified deferred compensation plan under IRC Section 457(b) for certain key employees of the Organization. The Organization did not contribute to the plan during the year ended December 31, 2024. The Organization contributed $6,000 to the plan during the year ended December 31, 2023. The balance of the deferred compensation plan amounted to $0 and $73,482 at December 31, 2024 and 2023, respectively.

13. Medical Malpractice Insurance

The Organization is protected from medical malpractice risk as an FQHC under the Federal Tort Claims Act (FTCA). The Organization has additional medical malpractice insurance, on a claims-made basis, for coverage outside the scope of the protection of the FTCA. As of December 31, 2024, there were no known malpractice claims outstanding which, in the opinion of management, will be settled for amounts in excess of both FTCA and additional medical malpractice insurance coverage, nor are there any unasserted claims or incidents which require loss accrual. The Organization intends to renew the additional medical malpractice insurance coverage on a claims-made basis and anticipates that such coverage will be available.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

14. Food Vouchers

The Organization acts as a conduit for the State of New Hampshire's Special Supplemental Food Program for Women, Infants and Children (WIC). The value of food vouchers distributed by the Organization was $1,484,102 and $1,425,107 for the years ended December 31, 2024 and 2023, respectively. These amounts are not included in the accompanying financial statements as they are not part of the contract the Organization has with the State of New Hampshire for the WIC program.

15. Litigation

From time-to-time, certain complaints are filed against the Organization in the ordinary course of business. Management vigorously defends the Organization's actions in those cases and utilizes insurance to cover costs over $50,000 per case. In the opinion of management, there are no matters that will materially affect the Organization's financial statements.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

SUPPLEMENTARY INFORMATION

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

GREATER SEACOAST COMMUNITY HEALTH

Schedule of Expenditures of Federal Awards

Year Ended December 31, 2024

Federal Grant/Pass-Through Grantor/Program Title	Assistance Listing Number	Pass-Through Contract Number	Total Federal Expenditures
U.S. Department of Health and Human Services:			
Direct			
Health Center Program Cluster			
Health Center Program (Community Health Centers, Migrant Health Centers, Health Care for the Homeless, and Public Housing Primary Care)	93.224		$ 2,753,279
COVID-19 Health Center Program (Community Health Centers, Migrant Health Centers, Health Care for the Homeless, and Public Housing Primary Care)	93.224		196,670
Total AL 93.224			2,949,949
Grants for New and Expanded Services Under the Health Center Program	93.527		1,288,181
COVID-19 Grants for New and Expanded Services Under the Health Center Program	93.527		23,332
Total AL 93.527			1,311,513
Total Health Center Program Cluster			4,261,462
Congressional Directives	93.493		5,988
Pass-Through			
State of New Hampshire Department of Health and Human Services			
Public Health Emergency Preparedness	93.069	074-500589/90077028	20,424
Public Health Emergency Preparedness	93.069	102-500731/90077410	20,041
Total AL 93.069			40,465
Immunization Cooperative Agreements	93.268	102-500731/90023800	525
Immunization Cooperative Agreements	93.268	102-500731/90023010	7,363
Total AL 93.268			7,888
Bi-State Primary Care Association, Inc.			
COVID-19 Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises	93.391	n/a	27,495
State of New Hampshire Department of Health and Human Services			
COVID-19 Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises	93.391	102-500731/90577150	55,438
Total AL 93.391			82,933

The accompanying notes are an integral part of this schedule.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

GREATER SEACOAST COMMUNITY HEALTH

Schedule of Expenditures of Federal Awards (Continued)

Year Ended December 31, 2024

Federal Grant/Pass-Through Grantor/Program Title	Assistance Listing Number	Pass-Through Contract Number	Total Federal Expenditures
State of New Hampshire Department of Child and Family Services			
Marylee Allen Promoting Safe and Stable Families Program	93.556	102-500734/42107306	19,521
Temporary Assistance for Needy Families	93.558	500589/45030353	195,422
Stephanie Tubbs Jones Child Welfare Services Program	93.645	102-500734/42106802	3,582
Social Services Block Grant	93.667	074-500589/45001501	71,364
State of New Hampshire Department of Health and Human Services			
National Bioterrorism Hospital Preparedness Program	93.889	074-500589/90077700	4,144
Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations	93.898	102-500731/90080081	42,052
Block Grants for Prevention and Treatment of Substance Abuse	93.959	074-500589/92057502	120,785
Block Grants for Prevention and Treatment of Substance Abuse	93.959	074-500589/90001022	10,140
Block Grants for Prevention and Treatment of Substance Abuse	93.959	010-092-33800000-500589/92057502	158,940
Total AL 93.959			289,865
Preventive Health and Health Services Block Grant	93.991	074-500589/92057502	10,453
State of New Hampshire Department of Child and Family Services			
Maternal and Child Health Services Block Grant to the States	93.994	102-500731/90004009	67,568
State of New Hampshire Department of Health and Human Services			
Maternal and Child Health Services Block Grant to the States	93.994	074-500585/45001502	4,153
Total AL 93.994			71,721
Total U.S. Department of Health and Human Services			5,106,860
U. S. Department of Agriculture:			
Pass-Through			
State of New Hampshire Department of Health and Human Services			
WIC Special Supplemental Nutrition Program for Women, Infants, and Children	10.557	102-500589	476,891

The accompanying notes are an integral part of this schedule.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

GREATER SEACOAST COMMUNITY HEALTH

Schedule of Expenditures of Federal Awards (Concluded)

Year Ended December 31, 2024

Federal Grant/Pass-Through Grantor/Program Title	Assistance Listing Number	Pass-Through Contract Number	Total Federal Expenditures
U.S. Department of Housing and Urban Development:			
Pass-Through			
City of Portsmouth New Hampshire			
Community Development Block Grants/Entitlement Grants	14.218	n/a	105,881
U.S. Department of Treasury:			
Pass-Through			
Bi-State Primary Care Association, Inc.			
COVID-19 Coronavirus State and Local Fiscal Recovery Funds	21.027	n/a	2,063
Total Expenditures of Federal Awards, All Programs			$ 5,691,695

The accompanying notes are an integral part of this schedule.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

GREATER SEACOAST COMMUNITY HEALTH

Notes to Schedule of Expenditures of Federal Awards

Year Ended December 31, 2024

1. Summary of Significant Accounting Policies

Expenditures reported on the schedule of expenditures of federal awards (the Schedule) are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance), wherein certain types of expenditures are not allowable or are limited as to reimbursement.

2. De Minimis Indirect Cost Rate

Greater Seacoast Community Health (the Organization) has elected not to use the 10% de minimis indirect cost rate allowed under the Uniform Guidance.

3. Basis of Presentation

The Schedule includes the federal grant activity of the Organization. The information in this Schedule is presented in accordance with the requirements of the Uniform Guidance. Because the Schedule presents only a selected portion of the operations of the Organization, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the Organization.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

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 Directors
Greater Seacoast Community Health

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 Greater Seacoast Community Health (the Organization), which comprise the balance sheet as of December 31, 2024, and the related statements of operations, 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 May 19, 2025.

Report on Internal Control over Financial Reporting

In planning and performing our audit of the 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.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Board of Directors
Greater Seacoast Community Health

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.

BDMP Assurance, LLP

Manchester, New Hampshire
May 19, 2025

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

BerryDunn

BDMP Assurance, LLP

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR THE MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

Board of Directors
Greater Seacoast Community Health

Report on Compliance for the Major Federal Program

Opinion on the Major Federal Program

We have audited Greater Seacoast Community Health's (the Organization) compliance with the types of compliance requirements identified as subject to audit in the Office of Management and Budget *Compliance Supplement* that could have a direct and material effect on its major federal program for the year ended December 31, 2024. The Organization'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 Organization complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on its major federal program for the year ended December 31, 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 the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor’s Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of 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 the major federal program. Our audit does not provide a legal determination of the Organization'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 Organization's federal programs.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

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 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 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 Organization's compliance with the requirements of the 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 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

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance and therefore, material weaknesses or significant deficiencies may exist that were not identified. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, as discussed below, we did identify a certain deficiency in internal control over compliance that we consider to be a significant deficiency.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

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 control over compliance described in the accompanying schedule of findings and questioned costs as item 2024-001, to be a significant deficiency.

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 Organization's response to the internal control over compliance finding identified in our audit described in the accompanying schedule of findings and questioned costs. The Organization'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.

BDMP Assurance, LLP

Manchester, New Hampshire
May 19, 2025

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

GREATER SEACOAST COMMUNITY HEALTH

Schedule of Findings and Questioned Costs

Year Ended December 31, 2024

Section 1. Summary of Auditor's Results

Financial Statements

Type of auditor's report issued:			Unmodified	
Internal control over financial reporting:				
Material weakness(es) identified?	☐	Yes	☑	No
Significant deficiency(ies) identified that are not considered to be material weakness(es)?	☐	Yes	☑	None reported
Noncompliance material to financial statements noted?	☐	Yes	☑	No

Federal Awards

Internal control over major programs:				
Material weakness(es) identified:	☐	Yes	☑	No
Significant deficiency(ies) identified that are not considered to be material weakness(es)?	☑	Yes	☐	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)?	☐	Yes	☑	No

Identification of major programs:

Assistance Listing Number	Name of Federal Program or Cluster
	Health Center Program Cluster

Dollar threshold used to distinguish between Type A and Type B programs:			$750,000	
Auditee qualified as low-risk auditee?	☑	Yes	☐	No

Section 2. Financial Statement Findings

None

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Section 3. Federal Award Findings and Questioned Costs

Finding Number:	2024-001
Finding Type:	Significant Deficiency in Internal Controls Over Compliance related to Special Tests and Provisions
Information on the Federal Program:	Program Name: Health Center Program Cluster (AL numbers 93.224 and 93.527) Grant Awards: 2 H80CS04210-19-00 from May 1, 2023 through April 30, 2024 and 5 H80CS04210-29-00 from May 1, 2024 through April 30, 2025 Agency: U.S. Department of Health and Human Services, Health Resources and Services Administration Pass-Through Entity: N/A
Criteria:	In accordance with Section 330(k)(3)(G) of the Public Health Services Act (42 U.S. Code § 254b), as an FQHC, the Organization must have a sliding fee discount program in which the Organization's fee schedule is discounted based on a patient's ability to pay. In accordance with their policy, the Organization will monitor the accuracy of the discounts provided to patients by a monthly random audit of 15 visits where a sliding fee discount adjustment was received.
Condition:	The Organization did not perform monitoring activities as outlined above from July 2024 through December 2024 as required by the Organization's sliding fee discount policy.
Cause:	The Organization was unable to complete the task as expected due to an exceptionally high workload during this period. They were managing multiple priorities, which required their immediate attention, and as a result, were not able to allocate the necessary time to this particular responsibility.
Effect:	It is possible the Organization may not apply sliding fee discounts to patient charges consistent with its sliding fee discount program and these errors may not be detected and corrected in a timely manner.
Questioned Costs:	None
Repeat Finding:	No

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Section 3. Federal Award Findings and Questioned Costs (Concluded)

Finding Number: 2024-001 (Concluded)

Recommendation: To help maintain compliance with the Organization's sliding fee discount program and related policy, we recommend the Organization strengthen its internal controls by implementing the following:

1. Establish a Formal Monitoring Calendar: Develop and maintain a documented monitoring calendar that includes monthly deadlines and responsible personnel for completing the required audits. This calendar should be reviewed and approved by supervisory staff and integrated into regular compliance reporting.

2. Assign Backup Personnel: Designate and train at least one backup staff member to perform sliding fee discount audits during periods of high workload or staff absences in order to maintain continuity and timely completion of required monitoring activities.

3. Monthly Oversight Review: Require supervisory review and sign-off on the completion of each monthly audit to verify that the monitoring activities were conducted and documented appropriately.

Views of a Responsible Official and Corrective Action Plan: Management agrees with the finding and will implement the recommendations above and maintain consistency with their internal monitoring procedures moving forward.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

JG

Jessica Garlough

Director Of Family and Social Services

[redacted]

[redacted]

Key Skills and Characteristics

- Contract Negotiation
- Community Outreach
- Grant Writing
- Grant Management
- Budget Management, Forecasting & Compliance
- Resource Allocation
- Staff Leadership, Training and Mentorship
- Multi-County & Multi-Site Program Oversight
- Stakeholder Partnerships

Senior healthcare and social services leader with 15+ years of experience directing multi-site, multi-program operations. Proven record of accomplishments overseeing concurrent programs, staff, and budgets across geographically dispersed regions, ensuring compliance, financial accountability, and high-quality service delivery. Known for strategic leadership, cross–county coordination and building high-performing teams while advancing mission driven outcomes.

Experience

Oct 2020- Present
Director of Family and Social Services| Greater Seacoast Community Health
Somersworth & Portsmouth, NH

- Direct and fully oversee multiple concurrent family support programs across multiple locations. Ensuring consistent operations and service delivery.
- Provide hands on leadership in staffing, marketing, strategic planning, and organizational compliance.
- Managed department budgets with full responsibility for allocation, forecasting, and fiscal compliance across sites.
- Participation in multiple community boards, committees, and alliances
- Consistently met project deadlines and exceeded client expectations

June 2014-October 2020
Prenatal and Social Work Manager – Goodwin Community Health
Somersworth, NH

November 2012-June 2014
Family Planning and Social Work Manager- Goodwin Community Health
Somersworth, NH

June 2006- November 2012
Social Worker and Mental Health Coordinator- Goodwin Community Health
Somersworth and Dover, NH

August 2001- June 2006
Home Visiting/ HFA Manager -Strafford County Community Action
Strafford County, NH

May 2001- September 2001
Strafford County WIC - (temporary grant position)
Strafford County, NH

Education

Bachelor of Arts in Psychology, Southern New Hampshire University
Manchester, NH - May 2001

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

JOANN CLEMENT

FAMILY CENTER MANAGER

Experienced social services professional with 5+ years of leadership in family resource and community-based programs. Skilled in supervising teams, overseeing daily operations, managing state contracts, and ensuring regulatory compliance. Strong background in trauma-informed, family-centered service delivery, cross-sector collaboration, and program evaluation. Committed to strengthening families and improving access to community support.

PROFESSIONAL EXPERIENCE

Family Center Manager

Greater Seacoast Community Health / Families First | 2020 – Present

- Oversee daily operations of home visiting and family support programs serving 500+ families annually.
- Supervise a team, providing coaching, performance evaluations, and professional development.
- Manage state contracts, ensuring compliance with reporting requirements, grant guidelines, and quality standards.
- Monitor program outcomes and utilize data to inform service improvements and future planning.
- Collaborate with community partners, schools, healthcare providers, and state agencies to coordinate services and reduce barriers for families.
- Increased family participation through implementation of strength-based engagement strategies.

Kinship Navigator / Administrative Assistant

Greater Seacoast Community Health / Families First | 2012 – 2020

- Coordinated navigation services for kinship families impacted by substance use disorder.
- Facilitated evidence-based parent education programs to promote caregiver resilience.
- Managed confidential documentation, contract reporting, and compliance tracking.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

- Implemented enhanced evaluation tools, improving participant feedback and program responsiveness.
- Oversaw the day-to-day support of the Family Center staff.

CORE COMPETENCIES

Program Management
Staff Supervision & Team Leadership
Contract & Compliance Oversight
Strategic Program Development
Community Partnerships
Data-Informed Decision Making
Strength-Based Practices
Public Speaking & Facilitation

EDUCATION

Bachelor of Science, Psychology
Minors: Management, Family Studies
Granite State College

Associate of Science, Human Services
New Hampshire Community College

CERTIFICATIONS

Notary Public, State of NH (Expires 2029)
Growing Great Kids – Tier I
Grandfamilies Certificate Program
Parenting Journey I Facilitator
Youth Mental Health First Aid
Volunteer Advocate in Special Education

LEADERSHIP & PROFESSIONAL AFFILIATIONS

Advisory Member, Family Support New Hampshire | 2022 – 2026
Served as one of five representatives for Family Resource Center Network; participated in special interest projects, assisted in clarifying membership concerns and influenced the collaborative efforts of the network.

Family Council Member, Partners in Health | 2009 – 2021
Chaired oversight of $20,000 in annual family support funds; served as Chair, Vice-Chair, and Secretary.

NH Leadership Series – UNH Institute on Disability | 2013 – 2014
Leadership cohort focused on disability advocacy and systems change.

Training:

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

- Personal Safety for Supervisors
- De-escalation Techniques
- Intro and Overview of Trust-Based Relational Intervention
- NAMI Connect training
- Early Childhood Trauma Training
- Standards of Quality training
- Translating Behavior into Communication part 2
- Project ECHO Aging, Community, and Equity 2023
- Translating Behavior into Communication
- Providing Trauma-Informed Supervision
- AVADE-De-Escalation training
- Boundary Spanning Leadership Program
- Coming into the Light: Breaking the Stigma of Substance Use Disorders
- Family Dynamics and Family Recovery
- Protective Factor’s Training
- Choose Love Movement

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Beth Searle-Spratt

SUMMARY

Compassionate and dedicated Family Support Professional with 20+ years of experience providing home-based services, empowering families through strengths-based approaches, and coordinating support across community agencies.

CORE COMPETENCIES

- Family Support & Home Visiting
- Case Management & Service Coordination
- Parent Education & Coaching
- Interagency Collaboration
- Advocacy & Resource Navigation
- Support Group Facilitation
- Community Outreach & Engagement
- Training & Onboarding of New Staff
- Event Planning & Fundraising

PROFESSIONAL EXPERIENCE

Families First Health & Support Center — Portsmouth, NH
Family Support Worker | 2000 – Present

- Provide strengths-based, home-based family support services.
- Develop individualized service plans and coordinate with providers.
- Advocate for families to access supports.
- Facilitate the Kinship Caregiver Support Group.
- Serve as a Community Partner with NH Parent Partner Program.
- Train and mentor new hires.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Hampton Child and Family Program — Hampton, NH
Board of Directors | 1992 – 1997

- Planned and implemented advertising for events.
- Secured matching funds and volunteers from Walmart.
- Project manager for fundraising initiatives.
- Founding team member for Village Pre-School.
- Served on Executive Director Search Committee.

COMMUNITY LEADERSHIP & VOLUNTEER EXPERIENCE

- Classroom volunteer at Centre and Marston Schools.
- Library volunteer.
- Odyssey of the Mind coach.
- Cub Scout Den Leader & Committee Member (Pack 177).
- Active Parenting co-leader and group facilitator.

ADDITIONAL EXPERIENCE

Day Care Provider — Hampton, NH
1991 – 1994

- Operated an in-home day care.
- President, Hampton Area Babysitting Co-op (1992–1993).

The Atlantic News — Hampton, NH
Account Executive | 1986 – 1987

- Managed advertising sales in Seacoast area.
- Built and maintained client accounts.
- Designed advertisements and consulted on marketing.

CERTIFICATIONS

- Parents as Teachers (PAT) Parent Educator — 2002
- Family Focus Parent Educator — 2000
- Growing Great Kids (GGK) Certification - 2016

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

• Standards of Quality for Family Strengthening and Support Certification

MEMBERSHIPS

• CHADD Member — 1997 to Present

• PTA Member — 1993 to Present

• Kappa Delta Phi, Kappa XI — Vice President

• Alexander Twilight Players — 1976–1981

AWARDS

• Betty Jean Baker Award — 1981

• John Sibley Memorial Scholarship

EDUCATION

Lyndon State College — Lyndonville, VT
B.S., Communication Arts & Sciences (Broadcast Production)
B.A., Theater & Interpretive Arts

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Heidi L. Crowell

Professional Summary

Experienced family support specialist, early childhood advocate, and community health professional with 11+ years across child development, behavioral health, public health, and emergency response. Skilled in supporting kinship caregivers, coordinating access to care, navigating crises, and advocating for equitable health and social services.

Core Issue Area Expertise

- Early Childhood & Family Support
- Children's Behavioral Health
- Health Care Access & Navigation
- Public Health & Prevention
- Healthy Aging & Kinship Caregiving
- Community Education & Advocacy

Professional Experience

- Comprehensive Family Support Services Home Visitor / Kinship Navigator-Families First (September 2024–present)
    - Promote healthy child development and remove barriers to early childhood success.
    - Provide culturally responsive support to families facing social, emotional, or mental health challenges.
    - Support kinship caregivers in accessing education, scholarships, and community programs.
    - Guide families in creating and updating Family Support Plans.
    - Educate caregivers on child development, safety, and nutrition.
    - Connect families to health care, behavioral health, crisis resources, and follow-up services.
- Comprehensive Family Support Services Home Visitor / Kinship Navigator-Community Action Partnership of Strafford County (2023–September 2024)
    - Promote healthy child development and remove barriers to early childhood success.
    - Provide culturally responsive support to families facing social, emotional, or mental health challenges.
    - Support kinship caregivers in accessing education, scholarships, and community programs.
    - Guide families in creating and updating Family Support Plans.
    - Educate caregivers on child development, safety, and nutrition.
    - Connect families to health care, behavioral health, crisis resources, and follow-up services.
- Paraprofessional – ConVal School District (2020–2023)
    - Supported students with diverse academic, social, and behavioral needs.
    - Helped maintain structured, safe learning environments.

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

- Advanced Emergency Medical Technician – Town of Antrim (2016–2023)
    - Responded to medical and behavioral health emergencies.
    - Provided stabilization and supported crisis teams for continuity of care.

Additional Experience

- Bartender/Server – Dublin Road Taproom (2020–2021)
- Admin Assistant & Social Media Coordinator – Arvigo Institute (2018–2020)
- Nanny/Household Manager – Private Family (2016–2018)
- Assistant Dog Daycare Manager – Under One Woof (2008–2013)
- Bank Teller/CSR – TD Bank (2007–2009)
- Bed & Breakfast Manager – Ivey House B&B (2002–2005)

Education

B.S. Environmental Studies & Geography – Keene State College (2011)

Skills

- Child Development
- Crisis Response
- Family Advocacy
- Community Resources
- Recordkeeping
- Trauma-Informed Support
- Public Health Navigation

Trainings & Certifications

- Growing Great Kids Next Generation Prenatal to 36 Months
- Growing Great Kids Next Generation for Preschoolers
- Intro and Overview of Trust-Based Relational Intervention
- TBRI Caregiver Training Series
- Parenting The Second Time Around
- Mental Health and Suicide Prevention Among LGBTQ+ Youth
- Project NETT-Early Childhood Trauma Training
- Motivational Interviewing Facilitating Change
- Certificate of Grandfamilies Leadership
- Connect Suicide Prevention Training
- Adult Mental Health First Aid Training
- Naloxone Administration Train the Trainer

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Jillian Peacock

Education

- Springfield College 2013 B.S. Degree Psychology

Trainings

- Certified Lactation Counselor
- Growing Great Kids- Next Generation
- Basic Motivational Interviewing
- Standards of Quality
- Trauma Informed Care- Pyramid Model
- Targeted Strategies for Social Skills for Infants/Toddlers- Pyramid Model
- Building Positive Relationships for Infant/Toddlers- Pyramid Model
- National Alliance on Mental Illness training
- Trust Based Relational Intervention

Experience

Current Position Greater Seacoast Community Health
In-Home Family Support Specialist

- Engages each family by establishing rapport using trauma informed approach.
- Maintains confidentiality and ethical boundaries in accordance with company policies.
- Develops an Individualized Family Support Plan which identifies the family's strengths and challenges while creating goals towards targeted support, advocacy and education.
- Maintains detailed notes on all activities, in a timely manner.
- Assesses strengths and concerns of each family using a variety of assessment tools.

2022- 2023 Imprints Day School North Hampton, NH
Lead Infant Teacher

- Planned and implemented age appropriate activities.
- Provided individualized attention and care to children ranging from 8-15 months.
- Maintained a clean and safe environment.
- Communicated with parents/guardians about development.

2019-2020 Ocean Beach Hardware San Diego, CA
Customer Service/Cashier

- Greeted all customers with a warm welcome and open mind.
- Utilized knowledge and tools to assist customers in troubleshooting a wide range of home and work projects.
- Used spreadsheets in order to receive and put away new products as they were delivered to the store.

2017-2018 Sugar Bowl Resort Norden, CA

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Ski & Board School Supervisor

- Assisted with payroll, time edits, and POS system
- Provided outstanding customer service via email, phone and in person interaction
- Ensured guest satisfaction by pairing with instructors who met they individual needs
- Successfully created a positive and productive work environment for instructors

2015- 2019 Amanda Perez San Diego, CA

Childcare Provider

- Provided high-level, personalized childcare for two children: from the ages of newborn to five.
- Managed all facets of childcare including cooking and meal preparation, constant supervision, activity planning and school pick-ups and drop-offs.

2015- 2019 People's Co-Op San Diego, CA

Cashier/Bulk Department

- Shared best practices for sales and customer service with other team members to help improve efficiency
- Learned more about natural foods, holistic health, and lifestyle products
- Developed relationships with customers, worked in other departments, and maintained quality assurance

2011-2015 Lighthouse Ice Cream San Diego, CA

Server

- Known for exceeding customer expectations and maintaining pose and a sense of humor in stressful environments
- History of maintaining clean dining areas while ensuring all standards are met
- Consistently provided professional, friendly, and engaging service

2005-2013 Ski Sundown New Hartford, CT

Snowboard Instructor

- Increased exposure to the sport and provided instruction to students of all ages from young to senior (4-65)
- Provided a safe, fun and educational learning environment and utilized communication skills to transfer knowledge about snowboarding from basic to advanced levels
- Guided instructors in proper techniques and skills and encouraged teamwork and cooperation among the staff and students
- Promoted from Jr. Instructor to Supervisor based on past success, knowledge of company operations and management skills

2012-2013 Ski Sundown New Hartford, CT

Puffins Supervisor

- Tasked with managing the children's ski instruction courses
- Oversaw lessons and training for young skiers in a fun and safe environment

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

ELLEN MICHNIEWICZ

Professional Summary

Experienced educator and family support specialist with over 20 years of experience providing individualized educational guidance, trauma-informed care, and family-centered services. Recognized for strong communication, behavioral management expertise, and a calm, patient approach.

Skills

- Behavioral Management
- Active Listening
- Analytical Thinking
- Classroom Instruction
- IEP Support
- Self-Motivated
- Calm Disposition
- Patient
- Multitasking

Work Experience

Comprehensive Family Support Specialist / Kinship Navigator — Greater Seacoast Community Health — Portsmouth, NH
11/2022 – Present

- Provide effective home-based, family-centered services to expectant women, families with children up to age 21, and kinship caregivers.
- Deliver parenting education, child development guidance, and health and safety information.
- Conduct needs assessments and develop Individualized Family Support Plans.
- Maintain documentation for billing and case management.
- Collaborate with GSCH staff and community agencies to support family needs.

Cooking Teacher — York Parks & Recreation — York, ME
07/2017 – 08/2022

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

- Developed and implemented creative, age-appropriate cooking lesson plans.
- Prepared youth teams for local and regional culinary competitions.
- Led individual and group cooking classes emphasizing safety and skill development.

Assistant Teacher — Learning Tree Preschool — York, ME
09/2005 – 06/2021

- Provided one-on-one and group learning support.
- Monitored and documented student progress.
- Assisted lead teacher with classroom management and curriculum delivery.

Certifications & Trainings

- Growing Great Kids
- Trust Based Relational Intervention (TBRI) 1 & 2
- Better Together
- Motivational Interviewing
- Certificate of Grandfamilies Leadership
- Trauma Informed Care
- Trauma Informed Care for Teens
- Using Trauma-Informed Lens to Address Children's Behavior
- Standards of Quality for Family Strengthening
- Parenting a Second Time Around

Education

Bachelor of Arts, English — University of Maine, Orono, ME
Secondary Education Teaching Certificate (ELA) — University of New England, Biddeford, ME

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Carson Bear
[redacted]

SKILLS

Verbal & written communication, attention to detail, adaptability, team & independent work, patience, calm demeanor in emotionally heightened situations, positive attitude, event planning, outreach, advocacy, social media management.

TOOLS

Canva, Instagram/TikTok/Facebook, NextGen and Epic EHR systems, Google Suite, Microsoft Office, Toast POS, MindBody, basic familiarity with Wix & Constant Contact.

EXPERIENCE

Seacoast Public Health Network / Lamprey Health Care - *Community Health Worker*
FEBRUARY 4 2025-MARCH 28 2025/PRESENT (Loss of CHW position due to grant funding cuts, still managing social media.)

- Remote work, management of own schedule and projects
- Community engagement, community partner relationship building
- COVID test distribution
- Social media management
- Project coordination
- Advocacy, outreach, education, and engagement

Freelance Work for Jessica LaFleur Photography, New England Region - *Photography Assistant, Content Creator*
2023-CURRENT

- Assisting in timeline management, collaborating with vendors and clients
- Capturing and editing photo and video content
- Creating social media content utilizing platforms and programs such as Instagram, TikTok, Canva, and more

Viola & Moss, Rye NH / South End Yacht Club, Portsmouth NH - *Assistant Events Planner, Assistant Floral Design, Catering Staff, Lead Waitstaff*

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

2024 SUMMER SEASON

- Wedding & event catering (50-150 guests)
- Assisted with event planning, set up, floral preparation & design, and break down
- Assisted design team in floral arrangements and decor
- Managed table service including, seating, serving, and bussing
- Utilized Toast POS system for orders and transactions

Planned Parenthood of Northern New England, Exeter NH - *Lead Health Care Associate*

APRIL 2021 - MAY 2024

- Managed patient intake, performed screenings, and provided patient education
- Conducted vital sign measurements, venipuncture, and administered injections
- Ensured HIPAA compliance and maintained patient privacy at all times
- Adhered to informed consent, mandatory reporting, and trauma informed care practices
- LGBTQ+ sexual and reproductive care, gender-affirming care
- Supported clinical staff by preparing health center, clinical and lab spaces, and patient rooms
- Trained and mentored onboarding Health Care Associate staff
- Performed front desk tasks such as phone triage, medical document processing/faxing, financial transactions, and patient scheduling
- Utilized NextGen EHR system and Epic EHR system for both front desk focused and clinically focused documentation

The Hotel Portsmouth, Portsmouth NH - *Guest Services Associate, Housekeeper*

JANUARY 2019 - MARCH 2020

- Managed guest check-ins/outs, processed payments/refunds, handled reservations via phone, online, and in-person
- Ensured guest privacy and satisfaction while responding to special requests and creating unique guest experiences
- Maintained hotel standards through housekeeping, room inspection, upkeep of common areas, laundry, and breakfast preparation
- Provided concierge services

Elements Massage, Portsmouth NH - *Sales and Client Service Specialist, Wellness Program Associate*

APRIL 2017 - JULY 2018

- Managed client check-ins/outs and handled appointment scheduling via phone, MindBody online system, and in-person
- Advised clients on wellness program memberships and increased sales of monthly memberships/renewals
- Complied with HIPAA, processing insurance and health intake information
- Recognized as “Sales and Client Service Specialist of the Year” at annual tri-studio meeting

Applecrest Farm Bistro, Hampton Falls NH - *Hostess, Barista, Server, Interim Co-Manager*

MARCH 2016 - SEPTEMBER 2017 (ADDITIONALLY, MARCH-OCTOBER 2020)

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

- Provided excellent customer service by seating guests, taking reservations, and maintaining waitlists
- Trained, hired, and scheduled staff, contributing to improved restaurant efficiency
- Managed opening/closing duties for cafe and restaurant, ensuring smooth daily operations
- Delivered food and beverages, utilized POS system for orders, and communicated with kitchen staff.
- Alcohol service, bartending

EDUCATION

Southern New Hampshire University - *Bachelor of Community Health Education*

Great Bay Community College, Portsmouth NH - *Associates in Hospitality Management & Hotel Management Certificate*

REFERENCES

Ashley Bliss - Manager, Planned Parenthood of Northern New England. 603-728-5060.

bliss.ashley@gmail.com

Taiese Clemence-Schreiner - Coworker, Planned Parenthood of Northern New England.

774-487-8913.

taiesecs@gmail.com.

Stephanie Green - Clinician, Planned Parenthood of Northern New England.

603-731-1298.

Julia Foulks - Manager, Seacoast Public Health Network.

jfoulks@seacoastphn.org

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Patricia S. Keck

EXPERIENCE

Families First, Portsmouth NH – *Family Program Facilitator*

2011 - PRESENT

- Facilitating caregiver & child playgroups and activities
- Encouraging positive interactions between children, caregivers, & facilitators
- Promoting creativity, play, and socialization through activities such as crafts, circle time, story time, & free play
- Supervising support volunteers

Patty Keck Cleaning Company, Portsmouth NH – *Owner, Cleaner*

1999-2020

- Owned and operated a commercial & residential cleaning company
- Managed weekly schedules and accounts
- Oversaw quality control
- Generated business, maintained customer relationships

Little Harbor Elementary School, Portsmouth NH – *After-School Program Facilitator*

2002

- Designed and facilitated an after-school program with focus on multicultural arts for school-aged children

The Children's Workshop, Lee NH – *Program Facilitator*

2002

- Designed and facilitated a program for children & families with focus on nutrition

EDUCATION & CERTIFICATIONS

Granite State College

- Associate of Early Childhood Education
- Certificate of Foster & Adoptive Care Essentials
- Certificate in Para-education II

Licensed Foster Parent

VOLUNTEER WORK

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Seacoast Community Fridge Network

- Committee member
- Collect items for, stock, and manage fridges throughout the Seacoast

Planned Parenthood of Northern New England

- Outreach and advocacy
- Tabling
- Canvassing

Head Start

- Teacher Aide

NH SPCA

- Small animal care
- 2x Volunteer of the Year

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

Tiffany Jones

[redacted] ❖❖❖ [redacted]

Professional Summary

Resourceful Manager with experience coordinating and monitoring operations across various departments. Excellent interpersonal expertise, with strong management skills in dynamic environments and the ability to communicate effectively with multinational colleagues. Collaborative leader with dedication to partnering with coworkers to promote engaging, empowering work culture.

Skills

- Strong management skills in multicultural and dynamic environments
- Remain a professional, balanced, respectful, problem-solver, even under stress or when out of my comfort zone.
- Independently productive, but confident in team oriented setting with a desire to exceed expectations and goals
- Excellent communication, problem solving, decision making and interpersonal skills with a nonjudgmental approach
- Being a steward to the organization's resources and personal career
- Effective planning, coaching, team building, organizing, staffing, controlling and evaluating skills
- Skilled in dealing with deadlines and efficiency
- Adept in handling backstage operations and interdepartmental communication
- Understanding and appreciation of the artistic and collaborative process of the art form
- Dedication to every aspect of programs, while remaining empathetic to the people and the process

Work History

GREATER SEACOAST COMMUNITY HEALTH - FAMILIES FIRST
Family Center Program Facilitator| Portsmouth, NH Dec 2022 - Current

- Facilitate family-focused programs aimed at strengthening parenting skills, support and connection
- Manage logistics and coordination of weekly groups
- Foster a welcoming and supportive environment for caregivers and children
- Create educational, engaging and fun circle time themes
- Track attendance, registration forms and feedback to improve services
- Demonstrate flexibility in the face of changes and new ideas
- Stay up to date on Compliatric Trainings

HBO CONCERT FOR VALOR
Production Assistant, Talent| Washington, DC Oct 2014 - Nov 2014

- Scheduled rehearsals with talent and band.
- Completed wide range of tasks in diverse filming areas to support operations.
- Coordinated set up of trailers for cast and crew, including running order needs for talent.
- Interacted positively with talent when escorting to and from trailers during filming.

CAPITOL CONCERTS
Production Assistant | Washington, DC May 2014 - July 2014

Docusign Envelope ID: CFCA26B0-4F4E-89CE-8395-A74F88AB3D87

- Stayed alert, active and ready to respond to any request at any time using variety of available resources.
- Maintained schedules, managed deadlines and interfaced with teammates to support production activities.
- Supervised wardrobe, hair and makeup needs for actors simultaneously on remote shoot location.
- Documented production information via daily system logs and discussed issues with management.
- Supported production needs by moving items between equipment, conveyors and staging areas.
- Communicated with other crew members via walkie talkies to coordinate production activities.

NORWEGIAN CRUISE LINE
Production Manager | International Oct 2011 - March 2012

- Train all parties involved how to play, market, sale, host, operate the game console and report results.
- Coordinate and supervise rehearsal runs.
- Give notes to develop and improve production and performance.
- Oversee production value including smooth transitions, stage set up, sound and light quality and performance delivery.
- Creation of production book.
- Resolved issues quickly to maintain productivity goals.

CELEBRITY CRUISE LINE
Production Stage Manager | International Jan 2010- Oct 2012

- Oversee all aspects of the Onboard Entertainment including Production Shows, Theme Nights, Featured Entertainers, Production Cast, Theatre Orchestra and Local Folkloric Groups.
- Schedule, attend and manage all aerial training, show rehearsals and performances.
- Program and operate the rigging/automation system for production shows.
- In conjunction with the Fly Operator, operate and maintain the safe execution of the flying apparatus.
- Work with the AV Manager to establish and supervise design, sound, light and scenery quality.
- Create and submit production show reports.
- Act as liaison between Shore-side Entertainment Management, Producer and Onboard Production and Performance Personnel.

TRAININGS

- Certified Parenting Journey Facilitator
- Co-facilitator for Mind in the Making
- Respect in the Workplace
- Introduction to HIPAA
- How to HEAR a Patient
- Reporting Neglect and Abuse
- Fire Safety
- Emergency Management Overview
- Infection Control
- Bloodborne Pathogens
- Hand Hygiene
- Tuberculosis, Hepatitis, HIV (AIDS) Awareness
- Cybersecurity Training and Awareness

EDUCATION

UNIVERSITY OF FLORIDA, Gainesville, FL Graduated May 2009
Bachelor of Arts, Criminology
Bachelor of Fine Arts, Theatre

- Summa Cum Laude

FORM NUMBER P-37 (version 2/23/2023)

Subject: Comprehensive Family Support (CFS) (RFP-2027-DPH-05-COMPR-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 VNA at HCS, Inc.		1.4 Contractor Address 312 Marlboro Street Keene, NH 03431	
1.5 Contractor Phone Number 603-352-2253	1.6 Account Unit and Class TBD	1.7 Completion Date June 30, 2029	1.8 Price Limitation $1,525,638
1.9 Contracting Officer for State Agency Robert W. Moore, Director		1.10 State Agency Telephone Number (603) 271-9631	
1.11 Contractor Signature Signed by: Karen Gomes C712CCEA0A03422... Date: 5/13/2026		1.12 Name and Title of Contractor Signatory Karen Gomes President and CEO	
1.13 State Agency Signature DocuSigned by: Iain Watt D778BB63F9704C7... Date: 5/13/2026		1.14 Name and Title of State Agency Signatory Iain Watt Director - DPH	
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 748734844941460...		On: 5/14/2026	
1.17 Approval by the Governor and Executive Council *(if applicable)* G&C Item number:		G&C Meeting Date:	

Contractor Initials: Initial KG
Date: 5/13/2026

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

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

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

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

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

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

4. CONDITIONAL NATURE OF AGREEMENT.

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

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

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

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

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

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

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

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

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

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

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

7. PERSONNEL.

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

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

Initial

Contractor Initials KG

Date 5/13/2026

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

8. EVENT OF DEFAULT/REMEDIES.

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

8.1.1 failure to perform the Services satisfactorily or on schedule;

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

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

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

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

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

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

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

9. TERMINATION.

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

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

10. PROPERTY OWNERSHIP/DISCLOSURE.

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

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

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

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

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

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

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

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

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

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

Contractor Initials Initial KG

Date 5/13/2026

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

14. INSURANCE.
14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:
14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than $1,000,000 per occurrence and $2,000,000 aggregate or excess; and
14.1.2 special cause of loss coverage form covering all Property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the Property.
14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.
14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or any successor, a certificate(s) of insurance for all insurance required under this Agreement. At the request of the Contracting Officer, or any successor, the Contractor shall provide certificate(s) of insurance for all renewal(s) of insurance required under this Agreement. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

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

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

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

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

19. CHOICE OF LAW AND FORUM.
19.1 This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire except where the Federal supremacy clause requires otherwise. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.
19.2 Any actions arising out of this Agreement, including the breach or alleged breach thereof, may not be submitted to binding arbitration, but must, instead, be brought and maintained in the Merrimack County Superior Court of New Hampshire which shall have exclusive jurisdiction thereof.

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

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

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

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

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

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

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

Contractor Initials Initial KG
Date 5/13/2026

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

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, this Agreement, and all obligations of the parties hereunder, shall become effective on July 1, 2026 (“Effective Date”).

1.2. Paragraph 3, Effective Date/Completion of Services, is amended by deleting subparagraph 3.3., in its entirety and replacing it as follows:

3.3. Contractor must complete all Services by the Completion Date specified in block 1.7. 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 6, Compliance by Contractor with Laws and Regulations/Equal Employment Opportunity, Subparagraph 6.1., is amended as follows:

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, RSA 151:21 Patients’ Bill of Rights, civil rights and equal employment opportunity laws, and the Governor’s order on Respect and Civility in the Workplace, Executive Order 2020-01. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

1.4. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.5., as follows:

12.5. 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.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

1. Statement of Work

1.1. The Contractor must provide the Comprehensive Family Support (CFS) Program. The Contractor must provide services to pregnant and parenting women as well as other families with children up to eighteen (18) years of age who are:

1.1.1. Experiencing, or at risk of experiencing difficulty with:

1.1.1.1. Pregnancy;

1.1.1.2. Health and nutrition;

1.1.1.3. Education and employment;

1.1.1.4. Parenting challenges;

1.1.1.5. Social isolation;

1.1.1.6. Substance use disorders;

1.1.1.7. Mental health events;

1.1.1.8. Child abuse and neglect; and

1.1.1.9. Substance exposed infants.

1.1.2. Perinatal families of substance exposed infants.

1.1.3. At risk for child abuse and neglect.

1.1.4. Seeking Comprehensive Family Support (CFS) in a voluntary manner.

1.2. The Contractor must ensure all services are provided in the following DHHS Catchment area: Keene District Office. The Contractor must maintain a physical office located within the Catchment Area. The Contractor must ensure:

1.2.1. The office is accessible to families and staff at least five (5) days per week Monday through Friday during standard business hours of 8:00 am to 4:00 pm, excluding state holidays.

1.2.1.1. Evening hours are available at least one (1) night per week.

1.2.2. Families are provided flexible opportunities to meet in the home or community.

1.2.3. The office location remains in compliance with the Americans with Disabilities Act (ADA) accessibility requirements.

1.2.4. No duplication of services.

1.3. The Contractor must meet the Standards of Quality for Family Strengthening &

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Support as defined by the National Family Support Network. This includes:

1.3.1. Actively implementing a self-assessment and action plan that aligns with the Standards of Quality for Family Strengthening & Support in collaboration with the Department and the Department's Facilitation Organization to obtain the FRC-Q designation within the first year of contract.

1.4. Comprehensive Family Support (CFS) Home Visiting Program

1.4.1. The Contractor must deliver high-quality, responsive CFS home visiting services to New Hampshire families with children ages 0-18, based on their emerging needs. The Contractor must ensure that families enrolled in CFS have access to all FRC services, home visiting services, parent education, parent support groups, father groups, parent cafes, information and referral, and case management. The Contractor must work collaboratively with the Department to deliver statewide CFS home visiting services that:

1.4.1.1. Promote healthy pregnancy and birth outcomes.

1.4.1.2. Support safe and nurturing environments for children and adolescents.

1.4.1.3. Improve maternal and child health.

1.4.1.4. Encourage positive parenting practices.

1.4.1.5. Reduce child maltreatment.

1.4.1.6. Increase linkages and referrals to community resources and supports.

1.4.2. The Contractor must ensure each family has a completed Individual Service Plan (ISP) that identifies and addresses barriers to achieving optimal health, well-being, and resiliency. The Contractor must use the ISP template provided by the Department and must include information about the education and support services that will be delivered across

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

key outcome domains, which may include but are not limited to:

1.4.2.1. Maternal Health.

1.4.2.2. Child Health.

1.4.2.3. Child Development and School Readiness.

1.4.2.4. Community Linkages and Referrals.

1.4.2.5. Family Economic Self Sufficiency.

1.4.2.6. Positive Parenting Practices.

1.4.2.7. Preventative Child Care Scholarship.

1.4.3. The Contractor must provide CFS services using the Strengthening Families Framework developed by the Center for the Study of Social Policy (CSSP), addressing the five (5) Protective Factors which are:

1.4.3.1. Parental Resilience.

1.4.3.2. Social Connections.

1.4.3.3. Knowledge of parenting and child development.

1.4.3.4. Concrete supports in times of need.

1.4.3.5. Social and emotional competence of children.

1.4.4. The Contractor must ensure CFS services are delivered through a variety of methods, including but not limited to:

1.4.4.1. Home visiting services.

1.4.4.2. Educational workshops.

1.4.4.3. Peer-led or professionally facilitated support groups.

1.4.4.4. Parenting education and family support activities.

1.4.4.5. Trauma-informed services that recognize and respond to the impact of adverse experiences.

1.4.4.6. Access to concrete resources in times of need.

1.4.5. The Contractor must provide home visiting services that are respectful of the families served, strengths-based and family-centered, ensuring participation is voluntary and addresses each family's values, traditions, and needs.

1.4.6. The Contractor must collaborate with program participants to develop individualized, goal-oriented plans that improve economic self-sufficiency and long-term family stability. These goals may include, but

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

are not limited to:

1.4.6.1. Planning future pregnancies.

1.4.6.2. Continuing education or vocational training.

1.4.6.3. Securing and maintaining employment.

1.4.6.4. Strengthening the family's Protective Factors.

1.4.6.5. Obtaining safe and stable housing.

1.4.6.6. Accessing community-based services and supports.

1.4.6.7. Participating in parenting education on topics such as:

1.4.6.7.1. Child development.

1.4.6.7.2. Child behavior and emotional regulation.

1.4.6.7.3. Child health and wellness.

1.4.6.7.4. Coping strategies and problem-solving skills.

1.4.6.7.5. Home and child safety.

1.4.6.7.6. Positive parenting techniques.

1.4.7. The Contractor must promote education on health and safety topics including, but not limited to:

1.4.7.1. Providing child safety education through handouts and discussion using evidence-based curricula, including resources from the Centers for Disease Control (CDC) covering a wide range of topics such as:

1.4.7.1.1. Car seat safety and installation checks.

1.4.7.1.2. Use of safety gates and fall prevention.

1.4.7.1.3. Safe use of portable cribs and sleep environments.

1.4.7.1.4. Safe sleep practices to reduce the risk of Sudden Unexpected Infant Death Syndrome (SUID).

1.4.7.1.5. Lead poisoning prevention, including identification of environmental hazards.

1.4.7.1.6. Home safety strategies, including the use of window guards.

1.4.7.1.7. Oral health education for infants, children, and adolescents.

1.4.7.1.8. Understanding Adverse Childhood Experiences (ACEs) and building Protective Factors.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

1.4.7.1.9. Smoking cessation education and referrals.

1.4.7.1.10. Educating families on the importance of primary care and preventative health services, including:

1.4.7.1.11. Access to preventative health care.

1.4.7.1.12. Immunizations.

1.4.7.1.13. Establishing a medical home for ongoing care coordination.

1.4.7.1.14. Improving child safety and health outcomes through regular well-child visits.

1.4.7.1.15. Postpartum health care follow up and planning for future pregnancies.

1.4.8. The Contractor must ensure all women have access to validated screening tools, listed in 1.6.3, for prenatal and postpartum depression, and must refer all women who screen positive for maternal depression to appropriate follow-up care. The Contractor must provide support for participant enrollment in primary care and pediatric services.

1.4.9. The Contractor must complete and renew a Release of Information (ROI) form annually with all CFS participants for all programs, regardless of the type of services they are enrolled in. The ROI must include but is not limited to:

1.4.9.1. Acknowledgement of data collection within the Department's Family and Community Health Data System (FCH-DS).

1.4.9.2. Acknowledgement of sharing personal identifiable information with the Department.

1.4.9.3. Acknowledgement of the purpose of releasing data to the Department to review program outcomes and facilitate quality improvement activities.

1.4.9.4. Acknowledgement that Family Service Record outcome data will be kept and tracked for three (3) subsequent years following discharge.

1.4.9.5. All video recording, storage, access, and sharing requirements set forth elsewhere in this Scope of Services are contingent upon and governed by the participant consent requirements described in Section 1.7. The Contractor must use a paper coaching tool for participants that do not consent

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

to video recording.

1.5. CFS Newborn Navigation Services

1.5.1. The Contractor must provide Newborn Navigation services as part of the CFS home visiting program. The purpose of newborn navigation services is to engage newborn families as early as possible in early childhood home visiting programs, community resources linkage, and services.

1.5.2. The Contractor must engage with families during pregnancy or within six (6) months of birth and provide at minimum one (1) voluntary CFS home visit within that timeframe. The visit must include care coordination services for pregnant and newborn families, with priority given to:

1.5.2.1. Family household at or below 250% of the federal poverty level.

1.5.2.2. Single-parent households.

1.5.2.3. First time parents.

1.5.2.4. Families with other children under three (3) years of age.

1.5.2.5. Parents under twenty-five (25) years of age.

1.5.2.6. Parents with limited educational attainment.

1.5.3. The Contractor must make initial contact with families during pregnancy, prior to hospital discharge, or no later than six (6) months following birth to:

1.5.3.1. Schedule the initial home visit and collect intake prescreening information determined by the Department for follow-up; or

1.5.3.2. Provide FRC information to families who decline the home visit.

1.5.4. The Contractor must collect prescreening intake information and enter it into the FCH-DS prior to conducting the home visit.

1.5.5. For families who consent to CFS Newborn Navigation services, the Contractor must provide a Welcome Newborn Family bag, which includes Department-approved information and resources on topics

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

such as:

1.5.5.1. WIC.

1.5.5.2. Medicaid.

1.5.5.3. Supplemental Nutrition Assistance Program (SNAP).

1.5.5.4. FRC services.

1.5.5.5. Lead poisoning prevention.

1.5.5.6. Safe sleep.

1.5.5.7. Infant nutrition.

1.5.5.8. Additional items as identified by the CFS agency and approved by the Department.

1.5.6. The Contractor must ensure enrolled families may receive up to three (3) Newborn Navigator home visits, all of which must occur within (6) months of enrollment.

1.5.7. The initial CFS Newborn Navigation home visit includes a comprehensive Family Needs Assessment and support services, including but not limited to:

1.5.7.1. Maternal depression screening.

1.5.7.2. Developmental screening.

1.5.7.3. Referrals based on identified family needs.

1.5.7.4. Parent education and child safety (e.g., safe sleep, lead poisoning prevention, home safety).

1.5.7.5. Breastfeeding and lactation support.

1.5.7.6. Postpartum planning future pregnancies.

1.5.7.7. Infant feeding and nutrition support.

1.5.7.8. Positive parenting practices, including attachment.

1.5.7.9. Completion of release of information forms for referrals and sharing programmatic data with the Department.

1.5.8. Information and referral support to enroll in HFA or FCU programs. The CFS family support specialist delivering newborn navigation services must work with families to identify ongoing support needs and facilitate

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

referrals to appropriate services and programs.

1.5.9. These include but not limited to:

1.5.9.1. Family Resource Center services,

1.5.9.2. Family Check Up,

1.5.9.3. Healthy Families America (HFA),

1.5.9.4. The Supplemental Nutrition Program for Woman, Infants and Children (WIC), and

1.5.9.5. Birth to Three Early Supports and Services.

1.5.10. The Contractor must ensure data related to CFS Newborn Navigation services is collected in the Department owned FCH-DS and reported in coordination with the Department.

1.5.11. The Contractor must collaborate with, build partnerships, and coordinate enrollment planning with local healthcare agencies to promote referrals from healthcare providers to CFS's Newborn Navigation services. Partners and collaboration examples include, but are not limited to:

1.5.11.1. Birthing hospitals.

1.5.11.2. OB/GYN providers.

1.5.11.3. Pediatric healthcare providers.

1.5.11.4. Family medicine and primary care providers.

1.5.11.5. Community Health Centers.

1.5.12. The Contractor must offer satellite health office hours to increase accessibility, as needed.

1.5.13. The Contractor must distribute CFS Newborn Navigation informational and printed materials, as appropriate.

1.5.14. The Contractor must also collaborate and build partnerships with local early care and education programs that serve newborn families to coordinate services, prevent duplication. and enhance care coordination. These programs include, but are not limited to:

1.5.14.1. WIC.

1.5.14.2. Birth to Three Early Supports and Services.

1.5.14.3. Healthy Families America (HFA).

1.5.14.3.1. CFS staff delivering Newborn Navigation services must maintain an active collaboration with HFA, including a clearly defined referral

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

and enrollment process to ensure that families who may be better served through HFA are appropriately connected.

1.5.14.3.2. Pregnant and newborn families identified as having high-risk factors or who meet eligibility criteria for HFA must be engaged and referred or enrolled into HFA through joint home visits and warm handoffs.

1.5.15. The Contractor must work in close collaboration with the Department's Quality Improvement Coordinator to ensure all readiness activities are completed prior to program implementation and support ongoing quality improvement and program oversight. This includes, but is not limited to:

1.5.15.1. Completion of CFS onboarding training.

1.5.15.2. Development and implementation of a family recruitment and enrollment plan.

1.5.15.3. Creation of a health provider and community engagement strategy to align services and strengthen referral pathways.

1.5.15.4. Participation in monthly Community of Practice.

1.5.15.5. Execution of additional activities that support continuous quality improvement.

1.5.15.6. Collection of program data, including administration of a Department-approved post-participant survey, which may include, but is not limited to:

1.5.15.6.1. Assessment of participant knowledge related to community resources, postpartum depression, and newborn care following the initial home visit.

1.5.15.6.2. Evaluation of referrals made and connections established with community resources.

1.5.15.6.3. Measurement of participant satisfaction and likelihood to recommend Newborn Navigation services to others.

1.5.15.6.4. Collection of additional feedback to inform and enhance continuous quality improvement efforts.

1.5.16. The Contractor must collaborate with the Department to provide timely and accurate information related to program evaluation and other data

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

requests necessary to support the Department's goals and reporting requirements. The Contractor must be prepared to share information with various divisions within the Department, including but not limited to:

1.5.16.1. Division of Public Health.

1.5.16.2. Division of Economic Stability.

1.5.16.3. Division of Long Term Supports and Services.

1.6. CFS Assessments and Referrals

1.6.1. The Contractor must actively engage and collaborate with the Department, including the Division for Children, Youth and Families (DCYF), and community partners such as schools, community mental health centers and health clinics to promote referrals into the program and prioritize enrollment of families who may be experiencing circumstances that include, but are not limited to:

1.6.1.1. A previous or current founded or unfounded report to child protective services.

1.6.1.2. Having a child with low birth weight and/or neurodevelopmental delays.

1.6.1.3. A history of, or current, parental or caregiver substance abuse.

1.6.1.4. A history of, or current, mental health concerns affecting the parent, caregiver, or child(ren).

1.6.1.5. Household income at or below 250% of the Federal Poverty Level.

1.6.1.6. A family history of intimate partner violence.

1.6.1.7. Evidence of insecure attachment in the child's early years.

1.6.1.8. Pregnancy; birth of a child within the past twelve (12) months; anticipated birth of an additional child within the next six (6) months; or the birth or expected birth of a child with special healthcare needs.

1.6.1.9. Pregnant participants with prenatal substance use concerns, and families with substance-exposed infants.

1.6.1.10. Pregnant or post-partum participants with a Plan of Safe Care, or those in need of support to develop one.

1.6.1.11. Families with more than one (1) child under the age of three

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

(3).

1.6.1.12. Experiences of physical or social isolation, or any other factors contributing to unhealthy social and emotional outcomes.

1.6.1.13. Home conditions that present a health and/or safety risk to family members.

1.6.1.14. A child or family member with chronic health, behavioral, or developmental conditions that impact parenting.

1.6.1.15. Results from the Ages and Stages Questionnaire (ASQ) or Ages and Stages Questionnaire Social Emotional (ASQ-SE) indicating developmental delays.

1.6.1.16. Families impacted by traumatic events.

1.6.1.17. Families receiving Temporary Assistance to Needy Families (TANF) cash assistance or enrolled in any Medicaid program.

1.6.1.18. Engagement with Substance Use Disorder (SUD) services.

1.6.2. The Contractor must complete a comprehensive Family Needs Assessment identified by the Department for each family served utilizing an intake assessment tool as identified by the Department within the first three (3) home visits, in order to identify family strengths, potential risk factors, and current and emerging needs. The Contractor must also conduct reassessments in accordance with the Family Check Up (FCU) model schedule, at a minimum of every six (6) months and again at twelve (12) months, or as otherwise directed by the Department.

1.6.3. The Contractor must utilize additional validated screening tools to support families and ensure budgeting to access tools, which may include, but are not limited to:

1.6.3.1. The Ages and Stages Questionnaires (ASQ-3 and ASQ:SE).

1.6.3.2. Brief System Inventory (BSI)

1.6.3.3. Edinburg Postnatal Depression Scale. (EPDS)

1.6.3.4. Developmental and social-emotional screenings for children ages one (1) month through five (5) years.

1.6.4. The Contractor must report on a monthly basis the number of families who received ASQ-3 and ASQ:SE screenings in a format specified by

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

the Department.

1.6.5. The Contractor must provide expedited warm hand off referrals to appropriate community-based services and other resources that support families within their home communities, which may include, but are not limited to:

1.6.5.1. Childcare Aware of New Hampshire.

1.6.5.2. The Department's District Offices for assistance with program eligibility determinations.

1.6.5.3. Specialized Medicaid services, including Birth to Three Early Supports and Services.

1.6.5.4. The Supplemental Nutrition Program for Women, Infants and Children (WIC), Nutrition programs for breastfeeding support, nutrition education, and access to healthy foods.

1.6.5.5. NH Employment Security.

1.6.5.6. Local school districts.

1.6.5.7. Family violence prevention agencies.

1.6.5.8. Mental health services.

1.6.5.9. Nutrition education and healthy foods.

1.6.5.10. Financial literacy and money management programs.

1.6.5.11. Smoking cessation programs.

1.6.5.12. Independent living skills programs.

1.6.5.13. Adult education programs.

1.6.5.14. Literacy education services.

1.6.5.15. Employment services.

1.6.5.16. Vocational rehabilitation services.

1.7. <u>CFS Family Check Up Services</u>

1.7.1. The Contractor must implement Northwest Prevention Science's Family Check-Up® (FCU) model, including the FCU portal. The Contactor must execute an agreement with Northwest Prevention Science Inc. before accessing the FCU portal or entering data.

1.7.2. The Contractor must provide at least one (1) trained staff per Catchment Area to implement the FCU model, within year one (1) of

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

this Agreement. Training requirements include but are not limited to:

1.7.2.1. Motivational interviewing.

1.7.2.2. Everyday Parenting Curriculum, provided by the Department.

1.7.2.3. CFS onboarding and orientation training, provided by the Department.

1.7.3. The Contractor must work with the Department to support the implementation of the evidence-based FCU model to enhance the Department's CFS home visiting program services.

1.7.4. The Contractor must obtain all materials and resources required by the Department to successfully implement and deliver the FCU model with fidelity, including but not limited to a FCU informational flyer and/or brochure available for use with families and referral sources according to the FCU model resources.

1.7.5. The Contractor must provide access to computers, laptops, or other devices to use for video recordings, coding interaction videos, downloading and compiling assessment data. To meet these requirements, the Contractor must ensure the availability of the following specific materials, tools, and resources:

1.7.5.1. Devices with video recording capability to support the following activities:

1.7.5.1.1. Contractor video recording families during family interaction tasks, which are part of the FCU assessment process.

1.7.5.1.2. Contractor video recording family session monthly to share with their Supervisor-Trainers for fidelity checks.

1.7.5.1.3. Supervisor-Trainer's video recording family sessions, supervision, and trainings for the FCU certification process.

1.7.5.2. Devices for families to complete FCU questionnaires on the FCU Portal Website online. Devices must be capable of establishing an internet connection independently or through hotspots. Contractor agrees that while families may use their own devices for the FCU questionnaire, Contractor-provided devices during assessment sessions streamline the process and increase the

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

likelihood of questionnaire completion.

1.7.5.3. Devices must have the following capabilities:

1.7.5.3.1. Able to stand alone on a surface or on a tripod during the video recording process.

1.7.5.3.2. Secure access to prevent unauthorized viewing of confidential information, since providers will leave the room while families complete interaction tasks.

1.7.5.3.3. HIPAA-compliant video storage.

1.7.6. Contractor must provide consent forms that must cover consent for the family for video recording, with separate sections or forms addressing Family Interaction Tasks and session recordings. Consents must clearly outline:

1.7.6.1. The purpose of videos.

1.7.6.2. Who may access them.

1.7.6.3. The timeline for destruction of videos, in accordance with HIPAA retention requirements .

1.7.6.4. A statement that consent to video recording is not required for program participation.

1.7.7. The Contractor must ensure all video recording adheres to the requirements outlined in Exhibit E: DHHS Information Security Requirements.

1.7.8. Contractor must provide toys for family interaction tasks, including:

1.7.8.1. Toys appropriate for children ages two (2) to nine (9) years old.

1.7.8.2. A basket large enough to hold toys for younger children.

1.7.8.3. Several puzzles of varying difficulty.

1.7.8.4. Blocks sufficient to build a tower.

1.7.8.5. Paper and colored pens or crayons.

1.7.9. The Contractor must adapt FRC documentation and intake procedures to integrate FCU model activities. This includes the completion of FCU family questionnaires via the FCU portal.

1.7.10. Until all CFS home visitors are trained to deliver FCU, the Contractor's FCU Specialist must enroll families with children ages 0-18 on a voluntary basis. The target population for the FCU model includes, and priority enrollment through an intake process is given

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

to, families referred to CFS who meet the following criteria:

1.7.10.1. Parents or caregivers with a diagnosed mental illness, and/or families with children who have a diagnosed mental illness.

1.7.10.2. Families with a history of child abuse or neglect or at risk of foster care placement.

1.7.10.3. Families with a history of substance use disorders or those in need of substance use disorder treatment.

1.7.10.4. Families with children experiencing low student achievement.

1.7.10.5. All families with children ages 0-5.

1.7.10.6. Families who meet eligibility criteria for Healthy Families America (HFA) will be enrolled in the Department's HFA program when appropriate and available.

1.7.11. The Contractor must ensure that dedicated FCU staff and supervisors implement the model with fidelity and actively engage with the Department in fidelity monitoring and quality assurance activities. Services must include, but are not limited to:

1.7.11.1. Conducting in-person visits with each FCU-enrolled family, including a minimum of three (3) structured intake and assessment sessions, followed by ongoing support and documentation. These sessions must include:

1.7.11.1.1. An Initial Intake Session to establish rapport, gather information about the family system, and identify existing strengths and challenges.

1.7.11.1.2. A Second Assessment Session in which the Contractor assists the family in completing standardized questionnaires and assessment tools to evaluate needs and areas requiring support.

1.7.11.1.3. A Third Assessment Session focused on collaborative goal setting, which must include:

1.7.11.1.4. Development of a service plan incorporating Everyday Parenting sessions;

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

1.7.11.1.5. Referral and linkage to appropriate community-based resources; and

1.7.11.1.6. Identification and prioritization of the family's goals and service needs.

1.7.11.2. Following the initial session, within 30 business days, the Contractor's FCU Specialist must:

1.7.11.2.1. Conduct follow-up visits using strategies from the Everyday Parenting curriculum, tailored to the results of the family's assessments.

1.7.11.2.2. Ensure accurate and timely documentation in the FCH-DS and FCU online assessment tools, summarizing recommendations and next steps.

1.7.11.2.3. Review family goals and progress on a quarterly basis in collaboration with the family.

1.7.11.2.4. Assess the family's readiness to change as part of ongoing engagement and service planning.

1.7.12. The Contractor must ensure the following:

1.7.12.1. Provide the Department with access to video-recorded family sessions to support monitoring of implementation and fidelity to the model, upon consent granted by the family in Section 1.7.3.4.

1.7.12.2. Provide the Department with a written policy regarding the use of video recording for the purpose of home visits. The Contractor must ensure all staff and subcontractors sign a confidentiality agreement and adhere to the confidentiality policy outlined in the written policy, and notify staff and subcontractors that violations may result in disciplinary action.

1.7.12.3. Obtain and document individual consent for all video-recorded sessions, including consent to share recordings with the Department for quality improvement purposes.

1.7.12.4. Ensure that appropriate equipment is available and maintained for home visitors to conduct video recordings, such as video camera, tablet, or other device with recording capabilities. The Contractor must ensure that staff does not use personal cell phones or other personal devices to

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

conduct video recording.

1.7.13. The Contractor must only use marketing materials that have been reviewed and approved by the Department.

1.7.14. The Contractor must collaborate with the Department's CFS Program Manager, Quality Improvement and Training Coordinator, and FCU Model experts to ensure all readiness activities are completed prior to program implementation, including but not limited to:

1.7.14.1. Completion of FCU Model training.

1.7.14.2. Completion of Everyday Parenting Curriculum training.

1.7.14.3. Completion of Motivational Interviewing training.

1.7.14.4. Implementation of data collection processes, including a Department-approved participant post-survey.

1.7.14.5. Participation in monthly Supervisor Consultation, facilitated by the Department, to support implementation and fidelity to the FCU model.

1.8. Staffing and Training

1.8.1. The Contractor must designate at least one (1) dedicated FCU Specialist position as part of the CFS home visiting program. The FCU Specialist must initially allocate a minimum of 20% of their workload to family enrollment and model implementation activities.

1.8.2. The Contractor must:

1.8.2.1. Ensure that all relevant staff participate in and complete these trainings as scheduled, and maintain documentation of completion for Department review.

1.8.2.2. Ensure that all relevant staff are trained in Motivational Interviewing.

1.8.2.3. Budget for additional staff development opportunities based on the needs of their team, as identified in collaboration with the Department's Quality Improvement and Training Coordinator.

1.8.3. The Contractor must ensure the FCU Specialist transitions to dedicating 100% of their workload to the implementation of the FCU model by June 30, 2027.

1.8.4. The Contractor may elect to designate more than one (1) FCU Specialist to implement the model during the first year of program

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

implementation.

1.8.5. The Contractor must identify additional CFS staff to participate in being trained to implement the FCU model in year two and again in year three of program implementation, to support sustainability and build long-term capacity.

1.8.6. The Contractor must ensure all CFS home visitors complete Department provided training in and utilize the Everyday Parenting Curriculum and CFS Program Manual, which is:

1.8.6.1. The Everyday Parenting Manual, Everyday Parenting: A Professional's Guide to Building Family Management Skills (2nd edition). Available at www.researchpress.com

1.8.7. The Contractor must ensure all CFS home visitors are trained in core CFS competencies and collaborate with the Department's Continuous Quality Improvement (CQI) and training coordinator to implement a comprehensive staff training plan that ensures a qualified workforce and identifies training needs and gaps. CFS home visitors must complete Department provided training which will include at a minimum, Everyday Parenting and CFS onboarding training.

1.8.8. The Contractor must identify a qualified supervisor for the FCU staff be trained in the FCU model and be responsible for ensuring adherence to the model's implementation standards. The FCU supervisor must fulfill the following responsibilities:

1.8.8.1. Participate in monthly FCU supervisor consultation meetings, as scheduled by the Department, to enhance supervisory capacity and support fidelity monitoring of the FCU implementation.

1.8.8.2. The Contractor must ensure the FCU supervisor is trained and certified by Northwest Prevention Science as a FCU supervisor. The FCU supervisor must provide implementation support to FCU staff, including but not limited to individualized consultation, direct observation, and performance evaluation, to ensure fidelity to the model.

1.8.9. The Contractor must ensure that both the FCU specialist and FCU supervisor receive training in the Family Check-Up model, Motivational Interviewing, Newborn Navigation Core Training, and Everyday Parenting curriculum, and that they meet the minimum educational qualifications required for their roles.

1.8.10. The Contractor must use the FCU model, Motivational Interviewing and Everyday Parenting curriculum training to support effective

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

implementation.

1.8.11. The Contractor must ensure that all staff, subcontractors, and volunteers undergo the required criminal background checks registry checks, as described in Section 1.12.

1.8.12. If the Contractor provides transportation for individuals served under this Agreement, the Contractor must ensure:

1.8.12.1. The enrolled parent or caregiver must be present for all sessions.

1.8.12.2. All drivers have a valid State Issued and a safe driving record;

1.8.12.2.1. All vehicles are approved by the Contractor and meet applicable safety standards;

1.8.12.2.2. Compliance with all applicable local, state, and federal transportation safety rules and standards;

1.8.12.2.3. Proof of valid automobile insurance is provided to the Department that includes bodily injury and property damage in amounts of not less than $100,000 per occurrence and $300,000 aggregate or excess, for all owned, hired, or non-owned vehicles used to provide transportation.

1.8.13. The Contractor must ensure staff complete required training in the principles of family support, maternal and child health, HIPAA as well as the child welfare system, with concentrations in service array and working in multidisciplinary teams.

1.8.14. The Contractor must consistently engage in purposeful staff development activities that support professional growth and improve the quality of services provided. These activities must include, but are not limited to, training and enrichment in the following areas: Skills necessary to understand and respond to the unique needs, strengths, and resources of the families and communities served.

1.8.14.1. The ability to exercise empathy, with an understanding of the complex family dynamics and stressors experienced by parents and caregivers.

1.8.14.2. The use of effective, evidence-informed home visiting practices, including strategies that are grounded in research and adapted to family needs, as well as standards for documentation and reporting.

1.8.15. The Contractor must provide an adequate number of home visitors to

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

implement the CFS program, as approved by the Department. All staffing vacancies, transitions, or changes in personnel assignments must be reported to the Department in a timely manner.

1.8.16. The Contractor must ensure the CFS program director, supervisor, or program managers have:

1.8.16.1. A Bachelor's degree in public health, early childhood, social work, human services administration, or a related field focused on supporting children and families, with four (4) years of experience working with families and children in a social service, home health, or other early childhood program setting, including supervisory experience;

1.8.16.2. An Associate degree with five (5) years of prior experience working with families and children in a social service, home health, or early childhood program setting, including supervisory experience;

1.8.16.3. Or at a minimum, high school diploma or equivalent with six (6) years of relevant lived and professional experience working with families and children in a social service, home health, or other early childhood program setting, including supervisory responsibilities, and written approval from the Department to fulfill the duties of the position.

1.8.17. The Contractor must ensure CFS Home Visitors have:

1.8.17.1. An Associate degree with four (4) years of prior experience working with families and children in a social service, home health, or other early childhood program setting;

1.8.17.2. Or at a minimum, a high school diploma or equivalent with five (5) years of experience providing services to families in a social service, home health, or other early childhood program setting; and demonstrated lived and professional experience aligned with this role, with written approval from the Department.

1.8.18. The Contractor must ensure the CFS Family Check Up Home Visitor has at a minimum:

1.8.18.1. A Bachelor's degree or higher; and

1.8.18.2. Two (2) years of experience providing services to families in a social service, home health, or other early childhood program setting.

1.8.18.2.1. If a Bachelor's-level staff is not available, the Contractor may recommend qualified team

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

members to perform FCU. A training plan and summary of relevant skills and clinical experience must be submitted with the application and approved by the Department.

1.8.19. The Contractor must ensure all CFS home visitors across all CFS programs are trained in the "Everyday Parenting" curriculum and Motivational Interviewing and adhere to its requirements within six (6) months of program implementation.

1.8.19.1. Although not required, the Contractor may allocate funding to train staff in additional evidence-based early childhood curricula, such as Growing Great Kids or Parents as Teachers.

1.8.20. The Contractor must demonstrate capacity and readiness to be trained in and implement the Family Check Up model.

1.8.21. Staffing requirements are subject to change, contingent upon the Department's written approval.

1.9. Reporting

1.9.1. The Contractor must submit comprehensive quarterly reports highlighting program activities by the 15th calendar day of the month following the end of each reporting period. The first report is due by October 15, 2026, and must include:

1.9.1.1. The progress in achieving the stated outcomes; and

1.9.1.2. Feedback from families regarding the effectiveness, accessibility, and satisfaction of the services provided through participant surveys or post service delivery interviews.

1.9.2. The Contractor must submit an annual performance report to the Department by July 31st of each year, with the first report due on July 31, 2027, which includes, but is not limited to:

1.9.2.1. A summary of program accomplishments and key activities.

1.9.2.2. Staff training plan for each CFS home visitor.

1.9.2.3. Recommendations for service development, program enhancements, and outcome improvements.

1.9.2.4. Identification of systemic barriers impacting service delivery or access.

1.9.2.5. Results of family satisfaction surveys and analysis of trends.

1.9.3. The Contractor must transmit all data in a secure and encrypted format

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

approved by the Department.

1.9.4. The Contractor must designate an FRC staff member to serve as the primary liaison for all programmatic communication between the Department and the Contractor, including, but not limited to:

1.9.4.1. Clinical updates.

1.9.4.2. Program announcements.

1.9.4.3. Reporting changes, errors, and requests.

1.9.4.4. Contract oversight.

1.9.4.5. Oversight of program operations and compliance

1.9.5. The Contractor must evaluate both the progress of parents and caregivers and the effectiveness of the programs and services provided.

1.9.6. The Contractor must maintain a comprehensive and confidential Family Service Record for each family, in compliance with all Health Insurance Portability and Accountability Act (HIPAA) Privacy Rules. The Family Service Record must include, but is not limited to:

1.9.6.1. Participant names (Parent(s) and Child(ren)).

1.9.6.2. Participant DOBs (Parent (s) and Child(ren)).

1.9.6.3. Residence.

1.9.6.4. Primary language spoken in the home.

1.9.6.5. Educational level of parent(s) or guardian(s).

1.9.6.6. Digital Resources (phone, laptop, cell).

1.9.6.7. Source of referral.

1.9.6.8. Referral details and contact information.

1.9.6.9. Signed release of information form(s).

1.9.6.10. Household income.

1.9.6.11. Household size.

1.9.6.12. Employment status of parent(s) or guardian(s).

1.9.6.13. Access to prenatal and post-partum healthcare.

1.9.6.14. Home visits conducted and screening tools completed.

1.9.6.15. Topics reviewed during service delivery, including but not limited to:

1.9.6.15.1. Maternal depression screening.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

1.9.6.15.2. Planning for future pregnancies.

1.9.6.15.3. Positive parenting practices.

1.9.6.15.4. Breastfeeding/lactation support.

1.9.6.15.5. Nutrition.

1.9.6.15.6. Child health.

1.9.6.15.7. Maternal health and self-care.

1.9.6.15.8. Referrals made for service linkage, including but not limited to:

1.9.6.15.9. Concrete supports (e.g., housing, utilities, transportation).

1.9.6.15.10. Childcare resources.

1.9.6.15.11. Healthcare access and coordination.

1.9.6.15.12. Community-based supports and services.

1.9.6.15.13. Home visiting programs and service type.

1.9.6.15.14. Discharge date and reason for discharge.

1.9.6.15.15. Completion of post-service surveys.

1.9.6.15.16. Family needs assessment.

1.9.6.15.17. Child/Family Individualized Service Plan (ISP).

1.9.6.15.18. Documentation of prenatal and postpartum healthcare received.

1.9.6.15.19. Medicaid and other health insurance coverage.

1.9.6.15.20. Linkages with community-based resources.

1.9.6.16. Receipt of public benefits, including but not limited to:

1.9.6.16.1. SNAP.

1.9.6.16.2. New Hampshire Child Care Scholarship.

1.9.6.16.3. Medicaid.

1.9.6.16.4. Social Security Disability Insurance (SSDI).

1.9.6.16.5. Supplemental Security Income (SSI).

1.9.6.16.6. Temporary Assistance for Needy Families (TANF).

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

1.9.6.16.7. Special Supplemental Nutrition Program for WIC.

1.9.6.17. Participant service data, including but not limited to:

1.9.6.17.1. Date of service.

1.9.6.17.2. Participants present during service delivery.

1.9.6.17.3. Type of service provided and topics reviewed.

1.10. Performance Measures

1.10.1. The Contractor must provide performance data in a format and at a frequency specified by the Department. The following performance measures will be used to evaluate program effectiveness:

1.10.1.1. A minimum of 80% of participants must report a favorable rating on satisfaction surveys administered by the Contractor.

1.10.1.2. At least 70% of referred families must enroll in services within 30 days of referral.

1.10.1.3. A minimum of 65% of enrolled families must complete the full service cycle as defined by the program model.

1.10.2. The Contractor must demonstrate annual improvement in outreach to high-risk populations, as measured by year-over-year increases in engagement rates.

1.10.3. The Contractor must submit data to support evaluation of long-term outcomes, including family stability, child health indicators, and service retention, as defined by the Department.

1.11. Meetings, Collaboration, and Data Sharing

1.11.1. The Contractor must participate in regular performance review meetings with the Department and peer providers to analyze data, share best practices, and identify areas for improvement.

1.11.2. The Contractor must collect and transmit all required data, including client-level demographic, service utilization, and outcome data, in a secure format specified by the Department.

1.11.3. The Contractor must participate in monthly check-in meetings and Communities of Practice (CoP) for the Department's Comprehensive Family Support (CFS) home visiting program, as scheduled by the Department. CoPs are structured, recurring gatherings of professionals and stakeholders involved in CFS to share best practices, address

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

challenges, and support continuous quality improvement.

1.11.4. The Contractor must participate in monthly meetings with the Department, or as otherwise requested by the Department.

1.11.5. The Contractor may be required to participate in on-site program and file reviews conducted by the Department, as requested.

1.11.6. The Contractor must participate in monthly fidelity reviews of family sessions with the Department for the Family Check Up model.

1.11.7. The Contractor may be required to facilitate annual file reviews conducted by the Department, or as otherwise requested, which may include, but are not limited to:

1.11.7.1. Compliance and documentation standards.

1.11.7.2. Service Delivery alignment and model fidelity.

1.11.7.3. Verification of data entry and reporting accuracy.

1.11.8. The Contractor must ensure Family Service Records are accurately summarized and entered into the Department's Family and Community Health Data System (FCH-DS) in real time and must comply with the confidentiality provisions of RSA 170-G:8-a.

1.11.9. The Contractor must provide the Department with a list of staff (End Users, as defined in Exhibit D) who will be responsible for entering Family Service Record data into the FCH-DS.

1.11.10. The Contractor must notify the Department immediately, and no more than 24 hours of staff changes, to ensure access to the FCH-DS is removed in a timely manner.

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

1.11.12. The Contractor must utilize the Department's closed loop referral system, at an agreed upon start date, whenever applicable to the services they provide for referrals between health and/or human service providers within New Hampshire for referral management and client care coordination. Utilization includes inputting information and data as necessary into the Department's referral solution as part of the NH Care Connections Network to facilitate referrals to participating providers, signing required Network Participation Agreement(s), and obtaining a participant specific consent for services.

1.11.13. The Contractor must utilize the Department's admission, discharge, transfer, and shared care insights solution whenever applicable to the services they provide for client care coordination and management

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

between health providers within New Hampshire. Utilization includes inputting information and data as necessary into the Department's admission, discharge, transfer, and shared care insights platform as part of the NH Care Connections Network to facilitate referrals to participating providers and signing required Participation Agreement(s) for the admission, discharge, transfer, and shared care insights solution

1.11.13.1. The Department's contracts with the closed loop referral and admission, discharge, and transfer vendors incorporate the costs of developing and maintaining the standards-based interface from which the Contractor may choose to configure their systems to communicate securely with the Department's NH Care Connections Network solutions. The Contractor may choose to interface with the Department's closed loop referral and/or the admission discharge transfer solution utilizing a Smart on FHIR or HL-7 standard interface process to connect individuals to health and social service providers. The costs for the Contractor's system or team to develop or utilize the standard Smart on FHIR or HL-7 based interface are the sole responsibility of the Contractor.

1.12. Background Checks

1.12.1. Prior to permitting any individual to provide services under this Agreement, the Contractor must ensure that said individual has undergone:

1.12.1.1. A criminal background check, at the Contractor's expense, and has no convictions for crimes that represent evidence of behavior that could endanger individuals served under this Agreement;

1.12.1.2. A name search of the Department's Bureau of Adult and Aging Services (BAAS) State Registry, pursuant to RSA 161-F:49, with results indicating no evidence of behavior that could endanger individuals served under this Agreement; and

1.12.1.3. A name search of the Department's DCYF Central Registry pursuant to RSA 169-C:35, with results indicating no evidence of behavior that could endanger individuals served under this Agreement.

1.13. Confidential Data

1.13.1. The Contractor must meet all information security and privacy requirements as set by the Department and in accordance with the

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Department's Information Security Requirements Exhibit as referenced below.

1.13.2. The Contractor must ensure any individuals involved in delivering services through this Agreement contract 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 Information Security Requirements Exhibit. The Contractor must ensure said individuals have a justifiable business need to access confidential data. The Contractor must provide attestations upon Department request.

1.14. Privacy Impact Assessment

1.14.1. Upon request, the Contractor must allow and assist the Department in conducting a Privacy Impact Assessment (PIA) of its system(s)/application(s)/web portal(s)/website(s) or Department system(s)/application(s)/web portal(s)/website(s) hosted by the Contractor, if Personally Identifiable Information (PII) is collected, used, accessed, shared, or stored. To conduct the PIA the Contractor must provide the Department access to applicable systems and documentation sufficient to allow the Department to assess, at minimum, the following:

1.14.1.1. How PII is gathered and stored;

1.14.1.2. Who will have access to PII;

1.14.1.3. How PII will be used in the system;

1.14.1.4. How participant consent will be achieved and revoked; and

1.14.1.5. Privacy practices.

1.14.2. 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.

1.15. Department Owned Devices, Systems and Network Usage

1.15.1. Contractor End Users, defined in the Department's Information Security Requirements Exhibit that is incorporated into this Agreement, authorized by the Department's Information Security Office to use a Department issued device (e.g. computer, tablet, mobile telephone) or access the Department network in the fulfilment of this Agreement, each must:

1.15.1.1. Sign and abide by applicable Department and New Hampshire Department of Information Technology (NH DoIT) use agreements, policies, standards, procedures and

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

guidelines, and complete applicable trainings as required;

1.15.1.2. Use the information that they have permission to access solely for conducting official Department business and agree that all other use or access is strictly forbidden including, but not limited, to personal or other private and non-Department use, and that at no time shall they access or attempt to access information without having the express authority of the Department to do so;

1.15.1.3. Not access or attempt to access information in a manner inconsistent with the approved policies, procedures, and/or agreement relating to system entry/access;

1.15.1.4. Not copy, share, distribute, sub-license, modify, reverse engineer, rent, or sell software licensed, developed, or being evaluated by the Department, and at all times must use utmost care to protect and keep such software strictly confidential in accordance with the license or any other agreement executed by the Department;

1.15.1.5. Only use equipment, software, or subscription(s) authorized by the Department's Information Security Office or designee;

1.15.1.6. Not install non-standard software on any Department equipment unless authorized by the Department's Information Security Office or designee;

1.15.1.7. Agree that email and other electronic communication messages created, sent, and received on a Department-issued email system are the property of the Department of New Hampshire and to be used for business purposes only. Email is defined as "internal email systems" or "Department-funded email systems."

1.15.1.8. Agree that use of email must follow Department and NH DoIT policies, standards, and/or guidelines; and

1.15.1.9. Agree when utilizing the Department's email system:

1.15.1.9.1. To only use a Department email address assigned to them with a "@ affiliate.DHHS.NH.Gov".

1.15.1.9.2. Include in the signature lines information identifying the End User as a non-Department workforce member; and

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

1.15.1.9.3. Ensure the following confidentiality notice is embedded underneath the signature line:

CONFIDENTIALITY NOTICE: "This message may contain information that is privileged and confidential and is intended only for the use of the individual(s) to whom it is addressed. If you receive this message in error, please notify the sender immediately and delete this electronic message and any attachments from your system. Thank you for your cooperation."

1.15.1.10. Contractor End Users with a Department issued email, access or potential access to Confidential Data, and/or a workspace in a Department building/facility, must:

1.15.1.10.1. Complete the Department's Annual Information Security & Compliance Awareness Training prior to accessing, viewing, handling, hearing, or transmitting Department Data or Confidential Data.

1.15.1.10.2. Sign the Department's Business Use and Confidentiality Agreement and Asset Use Agreement, and the NH DoIT Department wide Computer Use Agreement upon execution of the Agreement and annually thereafter.

1.15.1.10.3. Only access the Department's intranet to view the Department's Policies and Procedures and Information Security webpages.

1.15.1.10.4. Contractor agrees, if any End User is found to be in violation of any of the above terms and conditions, said End User may face removal from the Agreement, and/or criminal and/or civil prosecution, if the act constitutes a violation of law.

1.15.1.10.5. Contractor agrees to notify the Department a minimum of three business days prior to any upcoming transfers or terminations of End Users who possess Department credentials and/or badges or who have system privileges. If End Users who possess Department credentials and/or badges or who have system privileges resign or are dismissed without advance notice, the Contractor agrees to notify the Department's Information Security Office or designee immediately.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

1.16. Contract End-of-Life Transition Services

1.16.1. General Requirements

1.16.1.1. If applicable, upon early termination or expiration of the Agreement the parties agree to cooperate in good faith to effectuate a secure transition of the services ("Transition Services") from the Contractor to the Department and, if applicable, the new Contractor ("Recipient") engaged by the Department to assume the services. 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 Recipient to develop a Data Transition Plan (DTP). The Department shall provide the DTP template to the Contractor.

1.16.1.2. The Contractor must assist the Recipient, in connection with the transition from the performance of Services by the Contractor and its End Users 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 any 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 and assistance to any third-party consultants engaged by Recipient in connection with the Transition Services.

1.16.1.3. If a system, database, hardware, software, and/or software licenses (Tools) was purchased or created to manage, track, and/or store Department Data in relationship to this contract said Tools will be inventoried and returned to the Department, along with the inventory document, once transition of Department data is complete. The internal planning of the Transition Services by the Contractor and its End Users shall be provided to the Department and if applicable the Recipient in a timely manner. Any such Transition Services shall be deemed to be Services for purposes of this Agreement.

1.16.1.4. In the event the data Transition extend beyond the end of the Agreement, the Contractor agrees that the Information Security Requirements, and if applicable, the Department's Business Associate Agreement terms and conditions remain in effect until the Data Transition is accepted as complete by

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

the Department.

1.16.1.5. In the event the Contractor has comingled Department Data and the destruction or Transition of said data is not feasible, the Department and Contractor will jointly evaluate regulatory and professional standards for retention requirements prior to destruction, refer to the terms and conditions of the Department's DHHS Information Security Requirements Exhibit.

1.17. Completion of Transition Services

1.17.1. Each service or transition phase shall be deemed completed (and the transition process finalized) at the end of fifteen (15) business days after the product, resulting from the Service, is delivered to the Department and/or the Recipient in accordance with the mutually agreed upon Transition plan, unless within said fifteen (15) business day term the Contractor notifies the Department of an issue requiring additional time to complete said product.

1.17.2. Once all parties agree the data has been migrated the Contractor will have thirty (30) days to destroy the data per the terms and conditions of the Department's Information Security Requirements Exhibit.

1.18. Disagreement over Transition Services Results

1.18.1. In the event the Department is not satisfied with the results of the Transition Service, the Department shall notify the Contractor, in writing, stating the reason for the lack of satisfaction within fifteen (15) business days of the final product or at any time during the data Transition process. The Parties shall discuss the actions to be taken to resolve the disagreement or issue. If an agreement is not reached, at any time the Department shall be entitled to initiate actions in accordance with the Agreement.

2. Exhibits Incorporated

2.1. The Contractor must comply with all Exhibit D Federal Requirements, which are attached hereto and incorporated by reference herein.

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

2.3. 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 F, Business Associate Agreement, which

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

has been executed by the parties.

3. Additional Terms

3.1. Impacts Resulting from Court Orders or Legislative Changes

3.1.1. 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.

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

3.2.1. The Contractor must submit:

3.2.1.1. A detailed description of the language assistance services, within ten (10) days of the Effective Date of the Agreement, 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.

3.2.1.2. A written attestation, within forty-five (45) days of the Effective Date of the Agreement and annually thereafter, that all personnel involved the provision of services to individuals under this Agreement have completed, within the last twelve (12) months, the Contractor Required Training Video on Civil Rights-related Provisions in DHHS Procurement Processes, which is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors); and

3.2.1.3. The Department's Federal Civil Rights Compliance Checklist within ten (10) days of the Effective Date of the Agreement. The Federal Civil Rights Compliance Checklist must have been completed within the last twelve (12) months and is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors).

3.3. Credits and Copyright Ownership

3.3.1. 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

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

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."

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

3.3.3. The Department must retain copyright ownership for any and all original materials produced, including, but not limited to reports, protocols, guidelines, brochures, posters, and resource directories.

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

3.4. Operation of Facilities: Compliance with Laws and Regulations

3.4.1. 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.

4. Records

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

4.1.1. 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.

4.1.2. 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

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

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.

4.2. 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.

4.3. If, upon further review, the Department must disallow any expenses claimed by the Contractor as costs hereunder, the Department retains the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

EXHIBIT C

Payment Terms

1. This Agreement is funded by:
   1.1. 73% Federal funds, TEMPORARY ASSISTANCE FOR NEEDY FAMILIES, as awarded on choose a date, December 16, 2025 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.558, FAIN 2601NHTANF.
   1.2. 16% Federal funds, SOCIAL SERVICES BLOCK GRANT, as awarded on choose a date, October 1, 2023 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.667, FAIN 2501NHSOSR.
   1.3. 11% General funds.

2. For the purposes of this Agreement the Department has identified:
   2.1. The Contractor as a Subrecipient, based on criteria specified in 2 CFR §200.331.
   2.2. The Agreement as NON-R&D, in accordance with 2 CFR §200.332.
   2.3. The Indirect Cost Rate for this Agreement in the attached Budget Sheet(s).

3. Payment shall be on a cost reimbursement basis for actual allowable expenditures incurred under this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1, Budget.

4. The Contractor shall submit an invoice 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:
   4.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.
   4.2. Is submitted in a format as provided by or otherwise acceptable to the Department.
   4.3. Identifies and requests payment in accordance with Section 3 above.
   4.4. Includes supporting documentation with each invoice, including, but not limited to, proof of expenditures, receipts for purchases, time sheets, and payroll records, as applicable.
   4.5. Is completed, dated and returned to the Department to initiate payment.
   4.6. Is assigned an electronic signature and is emailed to BFAinvoices@dhhs.nh.gov or mailed to:

   Financial Manager
   Department of Health and Human Services
   129 Pleasant Street

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Concord, NH 03301

5. The Department shall make payments to the Contractor within thirty (30) calendar days of receipt of each invoice and any required supporting documentation, subsequent to approval of the submitted invoice.

6. The final invoice and any required supporting documentation shall be due to the Department no later than forty (40) calendar days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.

7. Notwithstanding Paragraph 18 of the General Provisions Form P-37, changes limited to adjusting direct and indirect cost 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.

8. If applicable, the Contractor must notify the Department of any revisions, updates, or extensions to the Contractor's federal negotiated indirect cost rate agreement (NICRA) by submitting a copy of the revised NICRA to the Department within five (5) business days of the Contractor's receipt of the NICRA from the cognizant federal agency.

9. Audits

9.1. The Contractor must email an annual audit to dhhs.act@dhhs.nh.gov if any of the following conditions exist:

9.1.1. Condition A - The Contractor is subject to a Single Audit pursuant to 2 CFR 200.501 Audit Requirements.

9.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b.

9.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

9.2. If Condition A exists, the Contractor must 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.

9.2.1. The Contractor must submit a copy of any Single Audit findings and any associated corrective action plans. The Contractor

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

must submit quarterly progress reports on the status of implementation of the corrective action plan.

9.3. If Condition B or Condition C exists, the Contractor must submit an annual financial audit performed by an independent CPA within 120 days after the close of the Contractor's fiscal year.

9.4. The Contractor, regardless of the funding source and/or whether Conditions A, B, or C exist, may be required to submit annual financial audits performed by an independent CPA upon request by the Department.

9.5. 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 must 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, within sixty (60) days.

10. If applicable, the Contractor must request disposition instructions from the Department for any equipment, based on 2 CFR 200.313, purchased using funds provided under this Agreement.

Exhibit C-1 Budget

New Hampshire Department of Health and Human Services			
Contractor Name:	*VNA at HCS, Inc.*		
Budget Request for:	*Comprehensive Family Support Services - TANF*		
Budget Period:	*7/1/2026 thru 6/30/2029*		
Indirect Cost Rate (if applicable)	15.00%		
Line Item	**Program Cost - Funded by DHHS - SFY 27**	**Program Cost - Funded by DHHS - SFY 28**	**Program Cost - Funded by DHHS - SFY 29**
1. Salary & Wages	$284,677	$288,495	$291,528
2. Fringe Benefits	$71,169	$72,124	$72,882
3. Consultants	$0	$0	$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	$0	$0
5.(a) Supplies - Educational	$3,000	$3,150	$3,465
5.(b) Supplies - Lab	$0	$0	$0
5.(c) Supplies - Pharmacy	$0	$0	$0
5.(d) Supplies - Medical	$1,000	$1,050	$1,155
5.(e) Supplies - Office	$8,000	$8,500	$9,350
6. Travel	$12,000	$12,600	$13,727
7. Software	$0	$0	$0
8. (a) Other - Marketing/Communications	$1,000	$1,050	$1,103
8. (b) Other - Education and Training	$23,000	$24,150	$25,358
8. (c) Other - Other (specify below)	$0	$0	$0
Family Check Up/Online Training Portal (per staff)	$5,040	$2,810	$3,060
0	$0	$0	$0
Telephone	$9,000	$9,450	$9,923
Advertising	$873	$922	$968
Occupancy	$16,198	$17,008	$17,858
Emergency Funds for Families	$0	$0	$0
9. Subrecipient Contracts	$0	$0	$0
Total Direct Costs	$434,957	$441,309	$450,377
Total Indirect Costs	$65,244	$66,194	$67,557
Subtotals	$500,201	$507,503	$517,934
		TOTAL	**1,525,638**

Contractor Initials: Initial KG

Date: 5/13/2026

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

New Hampshire Department of Health and Human Services
Exhibit D – Federal Requirements

SECTION A: CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Contractor 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 CONTRACTORS 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 contractors (and by inference, sub- contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a contractor (and by inference, 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 Agreement 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 Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, 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 Contractor 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 Contractor'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 Contractor'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 Agreement 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 Agreement, 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;

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

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 contract officer on whose contract activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected Agreement;

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 Contractor may insert in the space provided below the site(s) for the performance of work done in connection with the specific Agreement.

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.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

SECTION B: CERTIFICATION REGARDING LOBBYING

The Contractor 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 Byrd Anti-Lobbying Amendment (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, loan, or cooperative agreement (and by specific mention 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, loan, or cooperative agreement (and by specific mention sub- contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, see https://omb.report/icr/201009-0348-022/doc/20388401

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, 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.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

SECTION C: 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 12689 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 Agreement, 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 Agreement 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 https://www.govinfo.gov/app/details/CFR-2004-title45-vol1/CFR-2004-title45-vol1-part76/context.

6. The prospective primary participant agrees by submitting this Agreement 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) https://www.ecfr.gov/current/title-22/chapter-V/part-513.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

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 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 (Agreement) 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 (Agreement), 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 (Agreement).

14. The prospective lower tier participant further agrees by submitting this proposal (Agreement) 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.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

SECTION D: CERTIFICATION OF COMPLIANCE WITH FEDERAL REQUIREMENTS

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:

The Contractor will comply, and will require any subcontractors to comply, with any applicable federal requirements, which may include but are not limited to:

1. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR 200).
2. 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;
3. 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;
4. 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);
5. 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;
6. 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;
7. 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;
8. 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;
9. 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;
10. 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.
11. The Clean Air Act (42 U.S.C. 7401-7671q.) which seeks to protect human health and the environment from emissions that pollute ambient, or outdoor, air.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

12. The Clean Water Act (33 U.S.C. 1251-1387) which establishes the basic structure for regulating discharges of pollutants into the waters of the United States and regulating quality standards for surface waters.
13. Civilian Agency Acquisition Council and the Defense Acquisition Regulations Council (Councils) (41 U.S.C. 1908) which establishes administrative, contractual, or legal remedies in instances where contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate.
14. Contract Work Hours and Safety Standards Act (40 U.S.C. 3701–3708) which establishes that all contracts awarded by the non-Federal entity in excess of $100,000 that involve the employment of mechanics or laborers must include a provision for compliance with 40 U.S.C. 3702 and 3704, as supplemented by Department of Labor regulations (29 CFR Part 5).
15. Rights to Inventions Made Under a Contract or Agreement 37 CFR § 401.2 (a) which establishes the recipient or subrecipient wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that “funding agreement,” the recipient or subrecipient must comply with the requirements of 37 CFR Part 401, “Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements,” and any implementing regulations issued by the awarding agency.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, or government wide suspension or debarment.

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 Agreement, the Contractor agrees to comply with the provisions indicated above.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

SECTION E: 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 Agreement, 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.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

SECTION F: 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 $30,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $30,000 or more. If the initial award is below $30,000 but subsequent grant modifications result in a total award equal to or over $30,000, 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 sub award 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 Entity Identifier (SAM UEI; DUNS#)
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.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

New Hampshire Department of Health and Human Services
Exhibit D – Federal Requirements

FORM A

As the Grantee 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: K76NXGVN1XX3

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: _____

Contractor Name: VNA at HCS, Inc.

5/13/2026
Date:

Signed by: Karen Gomes C712CCFA0A03422...
Name: Karen Gomes
Title: President and CEO

New Hampshire Department of Health and Human Services

Exhibit E

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

Contractor Initials Initial kG

Date 5/13/2026

or misplacement of hardcopy documents, and misrouting of physical or electronic 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.

Contractor Initials Initial kG

Date 5/13/2026

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.

Contractor Initials Initial kG

Date 5/13/2026

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, antihacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a whole, must have aggressive intrusion-detection and firewall protection.

Contractor Initials Initial kG

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 Initial kG

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

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.

Contractor Initials Initial kG

Date 5/13/2026

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;

Contractor Initials Initial kG

4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and
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

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement (Form P-37) ("Agreement"), and any of its agents who receive use or have access to protected health information (PHI), as defined herein, shall be referred to as the "Business Associate." The State of New Hampshire, Department of Health and Human Services, "Department" shall be referred to as the "Covered Entity," The Contractor and the Department are collectively referred to as "the parties."

The parties agree, to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191, the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162, and 164 (HIPAA), provisions of the HITECH Act, Title XIII, Subtitle D, Parts 1&2 of the American Recovery and Reinvestment Act of 2009, 42 USC 17934, et sec., applicable to business associates, and as applicable, to be bound by the provisions of the Confidentiality of Substance Use Disorder Patient Records, 42 USC s. 290 dd-2, 42 CFR Part 2, (Part 2), as any of these laws and regulations may be amended from time to time.

(1) Definitions

a. The following terms shall have the same meaning as defined in HIPAA, the HITECH Act, and Part 2, as they may be amended from time to time:

"Breach," "Designated Record Set," "Data Aggregation," Designated Record Set," "Health Care Operations," "HITECH Act," "Individual," "Privacy Rule," "Required by law," "Security Rule," and "Secretary."

b. Business Associate Agreement, (BAA) means the Business Associate Agreement that includes privacy and confidentiality requirements of the Business Associate working with PHI and as applicable, Part 2 record(s) on behalf of the Covered Entity under the Agreement.

c. "Constructively Identifiable," means there is a reasonable basis to believe that the information could be used, alone or in combination with other reasonably available information, by an anticipated recipient to identify an individual who is a subject of the information.

d. "Protected Health Information" ("PHI") as used in the Agreement and the BAA, means protected health information defined in HIPAA 45 CFR 160.103, limited to the information created, received, or used by Business Associate from or on behalf of Covered Entity, and includes any Part 2 records, if applicable, as defined below.

e. "Part 2 record" means any patient "Record," relating to a "Patient," and "Patient Identifying Information," as defined in 42 CFR Part 2.11.

f. "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.

(2) Business Associate Use and Disclosure of Protected Health Information

a. Business Associate shall not use, disclose, maintain, store, or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under the Agreement. Further, Business Associate, including but not

Contractor Initials KG

Date 5/13/2026

limited to all its directors, officers, employees, and agents, shall protect any PHI as required by HIPPA and 42 CFR Part 2, and not use, disclose, maintain, store, or transmit PHI in any manner that would constitute a violation of HIPAA or 42 CFR Part 2.

b. Business Associate may use or disclose PHI, as applicable:

I. For the proper management and administration of the Business Associate;

II. As required by law, according to the terms set forth in paragraph c. and d. below;

III. According to the HIPAA minimum necessary standard;

IV. For data aggregation purposes for the health care operations of the Covered Entity; and

V. Data that is de-identified or aggregated and remains constructively identifiable may not be used for any purpose outside the performance of the Agreement.

c. To the extent Business Associate is permitted under the BAA or the Agreement to disclose PHI to any third party or subcontractor prior to making any disclosure, the Business Associate must obtain, a business associate agreement or other agreement with the third party or subcontractor, that complies with HIPAA and ensures that all requirements and restrictions placed on the Business Associate as part of this BAA with the Covered Entity, are included in those business associate agreements with the third party or subcontractor.

d. The Business Associate shall not, disclose any PHI in response to a request or demand for disclosure, such as by a subpoena or court order, on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity can determine how to best protect the PHI. If Covered Entity objects to the disclosure, the Business Associate agrees to refrain from disclosing the PHI and shall cooperate with the Covered Entity in any effort the Covered Entity undertakes to contest the request for disclosure, subpoena, or other legal process. If applicable relating to Part 2 records, the Business Associate shall resist any efforts to access part 2 records in any judicial proceeding.

(3) Obligations and Activities of Business Associate

a. Business Associate shall implement appropriate safeguards to prevent unauthorized use or disclosure of all PHI in accordance with HIPAA Privacy Rule and Security Rule with regard to electronic PHI, and Part 2, as applicable.

b. The Business Associate shall immediately notify the Covered Entity's Privacy Officer at the following email address, DHHSPrivacyOfficer@dhhs.nh.gov after the Business Associate has determined that any use or disclosure not provided for by its contract, including any known or suspected privacy or security incident or breach has occurred potentially exposing or compromising the PHI. This includes inadvertent or accidental uses or disclosures or breaches of unsecured protected health information.

c. In the event of a breach, the Business Associate shall comply with the terms of this Business Associate Agreement, all applicable state and federal laws and regulations and any additional requirements of the Agreement.

d. The Business Associate shall perform a risk assessment, based on the information available at the time it becomes aware of any known or suspected privacy or

Contractor Initials KG

Date 5/13/2026

security breach as described above and communicate the risk assessment to the Covered Entity. The risk assessment shall include, but not be limited to:

I. The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;

II. The unauthorized person who accessed, used, disclosed, or received the protected health information;

III. Whether the protected health information was actually acquired or viewed; and

IV. How the risk of loss of confidentiality to the protected health information has been mitigated.

e. The Business Associate shall complete a risk assessment report at the conclusion of its incident or breach investigation and provide the findings in a written report to the Covered Entity as soon as practicable after the conclusion of the Business Associate's investigation.

f. 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 US Secretary of Health and Human Services for purposes of determining the Business Associate's and the Covered Entity's compliance with HIPAA and the Privacy and Security Rule, and Part 2, if applicable.

g. Business Associate shall require all of its business associates that receive, use or have access to PHI under the BAA to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein.

h. Within ten (10) 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 BAA and the Agreement.

i. 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.

j. 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.

k. Business Associate shall document any disclosures of PHI and information related to any 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.

l. 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

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

accordance with 45 CFR Section 164.528.

m. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within five (5) 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.

n. Within thirty (30) 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-ups of such PHI in any form or platform.

VI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, or if retention is governed by state or federal law, 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 as long as the Business 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 post a current version of the Notice of the Privacy Practices on the Covered Entity's website:

https://www.dhhs.nh.gov/oos/hipaa/publications.htm in accordance with 45 CFR Section 164.520.

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 BAA, 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 of Agreement for Cause

a. In addition to the General Provisions (P-37) of the Agreement, the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a material breach by Business Associate of the Business Associate Agreement. 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.

(6) Miscellaneous

a. Definitions, Laws, and Regulatory References. All laws and regulations used,

Initial

Contractor Initials _____

5/13/2026

Date _____

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

herein, shall refer to those laws and regulations as amended from time to time. A reference in the Agreement, as amended to include this Business Associate Agreement, to a Section in HIPAA or 42 Part 2, means the Section as in effect or as amended.

b. **Change in law** - Covered Entity and Business Associate agree to take such action as is necessary from time to time for the Covered Entity and/or Business Associate to comply with the changes in the requirements of HIPAA, 42 CFR Part 2 other 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 BAA and the Agreement shall be resolved to permit Covered Entity and the Business Associate to comply with HIPAA and 42 CFR Part 2.

e. **Segregation** - If any term or condition of this BAA 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 BAA are declared severable.

f. **Survival** - Provisions in this BAA regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the BAA in section (3) g. and (3) n.l., and the defense and indemnification provisions of the General Provisions (P-37) of the Agreement, shall survive the termination of the BAA.

IN WITNESS WHEREOF, the parties hereto have duly executed this Business Associate Agreement.

Department of Health and Human Services	VNA at HCS, Inc.
The State	Name of the Contractor
DocuSigned by: Iain Watt D778BB63F9704C7...	Signed by: Karen Gomes C712CCFA0A03422...
Signature of Authorized Representative	Signature of Authorized Representative
Iain Watt	Karen Gomes
Name of Authorized Representative	Name of Authorized Representative
Director - DPH	President and CEO
Title of Authorized Representative	Title of Authorized Representative
5/13/2026	5/13/2026
Date	Date

Initial KG

Contractor Initials _____

5/13/2026

Date _____

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

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 VNA AT HCS, INC. is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on November 18, 1981. 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: **67798**
Certificate Number: **0007901125**

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 7th day of April A.D. 2026.

David M. Scanlan
Secretary of State

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

CERTIFICATE OF AUTHORITY

I, Eric Horne, hereby certify that:

1. I am a duly elected Clerk/Secretary/Officer of Home Healthcare, Hospice and Community Services, 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 November 18th, 2025, at which a quorum of the Directors/shareholders were present and voting.

VOTED: That Karen Gomes, Chief Executive Officer is duly authorized on behalf of Home Healthcare, Hospice and Community Services, 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 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: April 21, 2026

Signature of Elected Officer
Name: Eric Horne
Title: Treasurer
5/5/2026

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 1/5/2026

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 Dowd Agencies, LLC 14 Bobala Road Holyoke MA 01040 License#: BR-1201657 HOMEHEA-03	**CONTACT NAME:** Diane LaFleche, CISR **PHONE (A/C, No, Ext):** 413-437-1062 **FAX (A/C, No):** 413-437-1462 **E-MAIL ADDRESS:** dlafleche@dowd.com
INSURED Home Healthcare, Hospice & Community Services, Inc. and VNA at HCS, Inc. PO Box 564 312 Marlboro Street Keene NH 03431	**INSURER(S) AFFORDING COVERAGE** / **NAIC #** **INSURER A :** Philadelphia Indemnity Insurance Company / 18058 **INSURER B :** **INSURER C :** **INSURER D :** **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** 852313332 **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 [X] LOC [ ] OTHER:			PHPK2642986	1/4/2026	1/4/2027	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 $ 100,000 $ 5,000 $ 1,000,000 $ 3,000,000 $ 3,000,000 $
A	**AUTOMOBILE LIABILITY** X ANY AUTO [ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY			PHPK2642989	1/4/2026	1/4/2027	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			PHUB896467	1/4/2026	1/4/2027	EACH OCCURRENCE AGGREGATE 	$ 4,000,000 $ 4,000,000 $
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [ ] **(Mandatory in NH)** If yes, describe under DESCRIPTION OF OPERATIONS below	N / A					[ ] PER STATUTE [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ $ $
A	Professional Liabilirty			PHPK2642986	1/4/2026	1/4/2027	1000000	3,000,000

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

Certificate holder is an additional insured, per written contract.

*30 Days Notice of Cancellation except for 20 Days on Automobile and 10 days on Workers Compensation for non-payment.

CERTIFICATE HOLDER

State of NH
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

© 1988-2015 ACORD CORPORATION. All rights reserved.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Client#: 980133 HOMEHEA3

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/21/2025

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
USI Insurance Services LLC
3 Executive Park Drive, Suite 300
Bedford, NH 03110
855 874-0123

CONTACT NAME: Sherri Winslow
PHONE (A/C, No, Ext): 855 874-0123 **FAX (A/C, No):**
E-MAIL ADDRESS: Sherri.Winslow@usi.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Wesco Insurance Company	25011
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Home Healthcare, Hospice & Community Services, Inc. and VNA at HCS, Inc.
312 Marlboro Street Keene, NH 03431

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	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$
	☐ CLAIMS-MADE ☐ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	☐ POLICY ☐ PRO-JECT ☐ LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	☐ ANY AUTO						BODILY INJURY (Per person)	$
	☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	☐ UMBRELLA LIAB ☐ OCCUR						EACH OCCURRENCE	$
	☐ EXCESS LIAB ☐ CLAIMS-MADE						AGGREGATE	$
	☐ DED ☐ RETENTION $							$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N			WWC37962851	07/01/2025	07/01/2026	X PER STATUTE ☐ OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N	N / A					E.L. EACH ACCIDENT	$1,000,000
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
VNA at HCS
This Certificate is issued for insured operations usual to home health and hospice activities

CERTIFICATE HOLDER
DHHS
Contracts and Procurement Unit
129 Pleasant Street
Concord, NH 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
Stephen G. Gat

© 1988-2015 ACORD CORPORATION. All rights reserved.

The ACORD name and logo are registered marks of ACORD
KXACA

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

NONPROFIT COVER SHEET

A. Entity Name: VNA at HCS, Inc.

B. Entity's Contact Information:

For Records Requests (e.g., resumes of key personnel; audited financial statements):

Name / Phone / Email: Rachel Kowalsky 603-352-2253 rkowalsky@hcssewrvices.org

Person responsible for Accuracy and Completeness of information provided:
Name: Donna Beaudin Title: Director of Clinical Operations
Signature: Rachel Kowalsky, MA CHW

C. List Board of Directors and Affiliations

Name (Identify any additional role(s) in Parentheses)	Affiliations
Karen Gomes, Interim CEO	
Virginia Jordan (Chair)	
Eric Horne (Treasurer)	
Julie Green (Secretary)	
Paul Berch (Director)	
Mary Davis (Director)	
Ann Heffernon (Director)	
Donald Mazanowski, MD (Director)	
William Pearson, Esq (Director)	
Susan Simonds (Director)	
David Stinson (Director)	
Andrew Tremblay, MD (Director)	
Kathryn Willbarger (Director)	

D. List Key Personnel (Resumes must be available upon request to the person(s) listed in section B or may be attached**):**

Name	Role	Annual Salary	Amount Paid From This Contract
Rachel Kowalsky	Program Lead	64,480	27,404
Jessica Cantrell	Family Support Worker	39,000	23,400
Sarah Davis	Family Support Worker	43,383.60	40,491.36
Megan Harris	Family Support Worker	28,119	13,390
Alyza Provencher	Family Support Worker	39,000	19,500
Rebecca Provencher	RN	93,600	32,760
Heather Riley	Family Support Worker	41,776.80	27,851.20
Melinda Vonderhorst	RN	54,631.20	27,315.60

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Pamela Streletsky	Fiscal	142,833.60	10,712.52

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

DISCLOSURE OF LEGAL ACTIVITIES INVOLVING THE STATE OF NEW HAMPSHIRE OR ANOTHER GOVERNMENT ENTITY

E. Check one of the following:

[x] The entity is **not currently or has not been** party to any legal proceeding involving the State of New Hampshire (or any agency or subdivision thereof) or any other state/federal government entity before any adjudicative body in any jurisdiction **OR**

[ ] The entity is or has been party to one or more legal proceedings as set forth above. Identify the jurisdiction, court or other adjudicative body, case number, and briefly describe the nature of the proceeding (Attached extra sheet if necessary).

_____

_____

_____

CHARITABLE TRUSTS UNIT COMPLIANCE CERTIFICATION

F. Check one of the following:

[X] is registered and in good standing with the New Hampshire Department of Justice Charitable Trusts Unit (** see note below) **or** has submitted a complete application for registration to the Charitable Trusts Unit and is awaiting a registration determination **OR**

[ ] is not required to register with the Charitable Trusts Unit because it is neither tax-exempt under section 501(c)(3) of the Internal Revenue Code nor engages in charitable solicitations in the State of New Hampshire **OR**

[ ] is exempt from registration with the Charitable Trusts Unit because it is a federal or state government, agency, or subdivision or is a religious organization, an integrated auxiliary of a religious organization, or is a convention or association of churches.

** Note: Attached screen shot from the DOJ Registered Charities List found at:

https://mm.nh.gov/files/uploads/doj/remote-docs/registered-charities.pdf

33625	Vivint Gives Back	3401 Ashton BlvdLehi, UT 84043	Lehi	UT	84043	G	11/15/2026
1950	VNA at HCS, Inc.	312 Marlboro Street	Keene	NH	03431	G	11/15/2026
2926	VNA Community Services, Inc.	1070 Holt Avenue, Unit 1, Suite 1400	Manchester	NH	03109	X	11/15/2021
10774	VNA Health System of Northern New England, Inc.	1 Pillsbury Street, Suite 200	Concord	NH	03301-3570	G	11/15/2026

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

FINANCIAL DISCLOSURES

G. Check one the following:

[X] The organization hired an outside firm to audit its financial statements or to prepare GAAP-compliant financial statements for its most recently completed fiscal year. If so, please ensure that the financial statements and audit results are available to be requested from the contact listed on Page 1 (audited financials may be attached) **OR**

[ ] The above does not apply, but the organization filed an IRS Form 990 or Form 990-EZ for its most recently completed fiscal year. Please attach that IRS Form 990 or Form 990-EZ to the submission. (Form 990 Schedule B is not required) **OR**

[ ] ***If neither of the above apply***, complete the Income Statement and Balance Sheet below with the following basic financial information from the organization's most recently completed fiscal year:

1. INCOME STATEMENT

Revenue		Expenses	
Grants	$	*Compensation of officers, directors, and key personnel*	$
Donations	$		
Program Services Revenue	$	*Other salaries & wages*	$
Interest & Dividends	$	*Payroll taxes & employee benefits*	$
All other Revenue	$	*Occupancy, rent, utilities, and insurance*	$
Total Revenue	$	*Printing, publications, postage, office supplies, and IT*	$
		All other expenses	$
		Total Expenses	$

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

2. BALANCE SHEET

Assets	
Cash & Equivalents	$
Investments	$
Real Estate (less any depreciation)	$
Other Property & Equipment (less any depreciation)	$
Pledges, grants, accounts receivable	$
All other assets	$
Total Assets	$

Liabilities	
Accounts Payable	$
Loans Payable	$
All other liabilities	$
Total Liabilities	$

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Home Healthcare Hospice & Community Services
HCS services.org

Mission Statement

To provide services which enable people to function throughout life at their optimal level of health, well-being, and independence, according to their personal beliefs and choices.

Vision Statement

To be the leading regional provider for the continuum of care through home health, hospice and community services

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

BerryDunn

Home Healthcare Hospice & Community Services

CONSOLIDATED FINANCIAL STATEMENTS

June 30, 2025 and 2024

With Independent Auditor's Report

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

BerryDunn

BDMP Assurance, LLP

INDEPENDENT AUDITOR'S REPORT

Board of Directors
Home Healthcare, Hospice & Community Services, Inc. and Affiliate

Opinion

We have audited the accompanying consolidated financial statements of Home Healthcare, Hospice & Community Services, Inc. and Affiliate (the Association), which comprise the consolidated balance sheet as of June 30, 2025, and the related consolidated statements of operations, changes in net assets, and cash flows for the year then ended, and the related notes to the consolidated financial statements.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of the Association as of June 30, 2025, and the results of their operations, changes in their net assets and their cash flows for the year then ended in accordance with U.S. generally accepted accounting principles.

Basis for Opinion

We conducted our audit in accordance with U.S. generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Consolidated Financial Statements section of our report. We are required to be independent of the Association 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 opinion.

Prior Period Consolidated Financial Statements

The consolidated financial statements of the Association as of and for the year ended June 30, 2024 were audited by Berry, Dunn, McNeil & Parker, LLC whose report, dated December 17, 2024, expressed an unmodified opinion on those statements.

Responsibilities of Management for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with U.S. generally accepted accounting principles, 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 the Association's ability to continue as a going concern within one year after the date that the consolidated financial statements are available to be issued.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Auditor's 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 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 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 U.S. generally accepted 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 the Association'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 the Association'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.

BDMP Assurance, LLP

Manchester, New Hampshire
December 15, 2025

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

HOME HEALTHCARE, HOSPICE & COMMUNITY SERVICES, INC. AND AFFILIATE

Consolidated Balance Sheets

June 30, 2025 and 2024

	2025	2024
ASSETS		
Current assets		
Cash and cash equivalents	**$ 354,737**	$ 269,107
Patient accounts receivable, net	**1,713,953**	1,765,713
Other receivables	**314,228**	262,396
Employee retention tax credit receivable	**1,851,536**	-
Prepaid expenses	**222,968**	192,953
Total current assets	**4,457,422**	2,490,169
Assets limited as to use	**17,224,459**	16,045,471
Operating lease right-of-use assets, net	**83,955**	62,056
Property and equipment, net	**2,024,509**	2,049,076
Total assets	**$ 23,790,345**	$ 20,646,772
LIABILITIES AND NET ASSETS		
Current liabilities		
Accounts payable and accrued expenses	**$ 587,006**	$ 480,500
Accrued payroll and related expenses	**865,708**	880,388
Deferred revenue	**44,470**	33,408
Current portion of operating lease obligations	**27,487**	58,433
Total current liabilities	**1,524,671**	1,452,729
Operating lease obligations, net of current portion	**56,468**	3,292
Total liabilities	**1,581,139**	1,456,021
Net assets		
Without donor restrictions	**21,127,374**	18,349,190
With donor restrictions	**1,081,832**	841,561
Total net assets	**22,209,206**	19,190,751
Total liabilities and net assets	**$ 23,790,345**	$ 20,646,772

The accompanying notes are an integral part of these consolidated financial statements.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

HOME HEALTHCARE, HOSPICE & COMMUNITY SERVICES, INC. AND AFFILIATE

Consolidated Statements of Operations

Years Ended June 30, 2025 and 2024

	2025	2024
Operating revenue		
Net patient service revenue	**$ 14,376,543**	$ 15,393,402
Other operating revenue	**2,888,802**	2,751,844
Net assets released for operations	**178,454**	118,211
Total operating revenue	**17,443,799**	18,263,457
Operating expenses		
Salaries and related expenses	**12,872,394**	14,184,265
Other operating expenses	**5,219,828**	5,779,816
Depreciation	**239,427**	250,220
Total operating expenses	**18,331,649**	20,214,301
Operating loss	**(887,850)**	(1,950,844)
Other revenue and gains		
Employee retention tax credit	**1,851,536**	-
Contributions and fundraising income	**468,911**	686,284
Investment income, net	**359,647**	279,983
Change in fair value of investments	**942,330**	1,664,029
Total other revenue and gains	**3,622,424**	2,630,296
Excess of revenue over expenses	**2,734,574**	679,452
Net assets released for capital acquisition	**43,610**	28,461
Change in net assets without donor restrictions	**$ 2,778,184**	$ 707,913

The accompanying notes are an integral part of these consolidated financial statements.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

HOME HEALTHCARE, HOSPICE & COMMUNITY SERVICES, INC. AND AFFILIATE

Consolidated Statements of Changes in Net Assets

Years Ended June 30, 2025 and 2024

	2025	2024
Net assets without donor restrictions		
Excess of revenue over expenses	$ 2,734,574	$ 679,452
Net assets released for capital acquisition	43,610	28,461
Change in net assets without donor restrictions	2,778,184	707,913
Net assets with donor restrictions		
Contributions	346,530	37,833
Investment income	31,080	19,544
Change in fair value of investments	84,725	121,892
Net assets released for operations	(178,454)	(118,211)
Net assets released for capital acquisition	(43,610)	(28,461)
Change in net assets with donor restrictions	240,271	32,597
Change in net assets	3,018,455	740,510
Net assets, beginning of year	19,190,751	18,450,241
Net assets, end of year	$ 22,209,206	$ 19,190,751

The accompanying notes are an integral part of these consolidated financial statements.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

HOME HEALTHCARE, HOSPICE & COMMUNITY SERVICES, INC. AND AFFILIATE

Consolidated Statements of Cash Flows

Years Ended June 30, 2025 and 2024

	2025	2024
Cash flows from operating activities		
Change in net assets	$ 3,018,455	$ 740,510
Adjustments to reconcile change in net assets to net cash provided (used) by operating activities		
Depreciation	239,427	250,220
Net change in operating lease right-of-use assets and operating lease obligations	330	(5,799)
Change in fair value of investments	(1,027,055)	(1,785,921)
Investment income restricted for reinvestment	(31,080)	(19,544)
(Increase) decrease in the following assets:		
Patient accounts receivable	51,760	330,545
Other receivables	(51,832)	181,302
Employee retention tax credit receivable	(1,851,536)	-
Prepaid expenses	(30,015)	173,963
Increase (decrease) in the following liabilities:		
Accounts payable and accrued expenses	106,506	(80,442)
Accrued payroll and related expenses	(14,680)	(90,399)
Deferred revenue	11,062	2,123
Net cash provided (used) by operating activities	421,342	(303,442)
Cash flows from investing activities		
Purchase of investments	(7,229,522)	(4,527,433)
Proceeds from sale of investments	7,108,670	4,220,028
Capital expenditures, net of proceeds	(214,860)	(135,754)
Net cash used by investing activities	(335,712)	(443,159)
Net increase (decrease) in cash and cash equivalents	85,630	(746,601)
Cash and cash equivalents, beginning of year	269,107	1,015,708
Cash and cash equivalents, end of year	$ 354,737	$ 269,107

The accompanying notes are an integral part of these consolidated financial statements.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

1. Summary of Significant Accounting Policies

Organization

Home Healthcare, Hospice & Community Services, Inc. is a non-stock, non-profit corporation in New Hampshire whose primary purpose is to act as a holding company and provide management services to its affiliate.

Affiliate

VNA at HCS, Inc., is a non-stock, non-profit corporation in New Hampshire whose primary purposes are to provide home healthcare, hospice and community services.

Principles of Consolidation

The consolidated financial statements include the accounts of the Home Healthcare, Hospice & Community Services, Inc., and its affiliate, VNA at HCS, Inc. (collectively, the Association). They are related through a common board membership and common management. All significant intercompany balances and transactions have been eliminated in consolidation.

The Association prepares its consolidated financial statements in accordance with U.S. generally accepted accounting principles (U.S. GAAP) established by the Financial Accounting Standards Board (FASB). References to U.S. GAAP in these notes are to the FASB Accounting Standards Codification (ASC).

Basis of 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 ASC Topic 958, *Not-for-Profit Entities*. Under FASB ASC Topic 958 and FASB ASC Topic 954, *Health Care Entities,* all not-for profit healthcare organizations are required to provide a balance sheet, a statement of operations, a statement of changes in net assets, and a statement of cash flows. FASB ASC Topic 954 requires reporting amounts for an organization's total assets, liabilities, and net assets in a balance sheet; 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 statements 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 Directors (Board).

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Net assets with donor restrictions: Net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions are to 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.

Income Taxes

The Association is a public charity 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 consolidated financial statements.

Use of Estimates

The preparation of consolidated financial statements in conformity with 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 consolidated financial statements. Estimates also affect 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 assets limited as to use.

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.

Patient Accounts Receivable

Patient accounts receivable are stated at the amount management expects to collect from outstanding balances. Management provides a reserve for payment adjustments by analyzing past history and identification of trends for all funding sources in the aggregate. Management regularly reviews data about revenue in evaluating the sufficiency of the reserve which is netted against accounts receivable. Amounts not collected after all reasonable collection efforts have been exhausted are applied against the allowance for payment adjustments.

Patient accounts receivable, net were $1,713,953, $1,765,713, and $2,096,258 at June 30, 2025, 2024, and 2023, respectively.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Beneficial Interest in Perpetual Trust

The Association is the beneficiary of a perpetual trust administered by a third party. Although the Association does not have access to the underlying principal, a portion of income earned from the trust is available and distributed annually to the Association. The Association's share of trust principal is recognized as net assets with donor restrictions at fair market value. Annual income distributions are recognized as increases in net assets without donor restrictions. Changes in market value of beneficial interest in perpetual trust asset is reported as an increase or decrease in net assets with donor restrictions.

Investments

Investments in short-term investment options are reported as current assets. Investments held for long-term return are reported as non-current assets.

The Association reports investments at fair value and has elected to report all gains and losses in the excess of revenue over expenses to simplify the presentation of these amounts in the consolidated statement of operations, unless otherwise stipulated by the donor or State law.

Investments, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility risks. As such, 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 consolidated balance sheets.

Assets Limited as to Use

Assets limited as to use include designated assets set aside by the Board of Directors and donor contributions.

Leases

In accordance with FASB ASC Topic 842, *Leases*, the Association determines if an arrangement is a lease or contains a lease at inception of a contract. A contract is determined to be or contain a lease if the contract conveys the right to control the use of identified property, plant or equipment (an identified asset) in exchange for consideration. The Association determines these assets are leased because the Association has the right to obtain substantially all of the economic benefit from and the right to direct the use of the identified asset. Assets in which the supplier or lessor has the practical ability and right to substitute alternative assets for the identified asset and would benefit economically from the exercise of its right to substitute the asset are not considered to be or contain a lease because the Association determines it does not have the right to control and direct the use of the identified asset. The Association's lease agreements do not contain any material residual value guarantees or material restrictive covenants.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

In evaluating its contracts, the Association separately identifies lease and non-lease components, such as common area and other maintenance costs, in calculating the right-of-use (ROU) assets and lease obligations. The Association has elected the practical expedient to not separate lease and non-lease components and classifies the contract as a lease if consideration in the contract allocated to the lease component is greater than the consideration allocated to the non-lease agreement.

Leases result in the recognition of ROU assets and lease obligations on the consolidated balance sheets. ROU assets represent the right to use an underlying asset for the lease term, and lease obligations represent the obligation to make lease payments arising from the lease, measured on a discounted basis. The Association determines lease classification as operating or finance at the lease commencement date.

At lease inception, the lease obligation is measured at the present value of the lease payments over the lease term. The ROU asset equals the lease obligation adjusted for any initial direct costs, prepaid or deferred rent, and lease incentives. Topic 842 requires the use of the implicit rate in the lease when readily determinable. As most of the leases do not provide an implicit rate, the Association elected the practical expedient to use the risk-free rate when the rate of the lease is not implicit in the lease agreements.

The lease term may include options to extend or to terminate the lease that the Association is reasonably certain to exercise. Lease expense for operating leases is recognized on a straight-line basis over the lease term, while expense on finance leases is recognized using the effective interest rate method which amortizes the ROU asset to expense over the lease term and interest costs are expensed on the lease obligation throughout the lease term.

The Association has elected not to record leases with an initial term of 12 months of less on the consolidated balance sheet. Lease expense on such leases is recognized on a straight-line basis over the lease term.

Property and Equipment

Property and equipment are carried at cost less accumulated depreciation and amortization. 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.

Property is reviewed for impairment whenever events or changes in circumstances indicate the related carrying amount may not be recoverable. When required, impairment losses on assets to be held and used are recognized based on the excess of the assets' carrying amount over the fair value of the asset.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

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.

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.

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 net assets 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 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 consolidated financial statements.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Employee Retention Tax Credit

The Coronavirus Aid, Relief, and Economic Security Act (CARES Act) provided an employee retention tax credit (ERTC), which is a refundable tax credit against certain employment taxes. For 2020, the tax credit was 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 was changed to $10,000 of qualified wages per calendar quarter.

Management determined that the Association qualified for the ERTC under the government orders test and filed amended tax filings submitted in 2024. On November 10, 2025, subsequent to the year ended June 30, 2025, the Association received $1,851,536 in ERTC funds plus interest of $329,044. The Association recognized the ERTC funds, excluding interest, as a receivable on the consolidated balance sheet as of June 30, 2025 and revenue in the consolidated statement of operations for the year ended June 30, 2025. The credits received could be subject to audit for up to five years from the date of the credit filing.

2. Availability and Liquidity of Financial Assets

As of June 30, 2025, the Association has working capital of $2,932,751 and average days (based on normal expenditures) cash on hand of 7.

Financial assets and liquidity resources available within one year for general expenditure, such as operating expenses and capital acquisitions not financed with debt or restricted funds (unfunded capital expenditures), were as follows:

	2025	2024
Cash and cash equivalents	**$ 354,737**	$ 269,107
Patient accounts receivable, net	**1,713,953**	1,765,713
Other receivables	**314,228**	262,396
Employee retention tax credit receivable	**1,851,536**	-
Financial assets available to meet cash needs for general expenditures within one year	**$ 4,234,454**	$ 2,297,216

The Association has board designated long-term investments that could be made available for general expenditure upon Board approval. Since these investments are currently intended for long-term investments, they have not been included in the information above. The Association has other long-term investments and assets for restricted use, more fully described in Note 3, which are not available for general expenditure within the next year and are not reflected in the amount above.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

The Association has a $1,000,000 line of credit available to meet short-term needs, as disclosed in Note 5.

3. Investments and Assets Limited as to Use

Investments and assets limited as to use, stated at fair value, were as follows:

	2025	2024
Board-designated for future use	**$ 16,142,625**	$ 15,203,910
Donor-restricted, time or purpose	**361,283**	325,137
Endowment investments - unappropriated spending	**302,936**	282,193
Beneficial interest in perpetual trust	**183,384**	-
Donor-restricted, perpetual in nature	**234,231**	234,231
Total investments and assets limited as to use	**$ 17,224,459**	$ 16,045,471

The Association's interest in the Dixie Wonders Trust represent a beneficial interest in perpetual trust. The Association's right to future earnings if this trust is reported in net assets with donor restrictions. The fair value is determined annually based on an estimate of the Association's portion of the fair value of the assets included in the trust as provided by the trust custodian. The trust provided an income stream to the Associated based on the income of the trust assets or net assets of the trust, as applicable. The trustees have elected, under state law, to distribute, as income, income earned on trust assets. The trusts' investment policies, including return objectives and risk parameters, are the responsibility of the third-party trustees.

Distributions received from the trust accounts are accounted for as interest income. Distributions received were $8,520 in 2025. The following is a summary of the changes in the trust assets:

	Dixie Wonders Trust
Beneficial interest in trust, June 30, 2024	$ -
Contribution	**183,384**
Interest income	**8,520**
Appropriation of trust assets for expenditure	**(8,520)**
Beneficial interest in trust, June 30, 2025	**$ 183,384**

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Fair Value Measurement

FASB ASC Topic 820, *Fair Value Measurement*, defines fair value as the price that would be received to sell an asset or paid to transfer a liability (an exit price) in an orderly transaction between market participants and 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 fair value hierarchy within FASB ASC Topic 820 distinguishes three levels of inputs that may be utilized when measuring 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.

All of the Association's investments were measured at fair value on a recurring basis as follows:

	Assets at Fair Value as of June 30, 2025			
	Level 1	**Level 2**	**Level 3**	**Total**
Cash and cash equivalents	**$ 261,829**	**$ -**	**$ -**	**$ 261,829**
U.S. Government and corporate bonds	**-**	**1,218,076**	**-**	**1,218,076**
Equity securities	**9,931,469**	**-**	**-**	**9,931,469**
Mutual funds	**5,629,701**	**-**	**-**	**5,629,701**
Beneficial interest in perpetual trust	**-**	**-**	**183,384**	**183,384**
Total	**$15,822,999**	**$ 1,218,076**	**$ 183,384**	**$17,224,459**

	Assets at Fair Value as of June 30, 2024			
	Level 1	Level 2	Level 3	Total
Cash and cash equivalents	$ 424,111	$ -	$ -	$ 424,111
U.S. Government and corporate bonds	-	1,947,163	-	1,947,163
Equity securities	8,716,037	-	-	8,716,037
Mutual funds	4,958,160	-	-	4,958,160
Total	$14,098,308	$ 1,947,163	$ -	$16,045,471

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

The fair values of all of the Association's corporate bonds are based on quoted market prices of similar investments and categorized as Level 2 investments. The fair value of the Association's beneficial interest in perpetual trust is based on the valuation of the trust assets held by a regional financial institution provided by the trust's custodian.

Investment income and change in fair value of investments and assets limited as to use consisted of the following:

	2025	2024
Net assets without donor restrictions		
Investment income, net of fees	**$ 359,647**	$ 279,983
Change in fair value of investments	**942,330**	1,664,029
Restricted net assets		
Investment income	**31,080**	19,544
Change in fair value of investments	**84,725**	121,892
Total	**$ 1,417,782**	$ 2,085,448

4. Property and Equipment

Property and equipment consisted of the following:

	2025	2024
Land	**$ 552,206**	$ 552,206
Building and improvements	**5,723,786**	5,723,786
Furniture, fixtures, and equipment	**3,308,799**	3,146,442
Construction in progress	**59,078**	6,575
Total cost	**9,643,869**	9,429,009
Less accumulated depreciation and amortization	**7,619,360**	7,379,933
Total property and equipment, net	**$ 2,024,509**	$ 2,049,076

5. Line of Credit

The Association has an unsecured $1,000,000 line of credit payable on demand with a local bank with interest at 1% above the prime rate (8.50% at June 30, 2025). There was no outstanding balance at June 30, 2025 and 2024.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

6. Net Assets with Donor Restrictions

Net assets with donor restrictions consisted of the following:

	2025	2024
Time or purpose restrictions for:		
Haskell endowment fund accumulated earnings - for office rent	**$ 297,700**	$ 275,387
Johnson Family endowment fund accumulated earnings - for capital expenditures	**5,014**	5,138
Hospice accumulated earnings	**222**	824
Furniture and capital improvements	**2,076**	8,961
HEAL program	**13,353**	12,542
Palliative education	**27,034**	42,629
Cheshire County Patient Needs	**4,080**	-
Peterborough Patient Needs	**6,634**	-
Teddy Bear Picnic	**1,135**	-
Healthy Start nursing visits	**15,550**	-
Outpatient Center	**-**	20,000
Vehicle maintenance and insurance	**7,009**	-
Personal safety devices	**-**	3,000
Operations	**29,771**	16,263
Jones endowment fund accumulated earnings - for equipment	**-**	314
Bednar endowment fund accumulated earnings - for general purposes	**-**	452
Hospice memorial garden	**143,239**	125,418
Barbara Duckett scholarship	**111,400**	96,402
Total	**$ 664,217**	$ 607,330

	2025	2024
Restrictions that are perpetual in nature for:		
Hospice	**$ 10,000**	$ 10,000
Operations	**8,623**	8,623
Johnson Family fund - for capital expenditures	**10,202**	10,202
Bednar endowment fund - income for general purposes	**50,000**	50,000
Haskell endowment fund - for office rent	**120,570**	120,570
Jones endowment fund - for equipment	**34,836**	34,836
Dixie Wonders Trust	**183,384**	-
Total	**$ 417,615**	$ 234,231

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

7. Endowments

The Association 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 of the donor-restricted endowment funds, absent explicit donor stipulations to the contrary. As a result of this interpretation, the Association classifies as a donor-restricted endowment (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent donor-restricted endowment gifts, and (c) accumulations to the donor-restricted endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund is classified as net assets with donor restrictions until those amounts are appropriated for expenditure by the Association in a manner consistent with the standard of prudence prescribed by UPMIFA.

In accordance with the UPMIFA, the Association considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

(1) The duration and preservation of the fund.
(2) The purposes of the organization and the donor-restricted endowment fund.
(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 Association.
(7) The investment policies of the Association.
(8) The spending policy.
(9) Funds with deficiencies.

Return Objectives and Risk Parameters

The investment portfolio is managed to provide for the long-term support of the Association. Accordingly, these funds are managed with disciplined, longer-term investment objectives and strategies designed to meet cash flow and spending requirements. Management of the assets is designed to attain the maximum total return consistent with acceptable and agreed-upon levels of risk. The Association benchmarks its portfolio performance against a number of commonly used indices.

Strategies Employed for Achieving Objectives

To satisfy its long-term rate-of-return objectives, the Association relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Association targets an asset allocation strategy wherein assets are diversified among several asset classes. The pursuit of maximizing total return is tempered by the need to minimize the volatility of returns and preserve capital. As such, the Association seeks broad diversification among assets having different characteristics with the intent to endure lower relative performance in strong markets in exchange for greater downside protection in weak markets.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Funds with Deficiencies

From time to time, the fair value of the assets associated with individual donor-restricted endowments may fall below the level of the donors' original gift(s). The Board's policy does not permit spending from underwater endowments. Any deficiencies are reported in net assets with donor restrictions. There were no such deficiencies at June 30, 2025 and 2024.

Spending Policy

The Association has a spending policy of appropriating a distribution annually up to 7% of the endowment fund's average market value over the previous 36 months. Appropriations are determined and made on an annual basis at year-end.

The following summarizes changes in endowment assets:

		With Donor Restrictions		
	Without Donor Restrictions	Purpose Restrictions	Perpetual in Nature	Total
Balance June 30, 2023	$ 13,123,637	$ 245,644	$ 234,231	$ 13,603,512
Investment income, net	266,809	12,840	-	279,649
Realized and unrealized gains on investments	1,664,053	80,080	-	1,744,133
Contributions	149,411	-	-	149,411
Net assets released from restrictions	-	(56,371)	-	(56,371)
Balance June 30, 2024	15,203,910	282,193	234,231	15,720,334
Investment income, net	**345,388**	**19,497**	**-**	**364,885**
Realized and unrealized gains on investments	**941,520**	**53,151**	**-**	**994,671**
Use of board designated funds for operations	**(400,569)**	**-**	**-**	**(400,569)**
Contributions	**52,376**	**-**	**183,384**	**235,760**
Net assets released from restrictions	**-**	**(51,905)**	**-**	**(51,905)**
Balance June 30, 2025	**$ 16,142,625**	**$ 302,936**	**$ 417,615**	**$ 16,863,176**

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

8. Net Patient Service Revenue

Net patient service revenue is as follows:

	2025	2024
Medicare	**$ 12,620,111**	$ 13,215,173
Medicaid	**544,974**	806,276
Other third-party payers	**964,608**	1,130,134
Private pay	**246,850**	241,819
Total	**$ 14,376,543**	$ 15,393,402

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 by 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.

The Association provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Because the Association does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue.

The Association provided services in other health-related activities, primarily to indigent patients, at rates substantially below cost. For certain activities, services were provided without charge. The Association estimates the costs associated with providing the other health-related activities by applying Medicare cost report methodology to determine program costs less any net patient revenue generated by the program. The estimated costs incurred in these activities amounted to $1,018,117 and $1,525,817 for the years June 30, 2025 and 2024, respectively.

The Association is able to provide these services with a component of funds received through local community support and state grants. Local community support consists of contributions received directly from the public, United Way, municipal appropriations, and investment income earned from assets limited as to use. Federal and state grants consisted of monies received from the State of New Hampshire.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

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.

9. Functional Expenses

The Association provides various services to residents within its geographic location. Expenses related to providing these services are as follows:

	2025	2024
Program services		
Salaries and benefits	**$ 11,193,776**	$ 12,393,112
Program supplies	**767,453**	827,424
Travel	**324,543**	371,901
Contract services	**1,125,307**	1,180,499
Other operating expenses	**1,120,162**	1,262,257
Depreciation and amortization	**208,206**	213,551
Total program services	**14,739,447**	16,248,744
Administrative and general		
Salaries and benefits	**1,678,618**	1,791,153
Travel	**88,490**	121,135
Contract services	**1,625,897**	1,839,930
Other operating expenses	**167,976**	182,469
Depreciation and amortization	**31,221**	30,870
Total administrative and general	**3,592,202**	3,965,557
Total	**$ 18,331,649**	$ 20,214,301

The Association allocates expenses to program services and supporting activities (including administrative and general) using methodologies consistent with those applied in its Medicare cost report. Such methodologies include allocations based on square footage, direct labor hours, and other applicable statistics. These methods are applied on a consistent basis each year.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

10. Commitments and Contingencies

Leases

The Association's operating leases are for its office facilities with varying expiration dates. The following is a schedule, by fiscal year, of future minimum lease payments and reconciliation to the consolidated balance sheet:

2026	$ 30,269
2027	20,369
2028	17,069
2029	17,069
2030	5,689
Total lease payments	90,465
Less present value discount	6,510
Operating lease obligations	$ 83,955

Operating lease costs incurred amounted to $70,960 in 2025 and $70,816 in 2024, which approximated the cash paid for leases. For the years ended June 30, 2025 and 2024, the weighted average remaining lease term in years is 3.74 and 0.99, respectively, and the weighted average discount rate is 3.97% and 3.05%, respectively.

The Association entered into a renewal operating lease on July 1, 2025 for a term of 36 months with monthly payments of $3,169.

Malpractice Insurance

The Association maintains medical malpractice insurance coverage on a claims-made basis. 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 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 no such accrual is necessary at June 30, 2025 and 2024. The Association intends to renew coverage on a claims-made basis and anticipates that such coverage will be available in future periods.

11. Retirement Plan

The Association sponsors a defined contribution plan. The retirement contributions by the Association amounted to $178,221 in 2025 and $209,415 in 2024.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

12. Concentration of Risk

The Association grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payer agreements. Following is a summary of accounts receivable, by funding source:

	2025	2024
Medicare	**71 %**	69 %
Medicaid	**4**	3
Other payers	**23**	23
Private pay	**2**	5
Total	**100 %**	100 %

13. Subsequent Events

For financial reporting purposes, subsequent events have been evaluated by management through December 15, 2025, which is the date the consolidated financial statements were available to be issued.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

[redacted]

RACHEL KOWALSKY

OBJECTIVE

To obtain employment in a setting that will benefit from both my knowledge of the outdoors and counseling.

EDUCATION

2006 - 2008 Antioch University New England Keene, NH
MA Clinical Mental Health Counseling

2004 - 2004 East Carolina University Greenville, NC
BA Psychology

1990 - 1996 Lyndon State College Lyndonville, VT
BS Communications Minor: Psychology

PROFESSIONAL MEMBERSHIPS

2006 American Mental Health Counseling Association Member

2004 PSI CHI National Honor Society Inductee

PRACTICA AND INTERNSHIP EXPERIENCE

2007 - 2008 FOCUS Cheshire Medical Center Keene, NH
Second Year Intern

Responsible for adolescent therapy (ages 12 to 18) in a partial hospitalization milieu setting. Duties include participation in various activities, psyco-educational groups, group and individual therapy sessions corresponding to individual treatment plans. Family therapy facilitator to assigned clients and participation in multi family group therapy. Other activities include daily staff meetings, school meetings, and writing daily charts.

2007 - 2007 Clinical and Support Options Inc Athol, MA
First Year Intern

Responsible to carry a small caseload of clients (ages 10 to 40). Duties include carrying out the initial diagnostic interview and documentation of the interview. Weekly therapy sessions (Play therapy, CBT, RBT, Anger Management, and Talk therapy). Other duties include: Attendance to all individual and group supervisions, Grand Rounds, and staff meetings.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

2006 - 2006 Clinical and Support Options Inc. Athol, MA

Practicum Student

Responsible to explain the intake process to new clients entering the agency system and observing the intake under a licensed clinician. Other duties include: Observation of therapeutic groups within the agencies SOAP program and documentation of client's participation. Other duties include: All supervision meetings, Grand Rounds, Staff and Community Organization Meetings.

WORK EXPERIENCE

October 2014 to Present YOU Inc., Cottage Hill Academy Baldwinville, MA

Clinician

Work with children and adolescents in short term crisis stabilization treatment. Provide individual, group, and family therapy to a case load of 6 students. Responsible to write all supporting documentation, clinical notes, and reports.

Feb 2014 to October 2014 Crotched Mountain School Greenfield, NH

Para Educator II

Provide one to one classroom support for students with emotional, developmental, and other pervasive disabilities. Also provide residential support on vacations and holidays. Taking students on activities and providing social skills training.

2012-2013 Greater Nashua Mental Health Center Nashua, NH

Child and family Outreach Therapist

Provide therapeutic services to adolescents, children, and their families in an out patient clinic, at school, or in the home. Responsibilities include treatment planning and team consultation, referral to appropriate services, and monitoring of progress. Other responsibilities include: completion of required documentation for records, agency trainings and seminars, weekly staff meetings, and collateral contact meetings.

2010- 2012 Becket Family of Services Keene, NH

Permanency Specialist/ Case Manager/ Therapist

Provide intensive in home services to adolescents that are involved in the juvenile justice system. Responsible for following through from referral to intake to treatment planning for adolescents, providing individual and family therapy, support for court appearances, educational support, and advocacy for the child. Other responsibilities include: completion of required documentation for records, court reports, weekly and monthly updates, agency trainings and seminars, weekly staff meetings, Monthly agency meetings, and collateral contact meetings.

2008 – 2010 Phoenix House Academy Dublin, NH

Primary Counselor

Carry a case load of adolescent substance abuse clients (6 maximum ages 13 to 18). Responsible for treatment planning, assessment, individual and group therapy in a therapeutic community setting. Additional duties include: monitoring daily milieu activities, maintaining records, communication with parents and law enforcement as needed. Attendance at weekly staff meetings, treatment team meetings, and required trainings.

References available upon request

[redacted]

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

JESSICA CANTRELL

SUMMARY

Motivated applicant with excellent interpersonal skills. Positive, creative thinker who is passionate about supporting individuals and families in need. Recent work as both a full spectrum doula and as a Waldorf teacher has provided ongoing opportunities to learn to support a diverse population. Applicant possesses a passion for connecting individuals to applicable resources.

EXPERIENCE

Bakery Associate
Orchard Hill Bread | Alstead, NH | June 2023 - Current

- Ensured compliance with health regulations related to food handling and storage.
- Trained new employees in proper bakery procedures and techniques.
- Kept records of production batches and output amounts produced daily.
- Organized workstations for efficient workflow between bakers.
- Responded quickly to any issues that arose during baking process.
- Provided excellent customer service by answering questions about products or taking orders from customers.
- Performed floor moves, merchandising, display maintenance and housekeeping to keep sales areas well-stocked, organized and current.
- Maintained knowledge of sales and promotions, return policies and security practices.

Doula
Holistic Birth & Beyond | Keene, NH | January 2022 - Current

- Provided emotional and physical support to families throughout labor, delivery, and the postpartum period.
- Provided educational information on the stages of labor, pain management techniques, breastfeeding, and newborn care.
- Assisted clients in developing birth plans that best served their needs and wishes for their childbirth and postpartum experience.
- Served and supported a diverse client population, including those who sought assistance from IVF/surrogacy to grow their families.
- Facilitated communication between client and medical staff during labor and delivery process.
- Researched local services available to meet the needs of each particular family.
- Offered compassionate listening ear for any concerns or fears related to pregnancy or childbirth.
- Helped create an atmosphere of respect between birthing person and healthcare providers.
- Collaborated with other doulas in order to provide best possible care for clients.
- Maintained compliance with HIPAA protocols to safeguard patient privacy.

Assistant Teacher
Spring Hill Children's Center | Keene, NH | August 2021 - Current

- Built and strengthened positive relationships with students, parents and teaching staff.

SKILLS

- Remote Office Availability
- Relationship Building
- Team Collaboration
- Organization and Multitasking
- Email and Telephone Etiquette
- Emotional Awareness
- Multitasking and Organization
- Strategic Planning
- Documentation and Recordkeeping
- Scheduling and Calendar Management

EDUCATION AND TRAINING

Associate of Arts
Liberal Arts
Southern New Hampshire University, New Hampshire
June 2018

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

- Remained calm and patient in student interactions to support individual growth and development.
- Participated in workshops, trainings and conferences to improve educational skills as an anthroposophical educator.
- Collaborated with other staff members to ensure student success.
- Facilitated communication between families and school personnel about issues relating to students' progress and success at school.
- Promoted a cooperative learning environment that encourages collaboration among students.
- Interacted positively with children to encourage development and involvement in activities, treating each child with dignity and respect.
- Protected confidential information related to staff and families.
- Participated in parent-teacher conferences to discuss children's development and progress.

Homeschool Educator
Self-employed | New Ipswich, NH | August 2016 - June 2020

- Developed individualized lesson plans for each student based on their learning styles, abilities and interests.
- Assessed student progress through regular testing and observation.
- Collaborated with other home educators to develop engaging curricula that met state standards.
- Adapted instructional materials to meet the needs of diverse learners.
- Encouraged critical thinking skills through open-ended questions and problem solving activities.
- Integrated technology into daily lessons when appropriate.
- Utilized multimedia resources such as videos, podcasts, and online games to supplement instruction.
- Designed creative assessment tools such as portfolios, rubrics, journals., to evaluate student mastery of concepts.

Gestational Carrier
ConcieveAbilities | Denver, CO | January 2019 - March 2020

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Sarah Davis

Case Manager - Easter Seals of New Hampshire

[redacted]

A position within the field of art and design working within a team environment.

WORK EXPERIENCE

Case Manager

Easter Seals of New Hampshire - Keene, NH -

2015-12 - Present

Job Description: provide family-centered support services to families; identify potential resources for resolving clients' health, psychosocial, or financial problems; work directly with the Department for Children Youth and Families, CASA, and mental health agencies to coordinate care for the families; participate in interdisciplinary team meetings and trainings; create treatment plans, monthly reports and court reports.

Mental Health Worker

The Brattleboro Retreat - Brattleboro, VT -

2015-05 - 2015-12

Job Description: help meet the needs of children, adolescents and adults who have been hospitalized for mental health and addiction issues; provide direct supervision and patient support, engage patients in therapeutic activities, organize and run group programs.

Children's Case Manager

MFS in Keene - Keene, NH -

2010-06 - 2015-05

Job Description: provided community-based, family-centered support services to families; developed and facilitated services, partnered with community resources to address needs; consulted with community agencies and committees to identify potential resources for resolving clients' health, psychosocial, or financial problems; participated in interdisciplinary meetings.

Eighth-Grade Inclusion Tutor

SAU29 - Keene, NH -

2007-08 - 2010-08

Job Description: worked alongside students in the classroom, tutored them in academics and guided their behavior all within a team environment.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

EDUCATION

BA in Sociology

Keene State College - Keene, NH

2001 - 2006

Associate in chemical dependency

Keene State College - Keene, NH

2002-01 - 2004-05

minor in art

Keene State College

SKILLS

published children's book illustrator and author, artist, specifically oil painting

PUBLICATIONS

My Boat and Me

http://9780692929766

ADDITIONAL INFORMATION

1 Dependable and organized; strong work ethic
2 Work well with others and independently
3 Great communication skills; personable
4 strong ability to multi task

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Megan Harris

Master of Social Work candidate seeking field experience to broaden my understanding of human behavior, engage in meaningful and transformative social work, and apply my passion for social justice and equity.

SKILLS
Creative problem-solver.
Community engagement specialist.
Adept advocacy expert.
Detail oriented.

EXPERIENCE

Silver Forest Inc, Bellows Falls, VT — *Administrative Assistant*

NOVEMBER 2021 - PRESENT

- Answer and direct phone calls.
- Develop and maintain a filing system.
- Update and maintain office policies and procedures.
- Provide general support to visitors.
- Act as the point of contact for internal and external clients.
- Process returns, distribute credit notes, and update product inventory.

Holiday Inn Express, Brattleboro, VT — *Front Desk Agent*

JULY 2018 - PRESENT

- Greet guests, and recognize rewards status and upgrades per IHG standard.
- Take, change, and arrange reservations with attention to discounts, rewards status, desired travel accommodations, room type, and hotel availability.
- Act as a concierge, offering insight into local attractions, events, dining, and historical sites, as well as providing directions, hours of business operations, and making reservations.
- Provide insight to guests regarding local resources available for transition living and social services.

Holiday Inn Express, Brattleboro, VT — *Executive Housekeeper*

JUNE 2021 - NOVEMBER 2021

- Managed inventory and placed orders for supply delivery.
- Managed and coordinated multi-person staff.
- Created work schedules.
- Collaborated with other hotel management to resolve guest concerns and maintain brand standards.
- Ensured proper communication and enforced professional decorum between departments and staff members.

Landmark College, Putney, VT — *Administrative Assistant*

MARCH 2019 - JUNE 2021

- Answered phone calls and acted as a "gatekeeper" for senior-level staff.
- Scheduled meetings using Outlook and Google Suites for Admissions Counselors, Director of Enrollment, and VP of Enrollment.
- Supported visitors by scheduling tours, aiding in travel planning, and offering accommodation suggestions.
- Carried out administrative duties such as filing, typing, copying, binding, scanning, etc.
- Exhibited polite and professional communication via phone, e-mail, and mail to staff, potential students, and families.
- Used company CRM to carefully chronicle, catalog, and record conversations, email correspondence, and documents received for the application process.

Virginia House of Delegates, Richmond, VA — *Legislative Aide*

NOVEMBER 2017 - MARCH 2018

- Assisted in the drafting of policy to be presented for the 2018 legislative session.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

- Researched bill talking points, fiscal impacts, and stakeholders for drafted legislation.
- Contacted and interviewed stakeholders for testimony on bill impacts.
- Connected constituents with vital social services and resources.
- Acted as liaison to state departments, agencies, and private companies to resolve constituent issues, answer questions, and address concerns.
- Developed and managed relationships with government agencies, elected officials' offices, and community-based organizations to help resolve constituent cases.
- Handled constituent concerns and issues with empathy and compassion.

Elizabeth Guzman for Delegate, Woodbridge, VA — *Finance Director and Deputy Campaign Manager*

JUNE 2017- NOVEMBER 2017

- Successfully facilitated a finance program that raised $1.13 million from over 16,000 donors.
- Planned, recruited for, and successfully executed over 25 fundraising events.
- Designed and implemented call time, re-solicit, and house party fundraising plans.
- Coordinated with outside groups to host fundraising events, plan fundraising drives, and attract new donors.
- Ran candidate social media sites and coordinated updates for the website.
- Managed schedule and staffed candidate at all pertinent local, regional, and state events.
- Raised over $150,000 in online and email solicited donations.
- Maintain accurate records and produce campaign finance reports for filing.
- Collaborated with consultants, candidate, campaign manager, and state party to steer campaign messaging, finance decisions, and program directives.

Tom Periello for Governor, Nelson, VA — *Field Organizer*

MARCH 2017 - JUNE 2017

- Built and deployed a volunteer base for the Virginia Democratic Party, by
    - (1) Recruiting, motivating, and managing volunteers for canvassing, phone banking, and data entry, and
    - (2) working (either directly or through volunteers/interns) to ensure that our volunteer databases were organized and kept up-to-date.
- Built community relationships with constituents and voters.
- Fostered a sense of community through events, organizing events, and town halls.

Bernie 2016, New Hampshire, Nevada, Minnesota, Michigan, Ohio, and California — *Field Organizer*

JUNE 2015 - JULY 2016

- Recruited, trained, scheduled, and empowered volunteers to make calls, knock on doors, and host campaign events.
- Provided crucial connection between volunteer networks and the campaign to provide volunteers with campaign support, messaging, and directives.
- Organized broad and localized regions to ensure high voter turnout, community activism, and local/out-of-state engagement, including finding housing accommodations, providing schedules, and coordinating travel.
- Coordinated times and locations of phone banks, neighborhood canvasses, voter registration drives, college campus outreach, and rallies.
- Created and implemented programs to support the goal of maximum voter turnout.
- Expertise in the VAN VoteBuilder program, including conducting searches, pulling lists, creating user accounts, using crosstabs and calculations, turf cutting, target creation, and virtual phone bank construction.

EDUCATION

Walden University, Minneapolis, MN — *Candidate for Masters of Social Work*

MARCH 2022 - PRESENT

Castleton State University, Castleton, VT — *Bachelor's Degree, Philosophy and Political Science*

JUNE 2009 - MAY 2014

- Graduated Magna Cum Laude.
- Dean’s List Spring 2010, Spring and Fall 2011, 2012, 2013, and Spring 2014.
- President’s List Fall 2010.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Alyza Provencher

Education and Honors

Conant High School (September 2017-June 2021)
Working towards both education as well as courses and experiences that will help me work in the healthcare field. Taking and continuing to take classes that will help me to understand the human body better.

Babysitting Course (June 10, 2017)
The course taught how to properly care for a child of any age and how to give CPR to a young child. Also how to take care of a choking child in need of the Heimlich maneuver.

Red Cross LNA Course
(November 4, 2019 - January 14, 2020)
Within this class it has shown me how to properly care for those who are in need of it. Also gained the benefit of being able to understand the different illnesses that can become and the steps to further care for them. During this class I received my CPR certification on November 12, 2019.

Genesis LNA Course
(September 2021-November 2021)
in this class it has shown me how to properly care for those who are in need of it. Also gained the benefit of being able to understand how different illnesses that can become and affect people.

Employment

McDonalds (Summer 2018-February 2020)
Work includes a variety of positions there. Grill, customer service, packing food, etc. Learning the safety in the grill and how to respectfully treat diverse types of people. Named employee of the month in February 2019.

Summer-hill (February 2020-September 2021)

Work includes, taking care of elderly residents. Reliable, service focused nursing professional with amazing patient care and charting skills gained through the job of an aide. Full of compassion and skilled to work with residents of diverse needs.

Keene center Genesis

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

(September 2021-March 2022)

Work includes, taking care of elderly residents and residents in need of rehabilitation. Reliable and service focused nursing professional with amazing patient care and charting skills gained through the job of a LNA. Full of compassion and skilled to work with residents of diverse needs.

Home Healthcare, Hospice and Community Services -Keene

(March 2022-January 2024) Returned (February 2025- current)

Work includes going home to home to provide care for patients in skilled care and hospice care. Service focused and professional with amazing patient care and charting skills through Matrix and Microsoft systems. Full of compassion and skilled to work with patients' needs. Called patients/patients families to schedule visits.

Covenant Living of Keene

(January 2024-February 2025)

Work includes, providing care for skilled rehab patients and Longterm care residents. Service focused and professional, time management skills, amazing patient care and charting skills through MyUnity. Full of compassion. Skilled to work with patients needs of diverse backgrounds.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Rebecca (Joki) Provencher RN, MSN, CLC

[redacted]

Education

Advanced Credential in Childhood and Family Mental Health- New Hampshire Dept of Health and Human Services and NH Association of Infant Mental Health, November 2022- January 2024

Certified Lactation Counselor, September 2021
Center for Breastfeeding, Healthy Children Project Inc., Harwich, Ma.

Master of Nursing, September 2017
Southern New Hampshire University
On-line, Manchester, NH.

Bachelor of Science in Nursing, May 1999
Fitchburg State College
Fitchburg, Ma.

Experience

Healthy Starts Care Manager
June 2024 to current
Home Healthcare Hospice and Community Services
Keene, NH
Program Manager and Supervisor for Healthy Families America program. Supervision of Comprehensive Family Supports and Services program. Newborn Navigator for CFSS. Co-manage with CFSS care manager day to day activities of all programs, community engagement and maintain agency set budgets. Ensure data and educational requirements are met. Maintain grant program quality standards and continually work on quality improvement initiatives.

Maternal Child Health Care Manager, March 2020 to current
Home Healthcare Hospice and Community Services
Keene, NH
Oversee all pediatric and maternal cases in VNA. Carry case load of maternal child health patients with complex, acute and chronic illnesses, providing nursing care and case management. Provide maternal child health education and ongoing to support to nurses. Collaboration within the

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

agency and community agencies. Provide ongoing education and support to IV nurses.

Pediatric Care Manager, October 2013-March 2020
Home Healthcare Hospice and Community Services
Keene, NH
Supervision of RNs, LPNs and LNAs in the Pediatric program. Manage each child's medical needs, scheduling, and psych-social needs with a family-centered approach.
Provide education and training for staff and families. Increased caseload by 150% in first year.
Collaboration and patient care for Healthy Starts program.

Customized Care Clinical Manager, September 2009-October 2013
Home Healthcare Hospice and Community Services
Keene, NH
Supervision of RNs, LPNs, and LNAs in the Customized Care department as well as the Choices For Independence program. Responsible for the coordination of the Katie Beckett(pediatric) program.

Support Services Manager, May 2006-September 2009
Home Health Hospice & Community Services
Keene, NH.
Manage the Home Health Aids in the VNA, as well as the Choices For Independence program.

Registered Nurse, September 2001-May 2006
Home Health Hospice & Community Services
Worked in pediatric private duty. Also worked as substitute RN supervisor in private duty. Made routine VNA visits as well as assisted with telemonitoring installations.

RN/LNA supervisor, Sept 1999-Sept 2001
Cedarcrest Inc. Keene, NH.
Medication administration and treatments, assessments, scheduled and supervised 2nd shift LNAs.

Community Activities:

Cedarcrest Inc.
Board Member serving on the Quality Committee
October 2016-2019
Advisory Counsel Member serving on Quality Committee
October 2019 to March 2023

New Hampshire Association for Infant Mental Health
Member 2016

Monadnock Center for Violence Prevention
Board Member serving on governance committee
May 2010-2016

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Heather Riley

Service Coordinator - Monadnock Developmental Services

[redacted]

To find a rewarding position that will enhance my skills and knowledge base in a relaxed but challenging atmosphere.

Work Experience

Service Coordinator

Monadnock Developmental Services - Keene, NH
2004 to Present

Facilitate team meetings, oversee services for a caseload of 30-34, and am responsible for coordinating and writing yearly individual service plans to meet the needs of the individual and to ensure that services meet state regulations.

Partners in Health Coordinator

Monadnock Developmental Services - Keene, NH
1999 to 2004

Coordinated family support services for children with chronic health conditions by working with schools, medical providers, social services, and community organizations to enhance the care and services needed. Created, maintained, and facilitated two parent councils responsible for program oversight and community specific projects specific to children with chronic health.

Parent to Parent Coordinator

Monadnock Developmental Services - Keene, NH
1997 to 1999

Developed and facilitated community groups for families of children with Special needs which include: children's play groups and parent support groups. Developed, organized and implemented a family outreach program that networked families with other families.

Education

BA in Human Services

Franklin Pierce University
2011

Skills

- Case management
- Social work

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Additional Information

I'm writing to express my interest in the position listed on Indeed. I am excited at the prospect of working for the agency as I have an interest in the assisting individuals with obtaining the encouragement, motivation and tools needed for success.
I have been a Service Coordinator at Monadnock Developmental services for many years working to assist individuals with various developmental and chronic health conditions and their families of varying ages. As a Service Coordinator, I have developed exceptional communication skills that include telephone communication, writing and editing skills. I have experience working with individuals, family members, teams, schools medical providers and vendor agencies in a positive and productive manner. I am interested in building on my current skills and discover ways to continue to grow and improve. These are just a few examples of my experiences and accomplishments. I hope that you will find that this brief view, in combination with the attached resume, describes a dedicated employee with the experience and skills to meet or exceed the requirements of this position. I appreciate your consideration and look forward to discussing this opportunity with you.
Sincerely,
Heather Riley

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Melinda Vonderhorst

[redacted]

Work Experience

Home Healthcare, Hospice and Community Services, Keene NH, 2009-present

Registered Nurse Maternal Child Health VNA (2014-present): Provides skilled nurse assessment for postpartum, newborn and pediatric patients. Communicates effectively with patient, family and medical provider. Provides patient and family education. Provides lactation education and support.

Healthy Starts Registered Nurse (2015-present): Works with children and their families providing education and support to meet their specific needs.

Licensed Nursing Assistant, Customized Care & Katie Becket Program (2009-2014): Assisted with ADLs, nutrition and exercise. Worked under direct supervision of RN and part of interdisciplinary team that provided quality care to the client and their families.

Interim Healthcare, Keene NH, 2019-present

Registered Nurse: Provides skilled nursing care to medically-complex children in their home. Administers medications and treatments, documenting all assessed data. Communicates effectively with child's family and members of interdisciplinary team. Provides family education.

Credentials/Education

- State of New Hampshire Licensed Registered Nurse, valid through 4/2026
- American Heart Association BLS for Healthcare Providers through 05/2025

Certified Lactation Counselor through 06/30/2027

- Bachelor of Science in Nursing, Southern New Hampshire University, Manchester, NH
  Graduated May/2017
- Associate of Science in Nursing, River Valley Community College, Keene, NH
  Graduated 5/2014 Magna Cum Laude

Other

Volunteer, Camp Spofford, Spofford NH 2019-present
Camp RN for one week in July. Provide nursing care to campers, staff and guests.

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Mary Mullen-LaValley

Objective

Acquisition of a teaching position that will render use of my talents and educational expertise as well as provide me with the opportunity to serve those in need of care and support.

Experience

Home Healthcare, Hospice & Community Services **2012 - present**
Healthy Starts Home Visitor
Keene, NH
Community liaison for HCS programs with families and individuals throughout the service area. Provide safe, efficient personal interaction with pregnant and parenting families while promoting independence. Teach prenatal care, parenting skills, early intervention and children's health, help establish goals and encouraging achievement of these goals. Report and document pertinent observations, including changes in client's condition and need, appropriately.

Monadnock Family Services, Educator/Home Visitor **2006 – 2012**
Keene, NH
Provide education and home visiting services to young at-risk mothers in collaboration with the VNA at HCS Maternal Child Health Program. NH Certified education, K-5 (2009) and NH CAD Certified Advocate/Counselor, Domestic and Sexual Abuse (2006).

Westmoreland Elementary School/Middle School, Special Ed Teacher **1999 - 2006**
Westmoreland, NH
Special education tutor, K-5 and 8, as well as continued education service contract (21 year old student). Provided differentiated, appropriate and motivated education techniques for various behavioral and emotional needs. Originated and implemented academic plans, individual and whole class.

New Hampshire Technical Institute, Public Relations Facilitator **1995 – 1996**
Claremont, NH
Public Relations Facilitator of Adult Education

Bessie C. Rowell Elementary School, Kindergarten Teacher **1976 - 1978**

Education

University of New Hampshire **1976**
BA Elementary Education
Special education concentration

Keene State College **Currently Enrolled**
Masters of Education

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Pamela A. Streletsky

Chief Financial Officer

Highly accomplished, driven, and efficient ***Finance & Business Leader***. Relationship Development Specialist with extensive experience in scaling various teams. Unique ability of immediately establishing and sustaining staff rapport, trust and loyalty across all functions and management levels coupled with the distinct quality of identifying business opportunities and converting them into substantial profit. Successful track record of **reducing operational costs, increasing business growth and enhancing team performance.**

Selected Finance & Business Accomplishments

Reducing Operational Costs

- **Reduced DSO's by 38%** within one year of the department coming in house by generating reports, trending and tracking tools, and soliciting staff input.
- Reduced costs across company by bringing courier service in house, introduced a lease car program that **decreased mileage costs by 37%** and successfully renegotiated several other major contracts.

Increasing Business Growth

- **Generated business growth** in all lines of business by successfully redesigning the monthly operational reports for all stakeholders.
- Prepared company for acquisition by implementing lean processes in all departments.

Enhancing Team Performance

- Restructured the accounting department which fostered team collaboration and enhanced overall productivity.
- Automated processes throughout the finance department which **decreased days to close by 50%.**

Professional Experience

HOME HEALTHCARE, HOSPICE & COMMUNITY SERVICES
KEENE, NEW HAMPSHIRE **4/2024-Current**
Director of Fiscal Operations
Responsible for Revenue Cycle Management, Accounts Receivable Management & Patient Collections. Maintain financial stability thru billing accuracy, efficient collection & tracking billing related KPI's.

INDEPENDENT CONSULTANT **4/2022-4/2024**
Worked on projects related to: Financial Oversight & Reporting, Budgeting & Analysis, Operations Management, and Strategic Planning.

NURTURY, INC. BOSTON, MA. **3/2019-4/2022**
CFO / SVP of Finance and Administration

- Restructured Accounting Department to attain cost savings & efficiencies, developed complex budget and cash flow models for current fiscal year, & revised monthly reporting packages for Finance Committee.
- Worked on unwinding New Market Tax Credits and refinancing current loans and lines of credit.
- Worked closely with the CEO on various financial models to achieve optimal revenue mix in learning centers.

HOME HEALTH FOUNDATION, INC., (Parent Company of Home Health VNA,

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Merrimack Valley Hospice and Home Care Inc.), Lawrence, MA **5/2015 – 10/2018**

CFO / VP of Finance

- Managed all aspects of the monthly financial statements. Overall responsibility for Accounting, Payroll, Accounts Payable, Billing, Utilization Review, Information Technology, Business Intelligence, Insurance, Contracts and Facility functions for $60-$100 million revenue based non-profit company.
- Grew the Billing Department from 1 to 9 professionals. Reduced DSO's by 38% within one year of the department coming in house.
- Strategic planning, merger preparation and financial modeling for new lines of business.
- Scaled company from $60 million to $100 million in revenue during tenure.

MARY IMMACULATE HEALTH CARE SERVICES, INC., Lawrence, MA **2010 – 2015**

CFO / Director of Finance

- Financial oversight for Nursing Home, Adult Day Care, Assisted Living, Residential Community and Transportation Company. Total Revenue of $30 million annually.
- Communicated key financial information to the CEO, Board of Directors, Finance Committee and Department Heads.

VT MAK, Inc., Cambridge, MA **2008 – 2010**

(*Publicly traded $12MM Computer Software Company*)

Controller

- Responsible for general accounting; AP, Payroll, Billing, AR and Fixed Assets; financial statement preparation; revenue recognition under SOP 97-2, SOP 81.1, SAB 104, EITF 00-21, VSOE and managing audits. Total Revenue of $12 million annually.
- Prepared and monitored operational budgets.
- Government Contract accounting, project/cost accounting.
- Tax planning and compliance, FAS 109 & FIN 48.

UHY ADVISORS & PEGASUS SOLUTIONS, Boston, MA **2007 – 2008**

Consultant

Interim Controller for Environmental Power Corp. (EPC) in Portsmouth, NH. EPC is a public company in the renewable energy sector. Responsible for all SEC filings, board packages, budgeting, monthly close, SOX, and FAS123.

LANDMARK HEALTH SOLUTIONS, Haverhill, MA **2003 – 2007**

(Management Company for Nursing homes and Hospitals)

CFO / Controller

- Managed all accounting and financial aspects of business including (A/P, A/R, P/R and G/L). Improved close process by 5 days within 6 months.
- Prepared and presented annual budgets for nine clients.
- Maintained daily cash position and three-month cash flow projection
- Calculated bank and other lender covenants monthly.
- Monitored compliance with GAAP, GAAS, Sarbanes-Oxley (SOX), IRS, HUD and internal policies and procedures.
- Prepared Medicare and Medicaid Cost Reports and UFR for nine clients.
- Prepared State & Federal tax returns for nine clients.
- Assisted owners in acquisition of new business.

Additional Experience

Deloitte & Touche LLP, Senior Auditor 1987-1991

Docusign Envelope ID: C61820C0-1170-8837-8066-72A3D954A8B1

Education

B.S. Business Administration, Salem State University, Major in Accounting, Minor in Computer Science

MBA Candidate in Administration/Management, Suffolk University, Sawyer Business School

Skills Summary

Strategic planning, Mergers & Acquisitions, Change Management, Team & Relationship Building, Cross Functional Leadership, Strong Communicator & Innovator, Lean Management, and Advanced Excel skills.

FORM NUMBER P-37 (version 2/23/2023)

Subject: Comprehensive Family Support (CFS) (RFP-2027-DPH-05-COMPR-05)

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 Lakes Region Community Services Council		1.4 Contractor Address 719 North Main Street Laconia, NH 03246	
1.5 Contractor Phone Number 603-524-8811	1.6 Account Unit and Class TBD	1.7 Completion Date June 30, 2029	1.8 Price Limitation $1,296,427
1.9 Contracting Officer for State Agency Robert W. Moore, Director		1.10 State Agency Telephone Number (603) 271-9631	
1.11 Contractor Signature Signed by: Erin Pettengill 41B33C1651C1489... Date: 5/11/2026		1.12 Name and Title of Contractor Signatory Erin Pettengill President and CEO	
1.13 State Agency Signature DocuSigned by: Iain Watt D778BB63E9704C7... Date: 5/12/2026		1.14 Name and Title of State Agency Signatory Iain Watt Director - DPH	
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 748734844941460... On: 5/13/2026			
1.17 Approval by the Governor and Executive Council *(if applicable)* G&C Item number:		G&C Meeting Date:	

Contractor Initials: Initial EP
Date: 5/11/2026

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

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

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

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

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

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

4. CONDITIONAL NATURE OF AGREEMENT.

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

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

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

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

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

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

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

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

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

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

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

7. PERSONNEL.

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

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

Contractor Initials Initial EP
Date 5/11/2026

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

8. EVENT OF DEFAULT/REMEDIES.

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

8.1.1 failure to perform the Services satisfactorily or on schedule;

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

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

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

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

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

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

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

9. TERMINATION.

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

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

10. PROPERTY OWNERSHIP/DISCLOSURE.

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

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

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

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

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

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

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

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

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

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

Contractor Initials Initial EP

Date 5/11/2026

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

14. INSURANCE.
14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:
14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than $1,000,000 per occurrence and $2,000,000 aggregate or excess; and
14.1.2 special cause of loss coverage form covering all Property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the Property.
14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.
14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or any successor, a certificate(s) of insurance for all insurance required under this Agreement. At the request of the Contracting Officer, or any successor, the Contractor shall provide certificate(s) of insurance for all renewal(s) of insurance required under this Agreement. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

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

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

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

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

19. CHOICE OF LAW AND FORUM.
19.1 This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire except where the Federal supremacy clause requires otherwise. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.
19.2 Any actions arising out of this Agreement, including the breach or alleged breach thereof, may not be submitted to binding arbitration, but must, instead, be brought and maintained in the Merrimack County Superior Court of New Hampshire which shall have exclusive jurisdiction thereof.

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

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

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

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

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

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

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

Contractor Initials Initial EP
Date 5/11/2026

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

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, this Agreement, and all obligations of the parties hereunder, shall become effective on July 1, 2026 (“Effective Date”).

1.2. Paragraph 3, Effective Date/Completion of Services, is amended by deleting subparagraph 3.3., in its entirety and replacing it as follows:

3.3. Contractor must complete all Services by the Completion Date specified in block 1.7. 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 6, Compliance by Contractor with Laws and Regulations/Equal Employment Opportunity, Subparagraph 6.1., is amended as follows:

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, RSA 151:21 Patients’ Bill of Rights, civil rights and equal employment opportunity laws, and the Governor’s order on Respect and Civility in the Workplace, Executive Order 2020-01. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

1.4. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.5., as follows:

12.5. 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.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Exhibit B – Scope of Services

1. Statement of Work

1.1. The Contractor must provide the Comprehensive Family Support (CFS) Program. The Contractor must provide services to pregnant and parenting women as well as other families with children up to eighteen (18) years of age who are:

1.1.1. Experiencing, or at risk of experiencing difficulty with:

1.1.1.1. Pregnancy;

1.1.1.2. Health and nutrition;

1.1.1.3. Education and employment;

1.1.1.4. Parenting challenges;

1.1.1.5. Social isolation;

1.1.1.6. Substance use disorders;

1.1.1.7. Mental health events;

1.1.1.8. Child abuse and neglect; and

1.1.1.9. Substance exposed infants.

1.1.2. Perinatal families of substance exposed infants.

1.1.3. At risk for child abuse and neglect.

1.1.4. Seeking Comprehensive Family Support (CFS) in a voluntary manner.

1.2. The Contractor must ensure all services are provided in the following DHHS Catchment area: Laconia District Office. The Contractor must maintain a physical office located within the Catchment Area. The Contractor must ensure:

1.2.1. The office is accessible to families and staff at least five (5) days per week Monday through Friday during standard business hours of 8:00 am to 4:00 pm, excluding state holidays.

1.2.1.1. Evening hours are available at least one (1) night per week.

1.2.2. Families are provided flexible opportunities to meet in the home or community.

1.2.3. The office location remains in compliance with the Americans with Disabilities Act (ADA) accessibility requirements.

1.2.4. No duplication of services.

1.3. The Contractor must meet the Standards of Quality for Family Strengthening & Support as defined by the National Family Support Network. This includes:

1.3.1. Actively implementing a self-assessment and action plan that aligns

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

with the Standards of Quality for Family Strengthening & Support in collaboration with the Department and the Department's Facilitation Organization to obtain the FRC-Q designation within the first year of contract.

1.4. Comprehensive Family Support (CFS) Home Visiting Program

1.4.1. The Contractor must deliver high-quality, responsive CFS home visiting services to New Hampshire families with children ages 0-18, based on their emerging needs. The Contractor must ensure that families enrolled in CFS have access to all FRC services, home visiting services, parent education, parent support groups, father groups, parent cafes, information and referral, and case management. The Contractor must work collaboratively with the Department to deliver statewide CFS home visiting services that:

1.4.1.1. Promote healthy pregnancy and birth outcomes.

1.4.1.2. Support safe and nurturing environments for children and adolescents.

1.4.1.3. Improve maternal and child health.

1.4.1.4. Encourage positive parenting practices.

1.4.1.5. Reduce child maltreatment.

1.4.1.6. Increase linkages and referrals to community resources and supports.

1.4.2. The Contractor must ensure each family has a completed Individual Service Plan (ISP) that identifies and addresses barriers to achieving optimal health, well-being, and resiliency. The Contractor must use the ISP template provided by the Department and must include information about the education and support services that will be delivered across key outcome domains, which may include but are not limited to:

1.4.2.1. Maternal Health.

1.4.2.2. Child Health.

1.4.2.3. Child Development and School Readiness.

1.4.2.4. Community Linkages and Referrals.

1.4.2.5. Family Economic Self Sufficiency.

1.4.2.6. Positive Parenting Practices.

1.4.2.7. Preventative Child Care Scholarship.

1.4.3. The Contractor must provide CFS services using the Strengthening Families Framework developed by the Center for the Study of Social

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Policy (CSSP), addressing the five (5) Protective Factors which are:

1.4.3.1. Parental Resilience.

1.4.3.2. Social Connections.

1.4.3.3. Knowledge of parenting and child development.

1.4.3.4. Concrete supports in times of need.

1.4.3.5. Social and emotional competence of children.

1.4.4. The Contractor must ensure CFS services are delivered through a variety of methods, including but not limited to:

1.4.4.1. Home visiting services.

1.4.4.2. Educational workshops.

1.4.4.3. Peer-led or professionally facilitated support groups.

1.4.4.4. Parenting education and family support activities.

1.4.4.5. Trauma-informed services that recognize and respond to the impact of adverse experiences.

1.4.4.6. Access to concrete resources in times of need.

1.4.5. The Contractor must provide home visiting services that are respectful of the families served, strengths-based and family-centered, ensuring participation is voluntary and addresses each family's values, traditions, and needs.

1.4.6. The Contractor must collaborate with program participants to develop individualized, goal-oriented plans that improve economic self-sufficiency and long-term family stability. These goals may include, but are not limited to:

1.4.6.1. Planning future pregnancies.

1.4.6.2. Continuing education or vocational training.

1.4.6.3. Securing and maintaining employment.

1.4.6.4. Strengthening the family's Protective Factors.

1.4.6.5. Obtaining safe and stable housing.

1.4.6.6. Accessing community-based services and supports.

1.4.6.7. Participating in parenting education on topics such as:

1.4.6.7.1. Child development.

1.4.6.7.2. Child behavior and emotional regulation.

1.4.6.7.3. Child health and wellness.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

1.4.6.7.4. Coping strategies and problem-solving skills.

1.4.6.7.5. Home and child safety.

1.4.6.7.6. Positive parenting techniques.

1.4.7. The Contractor must promote education on health and safety topics including, but not limited to:

1.4.7.1. Providing child safety education through handouts and discussion using evidence-based curricula, including resources from the Centers for Disease Control (CDC) covering a wide range of topics such as:

1.4.7.1.1. Car seat safety and installation checks.

1.4.7.1.2. Use of safety gates and fall prevention.

1.4.7.1.3. Safe use of portable cribs and sleep environments.

1.4.7.1.4. Safe sleep practices to reduce the risk of Sudden Unexpected Infant Death Syndrome (SUID).

1.4.7.1.5. Lead poisoning prevention, including identification of environmental hazards.

1.4.7.1.6. Home safety strategies, including the use of window guards.

1.4.7.1.7. Oral health education for infants, children, and adolescents.

1.4.7.1.8. Understanding Adverse Childhood Experiences (ACEs) and building Protective Factors.

1.4.7.1.9. Smoking cessation education and referrals.

1.4.7.1.10. Educating families on the importance of primary care and preventative health services, including:

1.4.7.1.11. Access to preventative health care.

1.4.7.1.12. Immunizations.

1.4.7.1.13. Establishing a medical home for ongoing care coordination.

1.4.7.1.14. Improving child safety and health outcomes through regular well-child visits.

1.4.7.1.15. Postpartum health care follow up and planning for future pregnancies.

1.4.8. The Contractor must ensure all women have access to validated

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

screening tools, listed in 1.6.3, for prenatal and postpartum depression, and must refer all women who screen positive for maternal depression to appropriate follow-up care. The Contractor must provide support for participant enrollment in primary care and pediatric services.

1.4.9. The Contractor must complete and renew a Release of Information (ROI) form annually with all CFS participants for all programs, regardless of the type of services they are enrolled in. The ROI must include but is not limited to:

1.4.9.1. Acknowledgement of data collection within the Department's Family and Community Health Data System (FCH-DS).

1.4.9.2. Acknowledgement of sharing personal identifiable information with the Department.

1.4.9.3. Acknowledgement of the purpose of releasing data to the Department to review program outcomes and facilitate quality improvement activities.

1.4.9.4. Acknowledgement that Family Service Record outcome data will be kept and tracked for three (3) subsequent years following discharge.

1.4.9.5. All video recording, storage, access, and sharing requirements set forth elsewhere in this Scope of Services are contingent upon and governed by the participant consent requirements described in Section 1.7. The Contractor must use a paper coaching tool for participants that do not consent to video recording.

1.5. CFS Newborn Navigation Services

1.5.1. The Contractor must provide Newborn Navigation services as part of the CFS home visiting program. The purpose of newborn navigation services is to engage newborn families as early as possible in early childhood home visiting programs, community resources linkage, and services.

1.5.2. The Contractor must engage with families during pregnancy or within six (6) months of birth and provide at minimum one (1) voluntary CFS home visit within that timeframe. The visit must include care coordination services for pregnant and newborn families, with priority given to:

1.5.2.1. Family household at or below 250% of the federal poverty

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

level.

1.5.2.2. Single-parent households.

1.5.2.3. First time parents.

1.5.2.4. Families with other children under three (3) years of age.

1.5.2.5. Parents under twenty-five (25) years of age.

1.5.2.6. Parents with limited educational attainment.

1.5.3. The Contractor must make initial contact with families during pregnancy, prior to hospital discharge, or no later than six (6) months following birth to:

1.5.3.1. Schedule the initial home visit and collect intake prescreening information determined by the Department for follow-up; or

1.5.3.2. Provide FRC information to families who decline the home visit.

1.5.4. The Contractor must collect prescreening intake information and enter it into the FCH-DS prior to conducting the home visit.

1.5.5. For families who consent to CFS Newborn Navigation services, the Contractor must provide a Welcome Newborn Family bag, which includes Department-approved information and resources on topics such as:

1.5.5.1. WIC.

1.5.5.2. Medicaid.

1.5.5.3. Supplemental Nutrition Assistance Program (SNAP).

1.5.5.4. FRC services.

1.5.5.5. Lead poisoning prevention.

1.5.5.6. Safe sleep.

1.5.5.7. Infant nutrition.

1.5.5.8. Additional items as identified by the CFS agency and approved by the Department.

1.5.6. The Contractor must ensure enrolled families may receive up to three (3) Newborn Navigator home visits, all of which must occur within (6) months of enrollment.

1.5.7. The initial CFS Newborn Navigation home visit includes a comprehensive Family Needs Assessment and support services,

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

including but not limited to:

1.5.7.1. Maternal depression screening.

1.5.7.2. Developmental screening.

1.5.7.3. Referrals based on identified family needs.

1.5.7.4. Parent education and child safety (e.g., safe sleep, lead poisoning prevention, home safety).

1.5.7.5. Breastfeeding and lactation support.

1.5.7.6. Postpartum planning future pregnancies.

1.5.7.7. Infant feeding and nutrition support.

1.5.7.8. Positive parenting practices, including attachment.

1.5.7.9. Completion of release of information forms for referrals and sharing programmatic data with the Department.

1.5.8. Information and referral support to enroll in HFA or FCU programs. The CFS family support specialist delivering newborn navigation services must work with families to identify ongoing support needs and facilitate referrals to appropriate services and programs.

1.5.9. These include but are not limited to:

1.5.9.1. Family Resource Center services,

1.5.9.2. Family Check Up,

1.5.9.3. Healthy Families America (HFA),

1.5.9.4. The Supplemental Nutrition Program for Woman, Infants and Children (WIC), and

1.5.9.5. Birth to Three Early Supports and Services.

1.5.10. The Contractor must ensure data related to CFS Newborn Navigation services is collected in the Department owned FCH-DS and reported in coordination with the Department.

1.5.11. The Contractor must collaborate with, build partnerships, and coordinate enrollment planning with local healthcare agencies to promote referrals from healthcare providers to CFS's Newborn Navigation services. Partners and collaboration examples include, but

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

are not limited to:

1.5.11.1. Birthing hospitals.

1.5.11.2. OB/GYN providers.

1.5.11.3. Pediatric healthcare providers.

1.5.11.4. Family medicine and primary care providers.

1.5.11.5. Community Health Centers.

1.5.12. The Contractor must offer satellite health office hours to increase accessibility, as needed.

1.5.13. The Contractor must distribute CFS Newborn Navigation informational and printed materials, as appropriate.

1.5.14. The Contractor must also collaborate and build partnerships with local early care and education programs that serve newborn families to coordinate services, prevent duplication. and enhance care coordination. These programs include, but are not limited to:

1.5.14.1. WIC.

1.5.14.2. Birth to Three Early Supports and Services.

1.5.14.3. Healthy Families America (HFA).

1.5.14.3.1. CFS staff delivering Newborn Navigation services must maintain an active collaboration with HFA, including a clearly defined referral and enrollment process to ensure that families who may be better served through HFA are appropriately connected.

1.5.14.3.2. Pregnant and newborn families identified as having high-risk factors or who meet eligibility criteria for HFA must be engaged and referred or enrolled into HFA through joint home visits and warm handoffs.

1.5.15. The Contractor must work in close collaboration with the Department's Quality Improvement Coordinator to ensure all readiness activities are completed prior to program implementation and support ongoing quality improvement and program oversight. This includes, but is not limited to:

1.5.15.1. Completion of CFS onboarding training.

1.5.15.2. Development and implementation of a family recruitment and

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

enrollment plan.

1.5.15.3. Creation of a health provider and community engagement strategy to align services and strengthen referral pathways.

1.5.15.4. Participation in monthly Community of Practice.

1.5.15.5. Execution of additional activities that support continuous quality improvement.

1.5.15.6. Collection of program data, including administration of a Department-approved post-participant survey, which may include, but is not limited to:

1.5.15.6.1. Assessment of participant knowledge related to community resources, postpartum depression, and newborn care following the initial home visit.

1.5.15.6.2. Evaluation of referrals made and connections established with community resources.

1.5.15.6.3. Measurement of participant satisfaction and likelihood to recommend Newborn Navigation services to others.

1.5.15.6.4. Collection of additional feedback to inform and enhance continuous quality improvement efforts.

1.5.16. The Contractor must collaborate with the Department to provide timely and accurate information related to program evaluation and other data requests necessary to support the Department's goals and reporting requirements. The Contractor must be prepared to share information with various divisions within the Department, including but not limited to:

1.5.16.1. Division of Public Health.

1.5.16.2. Division of Economic Stability.

1.5.16.3. Division of Long Term Supports and Services.

1.6. CFS Assessments and Referrals

1.6.1. The Contractor must actively engage and collaborate with the Department, including the Division for Children, Youth and Families (DCYF), and community partners such as schools, community mental health centers and health clinics to promote referrals into the program and prioritize enrollment of families who may be experiencing

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

circumstances that include, but are not limited to:

1.6.1.1. A previous or current founded or unfounded report to child protective services.

1.6.1.2. Having a child with low birth weight and/or neurodevelopmental delays.

1.6.1.3. A history of, or current, parental or caregiver substance abuse.

1.6.1.4. A history of, or current, mental health concerns affecting the parent, caregiver, or child(ren).

1.6.1.5. Household income at or below 250% of the Federal Poverty Level.

1.6.1.6. A family history of intimate partner violence.

1.6.1.7. Evidence of insecure attachment in the child's early years.

1.6.1.8. Pregnancy; birth of a child within the past twelve (12) months; anticipated birth of an additional child within the next six (6) months; or the birth or expected birth of a child with special healthcare needs.

1.6.1.9. Pregnant participants with prenatal substance use concerns, and families with substance-exposed infants.

1.6.1.10. Pregnant or post-partum participants with a Plan of Safe Care, or those in need of support to develop one.

1.6.1.11. Families with more than one (1) child under the age of three (3).

1.6.1.12. Experiences of physical or social isolation, or any other factors contributing to unhealthy social and emotional outcomes.

1.6.1.13. Home conditions that present a health and/or safety risk to family members.

1.6.1.14. A child or family member with chronic health, behavioral, or developmental conditions that impact parenting.

1.6.1.15. Results from the Ages and Stages Questionnaire (ASQ) or Ages and Stages Questionnaire Social Emotional (ASQ-SE) indicating developmental delays.

1.6.1.16. Families impacted by traumatic events.

1.6.1.17. Families receiving Temporary Assistance to Needy Families (TANF) cash assistance or enrolled in any

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Medicaid program.

1.6.1.18. Engagement with Substance Use Disorder (SUD) services.

1.6.2. The Contractor must complete a comprehensive Family Needs Assessment identified by the Department for each family served utilizing an intake assessment tool as identified by the Department within the first three (3) home visits, in order to identify family strengths, potential risk factors, and current and emerging needs. The Contractor must also conduct reassessments in accordance with the Family Check Up (FCU) model schedule, at a minimum of every six (6) months and again at twelve (12) months, or as otherwise directed by the Department.

1.6.3. The Contractor must utilize additional validated screening tools to support families and ensure budgeting to access tools, which may include, but are not limited to:

1.6.3.1. The Ages and Stages Questionnaires (ASQ-3 and ASQ:SE).

1.6.3.2. Brief System Inventory (BSI)

1.6.3.3. Edinburg Postnatal Depression Scale. (EPDS)

1.6.3.4. Developmental and social-emotional screenings for children ages one (1) month through five (5) years.

1.6.4. The Contractor must report on a monthly basis the number of families who received ASQ-3 and ASQ:SE screenings in a format specified by the Department.

1.6.5. The Contractor must provide expedited warm hand off referrals to appropriate community-based services and other resources that support families within their home communities, which may include, but are not limited to:

1.6.5.1. Childcare Aware of New Hampshire.

1.6.5.2. The Department's District Offices for assistance with program eligibility determinations.

1.6.5.3. Specialized Medicaid services, including Birth to Three Early Supports and Services.

1.6.5.4. The Supplemental Nutrition Program for Women, Infants and Children (WIC), Nutrition programs for breastfeeding

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

support, nutrition education, and access to healthy foods.

1.6.5.5. NH Employment Security.

1.6.5.6. Local school districts.

1.6.5.7. Family violence prevention agencies.

1.6.5.8. Mental health services.

1.6.5.9. Nutrition education and healthy foods.

1.6.5.10. Financial literacy and money management programs.

1.6.5.11. Smoking cessation programs.

1.6.5.12. Independent living skills programs.

1.6.5.13. Adult education programs.

1.6.5.14. Literacy education services.

1.6.5.15. Employment services.

1.6.5.16. Vocational rehabilitation services.

1.7. CFS Family Check Up Services

1.7.1. The Contractor must implement Northwest Prevention Science's Family Check-Up® (FCU) model, including the FCU portal. The Contactor must execute an agreement with Northwest Prevention Science Inc. before accessing the FCU portal or entering data.

1.7.2. The Contractor must provide at least one (1) trained staff per Catchment Area to implement the FCU model, within year one (1) of this Agreement. Training requirements include but are not limited to:

1.7.2.1. Motivational interviewing.

1.7.2.2. Everyday Parenting Curriculum, provided by the Department.

1.7.2.3. CFS onboarding and orientation training, provided by the Department.

1.7.3. The Contractor must work with the Department to support the implementation of the evidence-based FCU model to enhance the Department's CFS home visiting program services.

1.7.4. The Contractor must obtain all materials and resources required by the Department to successfully implement and deliver the FCU model with fidelity, including but not limited to a FCU informational flyer and/or brochure available for use with families and referral sources according to the FCU model resources.

1.7.5. The Contractor must provide access to computers, laptops, or other devices to use for video recordings, coding interaction videos,

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

downloading and compiling assessment data. To meet these requirements, the Contractor must ensure the availability of the following specific materials, tools, and resources:

1.7.5.1. Devices with video recording capability to support the following activities:

1.7.5.1.1. Contractor video recording families during family interaction tasks, which are part of the FCU assessment process.

1.7.5.1.2. Contractor video recording family session monthly to share with their Supervisor-Trainers for fidelity checks.

1.7.5.1.3. Supervisor-Trainer's video recording family sessions, supervision, and trainings for the FCU certification process.

1.7.5.2. Devices for families to complete FCU questionnaires on the FCU Portal Website online. Devices must be capable of establishing an internet connection independently or through hotspots. Contractor agrees that while families may use their own devices for the FCU questionnaire, Contractor-provided devices during assessment sessions streamline the process and increase the likelihood of questionnaire completion.

1.7.5.3. Devices must have the following capabilities:

1.7.5.3.1. Able to stand alone on a surface or on a tripod during the video recording process.

1.7.5.3.2. Secure access to prevent unauthorized viewing of confidential information, since providers will leave the room while families complete interaction tasks.

1.7.5.3.3. HIPAA-compliant video storage.

1.7.6. Contractor must provide consent forms that must cover consent for the family for video recording, with separate sections or forms addressing Family Interaction Tasks and session recordings. Consents must clearly outline:

1.7.6.1. The purpose of videos.

1.7.6.2. Who may access them.

1.7.6.3. The timeline for destruction of videos, in accordance with

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

HIPAA retention requirements .

1.7.6.4. A statement that consent to video recording is not required for program participation.

1.7.7. The Contractor must ensure all video recording adheres to the requirements outlined in Exhibit E: DHHS Information Security Requirements.

1.7.8. Contractor must provide toys for family interaction tasks, including:

1.7.8.1. Toys appropriate for children ages two (2) to nine (9) years old.

1.7.8.2. A basket large enough to hold toys for younger children.

1.7.8.3. Several puzzles of varying difficulty.

1.7.8.4. Blocks sufficient to build a tower.

1.7.8.5. Paper and colored pens or crayons.

1.7.9. The Contractor must adapt FRC documentation and intake procedures to integrate FCU model activities. This includes the completion of FCU family questionnaires via the FCU portal.

1.7.10. Until all CFS home visitors are trained to deliver FCU, the Contractor's FCU Specialist must enroll families with children ages 0-18 on a voluntary basis. The target population for the FCU model includes, and priority enrollment through an intake process is given to, families referred to CFS who meet the following criteria:

1.7.10.1. Parents or caregivers with a diagnosed mental illness, and/or families with children who have a diagnosed mental illness.

1.7.10.2. Families with a history of child abuse or neglect or at risk of foster care placement.

1.7.10.3. Families with a history of substance use disorders or those in need of substance use disorder treatment.

1.7.10.4. Families with children experiencing low student achievement.

1.7.10.5. All families with children ages 0-5.

1.7.10.6. Families who meet eligibility criteria for Healthy Families America (HFA) will be enrolled in the Department's HFA program when appropriate and available.

1.7.11. The Contractor must ensure that dedicated FCU staff and supervisors implement the model with fidelity and actively engage

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

with the Department in fidelity monitoring and quality assurance activities. Services must include, but are not limited to:

1.7.11.1. Conducting in-person visits with each FCU-enrolled family, including a minimum of three (3) structured intake and assessment sessions, followed by ongoing support and documentation. These sessions must include:

1.7.11.1.1. An Initial Intake Session to establish rapport, gather information about the family system, and identify existing strengths and challenges.

1.7.11.1.2. A Second Assessment Session in which the Contractor assists the family in completing standardized questionnaires and assessment tools to evaluate needs and areas requiring support.

1.7.11.1.3. A Third Assessment Session focused on collaborative goal setting, which must include:

1.7.11.1.4. Development of a service plan incorporating Everyday Parenting sessions;

1.7.11.1.5. Referral and linkage to appropriate community-based resources; and

1.7.11.1.6. Identification and prioritization of the family's goals and service needs.

1.7.11.2. Following the initial session, within 30 business days, the Contractor's FCU Specialist must:

1.7.11.2.1. Conduct follow-up visits using strategies from the Everyday Parenting curriculum, tailored to the results of the family's assessments.

1.7.11.2.2. Ensure accurate and timely documentation in the FCH-DS and FCU online assessment tools, summarizing recommendations and next steps.

1.7.11.2.3. Review family goals and progress on a quarterly basis in collaboration with the family.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

1.7.11.2.4. Assess the family's readiness to change as part of ongoing engagement and service planning.

1.7.12. The Contractor must ensure the following:

1.7.12.1. Provide the Department with access to video-recorded family sessions to support monitoring of implementation and fidelity to the model, upon consent granted by the family in Section 1.7.3.4.

1.7.12.2. Provide the Department with a written policy regarding the use of video recording for the purpose of home visits. The Contractor must ensure all staff and subcontractors sign a confidentiality agreement and adhere to the confidentiality policy outlined in the written policy, and notify staff and subcontractors that violations may result in disciplinary action.

1.7.12.3. Obtain and document individual consent for all video-recorded sessions, including consent to share recordings with the Department for quality improvement purposes.

1.7.12.4. Ensure that appropriate equipment is available and maintained for home visitors to conduct video recordings, such as video camera, tablet, or other device with recording capabilities. The Contractor must ensure that staff does not use personal cell phones or other personal devices to conduct video recording.

1.7.13. The Contractor must only use marketing materials that have been reviewed and approved by the Department.

1.7.14. The Contractor must collaborate with the Department's CFS Program Manager, Quality Improvement and Training Coordinator, and FCU Model experts to ensure all readiness activities are completed prior to program implementation, including but not limited to:

1.7.14.1. Completion of FCU Model training.

1.7.14.2. Completion of Everyday Parenting Curriculum training.

1.7.14.3. Completion of Motivational Interviewing training.

1.7.14.4. Implementation of data collection processes, including a Department-approved participant post-survey.

1.7.14.5. Participation in monthly Supervisor Consultation, facilitated by the Department, to support implementation

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

and fidelity to the FCU model.

1.8. Staffing and Training

1.8.1. The Contractor must designate at least one (1) dedicated FCU Specialist position as part of the CFS home visiting program. The FCU Specialist must initially allocate a minimum of 20% of their workload to family enrollment and model implementation activities.

1.8.2. The Contractor must:

1.8.2.1. Ensure that all relevant staff participate in and complete these trainings as scheduled, and maintain documentation of completion for Department review.

1.8.2.2. Ensure that all relevant staff are trained in Motivational Interviewing.

1.8.2.3. Budget for additional staff development opportunities based on the needs of their team, as identified in collaboration with the Department's Quality Improvement and Training Coordinator.

1.8.3. The Contractor must ensure the FCU Specialist transitions to dedicating 100% of their workload to the implementation of the FCU model by June 30, 2027.

1.8.4. The Contractor may elect to designate more than one (1) FCU Specialist to implement the model during the first year of program implementation.

1.8.5. The Contractor must identify additional CFS staff to participate in being trained to implement the FCU model in year two and again in year three of program implementation, to support sustainability and build long-term capacity.

1.8.6. The Contractor must ensure all CFS home visitors complete Department provided training in and utilize the Everyday Parenting Curriculum and CFS Program Manual, which is:

1.8.6.1. The Everyday Parenting Manual, Everyday Parenting: A Professional's Guide to Building Family Management Skills (2nd edition). Available at www.researchpress.com

1.8.7. The Contractor must ensure all CFS home visitors are trained in core CFS competencies and collaborate with the Department's Continuous Quality Improvement (CQI) and training coordinator to implement a comprehensive staff training plan that ensures a qualified workforce and identifies training needs and gaps. CFS home visitors must complete Department provided training which will include at a minimum,

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Everyday Parenting and CFS onboarding training.

1.8.8. The Contractor must identify a qualified supervisor for the FCU staff be trained in the FCU model and be responsible for ensuring adherence to the model's implementation standards. The FCU supervisor must fulfill the following responsibilities:

1.8.8.1. Participate in monthly FCU supervisor consultation meetings, as scheduled by the Department, to enhance supervisory capacity and support fidelity monitoring of the FCU implementation.

1.8.8.2. The Contractor must ensure the FCU supervisor is trained and certified by Northwest Prevention Science as a FCU supervisor. The FCU supervisor must provide implementation support to FCU staff, including but not limited to individualized consultation, direct observation, and performance evaluation, to ensure fidelity to the model.

1.8.9. The Contractor must ensure that both the FCU specialist and FCU supervisor receive training in the Family Check-Up model, Motivational Interviewing, Newborn Navigation Core Training, and Everyday Parenting curriculum, and that they meet the minimum educational qualifications required for their roles.

1.8.10. The Contractor must use the FCU model, Motivational Interviewing and Everyday Parenting curriculum training to support effective implementation.

1.8.11. The Contractor must ensure that all staff, subcontractors, and volunteers undergo the required criminal background checks registry checks, as described in Section 1.12.

1.8.12. If the Contractor provides transportation for individuals served under this Agreement, the Contractor must ensure:

1.8.12.1. The enrolled parent or caregiver must be present for all sessions.

1.8.12.2. All drivers have a valid State Issued and a safe driving record;

1.8.12.2.1. All vehicles are approved by the Contractor and meet applicable safety standards;

1.8.12.2.2. Compliance with all applicable local, state, and federal transportation safety rules and standards;

1.8.12.2.3. Proof of valid automobile insurance is provided to the Department that includes bodily injury and

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

property damage in amounts of not less than $100,000 per occurrence and $300,000 aggregate or excess, for all owned, hired, or non-owned vehicles used to provide transportation.

1.8.13. The Contractor must ensure staff complete required training in the principles of family support, maternal and child health, HIPAA as well as the child welfare system, with concentrations in service array and working in multidisciplinary teams.

1.8.14. The Contractor must consistently engage in purposeful staff development activities that support professional growth and improve the quality of services provided. These activities must include, but are not limited to, training and enrichment in the following areas: Skills necessary to understand and respond to the unique needs, strengths, and resources of the families and communities served.

1.8.14.1. The ability to exercise empathy, with an understanding of the complex family dynamics and stressors experienced by parents and caregivers.

1.8.14.2. The use of effective, evidence-informed home visiting practices, including strategies that are grounded in research and adapted to family needs, as well as standards for documentation and reporting.

1.8.15. The Contractor must provide an adequate number of home visitors to implement the CFS program, as approved by the Department. All staffing vacancies, transitions, or changes in personnel assignments must be reported to the Department in a timely manner.

1.8.16. The Contractor must ensure the CFS program director, supervisor, or program managers have:

1.8.16.1. A Bachelor's degree in public health, early childhood, social work, human services administration, or a related field focused on supporting children and families, with four (4) years of experience working with families and children in a social service, home health, or other early childhood program setting, including supervisory experience;

1.8.16.2. An Associate degree with five (5) years of prior experience working with families and children in a social service, home health, or early childhood program setting, including supervisory experience;

1.8.16.3. Or at a minimum, high school diploma or equivalent with six (6) years of relevant lived and professional experience working with families and children in a social service, home

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

health, or other early childhood program setting, including supervisory responsibilities, and written approval from the Department to fulfill the duties of the position.

1.8.17. The Contractor must ensure CFS Home Visitors have:

1.8.17.1. An Associate degree with four (4) years of prior experience working with families and children in a social service, home health, or other early childhood program setting;

1.8.17.2. Or at a minimum, a high school diploma or equivalent with five (5) years of experience providing services to families in a social service, home health, or other early childhood program setting; and demonstrated lived and professional experience aligned with this role, with written approval from the Department.

1.8.18. The Contractor must ensure the CFS Family Check Up Home Visitor has at a minimum:

1.8.18.1. A Bachelor's degree or higher; and

1.8.18.2. Two (2) years of experience providing services to families in a social service, home health, or other early childhood program setting.

1.8.18.2.1. If a Bachelor's-level staff is not available, the Contractor may recommend qualified team members to perform FCU. A training plan and summary of relevant skills and clinical experience must be submitted with the application and approved by the Department.

1.8.19. The Contractor must ensure all CFS home visitors across all CFS programs are trained in the "Everyday Parenting" curriculum and Motivational Interviewing and adhere to its requirements within six (6) months of program implementation.

1.8.19.1. Although not required, the Contractor may allocate funding to train staff in additional evidence-based early childhood curricula, such as Growing Great Kids or Parents as Teachers.

1.8.20. The Contractor must demonstrate capacity and readiness to be trained in and implement the Family Check Up model.

1.8.21. Staffing requirements are subject to change, contingent upon the Department's written approval.

1.9. Reporting

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

1.9.1. The Contractor must submit comprehensive quarterly reports highlighting program activities by the 15th calendar day of the month following the end of each reporting period. The first report is due by October 15, 2026, and must include:

1.9.1.1. The progress in achieving the stated outcomes; and

1.9.1.2. Feedback from families regarding the effectiveness, accessibility, and satisfaction of the services provided through participant surveys or post service delivery interviews.

1.9.2. The Contractor must submit an annual performance report to the Department by July 31st of each year, with the first report due on July 31, 2027, which includes, but is not limited to:

1.9.2.1. A summary of program accomplishments and key activities.

1.9.2.2. Staff training plan for each CFS home visitor.

1.9.2.3. Recommendations for service development, program enhancements, and outcome improvements.

1.9.2.4. Identification of systemic barriers impacting service delivery or access.

1.9.2.5. Results of family satisfaction surveys and analysis of trends.

1.9.3. The Contractor must transmit all data in a secure and encrypted format approved by the Department.

1.9.4. The Contractor must designate an FRC staff member to serve as the primary liaison for all programmatic communication between the Department and the Contractor, including, but not limited to:

1.9.4.1. Clinical updates.

1.9.4.2. Program announcements.

1.9.4.3. Reporting changes, errors, and requests.

1.9.4.4. Contract oversight.

1.9.4.5. Oversight of program operations and compliance

1.9.5. The Contractor must evaluate both the progress of parents and caregivers and the effectiveness of the programs and services provided.

1.9.6. The Contractor must maintain a comprehensive and confidential Family Service Record for each family, in compliance with all Health Insurance Portability and Accountability Act (HIPAA) Privacy Rules. The Family Service Record must include, but is not limited to:

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

1.9.6.1. Participant names (Parent(s) and Child(ren)).

1.9.6.2. Participant DOBs (Parent (s) and Child(ren)).

1.9.6.3. Residence.

1.9.6.4. Primary language spoken in the home.

1.9.6.5. Educational level of parent(s) or guardian(s).

1.9.6.6. Digital Resources (phone, laptop, cell).

1.9.6.7. Source of referral.

1.9.6.8. Referral details and contact information.

1.9.6.9. Signed release of information form(s).

1.9.6.10. Household income.

1.9.6.11. Household size.

1.9.6.12. Employment status of parent(s) or guardian(s).

1.9.6.13. Access to prenatal and post-partum healthcare.

1.9.6.14. Home visits conducted and screening tools completed.

1.9.6.15. Topics reviewed during service delivery, including but not limited to:

1.9.6.15.1. Maternal depression screening.

1.9.6.15.2. Planning for future pregnancies.

1.9.6.15.3. Positive parenting practices.

1.9.6.15.4. Breastfeeding/lactation support.

1.9.6.15.5. Nutrition.

1.9.6.15.6. Child health.

1.9.6.15.7. Maternal health and self-care.

1.9.6.15.8. Referrals made for service linkage, including but not limited to:

1.9.6.15.9. Concrete supports (e.g., housing, utilities, transportation).

1.9.6.15.10. Childcare resources.

1.9.6.15.11. Healthcare access and coordination.

1.9.6.15.12. Community-based supports and services.

1.9.6.15.13. Home visiting programs and service type.

1.9.6.15.14. Discharge date and reason for discharge.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

1.9.6.15.15. Completion of post-service surveys.

1.9.6.15.16. Family needs assessment.

1.9.6.15.17. Child/Family Individualized Service Plan (ISP).

1.9.6.15.18. Documentation of prenatal and postpartum healthcare received.

1.9.6.15.19. Medicaid and other health insurance coverage.

1.9.6.15.20. Linkages with community-based resources.

1.9.6.16. Receipt of public benefits, including but not limited to:

1.9.6.16.1. SNAP.

1.9.6.16.2. New Hampshire Child Care Scholarship.

1.9.6.16.3. Medicaid.

1.9.6.16.4. Social Security Disability Insurance (SSDI).

1.9.6.16.5. Supplemental Security Income (SSI).

1.9.6.16.6. Temporary Assistance for Needy Families (TANF).

1.9.6.16.7. Special Supplemental Nutrition Program for WIC.

1.9.6.17. Participant service data, including but not limited to:

1.9.6.17.1. Date of service.

1.9.6.17.2. Participants present during service delivery.

1.9.6.17.3. Type of service provided and topics reviewed.

1.10. Performance Measures

1.10.1. The Contractor must provide performance data in a format and at a frequency specified by the Department. The following performance measures will be used to evaluate program effectiveness:

1.10.1.1. A minimum of 80% of participants must report a favorable rating on satisfaction surveys administered by the Contractor.

1.10.1.2. At least 70% of referred families must enroll in services within 30 days of referral.

1.10.1.3. A minimum of 65% of enrolled families must complete the full

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

service cycle as defined by the program model.

1.10.2. The Contractor must demonstrate annual improvement in outreach to high-risk populations, as measured by year-over-year increases in engagement rates.

1.10.3. The Contractor must submit data to support evaluation of long-term outcomes, including family stability, child health indicators, and service retention, as defined by the Department.

1.11. Meetings, Collaboration, and Data Sharing

1.11.1. The Contractor must participate in regular performance review meetings with the Department and peer providers to analyze data, share best practices, and identify areas for improvement.

1.11.2. The Contractor must collect and transmit all required data, including client-level demographic, service utilization, and outcome data, in a secure format specified by the Department.

1.11.3. The Contractor must participate in monthly check-in meetings and Communities of Practice (CoP) for the Department's Comprehensive Family Support (CFS) home visiting program, as scheduled by the Department. CoPs are structured, recurring gatherings of professionals and stakeholders involved in CFS to share best practices, address challenges, and support continuous quality improvement.

1.11.4. The Contractor must participate in monthly meetings with the Department, or as otherwise requested by the Department.

1.11.5. The Contractor may be required to participate in on-site program and file reviews conducted by the Department, as requested.

1.11.6. The Contractor must participate in monthly fidelity reviews of family sessions with the Department for the Family Check Up model.

1.11.7. The Contractor may be required to facilitate annual file reviews conducted by the Department, or as otherwise requested, which may include, but are not limited to:

1.11.7.1. Compliance and documentation standards.

1.11.7.2. Service Delivery alignment and model fidelity.

1.11.7.3. Verification of data entry and reporting accuracy.

1.11.8. The Contractor must ensure Family Service Records are accurately summarized and entered into the Department's Family and Community Health Data System (FCH-DS) in real time and must comply with the confidentiality provisions of RSA 170-G:8-a.

1.11.9. The Contractor must provide the Department with a list of staff (End

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Users, as defined in Exhibit D) who will be responsible for entering Family Service Record data into the FCH-DS.

1.11.10. The Contractor must notify the Department immediately, and no more than 24 hours of staff changes, to ensure access to the FCH-DS is removed in a timely manner.

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

1.11.12. The Contractor must utilize the Department's closed loop referral system, at an agreed upon start date, whenever applicable to the services they provide for referrals between health and/or human service providers within New Hampshire for referral management and client care coordination. Utilization includes inputting information and data as necessary into the Department's referral solution as part of the NH Care Connections Network to facilitate referrals to participating providers, signing required Network Participation Agreement(s), and obtaining a participant specific consent for services.

1.11.13. The Contractor must utilize the Department's admission, discharge, transfer, and shared care insights solution whenever applicable to the services they provide for client care coordination and management between health providers within New Hampshire. Utilization includes inputting information and data as necessary into the Department's admission, discharge, transfer, and shared care insights platform as part of the NH Care Connections Network to facilitate referrals to participating providers and signing required Participation Agreement(s) for the admission, discharge, transfer, and shared care insights solution

1.11.13.1. The Department's contracts with the closed loop referral and admission, discharge, and transfer vendors incorporate the costs of developing and maintaining the standards-based interface from which the Contractor may choose to configure their systems to communicate securely with the Department's NH Care Connections Network solutions. The Contractor may choose to interface with the Department's closed loop referral and/or the admission discharge transfer solution utilizing a Smart on FHIR or HL-7 standard interface process to connect individuals to health and social service providers. The costs for the Contractor's system or team to develop or utilize the standard Smart on FHIR or HL-7 based interface are the sole responsibility of the Contractor.

1.12. Background Checks

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

1.12.1. Prior to permitting any individual to provide services under this Agreement, the Contractor must ensure that said individual has undergone:

1.12.1.1. A criminal background check, at the Contractor's expense, and has no convictions for crimes that represent evidence of behavior that could endanger individuals served under this Agreement;

1.12.1.2. A name search of the Department's Bureau of Adult and Aging Services (BAAS) State Registry, pursuant to RSA 161-F:49, with results indicating no evidence of behavior that could endanger individuals served under this Agreement; and

1.12.1.3. A name search of the Department's DCYF Central Registry pursuant to RSA 169-C:35, with results indicating no evidence of behavior that could endanger individuals served under this Agreement.

1.13. Confidential Data

1.13.1. The Contractor must meet all information security and privacy requirements as set by the Department and in accordance with the Department's Information Security Requirements Exhibit as referenced below.

1.13.2. The Contractor must ensure any individuals involved in delivering services through this Agreement contract 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 Information Security Requirements Exhibit. The Contractor must ensure said individuals have a justifiable business need to access confidential data. The Contractor must provide attestations upon Department request.

1.14. Privacy Impact Assessment

1.14.1. Upon request, the Contractor must allow and assist the Department in conducting a Privacy Impact Assessment (PIA) of its system(s)/application(s)/web portal(s)/website(s) or Department system(s)/application(s)/web portal(s)/website(s) hosted by the Contractor, if Personally Identifiable Information (PII) is collected, used, accessed, shared, or stored. To conduct the PIA the Contractor must provide the Department access to applicable systems and documentation sufficient to allow the Department to assess, at

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

minimum, the following:

1.14.1.1. How PII is gathered and stored;

1.14.1.2. Who will have access to PII;

1.14.1.3. How PII will be used in the system;

1.14.1.4. How participant consent will be achieved and revoked; and

1.14.1.5. Privacy practices.

1.14.2. 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.

1.15. Department Owned Devices, Systems and Network Usage

1.15.1. Contractor End Users, defined in the Department's Information Security Requirements Exhibit that is incorporated into this Agreement, authorized by the Department's Information Security Office to use a Department issued device (e.g. computer, tablet, mobile telephone) or access the Department network in the fulfilment of this Agreement, each must:

1.15.1.1. Sign and abide by applicable Department and New Hampshire Department of Information Technology (NH DoIT) use agreements, policies, standards, procedures and guidelines, and complete applicable trainings as required;

1.15.1.2. Use the information that they have permission to access solely for conducting official Department business and agree that all other use or access is strictly forbidden including, but not limited, to personal or other private and non-Department use, and that at no time shall they access or attempt to access information without having the express authority of the Department to do so;

1.15.1.3. Not access or attempt to access information in a manner inconsistent with the approved policies, procedures, and/or agreement relating to system entry/access;

1.15.1.4. Not copy, share, distribute, sub-license, modify, reverse engineer, rent, or sell software licensed, developed, or being evaluated by the Department, and at all times must use utmost care to protect and keep such software strictly confidential in accordance with the license or any other agreement executed by the Department;

1.15.1.5. Only use equipment, software, or subscription(s) authorized by the Department's Information Security Office or

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

designee;

1.15.1.6. Not install non-standard software on any Department equipment unless authorized by the Department's Information Security Office or designee;

1.15.1.7. Agree that email and other electronic communication messages created, sent, and received on a Department-issued email system are the property of the Department of New Hampshire and to be used for business purposes only. Email is defined as "internal email systems" or "Department-funded email systems."

1.15.1.8. Agree that use of email must follow Department and NH DoIT policies, standards, and/or guidelines; and

1.15.1.9. Agree when utilizing the Department's email system:

1.15.1.9.1. To only use a Department email address assigned to them with a "@ affiliate.DHHS.NH.Gov".

1.15.1.9.2. Include in the signature lines information identifying the End User as a non-Department workforce member; and

1.15.1.9.3. Ensure the following confidentiality notice is embedded underneath the signature line:

CONFIDENTIALITY NOTICE: "This message may contain information that is privileged and confidential and is intended only for the use of the individual(s) to whom it is addressed. If you receive this message in error, please notify the sender immediately and delete this electronic message and any attachments from your system. Thank you for your cooperation."

1.15.1.10. Contractor End Users with a Department issued email, access or potential access to Confidential Data, and/or a workspace in a Department building/facility, must:

1.15.1.10.1. Complete the Department's Annual Information Security & Compliance Awareness Training prior to accessing, viewing, handling, hearing, or transmitting Department Data or Confidential Data.

1.15.1.10.2. Sign the Department's Business Use and Confidentiality Agreement and Asset Use Agreement, and the NH DoIT Department wide

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Computer Use Agreement upon execution of the Agreement and annually thereafter.

1.15.1.10.3. Only access the Department's intranet to view the Department's Policies and Procedures and Information Security webpages.

1.15.1.10.4. Contractor agrees, if any End User is found to be in violation of any of the above terms and conditions, said End User may face removal from the Agreement, and/or criminal and/or civil prosecution, if the act constitutes a violation of law.

1.15.1.10.5. Contractor agrees to notify the Department a minimum of three business days prior to any upcoming transfers or terminations of End Users who possess Department credentials and/or badges or who have system privileges. If End Users who possess Department credentials and/or badges or who have system privileges resign or are dismissed without advance notice, the Contractor agrees to notify the Department's Information Security Office or designee immediately.

1.16. Contract End-of-Life Transition Services

1.16.1. General Requirements

1.16.1.1. If applicable, upon early termination or expiration of the Agreement the parties agree to cooperate in good faith to effectuate a secure transition of the services ("Transition Services") from the Contractor to the Department and, if applicable, the new Contractor ("Recipient") engaged by the Department to assume the services. 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 Recipient to develop a Data Transition Plan (DTP). The Department shall provide the DTP template to the Contractor.

1.16.1.2. The Contractor must assist the Recipient, in connection with the transition from the performance of Services by the Contractor and its End Users 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

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

any 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 and assistance to any third-party consultants engaged by Recipient in connection with the Transition Services.

1.16.1.3. If a system, database, hardware, software, and/or software licenses (Tools) was purchased or created to manage, track, and/or store Department Data in relationship to this contract said Tools will be inventoried and returned to the Department, along with the inventory document, once transition of Department data is complete. The internal planning of the Transition Services by the Contractor and its End Users shall be provided to the Department and if applicable the Recipient in a timely manner. Any such Transition Services shall be deemed to be Services for purposes of this Agreement.

1.16.1.4. In the event the data Transition extend beyond the end of the Agreement, the Contractor agrees that the Information Security Requirements, and if applicable, the Department's Business Associate Agreement terms and conditions remain in effect until the Data Transition is accepted as complete by the Department.

1.16.1.5. In the event the Contractor has comingled Department Data and the destruction or Transition of said data is not feasible, the Department and Contractor will jointly evaluate regulatory and professional standards for retention requirements prior to destruction, refer to the terms and conditions of the Department's DHHS Information Security Requirements Exhibit.

1.17. Completion of Transition Services

1.17.1. Each service or transition phase shall be deemed completed (and the transition process finalized) at the end of fifteen (15) business days after the product, resulting from the Service, is delivered to the Department and/or the Recipient in accordance with the mutually agreed upon Transition plan, unless within said fifteen (15) business day term the Contractor notifies the Department of an issue requiring additional time to complete said product.

1.17.2. Once all parties agree the data has been migrated the Contractor will have thirty (30) days to destroy the data per the terms and conditions

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

of the Department's Information Security Requirements Exhibit.

1.18. Disagreement over Transition Services Results

1.18.1. In the event the Department is not satisfied with the results of the Transition Service, the Department shall notify the Contractor, in writing, stating the reason for the lack of satisfaction within fifteen (15) business days of the final product or at any time during the data Transition process. The Parties shall discuss the actions to be taken to resolve the disagreement or issue. If an agreement is not reached, at any time the Department shall be entitled to initiate actions in accordance with the Agreement.

2. Exhibits Incorporated

2.1. The Contractor must comply with all Exhibit D Federal Requirements, which are attached hereto and incorporated by reference herein.

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

2.3. 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 F, Business Associate Agreement, which has been executed by the parties.

3. Additional Terms

3.1. Impacts Resulting from Court Orders or Legislative Changes

3.1.1. 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.

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

3.2.1. The Contractor must submit:

3.2.1.1. A detailed description of the language assistance services, within ten (10) days of the Effective Date of the Agreement, 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

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

who have speech challenges.

3.2.1.2. A written attestation, within forty-five (45) days of the Effective Date of the Agreement and annually thereafter, that all personnel involved the provision of services to individuals under this Agreement have completed, within the last twelve (12) months, the Contractor Required Training Video on Civil Rights-related Provisions in DHHS Procurement Processes, which is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors); and

3.2.1.3. The Department's Federal Civil Rights Compliance Checklist within ten (10) days of the Effective Date of the Agreement. The Federal Civil Rights Compliance Checklist must have been completed within the last twelve (12) months and is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors).

3.3. Credits and Copyright Ownership

3.3.1. 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."

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

3.3.3. The Department must retain copyright ownership for any and all original materials produced, including, but not limited to reports, protocols, guidelines, brochures, posters, and resource directories.

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

3.4. Operation of Facilities: Compliance with Laws and Regulations

3.4.1. 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

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

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.

4. Records

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

4.1.1. 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.

4.1.2. 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.

4.2. 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.

4.3. If, upon further review, the Department must disallow any expenses claimed by the Contractor as costs hereunder, the Department retains the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

EXHIBIT C

Payment Terms

1. This Agreement is funded by:
   1.1. 73% Federal funds, TEMPORARY ASSISTANCE FOR NEEDY FAMILIES, as awarded on choose a date, December 16, 2025 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.558, FAIN 2601NHTANF.
   1.2. 16% Federal funds, SOCIAL SERVICES BLOCK GRANT, as awarded on choose a date, October 1, 2023 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.667, FAIN 2501NHSOSR.
   1.3. 11% General funds.

2. For the purposes of this Agreement the Department has identified:
   2.1. The Contractor as a Subrecipient, based on criteria specified in 2 CFR §200.331.
   2.2. The Agreement as NON-R&D, in accordance with 2 CFR §200.332.
   2.3. The Indirect Cost Rate for this Agreement in the attached Budget Sheet(s).

3. Payment shall be on a cost reimbursement basis for actual allowable expenditures incurred under this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1, Budget.

4. The Contractor shall submit an invoice 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:
   4.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.
   4.2. Is submitted in a format as provided by or otherwise acceptable to the Department.
   4.3. Identifies and requests payment in accordance with Section 3 above.
   4.4. Includes supporting documentation with each invoice, including, but not limited to, proof of expenditures, receipts for purchases, time sheets, and payroll records, as applicable.
   4.5. Is completed, dated and returned to the Department to initiate payment.
   4.6. Is assigned an electronic signature and is emailed to BFAinvoices@dhhs.nh.gov or mailed to:

   Financial Manager
   Department of Health and Human Services
   129 Pleasant Street

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Concord, NH 03301

5. The Department shall make payments to the Contractor within thirty (30) calendar days of receipt of each invoice and any required supporting documentation, subsequent to approval of the submitted invoice.

6. The final invoice and any required supporting documentation shall be due to the Department no later than forty (40) calendar days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.

7. Notwithstanding Paragraph 18 of the General Provisions Form P-37, changes limited to adjusting direct and indirect cost 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.

8. If applicable, the Contractor must notify the Department of any revisions, updates, or extensions to the Contractor's federal negotiated indirect cost rate agreement (NICRA) by submitting a copy of the revised NICRA to the Department within five (5) business days of the Contractor's receipt of the NICRA from the cognizant federal agency.

9. Audits

9.1. The Contractor must email an annual audit to dhhs.act@dhhs.nh.gov if any of the following conditions exist:

9.1.1. Condition A - The Contractor is subject to a Single Audit pursuant to 2 CFR 200.501 Audit Requirements.

9.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b.

9.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

9.2. If Condition A exists, the Contractor must 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.

9.2.1. The Contractor must submit a copy of any Single Audit findings and any associated corrective action plans. The Contractor

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

must submit quarterly progress reports on the status of implementation of the corrective action plan.

9.3. If Condition B or Condition C exists, the Contractor must submit an annual financial audit performed by an independent CPA within 120 days after the close of the Contractor's fiscal year.

9.4. The Contractor, regardless of the funding source and/or whether Conditions A, B, or C exist, may be required to submit annual financial audits performed by an independent CPA upon request by the Department.

9.5. 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 must 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, within sixty (60) days.

10. If applicable, the Contractor must request disposition instructions from the Department for any equipment, based on 2 CFR 200.313, purchased using funds provided under this Agreement.

Exhibit C-1 Budget

New Hampshire Department of Health and Human Services			
Contractor Name:	*Lakes Region Community Services Council*		
Budget Request for:	*Comprehensive Family Support (CFS)*		
Budget Period:	*7/1/2026 to 6/30/2029*		
Indirect Cost Rate (if applicable)	11.40%		
Line Item	**Program Cost - Funded by DHHS - SFY 27**	**Program Cost - Funded by DHHS - SFY 28**	**Program Cost - Funded by DHHS - SFY 29**
1. Salary & Wages	$279,163	$284,402	$292,534
2. Fringe Benefits	$86,122	$87,738	$90,247
3. Consultants	$0	$0	$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	$2,300	$750
5.(a) Supplies - Educational	$0	$0	$0
5.(b) Supplies - Lab	$0	$0	$0
5.(c) Supplies - Pharmacy	$0	$0	$0
5.(d) Supplies - Medical	$0	$0	$0
5.(e) Supplies - Office	$2,000	$1,000	$400
6. Travel	$6,253	$6,069	$6,073
7. Software	$0	$0	$0
8. (a) Other - Marketing/Communications	$0	$0	$0
8. (b) Other - Education and Training	$3,000	$2,500	$2,000
8. (c) Other - Other (specify below)	$0	$0	$0
Family Check Up/Online Training Portal (per staff)	$5,040	$3,120	$3,120
Other (please specify)	$0	$0	$0
Other (please specify)	$0	$0	$0
Other (please specify)	$0	$0	$0
Other (please specify)	$0	$0	$0
9. Subrecipient Contracts	$0	$0	$0
Total Direct Costs	$381,578	$387,129	$395,124
Total Indirect Costs	$43,473	$44,127	$44,996
Subtotals	$425,051	$431,256	$440,120
		TOTAL	**$ 1,296,427**

Initial

Contractor Initials: EP

Date: 5/11/2026

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

New Hampshire Department of Health and Human Services
Exhibit D – Federal Requirements

SECTION A: CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Contractor 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 CONTRACTORS 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 contractors (and by inference, sub- contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a contractor (and by inference, 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 Agreement 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 Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, 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 Contractor 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 Contractor'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 Contractor'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 Agreement 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 Agreement, 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;

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

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 contract officer on whose contract activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected Agreement;

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 Contractor may insert in the space provided below the site(s) for the performance of work done in connection with the specific Agreement.

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.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

SECTION B: CERTIFICATION REGARDING LOBBYING

The Contractor 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 Byrd Anti-Lobbying Amendment (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, loan, or cooperative agreement (and by specific mention 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, loan, or cooperative agreement (and by specific mention sub- contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, see https://omb.report/icr/201009-0348-022/doc/20388401

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, 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.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

SECTION C: 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 12689 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 Agreement, 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 Agreement 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 https://www.govinfo.gov/app/details/CFR-2004-title45-vol1/CFR-2004-title45-vol1-part76/context.

6. The prospective primary participant agrees by submitting this Agreement 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) https://www.ecfr.gov/current/title-22/chapter-V/part-513.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

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 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 (Agreement) 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 (Agreement), 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 (Agreement).

14. The prospective lower tier participant further agrees by submitting this proposal (Agreement) 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.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

SECTION D: CERTIFICATION OF COMPLIANCE WITH FEDERAL REQUIREMENTS

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:

The Contractor will comply, and will require any subcontractors to comply, with any applicable federal requirements, which may include but are not limited to:

1. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR 200).
2. 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;
3. 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;
4. 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);
5. 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;
6. 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;
7. 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;
8. 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;
9. 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;
10. 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.
11. The Clean Air Act (42 U.S.C. 7401-7671q.) which seeks to protect human health and the environment from emissions that pollute ambient, or outdoor, air.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

12. The Clean Water Act (33 U.S.C. 1251-1387) which establishes the basic structure for regulating discharges of pollutants into the waters of the United States and regulating quality standards for surface waters.
13. Civilian Agency Acquisition Council and the Defense Acquisition Regulations Council (Councils) (41 U.S.C. 1908) which establishes administrative, contractual, or legal remedies in instances where contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate.
14. Contract Work Hours and Safety Standards Act (40 U.S.C. 3701–3708) which establishes that all contracts awarded by the non-Federal entity in excess of $100,000 that involve the employment of mechanics or laborers must include a provision for compliance with 40 U.S.C. 3702 and 3704, as supplemented by Department of Labor regulations (29 CFR Part 5).
15. Rights to Inventions Made Under a Contract or Agreement 37 CFR § 401.2 (a) which establishes the recipient or subrecipient wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that “funding agreement,” the recipient or subrecipient must comply with the requirements of 37 CFR Part 401, “Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements,” and any implementing regulations issued by the awarding agency.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, or government wide suspension or debarment.

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 Agreement, the Contractor agrees to comply with the provisions indicated above.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

SECTION E: 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 Agreement, 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.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

SECTION F: 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 $30,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $30,000 or more. If the initial award is below $30,000 but subsequent grant modifications result in a total award equal to or over $30,000, 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 sub award 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 Entity Identifier (SAM UEI; DUNS#)
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.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

FORM A

As the Grantee 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: NA2DDE57DWR9

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: _____

Contractor Name: Lakes Region Community Services

5/11/2026
Date:

Signed by: Erin Pettengill
41B33C1651C1488...
Name: Erin Pettengill
Title: President and CEO

New Hampshire Department of Health and Human Services

Exhibit E

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

Contractor Initials Initial EP

Date 5/11/2026

or misplacement of hardcopy documents, and misrouting of physical or electronic 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.

Contractor Initials Initial EP

Date 5/11/2026

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.

Contractor Initials Initial EP

Date 5/11/2026

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, antihacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a whole, must have aggressive intrusion-detection and firewall protection.

Contractor Initials Initial EP

Date 5/11/2026

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

Date 5/11/2026

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

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.

Contractor Initials Initial EP

Date 5/11/2026

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;

Contractor Initials Initial EP

Date 5/11/2026

4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and
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

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement (Form P-37) ("Agreement"), and any of its agents who receive use or have access to protected health information (PHI), as defined herein, shall be referred to as the "Business Associate." The State of New Hampshire, Department of Health and Human Services, "Department" shall be referred to as the "Covered Entity," The Contractor and the Department are collectively referred to as "the parties."

The parties agree, to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191, the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162, and 164 (HIPAA), provisions of the HITECH Act, Title XIII, Subtitle D, Parts 1&2 of the American Recovery and Reinvestment Act of 2009, 42 USC 17934, et sec., applicable to business associates, and as applicable, to be bound by the provisions of the Confidentiality of Substance Use Disorder Patient Records, 42 USC s. 290 dd-2, 42 CFR Part 2, (Part 2), as any of these laws and regulations may be amended from time to time.

(1) Definitions

a. The following terms shall have the same meaning as defined in HIPAA, the HITECH Act, and Part 2, as they may be amended from time to time:

"Breach," "Designated Record Set," "Data Aggregation," Designated Record Set," "Health Care Operations," "HITECH Act," "Individual," "Privacy Rule," "Required by law," "Security Rule," and "Secretary."

b. Business Associate Agreement, (BAA) means the Business Associate Agreement that includes privacy and confidentiality requirements of the Business Associate working with PHI and as applicable, Part 2 record(s) on behalf of the Covered Entity under the Agreement.

c. "Constructively Identifiable," means there is a reasonable basis to believe that the information could be used, alone or in combination with other reasonably available information, by an anticipated recipient to identify an individual who is a subject of the information.

d. "Protected Health Information" ("PHI") as used in the Agreement and the BAA, means protected health information defined in HIPAA 45 CFR 160.103, limited to the information created, received, or used by Business Associate from or on behalf of Covered Entity, and includes any Part 2 records, if applicable, as defined below.

e. "Part 2 record" means any patient "Record," relating to a "Patient," and "Patient Identifying Information," as defined in 42 CFR Part 2.11.

f. "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.

(2) Business Associate Use and Disclosure of Protected Health Information

a. Business Associate shall not use, disclose, maintain, store, or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under the Agreement. Further, Business Associate, including but not

limited to all its directors, officers, employees, and agents, shall protect any PHI as required by HIPPA and 42 CFR Part 2, and not use, disclose, maintain, store, or transmit PHI in any manner that would constitute a violation of HIPAA or 42 CFR Part 2.

b. Business Associate may use or disclose PHI, as applicable:

I. For the proper management and administration of the Business Associate;

II. As required by law, according to the terms set forth in paragraph c. and d. below;

III. According to the HIPAA minimum necessary standard;

IV. For data aggregation purposes for the health care operations of the Covered Entity; and

V. Data that is de-identified or aggregated and remains constructively identifiable may not be used for any purpose outside the performance of the Agreement.

c. To the extent Business Associate is permitted under the BAA or the Agreement to disclose PHI to any third party or subcontractor prior to making any disclosure, the Business Associate must obtain, a business associate agreement or other agreement with the third party or subcontractor, that complies with HIPAA and ensures that all requirements and restrictions placed on the Business Associate as part of this BAA with the Covered Entity, are included in those business associate agreements with the third party or subcontractor.

d. The Business Associate shall not, disclose any PHI in response to a request or demand for disclosure, such as by a subpoena or court order, on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity can determine how to best protect the PHI. If Covered Entity objects to the disclosure, the Business Associate agrees to refrain from disclosing the PHI and shall cooperate with the Covered Entity in any effort the Covered Entity undertakes to contest the request for disclosure, subpoena, or other legal process. If applicable relating to Part 2 records, the Business Associate shall resist any efforts to access part 2 records in any judicial proceeding.

(3) Obligations and Activities of Business Associate

a. Business Associate shall implement appropriate safeguards to prevent unauthorized use or disclosure of all PHI in accordance with HIPAA Privacy Rule and Security Rule with regard to electronic PHI, and Part 2, as applicable.

b. The Business Associate shall immediately notify the Covered Entity's Privacy Officer at the following email address, DHHSPrivacyOfficer@dhhs.nh.gov after the Business Associate has determined that any use or disclosure not provided for by its contract, including any known or suspected privacy or security incident or breach has occurred potentially exposing or compromising the PHI. This includes inadvertent or accidental uses or disclosures or breaches of unsecured protected health information.

c. In the event of a breach, the Business Associate shall comply with the terms of this Business Associate Agreement, all applicable state and federal laws and regulations and any additional requirements of the Agreement.

d. The Business Associate shall perform a risk assessment, based on the information available at the time it becomes aware of any known or suspected privacy or

Contractor Initials EP

Date 5/11/2026

security breach as described above and communicate the risk assessment to the Covered Entity. The risk assessment shall include, but not be limited to:

I. The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;

II. The unauthorized person who accessed, used, disclosed, or received the protected health information;

III. Whether the protected health information was actually acquired or viewed; and

IV. How the risk of loss of confidentiality to the protected health information has been mitigated.

e. The Business Associate shall complete a risk assessment report at the conclusion of its incident or breach investigation and provide the findings in a written report to the Covered Entity as soon as practicable after the conclusion of the Business Associate's investigation.

f. 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 US Secretary of Health and Human Services for purposes of determining the Business Associate's and the Covered Entity's compliance with HIPAA and the Privacy and Security Rule, and Part 2, if applicable.

g. Business Associate shall require all of its business associates that receive, use or have access to PHI under the BAA to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein.

h. Within ten (10) 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 BAA and the Agreement.

i. 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.

j. 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.

k. Business Associate shall document any disclosures of PHI and information related to any 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.

l. 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

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

accordance with 45 CFR Section 164.528.

m. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within five (5) 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.

n. Within thirty (30) 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-ups of such PHI in any form or platform.

VI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, or if retention is governed by state or federal law, 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 as long as the Business 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 post a current version of the Notice of the Privacy Practices on the Covered Entity's website:

https://www.dhhs.nh.gov/oos/hipaa/publications.htm in accordance with 45 CFR Section 164.520.

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 BAA, 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 of Agreement for Cause

a. In addition to the General Provisions (P-37) of the Agreement, the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a material breach by Business Associate of the Business Associate Agreement. 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.

(6) Miscellaneous

a. Definitions, Laws, and Regulatory References. All laws and regulations used,

Initial EP

Contractor Initials _____

5/11/2026

Date _____

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

herein, shall refer to those laws and regulations as amended from time to time. A reference in the Agreement, as amended to include this Business Associate Agreement, to a Section in HIPAA or 42 Part 2, means the Section as in effect or as amended.

b. **Change in law** - Covered Entity and Business Associate agree to take such action as is necessary from time to time for the Covered Entity and/or Business Associate to comply with the changes in the requirements of HIPAA, 42 CFR Part 2 other 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 BAA and the Agreement shall be resolved to permit Covered Entity and the Business Associate to comply with HIPAA and 42 CFR Part 2.

e. **Segregation** - If any term or condition of this BAA 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 BAA are declared severable.

f. **Survival** - Provisions in this BAA regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the BAA in section (3) g. and (3) n.l., and the defense and indemnification provisions of the General Provisions (P-37) of the Agreement, shall survive the termination of the BAA.

IN WITNESS WHEREOF, the parties hereto have duly executed this Business Associate Agreement.

Department of Health and Human Services	Lakes Region Community Services
The State	Name of the Contractor
DocuSigned by: Iain Watt D778BB63F9704C7...	Signed by: Erin Pettengill 41B33C1651C1489...
Signature of Authorized Representative	Signature of Authorized Representative
Iain Watt	Erin Pettengill
Name of Authorized Representative	Name of Authorized Representative
Director - DPH	President and CEO
Title of Authorized Representative	Title of Authorized Representative
5/12/2026	5/11/2026
Date	Date

Contractor Initials: Initial EP

Date: 5/11/2026

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

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 LAKES REGION COMMUNITY SERVICES COUNCIL is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on July 29, 1975. 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: **64109**
Certificate Number: **0007901776**

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 7th day of April A.D. 2026.

David M. Scanlan
Secretary of State

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

CERTIFICATE OF AUTHORITY

I, Kirk Beattie, hereby certify that:
(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Clerk/Secretary/Officer of Lakes Region Community Services Council.
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on May 4, 2026, at which a quorum of the Directors/shareholders were present and voting.
(Date)

VOTED: That Erin Pettengill, President and CEO (may list more than one person)
(Name and Title of Contract Signatory)

is duly authorized on behalf of Lakes Region Community Services Council to enter into contracts or agreements with the State
(Name of Corporation/ LLC)

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: 5/6/2026

Signature of Elected Officer
Name: Kirk Beattie
Title: Vice President

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Client#: 1042747 LAKESREG5

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 2/03/2026

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: Elizabeth Prindiville	
USI Insurance Services LLC 12 Gill Street Suite 5500 Woburn, MA 01801 855 874-0123	PHONE (A/C, No, Ext): 855 874-0123	FAX (A/C, No): 781-376-5035
	E-MAIL ADDRESS: ElizabethPrindiville@usi.com	

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Philadelphia Insurance Company	32204
INSURER B : Philadelphia Indemnity Insurance Co.	18058
INSURER C : Granite State workers Compensation	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Lakes Region Community Services Council
PO Box 509
Laconia, NH 03247

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 PRO-JECT LOC OTHER:			PHPK2572217005	07/01/2025	07/01/2026	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 $20,000 $1,000,000 $3,000,000 $3,000,000 $
B	AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY SCHEDULED AUTOS X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY			PHPK2572210005	07/01/2025	07/01/2026	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 $10000			PHUB870671005	07/01/2025	07/01/2026	EACH OCCURRENCE AGGREGATE 	$5,000,000 $5,000,000 $
C	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		P01119GSWCMT2026	01/01/2026	01/01/2027	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	Abuse			PHPK2572217005	07/01/2025	07/01/2026	1,000,000 / 3,000,000	
A	Professional			PHPK2572217005	07/01/2025	07/01/2026	1,000,000 / 3,000,000	

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

CERTIFICATE HOLDER

State of New Hampshire
Department of Health & Human Services
129 Pleasant Street
Concord, NH 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

© 1988-2015 ACORD CORPORATION. All rights reserved.

The ACORD name and logo are registered marks of ACORD

PDNZP

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

NONPROFIT COVER SHEET

A. Entity Name: Lakes Region Community Services Council

B. Entity's Contact Information:

For Records Requests (e.g., resumes of key personnel; audited financial statements):

Name / Phone / Email: Alyssa Tandy/603-581-1577/alyssa.tandy@lrcs.org

Person responsible for Accuracy and Completeness of information provided:
Name: Alyssa Tandy Title: Director of the FRC of Central NH
Signature: Alyssa Tandy

C. List Board of Directors and Affiliations

Name (Identify any additional role(s) in Parentheses) E.g., John Doe (President)	Affiliations
Jeanin Onos (President)	Local Business Owner
Lynn Hilbrunner (Vice President)	NH Veteran's Home
Kirk Beattie (Treasurer)	City Manager of Laconia
Randy Perkins (Secretary)	Retired
Carrie Chase (Past Board President)	Postal Worker in Meredith
Gary Lemay (At-Large)	NH Electric Coop
Margaret Selig (At-Large)	Retired
Richard Crocker	Retired; former LRCS Executive Director
R. Stuart Wallace	Professor at NHTI Community College
Thomas Costigan Jr.	Speare Memorial Hospital, Plymouth
Kurt Christensen	Consumer
Eric Adams	Laconia Police Department: Detective
Matthew Canfield, *Director Emeritus*	Laconia Police Department: Police Chief

D. List Key Personnel (Resumes must be available upon request to the person(s) listed in section B or may be attached**):**

Name	Role	Annual Salary	Amount Paid From This Contract
Ashley Bissell	Family Support Specialist	$46,800	$46,800
Bethany Miller	Family Support Specialist	$46,800	$30,420
Amanda Houle	Family Support Specialist	$46,800	$46,800
Carol Stone	Newborn Navigator	$50,700	$44,109
Tricia Tousignant	Parent Education Manager	$51,305	$27,191.65
Alyssa Tandy	Director of FRC	$80,009	$21,602.43
Cierra Lloyd	CFSS Manager	$55,575	$48,350.25
Jennifer Nelson	Administrative Assistant	$44,850	$8,521.50

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Ruth Fisher	Family Aide	$31,200	$31,200

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

DISCLOSURE OF LEGAL ACTIVITIES INVOLVING THE STATE OF NEW HAMPSHIRE OR ANOTHER GOVERNMENT ENTITY

E. Check one of the following:

[X] The entity is **not currently or has not been** party to any legal proceeding involving the State of New Hampshire (or any agency or subdivision thereof) or any other state/federal government entity before any adjudicative body in any jurisdiction **OR**

[ ] The entity is or has been party to one or more legal proceedings as set forth above. Identify the jurisdiction, court or other adjudicative body, case number, and briefly describe the nature of the proceeding (Attached extra sheet if necessary).

CHARITABLE TRUSTS UNIT COMPLIANCE CERTIFICATION

F. Check one of the following:

[X] is registered and in good standing with the New Hampshire Department of Justice Charitable Trusts Unit (** see note below) **or** has submitted a complete application for registration to the Charitable Trusts Unit and is awaiting a registration determination **OR**

[ ] is not required to register with the Charitable Trusts Unit because it is neither tax-exempt under section 501(c)(3) of the Internal Revenue Code nor engages in charitable solicitations in the State of New Hampshire **OR**

[ ] is exempt from registration with the Charitable Trusts Unit because it is a federal or state government, agency, or subdivision or is a religious organization, an integrated auxiliary of a religious organization, or is a convention or association of churches.

** Note: Attached screen shot from the DOJ Registered Charities List found at:

https://mm.nh.gov/files/uploads/doj/remote-docs/registered-charities.pdf

2526	Lakes Region Child Care Services, Inc.	22 Strafford Street, Unit 4	Laconia	NH	03247	X	11/15/2020
1573	Lakes Region Community Services Council	719 North Main Street, PO Box 509	Laconia	NH	03247	G	5/15/2026

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

FINANCIAL DISCLOSURES

G. Check one the following:

[X] The organization hired an outside firm to audit its financial statements or to prepare GAAP-compliant financial statements for its most recently completed fiscal year. If so, please ensure that the financial statements and audit results are available to be requested from the contact listed on Page 1 (audited financials may be attached) **OR**

[ ] The above does not apply, but the organization filed an IRS Form 990 or Form 990-EZ for its most recently completed fiscal year. Please attach that IRS Form 990 or Form 990-EZ to the submission. (Form 990 Schedule B is not required) **OR**

[ ] ***If neither of the above apply***, complete the Income Statement and Balance Sheet below with the following basic financial information from the organization's most recently completed fiscal year:

1. INCOME STATEMENT

Revenue		Expenses	
Grants	$	*Compensation of officers, directors, and key personnel*	$
Donations	$		
Program Services Revenue	$	*Other salaries & wages*	$
Interest & Dividends	$	*Payroll taxes & employee benefits*	$
All other Revenue	$	*Occupancy, rent, utilities, and insurance*	$
Total Revenue	$	*Printing, publications, postage, office supplies, and IT*	$
		All other expenses	$
		Total Expenses	$

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

2. BALANCE SHEET

Assets		Liabilities	
Cash & Equivalents	$	*Accounts Payable*	$
Investments	$	*Loans Payable*	$
Real Estate (less any depreciation)	$	*All other liabilities*	$
Other Property & Equipment (less any depreciation)	$	Total Liabilities	$
Pledges, grants, accounts receivable	$		
All other assets	$		
Total Assets	$		

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

LAKES REGION COMMUNITY SERVICES

Engage. Empower. Inspire.

Mission Statement

Dedicated to serving the community by promoting independence, dignity and opportunity.

Value Statements

As individuals and as a community agency, we:

- Value all people;
- Value a team approach in all we do;
- Value and respect one another;
- Value our relationships in the communities in which we live and work;
- Value our role as facilitators of relationships; and
- Value and recognize that our relationships evolve, grow, and change over time.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Financial Statements

LAKES REGION COMMUNITY SERVICES COUNCIL, INC.

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

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

LAKES REGION COMMUNITY SERVICES COUNCIL, INC.

FOR THE YEARS ENDED JUNE 30, 2024 AND 2023

TABLE OF CONTENTS

	Page(s)
Independent Auditors' Report	1 - 3
Financial Statements:	
Statements of Financial Position	4
Statement of Activities	5
Statement of Functional Expenses	6 - 8
Statements of Cash Flows	9
Notes to Financial Statements	10 - 20
Supplementary Information:	
Schedule of Functional Revenues	21 - 23
Schedule of Expenditures of Federal Awards	24
Notes to Schedule of Expenditures of Federal Awards	25
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	26 - 27
Independent Auditors' Report on Compliance for Each Major Program and on Internal Control over Compliance Required by Uniform Guidance	28 - 30
Schedule of Findings and Questioned Costs	31

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Leone, McDonnell & Roberts
Professional Association
CERTIFIED PUBLIC ACCOUNTANTS
DOVER • WOLFEBORO
NORTH CONWAY

INDEPENDENT AUDITORS' REPORT

To the Board of Directors of
Lakes Region Community Services Council, Inc.

Opinion

We have audited the accompanying financial statements of Lakes Region Community Services Council, Inc. (a nonprofit organization), which comprise the statements of financial position as of June 30, 2024 and 2023, and the related statements of cash flows, and notes to the financial statements for the years then ended, and the related statements of activities and functional expenses for the year ended June 30, 2024.

In our opinion, the financial statements present fairly, in all material respects, the financial position of Lakes Region Community Services Council, Inc. as of June 30, 2024 and 2023, and the changes in its cash flows for the years then ended, and the changes in its net assets for the year ended June 30, 2024 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 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 Lakes Region Community Services Council, Inc. 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 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 misstatements, 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 Lakes Region Community Services Council, Inc.'s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

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 Lakes Region Community Services Council, 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 Lakes Region Community Services Council, 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.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedule of functional revenues on pages 21-23 is presented for purposes of additional analysis and is not a required part of the financial statements. 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 functional revenues and 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 December 13, 2024, on our consideration of Lakes Region Community Services Council, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is 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 Lakes Region Community Services Council, 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 Lakes Region Community Services Council, Inc.'s internal control over financial reporting and compliance.

Report on Summarized Comparative Information

We have previously audited the Lakes Region Community Services Council, Inc.'s June 30, 2023 financial statements, and we expressed an unmodified opinion on those audited financial statements in our report dated January 15, 2024. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2023, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Leone McDonnell & Roberts,
Professional Association

Wolfeboro, New Hampshire
December 13, 2024

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

LAKES REGION COMMUNITY SERVICES COUNCIL, INC.

STATEMENTS OF FINANCIAL POSITION
JUNE 30, 2024 AND 2023

ASSETS

	2024	2023
CURRENT ASSETS		
Cash and cash equivalents	$ 1,537,502	$ 4,641,758
Certificates of deposit	-	303,154
Accounts receivable:		
Medicaid	4,928,387	2,241,781
Other, net of allowance for doubtful accounts of $50,000 at June 30, 2024 and 2023	691,602	261,160
Prepaid expenses	9,912	31,675
Total current assets	7,167,403	7,479,528
PROPERTY AND EQUIPMENT, NET	2,927,261	3,135,440
OTHER ASSETS		
Due from affiliates, net	24,631	197,428
Deposits	28,375	35,779
Right-of-use asset, operating	286,503	158,675
Total other assets	339,509	391,882
Total assets	$ 10,434,173	$ 11,006,850

LIABILITIES AND NET ASSETS

CURRENT LIABILITIES		
Accounts payable	$ 804,043	$ 1,436,341
Due to State of NH	2,095,341	-
Current portion of operating lease liability	90,232	70,115
Accrued salaries, wages, and related expenses	337,326	272,611
Accrued earned time	353,991	323,901
Refundable advances	352,200	814,106
Other accrued expenses	91,395	92,360
Total current liabilities	4,124,528	3,009,434
LONG-TERM LIABILITIES		
Operating lease liability, net of current portion shown above	196,271	88,560
Total liabilities	4,320,799	3,097,994
NET ASSETS		
Without donor restrictions	5,062,411	6,807,730
With donor restrictions	1,050,963	1,101,126
Total net assets	6,113,374	7,908,856
Total liabilities and net assets	$ 10,434,173	$ 11,006,850

See Notes to Financial Statements

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

LAKES REGION COMMUNITY SERVICES COUNCIL, INC.

STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2024
WITH PRIOR YEAR SUMMARIZED COMPARATIVE INFORMATION

	Without Donor Restrictions	With Donor Restrictions	2024	2023
CHANGES IN NET ASSETS				
Revenues				
Program fees	$ 1,379,858	$ -	$ 1,379,858	$ 1,521,510
Medicaid	18,900,661	-	18,900,661	26,006,636
Client resources	81,231	-	81,231	152,485
Public support	510,925	-	510,925	740,362
Private foundations	148,193	-	148,193	84,532
Production/service income	87,052	-	87,052	86,290
Investment	54,087	-	54,087	41,091
State of New Hampshire - DDS	583,473	-	583,473	1,359,148
Management fees	54,400	-	54,400	54,400
Other	2,303,446	-	2,303,446	1,509,606
Total revenues	24,103,326	-	24,103,326	31,556,060
Expenses				
Program services				
Service coordination	1,343,756	-	1,343,756	1,399,564
Day programs	2,261,923	-	2,261,923	2,281,985
Early intervention	844,699	-	844,699	764,001
Enhanced family care	4,248,859	-	4,248,859	3,756,282
Community options	141,210	-	141,210	162,093
Community residences	6,963,339	-	6,963,339	13,480,316
Transportation	44,119	-	44,119	40,850
Family support	5,640,131	-	5,640,131	5,560,738
Other programs	1,302,230	-	1,302,230	1,638,198
Supporting activities				
General management	2,843,485	50,163	2,893,648	2,239,490
Fundraising	214,894	-	214,894	211,552
Total expenses	25,848,645	50,163	25,898,808	31,535,069
CHANGE IN NET ASSETS	(1,745,319)	(50,163)	(1,795,482)	20,991
NET ASSETS, BEGINNING OF YEAR	6,807,730	1,101,126	7,908,856	7,887,865
NET ASSETS, END OF YEAR	$ 5,062,411	$ 1,050,963	$ 6,113,374	$ 7,908,856

See Notes to Financial Statements

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2024
WITH PRIOR YEAR SUMMARIZED COMPARATIVE INFORMATION

	Service Coordination	Day Programs	Early Intervention	Enhanced Family Care	Community Options
PERSONNEL COSTS					
Salaries and wages	$ 894,131	$ 1,307,849	$ 589,185	$ 231,809	$ 98,091
Employee benefits	223,697	325,632	149,257	58,413	24,368
Payroll taxes	66,324	98,897	43,172	16,863	6,920
PROFESSIONAL FEES AND CONSULTATIONS					
Client treatment & therapies	26,081	-	-	3,900,570	-
Clerical contracted staff	-	-	-	-	-
Accounting/auditing	-	-	-	-	-
Legal	42,827	-	-	-	-
Subcontract services	-	-	16,489	-	-
Other professional fees	23,631	40,400	-	-	-
STAFF DEVELOPMENT AND TRAINING					
Journals and publications	-	-	-	383	-
Conference/conventions	303	-	-	-	-
Other staff development	3,172	24,154	559	-	-
OCCUPANCY COSTS					
Rent	-	85,040	-	-	-
Mortgage payments	-	-	-	-	-
Utilities	-	6,289	-	-	-
Repairs and maintenance	-	265	-	975	-
Other occupancy costs	35,285	31,517	28,500	11,547	2,551
CONSUMABLE SUPPLIES					
Office supplies and equipment under $2,500	2,326	6,845	1,495	690	173
Building/household	-	481	-	-	-
Client	1,322	4,136	-	8,908	-
Medical supplies	-	-	-	96	-
ASSISTANCE TO INDIVIDUALS	3,920	-	-	-	-
PRODUCT SALES	-	7,159	-	-	-
EQUIPMENT RENTAL	-	-	-	-	-
EQUIPMENT MAINTENANCE	-	-	-	-	-
DEPRECIATION	-	4,171	-	-	-
ADVERTISING	-	151	63	2,001	-
PRINTING	-	-	-	2,070	-
TELEPHONE	380	7,943	-	46	-
POSTAGE	27	-	-	-	-
TRANSPORTATION	15,087	243,631	15,979	14,021	9,107
INSURANCE	-	-	-	-	-
MEMBERSHIP DUES	110	8,886	-	-	-
CLIENT PAYMENTS	-	52,311	-	-	-
LOSS ON DISPOSAL	-	-	-	-	-
OTHER	5,133	6,166	-	467	-
TOTAL FUNCTIONAL EXPENSES	$ 1,343,756	$ 2,261,923	$ 844,699	$ 4,248,859	$ 141,210

See Notes to Financial Statements

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2024
WITH PRIOR YEAR SUMMARIZED COMPARATIVE INFORMATION

	Community Residences	Family Support	Transportation	Other DDS	General Management
PERSONNEL COSTS					
Salaries and wages	$ 4,135,262	$ 1,421,943	$ 25,791	$ -	$ 1,508,441
Employee benefits	748,840	351,275	6,664	-	391,765
Payroll taxes	248,119	105,271	1,944	-	111,482
PROFESSIONAL FEES AND CONSULTATIONS					
Client treatment & therapies	313,618	2,867,283	-	-	-
Clerical contracted staff	-	-	-	-	24,826
Accounting/auditing	-	-	-	-	123,105
Legal	-	-	-	-	6,077
Subcontract services	413,155	580,319	-	-	-
Other professional fees	1,749	1,013	-	-	139,893
STAFF DEVELOPMENT AND TRAINING					
Journals and publications	-	-	-	-	66
Conference/conventions	-	-	-	-	4,507
Other staff development	-	1,125	-	-	33,125
OCCUPANCY COSTS					
Rent	189,163	-	-	-	-
Mortgage payments	-	-	-	-	-
Utilities	123,792	270	-	-	53,945
Repairs and maintenance	151,132	-	-	-	127,682
Other occupancy costs	279,077	19,249	-	-	(351,734)
CONSUMABLE SUPPLIES					
Office supplies and equipment under $2,500	77,783	118	-	-	32,606
Building/household	24,275	-	-	-	598
Client	108,530	3,949	-	-	11,512
Medical supplies	7,242	163	-	-	-
ASSISTANCE TO INDIVIDUALS	2,655	35,291	-	-	47
PRODUCT SALES	-	-	-	-	-
EQUIPMENT RENTAL	-	-	-	-	24,629
EQUIPMENT MAINTENANCE	6,038	-	-	-	57,047
DEPRECIATION	8,551	-	7,986	-	224,369
ADVERTISING	938	37	-	-	29,060
PRINTING	-	-	-	-	4,182
TELEPHONE	6,509	-	-	-	50,519
POSTAGE	-	-	-	-	20,662
TRANSPORTATION	83,297	194,608	1,704	-	6,730
INSURANCE	-	-	-	-	124,616
MEMBERSHIP DUES	2,500	55,298	-	-	57,664
CLIENT PAYMENTS	1,190	-	30	-	4,509
LOSS ON DISPOSAL	26,894	-	-	-	-
OTHER	3,030	2,919	-	-	71,718
TOTAL FUNCTIONAL EXPENSES	$ 6,963,339	$ 5,640,131	$ 44,119	$ -	$ 2,893,648

See Notes to Financial Statements

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

LAKES REGION COMMUNITY SERVICES COUNCIL, INC.

STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2024
WITH PRIOR YEAR SUMMARIZED COMPARATIVE INFORMATION

	Fundraising	Total DDS Funded	Total Non-DDS Funded	2024 Totals	2023 Totals
PERSONNEL COSTS					
Salaries and wages	$ 147,551	$ 10,360,053	$ 803,173	$ 11,163,226	$ 10,720,845
Employee benefits	36,680	2,316,591	200,606	2,517,197	2,405,983
Payroll taxes	11,016	710,008	60,576	770,584	831,285
PROFESSIONAL FEES AND CONSULTATIONS					
Client treatment & therapies	-	7,107,552	24,724	7,132,276	6,575,500
Clerical contracted staff	-	24,826	54	24,880	-
Accounting/auditing	-	123,105	-	123,105	121,770
Legal	-	48,904	-	48,904	71,868
Subcontract services	-	1,009,963	47,581	1,057,544	8,022,466
Other professional fees	980	207,666	495	208,161	236,724
STAFF DEVELOPMENT AND TRAINING					
Journals and publications	-	449	-	449	597
Conference/conventions	2,364	7,174	8,608	17,337	21,706
Other staff development	-	62,135	-	60,580	32,568
OCCUPANCY COSTS					
Rent	-	274,203	-	274,203	245,307
Mortgage payments	-	-	-	-	(1,573)
Utilities	-	184,296	-	184,296	175,690
Repairs and maintenance	-	280,054	-	280,054	193,688
Other occupancy costs	4,608	60,600	93,152	153,752	83,173
CONSUMABLE SUPPLIES					
Office supplies and equipment under $2,500	524	122,560	7,715	130,275	77,675
Building/household	-	25,354	135	25,489	26,756
Client	-	138,357	8,611	146,968	150,373
Medical supplies	-	7,501	109	7,610	4,001
ASSISTANCE TO INDIVIDUALS	-	41,913	8,963	50,876	62,426
PRODUCT SALES	-	7,159	-	7,159	12,356
EQUIPMENT RENTAL	-	24,629	-	24,629	21,993
EQUIPMENT MAINTENANCE	-	63,085	-	63,085	34,472
DEPRECIATION	-	245,077	-	245,077	223,575
ADVERTISING	1,484	33,734	485	34,219	36,809
PRINTING	6,315	12,567	46	12,613	7,039
TELEPHONE	-	65,397	-	65,397	69,649
POSTAGE	19	20,708	44	20,752	20,342
TRANSPORTATION	-	584,164	30,075	614,239	636,000
INSURANCE	-	124,616	-	124,616	113,760
MEMBERSHIP DUES	1,089	125,547	3,550	129,097	144,477
CLIENT PAYMENTS	-	58,040	1,339	59,379	52,815
LOSS ON DISPOSAL	-	26,894	-	26,894	-
OTHER	2,264	91,697	2,189	93,886	102,954
TOTAL FUNCTIONAL EXPENSES	$ 214,894	$ 24,596,578	$ 1,302,230	$ 25,898,808	$ 31,535,069

See Notes to Financial Statements

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

LAKES REGION COMMUNITY SERVICES COUNCIL, INC.

STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED JUNE 30, 2024 AND 2023

	2024	2023
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	$ (1,795,482)	$ 20,991
Adjustments to reconcile change in net assets to net cash from operating activities:		
Depreciation	245,077	223,575
Loss on disposal of assets	26,894	20,045
Increase in right-of-use asset, operating	(127,828)	(158,675)
Increase in operating lease liability	127,828	158,675
(Increase) decrease in assets:		
Certificates of deposit	303,154	(303,154)
Accounts receivable	(3,117,048)	(463,012)
Prepaid expenses	21,763	207,194
Deposits	7,404	-
Increase (decrease) in liabilities:		
Accounts payable	(632,298)	213,092
Accrued salaries, wages, and related expenses	64,715	(357,366)
Accrued earned time	30,090	(2,806)
Refundable advances	(461,906)	(826,461)
Other accrued expenses	(965)	(28,832)
NET CASH USED IN OPERATING ACTIVITIES	(5,308,602)	(1,296,734)
CASH FLOWS FROM INVESTING ACTIVITIES		
Additions to property and equipment	(63,792)	(366,356)
NET CASH USED IN INVESTING ACTIVITIES	(63,792)	(366,356)
CASH FLOWS FROM FINANCING ACTIVITIES		
(Increase) decrease in due from affiliates, net	172,797	(84,645)
Increase in due to State of NH	2,095,341	-
NET CASH PROVIDED BY (USED IN) FINANCING ACTIVITIES	2,268,138	(84,645)
NET DECREASE IN CASH AND CASH EQUIVALENTS	(3,104,256)	(1,747,735)
CASH AND CASH EQUIVALENTS, BEGINNING OF YEAR	4,641,758	6,389,493
CASH AND CASH EQUIVALENTS, END OF YEAR	$ 1,537,502	$ 4,641,758

See Notes to Financial Statements

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

1. ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization

Lakes Region Community Services Council, Inc. (the Council) is a New Hampshire nonprofit corporation organized exclusively for charitable purposes to ensure there is a coordinated and efficient program of human services dealing effectively with the problems and needs of the developmentally impaired of Belknap County, lower Grafton County and the surrounding communities.

Basis of Accounting

The financial statements of Lakes Region Community Services Council, Inc. have been prepared on the accrual basis of accounting.

Basis of Presentation

The financial statements of the Council have been prepared in accordance with U.S. generally accepted accounting principles (US GAAP), which require the Council 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 Council. These net assets may be used at the discretion of the Council'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 Council 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 a restriction expires, net assets are reclassified from net assets with donor restrictions to net assets without donor restrictions in the statement of activities.

As of June 30, 2024 and 2023, the Council had net assets with donor restrictions and net assets without donor restrictions.

Cash and Cash Equivalents

For the purposes of the Statements of Cash Flows, the Council considers all demand deposits, money market funds, and short-term investments with original maturities of three months or less to be cash equivalents.

Certificates of Deposit

During the year ended June 30, 2023, the Council opened a certificate of deposit account. Interest was stated at 4.02% and maturity was seven months from the issue date. The Certificate of deposit matured in May 2024. Certificates of deposit are carried at fair value. Interest is accrued and recognized in income when earned.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Accounts Receivable

Accounts receivable are stated at the amount management expects to collect from outstanding balances. Management provides for probable uncollectible amounts through a charge to activities and a credit to a valuation allowance based on historical account write-off patterns by the payor, adjusted as necessary to reflect current conditions. 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 Council has no policy for charging interest on overdue accounts nor are its accounts receivable pledged as collateral, except as disclosed in Note 4.

It is the policy of the Council to provide services to all eligible residents of central New Hampshire without regard to ability to pay. As a result of this policy, all charity care write-offs are recorded as reductions in revenue in the period in which services are provided. The accounts receivable allowance includes the estimated amount of charity care and contractual allowances included in the accounts receivable balances. The computation of the contractual allowance is based on historical ratios of fees charged to amounts collected.

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 net assets with donor restrictions, depending on the nature of the restrictions. However, if a restriction is fulfilled in the same period in which the contribution is received, the Council reports the support as net assets without donor restrictions.

Property and Depreciation

Property and equipment are recorded at cost or, if contributed, at estimated fair value at the date of contribution. Material assets with a useful life in excess of one year are capitalized. Depreciation is provided for using the straight-line method in amounts designed to amortize the cost of the assets over their estimated useful lives as follows:

Buildings and improvements	5 - 40 Years
Furniture, fixtures and equipment	3 - 10 Years

Costs for repairs and maintenance are expensed when incurred and betterments are capitalized. Assets sold or otherwise disposed of are removed from the accounts, along with the related accumulated depreciation, and any gain or loss is recognized.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Fair Value of Financial Instruments

FASB ASC Topic No. 820-10, Financial Instruments, 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 ASC 820-10, the Council 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, 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.

The carrying amount of cash, certificates of deposit, short-term receivables and payables, and customer deposits, approximates fair value because of the short maturity of those instruments.

Refundable Advances

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

Summarized Financial Information

The 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 accounting principles generally accepted in the United States of America. Accordingly, such information should be read in conjunction with the Council's financial statements for the year ended June 30, 2023, from which the summarized information was derived.

Accrued Earned Time

The Council has accrued a liability for future compensated leave time that its employees have earned and which is vested with the employee.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

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 Council records the following exchange transaction revenue in its statements of activities for the years ended June 30, 2024 and 2023:

Day Services – The Council provides certain services which range from birth through lifespan. Examples of these services are early supports and services, respite, family support, in home supports, service coordination, employment services, supported independent living, non-medical support for the elderly in their home, and self-directed services. All revenue is recognized upon completion of the service.

Residential Services – The Council provides certain residential assistance through contractual arrangements with other vendor providers as well as the shared family living model and Lakes Region Community Services staffed homes with 24-hour supervision. All revenue is recognized upon completion of the service.

Income Taxes

The Council is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. The Internal Revenue Service has determined the Council to be other than a private foundation.

Management has evaluated the Council's tax positions and concluded that the Council has maintained its tax-exempt status and has taken no uncertain tax positions that would require adjustment to the financial statements.

Advertising

The Council expenses advertising costs as incurred.

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.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

The expenses that are allocated include the following:

Expense	Method of allocation
Salaries and benefits	Time and effort
Occupancy	Square footage
Depreciation	Direct assignment
All other expenses	Direct assignment

Accounting 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.

New Accounting Pronouncement

As of July 1, 2023, the Council adopted the provisions of the Financial Accounting Standards Board (FASB) Accounting Standards Update (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 Council adopted this new guidance utilizing the modified retrospective transition method. The adoption of this Standard did not have a material impact on the Council's financial statements but did change how the allowance for credit losses is determined.

2. LIQUIDITY AND AVALIBILITY

The following represents the Council's financial assets as of June 30, 2024 and 2023:

	2024	2023
Cash and cash equivalents	$ 1,537,502	$ 4,641,758
Certificates of deposits	-	303,154
Accounts receivable:		
Medicaid	4,928,387	2,241,781
Other, net	691,602	261,160
Deposits	28,375	35,779
Total financial assets	$ 7,185,866	$ 7,483,632

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Less amounts not available to be used within one year:		
Deposits	$ 28,375	$ 35,779
Financial assets available to meet general expenditures over the next twelve months	$ 7,157,491	$ 7,447,853

The Council's goal is generally to maintain financial assets to meet 90 days of operating expenses (approximately $6.3 million). As part of its liquidity plan, excess cash is invested in short-term investments, including money market accounts.

3. PROPERTY AND EQUIPMENT

As of June 30, 2024 and 2023, property and equipment consisted of the following:

	2024	2023
Buildings and improvements	$ 4,530,268	$ 4,509,825
Leasehold improvements	133,552	376,738
Furniture, fixtures and equipment	743,744	843,828
Vehicles	173,352	173,352
Construction in process	-	1,898
Land	152,200	152,200
Total	5,733,116	6,057,841
Less accumulated depreciation	2,805,855	2,922,401
Property and equipment, net	$ 2,927,261	$ 3,135,440

Depreciation expense for the years ended June 30, 2024 and 2023 amounted to $245,077 and $223,575, respectively.

4. DEMAND NOTE PAYABLE

The Council maintains a revolving line of credit with a bank. The revolving line of credit provides for maximum borrowings up to $3,000,000 and is renewable annually. The line of credit is collateralized by all of the business assets of the Council and guaranteed by related nonprofit organizations (see Note 10). At June 30, 2024 and 2023, the interest was stated at the bank's prime rate of 8.0% and 8.5%, respectively. There was no amount outstanding on this line of credit at June 30, 2024 and 2023.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

5. DUE TO STATE OF NH

During the year ended June 30, 2024, the State of New Hampshire advanced $2,574,000 to the Council due to issues implementing a new Medicaid billing system. There are no specified terms of repayment and no stated interest rate on the advance. The balance due to the State of New Hampshire was $2,095,341 at June 30, 2024.

6. NET ASSETS

Net assets with donor restrictions consist of a building donated to the Council with restricted use for 30 years. The amount released from restriction each year is the current year depreciation on the building. The amount of net assets with donor restrictions were $1,050,963 and $1,101,126 for the years ended June 30, 2024 and 2023, respectively.

7. RETIREMENT PLAN

The Council maintains a retirement plan for all eligible employees. During the years ended June 30, 2024 and 2023, the Council made matching contributions of 100% of a participant's salary reduction that was not in excess of 2% of the participant's compensation. All employees who work one thousand hours per year are eligible to participate after one year of employment. The Council's contribution to the retirement plan for the years ended June 30, 2024 and 2023 was $91,272 and $89,411, respectively.

8. CONCENTRATION OF RISK

For the years ended June 30, 2024 and 2023, approximately 78% and 82%, respectively, of the total revenue was derived from Medicaid. The future existence of the Council is dependent upon continued support from Medicaid.

In order for the Council to receive Medicaid funding, they must be formally approved by the State of New Hampshire, Division of Health and Human Services (DHHS) as the provider of services for developmentally disabled individuals for that region. In May 2021, the Council was re-designated as an Area Agency for the period September 2020 through September 2025.

Medicaid receivables comprise approximately 92% and 90% of the total accounts receivable balances at June 30, 2024 and 2023, respectively.

9. LEASE COMMITMENTS

The Council has entered into various operating lease agreements to rent facilities and office equipment for their community residences and other programs. The terms of these leases range from one to ten years. The Council also leases various apartments on behalf of clients on a month-to-month basis.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

The right-of-use asset and related operating lease liability for the above leases amounted to $286,503 and $158,675 for the years ended June 30, 2024 and 2023, respectively. The weighted average lease term was 1.91 years and 0.96 years for the years ended June 30, 2024 and 2023, respectively. The weighted average discount rate was 3.79% and 0.88% for the years ended June 30, 2024 and 2023, respectively.

Total rent expense under all lease agreements for the years ended June 30, 2024 and 2023 was $298,832 and $267,300, respectively.

Lease liability maturities as of June 30, 2024 are as follows:

Year Ending June 30:	Amount
2025	$ 131,362
2026	96,307
2027	61,579
2028	49,723
2029	24,860
Total undiscounted lease liability	363,831
Less imputed interest	(77,328)
Total lease liability	$ 286,503

Refer to Note 10 for information regarding a lease agreement with a related party.

10. RELATED PARTY TRANSACTIONS

Lakes Region Community Services Council, Inc. is related to the following nonprofit corporations as a result of common board membership:

Related Party	Function
Genera Corporation	Manages and leases property
Greater Laconia Transit Agency	Provides transportation services
Lakes Region Community Services Foundation	Solicit, receive, and administer fundraising efforts for the benefit of the Council and others

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Lakes Region Community Services Council, Inc. has contracts and transactions with the above related parties during its normal course of operations. The significant related party transactions are as follows:

Received From:	**2024**	**2023**	**Purpose**
Genera Corporation	$ 14,400	$ 14,400	Management, accounting and financial services
Genera Corporation	$ 14,988	$ 14,988	Insurance reimbursement
Lakes Region Community Services Foundation	$ 40,000	$ 40,000	Management, accounting and financial services

Paid To:	**2024**	**2023**	
Genera Corporation	$ 110,937	$ 109,155	Rental of homes
Lakes Region Community Services Foundation	$ 70,063	$ 25,782	Foundation contributions

Due From:	**2024**	**2023**
Genera Corporation	$ 14,694	$ 121,996
Greater Laconia Transit Agency	-	61,214
Lakes Region Community Services Foundation	9,937	14,218
	$ 24,631	$ 197,428

There are no specified terms of payment and no interest stated on the related party due from accounts.

Demand Note Payable
The Council's demand note payable is guaranteed by Genera Corporation (see Note 4).

Rent
The Council has a perpetual lease agreement with Genera Corporation which calls for annual rent payments. The future minimum lease payments under the lease are $109,800, annually.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Insurance Reimbursement

The Council carries a joint liability policy with the related parties above. The Council pays for the coverage in full and then is reimbursed by the affiliates based on contracts between the agencies.

11. CONTINGENCIES - GRANT COMPLIANCE

The Council receives funds under various state grants and from Federal sources. Under the terms of these agreements, the Council 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 Council may 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 by government audits as of June 30, 2024.

12. CLIENT FUNDS

The Council administers funds for certain consumers. No asset or liability has been recorded for this amount. As of June 30, 2024 and 2023, client funds held by the Council aggregated $375,180 and $388,799, respectively.

13. CONCENTRATION OF CREDIT RISK

The Council maintains cash balances that, at times may exceed federally insured limits. The balances are insured by the Federal Deposit Insurance Corporation (FDIC) up to $250,000 at June 30, 2024 and 2023. In addition to FDIC coverage, certain deposits of the Council are insured or collateralized through other means. The Council has not experienced any losses in such accounts and believes it is not exposed to any significant risk with these accounts. At June 30, 2024 and 2023, cash balances in excess of FDIC coverage aggregated $196,977 and $1,211,190, respectively.

14. FINANCIAL INSTRUMENTS WITH OFF STATEMENT OF FINANCIAL POSITION RISK

The Council maintains a repurchase account agreement with a bank. A portion of the Council's overnight deposit bank balances are divided into amounts under the FDIC limit of $250,000 and swept into various insured bank accounts. This agreement provides flexibility to the Council by allowing them to maintain large cash balances in excess of the standard FDIC limit individually, but when spread across multiple banks, providing insurance for the full amount of the repurchase account.

15. RECLASSIFICATION

Certain amounts and accounts from the prior year's financial statements were reclassified to enhance comparability with the current year's financial statements.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

16. 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 December 13, 2024, the date the June 30, 2024 financial statements were available for issuance.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

SCHEDULE OF FUNCTIONAL REVENUES
FOR THE YEAR ENDED JUNE 30, 2024
WITH PRIOR YEAR SUMMARIZED COMPARATIVE INFORMATION

	Service Coordination	Day Programs	Early Intervention	Enhanced Family Care	Community Options
Program fees	$ 9,750	$ 49,526	$ -	$ 796,886	$ -
Medicaid	1,158,019	2,298,715	838,682	4,511,089	148,009
Client resources	-	3,173	-	54,908	-
Public support	-	27,042	-	-	-
Private foundations	-	-	-	-	-
Production/service income	264	86,788	-	-	-
Investment	-	-	-	-	-
State of New Hampshire - DDS	-	-	58,902	-	-
Management fees	-	-	-	-	-
Other	8,895	2,941	233	4	-
TOTAL FUNCTIONAL REVENUES	$ 1,176,928	$ 2,468,185	$ 897,817	$ 5,362,887	$ 148,009

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

SCHEDULE OF FUNCTIONAL REVENUES
FOR THE YEAR ENDED JUNE 30, 2024
WITH PRIOR YEAR SUMMARIZED COMPARATIVE INFORMATION

	Community Residences	Family Support	Transportation	Other DDS	General Management
Program fees	$ 397,320	$ 38,730	$ -	$ -	$ 77,275
Medicaid	4,755,103	4,996,304	-	-	-
Client resources	20,984	2,166	-	-	-
Public support	-	-	-	-	-
Private foundations	-	-	-	-	-
Production/service income	-	-	-	-	-
Investment	171	-	-	-	53,916
State of New Hampshire - DDS	179,918	98,581	-	-	246,072
Management fees	-	-	-	-	31,446
Other	910,004	1,731	-	-	1,070,867
TOTAL FUNCTIONAL REVENUES	$ 6,263,500	$ 5,137,512	$ -	$ -	$ 1,479,576

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

LAKES REGION COMMUNITY SERVICES COUNCIL, INC.

SCHEDULE OF FUNCTIONAL REVENUES
FOR THE YEAR ENDED JUNE 30, 2024
WITH PRIOR YEAR SUMMARIZED COMPARATIVE INFORMATION

	Fundraising	Total DDS Funded	Total Non-DDS Funded	2024 Totals	2023 Totals
Program fees	$ -	$ 1,369,487	$ 10,371	$ 1,379,858	$ 1,521,510
Medicaid	-	18,705,921	194,740	18,900,661	26,006,636
Client resources	-	81,231	-	81,231	152,485
Public support	89	27,131	483,794	510,925	740,362
Private foundations	-	-	148,193	148,193	84,532
Production/service income	-	87,052	-	87,052	86,290
Investment	-	54,087	-	54,087	41,091
State of New Hampshire - DDS	-	583,473	-	583,473	1,359,148
Management fees	22,954	54,400	-	54,400	54,400
Other	-	1,994,675	308,771	2,303,446	1,509,606
TOTAL FUNCTIONAL REVENUES	$ 23,043	$ 22,957,457	$ 1,145,869	$ 24,103,326	$ 31,556,060

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

LAKES REGION COMMUNITY SERVICES COUNCIL, INC.

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED JUNE 30, 2024

FEDERAL GRANTOR/ PASS-THROUGH GRANTOR/ PROGRAM TITLE	FEDERAL ASSISTANCE LISTING NUMBER	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	102-500734-42106802	$ 3,354
Promoting Safe and Stable Families	93.556	102-500734-42107306	8,125
Temporary Assistance for Needy Families	93.558	074-500589-45030353	107,735
	93.558	074-500589-45001502	26,205
			133,940
Social Services Block Grant	93.667	074-500589-45001501	37,235
Department of Health and Human Services, Office of Human Services			
Social Services Block Grant	93.667	05-95-48-481010-9255	75,950
			113,185
Activities to Support (STLT) Health Department Response to Public Health or Healthcare Crises	93.391	NH75OT000031	123,671
AGING CLUSTER			
Special Programs for Aging, Title III, B	93.044	05-95-48-481010-7872	26,792
Department of Health and Human Services, Div of LT Support & Services, BDS			
MEDICAID CLUSTER			
Medical Assistance Program	93.778		487,593
Total U.S. Department of Health and Human Services			$ 896,660
U.S. DEPARTMENT OF EDUCATION			
Department of Health and Human Services, Office of Human Services, Division of Long Term Supports and Services			
Special Education - Grants for Infants and Families	84.181A	05-95-93-930010-7852	$ 58,902
Total U.S. Department of Education			$ 58,902
U.S. DEPARTMENT OF JUSTICE			
Passed through State of New Hampshire Department of Justice			
Crime Victims Assistance	16.575		$ 124,639
Total U.S. Department of Justice			$ 124,639
Total expenditures of federal awards			$ 1,080,201

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

LAKES REGION COMMUNITY SERVICES COUNCIL, INC.

NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS FOR THE YEAR ENDED JUNE 30, 2024

NOTE 1 BASIS OF PRESENTATION

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal award activity of Lakes Region Community Services Council, Inc. 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 Lakes Region Community Services Council, Inc., it is not intended to and does not present the financial position, change in net assets, or cash flows of Lakes Region Community Services Council, Inc.

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. Pass-through entity identifying numbers are presented where available. Negative amounts shown on the Schedule represent adjustments or credits made in the normal course of business to amount reported as expenditures in prior years.

NOTE 3 INDIRECT COST RATE

Lakes Region Community Services Council, Inc. has elected not to use the ten percent de minimis indirect cost rate allowed under Uniform Guidance.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Leone, McDonnell & Roberts
Professional Association
CERTIFIED PUBLIC ACCOUNTANTS
DOVER • WOLFEBORO
NORTH CONWAY

LAKES REGION COMMUNITY SERVICES COUNCIL, INC.

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
Lakes Region Community Services Council, Inc.

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Lakes Region Community Services Council, Inc. (a New Hampshire nonprofit organization), which comprise the statements of financial position as of June 30, 2024 and 2023, and the related statements of cash flows, and the related notes to the financial statements for the years then ended, and the related statements of activities and functional expenses for the year ended June 30, 2024, and have issued our report thereon dated December 13, 2024.

Report on Internal Control over Financial Reporting

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

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

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

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 may exist that have not been identified.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether Lakes Region Community Services Council, Inc.'s financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the 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

Wolfeboro, New Hampshire
December 13, 2024

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Leone, McDonnell & Roberts
Professional Association
CERTIFIED PUBLIC ACCOUNTANTS
DOVER • WOLFEBORO
NORTH CONWAY

LAKES REGION COMMUNITY SERVICES COUNCIL, INC.

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
Lakes Region Community Services Council, Inc.

Opinion on Each Major Federal Program

We have audited Lakes Region Community Services Council, Inc.'s compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of Lakes Region Community Services Council, Inc.'s major federal programs for the year ended June 30, 2024. Lakes Region Community Services Council, Inc.'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, Lakes Region Community Services Council, Inc. complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 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 Lakes Region Community Services Council, Inc. and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of Lakes Region Community Services Council, Inc.'s compliance with the compliance requirements referred to above.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

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

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.

- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding Lakes Region Community Services Council, Inc.'s compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.

- Obtain an understanding of Lakes Region Community Services Council, Inc.'s internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of Lakes Region Community Services Council, Inc.'s internal control over compliance. Accordingly, no such opinion is expressed.

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

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

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

Wolfeboro, New Hampshire
December 13, 2024

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

LAKES REGION COMMUNITY SERVICES COUNCIL, INC.

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 Lakes Region Community Services Council, Inc. 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 Lakes Region Community Services Council, Inc., 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 Lakes Region Community Services Council, Inc. 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 Section 200.516(a).

7. The program tested as major programs was: U.S. Department of the Health and Human Services, Medical Assistance Program, ALN 93.778.

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

9. Lakes Region Community Services Council, Inc. was determined not to be a low-risk auditee.

B. FINDINGS – FINANCIAL STATEMENTS AUDIT

None

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

None

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Ashley Bissell

Education:

New Hampshire Technical Institute
AS: Early Care and Education of Young Children with Disabilities: May 2018 *Concord, NH*

Plymouth State University
BS: Early Childhood Education, Option: Early Care and Education: May 2020 *Plymouth, NH*

Professional Employment in Early Childhood:

Preschool Paraprofessional:
Alton Central School, Alton NH 2017-2018

The position was in a classroom setting, supporting specific children who required assistance due to delays in intellectual, behavioral, and physical development.

Head Afterschool Daycare Assistant Teacher Provider: *Alton, NH*
Joyful Footsteps Preschool, 2016-2019

- Supervise and monitor the safety of children at the center while organizing and implementing appropriate activities
- Develop schedules and routines
- Watch for signs of developmental delays
- Keep track of each child's progress.
- Provide activities daily geared towards children's interests

Lead Preschool Teacher: *Laconia, NH*
Boys and Girls Club of the Lakes Region, January 2020

- Create curriculum plans and implement
- Develop schedules and routines
- Keep track of each child's progress
- Create a safe learning environment for the children
- Create an environment for families to feel welcome

Lead Toddler Teacher: *Concord, NH*
Boys and Girls Club of the Lakes Region, September 2020

- Create curriculum plans and implement
- Develop schedules and routines
- Keep track of each child's progress
- Create a safe learning environment for the children
- Create an environment for families to feel welcome

Family Support Specialist; Step Ahead: *Laconia, NH*
Lakes Region Community Services, The Family Resource Center, Current

- Support families in need in a variety of ways; supporting with their basic needs

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

- Connecting them to community resources
- Emotional support

Practicum Opportunities in Early Childhood:

Preschool Special Education Practicum *Alton, NH*

- Aiding children in need with behavior, work, etc.
- Activity planning for the week
- Run the classroom from beginning to end
- Gave state pre-school screenings
- Provide new ideas for the classroom to improve
- Observing specialists/ working with them (OT,PT,SP)

NHTI Child and Family Development Center (infant and toddlers) *Concord, NH*
2016 August-December (4 hours a week)

- Observe classroom
- Help run activities
- Conduct my own activities
- Care for children

Early Head Start 2018 *Pittsfield, NH*

- Attend home visits
- Work on TS Gold entering children's information
- Conduct developmental plans for next home visits
- Give screenings to parents and children
- Help mentor make referrals
- Attend mentor personal meetings
- Work Friday daycare for families

Plymouth State University (Preschool) 2019 (7 ½ hours a week) *Plymouth, NH*

- Conduct semester long learning experience based on children's interests
- Work collaborate with two other students in the classroom
- Lead teaching
- Provide constant activities every week
- Have team meetings
- Rearrange classroom

Other Employments:

Head Manager at Stillwell's Ice Cream 2013- 2019 *Alton, NH*

- Hire and let people go
- Make orders/shop for the business
- Train new workers, and resolve problems between workers
- Set hours of other workers for the week

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

- Work with money, scooping, and solving problems with customers

Certifications & Qualifications:

CPR & First AID certified – September 17th, 2021
Pro Solutions Trainings in Health and Safety
Pyramid Model Training: August 24th, 2020

Honors:

Phi Theta Kappa Honor Society- NHTI 2017-2020
Dean's list student at NHTI – 2016-2017
Dean's list student at Plymouth State 2018-2020

Conferences:

NAEYC Conference – Atlanta Georgia, 2017
NHAEYC Conference – NHTI, 2016 & 2017

References provided upon request.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

BETHANY C. MILLER

SUMMARY

Experienced, certified and kind teacher seeking to apply gifts of teaching, encouragement and administration in a new field. Strong people skills accompanied by knowledge of child development and solid communication skills, team leadership and organization have been successfully developed while serving in non-profit organizations for more than 25 years.

STRENGTHS

- Ability to relate to children of all ages
- Teaching all ages – focus on preschool
- Teacher and Parent Training
- Multitasking
- Strong communication – both one on one and in large training groups

EXPERIENCE

Family Resource Center of Central NH August 2021 – Current

Family Support Specialist

- Facilitate meetings with families to discuss how to meet goals and overcome problems.
- Connect families with resources.
- Collaborate with schools, housing agencies, and other community agencies.
- Maintain records and paperwork according to company policies.

Joyful Footsteps Preschool August 2019 – June 2021

Director

- Developed curriculum for preschool class and taught as lead teacher.
- Coordinated scheduling and oversight of all staff.
- Communicated with parents and advised on issues with their children.
- Organized and taught training events for staff and parents.
- Completed all billing, stated paperwork and administrative tasks.

Child Evangelism Fellowship of NH June 1994 – April 2019

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Director of Training and Operations 2016 – April 2019

- Complete office management of the CEF state office.
- Developed and taught training workshops for volunteers and parents on various topics.
- Organized training events of varying lengths for volunteers and parents and taught workshops.
- Taught children of all ages in various settings.
- Trained and mentored high school and college aged volunteers.

Curriculum and Training Coordinator 2006 – 2016

- Developed state level and edited national level CEF curriculum for use in various ministries.
- of children in ministries such as summer camp, Good News Clubs® and 5-Day Clubs®.
- Developed and taught training workshops for volunteers and parents on various topics.
- Evaluated and mentored preschool teachers.
- Taught children of all ages in various settings.
- Trained and mentored high school and college aged volunteers.

Area Director of Belknap County – CEF of NH June 1994 – 2006

- Developed state level and edited national level CEF curriculum for use in various ministries.
- Developed and taught training workshops for volunteers and parents on various topics.
- Taught children of all ages in various settings.

Heavenly Sonshine Preschool August 2001 – April 2003
April 2019 – August 2019

Preschool Lead Teacher

- Developed and taught curriculum to meet the needs of 4-year-old class.
- Maintained records on students.
- Communicated with parents both informally and in scheduled meetings.

EDUCATION

BA, Christian Education, Columbia International university, Columbia, SC

3 credits for Growth & Development of the Young Child course at Lakes Region Community College

Certificate, Children's Ministry Institute, Warrention, MO (CEF International training)

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Amanda Houle

Education

University of Maine at Farmington, Farmington, Maine, December, 2010
B.S. Elementary Education (K-8 certification)
Concentration: Visual and Performing Arts
Grade Point Average: 3.43

Belmont High School, Belmont, New Hampshire, June, 2006
Diploma
High Honors

Human Services Experience

LRCS Family Resource Center, Laconia, New Hampshire **March 2025 – Present**

Family Support Specialist & Parent Educator

- Work with families in the Step Ahead program as a part of the Comprehensive Family Supports and Services as a home visitor creating and implementing family support plans to help families connect to resources and accomplish goals.
- Facilitate parent education classes in a hybrid format covering materials like the Nurturing Parenting Program, Parenting Journey in Recovery, Parent Café and more.
- Facilitate weekly socialization programs for families with children under 5.
- Serve as a staff member on the Family Leadership Council

Easterseals, Belmont, New Hampshire **June 2018-July 2019, April 2022-August 2025**

Program Specialist – Community Based Program

- Mentor new employees during their first 6 months of employment.
- Assist managers with various tasks such as annual certifications, compliance and documentation
- Support individuals while in the community at places such as the gym, volunteer work and paid employment.
- Document progress towards goals, daily activities and monthly reports.

Spaulding Academy and Family Services, Northfield, New Hampshire **January 2019 – April 2024**

Residential Assistant Per Diem – Young House + Wednesday House

- Provide supervision during the overnight hours doing regular room checks, following toileting protocols and attending to individuals that wake.
- Waking up and administering medication to students as well as cooking them breakfast and ensuring they are ready for school.
- Input daily paperwork, document room checks and behaviors during overnight hours
- Housekeeping such as laundry and dishes.

Spaulding Academy and Family Services, Northfield, New Hampshire **June 2014 – July 2018**

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Residential Counselor – Young House

- Direct care in a residential setting for behaviorally challenged youth with neurological impairments.
- Case management responsibilities for two students: attending treatment team meetings, writing monthly reports, advocating for their residential needs.
- Teaching daily living skills, community integration and socialization along with behavioral supports.

Winnisquam Regional School District, Tilton, New Hampshire **August 2012-June 2014**

Kindergarten + Teacher – Union Sanborn School

- Teach title 1 kindergarten class ½ day to students who needed extra support
- Create individualized lessons as well as group lessons to reinforce skills taught in regular kindergarten class
- Create reports and report cards of progress made in each skill area for each student
- Follow IEPs and attend meetings

Winnisquam Regional School District, Tilton, New Hampshire **March 2011-June 2014**

Computer Lab Aide – Union Sanborn School

- Teach computer skills to students in grades K-2
- Work one on one and in small groups with students in reading and math
- Create the yearbook and assist with technology in the school

Capital Christian School, Concord, New Hampshire **Feb. 2011 – March 2011**

Long-term Substitute Teacher/Principal

- Teaching all subjects to a multi-age classroom of 10 students in grades 3-9

Carl J. Lamb Elementary School, Sanford, Maine **Aug. 2010 – Dec. 2010**

Student Teacher

- Taught Everyday Math to a classroom of 20 second graders
- Implemented the Daily 5 literacy program
- Substituted when mentor teacher was absent

Capital Christian School, Concord, New Hampshire **May 2009 – June 2009**

Long-term Substitute Teacher/Principal

- Substitute in a multi-age classroom of 7 students in grades 1-6.

Winnisquam Regional School District, Tilton, New Hampshire **July 2008**

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Classroom Aide

- Aid to the summer school teacher in the classroom
- Worked one on one with a student with a hearing impairment

Shaker Regional School District, Belmont, New Hampshire **May 2008 – February 2011**

Substitute

- Teach topics ranging from high school science to middle school technology education

Belgrade Central School, Belgrade, Maine **Sept. 2007 – Dec. 2008**

Practicum Teacher

- Assisted with teaching in a kindergarten classroom

Winnisquam Regional School District, Tilton, New Hampshire **May 2007-February 2011**

Substitute

- Teach grades ranging from kindergarten to 5th grade in all subjects

Sweatt-Winter Child Care Center, Farmington, Maine **Sept. 2006 – May 2007**

Child Care Aide II

- Supervised and interacted with children
- Prepared for meals
- Cleaned, organized and sanitized laundry, toys and facility

Gamans Family, Laconia, New Hampshire **May 2005 – Dec. 2009**

Babysitter

- Supervised two children
- Planned and created various craft projects
- Prepared and served meals

Retail Experience

Shaw's Supermarket, Gilford, New Hampshire **Sept. 2005-Jan. 2008, Aug. 2010 – Oct. 2011**

Cashier

- Tender and bag orders
- Scored a perfect 100 from a secret shopper
- Retrieve carts

Office Experience

Center for Student Involvement, Farmington, Maine **Sept. 2008 – May 2010**

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Special Project Assistant I I

- Weekend adventures and excursions coordinator – plan and organize trips for students
- Create, hang and monitor publicity
- Answer telephone and take messages

University Mailroom, Farmington, Maine **Sept. 2007- May 2008**

Switchboard Aide

- Answered and transferred incoming calls
- Sorted and delivered student and faculty mail

Vital Kneads Institute for Massage Therapy, Belmont, New Hampshire **Oct. 2002-May 2003**

Secretary

- Answered telephone, took messages and scheduled appointments
- Transcribed materials used for the business and school
- Sent out mass mailings to promote newly opened school

Skills

- Proficient with Microsoft Word, Excel, PowerPoint and Adobe Illustrator
- Highly personable and friendly

Extracurricular Activities/Awards

Awards

- Dean's list Spring 2008, Fall 2008, and Fall 2009
- Above and Beyond award for Campus Residence Council 2008
- Named runner-up Belmont Good Citizen 2006

Clubs

- Campus Residence Council 2006-Present, held the titles of Vice President, Co-Chair, Treasurer, Social Committee, Spring Fling Committee, Graduation Committee, and Active Member
- Student Admission Club 2006-2008, tour guide
- High School National Honor Society, historian

Volunteer Work

- Sabbath school teacher for ages birth to 5 years old.
- New Student Orientation Staff 2008-Present, coordinator and leader
- Month of Service participant 2008 + 2009
- National Honor Society volunteer work

Other

- Attended the LeaderShape Institute 2008

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Carol Stone

Summary

- Served in teaching, care-giving, and director roles for early-childhood development and education
- An enthusiastic, dedicated, and creative person that works well with others in both leadership and contributor roles
- Served several years in school settings as a very active volunteer for various committees
- Strong written, oral, and presentation communication skills
- Computer system knowledgeable with Microsoft Office products
- Member of Educational Advisory Board for the National Association for the Education of Young Children publications and website
- Presenter at various Early Childhood Workshops for eeECE and Southern New Hampshire Childcare Resource and Referral and NHAEYC
- Proposal selected by National Association for the Education of Young Children National Conference in Nashville, November 2019
- CPR and First Aid certified

Education

- **Childcare Administration and Management**, *Manchester Community College, NH* - 2010
- **Masters of Education Curriculum and Instruction**, *Fordham University, Tarrytown, NY* - 1991
- **B.A. Elementary Education, B.A. Special Education**, *Boston College, Chestnut Hill, MA* – 1987

Professional Experience

Newborn Navigator, *Lakes Region Community Services (12/2024-present)*

- Established relationships with area obstetricians offices, pediatric practices, hospitals, DCYF. Conducted "Lunch and Learns" to discuss the Newborn Navigation program and referral process.
- Contacted families who were referred to the program and set up visits with those interested in a home visit
- Conducted home visits with families with newborns. Did follow up visits with many of the families up to 3 visits
- Referred families to services as needed such as CFSS and HFA
- Entered information concerning home visits into Quickbase for data collection including families who declined visits
- Continue to coordinate family events
- Continue to facilitate the Early Childhood Coalition Thrive
- Continue to attend community meetings
- Continue to facilitate Giggles and Grins playgroup
- Co-facilitate the Family Leadership Council

Community Collaborator, *Lakes Region Community Services 5/2021-12/2024*

- Facilitated Community Implementation Team which focused on lead poisoning prevention and increasing the number free and reduced lunch applications submitted by families
- Formed and maintained relationships with community partners throughout the Lakes Region
- Coordinated family events including Family Fun Night, Back to School Ice Cream Social, Backpack drive, Spring Egg Hunt and Halloween Parade
- Facilitated Giggles and Grins playgroup 3 mornings a week
- Facilitated the Early Childhood Coalition, Thrive
- Attended community meetings as assigned

Director, *Little Pilgrim Preschool, Nashua, NH,* 7/2013 - 6/2021

- Researched and wrote protocols to safely open school during COVID-19 pandemic
- Revised protocols as needed to maintain optimum safety for staff, children and families enrolled in school
- Supervise and evaluate all programs, daily activities and ensure developmentally appropriate curriculum within the regulations of the State of New Hampshire
- Monitor and maintain parent/school relationships and communication
- Lead monthly staff meetings

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

- Maintained all forms and necessary paperwork as required by the State of New Hampshire
- Collected and recorded monthly tuition
- Gave tours and enrolled new students to maintain full enrollment of preschool
- Handled and maintained annual budget
- Ran fundraisers
- Worked with parent committee and church committee and attend monthly meetings with both groups to maintain good relationship and communication

Pre-Kindergarten/Kindergarten Enrichment Program Co Lead Teacher, *The Preschool in the Village, Amherst, NH, 9/2010 – 7/2013*

- Responsible for planning and implementing enrichment activities for children attending afternoon kindergarten, as well as curriculum for children who have chosen to delay entrance to Kindergarten. These activities are based on an alphabet letter each week and the interests of the children in the program.
- Work with preschool staff to plan and implement music, movement and literature based activities for daily meeting of children ages 3-6.
- Incorporate music, art and drama into the everyday lives of students.
- Escort children to Clark School for afternoon kindergarten.

Three Year old Teacher Co-lead Teacher, *The Preschool in the Village, Amherst, NH, 9/2011 – 7/2013*

- Responsible for creating and implementing developmentally appropriate curriculum for three year olds.
- Work on self-help skills, separation anxiety and other emotional issues that children experience in the first year of preschool.

Co-Director, *Young Minds Preschool, Hollis, NH, 3/2009 – 7/2010*

- Responsible for overseeing instructional activities and curriculum in place in childcare setting.
- Responsible for parental component of business, including weekly newsletter, parent conferences and daily communication when necessary.
- Responsible for posting job advertisements, screening and interviewing candidates, observing demonstration lessons and helping new and current staff, children and families acclimate to newly hired staff.
- Responsible for increasing enrollment of families in childcare setting:
    - Advertising, phone and email communication, conducting tours of center, following up with families after tours, registration and placement of children
- Worked with staff through staff meetings, one to one meetings and sharing appropriate journal articles or other reading material pertaining to various childcare situations.
- Worked with Co-Director on improvement plan for Bureau of Licensing for the State of New Hampshire, including filing for waivers when necessary and developing and implementing policy changes in order to comply with state requirements.
- Planned field trips, visitors to center, photographer for children's portraits, as well as many other special celebrations throughout the year.

Preschool-Kindergarten Lead Teacher, *Young Minds Preschool, Hollis, NH, 11/2008 – 7/2010*

- Responsible for creating and implementing multi-age curriculum for ages 38 mos. to 5 years.
- Created thematic units and center activities based on the NAEYC Developmentally Appropriate Practices and the New Hampshire State standards.

Auction Committee, *Hollis Parent Teacher Association, Hollis, NH, 2008*

- Event raised $53,000 for enrichment programs for the children in the Hollis Elementary Schools
- Worked with volunteers and the Nashua Country Club staff to create a great auction evening
- Solicited donations from local businesses
- Assisted event leaders with many logistics issues as they arose

Assistant Director, *Children's Circle Day Care, Parsippany, NJ, 1997 - 2000*

- Supervised teachers in classroom activities
- Reviewed teachers' plans weekly and confirmed their implementation
- Ran staff and parent training sessions
- Completed monthly newsletter for families
- Prepared staff schedules

Four Year Old Teacher, *Children's Circle Day Care, Parsippany, NJ, 1994 – 1997*

- Worked to prepare children for Kindergarten in a safe, happy and academically challenging environment
- Rewrote evaluation tools used for students
- Supervised many field trips and special in school activities

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

First Grade Teacher, *Allendale Public Schools, Allendale, NJ, 1987 - 1993*

- Instilled in every student, the foundations of learning
- Developed excellent working relationship with students, parents, administration and staff
- Wrote and implemented interdisciplinary curriculum including language, math, science, social studies, and art components
- Rewrote mathematics curriculum guide for first grade level
- Mentored first year teachers as well as student teachers
- Helped implement Writer's Workshop curriculum school-wide, including staff development workshops and in class support

Memberships & Affiliations

- Member National Association for the Education of Young Children (2008-2020)
- Member, National Education Association (1987-1993)
- Member, Morristown Home School Association (1999-2007)
- Member, Hollis PTA (2007-2008)

References - Available upon request

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Tricia Tousignant

Objective

To find a role where I can use my organizational, communication, and customer service skills to support and serve the community and its families.

Work experience

July 2014-present Lakes Region Community Services Laconia, NH

Parent Education Manager

- Facilitated parent education classes for caregivers as well as socialization groups for children
- Coordinated all logistics of parent education programming including processing registrations, scheduling staff, making room reservations, coordinating dinners, etc.
- Created & distributed quarterly parent education schedule including publishing details on the agency website
- Tracked and reported participant attendance for classes and events using state database
- Trained and supervised staff in the facilitation of various parent education curricula
- Collaborated with other community organizations in order to provide comprehensive family support
- Assisted with writing grant applications to obtain program funding

Sept. 2007-June 2014 Woodland Heights School Laconia, NH

Kindergarten Teacher

- Provided academic & social instruction and experiences for the kindergarteners in my class.
- Performed regular and comprehensive assessments in order to determine individuals' needs and guide my instruction.
- Worked cooperatively with staff members at my own grade level and throughout the school to ensure the most consistent and nurturing learning environment possible.
- Communicated regularly with parents in order to establish and maintain a partnership for their child's learning.

Sept. 2004-June 2007 Little Things Family Child Care Laconia, NH

Owner/Operator

- Provided care for up to 6 children daily, ranging in age from infants through preschoolers, with an emphasis on enriching their physical, cognitive, social & emotional development in a safe and nurturing environment.
- Encouraged regular communication with families in order to provide a consistent and healthy transition between home and daycare
- Achieved the standards and maintained the records and

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

documentation required by the State of New Hampshire to run a licensed Family Child Care Home.

Jan. 1999-June 2004 Inter-Lakes Elementary School Meredith, NH

First Grade Teacher

- Established and maintained an environment which provided consistency in classroom management and demanded respect and safety for all.
- Developed and implemented daily lessons and projects with consideration to the needs and interests of the children, and in accordance with the state and district curriculum requirements.
- Worked independently and as part of grade-level and school-wide teams to ensure the growth and safety of all classroom children including those with special physical and behavioral needs.
- Served on the Elementary Performance Assessment Committee to help define, examine, and establish consistency in student assessments within and across grade levels.

Education

1995-1999 Colby-Sawyer College New London, NH

B.S. Child Development, Summa Cum Laude

Previously NH Early Childhood Education Certified (certification has lapsed)

Honors/Awards: Alpha Chi National Honors Society, Dean's List (all semesters), Sophomore Class Academic Achievement Award, Colby-Sawyer College Presidential Scholar

Interests and activities

Writing, especially children's fiction

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Alyssa Tandy, MSW, LICSW

Licenses and Certifications:

-UNH Master's Certificate: Individuals with Developmental Disabilities
-Field Instructor for BSW students through; Plymouth State University, New Hampshire Technical Institute, University of New Hampshire, Lakes Region Community College, and the University of Maine.

Education:

December 2021: NH LICSW Approval
1/26/18-2/2/18: UNH Clinical Supervision Certification: 15 hours total

May 2016, Master's in Social Work
University of New Hampshire, Durham, NH

May 2012, Bachelor of Science: BSW Social Work
Plymouth State University Plymouth, NH

- Option: Mental Health Services
- National Phi Alpha Honor Society: 2011-2012
- Honor Roll: 2010-2011
- Dean's List: 2008-2009

Experience:

July 2019- Present: Lakes Region Community Services; Family Resource Center of Central NH, Laconia, NH
-Manager of the Step Ahead Home Visiting Program

- Directly supervise 8 staff in regards to the Comprehensive Family Supports and Services Contract through the Step Ahead Program. Provide direct service to clients experiencing a need for concrete resources. Work on scheduling, program implementation, and community outreach.

-Residential Support Staff (Nov. 2021 – Jan. 2026)

- Providing direct support to residents who have disabilities and/or brain injuries.
- Completed New Hampshire Dept of Health and Human Services; Bureau of Developmental Services Medication Training per He-M 1201 guidelines on 2/17/22.

April 2023-Present: Lakes Region Community Services; Family Resource Center of Central NH, Laconia, NH
-Director of the Family Resource Center of Central NH

- Directly oversee all FRC programming (ACERT, CFSS, Newborn Navigation, Kinship Navigation, Parent Education, Socialization, Family Centered Early Supports and Services)
- Grant Writing experience; private grants, state contracts, etc.

July 2023-June 2025: Lakes Region Community Services; Family Resource Center of Central NH, Laconia, NH
-Interim Program Manager: Family Centered Early Supports and Services

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

- Directly supervise 12 staff (including; educators, PT, OT, SLP)
- Implement state and federal regulations; including the Part C Office

October 2022-May 2023: Leadership Lakes Region, NH
-Class of 2023 Graduate/Participant

- Applied and accepted to participate in an organization that is dedicated to community improvement by developing, expanding, promoting and putting in place a network of effective volunteer leaders with a variety of skills and interests.

September 2015-June 2018: Project Extra, SAU 30 Woodland Heights Elementary School, Laconia, NH
-Lead Staff: Part-time (3 days per week)

- Afterschool Program: Facilitated educational activities for approximately 40-50 children, ages 5-10 (Kindergarten through 5th Grade) after school.
- Coordinated and developed activities for academic enrichment, as well as; providing homework support. Crisis intervention and family support.
- Supervised children during structured activities, snack, free play, dinner, and dismissal.
- Consultation with program staff and program director.

August 2015-May 2016: Genesis Behavioral Health, Church Street, Laconia, NH
-Internship Placement for year two of MSW: 24+ hours per week

- Primary Focus: Adult Therapy, this one-on-one service helps to decrease distress, reduce psychological symptoms, and improve positive behaviors.
- Participated in treatment teams for clients.

November 2014- December 2018: Lakes Region Community Services: Family Resource Center of Central NH, Laconia, NH

- *Educator/Home Visitor*: Family-Centered Early Supports and Services: Program providing modeling to families and direct service to children, ages birth to three, who have a developmental delay or disability. The home visitor provides information, support, resources, and modeling and education; targeting specific goals to increase a child's skills and functioning.

November 2014- July 2019: Lakes Region Community Services: Family Resource Center of Central NH, Laconia, NH

- *Family Support Specialist/Home Visitor*: Step-Ahead Program: Program provided to assist families with children under the age of eighteen with supports and services. The home visitor encourages families to identify strengths and needs and assisting them in concrete problem solving and resource acquisition.

August 2014-May 2015: Lakes Region Community Services: Family Resource Center
-MSW Internship Placement for year one of MSW: 16+ hours per week

- Primary Focus: Step Ahead Program-Home visitor to connect families with community resources and to encourage, empower, and assist these families in their specific goals.
- Co-facilitated parent education class.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

- Participating in the planning of community events; Author's Tea, Family Fun Night, etc.

May 2012-November 2014: Spaulding Youth Center, Northfield, NH

- *Residential Counselor (case manager):* Implement behavior strategies and new protocols for individuals ages 5-21 with developmental, behavioral, or emotional disabilities. Attend treatment team meetings, buy clothing and ADL's for the students, advocate for students.
- *Member of Afterschool Activity Committee*: Implement programs and activities for individuals with disabilities.

January-May 2012: Lakes Region Community Services: Family Resource Center of Central NH-Laconia, NH

-BSW Practicum Placement: 450+ hours

- Advocated for clients with developmental disabilities, such as Autism Spectrum Disorder and a wide variety of other developmental disabilities and delays.
- Co-facilitated a range of playgroups, interacted with children with developmental disabilities, as well as their families. Playgroup gave me the opportunity to engage and intervene in different activities with children regarding their strengths and limitations. Multiple playgroups were offered; Kids Connect (playgroup for children with Autism and their siblings), Giggles N' Grins (socialization playgroup for children ages 1-5 and their families), and the Children's Group (therapeutic playgroup for children while parents are involved in parenting class).
- Administered Ages & Stages Questionnaire, which is a developmental screening to detect delays in children ages birth to six years of age.

September 2010-May 2011: Campton Elementary School-Campton, NH

- *Afterschool Program Coordinator*: Facilitated educational activities for approximately 20-30 children ages 5-10 after school.
- Coordinated and developed activities for academic enrichment, as well as; providing homework support.
- Supervised children during activities, snack, and free play.

September 2009-May 2010: Hunter School-Rumney, NH

- *In-House Coordinator*: Facilitated homework, snack time, free play, dinner, medications, and bedtime routines for six children ages 5-12 with various developmental or behavioral disabilities within the residential homes.

Volunteer Experiences:

- October 2019-Present: Board of Trustee Secretary for Neighbors in Need, Laconia, NH. Neighbors in Need is a Lakes Region 501c3 non-profit corporation providing emergency assistance funds for families and individuals in need.
- November-April 2010: Mentoring Adolescents at Campton Elementary School, Campton, NH. I mentored two young girls ages 10 and 11, each in their own classrooms throughout the day. I facilitated with homework support and social engagement.
- September 2008-January 2009: Voices Against Violence in Plymouth, NH. Completed training on the services that are provided for all victims and survivors of domestic violence and facilitated the clothes line project (hung t-shirts around the community that were decorated and designed by victims of domestic violence).

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

- September 2007- September 2009: Co-facilitated Special Olympics sponsored events within the Lakes Region. Assisted in coordinating physical team activities for the individuals and their families, such as; volleyball games and tug-of-war.

Language:

- Sign Language: Beginner in ASL.

Computer Skills:

- Efficient in MS Office; including Excel, Powerpoint, Word, and more.

Hobbies/Interests: Scrapbooking, photography, crafts, and hockey (playing, as well as; watching the Boston Bruins).

References: Available Upon Request.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Cierra C. Lloyd

Professional Summary

As a compassionate and motivated educator and human service provider, I seek to increase and apply my knowledge, experience, and education with the purpose of educating others across a variety of settings.

Education

- *Franklin Pierce University, CGPS* *2021*

M.Ed., Elementary Education

GPA: 3.9

Certification K-6

- *Plymouth State University, Plymouth, NH* *2018*

BA Communication Studies, Option: Professional Communication

AA Pre-Law, Peace & Social Justice

- *Laconia High School* *2011-2015*

General Studies

- *Lakes Region Community College, Laconia, NH* *2014-2015*

While in high school, acquired college credit in courses including Health/Nutrition/Safety in Childcare, as well as Early Childhood Education Practicum which included internships at Lakes Region Childcare Services and Pleasant Street School. I was able to spend at least one day a week in a childcare setting, shadowing childcare staff in classrooms with children ages 0-5. While interning at Pleasant Street School, I spent at least one day a week in a 1st grade classroom, shadowing the lead teacher, helping students with work, and contributing to classroom management.

Skills and Credentials:

- Early Intervention Specialist
- Advanced experience in case management and home visiting
- Knowledge of children's growth and development
- Experience appropriately interacting with children ages 0-teen.

Relevant Work Experience

- *Lakes Region Community Services*
  Family Centered Early Supports and Services Assistant Manager/Manager July 2023-Present

I manage a team of 10+ Early Supports and Services professionals, who are members of a multidisciplinary team, dedicated to providing Early Intervention to children birth-3. I carry my own caseload of children, providing Early Intervention, as well as conduct developmental evaluations to determine eligibility into the program. Managerial tasks include assisting with budgeting and invoicing, providing direct supervision to each team member, planning and coordinating team meeting, and ensuring compliance of the program to uphold the rules and regulations set forth by the State of New Hampshire as well as the federal government.

- *Lakes Region Community Services*
  Family Centered Early Supports and Services Educator *July 2022-July 2023*

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Managing a caseload of between 20 and 25 children at a time, with ranging delays and/or disabilities including speech, gross motor, self-help, communication, and more. I enter the homes of families with the intent of guiding parents and children to appropriately implement activities and skills into daily routines. I apply appropriate milestones to help the respective children work towards their expected development, based on age and/or ability.

- *Lakes Region Community College* *March 2022-Present*

Adjunct Faculty

Planned, facilitated, supervised, and taught students in hybrid form. Implement a flexible curriculum adjusted by myself, while instructing courses in the Human Services department. Most commonly teaching Human Services Professional Seminar.

- *Lakes Region Community Services*
  Step Ahead, Family Support Specialist *June 2019-July 2022*

Parent Educator, Family Support Specialist, Play Group Facilitator

Responsible for teaching and facilitating evidence-based curriculum to classes ranging from 2-15 participants. Certain curriculums taught included Growth and Development, discussing the appropriate developmental growth of children 0 –Teens, as well as teaching about the social/emotional needs as well as discipline and personal power of the ages 0-Teen. These curriculums were specific and evidence-based on the appropriate nurturing of children for their developmental needs. Additionally, I managed a caseload of families with the mission of supporting and providing resources for them within the Family Resource Center. While working as a Family Support Specialist, I worked alongside a team of Early Supports and Services educators to assist in meeting goals to meet specific milestones, and developmental goals. I was also connecting with community resources including Health First, Healthy Families America, various childcares, DCYF, and more to ensure children's' needs were being met developmentally, emotionally, and physically. For a year of my position, I had the role of facilitating playgroup once a week. I directed, led, and interacted with children and families ages 0-5. Within playgroup, I led children in developmentally appropriate activities, such as food activities, art activities, and more. Recently, I have taken on the role of providing residential support to individuals with varying disabilities.

- *Boys and Girls Club of the Lakes Region*

Group Leader *2016 –2022*

Direct, lead, and outline the production of the daily functions at the facility to supervise, work with, and guide up to 120 children in the building at a time. Interact, teach, and care for the children during before school, after school, and summer settings. I took on the responsibility of opening the club for the members, as well as driving the school bus before and after school. For a year, I was exposed to a preschool, which operated in the building. I interacted with children ages 3-18 throughout my duration at this branch. As a veteran group leader, I helped lead the execution of field trips, helped plan developmentally appropriate activities for members, as well as maintained professional, healthy relationships with families served.

- *Acorn Brown's Turtle Town Daycare*

Daycare Provider *November 2016 – November 2017*

Assisted in the car for children ages 6 weeks to 6 years old. I helped to implement preschool criteria for children ages 2-5. Activities included coloring, improving fine motor skills, play, writing, teaching numbers, the alphabet, and more. Practiced verbal redirection while implementing developmentally appropriate interaction and routines. Assisted and led activities which helped children reach developmental milestones such as practicing tummy time, leading gross motor activities, and more.

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Jennifer M. Nelson

Objective

To obtain a position that will benefit from my knowledge, skills and abilities and to maximize my work activities and context to achieve a positive outcome.

Ability Summary

- Effective communication skills (written, telephone and in person)
- Maintain electronic and hard-copy records, reports, or files
- Data entry of member contract information
- Use computers to enter, access or retrieve data
- Lead account database manager
- Write business correspondence
- Fluent in Microsoft Office programs
- Route multi-line telephone calls
- Distribute correspondence or mail
- Maintain employee personnel records

Employment History

January 2016 – Current **Lakes Region Community Services**

Administrative Assistant, Family Resource Center

April 2000- Nov 28, 2015 **Laconia Athletic & Swim Club (LASC INC)**

Positions held:

March 2014- Nov 2015	Billing & Processing Administrator, Membership Services
Dec 2001-March 2014	Customer Service Representative; Administrator Assistant
April 2000-Dec 2005	Life Guard & Swim Instructor; Assistant Aquatics Director

Jan 1998 – March 2000 **YMCA**
Life Guard

June 1999 – Dec 1999 **Kids Kampus** Concord, NH
Pre-School Teacher

Jan 1995 – June 1999 **East Side Learning Ctr** Concord, NH
Pre-School Teacher

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Jennifer M. Nelson

Most current responsibilities included:

- Administrative Assistant within the Family Resource Center of Central New Hampshire, maintaining databases and documentation for various programs under the FRC umbrella as well as the FRC in general.
    - Primary programming reporting for:
        - Family Centered Early Supports & Services (FCESS): Birth to 3
        - Comprehensive Family Support Services (CFSS): Step Ahead

- Initial data entry and maintaining digital records within NHEasy data system, including new referrals, intakes, evaluations and cancellations. Updating Individualized Family Service Plan (IFSP) for children in program through FCESS and monthly reporting to keep program in compliance with state and federal regulations. Monthly Billing reports to submit to Lakes Region Community Services billing department, as well as Productivity and Cancellation reports to the FCESS manager. Maintaining FCESS therapists through CAQH Provider Data Portal.

- Monthly reporting to upload via New Hampshire Secure File Transfer System to Part C office for FCESS Invoice reporting. Generating service delivery reports, and other supporting documentation, to include contracted staff or programs invoices, FCESS mileage reporting and timesheet reporting.

- Initial data entry and maintaining digital records within Quickbase data system, including new referrals, and exiting from program documentation. Assisting CFSS staff with data entry as needed for new intake data reporting and family support plans. Monthly reporting to keep program in compliance with state regulations. Monthly Billing reporting to submit to Lakes Region Community Services billing department, as well as Monthly Visits reporting to CFSS manager.

- Quarterly reporting, and Fiscal Year reporting for all programs under the FRC umbrella recorded as Dashboard Data to assist management with grant writing and other reporting throughout the year.

- Maintenance of the internal FRC employee spreadsheet to include staff contact data.

- Assistance as needed with Family Socialization Playgroups, as well as family programming events through FRC throughout the year.

- Backup assistance to LRCS receptionist as needed. Frequent contact, in person and on the phone of individuals and families utilizing LRCS and FRC services.

References

Available upon request

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Ruth Fisher

Objective:

To obtain a part-time position in a childcare setting that allows me to utilize my experience working with children and their families.

Professional Experience

Ability to establish and maintain working relationships with others.
Communicate effectively with children, families, and professionals.
Knowledge of the differences in ability, personality, and interests of children.
Active listener.
Basic Computer, and technology skills

Experience:

Lakes Regional Community Services: Laconia, N.H.

4/2008-Present

Family Aide

Assist families in their homes, in order to improve parenting skills, household management, child development, child care, behavior management, health, and safety through education and role modeling.
Support families in making choices, and achieving goals.
Communicate to make the families aware of possible consequences for their choices.
Help the family to organize a healthy, safe environment, in caring for their children.
Help the family to identify their strengths and needs, in order to transfer these areas into learning objectives.
Consistent in visiting the family determined by the action plan.
Function effectively within the family with little direct supervision.
Exercise judgment in performing duties, and recognize limits of responsibilities.
Collaborate with the Family Support Services professionals.
Function within the policies and procedures established by the Family Support Team.
Maintain confidentiality, and a nonjudgmental demeanor with families.
Maintain Attendance Log, and other necessary records.
Attend monthly Family Aide meetings, and professional development trainings.

Substitute for Playgroup:

Communicate respectfully with the children, parents, and guardians.
Interact with the children, and adults that accompany the children.
Maintain a routine during playgroup.
Provide a healthy snack for the children.
Provide a safe environment for the children.
Offer activities, and story time during playgroup.

Parent Ed. Childcare:

Docusign Envelope ID: 06D5BF3A-D709-831C-8390-A9025E9C7A2F

Supervise the children during Parent Education.
Develop trusting, and respectful relationships with families.
Communicate respectfully with the families.
Provide a safe environment for the children.
Provide a snack for the children.
Offer age- appropriate activities for the children.
Clean up/ organize the playroom.

Kidworks' Learning Center Meredith, N.H. 6/1996-11/2015,9/1/2025 - present

Lead Teacher / Float

Respond sensitively to the interests, needs, and requests of the children. Encourage self-help skills.
Encourage natural exploration and curiosity. Provide a safe, and secure environment for the children.
Develop respectful and trusting relationships with families.
Communicate with families through informal discussions and / or daily notes.
Encourage and support family involvement in classroom activities.
Make recommendations of social services, developmental needs of the children, to the Director.
Follow-up on referrals with the family.
Collaborate with Early Childhood Professionals, in a positive professional manner.
Communicate to the Director as necessary of any concerns, questions, or needs.
Attend Professional Development trainings, as required by the State of N.H. Licensing requirements.
Continued Certification in First Aid/CPR until April of 2017.
Knowledge of State Rules/Regulation of a Child Care Center.
Follow routine schedules to ensure the policies for cleanliness, and disinfecting of materials is completed.
Administer medications according to policy and guidelines.
Maintain all required records, forms, files, and reports.
Follow rules of the NH Food program guidelines, for the safe handling of food.
Assist in fundraisers.

Education

Plymouth State University Plymouth, N.H.
BS Science Early Childhood 2007

The Whole Child Center Tilton, N.H.
Administrative Assistant 2006

Plymouth State University Plymouth, N.H.
Practicum Student 1996

Plymouth State University Plymouth, N.H.
AS Science Childhood Studies 1996

FORM NUMBER P-37 (version 2/23/2023)

Subject: Comprehensive Family Support (CFS) (RFP-2027-DPH-05-COMPR-06)

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 164 Main Street Berlin, NH 03570	
1.5 Contractor Phone Number 603-466-5190	1.6 Account Unit and Class TBD	1.7 Completion Date June 30, 2029	1.8 Price Limitation $2,594,990
1.9 Contracting Officer for State Agency Robert W. Moore, Director		1.10 State Agency Telephone Number (603) 271-9631	
1.11 Contractor Signature Signed by: Gabrielle Flanders 89C117DF1D6D4B0... Date: 4/30/2026		1.12 Name and Title of Contractor Signatory Gabrielle Flanders Executive Director	
1.13 State Agency Signature DocuSigned by: Iain Watt D778BB63F9704C7... Date: 5/1/2026		1.14 Name and Title of State Agency Signatory Iain Watt Director - DPH	
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 74873484494146D... On: 5/5/2026			
1.17 Approval by the Governor and Executive Council *(if applicable)* G&C Item number:		G&C Meeting Date:	

Contractor Initials GF
Date 4/30/2026

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

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

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

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

4. CONDITIONAL NATURE OF AGREEMENT.

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

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

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

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

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

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

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

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

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

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

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

7. PERSONNEL.

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

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

Contractor Initials Initial GF

Date 4/30/2026

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

8. EVENT OF DEFAULT/REMEDIES.

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

8.1.1 failure to perform the Services satisfactorily or on schedule;

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

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

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

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

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

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

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

9. TERMINATION.

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

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

10. PROPERTY OWNERSHIP/DISCLOSURE.

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

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

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

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

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

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

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

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

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

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

Contractor Initials Initial GF

Date 4/30/2026

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

14. INSURANCE.
14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:
14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than $1,000,000 per occurrence and $2,000,000 aggregate or excess; and
14.1.2 special cause of loss coverage form covering all Property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the Property.
14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.
14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or any successor, a certificate(s) of insurance for all insurance required under this Agreement. At the request of the Contracting Officer, or any successor, the Contractor shall provide certificate(s) of insurance for all renewal(s) of insurance required under this Agreement. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

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

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

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

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

19. CHOICE OF LAW AND FORUM.
19.1 This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire except where the Federal supremacy clause requires otherwise. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.
19.2 Any actions arising out of this Agreement, including the breach or alleged breach thereof, may not be submitted to binding arbitration, but must, instead, be brought and maintained in the Merrimack County Superior Court of New Hampshire which shall have exclusive jurisdiction thereof.

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

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

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

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

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

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

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

Contractor Initials Initial GF
Date 4/30/2026

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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, this Agreement, and all obligations of the parties hereunder, shall become effective on July 1, 2026 (“Effective Date”).

1.2. Paragraph 3, Effective Date/Completion of Services, is amended by deleting subparagraph 3.3., in its entirety and replacing it as follows:

3.3. Contractor must complete all Services by the Completion Date specified in block 1.7. 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 6, Compliance by Contractor with Laws and Regulations/Equal Employment Opportunity, Subparagraph 6.1., is amended as follows:

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, RSA 151:21 Patients’ Bill of Rights, civil rights and equal employment opportunity laws, and the Governor’s order on Respect and Civility in the Workplace, Executive Order 2020-01. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

1.4. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.5., as follows:

12.5. 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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Exhibit B – Scope of Services

1. Statement of Work

1.1. The Contractor must provide the Comprehensive Family Support (CFS) Program. The Contractor must provide services to pregnant and parenting women as well as other families with children up to eighteen (18) years of age who are:

1.1.1. Experiencing, or at risk of experiencing difficulty with:

1.1.1.1. Pregnancy;

1.1.1.2. Health and nutrition;

1.1.1.3. Education and employment;

1.1.1.4. Parenting challenges;

1.1.1.5. Social isolation;

1.1.1.6. Substance use disorders;

1.1.1.7. Mental health events;

1.1.1.8. Child abuse and neglect; and

1.1.1.9. Substance exposed infants.

1.1.2. Perinatal families of substance exposed infants.

1.1.3. At risk for child abuse and neglect.

1.1.4. Seeking Comprehensive Family Support (CFS) in a voluntary manner.

1.2. The Contractor must ensure all services are provided in the following DHHS Catchment area: Berlin and Littleton District Office. The Contractor must maintain a physical office located within the Catchment Area. The Contractor must ensure:

1.2.1. The office is accessible to families and staff at least five (5) days per week Monday through Friday during standard business hours of 8:00 am to 4:00 pm, excluding state holidays.

1.2.1.1. Evening hours are available at least one (1) night per week.

1.2.2. Families are provided flexible opportunities to meet in the home or community.

1.2.3. The office location remains in compliance with the Americans with Disabilities Act (ADA) accessibility requirements.

1.2.4. No duplication of services.

1.3. The Contractor must meet the Standards of Quality for Family Strengthening &

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Support as defined by the National Family Support Network. This includes:

1.3.1. Maintaining a current status throughout the term of the Agreement of having completed a New Hampshire self-assessment and received designation as a Family Resource Center (FRC) of Quality.

1.4. Comprehensive Family Support (CFS) Home Visiting Program

1.4.1. The Contractor must deliver high-quality, responsive CFS home visiting services to New Hampshire families with children ages 0-18, based on their emerging needs. The Contractor must ensure that families enrolled in CFS have access to all FRC services, home visiting services, parent education, parent support groups, father groups, parent cafes, information and referral, and case management. The Contractor must work collaboratively with the Department to deliver statewide CFS home visiting services that:

1.4.1.1. Promote healthy pregnancy and birth outcomes.

1.4.1.2. Support safe and nurturing environments for children and adolescents.

1.4.1.3. Improve maternal and child health.

1.4.1.4. Encourage positive parenting practices.

1.4.1.5. Reduce child maltreatment.

1.4.1.6. Increase linkages and referrals to community resources and supports

1.4.2. The Contractor must ensure each family has a completed Individual Service Plan (ISP) that identifies and addresses barriers to achieving optimal health, well-being, and resiliency. The Contractor must use the ISP template provided by the Department and must include information about the education and support services that will be delivered across key outcome domains, which may include but are not limited to:

1.4.2.1. Maternal Health.

1.4.2.2. Child Health.

1.4.2.3. Child Development and School Readiness.

1.4.2.4. Community Linkages and Referrals.

1.4.2.5. Family Economic Self Sufficiency.

1.4.2.6. Positive Parenting Practices.

1.4.2.7. Preventative Child Care Scholarship.

1.4.3. The Contractor must provide CFS services using the Strengthening Families Framework developed by the Center for the Study of Social

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Policy (CSSP), addressing the five (5) Protective Factors which are:

1.4.3.1. Parental Resilience.

1.4.3.2. Social Connections.

1.4.3.3. Knowledge of parenting and child development.

1.4.3.4. Concrete supports in times of need.

1.4.3.5. Social and emotional competence of children.

1.4.4. The Contractor must ensure CFS services are delivered through a variety of methods, including but not limited to:

1.4.4.1. Home visiting services.

1.4.4.2. Educational workshops.

1.4.4.3. Peer-led or professionally facilitated support groups.

1.4.4.4. Parenting education and family support activities.

1.4.4.5. Trauma-informed services that recognize and respond to the impact of adverse experiences.

1.4.4.6. Access to concrete resources in times of need.

1.4.5. The Contractor must provide home visiting services that are respectful of the families served, strengths-based and family-centered, ensuring participation is voluntary and addresses each family's values, traditions, and needs.

1.4.6. The Contractor must collaborate with program participants to develop individualized, goal-oriented plans that improve economic self-sufficiency and long-term family stability. These goals may include, but are not limited to:

1.4.6.1. Planning future pregnancies.

1.4.6.2. Continuing education or vocational training.

1.4.6.3. Securing and maintaining employment.

1.4.6.4. Strengthening the family's Protective Factors.

1.4.6.5. Obtaining safe and stable housing.

1.4.6.6. Accessing community-based services and supports.

1.4.6.7. Participating in parenting education on topics such as:

1.4.6.7.1. Child development.

1.4.6.7.2. Child behavior and emotional regulation.

1.4.6.7.3. Child health and wellness.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

1.4.6.7.4. Coping strategies and problem-solving skills.

1.4.6.7.5. Home and child safety.

1.4.6.7.6. Positive parenting techniques.

1.4.7. The Contractor must promote education on health and safety topics including, but not limited to:

1.4.7.1. Providing child safety education through handouts and discussion using evidence-based curricula, including resources from the Centers for Disease Control (CDC) covering a wide range of topics such as:

1.4.7.1.1. Car seat safety and installation checks.

1.4.7.1.2. Use of safety gates and fall prevention.

1.4.7.1.3. Safe use of portable cribs and sleep environments.

1.4.7.1.4. Safe sleep practices to reduce the risk of Sudden Unexpected Infant Death Syndrome (SUID).

1.4.7.1.5. Lead poisoning prevention, including identification of environmental hazards.

1.4.7.1.6. Home safety strategies, including the use of window guards.

1.4.7.1.7. Oral health education for infants, children, and adolescents.

1.4.7.1.8. Understanding Adverse Childhood Experiences (ACEs) and building Protective Factors.

1.4.7.1.9. Smoking cessation education and referrals.

1.4.7.1.10. Educating families on the importance of primary care and preventative health services, including:

1.4.7.1.11. Access to preventative health care.

1.4.7.1.12. Immunizations.

1.4.7.1.13. Establishing a medical home for ongoing care coordination.

1.4.7.1.14. Improving child safety and health outcomes through regular well-child visits.

1.4.7.1.15. Postpartum health care follow up and planning for future pregnancies.

1.4.8. The Contractor must ensure all women have access to validated

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

screening tools, listed in 1.6.3, for prenatal and postpartum depression, and must refer all women who screen positive for maternal depression to appropriate follow-up care. The Contractor must provide support for participant enrollment in primary care and pediatric services.

1.4.9. The Contractor must complete and renew a Release of Information (ROI) form annually with all CFS participants for all programs, regardless of the type of services they are enrolled in. The ROI must include but is not limited to:

1.4.9.1. Acknowledgement of data collection within the Department's Family and Community Health Data System (FCH-DS).

1.4.9.2. Acknowledgement of sharing personal identifiable information with the Department.

1.4.9.3. Acknowledgement of the purpose of releasing data to the Department to review program outcomes and facilitate quality improvement activities.

1.4.9.4. Acknowledgement that Family Service Record outcome data will be kept and tracked for three (3) subsequent years following discharge.

1.4.9.5. All video recording, storage, access, and sharing requirements set forth elsewhere in this Scope of Services are contingent upon and governed by the participant consent requirements described in Section 1.7. The Contractor must use a paper coaching tool for participants that do not consent to video recording.

1.5. <u>CFS Newborn Navigation Services</u>

1.5.1. The Contractor must provide Newborn Navigation services as part of the CFS home visiting program. The purpose of newborn navigation services is to engage newborn families as early as possible in early childhood home visiting programs, community resources linkage, and services.

1.5.2. The Contractor must engage with families during pregnancy or within six (6) months of birth and provide at minimum one (1) voluntary CFS home visit within that timeframe. The visit must include care coordination services for pregnant and newborn families, with priority given to:

1.5.2.1. Family household at or below 250% of the federal poverty

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

level.

1.5.2.2. Single-parent households.

1.5.2.3. First time parents.

1.5.2.4. Families with other children under three (3) years of age.

1.5.2.5. Parents under twenty-five (25) years of age.

1.5.2.6. Parents with limited educational attainment.

1.5.3. The Contractor must make initial contact with families during pregnancy, prior to hospital discharge, or no later than six (6) months following birth to:

1.5.3.1. Schedule the initial home visit and collect intake prescreening information determined by the Department for follow-up; or

1.5.3.2. Provide FRC information to families who decline the home visit.

1.5.4. The Contractor must collect prescreening intake information and enter it into the FCH-DS prior to conducting the home visit.

1.5.5. For families who consent to CFS Newborn Navigation services, the Contractor must provide a Welcome Newborn Family bag, which includes Department-approved information and resources on topics such as:

1.5.5.1. WIC.

1.5.5.2. Medicaid.

1.5.5.3. Supplemental Nutrition Assistance Program (SNAP).

1.5.5.4. FRC services.

1.5.5.5. Lead poisoning prevention.

1.5.5.6. Safe sleep.

1.5.5.7. Infant nutrition.

1.5.5.8. Additional items as identified by the CFS agency and approved by the Department.

1.5.6. The Contractor must ensure enrolled families may receive up to three (3) Newborn Navigator home visits, all of which must occur within (6) months of enrollment.

1.5.7. The initial CFS Newborn Navigation home visit includes a comprehensive Family Needs Assessment and support services,

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

including but not limited to:

1.5.7.1. Maternal depression screening.

1.5.7.2. Developmental screening.

1.5.7.3. Referrals based on identified family needs.

1.5.7.4. Parent education and child safety (e.g., safe sleep, lead poisoning prevention, home safety).

1.5.7.5. Breastfeeding and lactation support.

1.5.7.6. Postpartum planning future pregnancies.

1.5.7.7. Infant feeding and nutrition support.

1.5.7.8. Positive parenting practices, including attachment.

1.5.7.9. Completion of release of information forms for referrals and sharing programmatic data with the Department.

1.5.8. Information and referral support to enroll in HFA or FCU programs. The CFS family support specialist delivering newborn navigation services must work with families to identify ongoing support needs and facilitate referrals to appropriate services and programs.

1.5.9. These include, but are not limited to:

1.5.9.1. Family Resource Center services,

1.5.9.2. Family Check Up,

1.5.9.3. Healthy Families America (HFA),

1.5.9.4. The Supplemental Nutrition Program for Woman, Infants and Children (WIC), and

1.5.9.5. Birth to Three Early Supports and Services.

1.5.10. The Contractor must ensure data related to CFS Newborn Navigation services is collected in the Department owned FCH-DS and reported in coordination with the Department.

1.5.11. The Contractor must collaborate with, build partnerships, and coordinate enrollment planning with local healthcare agencies to promote referrals from healthcare providers to CFS's Newborn Navigation services. Partners and collaboration examples include, but

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

are not limited to:

1.5.11.1. Birthing hospitals.

1.5.11.2. OB/GYN providers.

1.5.11.3. Pediatric healthcare providers.

1.5.11.4. Family medicine and primary care providers.

1.5.11.5. Community Health Centers.

1.5.12. The Contractor must offer satellite health office hours to increase accessibility, as needed.

1.5.13. The Contractor must distribute CFS Newborn Navigation informational and printed materials, as appropriate.

1.5.14. The Contractor must also collaborate and build partnerships with local early care and education programs that serve newborn families to coordinate services, prevent duplication. and enhance care coordination. These programs include, but are not limited to:

1.5.14.1. WIC.

1.5.14.2. Birth to Three Early Supports and Services.

1.5.14.3. Healthy Families America (HFA).

1.5.14.3.1. CFS staff delivering Newborn Navigation services must maintain an active collaboration with HFA, including a clearly defined referral and enrollment process to ensure that families who may be better served through HFA are appropriately connected.

1.5.14.3.2. Pregnant and newborn families identified as having high-risk factors or who meet eligibility criteria for HFA must be engaged and referred or enrolled into HFA through joint home visits and warm handoffs.

1.5.15. The Contractor must work in close collaboration with the Department's Quality Improvement Coordinator to ensure all readiness activities are completed prior to program implementation and support ongoing quality improvement and program oversight. This includes, but is not limited to:

1.5.15.1. Completion of CFS onboarding training.

1.5.15.2. Development and implementation of a family recruitment and

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

enrollment plan.

1.5.15.3. Creation of a health provider and community engagement strategy to align services and strengthen referral pathways.

1.5.15.4. Participation in monthly Community of Practice.

1.5.15.5. Execution of additional activities that support continuous quality improvement.

1.5.15.6. Collection of program data, including administration of a Department-approved post-participant survey, which may include, but is not limited to:

1.5.15.6.1. Assessment of participant knowledge related to community resources, postpartum depression, and newborn care following the initial home visit.

1.5.15.6.2. Evaluation of referrals made and connections established with community resources.

1.5.15.6.3. Measurement of participant satisfaction and likelihood to recommend Newborn Navigation services to others.

1.5.15.6.4. Collection of additional feedback to inform and enhance continuous quality improvement efforts.

1.5.16. The Contractor must collaborate with the Department to provide timely and accurate information related to program evaluation and other data requests necessary to support the Department's goals and reporting requirements. The Contractor must be prepared to share information with various divisions within the Department, including but not limited to:

1.5.16.1. Division of Public Health.

1.5.16.2. Division of Economic Stability.

1.5.16.3. Division of Long Term Supports and Services.

1.6. CFS Assessments and Referrals

1.6.1. The Contractor must actively engage and collaborate with the Department, including the Division for Children, Youth and Families (DCYF), and community partners such as schools, community mental health centers and health clinics to promote referrals into the program and prioritize enrollment of families who may be experiencing

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

circumstances that include, but are not limited to:

1.6.1.1. A previous or current founded or unfounded report to child protective services.

1.6.1.2. Having a child with low birth weight and/or neurodevelopmental delays.

1.6.1.3. A history of, or current, parental or caregiver substance abuse.

1.6.1.4. A history of, or current, mental health concerns affecting the parent, caregiver, or child(ren).

1.6.1.5. Household income at or below 250% of the Federal Poverty Level.

1.6.1.6. A family history of intimate partner violence.

1.6.1.7. Evidence of insecure attachment in the child's early years.

1.6.1.8. Pregnancy; birth of a child within the past twelve (12) months; anticipated birth of an additional child within the next six (6) months; or the birth or expected birth of a child with special healthcare needs.

1.6.1.9. Pregnant participants with prenatal substance use concerns, and families with substance-exposed infants.

1.6.1.10. Pregnant or post-partum participants with a Plan of Safe Care, or those in need of support to develop one.

1.6.1.11. Families with more than one (1) child under the age of three (3).

1.6.1.12. Experiences of physical or social isolation, or any other factors contributing to unhealthy social and emotional outcomes.

1.6.1.13. Home conditions that present a health and/or safety risk to family members.

1.6.1.14. A child or family member with chronic health, behavioral, or developmental conditions that impact parenting.

1.6.1.15. Results from the Ages and Stages Questionnaire (ASQ) or Ages and Stages Questionnaire Social Emotional (ASQ-SE) indicating developmental delays.

1.6.1.16. Families impacted by traumatic events.

1.6.1.17. Families receiving Temporary Assistance to Needy Families (TANF) cash assistance or enrolled in any

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Medicaid program.

1.6.1.18. Engagement with Substance Use Disorder (SUD) services.

1.6.2. The Contractor must complete a comprehensive Family Needs Assessment identified by the Department for each family served utilizing an intake assessment tool as identified by the Department within the first three (3) home visits, in order to identify family strengths, potential risk factors, and current and emerging needs. The Contractor must also conduct reassessments in accordance with the Family Check Up (FCU) model schedule, at a minimum of every six (6) months and again at twelve (12) months, or as otherwise directed by the Department.

1.6.3. The Contractor must utilize additional validated screening tools to support families and ensure budgeting to access tools, which may include, but are not limited to:

1.6.3.1. The Ages and Stages Questionnaires (ASQ-3 and ASQ:SE).

1.6.3.2. Brief System Inventory (BSI)

1.6.3.3. Edinburg Postnatal Depression Scale. (EPDS)

1.6.3.4. Developmental and social-emotional screenings for children ages one (1) month through five (5) years.

1.6.4. The Contractor must report on a monthly basis the number of families who received ASQ-3 and ASQ:SE screenings in a format specified by the Department.

1.6.5. The Contractor must provide expedited warm hand off referrals to appropriate community-based services and other resources that support families within their home communities, which may include, but are not limited to:

1.6.5.1. Childcare Aware of New Hampshire.

1.6.5.2. The Department's District Offices for assistance with program eligibility determinations.

1.6.5.3. Specialized Medicaid services, including Birth to Three Early Supports and Services.

1.6.5.4. The Supplemental Nutrition Program for Women, Infants and Children (WIC), Nutrition programs for breastfeeding

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

support, nutrition education, and access to healthy foods.

1.6.5.5. NH Employment Security.

1.6.5.6. Local school districts.

1.6.5.7. Family violence prevention agencies.

1.6.5.8. Mental health services.

1.6.5.9. Nutrition education and healthy foods.

1.6.5.10. Financial literacy and money management programs.

1.6.5.11. Smoking cessation programs.

1.6.5.12. Independent living skills programs.

1.6.5.13. Adult education programs.

1.6.5.14. Literacy education services.

1.6.5.15. Employment services.

1.6.5.16. Vocational rehabilitation services.

1.7. CFS Family Check Up Services

1.7.1. The Contractor must implement Northwest Prevention Science's Family Check-Up® (FCU) model, including the FCU portal. The Contactor must execute an agreement with Northwest Prevention Science Inc. before accessing the FCU portal or entering data.

1.7.2. The Contractor must provide at least one (1) trained staff per Catchment Area to implement the FCU model, within year one (1) of this Agreement. Training requirements include but are not limited to:

1.7.2.1. Motivational interviewing.

1.7.2.2. Everyday Parenting Curriculum, provided by the Department.

1.7.2.3. CFS onboarding and orientation training, provided by the Department.

1.7.3. The Contractor must work with the Department to support the implementation of the evidence-based FCU model to enhance the Department's CFS home visiting program services.

1.7.4. The Contractor must obtain all materials and resources required by the Department to successfully implement and deliver the FCU model with fidelity, including but not limited to a FCU informational flyer and/or brochure available for use with families and referral sources according to the FCU model resources.

1.7.5. The Contractor must provide access to computers, laptops, or other devices to use for video recordings, coding interaction videos,

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

downloading and compiling assessment data. To meet these requirements, the Contractor must ensure the availability of the following specific materials, tools, and resources:

1.7.5.1. Devices with video recording capability to support the following activities:

1.7.5.1.1. Contractor video recording families during family interaction tasks, which are part of the FCU assessment process.

1.7.5.1.2. Contractor video recording family session monthly to share with their Supervisor-Trainers for fidelity checks.

1.7.5.1.3. Supervisor-Trainer's video recording family sessions, supervision, and trainings for the FCU certification process.

1.7.5.2. Devices for families to complete FCU questionnaires on the FCU Portal Website online. Devices must be capable of establishing an internet connection independently or through hotspots. Contractor agrees that while families may use their own devices for the FCU questionnaire, Contractor-provided devices during assessment sessions streamline the process and increase the likelihood of questionnaire completion.

1.7.5.3. Devices must have the following capabilities:

1.7.5.3.1. Able to stand alone on a surface or on a tripod during the video recording process.

1.7.5.3.2. Secure access to prevent unauthorized viewing of confidential information, since providers will leave the room while families complete interaction tasks.

1.7.5.3.3. HIPAA-compliant video storage.

1.7.6. Contractor must provide consent forms that must cover consent for the family for video recording, with separate sections or forms addressing Family Interaction Tasks and session recordings. Consents must clearly outline:

1.7.6.1. The purpose of videos.

1.7.6.2. Who may access them.

1.7.6.3. The timeline for destruction of videos, in accordance with

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

HIPAA retention requirements .

1.7.6.4. A statement that consent to video recording is not required for program participation.

1.7.7. The Contractor must ensure all video recording adheres to the requirements outlined in Exhibit E: DHHS Information Security Requirements.

1.7.8. Contractor must provide toys for family interaction tasks, including:

1.7.8.1. Toys appropriate for children ages two (2) to nine (9) years old.

1.7.8.2. A basket large enough to hold toys for younger children.

1.7.8.3. Several puzzles of varying difficulty.

1.7.8.4. Blocks sufficient to build a tower.

1.7.8.5. Paper and colored pens or crayons.

1.7.9. The Contractor must adapt FRC documentation and intake procedures to integrate FCU model activities. This includes the completion of FCU family questionnaires via the FCU portal.

1.7.10. Until all CFS home visitors are trained to deliver FCU, the Contractor's FCU Specialist must enroll families with children ages 0-18 on a voluntary basis. The target population for the FCU model includes, and priority enrollment through an intake process is given to, families referred to CFS who meet the following criteria:

1.7.10.1. Parents or caregivers with a diagnosed mental illness, and/or families with children who have a diagnosed mental illness.

1.7.10.2. Families with a history of child abuse or neglect or at risk of foster care placement.

1.7.10.3. Families with a history of substance use disorders or those in need of substance use disorder treatment.

1.7.10.4. Families with children experiencing low student achievement.

1.7.10.5. All families with children ages 0-5.

1.7.10.6. Families who meet eligibility criteria for Healthy Families America (HFA) will be enrolled in the Department's HFA program when appropriate and available.

1.7.11. The Contractor must ensure that dedicated FCU staff and supervisors implement the model with fidelity and actively engage

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

with the Department in fidelity monitoring and quality assurance activities. Services must include, but are not limited to:

1.7.11.1. Conducting in-person visits with each FCU-enrolled family, including a minimum of three (3) structured intake and assessment sessions, followed by ongoing support and documentation. These sessions must include:

1.7.11.1.1. An Initial Intake Session to establish rapport, gather information about the family system, and identify existing strengths and challenges.

1.7.11.1.2. A Second Assessment Session in which the Contractor assists the family in completing standardized questionnaires and assessment tools to evaluate needs and areas requiring support.

1.7.11.1.3. A Third Assessment Session focused on collaborative goal setting, which must include:

1.7.11.1.4. Development of a service plan incorporating Everyday Parenting sessions;

1.7.11.1.5. Referral and linkage to appropriate community-based resources; and

1.7.11.1.6. Identification and prioritization of the family's goals and service needs.

1.7.11.2. Following the initial session, within 30 business days, the Contractor's FCU Specialist must:

1.7.11.2.1. Conduct follow-up visits using strategies from the Everyday Parenting curriculum, tailored to the results of the family's assessments.

1.7.11.2.2. Ensure accurate and timely documentation in the FCH-DS and FCU online assessment tools, summarizing recommendations and next steps.

1.7.11.2.3. Review family goals and progress on a quarterly basis in collaboration with the family.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

1.7.11.2.4. Assess the family's readiness to change as part of ongoing engagement and service planning.

1.7.12. The Contractor must ensure the following:

1.7.12.1. Provide the Department with access to video-recorded family sessions to support monitoring of implementation and fidelity to the model, upon consent granted by the family in Section 1.7.3.4.

1.7.12.2. Provide the Department with a written policy regarding the use of video recording for the purpose of home visits. The Contractor must ensure all staff and subcontractors sign a confidentiality agreement and adhere to the confidentiality policy outlined in the written policy, and notify staff and subcontractors that violations may result in disciplinary action.

1.7.12.3. Obtain and document individual consent for all video-recorded sessions, including consent to share recordings with the Department for quality improvement purposes.

1.7.12.4. Ensure that appropriate equipment is available and maintained for home visitors to conduct video recordings, such as video camera, tablet, or other device with recording capabilities. The Contractor must ensure that staff does not use personal cell phones or other personal devices to conduct video recording.

1.7.13. The Contractor must only use marketing materials that have been reviewed and approved by the Department.

1.7.14. The Contractor must collaborate with the Department's CFS Program Manager, Quality Improvement and Training Coordinator, and FCU Model experts to ensure all readiness activities are completed prior to program implementation, including but not limited to:

1.7.14.1. Completion of FCU Model training.

1.7.14.2. Completion of Everyday Parenting Curriculum training.

1.7.14.3. Completion of Motivational Interviewing training.

1.7.14.4. Implementation of data collection processes, including a Department-approved participant post-survey.

1.7.14.5. Participation in monthly Supervisor Consultation, facilitated by the Department, to support implementation

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

and fidelity to the FCU model.

1.8. Staffing and Training

1.8.1. The Contractor must designate at least one (1) dedicated FCU Specialist position as part of the CFS home visiting program. The FCU Specialist must initially allocate a minimum of 20% of their workload to family enrollment and model implementation activities.

1.8.2. The Contractor must:

1.8.2.1. Ensure that all relevant staff participate in and complete these trainings as scheduled, and maintain documentation of completion for Department review.

1.8.2.2. Ensure that all relevant staff are trained in Motivational Interviewing.

1.8.2.3. Budget for additional staff development opportunities based on the needs of their team, as identified in collaboration with the Department's Quality Improvement and Training Coordinator.

1.8.3. The Contractor must ensure the FCU Specialist transitions to dedicating 100% of their workload to the implementation of the FCU model by June 30, 2027.

1.8.4. The Contractor may elect to designate more than one (1) FCU Specialist to implement the model during the first year of program implementation.

1.8.5. The Contractor must identify additional CFS staff to participate in being trained to implement the FCU model in year two and again in year three of program implementation, to support sustainability and build long-term capacity.

1.8.6. The Contractor must ensure all CFS home visitors complete Department provided training in and utilize the Everyday Parenting Curriculum and CFS Program Manual, which is:

1.8.6.1. The Everyday Parenting Manual, Everyday Parenting: A Professional's Guide to Building Family Management Skills (2nd edition). Available at www.researchpress.com

1.8.7. The Contractor must ensure all CFS home visitors are trained in core CFS competencies and collaborate with the Department's Continuous Quality Improvement (CQI) and training coordinator to implement a comprehensive staff training plan that ensures a qualified workforce and identifies training needs and gaps. CFS home visitors must complete Department provided training which will include at a minimum,

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Everyday Parenting and CFS onboarding training.

1.8.8. The Contractor must identify a qualified supervisor for the FCU staff be trained in the FCU model and be responsible for ensuring adherence to the model's implementation standards. The FCU supervisor must fulfill the following responsibilities:

1.8.8.1. Participate in monthly FCU supervisor consultation meetings, as scheduled by the Department, to enhance supervisory capacity and support fidelity monitoring of the FCU implementation.

1.8.8.2. The Contractor must ensure the FCU supervisor is trained and certified by Northwest Prevention Science as a FCU supervisor. The FCU supervisor must provide implementation support to FCU staff, including but not limited to individualized consultation, direct observation, and performance evaluation, to ensure fidelity to the model.

1.8.9. The Contractor must ensure that both the FCU specialist and FCU supervisor receive training in the Family Check-Up model, Motivational Interviewing, Newborn Navigation Core Training, and Everyday Parenting curriculum, and that they meet the minimum educational qualifications required for their roles.

1.8.10. The Contractor must use the FCU model, Motivational Interviewing and Everyday Parenting curriculum training to support effective implementation.

1.8.11. The Contractor must ensure that all staff, subcontractors, and volunteers undergo the required criminal background checks registry checks, as described in Section 1.12.

1.8.12. If the Contractor provides transportation for individuals served under this Agreement, the Contractor must ensure:

1.8.12.1. The enrolled parent or caregiver must be present for all sessions.

1.8.12.2. All drivers have a valid State Issued and a safe driving record;

1.8.12.2.1. All vehicles are approved by the Contractor and meet applicable safety standards;

1.8.12.2.2. Compliance with all applicable local, state, and federal transportation safety rules and standards;

1.8.12.2.3. Proof of valid automobile insurance is provided to the Department that includes bodily injury and

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

property damage in amounts of not less than $100,000 per occurrence and $300,000 aggregate or excess, for all owned, hired, or non-owned vehicles used to provide transportation.

1.8.13. The Contractor must ensure staff complete required training in the principles of family support, maternal and child health, HIPAA as well as the child welfare system, with concentrations in service array and working in multidisciplinary teams.

1.8.14. The Contractor must consistently engage in purposeful staff development activities that support professional growth and improve the quality of services provided. These activities must include, but are not limited to, training and enrichment in the following areas: Skills necessary to understand and respond to the unique needs, strengths, and resources of the families and communities served.

1.8.14.1. The ability to exercise empathy, with an understanding of the complex family dynamics and stressors experienced by parents and caregivers.

1.8.14.2. The use of effective, evidence-informed home visiting practices, including strategies that are grounded in research and adapted to family needs, as well as standards for documentation and reporting.

1.8.15. The Contractor must provide an adequate number of home visitors to implement the CFS program, as approved by the Department. All staffing vacancies, transitions, or changes in personnel assignments must be reported to the Department in a timely manner.

1.8.16. The Contractor must ensure the CFS program director, supervisor, or program managers have:

1.8.16.1. A Bachelor's degree in public health, early childhood, social work, human services administration, or a related field focused on supporting children and families, with four (4) years of experience working with families and children in a social service, home health, or other early childhood program setting, including supervisory experience;

1.8.16.2. An Associate degree with five (5) years of prior experience working with families and children in a social service, home health, or early childhood program setting, including supervisory experience;

1.8.16.3. Or at a minimum, high school diploma or equivalent with six (6) years of relevant lived and professional experience working with families and children in a social service, home

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

health, or other early childhood program setting, including supervisory responsibilities, and written approval from the Department to fulfill the duties of the position.

1.8.17. The Contractor must ensure CFS Home Visitors have:

1.8.17.1. An Associate degree with four (4) years of prior experience working with families and children in a social service, home health, or other early childhood program setting;

1.8.17.2. Or at a minimum, a high school diploma or equivalent with five (5) years of experience providing services to families in a social service, home health, or other early childhood program setting; and demonstrated lived and professional experience aligned with this role, with written approval from the Department.

1.8.18. The Contractor must ensure the CFS Family Check Up Home Visitor has at a minimum:

1.8.18.1. A Bachelor's degree or higher; and

1.8.18.2. Two (2) years of experience providing services to families in a social service, home health, or other early childhood program setting.

1.8.18.2.1. If a Bachelor's-level staff is not available, the Contractor may recommend qualified team members to perform FCU. A training plan and summary of relevant skills and clinical experience must be submitted with the application and approved by the Department.

1.8.19. The Contractor must ensure all CFS home visitors across all CFS programs are trained in the "Everyday Parenting" curriculum and Motivational Interviewing and adhere to its requirements within six (6) months of program implementation.

1.8.19.1. Although not required, the Contractor may allocate funding to train staff in additional evidence-based early childhood curricula, such as Growing Great Kids or Parents as Teachers.

1.8.20. The Contractor must demonstrate capacity and readiness to be trained in and implement the Family Check Up model.

1.8.21. Staffing requirements are subject to change, contingent upon the Department's written approval.

1.9. Reporting

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

1.9.1. The Contractor must submit comprehensive quarterly reports highlighting program activities by the 15th calendar day of the month following the end of each reporting period. The first report is due by October 15, 2026, and must include:

1.9.1.1. The progress in achieving the stated outcomes; and

1.9.1.2. Feedback from families regarding the effectiveness, accessibility, and satisfaction of the services provided through participant surveys or post service delivery interviews.

1.9.2. The Contractor must submit an annual performance report to the Department by July 31st of each year, with the first report due on July 31, 2027, which includes, but is not limited to:

1.9.2.1. A summary of program accomplishments and key activities.

1.9.2.2. Staff training plan for each CFS home visitor.

1.9.2.3. Recommendations for service development, program enhancements, and outcome improvements.

1.9.2.4. Identification of systemic barriers impacting service delivery or access.

1.9.2.5. Results of family satisfaction surveys and analysis of trends.

1.9.3. The Contractor must transmit all data in a secure and encrypted format approved by the Department.

1.9.4. The Contractor must designate an FRC staff member to serve as the primary liaison for all programmatic communication between the Department and the Contractor, including, but not limited to:

1.9.4.1. Clinical updates.

1.9.4.2. Program announcements.

1.9.4.3. Reporting changes, errors, and requests.

1.9.4.4. Contract oversight.

1.9.4.5. Oversight of program operations and compliance

1.9.5. The Contractor must evaluate both the progress of parents and caregivers and the effectiveness of the programs and services provided.

1.9.6. The Contractor must maintain a comprehensive and confidential Family Service Record for each family, in compliance with all Health Insurance Portability and Accountability Act (HIPAA) Privacy Rules. The Family Service Record must include, but is not limited to:

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

1.9.6.1. Participant names (Parent(s) and Child(ren)).

1.9.6.2. Participant DOBs (Parent (s) and Child(ren)).

1.9.6.3. Residence.

1.9.6.4. Primary language spoken in the home.

1.9.6.5. Educational level of parent(s) or guardian(s).

1.9.6.6. Digital Resources (phone, laptop, cell).

1.9.6.7. Source of referral.

1.9.6.8. Referral details and contact information.

1.9.6.9. Signed release of information form(s).

1.9.6.10. Household income.

1.9.6.11. Household size.

1.9.6.12. Employment status of parent(s) or guardian(s).

1.9.6.13. Access to prenatal and post-partum healthcare.

1.9.6.14. Home visits conducted and screening tools completed.

1.9.6.15. Topics reviewed during service delivery, including but not limited to:

1.9.6.15.1. Maternal depression screening.

1.9.6.15.2. Planning for future pregnancies.

1.9.6.15.3. Positive parenting practices.

1.9.6.15.4. Breastfeeding/lactation support.

1.9.6.15.5. Nutrition.

1.9.6.15.6. Child health.

1.9.6.15.7. Maternal health and self-care.

1.9.6.15.8. Referrals made for service linkage, including but not limited to:

1.9.6.15.9. Concrete supports (e.g., housing, utilities, transportation).

1.9.6.15.10. Childcare resources.

1.9.6.15.11. Healthcare access and coordination.

1.9.6.15.12. Community-based supports and services.

1.9.6.15.13. Home visiting programs and service type.

1.9.6.15.14. Discharge date and reason for discharge.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

1.9.6.15.15. Completion of post-service surveys.

1.9.6.15.16. Family needs assessment.

1.9.6.15.17. Child/Family Individualized Service Plan (ISP).

1.9.6.15.18. Documentation of prenatal and postpartum healthcare received.

1.9.6.15.19. Medicaid and other health insurance coverage.

1.9.6.15.20. Linkages with community-based resources.

1.9.6.16. Receipt of public benefits, including but not limited to:

1.9.6.16.1. SNAP.

1.9.6.16.2. New Hampshire Child Care Scholarship.

1.9.6.16.3. Medicaid.

1.9.6.16.4. Social Security Disability Insurance (SSDI).

1.9.6.16.5. Supplemental Security Income (SSI).

1.9.6.16.6. Temporary Assistance for Needy Families (TANF).

1.9.6.16.7. Special Supplemental Nutrition Program for WIC.

1.9.6.17. Participant service data, including but not limited to:

1.9.6.17.1. Date of service.

1.9.6.17.2. Participants present during service delivery.

1.9.6.17.3. Type of service provided and topics reviewed.

1.10. Performance Measures

1.10.1. The Contractor must provide performance data in a format and at a frequency specified by the Department. The following performance measures will be used to evaluate program effectiveness:

1.10.1.1. A minimum of 80% of participants must report a favorable rating on satisfaction surveys administered by the Contractor.

1.10.1.2. At least 70% of referred families must enroll in services within 30 days of referral.

1.10.1.3. A minimum of 65% of enrolled families must complete the full

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

service cycle as defined by the program model.

1.10.2. The Contractor must demonstrate annual improvement in outreach to high-risk populations, as measured by year-over-year increases in engagement rates.

1.10.3. The Contractor must submit data to support evaluation of long-term outcomes, including family stability, child health indicators, and service retention, as defined by the Department.

1.11. Meetings, Collaboration, and Data Sharing

1.11.1. The Contractor must participate in regular performance review meetings with the Department and peer providers to analyze data, share best practices, and identify areas for improvement.

1.11.2. The Contractor must collect and transmit all required data, including client-level demographic, service utilization, and outcome data, in a secure format specified by the Department.

1.11.3. The Contractor must participate in monthly check-in meetings and Communities of Practice (CoP) for the Department's Comprehensive Family Support (CFS) home visiting program, as scheduled by the Department. CoPs are structured, recurring gatherings of professionals and stakeholders involved in CFS to share best practices, address challenges, and support continuous quality improvement.

1.11.4. The Contractor must participate in monthly meetings with the Department, or as otherwise requested by the Department.

1.11.5. The Contractor may be required to participate in on-site program and file reviews conducted by the Department, as requested.

1.11.6. The Contractor must participate in monthly fidelity reviews of family sessions with the Department for the Family Check Up model.

1.11.7. The Contractor may be required to facilitate annual file reviews conducted by the Department, or as otherwise requested, which may include, but are not limited to:

1.11.7.1. Compliance and documentation standards.

1.11.7.2. Service Delivery alignment and model fidelity.

1.11.7.3. Verification of data entry and reporting accuracy.

1.11.8. The Contractor must ensure Family Service Records are accurately summarized and entered into the Department's Family and Community Health Data System (FCH-DS) in real time and must comply with the confidentiality provisions of RSA 170-G:8-a.

1.11.9. The Contractor must provide the Department with a list of staff (End

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Users, as defined in Exhibit D) who will be responsible for entering Family Service Record data into the FCH-DS.

1.11.10. The Contractor must notify the Department immediately, and no more than 24 hours of staff changes, to ensure access to the FCH-DS is removed in a timely manner.

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

1.11.12. The Contractor must utilize the Department's closed loop referral system, at an agreed upon start date, whenever applicable to the services they provide for referrals between health and/or human service providers within New Hampshire for referral management and client care coordination. Utilization includes inputting information and data as necessary into the Department's referral solution as part of the NH Care Connections Network to facilitate referrals to participating providers, signing required Network Participation Agreement(s), and obtaining a participant specific consent for services.

1.11.13. The Contractor must utilize the Department's admission, discharge, transfer, and shared care insights solution whenever applicable to the services they provide for client care coordination and management between health providers within New Hampshire. Utilization includes inputting information and data as necessary into the Department's admission, discharge, transfer, and shared care insights platform as part of the NH Care Connections Network to facilitate referrals to participating providers and signing required Participation Agreement(s) for the admission, discharge, transfer, and shared care insights solution

1.11.13.1. The Department's contracts with the closed loop referral and admission, discharge, and transfer vendors incorporate the costs of developing and maintaining the standards-based interface from which the Contractor may choose to configure their systems to communicate securely with the Department's NH Care Connections Network solutions. The Contractor may choose to interface with the Department's closed loop referral and/or the admission discharge transfer solution utilizing a Smart on FHIR or HL-7 standard interface process to connect individuals to health and social service providers. The costs for the Contractor's system or team to develop or utilize the standard Smart on FHIR or HL-7 based interface are the sole responsibility of the Contractor.

1.12. Background Checks

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

1.12.1. Prior to permitting any individual to provide services under this Agreement, the Contractor must ensure that said individual has undergone:

1.12.1.1. A criminal background check, at the Contractor's expense, and has no convictions for crimes that represent evidence of behavior that could endanger individuals served under this Agreement;

1.12.1.2. A name search of the Department's Bureau of Adult and Aging Services (BAAS) State Registry, pursuant to RSA 161-F:49, with results indicating no evidence of behavior that could endanger individuals served under this Agreement; and

1.12.1.3. A name search of the Department's DCYF Central Registry pursuant to RSA 169-C:35, with results indicating no evidence of behavior that could endanger individuals served under this Agreement.

1.13. Confidential Data

1.13.1. The Contractor must meet all information security and privacy requirements as set by the Department and in accordance with the Department's Information Security Requirements Exhibit as referenced below.

1.13.2. The Contractor must ensure any individuals involved in delivering services through this Agreement contract 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 Information Security Requirements Exhibit. The Contractor must ensure said individuals have a justifiable business need to access confidential data. The Contractor must provide attestations upon Department request.

1.14. Privacy Impact Assessment

1.14.1. Upon request, the Contractor must allow and assist the Department in conducting a Privacy Impact Assessment (PIA) of its system(s)/application(s)/web portal(s)/website(s) or Department system(s)/application(s)/web portal(s)/website(s) hosted by the Contractor, if Personally Identifiable Information (PII) is collected, used, accessed, shared, or stored. To conduct the PIA the Contractor must provide the Department access to applicable systems and documentation sufficient to allow the Department to assess, at

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

minimum, the following:

1.14.1.1. How PII is gathered and stored;

1.14.1.2. Who will have access to PII;

1.14.1.3. How PII will be used in the system;

1.14.1.4. How participant consent will be achieved and revoked; and

1.14.1.5. Privacy practices.

1.14.2. 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.

1.15. Department Owned Devices, Systems and Network Usage

1.15.1. Contractor End Users, defined in the Department's Information Security Requirements Exhibit that is incorporated into this Agreement, authorized by the Department's Information Security Office to use a Department issued device (e.g. computer, tablet, mobile telephone) or access the Department network in the fulfilment of this Agreement, each must:

1.15.1.1. Sign and abide by applicable Department and New Hampshire Department of Information Technology (NH DoIT) use agreements, policies, standards, procedures and guidelines, and complete applicable trainings as required;

1.15.1.2. Use the information that they have permission to access solely for conducting official Department business and agree that all other use or access is strictly forbidden including, but not limited, to personal or other private and non-Department use, and that at no time shall they access or attempt to access information without having the express authority of the Department to do so;

1.15.1.3. Not access or attempt to access information in a manner inconsistent with the approved policies, procedures, and/or agreement relating to system entry/access;

1.15.1.4. Not copy, share, distribute, sub-license, modify, reverse engineer, rent, or sell software licensed, developed, or being evaluated by the Department, and at all times must use utmost care to protect and keep such software strictly confidential in accordance with the license or any other agreement executed by the Department;

1.15.1.5. Only use equipment, software, or subscription(s) authorized by the Department's Information Security Office or

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

designee;

1.15.1.6. Not install non-standard software on any Department equipment unless authorized by the Department's Information Security Office or designee;

1.15.1.7. Agree that email and other electronic communication messages created, sent, and received on a Department-issued email system are the property of the Department of New Hampshire and to be used for business purposes only. Email is defined as "internal email systems" or "Department-funded email systems."

1.15.1.8. Agree that use of email must follow Department and NH DoIT policies, standards, and/or guidelines; and

1.15.1.9. Agree when utilizing the Department's email system:

1.15.1.9.1. To only use a Department email address assigned to them with a "@ affiliate.DHHS.NH.Gov".

1.15.1.9.2. Include in the signature lines information identifying the End User as a non-Department workforce member; and

1.15.1.9.3. Ensure the following confidentiality notice is embedded underneath the signature line:

CONFIDENTIALITY NOTICE: "This message may contain information that is privileged and confidential and is intended only for the use of the individual(s) to whom it is addressed. If you receive this message in error, please notify the sender immediately and delete this electronic message and any attachments from your system. Thank you for your cooperation."

1.15.1.10. Contractor End Users with a Department issued email, access or potential access to Confidential Data, and/or a workspace in a Department building/facility, must:

1.15.1.10.1. Complete the Department's Annual Information Security & Compliance Awareness Training prior to accessing, viewing, handling, hearing, or transmitting Department Data or Confidential Data.

1.15.1.10.2. Sign the Department's Business Use and Confidentiality Agreement and Asset Use Agreement, and the NH DoIT Department wide

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Computer Use Agreement upon execution of the Agreement and annually thereafter.

1.15.1.10.3. Only access the Department's intranet to view the Department's Policies and Procedures and Information Security webpages.

1.15.1.10.4. Contractor agrees, if any End User is found to be in violation of any of the above terms and conditions, said End User may face removal from the Agreement, and/or criminal and/or civil prosecution, if the act constitutes a violation of law.

1.15.1.10.5. Contractor agrees to notify the Department a minimum of three business days prior to any upcoming transfers or terminations of End Users who possess Department credentials and/or badges or who have system privileges. If End Users who possess Department credentials and/or badges or who have system privileges resign or are dismissed without advance notice, the Contractor agrees to notify the Department's Information Security Office or designee immediately.

1.16. Contract End-of-Life Transition Services

1.16.1. General Requirements

1.16.1.1. If applicable, upon early termination or expiration of the Agreement the parties agree to cooperate in good faith to effectuate a secure transition of the services ("Transition Services") from the Contractor to the Department and, if applicable, the new Contractor ("Recipient") engaged by the Department to assume the services. 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 Recipient to develop a Data Transition Plan (DTP). The Department shall provide the DTP template to the Contractor.

1.16.1.2. The Contractor must assist the Recipient, in connection with the transition from the performance of Services by the Contractor and its End Users 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

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

any 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 and assistance to any third-party consultants engaged by Recipient in connection with the Transition Services.

1.16.1.3. If a system, database, hardware, software, and/or software licenses (Tools) was purchased or created to manage, track, and/or store Department Data in relationship to this contract said Tools will be inventoried and returned to the Department, along with the inventory document, once transition of Department data is complete. The internal planning of the Transition Services by the Contractor and its End Users shall be provided to the Department and if applicable the Recipient in a timely manner. Any such Transition Services shall be deemed to be Services for purposes of this Agreement.

1.16.1.4. In the event the data Transition extend beyond the end of the Agreement, the Contractor agrees that the Information Security Requirements, and if applicable, the Department's Business Associate Agreement terms and conditions remain in effect until the Data Transition is accepted as complete by the Department.

1.16.1.5. In the event the Contractor has comingled Department Data and the destruction or Transition of said data is not feasible, the Department and Contractor will jointly evaluate regulatory and professional standards for retention requirements prior to destruction, refer to the terms and conditions of the Department's DHHS Information Security Requirements Exhibit.

1.17. Completion of Transition Services

1.17.1. Each service or transition phase shall be deemed completed (and the transition process finalized) at the end of fifteen (15) business days after the product, resulting from the Service, is delivered to the Department and/or the Recipient in accordance with the mutually agreed upon Transition plan, unless within said fifteen (15) business day term the Contractor notifies the Department of an issue requiring additional time to complete said product.

1.17.2. Once all parties agree the data has been migrated the Contractor will have thirty (30) days to destroy the data per the terms and conditions

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

of the Department's Information Security Requirements Exhibit.

1.18. Disagreement over Transition Services Results

1.18.1. In the event the Department is not satisfied with the results of the Transition Service, the Department shall notify the Contractor, in writing, stating the reason for the lack of satisfaction within fifteen (15) business days of the final product or at any time during the data Transition process. The Parties shall discuss the actions to be taken to resolve the disagreement or issue. If an agreement is not reached, at any time the Department shall be entitled to initiate actions in accordance with the Agreement.

2. Exhibits Incorporated

2.1. The Contractor must comply with all Exhibit D Federal Requirements, which are attached hereto and incorporated by reference herein.

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

2.3. 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 F, Business Associate Agreement, which has been executed by the parties.

3. Additional Terms

3.1. Impacts Resulting from Court Orders or Legislative Changes

3.1.1. 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.

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

3.2.1. The Contractor must submit:

3.2.1.1. A detailed description of the language assistance services, within ten (10) days of the Effective Date of the Agreement, 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

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

who have speech challenges.

3.2.1.2. A written attestation, within forty-five (45) days of the Effective Date of the Agreement and annually thereafter, that all personnel involved the provision of services to individuals under this Agreement have completed, within the last twelve (12) months, the Contractor Required Training Video on Civil Rights-related Provisions in DHHS Procurement Processes, which is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors); and

3.2.1.3. The Department's Federal Civil Rights Compliance Checklist within ten (10) days of the Effective Date of the Agreement. The Federal Civil Rights Compliance Checklist must have been completed within the last twelve (12) months and is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors).

3.3. Credits and Copyright Ownership

3.3.1. 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."

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

3.3.3. The Department must retain copyright ownership for any and all original materials produced, including, but not limited to reports, protocols, guidelines, brochures, posters, and resource directories.

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

3.4. Operation of Facilities: Compliance with Laws and Regulations

3.4.1. 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

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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.

4. Records

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

4.1.1. 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.

4.1.2. 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.

4.2. 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.

4.3. If, upon further review, the Department must disallow any expenses claimed by the Contractor as costs hereunder, the Department retains the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Payment Terms

1. This Agreement is funded by:
   1.1. 73% Federal funds, TEMPORARY ASSISTANCE FOR NEEDY FAMILIES, as awarded on choose a date, December 16, 2025 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.558, FAIN 2601NHTANF.
   1.2. 16% Federal funds, SOCIAL SERVICES BLOCK GRANT, as awarded on choose a date, October 1, 2023 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.667, FAIN 2501NHSOSR.
   1.3. 11% General funds.
2. For the purposes of this Agreement the Department has identified:
   2.1. The Contractor as a Subrecipient, based on criteria specified in 2 CFR §200.331.
   2.2. The Agreement as NON-R&D, in accordance with 2 CFR §200.332.
   2.3. The Indirect Cost Rate for this Agreement in the attached Budget Sheet(s).
3. Payment shall be on a cost reimbursement basis for actual allowable expenditures incurred under this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1, Budget through Exhibit C-2.
4. The Contractor shall submit an invoice 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:
   4.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.
   4.2. Is submitted in a format as provided by or otherwise acceptable to the Department.
   4.3. Identifies and requests payment in accordance with Section 3 above.
   4.4. Includes supporting documentation with each invoice, including, but not limited to, proof of expenditures, receipts for purchases, time sheets, and payroll records, as applicable.
   4.5. Is completed, dated and returned to the Department to initiate payment.
   4.6. Is assigned an electronic signature and is emailed to BFAinvoices@dhhs.nh.gov or mailed to:

   Financial Manager
   Department of Health and Human Services
   129 Pleasant Street

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Concord, NH 03301

5. The Department shall make payments to the Contractor within thirty (30) calendar days of receipt of each invoice and any required supporting documentation, subsequent to approval of the submitted invoice.

6. The final invoice and any required supporting documentation shall be due to the Department no later than forty (40) calendar days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.

7. Notwithstanding Paragraph 18 of the General Provisions Form P-37, changes limited to adjusting direct and indirect cost 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.

8. If applicable, the Contractor must notify the Department of any revisions, updates, or extensions to the Contractor's federal negotiated indirect cost rate agreement (NICRA) by submitting a copy of the revised NICRA to the Department within five (5) business days of the Contractor's receipt of the NICRA from the cognizant federal agency.

9. Audits

9.1. The Contractor must email an annual audit to dhhs.act@dhhs.nh.gov if any of the following conditions exist:

9.1.1. Condition A - The Contractor is subject to a Single Audit pursuant to 2 CFR 200.501 Audit Requirements.

9.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b.

9.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

9.2. If Condition A exists, the Contractor must 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.

9.2.1. The Contractor must submit a copy of any Single Audit findings and any associated corrective action plans. The Contractor

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

must submit quarterly progress reports on the status of implementation of the corrective action plan.

9.3. If Condition B or Condition C exists, the Contractor must submit an annual financial audit performed by an independent CPA within 120 days after the close of the Contractor's fiscal year.

9.4. The Contractor, regardless of the funding source and/or whether Conditions A, B, or C exist, may be required to submit annual financial audits performed by an independent CPA upon request by the Department.

9.5. 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 must 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, within sixty (60) days.

10. If applicable, the Contractor must request disposition instructions from the Department for any equipment, based on 2 CFR 200.313, purchased using funds provided under this Agreement.

Docusign Envelope ID: 90D4C89E-45B5-89F3-81A2-50334B3A8C48

New Hampshire Department of Health and Human Services			
Contractor Name:	*The Family Resource Center at Gorham*		
Budget Request for:	*Comprehensive Family Support (Berlin)*		
Budget Period:	*7/1/2026-6/30/28*		
Indirect Cost Rate (if applicable)	10.00%		
Line Item	**Program Cost - Funded by DHHS - SFY 27**	**Program Cost - Funded by DHHS - SFY 28**	**Program Cost - Funded by DHHS - SFY 29**
1. Salary & Wages	$334,798	$342,839	$349,885
2. Fringe Benefits	$66,938	$68,568	$69,977
3. Consultants	$3,000	$2,500	$3,000
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$2,942	$1,881	$871
5.(a) Supplies - Educational	$500	$500	$500
5.(b) Supplies - Lab	$0	$0	$0
5.(c) Supplies - Pharmacy	$0	$0	$0
5.(d) Supplies - Medical	$0	$0	$0
5.(e) Supplies - Office	$2,500	$2,000	$2,000
6. Travel	$20,000	$21,000	$22,000
7. Software	$3,500	$3,000	$3,000
8. (a) Other - Marketing/Communications	$2,446	$2,017	$2,283
8. (b) Other - Education and Training	$5,000	$2,500	$2,500
8. (c) Other - Other (specify below)	$0	$0	$0
Family Check Up/Online Training Portal (per staff)	$2,500	$2,000	$2,500
audit	$3,000	$3,000	$3,000
Rent	$25,000	$26,500	$27,000
Phone	$5,000	$5,500	$5,063
Postage	$100	$100	$100
Liabiity Insurance	$1,000	$1,200	$1,300
9. Subrecipient Contracts	$0	$0	$0
Total Direct Costs	$478,224	$485,105	$494,979
Total Indirect Costs	$47,528	$48,322	$49,411
Subtotals	$525,752	$533,427	$544,390
		TOTAL	**$ 1,603,569**

Initial

Contractor Initials: GF

Date: 5/8/2026

Exhibit C-2 Budget

New Hampshire Department of Health and Human Services			
Contractor Name:	*The Family Resource Center at Gorham*		
Budget Request for:	*Comprehensive Family Support (Littleton)*		
Budget Period:	*7/1/2026-6/30/2028*		
Indirect Cost Rate (if applicable)	10.00%		
Line Item	**Program Cost - Funded by DHHS - SFY 27**	**Program Cost - Funded by DHHS - SFY 28**	**Program Cost - Funded by DHHS - SFY 29**
1. Salary & Wages	$188,628	$193,100	$196,835
2. Fringe Benefits	$38,631	$39,404	$40,192
3. Consultants	$4,000	$4,000	$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.	$2,543	$1,994	$1,860
5.(a) Supplies - Educational	$1,000	$1,000	$1,000
5.(b) Supplies - Lab	$0	$0	$0
5.(c) Supplies - Pharmacy	$0	$0	$0
5.(d) Supplies - Medical	$0	$0	$0
5.(e) Supplies - Office	$2,000	$1,000	$1,200
6. Travel	$20,000	$20,918	$21,259
7. Software	$2,000	$2,000	$2,000
8. (a) Other - Marketing/Communications	$2,500	$2,500	$2,000
8. (b) Other - Education and Training	$1,300	$1,000	$1,000
8. (c) Other - Other (specify below)	$0	$0	$0
Family Check Up/Online Training Portal (per staff)	$2,250	$1,500	$2,000
audit	$2,000	$2,000	$2,000
rent	$23,000	$24,000	$25,000
phone	$4,700	$4,400	$4,500
postage	$80	$80	$100
Liability Insurance	$1,100	$1,100	$1,200
9. Subrecipient Contracts	$0	$0	$0
Total Direct Costs	$295,732	$299,996	$306,146
Total Indirect Costs	$29,319	$29,800	$30,429
Subtotals	$325,051	$329,796	$336,574
		TOTAL	**$ 991,421**

Contractor Initials: GF (Initial)

Date: 4/30/2026

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

New Hampshire Department of Health and Human Services
Exhibit D – Federal Requirements

SECTION A: CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Contractor 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 CONTRACTORS 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 contractors (and by inference, sub- contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a contractor (and by inference, 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 Agreement 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 Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, 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 Contractor 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 Contractor'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 Contractor'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 Agreement 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 Agreement, 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;

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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 contract officer on whose contract activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected Agreement;

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 Contractor may insert in the space provided below the site(s) for the performance of work done in connection with the specific Agreement.

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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

SECTION B: CERTIFICATION REGARDING LOBBYING

The Contractor 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 Byrd Anti-Lobbying Amendment (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, loan, or cooperative agreement (and by specific mention 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, loan, or cooperative agreement (and by specific mention sub- contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, see https://omb.report/icr/201009-0348-022/doc/20388401

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, 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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

SECTION C: 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 12689 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 Agreement, 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 Agreement 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 https://www.govinfo.gov/app/details/CFR-2004-title45-vol1/CFR-2004-title45-vol1-part76/context.

6. The prospective primary participant agrees by submitting this Agreement 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) https://www.ecfr.gov/current/title-22/chapter-V/part-513.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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 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 (Agreement) 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 (Agreement), 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 (Agreement).

14. The prospective lower tier participant further agrees by submitting this proposal (Agreement) 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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

SECTION D: CERTIFICATION OF COMPLIANCE WITH FEDERAL REQUIREMENTS

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:

The Contractor will comply, and will require any subcontractors to comply, with any applicable federal requirements, which may include but are not limited to:

1. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR 200).
2. 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;
3. 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;
4. 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);
5. 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;
6. 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;
7. 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;
8. 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;
9. 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;
10. 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.
11. The Clean Air Act (42 U.S.C. 7401-7671q.) which seeks to protect human health and the environment from emissions that pollute ambient, or outdoor, air.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

12. The Clean Water Act (33 U.S.C. 1251-1387) which establishes the basic structure for regulating discharges of pollutants into the waters of the United States and regulating quality standards for surface waters.
13. Civilian Agency Acquisition Council and the Defense Acquisition Regulations Council (Councils) (41 U.S.C. 1908) which establishes administrative, contractual, or legal remedies in instances where contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate.
14. Contract Work Hours and Safety Standards Act (40 U.S.C. 3701–3708) which establishes that all contracts awarded by the non-Federal entity in excess of $100,000 that involve the employment of mechanics or laborers must include a provision for compliance with 40 U.S.C. 3702 and 3704, as supplemented by Department of Labor regulations (29 CFR Part 5).
15. Rights to Inventions Made Under a Contract or Agreement 37 CFR § 401.2 (a) which establishes the recipient or subrecipient wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that “funding agreement,” the recipient or subrecipient must comply with the requirements of 37 CFR Part 401, “Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements,” and any implementing regulations issued by the awarding agency.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, or government wide suspension or debarment.

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 Agreement, the Contractor agrees to comply with the provisions indicated above.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

SECTION E: 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 Agreement, 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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

SECTION F: 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 $30,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $30,000 or more. If the initial award is below $30,000 but subsequent grant modifications result in a total award equal to or over $30,000, 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 sub award 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 Entity Identifier (SAM UEI; DUNS#)
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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

New Hampshire Department of Health and Human Services
Exhibit D – Federal Requirements

FORM A

As the Grantee 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: MBDNW2MA2D73

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: _____

Contractor Name: The Family Resource Center at Gotham

4/30/2026
Date:

Signed by:
Gabrielle Flanders
89C117DF1D6D4B6...
Name: Gabrielle Flanders
Title: Executive Director

New Hampshire Department of Health and Human Services

Exhibit E

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

Contractor Initials Initial GF

Date 4/30/2026

or misplacement of hardcopy documents, and misrouting of physical or electronic 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.

Contractor Initials Initial GF

Date 4/30/2026

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.

Contractor Initials Initial GF

Date 4/30/2026

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, antihacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a whole, must have aggressive intrusion-detection and firewall protection.

Contractor Initials Initial GF

Date 4/30/2026

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 Initial GF

Date 4/30/2026

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

Contractor Initials Initial GF

Date 4/30/2026

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

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.

Contractor Initials Initial GF

Date 4/30/2026

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;

Initial

Contractor Initials GF

Date 4/30/2026

4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and
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

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement (Form P-37) ("Agreement"), and any of its agents who receive use or have access to protected health information (PHI), as defined herein, shall be referred to as the "Business Associate." The State of New Hampshire, Department of Health and Human Services, "Department" shall be referred to as the "Covered Entity," The Contractor and the Department are collectively referred to as "the parties."

The parties agree, to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191, the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162, and 164 (HIPAA), provisions of the HITECH Act, Title XIII, Subtitle D, Parts 1&2 of the American Recovery and Reinvestment Act of 2009, 42 USC 17934, et sec., applicable to business associates, and as applicable, to be bound by the provisions of the Confidentiality of Substance Use Disorder Patient Records, 42 USC s. 290 dd-2, 42 CFR Part 2, (Part 2), as any of these laws and regulations may be amended from time to time.

(1) Definitions

a. The following terms shall have the same meaning as defined in HIPAA, the HITECH Act, and Part 2, as they may be amended from time to time:

"Breach," "Designated Record Set," "Data Aggregation," Designated Record Set," "Health Care Operations," "HITECH Act," "Individual," "Privacy Rule," "Required by law," "Security Rule," and "Secretary."

b. Business Associate Agreement, (BAA) means the Business Associate Agreement that includes privacy and confidentiality requirements of the Business Associate working with PHI and as applicable, Part 2 record(s) on behalf of the Covered Entity under the Agreement.

c. "Constructively Identifiable," means there is a reasonable basis to believe that the information could be used, alone or in combination with other reasonably available information, by an anticipated recipient to identify an individual who is a subject of the information.

d. "Protected Health Information" ("PHI") as used in the Agreement and the BAA, means protected health information defined in HIPAA 45 CFR 160.103, limited to the information created, received, or used by Business Associate from or on behalf of Covered Entity, and includes any Part 2 records, if applicable, as defined below.

e. "Part 2 record" means any patient "Record," relating to a "Patient," and "Patient Identifying Information," as defined in 42 CFR Part 2.11.

f. "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.

(2) Business Associate Use and Disclosure of Protected Health Information

a. Business Associate shall not use, disclose, maintain, store, or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under the Agreement. Further, Business Associate, including but not

limited to all its directors, officers, employees, and agents, shall protect any PHI as required by HIPPA and 42 CFR Part 2, and not use, disclose, maintain, store, or transmit PHI in any manner that would constitute a violation of HIPAA or 42 CFR Part 2.

b. Business Associate may use or disclose PHI, as applicable:

I. For the proper management and administration of the Business Associate;

II. As required by law, according to the terms set forth in paragraph c. and d. below;

III. According to the HIPAA minimum necessary standard;

IV. For data aggregation purposes for the health care operations of the Covered Entity; and

V. Data that is de-identified or aggregated and remains constructively identifiable may not be used for any purpose outside the performance of the Agreement.

c. To the extent Business Associate is permitted under the BAA or the Agreement to disclose PHI to any third party or subcontractor prior to making any disclosure, the Business Associate must obtain, a business associate agreement or other agreement with the third party or subcontractor, that complies with HIPAA and ensures that all requirements and restrictions placed on the Business Associate as part of this BAA with the Covered Entity, are included in those business associate agreements with the third party or subcontractor.

d. The Business Associate shall not, disclose any PHI in response to a request or demand for disclosure, such as by a subpoena or court order, on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity can determine how to best protect the PHI. If Covered Entity objects to the disclosure, the Business Associate agrees to refrain from disclosing the PHI and shall cooperate with the Covered Entity in any effort the Covered Entity undertakes to contest the request for disclosure, subpoena, or other legal process. If applicable relating to Part 2 records, the Business Associate shall resist any efforts to access part 2 records in any judicial proceeding.

(3) Obligations and Activities of Business Associate

a. Business Associate shall implement appropriate safeguards to prevent unauthorized use or disclosure of all PHI in accordance with HIPAA Privacy Rule and Security Rule with regard to electronic PHI, and Part 2, as applicable.

b. The Business Associate shall immediately notify the Covered Entity's Privacy Officer at the following email address, DHHSPrivacyOfficer@dhhs.nh.gov after the Business Associate has determined that any use or disclosure not provided for by its contract, including any known or suspected privacy or security incident or breach has occurred potentially exposing or compromising the PHI. This includes inadvertent or accidental uses or disclosures or breaches of unsecured protected health information.

c. In the event of a breach, the Business Associate shall comply with the terms of this Business Associate Agreement, all applicable state and federal laws and regulations and any additional requirements of the Agreement.

d. The Business Associate shall perform a risk assessment, based on the information available at the time it becomes aware of any known or suspected privacy or

Contractor Initials GF

Date 4/30/2026

security breach as described above and communicate the risk assessment to the Covered Entity. The risk assessment shall include, but not be limited to:

I. The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;

II. The unauthorized person who accessed, used, disclosed, or received the protected health information;

III. Whether the protected health information was actually acquired or viewed; and

IV. How the risk of loss of confidentiality to the protected health information has been mitigated.

e. The Business Associate shall complete a risk assessment report at the conclusion of its incident or breach investigation and provide the findings in a written report to the Covered Entity as soon as practicable after the conclusion of the Business Associate's investigation.

f. 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 US Secretary of Health and Human Services for purposes of determining the Business Associate's and the Covered Entity's compliance with HIPAA and the Privacy and Security Rule, and Part 2, if applicable.

g. Business Associate shall require all of its business associates that receive, use or have access to PHI under the BAA to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein.

h. Within ten (10) 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 BAA and the Agreement.

i. 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.

j. 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.

k. Business Associate shall document any disclosures of PHI and information related to any 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.

l. 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

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

accordance with 45 CFR Section 164.528.

m. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within five (5) 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.

n. Within thirty (30) 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-ups of such PHI in any form or platform.

VI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, or if retention is governed by state or federal law, 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 as long as the Business 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 post a current version of the Notice of the Privacy Practices on the Covered Entity's website:

https://www.dhhs.nh.gov/oos/hipaa/publications.htm in accordance with 45 CFR Section 164.520.

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 BAA, 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 of Agreement for Cause

a. In addition to the General Provisions (P-37) of the Agreement, the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a material breach by Business Associate of the Business Associate Agreement. 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.

(6) Miscellaneous

a. Definitions, Laws, and Regulatory References. All laws and regulations used,

Initial GF

Contractor Initials _____

4/30/2026

Date _____

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

herein, shall refer to those laws and regulations as amended from time to time. A reference in the Agreement, as amended to include this Business Associate Agreement, to a Section in HIPAA or 42 Part 2, means the Section as in effect or as amended.

b. **Change in law** - Covered Entity and Business Associate agree to take such action as is necessary from time to time for the Covered Entity and/or Business Associate to comply with the changes in the requirements of HIPAA, 42 CFR Part 2 other 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 BAA and the Agreement shall be resolved to permit Covered Entity and the Business Associate to comply with HIPAA and 42 CFR Part 2.

e. **Segregation** - If any term or condition of this BAA 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 BAA are declared severable.

f. **Survival** - Provisions in this BAA regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the BAA in section (3) g. and (3) n.l., and the defense and indemnification provisions of the General Provisions (P-37) of the Agreement, shall survive the termination of the BAA.

IN WITNESS WHEREOF, the parties hereto have duly executed this Business Associate Agreement.

Department of Health and Human Services	The Family Resource Center at Gotham
The State	Name of the Contractor
DocuSigned by: Iain Watt D778BB63F9704C7...	Signed by: Gabrielle Flanders 89C117DF1D6D4B0...
Signature of Authorized Representative	Signature of Authorized Representative
Iain Watt	Gabrielle Flanders
Name of Authorized Representative	Name of Authorized Representative
Director - DPH	Executive Director
Title of Authorized Representative	Title of Authorized Representative
5/1/2026	4/30/2026
Date	Date

Initial GF
Contractor Initials

4/30/2026
Date

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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: **0007902060**

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 7th day of April A.D. 2026.

David M. Scanlan
Secretary of State

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

CERTIFICATE OF AUTHORITY

I, Chelsey Andrea, hereby certify that:

1. I am a duly elected President of The Family Resource Center at Gorham.

2. The following is a true copy of a vote taken at a meeting of the Board of Directors, duly called and held on March 18, 2026 at which a quorum of the Directors/shareholders were present and voting.

VOTED: That Gabrielle Flanders is duly authorized on behalf of The Family Resource Center at 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: 4-27-26

Chelsey R Andrea
Signature of Elected Officer

Name: Chelsey Andrea
Title: President, Board of Directors

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 04/28/2026

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 164 Main Street Ste 1 Berlin NH 03570	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:** 26 **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 379356021	05/10/2026	05/10/2027	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG AbMol Daycare,IncAnoPA	$ 1,000,000 $ 100,000 $ 5,000 $ 1,000,000 $ 3,000,000 $ 3,000,000 $ 1,000,000
A	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS [X] HIRED AUTOS ONLY [X] NON-OWNED AUTOS ONLY			MAC 379356021	05/01/2026	05/01/2027	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 $ 10000			UMB1137784 12	05/10/2026	05/10/2027	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		6JUB4N33995326	01/01/2026	01/01/2027	[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

© 1988-2015 ACORD CORPORATION. All rights reserved.

The ACORD name and logo are registered marks of ACORD

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

NONPROFIT COVER SHEET

A. Entity Name: The Family Resource Center at Gorham

B. Entity's Contact Information:

For Records Requests (e.g., resumes of key personnel; audited financial statements):

Name / Phone / Email: Marie Demers/marie.demers@frc123.org

Person responsible for Accuracy and Completeness of information provided:
Name: Title:
Signature: Gabrielle Flanders Executive Director

C. List Board of Directors and Affiliations

Name (Identify any additional role(s) in Parentheses) E.g., John Doe (President)	Affiliations
Christine Grant (President)	SAU 3
Chelsey Andrea (Vice President)	
Dawn Cross (Treasurer/Secretary)	Bank of NH
Michele Santy	North Country HealthCare
Sarah Dunn	DCYF
Kelly Dussault	Coos Coalition for Young Children
Mandy Bernd	Community Builders Hub

D. List Key Personnel (Resumes must be available upon request to the person(s) listed in section B or may be attached**):**

Name	Role	Annual Salary	Amount Paid From This Contract
Briana Shannon	Director of Family Support	$51,000	$19,125
Alysia Martin	Program Manager	$47,663	$23,831.50
Open Position	Supervisor/FCU Supervisor	$45,500	$22,750
Amie Davis	Family Support Specialist	$38,984	$29,238
Haley Allen	Family Support Specialist	$33,670	$33,670
Shannon Young	Family Support Specialist	$35,490	$35,490
Leah LaCroix	Director of Data & QA	$51,000	$6,375

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Sandra Patrick	Data Entry Specialist	$39,467	$19,733.5
Lindsey Olmstead	Data Coordinator	$41,082	$20,541
Tikatia Morris	Director of Development	51,000	$25,500
Open Position	Family Check-Up Specialist	$43,680	$36,400
Kathleen Melendy	Programs Assistant	$43,680	$32,760
Jennifer Gilbert	Community Collaboration & Training Coordinator	$47,320	$17,745

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

DISCLOSURE OF LEGAL ACTIVITIES INVOLVING THE STATE OF NEW HAMPSHIRE OR ANOTHER GOVERNMENT ENTITY

E. Check one of the following:

[x] The entity is **not currently or has not been** party to any legal proceeding involving the State of New Hampshire (or any agency or subdivision thereof) or any other state/federal government entity before any adjudicative body in any jurisdiction **OR**

[ ] The entity is or has been party to one or more legal proceedings as set forth above. Identify the jurisdiction, court or other adjudicative body, case number, and briefly describe the nature of the proceeding (Attached extra sheet if necessary).

_____

_____

_____

CHARITABLE TRUSTS UNIT COMPLIANCE CERTIFICATION

F. Check one of the following:

[x] is registered and in good standing with the New Hampshire Department of Justice Charitable Trusts Unit (** see note below) **or** has submitted a complete application for registration to the Charitable Trusts Unit and is awaiting a registration determination **OR**

[ ] is not required to register with the Charitable Trusts Unit because it is neither tax-exempt under section 501(c)(3) of the Internal Revenue Code nor engages in charitable solicitations in the State of New Hampshire **OR**

[ ] is exempt from registration with the Charitable Trusts Unit because it is a federal or state government, agency, or subdivision or is a religious organization, an integrated auxiliary of a religious organization, or is a convention or association of churches.

** Note: Attached screen shot from the DOJ Registered Charities List found at:

https://mm.nh.gov/files/uploads/doj/remote-docs/registered-charities.pdf

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

FINANCIAL DISCLOSURES

G. Check one the following:

[x] The organization hired an outside firm to audit its financial statements or to prepare GAAP-compliant financial statements for its most recently completed fiscal year. If so, please ensure that the financial statements and audit results are available to be requested from the contact listed on Page 1 (audited financials may be attached) **OR**

[ ] The above does not apply, but the organization filed an IRS Form 990 or Form 990-EZ for its most recently completed fiscal year. Please attach that IRS Form 990 or Form 990-EZ to the submission. (Form 990 Schedule B is not required) **OR**

[ ] ***If neither of the above apply***, complete the Income Statement and Balance Sheet below with the following basic financial information from the organization's most recently completed fiscal year:

1. INCOME STATEMENT

Revenue		Expenses	
Grants	$	*Compensation of officers, directors, and key personnel*	$
Donations	$		
Program Services Revenue	$	*Other salaries & wages*	$
Interest & Dividends	$	*Payroll taxes & employee benefits*	$
All other Revenue	$	*Occupancy, rent, utilities, and insurance*	$
Total Revenue	$	*Printing, publications, postage, office supplies, and IT*	$
		All other expenses	$
		Total Expenses	$

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

2. BALANCE SHEET

Assets	
Cash & Equivalents	$
Investments	$
Real Estate (less any depreciation)	$
Other Property & Equipment (less any depreciation)	$
Pledges, grants, accounts receivable	$
All other assets	$
Total Assets	$

Liabilities	
Accounts Payable	$
Loans Payable	$
All other liabilities	$
Total Liabilities	$

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

NONPROFIT COVER SHEET

A. Entity Name: The Family Resource Center at Gorham

B. Entity's Contact Information:

For Records Requests (e.g., resumes of key personnel; audited financial statements):

Name / Phone / Email: Marie Demers/marie.demers@frc123.org

Person responsible for Accuracy and Completeness of information provided:
Name: Title:
Signature: Gabrielle Flanders Executive Director

C. List Board of Directors and Affiliations

Name (Identify any additional role(s) in Parentheses) E.g., John Doe (President)	Affiliations
Christine Grant (President)	SAU3
Chelsey Andrea (Vice President)	
Dawn Cross (Treasurer/Secretary)	Bank NH
Michele Santy	North Country HealthCare
Sarah Dunn	DCYF
Kelly Dussault	Coos Coalition for Young Children
Mandy Bernd	Community Builders Hub

D. List Key Personnel (Resumes must be available upon request to the person(s) listed in section B or may be attached**):**

Name	Role	Annual Salary	Amount Paid From This Contract
Briana Shannon	Director of Family Support	$50,000	$6,250
Alysia Martin	Program Manager	$47,663	$23,831.50
Open Position	Supervisor	$45,500	$22,750
Susan Howland	Family Support Specialist	$38,220	$38,220
Amie Davis	Newborn Navigator/FSS	$38,984	$29,238
Jennifer Gilbert	Community Engagement & Training Coordinator	$47,320	$17,745
Tikatia Morris	Director of Development	$50,000	$6,250

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Open Position	Family Check-up Specialist	$43,680	$21,840

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

DISCLOSURE OF LEGAL ACTIVITIES INVOLVING THE STATE OF NEW HAMPSHIRE OR ANOTHER GOVERNMENT ENTITY

E. Check one of the following:

[x] The entity is **not currently or has not been** party to any legal proceeding involving the State of New Hampshire (or any agency or subdivision thereof) or any other state/federal government entity before any adjudicative body in any jurisdiction **OR**

[ ] The entity is or has been party to one or more legal proceedings as set forth above. Identify the jurisdiction, court or other adjudicative body, case number, and briefly describe the nature of the proceeding (Attached extra sheet if necessary).

_____

_____

_____

CHARITABLE TRUSTS UNIT COMPLIANCE CERTIFICATION

F. Check one of the following:

[X] is registered and in good standing with the New Hampshire Department of Justice Charitable Trusts Unit (** see note below) **or** has submitted a complete application for registration to the Charitable Trusts Unit and is awaiting a registration determination **OR**

[ ] is not required to register with the Charitable Trusts Unit because it is neither tax-exempt under section 501(c)(3) of the Internal Revenue Code nor engages in charitable solicitations in the State of New Hampshire **OR**

[ ] is exempt from registration with the Charitable Trusts Unit because it is a federal or state government, agency, or subdivision or is a religious organization, an integrated auxiliary of a religious organization, or is a convention or association of churches.

** Note: Attached screen shot from the DOJ Registered Charities List found at:

https://mm.nh.gov/files/uploads/doj/remote-docs/registered-charities.pdf

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

FINANCIAL DISCLOSURES

G. Check one the following:

[x] The organization hired an outside firm to audit its financial statements or to prepare GAAP-compliant financial statements for its most recently completed fiscal year. If so, please ensure that the financial statements and audit results are available to be requested from the contact listed on Page 1 (audited financials may be attached) **OR**

[ ] The above does not apply, but the organization filed an IRS Form 990 or Form 990-EZ for its most recently completed fiscal year. Please attach that IRS Form 990 or Form 990-EZ to the submission. (Form 990 Schedule B is not required) **OR**

[ ] ***If neither of the above apply***, complete the Income Statement and Balance Sheet below with the following basic financial information from the organization's most recently completed fiscal year:

1. INCOME STATEMENT

Revenue		Expenses	
Grants	$	*Compensation of officers, directors, and key personnel*	$
Donations	$		
Program Services Revenue	$	*Other salaries & wages*	$
Interest & Dividends	$	*Payroll taxes & employee benefits*	$
All other Revenue	$	*Occupancy, rent, utilities, and insurance*	$
Total Revenue	$	*Printing, publications, postage, office supplies, and IT*	$
		All other expenses	$
		Total Expenses	$

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

2. BALANCE SHEET

Assets	
Cash & Equivalents	$
Investments	$
Real Estate (less any depreciation)	$
Other Property & Equipment (less any depreciation)	$
Pledges, grants, accounts receivable	$
All other assets	$
Total Assets	$

Liabilities	
Accounts Payable	$
Loans Payable	$
All other liabilities	$
Total Liabilities	$

The Family Resource Center at Gorham

Our mission is to build healthier families and stronger communities through positive relations, programs and collaborations in the North Country of NH.

The Family Support Programs have professionally trained staff to work with clients through our evidence-based home visiting programs. We meet families' individual needs assisting them to develop knowledge, skills and resources in order to improve their family's futures. We meet them where they are and offer a multi-generational approach helping their family with important topics such as prenatal and infant care, parenting education & support, classes, and groups; developmental screenings and supports, life and stress management, access to community resources, and more.

As a Recovery Friendly Workplace, we will empower you to build your own Recovery Capital by helping you set individualized goals. These goals are geared towards achieving and sustaining long-term recovery.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Financial Statements

FAMILY RESOURCE CENTER AT GORHAM

FOR THE YEARS ENDED JUNE 30, 2025 AND 2024
AND
INDEPENDENT AUDITORS' REPORT AND REPORTS ON COMPLIANCE AND INTERNAL CONTROL

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

FAMILY RESOURCE CENTER AT GORHAM

FINANCIAL STATEMENTS

FOR THE YEARS ENDED JUNE 30, 2025 AND 2024

TABLE OF CONTENTS

	Page(s)
Independent Auditors' Report	1 - 3
Financial Statements:	
Statements of Financial Position	4
Statements of Activities	5 - 6
Statements of Functional Expenses	7 - 8
Statements of Cash Flows	9
Notes to Financial Statements	10 - 19
Schedule of Expenditures of Federal Awards	20
Notes to Schedule of Expenditures of Federal Awards	21
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	22 - 23
Independent Auditors' Report on Compliance for Each Major Program and on Internal Control over Compliance Required by the Uniform Guidance	24 - 26
Schedule of Findings and Questioned Costs	27

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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, 2025 and 2024, 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, 2025 and 2024, 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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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 January 8, 2026, 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
January 8, 2026

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

FAMILY RESOURCE CENTER AT GORHAM

STATEMENTS OF FINANCIAL POSITION
AS OF JUNE 30, 2025 AND 2024

ASSETS

	2025	2024
CURRENT ASSETS		
Cash and cash equivalents	$ 853,651	$ 644,104
Certificates of deposit	1,559,928	1,296,762
Grants receivable	402,179	507,482
Prepaid expenses	41,008	36,070
Total current assets	2,856,766	2,484,418
PROPERTY		
Leasehold improvements	165,675	110,754
Furniture and equipment	54,295	51,575
Buildings	78,061	70,015
Total	298,031	232,344
Less: accumulated depreciation	(147,655)	(133,630)
Property, net	150,376	98,714
OTHER ASSETS		
Investments	287,889	258,980
Operating lease right-of-use asset	32,236	56,319
Total other assets	320,125	315,299
TOTAL ASSETS	$ 3,327,267	$ 2,898,431

LIABILITIES AND NET ASSETS

CURRENT LIABILITIES		
Accounts payable	$ 72,420	$ 19,381
Accrued expenses	102,809	111,769
Refundable advances	264,615	202,088
Current portion of operating lease liability	18,960	25,760
Total current liabilities	458,804	358,998
OTHER LIABILITIES		
Operating lease liability, less current portion shown above	13,276	30,559
Total liabilities	472,080	389,557
NET ASSETS		
Without donor restrictions		
Designated for long-term building maintenance	30,538	46,110
Undesignated	2,511,747	2,176,334
Total net assets without donor restrictions	2,542,285	2,222,444
With donor restrictions	312,902	286,430
Total net assets	2,855,187	2,508,874
TOTAL LIABILITIES AND NET ASSETS	$ 3,327,267	$ 2,898,431

See Notes to Financial Statements

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

FAMILY RESOURCE CENTER AT GORHAM

STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2025

	Without Donor Restrictions	With Donor Restrictions	Total
REVENUE AND SUPPORT			
Grants	$ 1,293,531	$ -	$ 1,293,531
Medicaid	2,081,867	-	2,081,867
In-kind contributions	88,808	-	88,808
Contributions	77,985	-	77,985
Agency rents	47,364	-	47,364
Investment return	-	26,472	26,472
Interest income	72,945	-	72,945
Other income	61,954	-	61,954
Total revenue and support	3,724,454	26,472	3,750,926
EXPENSES			
Program services	3,009,651	-	3,009,651
Management and general	394,962	-	394,962
Total expenses	3,404,613	-	3,404,613
CHANGE IN NET ASSETS	319,841	26,472	346,313
NET ASSETS, BEGINNING OF YEAR	2,222,444	286,430	2,508,874
NET ASSETS, END OF YEAR	$ 2,542,285	$ 312,902	$ 2,855,187

See Notes to Financial Statements

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

FAMILY RESOURCE CENTER AT GORHAM

STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2025

	Program Services	Management and General	Total
Personnel Costs			
Salaries and wages	$ 1,886,395	$ 247,203	$ 2,133,598
Employee benefits	234,757	22,877	257,634
Payroll taxes	140,977	19,088	160,065
Program activities	204,052	-	204,052
Travel	161,992	1,495	163,487
Food and supplies	87,016	548	87,564
Repairs and maintenance	68,342	-	68,342
Training	48,955	470	49,425
Rent	48,963	-	48,963
Contractors and consultants	45,500	-	45,500
Legal and professional fees	11,835	30,685	42,520
Telephone and internet	30,782	1,562	32,344
Heat and utilities	-	30,202	30,202
Liability insurance	21,024	5,333	26,357
Technology	6,459	13,161	19,620
Depreciation	-	14,025	14,025
Advertising	7,163	660	7,823
Property insurance	-	5,139	5,139
Small equipment	3,694	-	3,694
Payroll processing service	-	1,982	1,982
Postage and shipping	1,143	367	1,510
Printing	602	-	602
Conferences and meetings	-	125	125
Bank charges	-	40	40
Total	$ 3,009,651	$ 394,962	$ 3,404,613

See Notes to Financial Statements

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

FAMILY RESOURCE CENTER AT GORHAM

STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED JUNE 30, 2025 AND 2024

	2025	2024
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	$ 346,313	$ 412,694
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Unrealized gain on investments	(3,963)	(18,305)
Realized gains on investments	(13,255)	(935)
Depreciation	14,025	10,949
(Increase) decrease in operating lease right-of-use asset	24,083	(22,052)
(Increase) decrease in assets:		
Grants receivable	105,303	(47,831)
Prepaid expenses	(4,938)	(4,201)
Increase (decrease) in liabilities:		
Accounts payable	53,039	(14,503)
Accrued expenses	(8,960)	(33,037)
Agency deposits	-	(11,946)
Refundable advances	62,527	47,411
Operating lease liability	(24,083)	22,052
NET CASH PROVIDED BY OPERATING ACTIVITIES	550,091	340,296
CASH FLOWS FROM INVESTING ACTIVITIES		
Proceeds from the sale of investments	59,486	41,298
Purchase of investments and certificates of deposits	(334,343)	(839,798)
Additions to property and equipment	(65,687)	(9,949)
NET CASH USED IN INVESTING ACTIVITIES	(340,544)	(808,449)
NET INCREASE (DECREASE) IN CASH AND EQUIVALENTS	209,547	(468,153)
CASH AND CASH EQUIVALENTS BEGINNING OF YEAR	644,104	1,112,257
CASH AND CASH EQUIVALENTS END OF YEAR	$ 853,651	$ 644,104

See Notes to Financial Statements

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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, 2025 and 2024 were considered fully collectable. 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 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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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, 2025 and 2024:

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. 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

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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.

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, 2025 and 2024, 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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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, 2025 and 2024.

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.

2. LIQUIDITY AND AVAILABILITY

The following represents the Resource Center's financial assets as of June 30, 2025 and 2024:

	2025	2024
Cash and cash equivalents	$ 853,651	$ 644,104
Certificates of deposit	1,559,928	1,296,762
Grants receivable	402,179	507,482
Investments	287,889	258,980
Total financial assets	3,103,647	2,707,328
Less amounts not available to be used within one year:		
Net assets with donor restrictions	312,902	286,430
Amount board designated for long-term maintenance	30,538	46,110
Amounts not available within one year	343,440	332,540
Financial assets available to meet general expenditures over the next twelve months	$ 2,760,207	$ 2,374,788

The Resource Center's goal is generally to maintain financial assets to meet 90 days of operating expenses (approximately $840,000 and $870,000, respectfully). As part of its liquidity plan, excess cash is invested in short-term investments, including money market accounts and certificates of deposits.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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, 2025 and 2024 is presented as follows:

	2025		2024	
	Cost	Market Value	Cost	Market Value
Equities	$ 115,356	$ 144,776	$ 107,251	$ 135,540
Mutual Funds	142,090	143,113	125,355	123,440
Totals	$ 257,446	$ 287,889	$ 232,606	$ 258,980

Components of Investment Return:

	2025	2024
Interest and dividends	$ 11,090	$ 8,197
Unrealized gain	3,963	18,305
Realized gain	13,255	935
Investment fees	(1,836)	(3,292)
Total investment return	$ 26,472	$ 24,145

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. There was no amount held on behalf of Small Acts North as of June 30, 2024.

5. 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, 2025 and 2024. In addition to FDIC coverage, certain deposits of the Council are insured or collateralized through other means. The Resource Center has not experienced any losses in such accounts and believes it is not exposed to any significant risk with these accounts. At June 30, 2025 and 2024, cash balances in excess of FDIC coverage aggregated $674,971 and $469,037, respectively.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

6. CONCENTRATION OF RISK

For the years ended June 30, 2025 and 2024, approximately 58% and 38% 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 40% and 19% of the total accounts receivable balances at June 30, 2025 and 2024, respectively.

7. NET ASSETS

Net assets with donor restrictions were as follows for the years ended June 30, 2025 and 2024:

	2025	2024
Purpose restrictions:		
Flooring/carpeting	$ 6,155	$ 6,155
Community events	15,000	15,000
Restrictions in perpetuity:		
Endowment	291,747	265,275
Total net assets with donor restrictions	$ 312,902	$ 286,430

Net assets without donor restrictions for the years ended June 30, 2025 and 2024 are as follows:

	2025	2024
Undesignated	$ 2,511,747	$ 2,176,334
Board designated	30,538	46,110
Total net assets without donor restrictions	$ 2,542,285	$ 2,222,444

8. 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 $30,538 and $46,110 at June 30, 2025 and 2024, respectively.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

9. 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, 2025 and 2024.

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, 2025 and 2024 was as follows:

	Balances as of June 30, 2024	Activity for the Year Ended June 30, 2025	Balances as of June 30, 2025
Permanent gifts	$ 175,809	$ -	$ 175,809
Investment earnings	91,595	11,090	102,685
Realized gain	70,285	13,255	83,540
Transfer to unrestricted	(41,590)	-	(41,590)
Investment expense	(56,920)	(1,836)	(58,756)
Unrealized gain	26,096	3,963	30,059
	$ 265,275	$ 26,472	$ 291,747

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

	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)	(3,292)	(56,920)
Unrealized gain	7,791	18,305	26,096
	$ 241,130	$ 24,145	$ 265,275

10. 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, 2025 and 2024.

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 for the years ended June 30, 2025 and 2024.

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 $12,000 and $2,000 for the years ended June 30, 2025 and 2024.

The right-of-use asset and related operating lease liability for the above leases amounted to $32,236 and $56,319 for the years ended June 30, 2025 and 2024, respectively. The weighted average lease term was 1.75 and 2.63 years for the years ended June 30, 2025 and 2024, respectively. The weighted average discount rate was 1.13% and 1.24% for the years ended June 30, 2025 and 2024, respectively.

Total lease expense under these agreements totaled $25,560 and $15,560 for the years ended June 30, 2025 and 2024, respectively.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Minimum future lease payments required under the operating lease agreements in effect at June 30, 2025 were as follows:

Year Ending June 30	Amount
2026	18,960
2027	13,560
2028	1,040
Total undiscounted lease liability	33,560
Less imputed interest	(1,324)
Total lease liability	$ 33,560

11. IN-KIND CONTRIBUTIONS

The Resource Center received the following in-kind contributions during the years ended June 30, 2025 and 2024:

	2025	2024
Donated clothing, toys, and household supplies	$ 88,808	$ 95,172

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, 2025 and 2024 were considered contributions without donor restrictions and were recorded as food and supplies expense on the accompanying statements of functional expenses.

12. 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 January 8, 2026, the date the June 30, 2025 financial statements were available for issuance.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

FAMILY RESOURCE CENTER AT GORHAM

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED JUNE 30, 2025

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	2301NHCWSS	$ 4,984
Promoting Safe and Stable Families	93.556	2301FPSS	34,890
Social Services Block Grant	93.667	2301NHSOSR	54,826
Temporary Assistance for Needy Families	93.558	2301NHTANF	398,737
Maternal & Child Health Services Block Grant for States	93.994	HRSA B04MC45230	4,984
Maternal, Infant and Early Childhood Home Visiting Program	93.870	05-95-90-902010-5896	443,888
ARPA - Maternal, Infant and Early Childhood Home Visiting Program	93.870	05-95-90-902010-2451	53,443
		TOTAL 93.870	497,331
Total U.S. Department of Health and Human Services			$ 995,752
Total expenditures of federal awards			$ 995,752

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

FAMILY RESOURCE CENTER AT GORHAM

NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED JUNE 30, 2025

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, 2025. 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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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

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, 2025 and 2024, 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 January 8, 2026.

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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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
January 8, 2026

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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

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, 2025. 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, 2025.

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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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
January 8, 2026

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

FAMILY RESOURCE CENTER AT GORHAM

SCHEDULE OF FINDINGS AND QUESTIONED COSTS
FOR THE YEAR ENDED JUNE 30, 2025

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 program tested as a major program was: U.S. Department of Health and Human Services, Temporary Assistance for Needy Families (TANF), ALN – 93.558.

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 not be a low-risk auditee.

B. FINDINGS – FINANCIAL STATEMENTS AUDIT

None

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

None

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Briana M. Shannon

Objective

Family Support leader dedicated to strengthening family and community well-being through innovative programs, multi-site oversight, and cross-agency collaboration. Skilled in managing diverse initiatives, building high-performing teams, and ensuring compliance with state and federal standards.

Work Experience

Director of Family Support Services

The Family Resource Center at Gorham
January 2025 to Present

- Provide strategic leadership for a multi-site Family Support division, overseeing Comprehensive Family Support Services, Healthy Families America, Kinship Navigation, Newborn Navigation, and other family-focused programs.
- Supervise and mentor program managers, coordinators, and frontline staff, fostering professional development, reflective practice, and high-quality service delivery across all programs.
- Ensure program fidelity, compliance, and quality outcomes across multiple initiatives, aligning services with evidence-based frameworks, including the Strengthening Families Protective Factors and HFA standards.
- Oversee division budgets, resource allocation, and funding compliance, including Trestle and other family support funds, ensuring equitable access for families.
- Build and maintain strategic partnerships with community agencies, healthcare providers, schools, and local organizations to expand family access to services and supports.
- Lead the design, implementation, and evaluation of innovative family programs, events, and initiatives, promoting engagement, wellness, and measurable outcomes for children and families.
- Utilize data-driven oversight, supervision documentation, and program evaluation to inform continuous improvement, track outcomes, and support evidence-based decision-making.

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 at Gorham-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.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

- Support Program Manager with accreditation preparation.
- Work collectively with staff to create a 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 at Gorham - 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
White Mountains Community College- Continuing Education-Present

Skills

- Program Management
- Budgeting
- Project / Program Management
- Process Improvement
- Reflective Practice/Reflective Supervision
- Strategic Planning
- Motivational Interviewing
- Meeting planning
- Event Organization/collaboration
- Crisis Intervention

Certifications and Trainings

Training certificates available upon request

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Alysia A. Martin

Professional Summary:

Responsible and dedicated Program Manager of Comprehensive Family Support Services with a goal oriented mind, leading to accomplishment of all tasks set forth. Passionate and motivated personality, with a drive for excellence. Core competencies include ability & willingness to learn, dedication to the advocacy of others, as well as excellent communication and time management skills. Handles all tasks with accuracy and efficiency.

Skills:

Time Management and Prioritization

Organization

Patience

Building/Maintaining Personal and Team Relationships

Communication skills; verbal and written

Reliability

Works well under stress

Uses creative and innovative means to accomplish goals

Attention to detail

Experience:

Comprehensive Family Support Program Manager October 2022-Present

Family Resource Center-Family Support, Gorham, NH

- Oversees daily management of the program, including but not limited to:
- Budgets, data, operations, systems, & quality assurance
- Monthly State Reporting required by the state
- Assist & monitor the billing processes for Medicaid Billing
- Assure all contract requirements are met, including defined service activities, target population numbers, and designated client assessments
- Coordinate training with the FRC Training Manager/FRC Quality Assurance Manager

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

- Hiring new staff
- Ensure quality of program implementation through the continuous monitoring of program activities & adherence to standards including, but not limited to:
- Documentation review, communicating recommended revisions, field observations, etc
- Maintains public relations by attending monthly collaborative meetings with: DCYF, community stakeholders, organization leadership, etc.
- Attends monthly Leadership Meetings with Executive Director & monthly Professional
- Development Meetings with the management team
- Attends & facilitates weekly staff meetings to provide ongoing support, professional development, etc. to Strength to Succeed staff
- Provides & documents weekly reflective/administrative supervision to all staff assigned
- Provides ongoing support to all staff they supervise through evaluation of job performance & field observations
- Processes timesheets & mileage, including approving PTO requests

Comprehensive Family Support Program Supervisor February 2021-October 2022

Family Resource Center- Family Support, Gorham, NH

- Provides & documents weekly reflective/administrative supervision to all staff assigned
- Provides ongoing support to all staff they supervise through evaluation of job performance & field observations
- Processes timesheets & mileage, including approving PTO requests

Parent Education and Community Engagement Coordinator August 2020- February 2021

Family Resource Center- Family Support, Gorham, NH

- Create and manage social media posts
- Work with programs to schedule groups, classes and events as required by scopes of service
- Set up and attend meetings with area partners to build/maintain relationships
- Develop marketing materials

Quality Assurance Coordinator, December 2018-February 2019

Family Resource Center-Family Support, Gorham, NH

- Interpret and implement agency standards
- Devise sampling procedures and directions for recording in reporting data
- Planning and monitoring data recording procedures
- Documentation of internal audits
- Prepare reports and communicate outcomes of quality activities
- Help identify training needs and implement training interventions where needed
- Assure ongoing compliance with quality and organizational regulatory requirements

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Family Support Specialist, June 2017-Present

Family Resource Center- Family Support, Gorham, NH

- Parent education
- Home visiting
- Supervised visitations
- Weekly notes, Monthly reports
- Communication with child protective workers, doctors/nurses and other professionals as needed
- Provide community resources
- Provide community referrals

Group Leader, August 2016-June 2017

Family Resource Center- Project Youth, Gorham, NH

- Lesson Planning
- Teaching groups of children
- Writing monthly reports
- Interacting with school teachers
- Completing administrative tasks related to gathering attendance, meeting goals and file completion
- Purchasing supplies needed to complete lesson plans

Cook, August 2015 – August 2016

Tri-County Cap Headstart, Berlin, NH

- Grocery shopping
- Meal planning and preparation
- Keeping track of specialized dietary needs and ensuring proper paperwork is up to date with current guidelines
- Daily cleaning to ensure health standards are met
- Tracking of budget allowances

Family Support Provider, October 2013 - October 2014

Androscoggin Valley Homecare Services, Berlin, NH

- Observe and report any health, safety or social conditions that needed attention
- Routine housekeeping- making beds, changing linens, dusting, dishes, light house cleaning, laundry and vacuuming

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

- Prepare and serve meals as well as meal planning and making suggestions to improve diet. Ensuring client is eating based on specific diet prescribed by physician. *****Previous client regained 20 of the 30 lbs lost due to poor nutritional intake based on suggestions that I proposed to the immediate family. Client's chronic gastrointestinal ailments improved with new suggestions also.*****
- Shopping/Marketing and simple errands (such as bill payments)
- Assist with personal grooming and other activities of daily living
- Stimulate interests of the client- reading. playing games, taking walks, baking, etc
- Keeping daily record of home visits documenting client's condition, attitude, condition of living space and other general observations.
- Provide daily time sheets for record
- Keep accurate records in accordance with Agency policy
- Adhere to agency dress code
- Protected integrity and confidentiality of client's personal and medical history as well as records. Written prior authorization from client was required to discuss any personal info about the client with anybody other than the client.

Homemaker, October 2011 - March 2012

Home Healthcare Hospice and Community Services, Keene, NH

- Prepare and maintain records of client progress and services provided, reporting any changes in client condition to manager/supervisor
- Perform housekeeping duties such as cooking, cleaning, washing laundry or dishes and running errands
- Care for individuals or families during periods of incapacitation, family disruption, or convalescence- providing companionship, personal care or help adjusting in new lifestyle
- Transport clients to locations outside of the home such as physician's offices or outings using a motor vehicle.
- Plan, shop for and prepare nutritious meals or help the family plan, shop for and prepare nutritious meals instruct or advise clients and family members on issues such as household cleanliness, utilities, hygiene, nutrition or infant care.

Customer Service Manager, April 2005 - January 2010

Walmart, Gorham, NH

- First line in resolving customer complaints
- Assist in the hiring and training of new employees, evaluate their performance
- Prepare associate work schedules for daily/nightly tasks
- Issue and cash money orders
- Check to make sure appropriate changes were made to resolve customer problems.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

- Refer unresolved customer grievance to designated department or supervisor
- Answer telephones and give information to callers, take messages and/or transfer calls to the appropriate persons.
- Complete forms in accordance with company polices
- Direct and supervise employees engaged in sales and performing services for customers.
- Monitor sales activity to ensure customers receive satisfactory customer service and quality goods.
- Enforce safety, health and security rules.
- Receive payments by cash, check, credit/debit cards and vouchers.
- Issue receipts. refunds, credits and change due to customers.
- Count money in registers during opening of shifts to ensure amounts were correct and that there was adequate change.
- Answer customer and employee questions while providing information on policies and procedures.
- Calculate total sales during a specific time period and reconcile with the total recorded sales.
- Process merchandise returns or exchanges
- Monitor checkout stations to ensure they have adequate cash and are staffed appropriately.
- Assist with duties in other areas of the store such as assistance with fitting rooms, carrying out customer orders, piercing ears in jewelry, mixing paint, etc.
- Maintain clean and orderly check out areas and complete other general cleaning duties such as sweeping/moping the floors, dusting and emptying trash.
- Supervise others and provide on-the-job training.
- Request information and assistance using overhead paging system or personal paging devices.
- Keep periodic balance sheets of amounts and numbers of transactions on one or more checkout stations.
- Cash customer payroll checks.

Education:

- AS, Human Services, 1 year remaining
  White Mountains Community College, Berlin NH 03570
- Certification, Human Lactation Consultant, February 2015- February 2016 (92 contact hours)
  Lactation Education Resources, Tracy's Landing, MD
- Certification, Medical Assistant, January 2009- January 2010
  U.S. Career Institute, Fort Collins, MO
- High School Diploma, General Education with 2 year Early Childhood Education technical career education
- Berlin Senior High School, Berlin, NH

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Trainings:

Perinatal Mood Disorders
NH Dept Health&Human Services, Concord NH, February 2025, 2 Hours

Suicide Prevention
The Family Resource Center, Gorham NH, 6.5 Hours

Leadership Bootcamp
UNH Campus, Durham NH, November 2025, 9 Hours

Strengthening Families Summit
Grappone Conference Center, Concord NH, 9 Hours

IFSP Training
The Family Resource Center, Gorham NH, September 2024, 6 Hours

Standards of Quality
NH Children's Trust, Concord NH, September 2024, 16 Hours

Sexual Harassment
White Mountains Community College, Berlin NH, 8 Hours

Quit Now NH 101
NH Quit Now, Gorham NH, August 2024, 1 Hour

Intro to Trauma Informed Care
Own Your Growth- Chrissy Grant, June 2024, 3 Hours

HIV/AIDS & Bloodborne Pathogens
The Family Resource Center, Gorham NH, May 2024, 3 Hours

Peer Introduction to Mental Health
Family Resource Center, Gorham NH, April 2024, 6.5 Hours

Ethical Considerations Training
The Family Resource Center, Gorham NH, April 2024, 14 Hours

Community Health Worker Training
North Country Health Consortium, March - May 2024, 90 Hours

Introduction to Microsoft Excel
UNH Campus, Portsmouth NH, March 2024, 6.5 Hours

How to Effectively Facilitate a Training
Family Resource Center, Gorham NH, March 2024, 3.5 Hours

WIC Breastfeeding Level 1
WIC, Virtual Platform, February 2024, 7.5 Hours

Cultural Competence
NH Children's Trust, Concord NH, February 2024, 6 hours

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Conscious Discipline
Own Your Growth – Chrissy Grant, Gorham NH January-September, 20 Hours

Mental Health First Aid
Nation Council for Behavioral Health, Gorham NH, May 2023 6.5 Hours,

DCYF Better Together Annual Conference
Division of Child,Youth,Family Services, Grappone Center Concord NH, April 2023, 6 Hours

Positive Solutions for Families Facilitator
Positive Solutions for Families/Family Resource Center, February 2023, 5 Hours

NARCAN Administration
Strength to Succeed/Family Resource Center, January 2023, 1 Hour

Home Visitor Safety
Family Resource Center, January 2023, 2 Hours

Ages and Stages Developmental Screening
Coos Coalition for Young Children and Families, September 2022 (September 2017), 1.5 Hours

Standards of Quality for Family Strengthening and Support
National Family Support Network, August 2022 (November 2020, October 2018)

Family Engagement Series: Self-Assessing Family Engagement
Department of Education: Bureau of Student Support, April 2022, 1.5 Hours

Teaching Pyramid Model Observation Tool (TPOT) Refresher
Department of Education: Bureau of Student Support, April 2022, 6 Hours

DCYF Reporting Laws
Family Resource Center, April 2022, 2 Hours RE-MAP Virtual Supervisor Training Program
Great Kids Inc., March 2022, 15 Hours

Motivational Interviewing Practice of Supervision and Coaching
Rutgers- Center of Alcohol and Substance Use Studies, February 2022, 9 Hours

Recovering Together Café Training
Be Strong Families, September 2021, 18 Hours

Protective Factors Survey. 2nd Edition
FRIENDS National Resource Center for CBCAP, July/August 2020

Child Passenger Safety Technician
Safe Kids Worldwide/Injury Prevention Center Lebanon, April 2020, 24 Hours

Choose Love Movement: Choosing Hope&Resilience, Tapping Solutions
Jessie Lewis Choose Love Movement, April 2019, 2.5 Hours

Teaching Pyramid Infant Toddler Observation Scale (TPITOS) Reliability
Department of Education Bureau of Student Support, June 2019, 10 Hours

Parent Survey for Community Outreach
Healthy Families America, May 2019, 28 Hours

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Pyramid Model Peer-to-Peer Practice Based Coaching Training
Department of Education- iSocial Training, March 2019, 5 Hours

Optimizing Care for Mothers & Babies Affected by Prenatal Substance Exposure: Summit to Address Pans of Safe Care in New Hampshire

JSI Research and Training Institute Inc. , January 2019, 6 Hours

Motivational Interviewing – Healthy Families of America
Motivational Interviewing Network or Trainers, October 2018, 13 Hours

Recovery Coach Academy
Connecticut Community for Addiction Recovery CCAR, August 2018, 30 Hours

Pyramid Model: Strategies to Promote the Social-Emotional Competency of Infants and Toddlers
The Pyramid Model Consortium, June 2018, 24 Hours

Management of Aggressive Behavior (MOAB)
MOAB Training International, Inc., May 2018, 4 Hours

Nurturing Parenting Program
Family Development Resources, Inc., May 2018, 18 Hours

Pyramid Model Readiness Training- Is your Community Ready?
Preschool Technical Assistance Network@Seresc and Project LAUNCH, April 2018, 6 Hours

Integrated Strategies for Home Visiting
Healthy Families of America, February 2018, 40 Hours

Critical Time Intervention
Center for the Advancement of Critical Time Intervention, December 2017

Growing Great Kids- Prenatal to 36 Months Tier 1
Great Kids, Inc., August 2017, 40 Hours

Trauma Informed Care to Support Health and Well-Being
New England Public Health Training Center, July 2017, 1 Hour

Parents Interacting with Infants
The Pyramid Model Consortium/Project Launch, June 2017, 12 Hours

Mental Health First Aid
National Council for Behavioral Health, April 2017, 8 Hours

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Volunteerism/Community Service:

- Children's Church Ministry Leader, August 2017- December 2019
  Harvest Christian Fellowship, Berlin NH 03570
- Committee Chair Person, 2015- June 2020
  Cubscout Pack 205, Berlin NH (Boy Scouts of America)
- Den Leader, 2014-February 2020
  Cubscout Pack 205, Berlin NH (Boy Scouts of America)
- Parent Support, September 2021- current
  Berlin Middle High School, Berlin NH

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

indeed

← Profile

Susan Howland

Summary

Your summary will appear here

Work experience

Family Support Specialist

The Family Resource Center - Littleton, NH

September 2024 to Present

Help develop strong relationships with families to provide service coordination, support and training to assist families in meeting the needs of their children and enhancing the parents role as the primary influence on their child's education and development.

Team Leader

Next Steps Community Services - Bethlehem, NH

November 2015 to September 2024

- Monitored team performance and provided regular feedback to drive continuous improvement. Making sure the residents needs are met, and they are safe. Data tracking, making sure all relevant information is sent to the clinical team. Ensuring the residents receive their medication as needed.

Recovery coach staff

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Tri-county Community Action Agency (Friendship house) - Bethlehem, NH

September 2014 to November 2015

Support clients in their recovery, doing recovery groups throughout the day. Checking in new clients and doing drug tests as needed. Setting up daily schedules and making sure their daily needs are met. Supporting visits with families.

Education

Associate's degree in human services in Human Services

University of Phoenix-Online Campus - Remote

February 2009 to November 2011

Skills

Communication skills - 10+ years

Certifications & licenses

Your certifications and licenses will appear here

Add more sections

©2025 Indeed - Cookies, Privacy and Terms - Your Privacy Choices

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Amie Davis

Professional Summary

Dedicated worker with excellent communication, time management and computer skills. I am aiming to leverage my abilities to successfully fill the position at your facility. Frequently praised as hardworking by my peers, I can be relied on to help your facility achieve its goals.

Work Experience

Newborn Navigator
Family Resource Center-Gorham, NH
January 2025 to Present

Home Visiting

Family Support Specialist
Family Resource Center-Gorham, NH
September 2023 to Present

Home Visitor

Personal Support Specialist
PSS | Lemon Home Care
June 2022 to Present

Caring for clients in their home with any personal care needs as well as home care needs
Running errands for clients and keeping up with supplies needed.

Personal Support Specialist
In Home Senior Services-Gorham, ME
November 2020 to June 2022

Built strong relationships with clients to deliver emotional support and companionship.
Engaged patients in meaningful conversation, socialization, and activity while providing personal care assistance.
Assisted with dressing guidance, grooming, meal preparation, and medication reminders.
Assisted with feeding and monitored intake to help patients achieve nutritional objectives.
Maintained clean personal areas and prepared healthy meals to support client nutritional needs.

Cosmetologist/ Manager
SMART STYLE
September 2013 to November 2020

Worked with clients and their hair care needs
Managed and maintained a salon
Customer service, computer skills, and any business needs.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Education

Clinical Medical Assistant
Northeast Technical Institute - Auburn, Maine, US
February 2023

High School Diploma
Telstar High School - Bethel, ME, US
June 2012

Skills

- Effective communicator Reliable
  Phlebotomy Goal oriented
  Empathic personality Customer Service
  Flexible CPR Certified

Certifications and Licenses

CPR Certification

CCMA Certification

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Haley Allen

EDUCATION

North Country Union Highschool, **Y.O.G: 2017**

Newport, Vermont

PROFESSIONAL EXPERIENCE

Family Resource Center **December 2025-**
Berlin, New Hampshire **Present**

Resource Navigator

In this role, I am working with clients who are looking for help with community resources. I am tasked to help individuals with the following (but not limited to), housing application, fuel and electrical assistance applications, Medicaid/SNAP/Cash applications, new patient paperwork for medical needs, and connecting clients to other community resources. In this role, I also share upcoming community events that are happening in our catchment area with the FRC Employee chat.

Family Resource Center **December 2024-**
Berlin, New Hampshire **December 2025**

Family Support Specialist

During my time in this role at the Family Resource Center, I learned SBC Skills, the skill of OARS, Parenting skills, Anger management tools and many ways one in this position could support family growth. In this role, I worked with family's and gained consensus around individual and family-oriented barriers, created ILO and FLO agreements pertaining to the barriers, and created action plans around each ILO and FLO so the family could be confident in being successful moving forward and after services end.

Weeks Medical Center **April 2023-**
Lancaster, New Hampshire **November 2024**

Patient Financial Counselor

During my time in this role at Weeks Medical Center, I used Meditech to view patient's accounts and help navigate any questions they might have pertaining to (but not limited to) billing, insurance issues/troubleshooting, co-pays, insurance deductibles and financial assistance (if they qualified). During this time, I helped with processing Financial Applications that were submitted along with approve/deny and apply financial assistance to qualifying accounts/appointments. I helped patients apply for DHHS Medicaid and SNAP assistance.

Weeks Medical Center **October 2022-**
April 2023

Central Registration

During my time in this role at Weeks Medical Center, I pre-registered appointments for 12-15 physicians, two days prior to the appointment date. I would assure the patients insurance was active and if no insurance was present or it was returned from AccuReg as "not active", I would attempt to call the patient to obtain that information prior to them arriving at registration. If I obtained insurance information not on record, I would apply it to the patient's account and appointment.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

CERTIFICATIONS

- Motivational Interviewing for Case Managers
- Positive Solutions for Families
- Anger Management
- MI Symposium- Ferry Beach, Maine
- Heart Saver CPR Certification

SKILLS

Type 35-38 WPM on average

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Shannon Young

Objective

Compassionate and relationship-driven individual seeking a Family Support Specialist position to build strong partnerships with families, provide effective service coordination, and deliver meaningful support and training that empowers parents as the primary influence in their child's education and development.

Education

Berlin High School

June 8, 2008 High School Diploma

- All major courses, Early Childhood Education, Cheerleading

White Mountain Community College

2008-2011 Not completed

- Teacher Preparation
- Human Services, Volunteer, Internship with After School Program Grades 3-5

Experience

Family Resource Center | Berlin NH

Family Support Specialist April 6, 2026-Present

Human services professional who aid families by connecting them to resources, offering case management, and providing parenting education to improve well-being

Dollar Tree | Gorham NH

Cashier/Stocker November 2025- February 2026

Computer skills, cashier, training, unloading truck, stocking, customer service, ringing out purchases with company POS register. Keeping work areas along with the store neat and clean. Assisting customers with their shopping and informing customers of sales and specials. Assisting manager with interviews.

Coos County Family Health Services | 133 Pleasant St Berlin NH

Front Office and Scheduling Coordinator February 2022- April 2026

Front Office Assistant Manager September 2025- April 2026

Responsible for greeting patients; screening and directing telephone calls, inquiries, and enrolling patients for services; updating patient demographics, insurance information, consent for services, personal contacts, HIPAA information, etc.; posting payments, co-pays and other related tasks as assigned; and working with clinical teams to address patient services and satisfaction. Ensures paperwork for release/request of information, legal documents, DCYF, workers compensation and other required paperwork is delivered to the appropriate medical records department or provider.

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Mother Goose Childcare | 1 Wentworth Ave Gorham NH

Teacher Assistant August 28, 2018 – September 2020

Lead Teacher in Nursery September 2020 – February 2022

Supervise children 6 weeks to 12 years and building a bond with them to help with milestone developments in a safe environment. Creating relationships with children, parents and guardians. Preparing and serving meal. Diaper changing. Daily Reports. Recording attendance. Engaging in play, education and development.

Family Dollar | Pleasant St Berlin NH

Cashier November 2017 – June 2018

Ringing out purchases with company POS register. Keeping work areas along with the store neat and clean. Assisting customers with their shopping and informing customers of sales and specials. Stocking shelves. Opening and closing store with manager on duty.

H&R Block | 410 Glen Ave

Receptionist January 2014-April 2018

Operate telephone switchboard to answer, screen, forward calls, provide information, taking messages or scheduling appointments. Greet customers entering building, determine nature and purpose of visit and direct or escort them to specific areas. Receive payment and record receipt for services. Transmit information or documents to customers using computer, mail or fax machine. Hear or resolve complaints for customers. Schedule appointments, maintain and update appointment calendar. File and maintain records. Provide information about establishment, such as locations of departments or offices, employees within the organization or services provided. Keep a current record of staff members' whereabouts and availability.

Verizon Wireless Zone | 410 Glen Ave Berlin NH

Sales Representative April 2015 – June 2018

Making connections with customers, selling company’s products and services, organizing store supplies. Fixing customer issues and handling customer support. Opening and closing store. Volunteer work within the community and assisting other stores.

Dollar Tree | Gorham NH

Assistant Manager November 2010 – April 2015

Open and closing store, computer skills, cashier, training, unloading truck, stocking, scheduling, customer service, bank deposits. Ringing out purchases with company POS register. Keeping work areas along with the store neat and clean. Assisting customers with their shopping and informing customers of sales and specials.

Skills

- Independent
- Active learner
- Team worker
- Computer and electronic skills
- Creative and crafty
- Easy-going
- Telecommunications
- Sales/Marketing
- Customer and personal services
- Multitasker

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

- Problem Solver
- Community Engagement
- Enjoy working with children of all ages.
- Organization
-

Volunteer

Gladiators Football Association-Volunteer Cheer Coach –2015-2016

Gladiators Football Association- Council Board and Concession Stand November 2021 – present

After School Program Grades 3 to 5 Internship 2009-2010

North Woods Early Learning Center-Board Member-Vise President- 2022-2023

Active parent in my children's sports and clubs

References

Angelica Lavoie 491 Main Street Suite 6 Gorham NH 603-480-6000

Jeanne Carrigan 83 Maynesboro St Berlin NH 603-723-4229

Brian Albert 410 Glen Avenue Berlin NH 603-733-7445 Brian_albert@wireless-zone.com

Diane Berthiaume 46 Franklin Street Berlin NH 603-723-2861

Brenda Ladd 133 Pleasant St Berlin NH 603-752-2040 Bladd@ccfhs.org

Shayna Henry 283 Pleasant St Berlin NH 603-723-0609

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

LEAH J. LACROIX

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 individuals were met.

Residential Instructor, October 2010-June 2011

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

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

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Sandra Patrick

Professional Summary

I am seeking a full-time leadership position using the professional skills I have acquired through decades of schooling, continued education and training, and experience. I work well independently as well as with others; and with 40 years experience in assisting company administrators, directors, CFOs, and managers, I'm ready to sit at the table with leadership to brainstorm, create vision, and bring about implementation. Thank you in advance for considering my employment.

Work Experience

Data Entry Specialist

Family Resource Center-Berlin, NH

August 2022 to Present

• Accurately enter and verify data into company database, ensuring high levels of accuracy and data integrity.

• Developed efficient methods for organizing and categorizing large volumes of data, improving overall productivity and quality assurance.

• Assisted in the development of standardized Excel spreadsheets for consistent data entry across departments and for a means of tracking completion.

• Maintain confidentiality and security of sensitive information by adhering to company policies and procedures.

Director of Music and Organist

Good Shepherd & Holy Family Parishes-Berlin, NH

2016 to August 2021

• Played Casavant Pipe Organ, NORD keyboard, and other electric organs for weekend Masses, funerals, weddings, and other special occasions

• Directed adult choir rehearsals weekly along with youth and children's choirs

• Planned Liturgies for all Masses

• Participated in VBS Music Program

• Taught Music Theory and Choir for one semester at Salve Regina Academy

Owner

Optimal Fitness-Berlin, NH

2013 to December 2016

• Managed a Ladies Fitness Center

• Payroll

• Accounts Receivable and Accounts Payable

• Newspaper and Online Advertising

• Membership Dues

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Administrative Assistant / Grants Coordinator / Accounts Receivable

Tri-County Community Action Program, Inc-Berlin, NH
October 2009 to September 2016

- Maintained and organized Grant Binders year to year
- Grant Writing
- Directed Children's Summer Camp for two summers and Taught for one summer
- Accounts Receivable with Daily Reconciliation of Bank Accounts
- Copying, Filing, E-mail Communications, Letter Writing, Other Miscellaneous Duties

Administrative Assistant for NFHP, AVCoC, AVER

Tri-County Community Action Program, Inc-Berlin, NH
2007 to 2009

- Took Minutes from various boards and committees and Transcribed
- Ran Events and helped with many others
- Handled most inquiries
- Maintained Database Records and Membership Records
- Created Spreadsheets and Forms
- Point of Contact for the Northern Forest Heritage Park and the Androscoggin Valley Chamber of Commerce

Human Resource Manager and Special Events

Town & Country Motor Inn-Shelburne, NH
February 2004 to November 2007

- Created Policy Manual, Attendance Management Records, Monthly Newsletters, and Suggestion Box for employees
- Created many Employee Benefits with management approval
- Planned first and subsequent yearly Employee/Family Picnics
- Replied to all applicants and Interviewed possible candidates for various positions at establishment
- Planned Town & Country's 50th Anniversary Gala
- New Year's Eve Party Reservation Director
- Front Desk Attendant when needed

Administrative Assistant

Northern White Mountain Chamber of Commerce-Berlin, NH
2000 to 2004

- Accounts Payable and Accounts Receivable
- Took Board Minutes and Transcribed
- Served on many Committees to bring about community events
- Assisted Executive Director
- Wrote Press Releases and Edited others
- Handled most inquiries
- Maintained Membership Information, Website, and Community Calendar

Recruiting Assistant and Enumerator

United States Bureau of the Census-Berlin, NH
November 1999 to July 2000

- Set up Testing Sites and Presented/Graded tests for Enumerators

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

• Worked with several North Country Elementary Schools and presented the Census 2000 to students, as well as at other Community Events
• Traveled the state as an enumerator

Staff Representative

United States Senate Bob Smith-Berlin, NH
1990 to 1998

• Handled all Constituent Concerns and all Inquiries
• Computer Work
• Represented the U.S. Senator at numerous events and Read Letters Aloud written by him to those in attendance

Front Desk Associate

Town & Country Motor Inn-Shelburne, NH
1983 to 1988

• Receptionist Duties
• Handled Cash, Computer Work and Reservations
• Assisted in Payroll for 150 Employees
• Primary Contact for Group Tours

Education

Secretarial Science (Associate's degree)

SUNY Canton-Canton, NY
September 1979 to May 1981

High school diploma

Mt. Greylock Regional High School-Williamstown, MA
September 1975 to June 1979

Skills

Experience with children **Human Resources Management** **Hotel and accommodations guest check-in** **10 key typing** **Accounts Receivable** **Accounting systems** **Financial data reconciliation** **Hospitality management** **Microsoft Word** **Bookkeeping** **Preschool experience** **Office Management** **School experience** **Grant Writing** **Employee relations** **Guest reservation booking** **Administrative experience** **Accounting and finance experience** **Computer skills** **Microsoft Excel** **Technical Proficiency** **Hotel and accommodations guest complaints handling** **QuickBooks** **Leadership** **Multi-line phone systems** **Payroll** **Event Planning** **Writing Skills** **Accounts Payable** **Hotel and accommodations guest inquiries** **Account reconciliation** **Business hotel experience** **Executive administrative support** **Lesson planning** **Hotel and accommodations guest special request handling** **Hotel and accommodations guest check-out**

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Lindsey Mae Olmsted

Special Skills: Computer skills using Microsoft word and excel. Have proven ability to keep confidentiality. Have experience and the responsibility of filing and keeping up to date on paperwork. Great people skills. Multiple years of experience working in direct care

Work History:

July 2020-Present- The Family Resource Center- Data Coordinator/Quality Assurance- Berlin NH- Licensed CRSW, provide quality assurance for visit numbers, run reports, review and analyze family visit notes for various family based preventative programs in addition to collaboration with the Division of Child Youth and Families. Process service authorizations, assign new referrals, plan prepare and facilitate monthly certified recovery support workers group supervision, provide program success stories as well as quality assurance for resources for all programs within the organization.

October 2018- July 2020 The Family Resource Center, Strength to Succeed – Recovery Based Reunification Specialist- Berlin NH- Provide in-home support to at-risk families. Create support plans based on family's needs including treatment centers, parenting skills, child development, and referrals to outside services. Use reflective and active listening skills, practice high confidentiality, record keeping, and provide creativity and flexibility with planning for each families.

May 2015- October 2018- Androscoggin Valley Hospital- Accounts Specialist- Berlin NH- Send out bill claims to insurance companies for payment. Process payments

November 2014-February 2015- North Country Independent Living- Conway NH- Residential Advisor- Skills to work with residents that have suffered brain injuries. Assisting clients with everyday tasks including food prep, house chores and community involvement.

Certification:

Certified Recovery Support Worker (CRSW) 03/2026

Standards of Quality- 02/2026

Ethical Considerations for Recovery Coaches Certificate 03/2026

Suicide Prevention Certificate 03/2026

Introduction to Mental Health 03/2026

Stigma and Bias in Substance Use and Mental Health 04/2026

Bridges Out of Poverty- 09/2025

DCYF Supporting Laws- 04/2022

PHQ9- 04/2022

Ages and Stages Developmental Screening Certificate 03/05/2019

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Naloxone Administration Certificate 07/19/2019

Recovery Coach Academy Certificate 07/2019

Motivational Interviewing Certificate 08/19-23/2019

HIV Trends and Treatment Certificate 08/30/2019

Better Together with Birth Parents Workshop Certificate 10/10-11/2019

Comprehensive Family Support Training Certificate 10/15/2018

Positive Solutions Certificate 10/2018

Comprehensive Family Support Training Certificate 10/15/2018

Positive Solutions Certificate 10/2018

February 2008- June 2013- multiple trainings in early childhood education

Education:

Southern New Hampshire University- January 2020- June 2026- bachelor's in psychology with a concentration in Mental Health

Walden University- September 2026- master's in clinical psychology

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Tikatia Morris

Director of Development

Tikatia Morris

Director of Development and organizational leader with progressive experience building systems, strengthening programs, and expanding community partnerships across the North Country. Skilled in revenue development, workforce capacity building, and cross-sector collaboration to advance mission-driven growth.

Core Competencies

Leadership & Strategy

Strategic planning; Organizational Growth Strategy; Capacity Building; Budget Management; Change Management; Team Leadership & Supervision; Budget Oversight; Data-Informed Decision Making

Development & External Relations

Fundraising Strategy; Donor Engagement & Stewardship; Revenue Development; Funding Proposals; Community Engagement; Cross-Sector Partnership Development; Board Collaboration; Public Speaking; Campaign Management

Program & Workforce Development

Program Development; Systems Design & Implementation; Workforce Development; Reflective Supervision; Motivational Interviewing (Advanced); Solution-Based Casework; Peer Coaching

Technical & Operational

Learning Management Systems; Data Tracking & Reporting; Microsoft Office & Office 365

Experience

The Family Resource Center / Berlin & Gorham, NH

November 2018 - Present

Director of Development | August 2025 – Present

- Lead and implement comprehensive fundraising and development strategy to support organizational growth & long-term sustainability
- Oversee donor cultivation, stewardship, and engagement across individual, corporate, and community supporters
- Partner with Executive Director and board to advance development goals and revenue planning
- Design and execute annual fundraising campaigns and signature events
- Track and analyze fundraising performance metrics to inform strategic decision-making
- Strengthen community partnerships to expand organizational visibility and philanthropic support
- Oversee alignment of marketing and external communications with fundraising strategy
- Present organizational impact to community groups, funders, and stakeholders

Navigation Services Program Manager | April 2023 – August 2025

Directed oversight of Navigation Services program operations, including budget management, staffing capacity, and service delivery across the North Country; Managed program budget, monitoring expenditures and aligning resources to ensure sustainability and growth; Designed and launched a pilot initiative to expand access to Raising Strong Families, developing infrastructure, workflows, and evaluation processes; Built collaborative partnerships with regional providers, community organizations, and stakeholders to strengthen coordinated service delivery; Developed internal systems to improve program efficiency, staff onboarding, and cross-program communication; Supervised and supported staff through coaching, reflective supervision, and professional development planning; Identified service gaps and

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

implemented process improvements to increase responsiveness and impact

Training & Development Manager | January 2022 to April 2023

Built and launched an organization-wide learning management system supporting staff onboarding and professional development; Developed a train-the-trainer infrastructure to strengthen internal capacity and sustainability; Led workforce development strategy across programs, aligning training with service standards and growth goals; Delivered advanced training in Motivational Interviewing and Solution-Based Casework; Mentored trainers and supervisors to ensure quality implementation and coaching alignment

Administrative Support Specialist / Training & Family Support Coordinator | December 2019 – January 2022

Supported organizational systems transition from G-Suite to Office 365; Built centralized training documentation and tracking systems; Partnered with leadership to execute special projects and process improvements; Contributed to onboarding and workforce training initiatives

Edward Fenn ASP Group Leader and Coach | August 2019 – June 2020

Implemented Pyramid Model strategies to support social-emotional development; Provided monthly coaching to ASP staff to strengthen classroom practices; Led implementation of Choose Love curriculum

Family Support Specialist | November 2018 – December 2019

Built trusted relationships with families, conducting needs assessments and coordinating service referrals; Collaborated with community partners to increase access to resources; Maintained accurate case documentation and data reporting

NH Homeschooling Families / Private Tutor
September 2013 - January 2018, Throughout NH & VT

Provided individualized instruction across core academic subjects; developed customized learning models and assessments; mentored junior tutors

Self-Employed / Freelance Photographer and Graphic Design
April 2012 - September 2018, Throughout NH

Delivered branding, graphic design, and visual communication services for small businesses and organizations

Education

Plymouth State University / English Education
August 1999 - June 2000, Plymouth

Laconia High School/ High School Diploma
August 1998 - June 1999, Laconia

Certifications and Professional Development

Certifications & Licensure
Community Health Worker License (OPLC – 2025)
Wellness Coach (Apprenticeship Completion 2025)
Certified TIPITOS Observer
Certified TPOTS Observer
Certified in the Family Support Standards of Quality

Leadership & Supervision
Reflective Supervision I & II
Supervisor Bootcamp
Boundary Spanning Leadership
Supervising Community Health Workers
Kinship Supervisor
GGK Empowering Great Supervisors

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Core Practice Models
Motivational Interviewing (Advanced Training & MITI/ MICA Coding)
Solution-Based Casework
Pyramid Model (Infant/ Toddler & Preschool Modules)
Conscious Discipline

Systems & Equity
Social Determinants of Health
Strengthening Families Framework
Enhanced Care Coordination
Field Guide to Human Centered Design

Additional Experience

Impact Consulting / Communications Strategist (per diem)

January 2025 - Present

- Develop and implement strategic communications plans for nonprofit clients
- Present at events and engage potential collaborators
- Support branding and outreach initiatives to strengthen client visibility

Harvest Christian Fellowship / Director of Communications (volunteer)

September 2023 – Present

Oversee social media, branding, and communications for church events and initiatives; Led marketing and logistics for regional women's conference, including registration, promotional materials, and outreach; Coordinated outreach to churches across New England to increase event participation;

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

KATHLEEN MELENDY

ABOUT ME

Reliable professional skilled at coordinating supplies, records and schedules to keep office teams on task and ready for daily demands. Proficient in using diverse software to produce professional spreadsheets, reports and correspondence, Positive, upbeat and service-oriented attitude toward completing tasks.

CONTACT

☎

SKILLS

- Customer Service
- Computer: Meditech, Centricity, Word, Excel spreadsheets
- Self-directed
- Professional and mature
- Resourceful
- Dedicated team player
- Event Planning
- Microsoft Office Suite
- HR services
- Presentation Preparation
- Project Coordination
- Clerical Support
- Data Entry
- Office Management

WORK EXPERIENCE

Programs Assistant

07/2025 – current

The Family Resource Center - Berlin NH

- Assist with meeting and event planning, including preparation, coordination, and attendance as needed.
- Support outreach efforts by assembling outreach packets and promotional materials.
- Provide reception coverage as needed, including greeting visitors and answering incoming phone calls.
- Offer administrative support to leadership and program teams to ensure smooth day-today operations.
- Maintain and organize office spaces to promote efficiency and functionality across locations.
- Rotate between satellite offices to deliver on-site support and assist with operational needs.
- Serve as the primary point of contact for satellite office support, ensuring the environment meets the needs of program staff.
- Carry out additional tasks and special projects as assigned by the Executive Director and Program Directors to advance program and organizational goals.

Human Resources Generalist

9/2024-06/2025

Coos County Nursing Home - Berlin NH

- Maintained employee records in accordance with applicable legal requirements
- Provided guidance on labor laws and regualtions to ensure compliance with applicable federal, state and local rules.
- Prepared reports related to personnel activity such as turnover rate or hiring process metrics.
- Performed data entry of employee information in HRIS system for accurate record keeping.
- Coordinated employee benefits including health insuranceplans, 401k savings plan, vacation and sick leave policies and other programs.
- Conducted new hire orientation sessions and onboarding activitiesto ensure successful transition into the organization.
- Conducted employee hiring and exit interviews.'
- Transmitted enrollment, termination and alternation information to vendors within established timeframes to keep changes up-to-date.
- Processed salary changes stemming from merit increases, promotions, bonuses and pay adjustments.
- Maintained recprds of payroll forms, leave notifications, employee files, benefits information and worker's compesation files,
- Conducted background checks, reference checks and employment verifcation

Human Resources Generalist

3/2024-09/2024

North Country Healthcare Lancaster, NH

- Maintained accurate records of personnel data in the HRIS system'
- Compiled reports related to hiring, termination, promotions, abscences, turnover rates
- Organized staff evernts such as team building activities, holiday parties
- Responded to inquiries from employees regarding benefits packages
- Conducted emplyee onboarding process, prientations and exit interviews
- Coordinated benefit administration activities such as enrollments, changes, terminations
- Established and maintained trustedrelationships around organization to optimize busines and employee experience.
- Developed and documented HR Prochedures to refine processes and drive compliance with policies.
- Assisted candiated with application processes by answering questions about application, performing background checks, providing I-9 forms and handling drug screeningpaperwork.
- Hiring employees and processed hriring-related paperwork.
- Scheduled a conducted new employee orientations

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

KATHLEEN MELENDY

SKILLS

- Project Coordination
- Clerical Support
- Data Entry
- Office Management
- Administrative Support
- Bookkeeping
- Organization skills
- Documentation/Reporting
- Mail distribution
- Multitasking/prioritization
- Multi-line telephone skills
- Business Administration
- Positive and professional

HR Administrative Assistant
3/2023-3/2024

North Country Healthcare Lancaster, NH

- Assisted with planning of special events by arranging catering services, reports for review by management team recuring venues and ordering promotional materials.
- Managed database systems containing customer contact information
- Organized and maintained filling systems for physical and electronic documents, ensuring accuracy and confidentiality of records
- Updated contact lists regularly when changes occur in employee status or contact information
- Handled confidential documents in an organized fashion according to established protocol.
- Managed incoming calls while providing information or transferring callers to appropriate personnel
- Compiled data from various sources into organized reports for review by management team
- Coordinated mailings including sorting mail, preparing packaged shipping via courier service or postal service.
- Maintained office supplies inventory by checking stock to determine inventory level; anticipating needed supplies; placing and expediting orders for supplies.
- Answered questions from customers regarding products and services offered by the company.
- Developed and maintained filling systems for confidential documents and records
- Ensured efficient operation of office equipment such as printers, copiers and fax machines.
- Entered data into spreadsheets using Microsoft Excel

Point of Service Rep II
7/2018 - 03/2023

North Country Healthcare - Berlin, NH

- Provided customer service by answering product and service related questions
- Greeted customers and responded to inquiries in a timely manner
- Established positive relationships with customers through effective communication techinques.
- Tracked inventory levels and orderd supplies as needed
- Escalated unresolved issues to appropriate departments for further investigation
- Answered customer inquiries promptly and professionally
- Demonstrated strong problem solving skills when faced with challenging situations or complex inquiries from customers.
- Conistently met daily performance goals set by managemtn team members
- Collaborated with collegues in other departments to ensure that all customer needs were met effectively.
- Collaborated with team members to identify areas of improvement in customer service processes
- Performed administrative tasks such as filing documents and updating records
- Answered phonecalls and directedthem to approriate personnel
- Resolved customer complaints in a professional manner while remaining empathetic to their conceqrns.
- Established relationships with existing customers to promotwe new product or service opportunities.
-

Registrar
10/2013-7/2018

Androscoggin Valley Hospital - Berlin, NH

- Registered patients for the emergency department and hospital. Prepare the on-call lists for the hospital.
- Answer incoming calls for the departments and hospital main line'
- Dispersed incoming mail to correct recipients throughout the office.
- Maintained the reception area in a neat and organized fashion.
- Make copies, send faxes and handle all incoming and outgoing correspondence

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

KATHLEEN MELENDY

Receptionist

11/2006 - 10/2013

Androscoggin Valley Hospital - Berlin, NH

- Coordinated with vendors for repairs and maintenance of office equipment
- Greeted vistors and provided them with assistance.
- Maintained office supplies inventory and placed orders when necessary.
- Maintained an organized filing system of confidential information in accordance with company policy.
- Scheduled appointments for clients, customers and other vistors.
- Assisted with special projects assigned by management when required.
- Responded to injuries from internal staff members

Teller

11/2003 - 10/2006

Guardian Angel Credit Union - Berlin NH

- Provided exceptional customer service while accurately processing routine transactions
- Identified fradulent activity to all ser or suspicioous behavior immediately reported it to management
- Cross-sold additional bank products when applicable to meet customer needs'Identified opportunuties to refer customers to other areas of the bank for additional services.
- Adhered strictly to all security procedures related to hadling money at the teller window
- Maintaoned accurate records of all transactions for compliance purposes.
- Balanced cash drawers on a daily basis.
- Answered customer inquiries regarding bank products and services
- Received and processed customer transactions, including deposits, withdrawals, loan payments and other banking services.
- Reported any operational issues or system problems that occured during shift promptly.
- Performed daily reconcilliation of teller drawer within established limits.

EDUCATION

New Hampshire Community Technical College 2003-2005

Associateof Business Management

REFERENCES

Available upon request

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

Jennifer M. Gilbert

****

Professional coordinator with a passion for clear communication, compatible systems, and supporting teams.

Experience

11/2025-Present *Community Engagement and Training Coordinator*
Family Resource Center, Berlin NH

- Pursuing effective ways to promote programs and services
- Organizing events in collaboration with community partners
- Tracking and implementing training opportunities for staff

3/2023-11/2025 *PACE Project Coordinator*
Campus Compact for NH, Berlin NH

- Assisted in program curriculum development and content creation, ensuring relevance and engagement to career exploration
- Provided career and college guidance to program participants
- Created and distributed program materials, including brochures, flyers, and informational resources
- Coordinated program events, workshops, and activities, ensuring successful execution

10/2016-3/2023 *Paraprofessional/Substitute Teacher*
SAU 20, Gorham NH

- Customized daily learning for individual and group activities based on needs
- Communicated and collaborated with educational professionals
- Managed classrooms, clerical duties and support for teachers and staff
- Tutored middle and high school students on various subjects

9/2008-10/2016 *Infant/Toddler Program Coordinator*
White Mountains Community College, Berlin NH

- Created employee schedules based on enrollment needs and licensing regulations
- Mentored students and staff in child development education and practices
- Interpreted and upheld state and national guidelines for childcare centers
- Interacted with parents regularly through written and verbal communication
- Documented and engaged staff to support national accreditation of center

8/2001-9/2008 *Customer Service/Analyzer and Advertising Coordinator*
Littleton Coin Company, Littleton NH

Docusign Envelope ID: E9283890-2F8F-895C-8066-7CBD3340C711

- Managed accounts enrolled in ongoing receipt of coins based on likes and purchases while juggling intake calls
- Coordinated product advertising from start to finish within the Marketing dept

Education

Bachelor of Arts, Psychology Child and Adolescent Development
Southern NH University, Manchester, NH

Associate of Arts, Liberal Arts
MassBay Community College, Wellesley, MA

Skills

Attention to Detail	Strong Verbal and Written Communication
Leadership Qualities	Calm and Patient Demeanor
Resourceful	Problem Solver

Accolades

Developed Future Ready Workshops and Career Exploration Workshops as part of the PACE (Persistence and Continuing Education) grant, focusing on essential skills and career exploration for middle and high school students. The workshops aimed to provide students with hands-on experiences and tailored support based on needs, contributing to long-term career preparedness and success.

Completed bachelor's program with a GPA of 4.0 while balancing full-time work.

FORM NUMBER P-37 (version 2/23/2023)

Subject: Comprehensive Family Support (CFS) (RFP-2027-DPH-05-COMPR-07)

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 TLC Family Resource Center		1.4 Contractor Address 62 Pleasant Street Claremont, NH 03743	
1.5 Contractor Phone Number 603-542-1848	1.6 Account Unit and Class TBD	1.7 Completion Date June 30, 2029	1.8 Price Limitation $1,603,569
1.9 Contracting Officer for State Agency Robert W. Moore, Director		1.10 State Agency Telephone Number (603) 271-9631	
1.11 Contractor Signature Signed by: Alysse Lizotte 275BED35355F4BA... Date: 5/11/2026		1.12 Name and Title of Contractor Signatory Alysse Lizotte Executive Director	
1.13 State Agency Signature DocuSigned by: Iain Watt D778BB63F9704C7... Date: 5/12/2026		1.14 Name and Title of State Agency Signatory Iain Watt Director - DPH	
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 748734844941460... On: 5/13/2026			
1.17 Approval by the Governor and Executive Council *(if applicable)* G&C Item number: G&C Meeting Date:			

Contractor Initials: Initial AL
Date: 5/11/2026

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

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

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

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

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

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

4. CONDITIONAL NATURE OF AGREEMENT.

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

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

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

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

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

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

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

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

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

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

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

7. PERSONNEL.

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

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

Initial

Contractor Initials AL

Date 5/11/2026

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

8. EVENT OF DEFAULT/REMEDIES.

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

8.1.1 failure to perform the Services satisfactorily or on schedule;

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

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

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

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

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

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

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

9. TERMINATION.

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

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

10. PROPERTY OWNERSHIP/DISCLOSURE.

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

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

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

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

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

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

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

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

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

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

Contractor Initials Initial AL

Date 5/11/2026

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

14. INSURANCE.
14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:
14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than $1,000,000 per occurrence and $2,000,000 aggregate or excess; and
14.1.2 special cause of loss coverage form covering all Property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the Property.
14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.
14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or any successor, a certificate(s) of insurance for all insurance required under this Agreement. At the request of the Contracting Officer, or any successor, the Contractor shall provide certificate(s) of insurance for all renewal(s) of insurance required under this Agreement. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

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

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

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

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

19. CHOICE OF LAW AND FORUM.
19.1 This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire except where the Federal supremacy clause requires otherwise. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.
19.2 Any actions arising out of this Agreement, including the breach or alleged breach thereof, may not be submitted to binding arbitration, but must, instead, be brought and maintained in the Merrimack County Superior Court of New Hampshire which shall have exclusive jurisdiction thereof.

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

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

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

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

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

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

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

Contractor Initials Initial AL
Date 5/11/2026

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

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, this Agreement, and all obligations of the parties hereunder, shall become effective on July 1, 2026 (“Effective Date”).

1.2. Paragraph 3, Effective Date/Completion of Services, is amended by deleting subparagraph 3.3., in its entirety and replacing it as follows:

3.3. Contractor must complete all Services by the Completion Date specified in block 1.7. 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 6, Compliance by Contractor with Laws and Regulations/Equal Employment Opportunity, Subparagraph 6.1., is amended as follows:

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, RSA 151:21 Patients’ Bill of Rights, civil rights and equal employment opportunity laws, and the Governor’s order on Respect and Civility in the Workplace, Executive Order 2020-01. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

1.4. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.5., as follows:

12.5. 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.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

1. Statement of Work

1.1. The Contractor must provide the Comprehensive Family Support (CFS) Program. The Contractor must provide services to pregnant and parenting women as well as other families with children up to eighteen (18) years of age who are:

1.1.1. Experiencing, or at risk of experiencing difficulty with:

1.1.1.1. Pregnancy;

1.1.1.2. Health and nutrition;

1.1.1.3. Education and employment;

1.1.1.4. Parenting challenges;

1.1.1.5. Social isolation;

1.1.1.6. Substance use disorders;

1.1.1.7. Mental health events;

1.1.1.8. Child abuse and neglect; and

1.1.1.9. Substance exposed infants.

1.1.2. Perinatal families of substance exposed infants.

1.1.3. At risk for child abuse and neglect.

1.1.4. Seeking Comprehensive Family Support (CFS) in a voluntary manner.

1.2. The Contractor must ensure all services are provided in the following DHHS Catchment area: Claremont District Office. The Contractor must maintain a physical office located within the Catchment Area. The Contractor must ensure:

1.2.1. The office is accessible to families and staff at least five (5) days per week Monday through Friday during standard business hours of 8:00 am to 4:00 pm, excluding state holidays.

1.2.1.1. Evening hours are available at least one (1) night per week.

1.2.2. Families are provided flexible opportunities to meet in the home or community.

1.2.3. Office locations remain in compliance with the Americans with Disabilities Act (ADA) accessibility requirements.

1.2.4. No duplication of services.

1.3. The Contractor must meet the Standards of Quality for Family Strengthening &

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Support as defined by the National Family Support Network. This includes:

1.3.1. Maintaining a current status throughout the term of the Agreement of having completed a New Hampshire self-assessment and received designation as a Family Resource Center (FRC) of Quality.

1.4. Comprehensive Family Support (CFS) Home Visiting Program

1.4.1. The Contractor must deliver high-quality, responsive CFS home visiting services to New Hampshire families with children ages 0-18, based on their emerging needs. The Contractor must ensure that families enrolled in CFS have access to all FRC services, home visiting services, parent education, parent support groups, father groups, parent cafes, information and referral, and case management. The Contractor must work collaboratively with the Department to deliver statewide CFS home visiting services that:

1.4.1.1. Promote healthy pregnancy and birth outcomes.

1.4.1.2. Support safe and nurturing environments for children and adolescents.

1.4.1.3. Improve maternal and child health.

1.4.1.4. Encourage positive parenting practices.

1.4.1.5. Reduce child maltreatment.

1.4.1.6. Increase linkages and referrals to community resources and supports.

1.4.2. The Contractor must ensure each family has a completed Individual Service Plan (ISP) that identifies and addresses barriers to achieving optimal health, well-being, and resiliency. The Contractor must use the ISP template provided by the Department and must include information about the education and support services that will be delivered across key outcome domains, which may include but are not limited to:

1.4.2.1. Maternal Health.

1.4.2.2. Child Health.

1.4.2.3. Child Development and School Readiness.

1.4.2.4. Community Linkages and Referrals.

1.4.2.5. Family Economic Self Sufficiency.

1.4.2.6. Positive Parenting Practices.

1.4.2.7. Preventative Child Care Scholarship.

1.4.3. The Contractor must provide CFS services using the Strengthening Families Framework developed by the Center for the Study of Social

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Policy (CSSP), addressing the five (5) Protective Factors which are:

1.4.3.1. Parental Resilience.

1.4.3.2. Social Connections.

1.4.3.3. Knowledge of parenting and child development.

1.4.3.4. Concrete supports in times of need.

1.4.3.5. Social and emotional competence of children.

1.4.4. The Contractor must ensure CFS services are delivered through a variety of methods, including but not limited to:

1.4.4.1. Home visiting services.

1.4.4.2. Educational workshops.

1.4.4.3. Peer-led or professionally facilitated support groups.

1.4.4.4. Parenting education and family support activities.

1.4.4.5. Trauma-informed services that recognize and respond to the impact of adverse experiences.

1.4.4.6. Access to concrete resources in times of need.

1.4.5. The Contractor must provide home visiting services that are respectful of the families served, strengths-based and family-centered, ensuring participation is voluntary and addresses each family's values, traditions, and needs.

1.4.6. The Contractor must collaborate with program participants to develop individualized, goal-oriented plans that improve economic self-sufficiency and long-term family stability. These goals may include, but are not limited to:

1.4.6.1. Planning future pregnancies.

1.4.6.2. Continuing education or vocational training.

1.4.6.3. Securing and maintaining employment.

1.4.6.4. Strengthening the family's Protective Factors.

1.4.6.5. Obtaining safe and stable housing.

1.4.6.6. Accessing community-based services and supports.

1.4.6.7. Participating in parenting education on topics such as:

1.4.6.7.1. Child development.

1.4.6.7.2. Child behavior and emotional regulation.

1.4.6.7.3. Child health and wellness.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

1.4.6.7.4. Coping strategies and problem-solving skills.

1.4.6.7.5. Home and child safety.

1.4.6.7.6. Positive parenting techniques.

1.4.7. The Contractor must promote education on health and safety topics including, but not limited to:

1.4.7.1. Providing child safety education through handouts and discussion using evidence-based curricula, including resources from the Centers for Disease Control (CDC) covering a wide range of topics such as:

1.4.7.1.1. Car seat safety and installation checks.

1.4.7.1.2. Use of safety gates and fall prevention.

1.4.7.1.3. Safe use of portable cribs and sleep environments.

1.4.7.1.4. Safe sleep practices to reduce the risk of Sudden Unexpected Infant Death Syndrome (SUID).

1.4.7.1.5. Lead poisoning prevention, including identification of environmental hazards.

1.4.7.1.6. Home safety strategies, including the use of window guards.

1.4.7.1.7. Oral health education for infants, children, and adolescents.

1.4.7.1.8. Understanding Adverse Childhood Experiences (ACEs) and building Protective Factors.

1.4.7.1.9. Smoking cessation education and referrals.

1.4.7.1.10. Educating families on the importance of primary care and preventative health services, including:

1.4.7.1.11. Access to preventative health care.

1.4.7.1.12. Immunizations.

1.4.7.1.13. Establishing a medical home for ongoing care coordination.

1.4.7.1.14. Improving child safety and health outcomes through regular well-child visits.

1.4.7.1.15. Postpartum health care follow up and planning for future pregnancies.

1.4.8. The Contractor must ensure all women have access to validated

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

screening tools, listed in 1.6.3, for prenatal and postpartum depression, and must refer all women who screen positive for maternal depression to appropriate follow-up care. The Contractor must provide support for participant enrollment in primary care and pediatric services.

1.4.9. The Contractor must complete and renew a Release of Information (ROI) form annually with all CFS participants for all programs, regardless of the type of services they are enrolled in. The ROI must include but is not limited to:

1.4.9.1. Acknowledgement of data collection within the Department's Family and Community Health Data System (FCH-DS).

1.4.9.2. Acknowledgement of sharing personal identifiable information with the Department.

1.4.9.3. Acknowledgement of the purpose of releasing data to the Department to review program outcomes and facilitate quality improvement activities.

1.4.9.4. Acknowledgement that Family Service Record outcome data will be kept and tracked for three (3) subsequent years following discharge.

1.4.9.5. All video recording, storage, access, and sharing requirements set forth elsewhere in this Scope of Services are contingent upon and governed by the participant consent requirements described in Section 1.7. The Contractor must use a paper coaching tool for participants that do not consent to video recording.

1.5. <u>CFS Newborn Navigation Services</u>

1.5.1. The Contractor must provide Newborn Navigation services as part of the CFS home visiting program. The purpose of newborn navigation services is to engage newborn families as early as possible in early childhood home visiting programs, community resources linkage, and services.

1.5.2. The Contractor must engage with families during pregnancy or within six (6) months of birth and provide at minimum one (1) voluntary CFS home visit within that timeframe. The visit must include care coordination services for pregnant and newborn families, with priority given to:

1.5.2.1. Family household at or below 250% of the federal poverty

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

level.

1.5.2.2. Single-parent households.

1.5.2.3. First time parents.

1.5.2.4. Families with other children under three (3) years of age.

1.5.2.5. Parents under twenty-five (25) years of age.

1.5.2.6. Parents with limited educational attainment.

1.5.3. The Contractor must make initial contact with families during pregnancy, prior to hospital discharge, or no later than six (6) months following birth to:

1.5.3.1. Schedule the initial home visit and collect intake prescreening information determined by the Department for follow-up; or

1.5.3.2. Provide FRC information to families who decline the home visit.

1.5.4. The Contractor must collect prescreening intake information and enter it into the FCH-DS prior to conducting the home visit.

1.5.5. For families who consent to CFS Newborn Navigation services, the Contractor must provide a Welcome Newborn Family bag, which includes Department-approved information and resources on topics such as:

1.5.5.1. WIC.

1.5.5.2. Medicaid.

1.5.5.3. Supplemental Nutrition Assistance Program (SNAP).

1.5.5.4. FRC services.

1.5.5.5. Lead poisoning prevention.

1.5.5.6. Safe sleep.

1.5.5.7. Infant nutrition.

1.5.5.8. Additional items as identified by the CFS agency and approved by the Department.

1.5.6. The Contractor must ensure enrolled families may receive up to three (3) Newborn Navigator home visits, all of which must occur within (6) months of enrollment.

1.5.7. The initial CFS Newborn Navigation home visit includes a comprehensive Family Needs Assessment and support services,

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

including but not limited to:

1.5.7.1. Maternal depression screening.

1.5.7.2. Developmental screening.

1.5.7.3. Referrals based on identified family needs.

1.5.7.4. Parent education and child safety (e.g., safe sleep, lead poisoning prevention, home safety).

1.5.7.5. Breastfeeding and lactation support.

1.5.7.6. Postpartum planning future pregnancies.

1.5.7.7. Infant feeding and nutrition support.

1.5.7.8. Positive parenting practices, including attachment.

1.5.7.9. Completion of release of information forms for referrals and sharing programmatic data with the Department.

1.5.8. Information and referral support to enroll in HFA or FCU programs. The CFS family support specialist delivering newborn navigation services must work with families to identify ongoing support needs and facilitate referrals to appropriate services and programs.

1.5.9. These include, but not are not limited to:

1.5.9.1. Family Resource Center services,

1.5.9.2. Family Check Up,

1.5.9.3. Healthy Families America (HFA),

1.5.9.4. The Supplemental Nutrition Program for Woman, Infants and Children (WIC), and

1.5.9.5. Birth to Three Early Supports and Services.

1.5.10. The Contractor must ensure data related to CFS Newborn Navigation services is collected in the Department owned FCH-DS and reported in coordination with the Department.

1.5.11. The Contractor must collaborate with, build partnerships, and coordinate enrollment planning with local healthcare agencies to promote referrals from healthcare providers to CFS's Newborn Navigation services. Partners and collaboration examples include, but

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

are not limited to:

1.5.11.1. Birthing hospitals.

1.5.11.2. OB/GYN providers.

1.5.11.3. Pediatric healthcare providers.

1.5.11.4. Family medicine and primary care providers.

1.5.11.5. Community Health Centers.

1.5.12. The Contractor must offer satellite health office hours to increase accessibility, as needed.

1.5.13. The Contractor must distribute CFS Newborn Navigation informational and printed materials, as appropriate.

1.5.14. The Contractor must also collaborate and build partnerships with local early care and education programs that serve newborn families to coordinate services, prevent duplication. and enhance care coordination. These programs include, but are not limited to:

1.5.14.1. WIC.

1.5.14.2. Birth to Three Early Supports and Services.

1.5.14.3. Healthy Families America (HFA).

1.5.14.3.1. CFS staff delivering Newborn Navigation services must maintain an active collaboration with HFA, including a clearly defined referral and enrollment process to ensure that families who may be better served through HFA are appropriately connected.

1.5.14.3.2. Pregnant and newborn families identified as having high-risk factors or who meet eligibility criteria for HFA must be engaged and referred or enrolled into HFA through joint home visits and warm handoffs.

1.5.15. The Contractor must work in close collaboration with the Department's Quality Improvement Coordinator to ensure all readiness activities are completed prior to program implementation and support ongoing quality improvement and program oversight. This includes, but is not limited to:

1.5.15.1. Completion of CFS onboarding training.

1.5.15.2. Development and implementation of a family recruitment and

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

enrollment plan.

1.5.15.3. Creation of a health provider and community engagement strategy to align services and strengthen referral pathways.

1.5.15.4. Participation in monthly Community of Practice.

1.5.15.5. Execution of additional activities that support continuous quality improvement.

1.5.15.6. Collection of program data, including administration of a Department-approved post-participant survey, which may include, but is not limited to:

1.5.15.6.1. Assessment of participant knowledge related to community resources, postpartum depression, and newborn care following the initial home visit.

1.5.15.6.2. Evaluation of referrals made and connections established with community resources.

1.5.15.6.3. Measurement of participant satisfaction and likelihood to recommend Newborn Navigation services to others.

1.5.15.6.4. Collection of additional feedback to inform and enhance continuous quality improvement efforts.

1.5.16. The Contractor must collaborate with the Department to provide timely and accurate information related to program evaluation and other data requests necessary to support the Department's goals and reporting requirements. The Contractor must be prepared to share information with various divisions within the Department, including but not limited to:

1.5.16.1. Division of Public Health.

1.5.16.2. Division of Economic Stability.

1.5.16.3. Division of Long Term Supports and Services.

1.6. CFS Assessments and Referrals

1.6.1. The Contractor must actively engage and collaborate with the Department, including the Division for Children, Youth and Families (DCYF), and community partners such as schools, community mental health centers and health clinics to promote referrals into the program and prioritize enrollment of families who may be experiencing

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

circumstances that include, but are not limited to:

1.6.1.1. A previous or current founded or unfounded report to child protective services.

1.6.1.2. Having a child with low birth weight and/or neurodevelopmental delays.

1.6.1.3. A history of, or current, parental or caregiver substance abuse.

1.6.1.4. A history of, or current, mental health concerns affecting the parent, caregiver, or child(ren).

1.6.1.5. Household income at or below 250% of the Federal Poverty Level.

1.6.1.6. A family history of intimate partner violence.

1.6.1.7. Evidence of insecure attachment in the child's early years.

1.6.1.8. Pregnancy; birth of a child within the past twelve (12) months; anticipated birth of an additional child within the next six (6) months; or the birth or expected birth of a child with special healthcare needs.

1.6.1.9. Pregnant participants with prenatal substance use concerns, and families with substance-exposed infants.

1.6.1.10. Pregnant or post-partum participants with a Plan of Safe Care, or those in need of support to develop one.

1.6.1.11. Families with more than one (1) child under the age of three (3).

1.6.1.12. Experiences of physical or social isolation, or any other factors contributing to unhealthy social and emotional outcomes.

1.6.1.13. Home conditions that present a health and/or safety risk to family members.

1.6.1.14. A child or family member with chronic health, behavioral, or developmental conditions that impact parenting.

1.6.1.15. Results from the Ages and Stages Questionnaire (ASQ) or Ages and Stages Questionnaire Social Emotional (ASQ-SE) indicating developmental delays.

1.6.1.16. Families impacted by traumatic events.

1.6.1.17. Families receiving Temporary Assistance to Needy Families (TANF) cash assistance or enrolled in any

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Medicaid program.

1.6.1.18. Engagement with Substance Use Disorder (SUD) services.

1.6.2. The Contractor must complete a comprehensive Family Needs Assessment identified by the Department for each family served utilizing an intake assessment tool as identified by the Department within the first three (3) home visits, in order to identify family strengths, potential risk factors, and current and emerging needs. The Contractor must also conduct reassessments in accordance with the Family Check Up (FCU) model schedule, at a minimum of every six (6) months and again at twelve (12) months, or as otherwise directed by the Department.

1.6.3. The Contractor must utilize additional validated screening tools to support families and ensure budgeting to access tools, which may include, but are not limited to:

1.6.3.1. The Ages and Stages Questionnaires (ASQ-3 and ASQ:SE).

1.6.3.2. Brief System Inventory (BSI)

1.6.3.3. Edinburg Postnatal Depression Scale. (EPDS)

1.6.3.4. Developmental and social-emotional screenings for children ages one (1) month through five (5) years.

1.6.4. The Contractor must report on a monthly basis the number of families who received ASQ-3 and ASQ:SE screenings in a format specified by the Department.

1.6.5. The Contractor must provide expedited warm hand off referrals to appropriate community-based services and other resources that support families within their home communities, which may include, but are not limited to:

1.6.5.1. Childcare Aware of New Hampshire.

1.6.5.2. The Department's District Offices for assistance with program eligibility determinations.

1.6.5.3. Specialized Medicaid services, including Birth to Three Early Supports and Services.

1.6.5.4. The Supplemental Nutrition Program for Women, Infants and Children (WIC), Nutrition programs for breastfeeding

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

support, nutrition education, and access to healthy foods.

1.6.5.5. NH Employment Security.

1.6.5.6. Local school districts.

1.6.5.7. Family violence prevention agencies.

1.6.5.8. Mental health services.

1.6.5.9. Nutrition education and healthy foods.

1.6.5.10. Financial literacy and money management programs.

1.6.5.11. Smoking cessation programs.

1.6.5.12. Independent living skills programs.

1.6.5.13. Adult education programs.

1.6.5.14. Literacy education services.

1.6.5.15. Employment services.

1.6.5.16. Vocational rehabilitation services.

1.7. CFS Family Check Up Services

1.7.1. The Contractor must implement Northwest Prevention Science's Family Check-Up® (FCU) model, including the FCU portal. The Contactor must execute an agreement with Northwest Prevention Science Inc. before accessing the FCU portal or entering data.

1.7.2. The Contractor must provide at least one (1) trained staff per Catchment Area to implement the FCU model, within year one (1) of this Agreement. Training requirements include but are not limited to:

1.7.2.1. Motivational interviewing.

1.7.2.2. Everyday Parenting Curriculum, provided by the Department.

1.7.2.3. CFS onboarding and orientation training, provided by the Department.

1.7.3. The Contractor must work with the Department to support the implementation of the evidence-based FCU model to enhance the Department's CFS home visiting program services.

1.7.4. The Contractor must obtain all materials and resources required by the Department to successfully implement and deliver the FCU model with fidelity, including but not limited to a FCU informational flyer and/or brochure available for use with families and referral sources according to the FCU model resources.

1.7.5. The Contractor must provide access to computers, laptops, or other devices to use for video recordings, coding interaction videos,

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

downloading and compiling assessment data. To meet these requirements, the Contractor must ensure the availability of the following specific materials, tools, and resources:

1.7.5.1. Devices with video recording capability to support the following activities:

1.7.5.1.1. Contractor video recording families during family interaction tasks, which are part of the FCU assessment process.

1.7.5.1.2. Contractor video recording family session monthly to share with their Supervisor-Trainers for fidelity checks.

1.7.5.1.3. Supervisor-Trainer's video recording family sessions, supervision, and trainings for the FCU certification process.

1.7.5.2. Devices for families to complete FCU questionnaires on the FCU Portal Website online. Devices must be capable of establishing an internet connection independently or through hotspots. Contractor agrees that while families may use their own devices for the FCU questionnaire, Contractor-provided devices during assessment sessions streamline the process and increase the likelihood of questionnaire completion.

1.7.5.3. Devices must have the following capabilities:

1.7.5.3.1. Able to stand alone on a surface or on a tripod during the video recording process.

1.7.5.3.2. Secure access to prevent unauthorized viewing of confidential information, since providers will leave the room while families complete interaction tasks.

1.7.5.3.3. HIPAA-compliant video storage.

1.7.6. Contractor must provide consent forms that must cover consent for the family for video recording, with separate sections or forms addressing Family Interaction Tasks and session recordings. Consents must clearly outline:

1.7.6.1. The purpose of videos.

1.7.6.2. Who may access them.

1.7.6.3. The timeline for destruction of videos, in accordance with

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

HIPAA retention requirements .

1.7.6.4. A statement that consent to video recording is not required for program participation.

1.7.7. The Contractor must ensure all video recording adheres to the requirements outlined in Exhibit E: DHHS Information Security Requirements.

1.7.8. Contractor must provide toys for family interaction tasks, including:

1.7.8.1. Toys appropriate for children ages two (2) to nine (9) years old.

1.7.8.2. A basket large enough to hold toys for younger children.

1.7.8.3. Several puzzles of varying difficulty.

1.7.8.4. Blocks sufficient to build a tower.

1.7.8.5. Paper and colored pens or crayons.

1.7.9. The Contractor must adapt FRC documentation and intake procedures to integrate FCU model activities. This includes the completion of FCU family questionnaires via the FCU portal.

1.7.10. Until all CFS home visitors are trained to deliver FCU, the Contractor's FCU Specialist must enroll families with children ages 0-18 on a voluntary basis. The target population for the FCU model includes, and priority enrollment through an intake process is given to, families referred to CFS who meet the following criteria:

1.7.10.1. Parents or caregivers with a diagnosed mental illness, and/or families with children who have a diagnosed mental illness.

1.7.10.2. Families with a history of child abuse or neglect or at risk of foster care placement.

1.7.10.3. Families with a history of substance use disorders or those in need of substance use disorder treatment.

1.7.10.4. Families with children experiencing low student achievement.

1.7.10.5. All families with children ages 0-5.

1.7.10.6. Families who meet eligibility criteria for Healthy Families America (HFA) will be enrolled in the Department's HFA program when appropriate and available.

1.7.11. The Contractor must ensure that dedicated FCU staff and supervisors implement the model with fidelity and actively engage

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

with the Department in fidelity monitoring and quality assurance activities. Services must include, but are not limited to:

1.7.11.1. Conducting in-person visits with each FCU-enrolled family, including a minimum of three (3) structured intake and assessment sessions, followed by ongoing support and documentation. These sessions must include:

1.7.11.1.1. An Initial Intake Session to establish rapport, gather information about the family system, and identify existing strengths and challenges.

1.7.11.1.2. A Second Assessment Session in which the Contractor assists the family in completing standardized questionnaires and assessment tools to evaluate needs and areas requiring support.

1.7.11.1.3. A Third Assessment Session focused on collaborative goal setting, which must include:

1.7.11.1.4. Development of a service plan incorporating Everyday Parenting sessions;

1.7.11.1.5. Referral and linkage to appropriate community-based resources; and

1.7.11.1.6. Identification and prioritization of the family's goals and service needs.

1.7.11.2. Following the initial session, within 30 business days, the Contractor's FCU Specialist must:

1.7.11.2.1. Conduct follow-up visits using strategies from the Everyday Parenting curriculum, tailored to the results of the family's assessments.

1.7.11.2.2. Ensure accurate and timely documentation in the FCH-DS and FCU online assessment tools, summarizing recommendations and next steps.

1.7.11.2.3. Review family goals and progress on a quarterly basis in collaboration with the family.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

1.7.11.2.4. Assess the family's readiness to change as part of ongoing engagement and service planning.

1.7.12. The Contractor must ensure the following:

1.7.12.1. Provide the Department with access to video-recorded family sessions to support monitoring of implementation and fidelity to the model, upon consent granted by the family in Section 1.7.3.4.

1.7.12.2. Provide the Department with a written policy regarding the use of video recording for the purpose of home visits. The Contractor must ensure all staff and subcontractors sign a confidentiality agreement and adhere to the confidentiality policy outlined in the written policy, and notify staff and subcontractors that violations may result in disciplinary action.

1.7.12.3. Obtain and document individual consent for all video-recorded sessions, including consent to share recordings with the Department for quality improvement purposes.

1.7.12.4. Ensure that appropriate equipment is available and maintained for home visitors to conduct video recordings, such as video camera, tablet, or other device with recording capabilities. The Contractor must ensure that staff does not use personal cell phones or other personal devices to conduct video recording.

1.7.13. The Contractor must only use marketing materials that have been reviewed and approved by the Department.

1.7.14. The Contractor must collaborate with the Department's CFS Program Manager, Quality Improvement and Training Coordinator, and FCU Model experts to ensure all readiness activities are completed prior to program implementation, including but not limited to:

1.7.14.1. Completion of FCU Model training.

1.7.14.2. Completion of Everyday Parenting Curriculum training.

1.7.14.3. Completion of Motivational Interviewing training.

1.7.14.4. Implementation of data collection processes, including a Department-approved participant post-survey.

1.7.14.5. Participation in monthly Supervisor Consultation, facilitated by the Department, to support implementation

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

and fidelity to the FCU model.

1.8. Staffing and Training

1.8.1. The Contractor must designate at least one (1) dedicated FCU Specialist position as part of the CFS home visiting program. The FCU Specialist must initially allocate a minimum of 20% of their workload to family enrollment and model implementation activities.

1.8.2. The Contractor must:

1.8.2.1. Ensure that all relevant staff participate in and complete these trainings as scheduled, and maintain documentation of completion for Department review.

1.8.2.2. Ensure that all relevant staff are trained in Motivational Interviewing.

1.8.2.3. Budget for additional staff development opportunities based on the needs of their team, as identified in collaboration with the Department's Quality Improvement and Training Coordinator.

1.8.3. The Contractor must ensure the FCU Specialist transitions to dedicating 100% of their workload to the implementation of the FCU model by June 30, 2027.

1.8.4. The Contractor may elect to designate more than one (1) FCU Specialist to implement the model during the first year of program implementation.

1.8.5. The Contractor must identify additional CFS staff to participate in being trained to implement the FCU model in year two and again in year three of program implementation, to support sustainability and build long-term capacity.

1.8.6. The Contractor must ensure all CFS home visitors complete Department provided training in and utilize the Everyday Parenting Curriculum and CFS Program Manual, which is:

1.8.6.1. The Everyday Parenting Manual, Everyday Parenting: A Professional's Guide to Building Family Management Skills (2nd edition). Available at www.researchpress.com

1.8.7. The Contractor must ensure all CFS home visitors are trained in core CFS competencies and collaborate with the Department's Continuous Quality Improvement (CQI) and training coordinator to implement a comprehensive staff training plan that ensures a qualified workforce and identifies training needs and gaps. CFS home visitors must complete Department provided training which will include at a minimum,

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Everyday Parenting and CFS onboarding training.

1.8.8. The Contractor must identify a qualified supervisor for the FCU staff be trained in the FCU model and be responsible for ensuring adherence to the model's implementation standards. The FCU supervisor must fulfill the following responsibilities:

1.8.8.1. Participate in monthly FCU supervisor consultation meetings, as scheduled by the Department, to enhance supervisory capacity and support fidelity monitoring of the FCU implementation.

1.8.8.2. The Contractor must ensure the FCU supervisor is trained and certified by Northwest Prevention Science as a FCU supervisor. The FCU supervisor must provide implementation support to FCU staff, including but not limited to individualized consultation, direct observation, and performance evaluation, to ensure fidelity to the model.

1.8.9. The Contractor must ensure that both the FCU specialist and FCU supervisor receive training in the Family Check-Up model, Motivational Interviewing, Newborn Navigation Core Training, and Everyday Parenting curriculum, and that they meet the minimum educational qualifications required for their roles.

1.8.10. The Contractor must use the FCU model, Motivational Interviewing and Everyday Parenting curriculum training to support effective implementation.

1.8.11. The Contractor must ensure that all staff, subcontractors, and volunteers undergo the required criminal background checks registry checks, as described in Section 1.12.

1.8.12. If the Contractor provides transportation for individuals served under this Agreement, the Contractor must ensure:

1.8.12.1. The enrolled parent or caregiver must be present for all sessions.

1.8.12.2. All drivers have a valid State Issued and a safe driving record;

1.8.12.2.1. All vehicles are approved by the Contractor and meet applicable safety standards;

1.8.12.2.2. Compliance with all applicable local, state, and federal transportation safety rules and standards;

1.8.12.2.3. Proof of valid automobile insurance is provided to the Department that includes bodily injury and

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

property damage in amounts of not less than $100,000 per occurrence and $300,000 aggregate or excess, for all owned, hired, or non-owned vehicles used to provide transportation.

1.8.13. The Contractor must ensure staff complete required training in the principles of family support, maternal and child health, HIPAA as well as the child welfare system, with concentrations in service array and working in multidisciplinary teams.

1.8.14. The Contractor must consistently engage in purposeful staff development activities that support professional growth and improve the quality of services provided. These activities must include, but are not limited to, training and enrichment in the following areas: Skills necessary to understand and respond to the unique needs, strengths, and resources of the families and communities served.

1.8.14.1. The ability to exercise empathy, with an understanding of the complex family dynamics and stressors experienced by parents and caregivers.

1.8.14.2. The use of effective, evidence-informed home visiting practices, including strategies that are grounded in research and adapted to family needs, as well as standards for documentation and reporting.

1.8.15. The Contractor must provide an adequate number of home visitors to implement the CFS program, as approved by the Department. All staffing vacancies, transitions, or changes in personnel assignments must be reported to the Department in a timely manner.

1.8.16. The Contractor must ensure the CFS program director, supervisor, or program managers have:

1.8.16.1. A Bachelor's degree in public health, early childhood, social work, human services administration, or a related field focused on supporting children and families, with four (4) years of experience working with families and children in a social service, home health, or other early childhood program setting, including supervisory experience;

1.8.16.2. An Associate degree with five (5) years of prior experience working with families and children in a social service, home health, or early childhood program setting, including supervisory experience;

1.8.16.3. Or at a minimum, high school diploma or equivalent with six (6) years of relevant lived and professional experience working with families and children in a social service, home

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

health, or other early childhood program setting, including supervisory responsibilities, and written approval from the Department to fulfill the duties of the position.

1.8.17. The Contractor must ensure CFS Home Visitors have:

1.8.17.1. An Associate degree with four (4) years of prior experience working with families and children in a social service, home health, or other early childhood program setting;

1.8.17.2. Or at a minimum, a high school diploma or equivalent with five (5) years of experience providing services to families in a social service, home health, or other early childhood program setting; and demonstrated lived and professional experience aligned with this role, with written approval from the Department.

1.8.18. The Contractor must ensure the CFS Family Check Up Home Visitor has at a minimum:

1.8.18.1. A Bachelor's degree or higher; and

1.8.18.2. Two (2) years of experience providing services to families in a social service, home health, or other early childhood program setting.

1.8.18.2.1. If a Bachelor's-level staff is not available, the Contractor may recommend qualified team members to perform FCU. A training plan and summary of relevant skills and clinical experience must be submitted with the application and approved by the Department.

1.8.19. The Contractor must ensure all CFS home visitors across all CFS programs are trained in the "Everyday Parenting" curriculum and Motivational Interviewing and adhere to its requirements within six (6) months of program implementation.

1.8.19.1. Although not required, the Contractor may allocate funding to train staff in additional evidence-based early childhood curricula, such as Growing Great Kids or Parents as Teachers.

1.8.20. The Contractor must demonstrate capacity and readiness to be trained in and implement the Family Check Up model.

1.8.21. Staffing requirements are subject to change, contingent upon the Department's written approval.

1.9. Reporting

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

1.9.1. The Contractor must submit comprehensive quarterly reports highlighting program activities by the 15th calendar day of the month following the end of each reporting period. The first report is due by October 15, 2026, and must include:

1.9.1.1. The progress in achieving the stated outcomes; and

1.9.1.2. Feedback from families regarding the effectiveness, accessibility, and satisfaction of the services provided through participant surveys or post service delivery interviews.

1.9.2. The Contractor must submit an annual performance report to the Department by July 31st of each year, with the first report due on July 31, 2027, which includes, but is not limited to:

1.9.2.1. A summary of program accomplishments and key activities.

1.9.2.2. Staff training plan for each CFS home visitor.

1.9.2.3. Recommendations for service development, program enhancements, and outcome improvements.

1.9.2.4. Identification of systemic barriers impacting service delivery or access.

1.9.2.5. Results of family satisfaction surveys and analysis of trends.

1.9.3. The Contractor must transmit all data in a secure and encrypted format approved by the Department.

1.9.4. The Contractor must designate an FRC staff member to serve as the primary liaison for all programmatic communication between the Department and the Contractor, including, but not limited to:

1.9.4.1. Clinical updates.

1.9.4.2. Program announcements.

1.9.4.3. Reporting changes, errors, and requests.

1.9.4.4. Contract oversight.

1.9.4.5. Oversight of program operations and compliance

1.9.5. The Contractor must evaluate both the progress of parents and caregivers and the effectiveness of the programs and services provided.

1.9.6. The Contractor must maintain a comprehensive and confidential Family Service Record for each family, in compliance with all Health Insurance Portability and Accountability Act (HIPAA) Privacy Rules. The Family Service Record must include, but is not limited to:

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

1.9.6.1. Participant names (Parent(s) and Child(ren)).

1.9.6.2. Participant DOBs (Parent (s) and Child(ren)).

1.9.6.3. Residence.

1.9.6.4. Primary language spoken in the home.

1.9.6.5. Educational level of parent(s) or guardian(s).

1.9.6.6. Digital Resources (phone, laptop, cell).

1.9.6.7. Source of referral.

1.9.6.8. Referral details and contact information.

1.9.6.9. Signed release of information form(s).

1.9.6.10. Household income.

1.9.6.11. Household size.

1.9.6.12. Employment status of parent(s) or guardian(s).

1.9.6.13. Access to prenatal and post-partum healthcare.

1.9.6.14. Home visits conducted and screening tools completed.

1.9.6.15. Topics reviewed during service delivery, including but not limited to:

1.9.6.15.1. Maternal depression screening.

1.9.6.15.2. Planning for future pregnancies.

1.9.6.15.3. Positive parenting practices.

1.9.6.15.4. Breastfeeding/lactation support.

1.9.6.15.5. Nutrition.

1.9.6.15.6. Child health.

1.9.6.15.7. Maternal health and self-care.

1.9.6.15.8. Referrals made for service linkage, including but not limited to:

1.9.6.15.9. Concrete supports (e.g., housing, utilities, transportation).

1.9.6.15.10. Childcare resources.

1.9.6.15.11. Healthcare access and coordination.

1.9.6.15.12. Community-based supports and services.

1.9.6.15.13. Home visiting programs and service type.

1.9.6.15.14. Discharge date and reason for discharge.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

1.9.6.15.15. Completion of post-service surveys.

1.9.6.15.16. Family needs assessment.

1.9.6.15.17. Child/Family Individualized Service Plan (ISP).

1.9.6.15.18. Documentation of prenatal and postpartum healthcare received.

1.9.6.15.19. Medicaid and other health insurance coverage.

1.9.6.15.20. Linkages with community-based resources.

1.9.6.16. Receipt of public benefits, including but not limited to:

1.9.6.16.1. SNAP.

1.9.6.16.2. New Hampshire Child Care Scholarship.

1.9.6.16.3. Medicaid.

1.9.6.16.4. Social Security Disability Insurance (SSDI).

1.9.6.16.5. Supplemental Security Income (SSI).

1.9.6.16.6. Temporary Assistance for Needy Families (TANF).

1.9.6.16.7. Special Supplemental Nutrition Program for WIC.

1.9.6.17. Participant service data, including but not limited to:

1.9.6.17.1. Date of service.

1.9.6.17.2. Participants present during service delivery.

1.9.6.17.3. Type of service provided and topics reviewed.

1.10. Performance Measures

1.10.1. The Contractor must provide performance data in a format and at a frequency specified by the Department. The following performance measures will be used to evaluate program effectiveness:

1.10.1.1. A minimum of 80% of participants must report a favorable rating on satisfaction surveys administered by the Contractor.

1.10.1.2. At least 70% of referred families must enroll in services within 30 days of referral.

1.10.1.3. A minimum of 65% of enrolled families must complete the full

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

service cycle as defined by the program model.

1.10.2. The Contractor must demonstrate annual improvement in outreach to high-risk populations, as measured by year-over-year increases in engagement rates.

1.10.3. The Contractor must submit data to support evaluation of long-term outcomes, including family stability, child health indicators, and service retention, as defined by the Department.

1.11. Meetings, Collaboration, and Data Sharing

1.11.1. The Contractor must participate in regular performance review meetings with the Department and peer providers to analyze data, share best practices, and identify areas for improvement.

1.11.2. The Contractor must collect and transmit all required data, including client-level demographic, service utilization, and outcome data, in a secure format specified by the Department.

1.11.3. The Contractor must participate in monthly check-in meetings and Communities of Practice (CoP) for the Department's Comprehensive Family Support (CFS) home visiting program, as scheduled by the Department. CoPs are structured, recurring gatherings of professionals and stakeholders involved in CFS to share best practices, address challenges, and support continuous quality improvement.

1.11.4. The Contractor must participate in monthly meetings with the Department, or as otherwise requested by the Department.

1.11.5. The Contractor may be required to participate in on-site program and file reviews conducted by the Department, as requested.

1.11.6. The Contractor must participate in monthly fidelity reviews of family sessions with the Department for the Family Check Up model.

1.11.7. The Contractor may be required to facilitate annual file reviews conducted by the Department, or as otherwise requested, which may include, but are not limited to:

1.11.7.1. Compliance and documentation standards.

1.11.7.2. Service Delivery alignment and model fidelity.

1.11.7.3. Verification of data entry and reporting accuracy.

1.11.8. The Contractor must ensure Family Service Records are accurately summarized and entered into the Department's Family and Community Health Data System (FCH-DS) in real time and must comply with the confidentiality provisions of RSA 170-G:8-a.

1.11.9. The Contractor must provide the Department with a list of staff (End

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Users, as defined in Exhibit D) who will be responsible for entering Family Service Record data into the FCH-DS.

1.11.10. The Contractor must notify the Department immediately, and no more than 24 hours of staff changes, to ensure access to the FCH-DS is removed in a timely manner.

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

1.11.12. The Contractor must utilize the Department's closed loop referral system, at an agreed upon start date, whenever applicable to the services they provide for referrals between health and/or human service providers within New Hampshire for referral management and client care coordination. Utilization includes inputting information and data as necessary into the Department's referral solution as part of the NH Care Connections Network to facilitate referrals to participating providers, signing required Network Participation Agreement(s), and obtaining a participant specific consent for services.

1.11.13. The Contractor must utilize the Department's admission, discharge, transfer, and shared care insights solution whenever applicable to the services they provide for client care coordination and management between health providers within New Hampshire. Utilization includes inputting information and data as necessary into the Department's admission, discharge, transfer, and shared care insights platform as part of the NH Care Connections Network to facilitate referrals to participating providers and signing required Participation Agreement(s) for the admission, discharge, transfer, and shared care insights solution

1.11.13.1. The Department's contracts with the closed loop referral and admission, discharge, and transfer vendors incorporate the costs of developing and maintaining the standards-based interface from which the Contractor may choose to configure their systems to communicate securely with the Department's NH Care Connections Network solutions. The Contractor may choose to interface with the Department's closed loop referral and/or the admission discharge transfer solution utilizing a Smart on FHIR or HL-7 standard interface process to connect individuals to health and social service providers. The costs for the Contractor's system or team to develop or utilize the standard Smart on FHIR or HL-7 based interface are the sole responsibility of the Contractor.

1.12. Background Checks

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

1.12.1. Prior to permitting any individual to provide services under this Agreement, the Contractor must ensure that said individual has undergone:

1.12.1.1. A criminal background check, at the Contractor's expense, and has no convictions for crimes that represent evidence of behavior that could endanger individuals served under this Agreement;

1.12.1.2. A name search of the Department's Bureau of Adult and Aging Services (BAAS) State Registry, pursuant to RSA 161-F:49, with results indicating no evidence of behavior that could endanger individuals served under this Agreement; and

1.12.1.3. A name search of the Department's DCYF Central Registry pursuant to RSA 169-C:35, with results indicating no evidence of behavior that could endanger individuals served under this Agreement.

1.13. Confidential Data

1.13.1. The Contractor must meet all information security and privacy requirements as set by the Department and in accordance with the Department's Information Security Requirements Exhibit as referenced below.

1.13.2. The Contractor must ensure any individuals involved in delivering services through this Agreement contract 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 Information Security Requirements Exhibit. The Contractor must ensure said individuals have a justifiable business need to access confidential data. The Contractor must provide attestations upon Department request.

1.14. Privacy Impact Assessment

1.14.1. Upon request, the Contractor must allow and assist the Department in conducting a Privacy Impact Assessment (PIA) of its system(s)/application(s)/web portal(s)/website(s) or Department system(s)/application(s)/web portal(s)/website(s) hosted by the Contractor, if Personally Identifiable Information (PII) is collected, used, accessed, shared, or stored. To conduct the PIA the Contractor must provide the Department access to applicable systems and documentation sufficient to allow the Department to assess, at

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

minimum, the following:

1.14.1.1. How PII is gathered and stored;

1.14.1.2. Who will have access to PII;

1.14.1.3. How PII will be used in the system;

1.14.1.4. How participant consent will be achieved and revoked; and

1.14.1.5. Privacy practices.

1.14.2. 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.

1.15. Department Owned Devices, Systems and Network Usage

1.15.1. Contractor End Users, defined in the Department's Information Security Requirements Exhibit that is incorporated into this Agreement, authorized by the Department's Information Security Office to use a Department issued device (e.g. computer, tablet, mobile telephone) or access the Department network in the fulfilment of this Agreement, each must:

1.15.1.1. Sign and abide by applicable Department and New Hampshire Department of Information Technology (NH DoIT) use agreements, policies, standards, procedures and guidelines, and complete applicable trainings as required;

1.15.1.2. Use the information that they have permission to access solely for conducting official Department business and agree that all other use or access is strictly forbidden including, but not limited, to personal or other private and non-Department use, and that at no time shall they access or attempt to access information without having the express authority of the Department to do so;

1.15.1.3. Not access or attempt to access information in a manner inconsistent with the approved policies, procedures, and/or agreement relating to system entry/access;

1.15.1.4. Not copy, share, distribute, sub-license, modify, reverse engineer, rent, or sell software licensed, developed, or being evaluated by the Department, and at all times must use utmost care to protect and keep such software strictly confidential in accordance with the license or any other agreement executed by the Department;

1.15.1.5. Only use equipment, software, or subscription(s) authorized by the Department's Information Security Office or

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

designee;

1.15.1.6. Not install non-standard software on any Department equipment unless authorized by the Department's Information Security Office or designee;

1.15.1.7. Agree that email and other electronic communication messages created, sent, and received on a Department-issued email system are the property of the Department of New Hampshire and to be used for business purposes only. Email is defined as "internal email systems" or "Department-funded email systems."

1.15.1.8. Agree that use of email must follow Department and NH DoIT policies, standards, and/or guidelines; and

1.15.1.9. Agree when utilizing the Department's email system:

1.15.1.9.1. To only use a Department email address assigned to them with a "@ affiliate.DHHS.NH.Gov".

1.15.1.9.2. Include in the signature lines information identifying the End User as a non-Department workforce member; and

1.15.1.9.3. Ensure the following confidentiality notice is embedded underneath the signature line:

CONFIDENTIALITY NOTICE: "This message may contain information that is privileged and confidential and is intended only for the use of the individual(s) to whom it is addressed. If you receive this message in error, please notify the sender immediately and delete this electronic message and any attachments from your system. Thank you for your cooperation."

1.15.1.10. Contractor End Users with a Department issued email, access or potential access to Confidential Data, and/or a workspace in a Department building/facility, must:

1.15.1.10.1. Complete the Department's Annual Information Security & Compliance Awareness Training prior to accessing, viewing, handling, hearing, or transmitting Department Data or Confidential Data.

1.15.1.10.2. Sign the Department's Business Use and Confidentiality Agreement and Asset Use Agreement, and the NH DoIT Department wide

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Computer Use Agreement upon execution of the Agreement and annually thereafter.

1.15.1.10.3. Only access the Department's intranet to view the Department's Policies and Procedures and Information Security webpages.

1.15.1.10.4. Contractor agrees, if any End User is found to be in violation of any of the above terms and conditions, said End User may face removal from the Agreement, and/or criminal and/or civil prosecution, if the act constitutes a violation of law.

1.15.1.10.5. Contractor agrees to notify the Department a minimum of three business days prior to any upcoming transfers or terminations of End Users who possess Department credentials and/or badges or who have system privileges. If End Users who possess Department credentials and/or badges or who have system privileges resign or are dismissed without advance notice, the Contractor agrees to notify the Department's Information Security Office or designee immediately.

1.16. Contract End-of-Life Transition Services

1.16.1. General Requirements

1.16.1.1. If applicable, upon early termination or expiration of the Agreement the parties agree to cooperate in good faith to effectuate a secure transition of the services ("Transition Services") from the Contractor to the Department and, if applicable, the new Contractor ("Recipient") engaged by the Department to assume the services. 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 Recipient to develop a Data Transition Plan (DTP). The Department shall provide the DTP template to the Contractor.

1.16.1.2. The Contractor must assist the Recipient, in connection with the transition from the performance of Services by the Contractor and its End Users 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

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

any 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 and assistance to any third-party consultants engaged by Recipient in connection with the Transition Services.

1.16.1.3. If a system, database, hardware, software, and/or software licenses (Tools) was purchased or created to manage, track, and/or store Department Data in relationship to this contract said Tools will be inventoried and returned to the Department, along with the inventory document, once transition of Department data is complete. The internal planning of the Transition Services by the Contractor and its End Users shall be provided to the Department and if applicable the Recipient in a timely manner. Any such Transition Services shall be deemed to be Services for purposes of this Agreement.

1.16.1.4. In the event the data Transition extend beyond the end of the Agreement, the Contractor agrees that the Information Security Requirements, and if applicable, the Department's Business Associate Agreement terms and conditions remain in effect until the Data Transition is accepted as complete by the Department.

1.16.1.5. In the event the Contractor has comingled Department Data and the destruction or Transition of said data is not feasible, the Department and Contractor will jointly evaluate regulatory and professional standards for retention requirements prior to destruction, refer to the terms and conditions of the Department's DHHS Information Security Requirements Exhibit.

1.17. Completion of Transition Services

1.17.1. Each service or transition phase shall be deemed completed (and the transition process finalized) at the end of fifteen (15) business days after the product, resulting from the Service, is delivered to the Department and/or the Recipient in accordance with the mutually agreed upon Transition plan, unless within said fifteen (15) business day term the Contractor notifies the Department of an issue requiring additional time to complete said product.

1.17.2. Once all parties agree the data has been migrated the Contractor will have thirty (30) days to destroy the data per the terms and conditions

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

of the Department's Information Security Requirements Exhibit.

1.18. Disagreement over Transition Services Results

1.18.1. In the event the Department is not satisfied with the results of the Transition Service, the Department shall notify the Contractor, in writing, stating the reason for the lack of satisfaction within fifteen (15) business days of the final product or at any time during the data Transition process. The Parties shall discuss the actions to be taken to resolve the disagreement or issue. If an agreement is not reached, at any time the Department shall be entitled to initiate actions in accordance with the Agreement.

2. Exhibits Incorporated

2.1. The Contractor must comply with all Exhibit D Federal Requirements, which are attached hereto and incorporated by reference herein.

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

2.3. 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 F, Business Associate Agreement, which has been executed by the parties.

3. Additional Terms

3.1. Impacts Resulting from Court Orders or Legislative Changes

3.1.1. 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.

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

3.2.1. The Contractor must submit:

3.2.1.1. A detailed description of the language assistance services, within ten (10) days of the Effective Date of the Agreement, 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

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

who have speech challenges.

3.2.1.2. A written attestation, within forty-five (45) days of the Effective Date of the Agreement and annually thereafter, that all personnel involved the provision of services to individuals under this Agreement have completed, within the last twelve (12) months, the Contractor Required Training Video on Civil Rights-related Provisions in DHHS Procurement Processes, which is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors); and

3.2.1.3. The Department's Federal Civil Rights Compliance Checklist within ten (10) days of the Effective Date of the Agreement. The Federal Civil Rights Compliance Checklist must have been completed within the last twelve (12) months and is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors).

3.3. Credits and Copyright Ownership

3.3.1. 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."

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

3.3.3. The Department must retain copyright ownership for any and all original materials produced, including, but not limited to reports, protocols, guidelines, brochures, posters, and resource directories.

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

3.4. Operation of Facilities: Compliance with Laws and Regulations

3.4.1. 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

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

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.

4. Records

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

4.1.1. 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.

4.1.2. 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.

4.2. 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.

4.3. If, upon further review, the Department must disallow any expenses claimed by the Contractor as costs hereunder, the Department retains the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Payment Terms

1. This Agreement is funded by:
   1.1. 73% Federal funds, TEMPORARY ASSISTANCE FOR NEEDY FAMILIES, as awarded on choose a date, December 16, 2025 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.558, FAIN 2601NHTANF.
   1.2. 16% Federal funds, SOCIAL SERVICES BLOCK GRANT, as awarded on choose a date, October 1, 2023 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.667, FAIN 2501NHSOSR.
   1.3. %11 General funds.

2. For the purposes of this Agreement the Department has identified:
   2.1. The Contractor as a Subrecipient, based on criteria specified in 2 CFR §200.331.
   2.2. The Agreement as NON-R&D, in accordance with 2 CFR §200.332.
   2.3. The Indirect Cost Rate for this Agreement in the attached Budget Sheet(s).
3. Payment shall be on a cost reimbursement basis for actual allowable expenditures incurred under this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1, Budget.
4. The Contractor shall submit an invoice 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:
   4.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.
   4.2. Is submitted in a format as provided by or otherwise acceptable to the Department.
   4.3. Identifies and requests payment in accordance with Section 3 above.
   4.4. Includes supporting documentation with each invoice, including, but not limited to, proof of expenditures, receipts for purchases, time sheets, and payroll records, as applicable.
   4.5. Is completed, dated and returned to the Department to initiate payment.
   4.6. Is assigned an electronic signature and is emailed to BFAinvoices@dhhs.nh.gov or mailed to:

   Financial Manager
   Department of Health and Human Services
   129 Pleasant Street

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Concord, NH 03301

5. The Department shall make payments to the Contractor within thirty (30) calendar days of receipt of each invoice and any required supporting documentation, subsequent to approval of the submitted invoice.

6. The final invoice and any required supporting documentation shall be due to the Department no later than forty (40) calendar days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.

7. Notwithstanding Paragraph 18 of the General Provisions Form P-37, changes limited to adjusting direct and indirect cost 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.

8. If applicable, the Contractor must notify the Department of any revisions, updates, or extensions to the Contractor's federal negotiated indirect cost rate agreement (NICRA) by submitting a copy of the revised NICRA to the Department within five (5) business days of the Contractor's receipt of the NICRA from the cognizant federal agency.

9. Audits

9.1. The Contractor must email an annual audit to dhhs.act@dhhs.nh.gov if any of the following conditions exist:

9.1.1. Condition A - The Contractor is subject to a Single Audit pursuant to 2 CFR 200.501 Audit Requirements.

9.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b.

9.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

9.2. If Condition A exists, the Contractor must 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.

9.2.1. The Contractor must submit a copy of any Single Audit findings and any associated corrective action plans. The Contractor

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

must submit quarterly progress reports on the status of implementation of the corrective action plan.

9.3. If Condition B or Condition C exists, the Contractor must submit an annual financial audit performed by an independent CPA within 120 days after the close of the Contractor's fiscal year.

9.4. The Contractor, regardless of the funding source and/or whether Conditions A, B, or C exist, may be required to submit annual financial audits performed by an independent CPA upon request by the Department.

9.5. 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 must 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, within sixty (60) days.

10. If applicable, the Contractor must request disposition instructions from the Department for any equipment, based on 2 CFR 200.313, purchased using funds provided under this Agreement.

Exhibit C-1 Budget

New Hampshire Department of Health and Human Services			
Contractor Name:	*TLC Family Resource Center*		
Budget Request for:	*1,603,569*		
Budget Period:	*July 1, 2026 - June 30, 2029*		
Indirect Cost Rate (if applicable)	15.00%		
Line Item	**Program Cost - Funded by DHHS - SFY 27**	**Program Cost - Funded by DHHS - SFY 28**	**Program Cost - Funded by DHHS - SFY 29**
1. Salary & Wages	$326,560	$336,357	$346,448
2. Fringe Benefits	$61,131	$62,965	$64,853
3. Consultants	$0	$0	$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	$0	$0
5.(a) Supplies - Educational	$450	$200	$200
5.(b) Supplies - Lab	$0	$0	$0
5.(c) Supplies - Pharmacy	$0	$0	$0
5.(d) Supplies - Medical	$0	$0	$0
5.(e) Supplies - Office	$1,100	$1,100	$500
6. Travel	$6,090	$6,090	$6,090
7. Software	$10,744	$10,744	$10,744
8. (a) Other - Marketing/Communications	$3,500	$1,000	$100
8. (b) Other - Education and Training	$1,245	$1,212	$1,000
8. (c) Other - Other (specify below)	$0	$0	$0
Family Check Up/Online Training Portal (per staff)	$4,480	$2,310	$1,750
Telephone	$2,400	$2,400	$2,400
Occupancy: Rent, Maintenance, Utilities @ 20%	$33,486	$33,486	$33,486
Postage	$250	$245	$71
Insurance: liability @ 20%	$1,740	$1,740	$1,740
Audit/Legal @ $20%	$4,000	$4,000	$4,000
9. Subrecipient Contracts	$0	$0	$0
Total Direct Costs	$457,176	$463,849	$473,382
Total Indirect Costs	$68,576	$69,578	$71,008
Subtotals	$525,752	$533,427	$544,390
		TOTAL	**$1,603,569**

Contractor Initials: AL (Initial)
Date: 5/5/2026

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

New Hampshire Department of Health and Human Services
Exhibit D – Federal Requirements

SECTION A: CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Contractor 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 CONTRACTORS 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 contractors (and by inference, sub- contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a contractor (and by inference, 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 Agreement 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 Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, 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 Contractor 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 Contractor'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 Contractor'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 Agreement 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 Agreement, 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;

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

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 contract officer on whose contract activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected Agreement;

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 Contractor may insert in the space provided below the site(s) for the performance of work done in connection with the specific Agreement.

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.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

SECTION B: CERTIFICATION REGARDING LOBBYING

The Contractor 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 Byrd Anti-Lobbying Amendment (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, loan, or cooperative agreement (and by specific mention 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, loan, or cooperative agreement (and by specific mention sub- contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, see https://omb.report/icr/201009-0348-022/doc/20388401

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, 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.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

SECTION C: 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 12689 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 Agreement, 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 Agreement 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 https://www.govinfo.gov/app/details/CFR-2004-title45-vol1/CFR-2004-title45-vol1-part76/context.

6. The prospective primary participant agrees by submitting this Agreement 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) https://www.ecfr.gov/current/title-22/chapter-V/part-513.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

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 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 (Agreement) 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 (Agreement), 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 (Agreement).

14. The prospective lower tier participant further agrees by submitting this proposal (Agreement) 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.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

SECTION D: CERTIFICATION OF COMPLIANCE WITH FEDERAL REQUIREMENTS

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:

The Contractor will comply, and will require any subcontractors to comply, with any applicable federal requirements, which may include but are not limited to:

1. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR 200).
2. 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;
3. 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;
4. 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);
5. 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;
6. 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;
7. 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;
8. 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;
9. 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;
10. 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.
11. The Clean Air Act (42 U.S.C. 7401-7671q.) which seeks to protect human health and the environment from emissions that pollute ambient, or outdoor, air.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

12. The Clean Water Act (33 U.S.C. 1251-1387) which establishes the basic structure for regulating discharges of pollutants into the waters of the United States and regulating quality standards for surface waters.
13. Civilian Agency Acquisition Council and the Defense Acquisition Regulations Council (Councils) (41 U.S.C. 1908) which establishes administrative, contractual, or legal remedies in instances where contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate.
14. Contract Work Hours and Safety Standards Act (40 U.S.C. 3701–3708) which establishes that all contracts awarded by the non-Federal entity in excess of $100,000 that involve the employment of mechanics or laborers must include a provision for compliance with 40 U.S.C. 3702 and 3704, as supplemented by Department of Labor regulations (29 CFR Part 5).
15. Rights to Inventions Made Under a Contract or Agreement 37 CFR § 401.2 (a) which establishes the recipient or subrecipient wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that “funding agreement,” the recipient or subrecipient must comply with the requirements of 37 CFR Part 401, “Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements,” and any implementing regulations issued by the awarding agency.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, or government wide suspension or debarment.

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 Agreement, the Contractor agrees to comply with the provisions indicated above.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

SECTION E: 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 Agreement, 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.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

SECTION F: 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 $30,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $30,000 or more. If the initial award is below $30,000 but subsequent grant modifications result in a total award equal to or over $30,000, 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 sub award 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 Entity Identifier (SAM UEI; DUNS#)
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.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

New Hampshire Department of Health and Human Services
Exhibit D – Federal Requirements

FORM A

As the Grantee 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: Q7GVMGCBKWT4

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: _____

Contractor Name: TLC Family Resource Center

5/5/2026
Date:

Signed by: Alysse Lizotte
D4CB552452B24A9...
Name: Alysse Lizotte
Title: Executive Director

New Hampshire Department of Health and Human Services

Exhibit E

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

Contractor Initials Initial AL

Date 5/5/2026

or misplacement of hardcopy documents, and misrouting of physical or electronic 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.

Contractor Initials Initial AL

Date 5/5/2026

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.

Contractor Initials Initial al

Date 5/5/2026

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, antihacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a whole, must have aggressive intrusion-detection and firewall protection.

Contractor Initials Initial AL

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

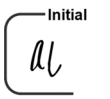
1. If the Contractor will maintain any Confidential Information on its systems (or its sub-contractor systems), the Contractor will maintain a documented process for securely disposing of such data upon request or contract termination; and will obtain written certification for any State of New Hampshire 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 

Date 5/5/2026

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

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;

Contractor Initials Initial AL

Date 5/5/2026

4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and
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

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement (Form P-37) ("Agreement"), and any of its agents who receive use or have access to protected health information (PHI), as defined herein, shall be referred to as the "Business Associate." The State of New Hampshire, Department of Health and Human Services, "Department" shall be referred to as the "Covered Entity," The Contractor and the Department are collectively referred to as "the parties."

The parties agree, to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191, the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162, and 164 (HIPAA), provisions of the HITECH Act, Title XIII, Subtitle D, Parts 1&2 of the American Recovery and Reinvestment Act of 2009, 42 USC 17934, et sec., applicable to business associates, and as applicable, to be bound by the provisions of the Confidentiality of Substance Use Disorder Patient Records, 42 USC s. 290 dd-2, 42 CFR Part 2, (Part 2), as any of these laws and regulations may be amended from time to time.

(1) Definitions

a. The following terms shall have the same meaning as defined in HIPAA, the HITECH Act, and Part 2, as they may be amended from time to time:

"Breach," "Designated Record Set," "Data Aggregation," Designated Record Set," "Health Care Operations," "HITECH Act," "Individual," "Privacy Rule," "Required by law," "Security Rule," and "Secretary."

b. Business Associate Agreement, (BAA) means the Business Associate Agreement that includes privacy and confidentiality requirements of the Business Associate working with PHI and as applicable, Part 2 record(s) on behalf of the Covered Entity under the Agreement.

c. "Constructively Identifiable," means there is a reasonable basis to believe that the information could be used, alone or in combination with other reasonably available information, by an anticipated recipient to identify an individual who is a subject of the information.

d. "Protected Health Information" ("PHI") as used in the Agreement and the BAA, means protected health information defined in HIPAA 45 CFR 160.103, limited to the information created, received, or used by Business Associate from or on behalf of Covered Entity, and includes any Part 2 records, if applicable, as defined below.

e. "Part 2 record" means any patient "Record," relating to a "Patient," and "Patient Identifying Information," as defined in 42 CFR Part 2.11.

f. "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.

(2) Business Associate Use and Disclosure of Protected Health Information

a. Business Associate shall not use, disclose, maintain, store, or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under the Agreement. Further, Business Associate, including but not

Contractor Initials AL

Date 5/5/2026

limited to all its directors, officers, employees, and agents, shall protect any PHI as required by HIPPA and 42 CFR Part 2, and not use, disclose, maintain, store, or transmit PHI in any manner that would constitute a violation of HIPAA or 42 CFR Part 2.

b. Business Associate may use or disclose PHI, as applicable:

I. For the proper management and administration of the Business Associate;

II. As required by law, according to the terms set forth in paragraph c. and d. below;

III. According to the HIPAA minimum necessary standard;

IV. For data aggregation purposes for the health care operations of the Covered Entity; and

V. Data that is de-identified or aggregated and remains constructively identifiable may not be used for any purpose outside the performance of the Agreement.

c. To the extent Business Associate is permitted under the BAA or the Agreement to disclose PHI to any third party or subcontractor prior to making any disclosure, the Business Associate must obtain, a business associate agreement or other agreement with the third party or subcontractor, that complies with HIPAA and ensures that all requirements and restrictions placed on the Business Associate as part of this BAA with the Covered Entity, are included in those business associate agreements with the third party or subcontractor.

d. The Business Associate shall not, disclose any PHI in response to a request or demand for disclosure, such as by a subpoena or court order, on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity can determine how to best protect the PHI. If Covered Entity objects to the disclosure, the Business Associate agrees to refrain from disclosing the PHI and shall cooperate with the Covered Entity in any effort the Covered Entity undertakes to contest the request for disclosure, subpoena, or other legal process. If applicable relating to Part 2 records, the Business Associate shall resist any efforts to access part 2 records in any judicial proceeding.

(3) Obligations and Activities of Business Associate

a. Business Associate shall implement appropriate safeguards to prevent unauthorized use or disclosure of all PHI in accordance with HIPAA Privacy Rule and Security Rule with regard to electronic PHI, and Part 2, as applicable.

b. The Business Associate shall immediately notify the Covered Entity's Privacy Officer at the following email address, DHHSPrivacyOfficer@dhhs.nh.gov after the Business Associate has determined that any use or disclosure not provided for by its contract, including any known or suspected privacy or security incident or breach has occurred potentially exposing or compromising the PHI. This includes inadvertent or accidental uses or disclosures or breaches of unsecured protected health information.

c. In the event of a breach, the Business Associate shall comply with the terms of this Business Associate Agreement, all applicable state and federal laws and regulations and any additional requirements of the Agreement.

d. The Business Associate shall perform a risk assessment, based on the information available at the time it becomes aware of any known or suspected privacy or

Contractor Initials AL

Date 5/5/2026

security breach as described above and communicate the risk assessment to the Covered Entity. The risk assessment shall include, but not be limited to:

I. The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;

II. The unauthorized person who accessed, used, disclosed, or received the protected health information;

III. Whether the protected health information was actually acquired or viewed; and

IV. How the risk of loss of confidentiality to the protected health information has been mitigated.

e. The Business Associate shall complete a risk assessment report at the conclusion of its incident or breach investigation and provide the findings in a written report to the Covered Entity as soon as practicable after the conclusion of the Business Associate's investigation.

f. 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 US Secretary of Health and Human Services for purposes of determining the Business Associate's and the Covered Entity's compliance with HIPAA and the Privacy and Security Rule, and Part 2, if applicable.

g. Business Associate shall require all of its business associates that receive, use or have access to PHI under the BAA to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein.

h. Within ten (10) 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 BAA and the Agreement.

i. 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.

j. 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.

k. Business Associate shall document any disclosures of PHI and information related to any 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.

l. 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.

m. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within five (5) 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.

n. Within thirty (30) 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-ups of such PHI in any form or platform.

VI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, or if retention is governed by state or federal law, 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 as long as the Business 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 post a current version of the Notice of the Privacy Practices on the Covered Entity's website:

https://www.dhhs.nh.gov/oos/hipaa/publications.htm in accordance with 45 CFR Section 164.520.

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 BAA, 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 of Agreement for Cause

a. In addition to the General Provisions (P-37) of the Agreement, the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a material breach by Business Associate of the Business Associate Agreement. 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.

(6) Miscellaneous

a. Definitions, Laws, and Regulatory References. All laws and regulations used,

Initial
Contractor Initials AL

5/5/2026
Date

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

herein, shall refer to those laws and regulations as amended from time to time. A reference in the Agreement, as amended to include this Business Associate Agreement, to a Section in HIPAA or 42 Part 2, means the Section as in effect or as amended.

b. **Change in law** - Covered Entity and Business Associate agree to take such action as is necessary from time to time for the Covered Entity and/or Business Associate to comply with the changes in the requirements of HIPAA, 42 CFR Part 2 other 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 BAA and the Agreement shall be resolved to permit Covered Entity and the Business Associate to comply with HIPAA and 42 CFR Part 2.

e. **Segregation** - If any term or condition of this BAA 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 BAA are declared severable.

f. **Survival** - Provisions in this BAA regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the BAA in section (3) g. and (3) n.l., and the defense and indemnification provisions of the General Provisions (P-37) of the Agreement, shall survive the termination of the BAA.

IN WITNESS WHEREOF, the parties hereto have duly executed this Business Associate Agreement.

Department of Health and Human Services	TLC Family Resource Center
The State	Name of the Contractor
DocuSigned by: Iain Watt D778BB63F9704C7...	Signed by: Alysse Lizotte D4CB552352B24A9...
Signature of Authorized Representative	Signature of Authorized Representative
Iain Watt	Alysse Lizotte
Name of Authorized Representative	Name of Authorized Representative
Director - DPH	Executive Director
Title of Authorized Representative	Title of Authorized Representative
5/6/2026	5/5/2026
Date	Date

Initial Al
Contractor Initials _____

5/5/2026
Date _____

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

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 TLC FAMILY RESOURCE CENTER is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on January 14, 2004. 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: **461338**
Certificate Number: **0007904085**

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 9th day of April A.D. 2026.

David M. Scanlan
Secretary of State

Docusign Envelope ID: 38912CF-C219-87AE-8141-44F993FDDBE1

CERTIFICATE OF AUTHORITY

I, Cynthia Boland, Board President, hereby certify that:
(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Clerk/Secretary/Officer of TLC Family Resource Center.
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on April 28, 20 26, at which a quorum of the Directors/shareholders were present and voting.
(Date)

VOTED: That Alysse Lizotte, Executive Director; Anne Walsh, Treasurer (may list more than one person)
(Name and Title of Contract Signatory)

is duly authorized on behalf of TLC Family Resource Center to enter into contracts or agreements with the State
(Name of Corporation/ LLC)

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 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: 4/28/2026

Cynthia Boland

Signature of Elected Officer
Name: Cynthia Boland
Title: Board President

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 04/09/2026

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: Sarah Randall	
Cross Insurance-Portland 2331 Congress Street Portland ME 04102	PHONE (A/C, No, Ext): (207) 780-1677	FAX (A/C, No): (207) 780-6377
	E-MAIL ADDRESS: sarah.randall@crossagency.com	

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Philadelphia Indemnity Ins Co	18058
INSURER B : FirstComp Insurance Co	27626
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
TLC Family Resource Center
PO Box 1098
Claremont NH 03743-1098

COVERAGES **CERTIFICATE NUMBER:** 25.26 w/Prof **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 [ ] OTHER:			PHPK2568594-021	07/01/2025	07/01/2026	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG [ ]	$ 2,000,000 $ 100,000 $ 5,000 $ 1,000,000 $ 4,000,000 $ 4,000,000 $
A	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS [X] HIRED AUTOS ONLY [X] NON-OWNED AUTOS ONLY			PHPK2568594-021	07/01/2025	07/01/2026	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) UM/UIM	$ 1,000,000 $ $ $ $ 1,000,000
	[ ] UMBRELLA LIAB [ ] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $						EACH OCCURRENCE AGGREGATE [ ]	$ $ $
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N: Y If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		WC0093557-17	07/01/2025	07/01/2026	[X] PER STATUTE [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ 100,000 $ 100,000 $ 500,000
A	Professional Liability			PHPK2568594-021	07/01/2025	07/01/2026	Each Claim Aggregate	2,000,000 4,000,000

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

CERTIFICATE HOLDER

State of NH
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

© 1988-2015 ACORD CORPORATION. All rights reserved.

The ACORD name and logo are registered marks of ACORD

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

NONPROFIT COVER SHEET

A. Entity Name: TLC FAMILY RESOURCE CENTER

B. Entity's Contact Information:

For Records Requests (e.g., resumes of key personnel; audited financial statements):

Name / Phone / Email: Alysse Lizotte, 603-542-1848, alysse@tlcfamilyrc.org

Person responsible for Accuracy and Completeness of information provided:
Name: Alysse Lizotte Title: Executive Director
Signature: _____

C. List Board of Directors and Affiliations

Name (Identify any additional role(s) in Parentheses) E.g., John Doe (President)	Affiliations
Cynthia Boland (President)	Retired Academic Administrator
Alastair Huntley (Vice President)	Medical Assistant Dartmouth College
Anne Walsh (Treasurer)	Retired VP Commercial Lending
Jessica Elliott (Secretary)	Engineer, Creare LLC
Susan Elliott	Retired educator
Krista Collins	Associate Professor Franklin Pierce University
Timothy McNulty	Director HR, Valley Regional Hospital
Stephen Seamans	Retired VP of Operations RR Donnelly
Megan Herschel	Care Coordinator, Connected Families NH
AJ Horvath	Sr Adm Director Dartmouth Health
Lindsey Boisvert	Comm Health Worker, New London Hospital
Susan Foster	Former educator

D. List Key Personnel (Resumes must be available upon request to the person(s) listed in section B or may be attached**):**

Name	Role	Annual Salary FY27	Amount Paid From This Contract
Rene' Couitt	Family Program Director	$85,775	$54,039
Michelle Parker	Family Program Coordinator/Baby Navigator	$62,962	$47,222
Suzette DeNobriga	Family Support Specialist	$56,867	$56,867
Ashley Prior	Family Support Specialist/FCU Specialist	$60,466	$60,466
Sabrina Robie	Family Support Specialist	$51,709	$25,855
Sarah Breisch	Family Support Specialist	$47,520	$20,434
To be hired	Family Support Specialist	$50,232	$50,232
To be hired	Registered Nurse	$11,447	$11,447

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

DISCLOSURE OF LEGAL ACTIVITIES INVOLVING THE STATE OF NEW HAMPSHIRE OR ANOTHER GOVERNMENT ENTITY

E. Check one of the following:

[x] The entity is **not currently or has not been** party to any legal proceeding involving the State of New Hampshire (or any agency or subdivision thereof) or any other state/federal government entity before any adjudicative body in any jurisdiction **OR**

[ ] The entity is or has been party to one or more legal proceedings as set forth above. Identify the jurisdiction, court or other adjudicative body, case number, and briefly describe the nature of the proceeding (Attached extra sheet if necessary).

_____

_____

_____

CHARITABLE TRUSTS UNIT COMPLIANCE CERTIFICATION

F. Check one of the following:

[X] is registered and in good standing with the New Hampshire Department of Justice Charitable Trusts Unit (** see note below) **or** has submitted a complete application for registration to the Charitable Trusts Unit and is awaiting a registration determination **OR**

[ ] is not required to register with the Charitable Trusts Unit because it is neither tax-exempt under section 501(c)(3) of the Internal Revenue Code nor engages in charitable solicitations in the State of New Hampshire **OR**

[ ] is exempt from registration with the Charitable Trusts Unit because it is a federal or state government, agency, or subdivision or is a religious organization, an integrated auxiliary of a religious organization, or is a convention or association of churches.

** Note: Attached screen shot from the DOJ Registered Charities List found at:

https://mm.nh.gov/files/uploads/doj/remote-docs/registered-charities.pdf

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

FINANCIAL DISCLOSURES

G. Check one the following:

[x] The organization hired an outside firm to audit its financial statements or to prepare GAAP-compliant financial statements for its most recently completed fiscal year. If so, please ensure that the financial statements and audit results are available to be requested from the contact listed on Page 1 (audited financials may be attached) **OR**

[ ] The above does not apply, but the organization filed an IRS Form 990 or Form 990-EZ for its most recently completed fiscal year. Please attach that IRS Form 990 or Form 990-EZ to the submission. (Form 990 Schedule B is not required) **OR**

[ ] ***If neither of the above apply***, complete the Income Statement and Balance Sheet below with the following basic financial information from the organization's most recently completed fiscal year:

1. INCOME STATEMENT

Revenue		Expenses	
Grants	$	*Compensation of officers, directors, and key personnel*	$
Donations	$		
Program Services Revenue	$	*Other salaries & wages*	$
Interest & Dividends	$	*Payroll taxes & employee benefits*	$
All other Revenue	$	*Occupancy, rent, utilities, and insurance*	$
Total Revenue	$	*Printing, publications, postage, office supplies, and IT*	$
		All other expenses	$
		Total Expenses	$

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

2. BALANCE SHEET

Assets	
Cash & Equivalents	$
Investments	$
Real Estate (less any depreciation)	$
Other Property & Equipment (less any depreciation)	$
Pledges, grants, accounts receivable	$
All other assets	$
Total Assets	$

Liabilities	
Accounts Payable	$
Loans Payable	$
All other liabilities	$
Total Liabilities	$

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Reg. No.	Charity Name	Address	City	State	Zip	Status	Report Due
16229	Timberlane Youth Soccer League	PO Box 3274	East Hampstead	NH	03826	G	5/15/2026
35123	Timberwolves Booster Club	242 Suncook Valley Road c/o Prospect Mountain High School	Alton	NH	03809	G	11/15/2025
32630	Time for Homes, Inc.	C/O 1959 Palomar Oakes Way, Suite 300	Carlsbad	CA	92011	X	5/15/2021
13348	Time of Grace Ministry	135 South 84th Street, Suite 220Milwaukee, WI 53214	Milwaukee	WI	53214	G	11/15/2026
32997	Time's Up Now, Inc.	16000 Ventura Boulevard Suite 900	Encino	CA	91436	X	5/15/2021
32991	Timothy Initiative, Inc.	7200 Stonehenge Dr.Raleigh, NC 27613	Raleigh	NC	27613	X	5/15/2025
1774	Tin Mountain Conservation Center	1245 Bald Hill Road	Albany	NH	03818	G	8/15/2026
16835	Tiny Twisters Child Care Center	12 Rowell Drive	Franklin	NH	03235	G	11/15/2025
31371	Tipping Point Community	220 Montgomery Street, Suite 850	San Francisco	CA	94104	G	5/15/2026
34834	TisBest Philanthropy	5950 6th Avenue South, Suite 111Seattle, WA 98108	Seattle	WA	98108	G	11/15/2025
19711	Titans Music Association, Inc.	PO Box 210	Nashua	NH	03061	G	11/15/2025
34168	TKE Foundation	7439 Woodland DriveIndianapolis, IN 46278	Indianapolis	IN	46278	G	4/15/2026
15573	TLC Family Resource Center	62 Pleasant Street	Claremont	NH	03743	G	11/15/2025
16041	TMJ Association	PO Box 26770	Milwaukee	WI	53226	G	5/15/2026
15253	T-N Arch Trail Travelers, Inc.	136 Bean Hill Road	Northfield	NH	03276	G	10/15/2026
3213	TNS Christmas Fund	PO Box 599	Tilton	NH	03276	G	5/15/2027
33964	TNTP, Inc.	500 7th Avenue, 8th Floor	New York	NY	10018	G	2/14/2027
34966	To Cry For Grace Inc.	220 Lynnolen Lane	Chattanooga	TN	37415	G	5/15/2026
34282	To Every Tribe	PO Box 1383	Wheaton	IL	60187	G	5/15/2026
11283	Tobacco-Free Kids Action Fund	1400 I Street, NW, Suite 1200	Washington	DC	20005	G	8/15/2026
2882	Tobias Community, Inc.	75 Birch Hill Road	Temple	NH	03084	G	5/15/2026
4263	Tobias House, Inc.	311 Colburn Road	Temple	NH	03084	G	11/15/2026
5511	Toddlers' Morning Out, Inc.	104 Lyme Road	Hanover	NH	03755	X	11/15/2023
5511	Toddlers' Morning Out, Inc.	166 Palmer Court	White River Junct	VT	05001	X	11/15/2023
3290	Together We Grow A Cooperative Preschool	PO Box 920	Newport	NH	03773	X	11/15/2019
31313	Together We Rise Corporation	560 West Lambert RoadBrea, CA 92821	Brea	CA	92821	G	5/15/2026
11115	Together Women Rise	PO Box 25633	Greenville	SC	29616	G	5/15/2026
35879	ToK, Inc	PO Box 85	Keene	NH	03431	G	5/15/2027
13755	Tom and Judy Tuohy Memorial Scholarship Fund	83 Morse Hill Road, PO Box 2045	Newbury	NH	03255	X	5/15/2019
10149	Tom Joyner Foundation Inc	4848 Lemmon Ave Ste 100 Box 330Dallas, TX 75219	Dallas	TX	75219	G	5/15/2026
17516	Tom Lantos Foundation for Human Rights & Justice	6 Dixon Ave., Suite 100	Concord	NH	03301-4944	G	5/15/2026
35450	Tom Sawyer Foundation	82 Knight Street	Milford	NH	03055	G	5/15/2026

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

tlc FAMILY RESOURCE CENTER

MISSION STATEMENT

The mission of TLC Family Resource Center (TLC) is to promote the optimal health and development of children and families in our region of New Hampshire.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

TLC FAMILY RESOURCE CENTER, INC.

Financial Statements
(With Independent Auditors' Report)

June 30, 2025 and 2024

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

TLC FAMILY RESOURCE CENTER, INC.
June 30, 2025 and 2024

Table of Contents

	Page(s)
Independent Auditors' Report	
Statement of Financial Position	3
Statement of Activities and Changes in Net Assets	4
Statement of Functional Expenses	5
Statement of Cash Flows	6
Notes to Financial Statements	7 – 13

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Independent Auditors' Report

To the Board of Directors of
TLC Family Resource Center, Inc.
Claremont, New Hampshire

Opinion

We have audited the accompanying financial statements of TLC Family Resource Center, Inc. (a nonprofit corporation, the "Center"), which comprise the statement of financial position as of June 30, 2025, and the related statements of activities and changes in net assets, functional expenses 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 TLC Family Resource Center, Inc. as of June 30, 2025, 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. 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 the Center 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 Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Center'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 will always detect a material misstatement when it exists. The risk of not detecting a material

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

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, including omissions, 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, 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 the Center'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 the Center'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.

Report on Summarized Comparative Information

We have previously audited the Center's 2024 financial statements and we expressed an unmodified opinion on them in our report dated November 22, 2024. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2024, is consistent, in all material respects, with the audited financial statements from which it has been derived.

McSoley McCoy & Co.

South Burlington, Vermont
December 12, 2025
VT Reg. No. 92-349

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

TLC Family Resource Center, Inc.
Statement of Financial Position
June 30, 2025
(With Summarized Comparative Totals as of June 30, 2024)

	June 30, 2025			As of June 30, 2024
	Without Donor Restrictions	With Donor Restrictions	Total	Totals (Summarized)
Assets				
Cash and cash equivalents	$ 625,330	$ 216,672	$ 842,002	$ 659,441
Accounts receivable	288,166	-	288,166	308,644
Grants receivable	-	50,000	50,000	145,000
Prepaid expenses	1,587	-	1,587	2,187
Security deposit	2,000	-	2,000	2,000
Operating lease right-of-use assets	349,666	-	349,666	409,552
Property and equipment, net	446,429	-	446,429	474,918
Total assets	$ 1,713,178	$ 266,672	$ 1,979,850	$ 2,001,742
Liabilities and net assets				
Liabilities				
Accrued expenses	$ 152,556	$ -	$ 152,556	$ 158,031
Accounts payable	22,528	-	22,528	38,266
Operating lease liabilities	363,041	-	363,041	425,043
Bank loan payable	64,063	-	64,063	73,379
Total liabilities	602,188	-	602,188	694,719
Net assets				
Without donor restrictions	1,110,990	-	1,110,990	972,761
With donor restrictions	-	266,672	266,672	334,262
Total net assets	1,110,990	266,672	1,377,662	1,307,023
Total liabilities and net assets	$ 1,713,178	$ 266,672	$ 1,979,850	$ 2,001,742

See accompanying notes to financial statements

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

TLC Family Resource Center, Inc.
Statement of Activities and Changes in Net Assets
For the Year Ended June 30, 2025
(With Summarized Comparative Totals for the Year Ended June 30, 2024)

	Year Ended June 30, 2025			Year Ended June 30, 2024
	Without Donor Restrictions	With Donor Restrictions	Total	Totals (Summarized)
Support and revenue				
Governmental support	$ 935,963	$ -	$ 935,963	$ 900,803
Program fees	1,315,543	-	1,315,543	1,196,160
Foundations and trusts	292,043	189,568	481,611	387,847
Contributions	57,986	-	57,986	72,219
Interest income	5,803	-	5,803	5,158
Net assets released from restrictions	257,158	(257,158)	-	-
Total support and revenue	2,864,496	(67,590)	2,796,906	2,562,187
Expenses				
Program services				
Family support	1,062,939	-	1,062,939	1,201,894
Recovery programs	1,100,021	-	1,100,021	1,053,331
Youth programs	159,418	-	159,418	130,719
	2,322,378	-	2,322,378	2,385,944
Fundraising	100,378	-	100,378	126,719
Management and general	303,511	-	303,511	328,796
Total expenses	2,726,267	-	2,726,267	2,841,459
Change in net assets	138,229	(67,590)	70,639	(279,272)
Net assets, beginning of year	972,761	334,262	1,307,023	1,586,295
Net assets, end of year	$ 1,110,990	$ 266,672	$ 1,377,662	$ 1,307,023

See accompanying notes to financial statements

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

TLC Family Resource Center, Inc.
Statement of Functional Expenses
For the Year Ended June 30, 2025
(With Summarized Comparative Totals for the Year Ended June 30, 2024)

	Year Ended June 30, 2025							Year Ended June 30, 2024
	Program Services							
	Family Support	Recovery Programs	Youth Programs	Total Program Services	Management and General	Fund-raising	Total Expenses	Totals (Summarized)
Advertising and marketing	$ 712	$ 5,603	$ 4,109	$ 10,424	$ -	$ 1,907	$ 12,331	$ 21,706
Computer and technology expenses	32,872	26,844	2,422	62,138	5,461	882	68,481	68,870
Contract services	103,024	32,907	8,208	144,139	-	35,200	179,339	105,885
Depreciation	10,819	11,520	1,729	24,068	3,785	626	28,479	29,397
Direct assistance	45,027	31,249	30	76,306	-	-	76,306	112,918
Employee benefits	72,519	77,275	14,581	164,375	23,986	4,218	192,579	189,922
Equipment rental and maintenance	568	1,731	91	2,390	204	33	2,627	9,355
Insurance	3,358	3,699	830	7,887	1,870	302	10,059	8,412
Interest	-	-	-	-	2,410	-	2,410	2,526
Mileage reimbursement	11,166	10,618	233	22,017	-	117	22,134	22,647
Occupancy	46,292	102,258	7,111	155,661	7,930	2,578	166,169	160,983
Operating supplies and expenses	15,182	18,719	4,999	38,900	8,557	9,913	57,370	83,480
Payroll taxes	48,234	51,396	7,701	107,331	17,366	2,805	127,502	133,707
Postage	293	278	42	613	95	548	1,256	2,377
Printing	487	730	173	1,390	173	321	1,884	6,484
Professional fees	7,074	7,538	1,130	15,742	2,547	2,911	21,200	18,511
Salaries and wages	648,632	690,668	103,592	1,442,892	226,915	37,559	1,707,366	1,807,711
Telephone	10,796	14,937	1,885	27,618	1,927	458	30,003	34,672
Training and development	5,884	12,051	552	18,487	285	-	18,772	21,896
Total expenses	$ 1,062,939	$ 1,100,021	$ 159,418	$ 2,322,378	$ 303,511	$ 100,378	$ 2,726,267	$ 2,841,459

See accompanying notes to financial statements

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

TLC Family Resource Center, Inc.
Statement of Cash Flows
For the Year Ended June 30, 2025
(With Summarized Comparative Totals for the Year Ended June 30, 2024)

	Year Ended June 30, 2025			Year Ended June 30, 2024
	Without Donor Restrictions	With Donor Restrictions	Total	Totals (Summarized)
Cash flows from operating activities:				
Change in net assets	$ 138,229	$ (67,590)	$ 70,639	$ (279,272)
Adjustments to reconcile change in net assets to net cash provided (used) by operating activities:				
Depreciation	28,479	-	28,479	29,397
Amortization of operating lease right-of-use assets	59,896	-	59,896	69,533
(Increase) decrease in accounts receivable	20,478	-	20,478	(111,589)
Decrease in grants receivable	-	95,000	95,000	145,000
(Increase) decrease in prepaid expenses	600	-	600	(600)
Increase (decrease) in accounts payable	(15,738)	-	(15,738)	11,528
Increase (decrease) in accrued expenses	(5,475)	-	(5,475)	37,916
Decrease in operating lease liabilities	(62,002)	-	(62,002)	(123,021)
Net cash provided (used) by operating activities	164,467	27,410	191,877	(221,108)
Cash flows from financing activities				
Principal payments on bank loan	(9,316)	-	(9,316)	(9,200)
Increase (decrease) in cash and cash equivalents	155,151	27,410	182,561	(230,308)
Cash and cash equivalents, beginning of year	470,179	189,262	659,441	889,749
Cash and cash equivalents, end of year	$ 625,330	$ 216,672	$ 842,002	$ 659,441
Supplemental disclosure of cash flow information				
Interest paid	$ 2,410	$ -	$ 2,410	$ 2,526

See accompanying notes to financial statements

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

1. Summary of Operations and Significant Accounting Policies

TLC Family Resource Center, Inc. (the "Center") is a non-profit organization established in 2004 for the purpose of promoting the physical and emotional health and safety of women and families expecting infants or with young children. In 2012, services were expanded to include youth programming for teens, and in 2018, recovery support services were added. The Center serves individuals in New Hampshire's Sullivan and lower Grafton counties. Approximately 33% of the Center's revenue and support comes from governmental financial assistance, 47% from program services, and 20% from contributions.

(a) Basis of Accounting

The accompanying financial statements are prepared using the accrual basis of accounting under U.S. generally accepted accounting principles (U.S. GAAP). Under the accrual basis of accounting, revenues are recorded as earned and expenses are recorded at the time liabilities are incurred.

(b) Financial Statement Presentation

The Center reports information regarding its financial position and activities according to two classes of net assets: net assets with donor restrictions, which represent resources restricted by donors as to purpose or by the passage of time; and net assets without donor restrictions, which represent the expendable resources that are available for operations at management’s discretion.

(c) Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures 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.

(d) Property and Equipment

Property and equipment are stated at cost. Donations of property and equipment are recorded at their estimated fair value. Depreciation is computed using the straight-line method over the assets’ estimated useful lives. Additions and betterments with a value in excess of $2,500 and with a useful life greater than one year are capitalized, and expenditures for repairs and maintenance are expensed when incurred. Upon sale or retirement, the costs and related accumulated depreciation are eliminated from the respective accounts, and the resulting gain or loss is included in income.

(e) Accrued Compensated Absences

The Center provides each eligible employee with paid time off, which is accumulated on a pro-rata basis as actual hours are worked. Compensated absences accrue when amounts can be reasonably estimated and payment of compensation is probable.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Summary of Operations and Significant Accounting Policies (continued)

(f) Cash and Cash Equivalents

Cash and cash equivalents include all certificates of deposit and highly liquid investments with maturities of three months or less at the date of purchase. The Center maintains cash and cash equivalents in bank deposit accounts which, at times, may exceed federally insured limits. The Center has not experienced any losses with these accounts. The Center also has a sweep account which allows the Center's cash accounts to maintain balances below the federally insured limits. Management believes the Center is not exposed to any significant credit risk on cash.

(g) Comparative Data

The 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 U.S. GAAP. Accordingly, such information should be read in conjunction with the Center's financial statements for the year ended June 30, 2024 from which the summarized information was derived.

(h) Revenue Recognition

The Center's fees for programs and services provided are recognized when earned, which is within the time period covered by the services or program. The Center records contributions as with donor restrictions or without donor restrictions support depending on the existence or nature of donor restrictions. The Center reports gifts and grants of cash or other assets as restricted support 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 restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities and changes in net assets as net assets released from restrictions.

Contributions of non-cash assets are recorded at their fair values in the period received. Contributions of services that create or enhance non-financial assets or that require specialized skills, which are provided by individuals possessing those skills and would typically need to be purchased if not provided by donation, are recorded at their fair values in the period received. Donated investments are also reported at fair value at the date of receipt, which is then treated as the Center's cost basis.

(i) Functional Expenses

The costs of providing programs and other activities have been summarized on a functional basis in the statements of activities and changes in net assets and functional expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

The 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. Most expenses are allocated on the basis of estimates of average time and effort. Certain prior year amounts have been reclassified for consistency with the current period presentation. These reclassifications had no effect on the reported changes in net assets.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Summary of Operations and Significant Accounting Policies (continued)

(j) Receivables

Receivables are stated at the amount management expects to collect. The Center provides for probable uncollectible amounts through an allowance for accounts receivable based on its assessment of the current status of individual accounts. Unconditional promises to give, recorded as unconditional promises receivable, that are expected to be collected within one year are presented at net realizable value. Unconditional promises receivable that are expected to be collected in more than one year are recorded at fair value, which is measured as the present value of their future cash flows. Accounts and grants receivable as of June 30, 2025, June 30, 2024 and July 01, 2023 were $338,166, $453,644, and $487,055, respectively.

The Center applies a current expected credit losses (CECL) model under ASC 326. The Center's primary allowance for credit losses is the allowance for doubtful accounts. The measurement of expected credit losses is based on relevant information about past events, including historical experience, current conditions, and reasonable and supportable forecasts that affect the collectability of the reported amount. Management uses judgement in determining the relevant information and estimation methods that are appropriate in its circumstances. Receivables are written off against the allowance if a final determination of collectability is made. Management has not recorded an allowance as of June 30, 2025 and 2024 as management believes all amounts are deemed collectible.

(k) Income Taxes

The Center is a not-for-profit organization as described under Section 501(c)(3) of the Internal Revenue Code and is exempt from federal income taxes on income related to the fulfillment of the Center's mission. Accordingly, no provision for income taxes has been recorded in the accompanying financial statements.

The Center annually files an Internal Revenue Service Form 990, Return of Organization Exempt From Income Tax, tax return in the U.S. Federal jurisdiction. The Center is no longer subject to U.S. Federal income tax examination by tax authorities for the years prior to June 30, 2022. In the normal course of business, the Center is subject to examination by various taxing authorities. Although the outcome of tax audits is always uncertain, the management of the Center believes that there are no significant unrecognized tax liabilities at June 30, 2025.

(l) Leases

The Center recognizes a right-of-use (ROU) asset and lease liability on the statements of financial position for all leases with terms longer than 12 months. Leases are classified as operating or financing, with classification affecting the expense recognition on the statement of activities and changes in net assets.

Leases that have a term of twelve months or less upon commencement are considered short-term in nature. Short-term leases are not included on the statements of financial position and are expensed on a straight-line basis over the lease term. The Center has also elected to not separate lease and non-lease components for all classes of assets.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Summary of Operations and Significant Accounting Policies (continued)

The Center primarily leases office space. The Center determines if an arrangement is an operating or financing lease at inception. In evaluating whether an agreement constitutes a lease, management reviews the contractual terms to determine which party obtains both the economic benefits and control of the assets. In arrangements where the Center controls the assets and obtains the economic benefits, the Center accounts for the contract as a lease.

As the leases do not provide an implicit borrowing rate, the Center uses either the risk-free rate ("RFR") or the estimated incremental borrowing rate ("IBR") to determine the present value of the lease payments. The IBR is the rate of interest that the Center would have to pay to borrow on a collateralized basis over a similar term an amount equal to the lease payments in a similar economic environment. In determining that rate, the Center considers prevailing economic conditions at the commencement date and factors such as company-specific credit risk, term of the lease and options, and the effect of collateralization based on the nature and quality of the underlying asset. The Center uses the IBR for office space.

Operating leases may include fixed minimum lease payments and variable lease payments based on an index or rate. Variable lease payments not based on an index or rate are not included in the operating lease liability as they cannot be reasonably estimated and are recognized in the period in which the obligation for those payments is incurred.

(m) Subsequent Events

Management has evaluated subsequent events through December 12, 2025, which is the date the financial statements were available to be issued.

2. Fair Value Measurements

In accordance with FASB ASC 820, *Fair Value Measurements and Disclosures*, the Center is required to disclose certain information about its financial assets and liabilities. As of June 30, 2025 and 2024, the Center had no financial instruments subject to the disclosure requirements. Cash and cash equivalents, grants and accounts receivable, accounts payable, and accrued expenses are reported in the statements of financial position at their approximate fair values because of the short maturities of those instruments or because of the fixed rate of interest required to be paid.

3. Concentration of Support

The Center receives a significant portion of its support from federal and state programs. A significant reduction in the level of this support, if this were to occur, may have an effect on the Center's ability to continue its programs and activities.

4. Net Assets With Donor Restrictions

Net assets subject to donor imposed restrictions were $266,672 and $334,262 at June 30, 2025 and 2024, respectively. At June 30, 2025 and 2024, net assets are restricted for the following purposes: recovery, youth programming, and family support services.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

5. Retirement Plan

The Center has established a Simple IRA Retirement Plan for which all employees are eligible to participate in the Plan. Under the Plan, the Center provides a contribution equal to 2% of the employee's compensation. Employees are eligible to participate in the Plan on the next entry date following the date of their employment. Total retirement plan expense was $32,639 and $30,196 for the years ending June 30, 2025 and 2024, respectively.

6. Commitments and Contingencies

The Center receives funds under various state and federal programs. Under the terms of these programs, the Center is required to expend the funds within the designated period for purposes specified in the grant proposal. If expenditures of the funds are found not in compliance with the proposal, the Center may be required to return those funds to the grantor. The amount, if any, of expenses which may be disallowed by the granting agency cannot be determined at this time, although the Center expects such amounts, if any, to be insignificant.

7. Liquidity and Availability

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the financial position date, comprise the following:

	2025	2024
Cash and cash equivalents	$ 625,330	$ 470,179
Accounts receivable	288,166	308,644
Total financial assets	$ 913,496	$ 778,823

The Center regularly monitors liquidity required to meet its operating needs and other contractual commitments, while also striving to maximize the investment of its available funds. The Center has various sources of liquidity at its disposal, including cash and cash equivalents and various receivables.

In addition to financial assets available to meet general expenditures over the next 12 months, the Center operates with a balanced budget and anticipates collecting sufficient revenue to cover general expenditures. The Center strives to maintain liquid cash reserves sufficient to cover 90 days of general expenditures. General expenditures include administrative, fundraising and operating expenses.

The Center receives the majority of its funding from grants and contributions which are available to meet annual cash needs for general expenditures. Some funding sources are restricted to specific programs, and are used in accordance with the associated purpose restrictions.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

8. Property and Equipment

Property and equipment consisted of the following at June 30:

	Useful Life (Years)	2025	2024
Office equipment and software	2-5	$ 72,754	$ 72,754
Office furniture	7	92,418	92,418
Leasehold improvements	39	451,607	451,607
Total property and equipment		616,779	616,779
Less accumulated depreciation		(170,350)	(141,861)
Property and equipment, net		$ 446,429	$ 474,918

Depreciation expense totaled $28,479 and $29,397 for the years ended June 30, 2025 and 2024, respectively.

9. Operating Leases

The Center has various operating leases for office space. Below are the significant operating leases in place during 2025 and 2024.

62 Pleasant St, Claremont, NH: the Center leases 6,499 square feet of office space at 62 Pleasant St. The Center signed a 10 year lease in 2020 which will expire February 28, 2031. There are no definitive terms of renewal per the lease agreement, although management intends to renew based on mutually agreed upon terms at the time of renewal. Expense for 2025 and 2024 totaled $63,672 and $61,107, respectively.

24 Hanover St., Lebanon, NH: the Center leases 3,000 square feet of office space at 24 Hanover St. The Center signed a 3 year lease with monthly payments commencing October 1, 2023 which will expire May 31, 2026. There are no definitive terms of renewal per the lease agreement and renewal is dependent on the viability of the recovery programs. Expense for 2025 and 2024 totaled $48,712 and $36,325, respectively.

131 Broad St., Claremont, NH: the Center leases office space at 131 Broad St. The Center signed a one year lease in 2022 which expired September 30, 2023. The lease is now month to month. Expense for 2025 and 2024 totaled $7,250 and $7,200, respectively.

The Center leases meeting space at two other locations. The agreements for both locations are month to month. Both leases were terminated in December 2024. Expense for 2025 and 2024 totaled $3,600 and $7,200, respectively.

The weighted-average remaining lease term for operating leases is 5.35 and 6.13 years for the years ending June 30, 2025 and June 30, 2024, respectively. The weighted-average discount rate for operating leases is 3.25% for the years ending June 30, 2025 and 2024.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Operating Leases (continued)

The maturities of lease liabilities in accordance with *Leases (Topic 842)* are as follows for the years ending June 30:

2026	$ 89,681
2027	65,426
2028	65,426
2029	65,426
2030	65,426
Thereafter	43,618
Total undiscounted cash flows	395,003
Less: present value discount	(31,962)
Total lease liabilities	$ 363,041

10. Bank Loan Payable

In August 2020, the Center entered into a loan agreement with a local bank in the amount of $100,000 with a term of ten and a half years maturing on February 14, 2031. For the first five and a half years the interest rate is 3.25% with a monthly payment of principal and interest of $977. For the remaining five years, the interest rate will be the Wall Street Journal Prime Rate with a monthly payment of principal and interest of $977.

Maturities by year are as follows:

Year Ended June 30	
2026	$ 9,796
2027	10,120
2028	10,453
2029	10,798
2030	11,154
Thereafter	11,742
Totals	$ 64,063

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

René Couitt

[redacted]

EXPERIENCE

2007-Present TLC Family Resource Center Claremont, NH

Family Support Program Director

- Lead and oversee family support programs.
- Supervise and develop multidisciplinary team.
- Build and maintain strategic partnerships with community organizations and stakeholders.

Intake and Direct Services Coordinator

- Manage and respond to all referrals received by the agency.
- Collect, manage and report on agency data, documentation & statistics.
- Provide supervision and support to parent educators.

1999-2007 Good Beginnings of Sullivan County Claremont, NH

Parent Educator/ Assistant Program Director

- Case Manager and Parent Educator for 50 families annually.
- Program management in absence of Executive Director.

1997-1999 Spurwink School Newport, NH

Family Worker

- Devise and implement treatment plans & goals for students & families.
- Provide therapeutic intervention for children and families.
- Coordinate services for children with schools and community agencies.

1995-1997 Valley Regional Hospital Claremont, NH

Case manager

- Conduct assessments and plan treatment goals for at-risk adolescents.
- Provide home visits including crisis management as needed.
- Participate in inter-agency collaboration with DCYF and mental health providers

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

René Couitt

[redacted]

Evidence Based Programs Training

- Kinship Navigator Certification 2020
- Protective Factors Survey 2020
- Circle of Security 1/24/209
- Healthy Families America 4/4/2012
- Motivational Interviewing 2012

EDUCATION

Quinnipiac College New Haven, CT
B.A. Psychology. 1989-1993
Graduated Cum Laude

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Michelle Parker
[redacted]

Professional Summary

Dedicated and compassionate human services professional with over 20 years of experience supporting children, families, and agencies in residential, placement, and community-based programs. I am skilled in regulatory compliance, investigations, technical assistance, and program development. Proven ability to conduct thorough evaluations of residential and placement services, monitor compliance with state regulations, and provide strength-based, culturally competent support to improve outcomes for children and families.

Skills

- Strength-Based Approach: Expertise in identifying and leveraging individual and family strengths.
- Cultural Competency: Proficient in understanding and respecting diverse backgrounds and perspectives.
- Communication: Excellent verbal and written communication skills, ensuring clear and effective interactions.
- Report Writing: Timely and accurate report writing, maintaining comprehensive documentation.
- Motivational Interviewing: Knowledgeable in techniques that empower individuals to make positive changes.
- Problem-Solving: Skilled in identifying challenges, evaluating information, and recommending solutions.
- Ethical Standards: Committed to maintaining high ethical standards in all professional interactions.
- Time Management: Effective at managing time and prioritizing tasks to meet deadlines.

Professional Experience

TLC Family Resource Center – Claremont, NH
Program Coordinator | 2023 – Present

- Conduct comprehensive assessments of family and child needs, developing action plans and coordinating resources.
- Oversee intakes, enrollments, and service referrals, ensuring smooth access to supports.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

- Provide direct guidance on compliance with state-funded program requirements.
- Manage resource programs (Diaper Bank, Infant Navigator), improving service accessibility.
- Mentor junior staff, fostering professional growth and adherence to best practices.

Orion House – Newport, NH
Residential Treatment Coordinator | 2020 – 2022

- Developed and monitored strength-based treatment plans for children in residential care.
- Supervised and trained residential floor staff, ensuring safe and compliant practices.
- Oversaw treatment progress, wrote detailed reports, and maintained regulatory compliance.
- Facilitated communication between families, schools, clinicians, and stakeholders.

Massachusetts Department of Public Health – Boston, MA
Social Worker III, Childhood Lead Poisoning Prevention Program | 2003 – 2007

- Delivered case management for families affected by lead exposure, ensuring safety and housing compliance.
- Partnered with landlords, medical providers, and families to implement corrective plans.

Massachusetts Office of Child Care Services – Boston, MA
Residential Child Care Licensor | 2000 – 2003

- Ensured compliance with group care and residential facilities with state licensing standards.
- Conducted site visits, program evaluations, and interviews with staff and children.
- Provided technical assistance to programs seeking licensure or improvement.
- Prepared comprehensive technical reports and recommended corrective action.

Massachusetts Department of Children and Families – Boston, MA
Assessment Social Worker | 1995 – 2000

- Conducted assessments, developed service plans, and monitored family progress.
- Worked with interdisciplinary teams to ensure child safety and permanency.

Education

Bachelor of Arts in Sociology – Framingham State University

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Suzette de Nobriga
[redacted]

Skills

Skills acquired as a Family Service Coordinator include performing assessments, communication, time management, planning, coordination, listening, decision-making, problem-solving, flexibility, organizational, autonomy, professional judgment, dependability, and conflict resolution.
Skills acquired as a Residential Specialist include treatment planning, crisis intervention, health and medical supervision, counseling skills, limit setting, and reinforcement of daily routine. Skills acquired as a server include learning to work as team player, customer awareness/attentiveness, verbal communication/persuasion, time management/prioritization, multi-tasking, patience, physical stamina, speed, accuracy, detail-oriented, good memory, basic math, punctuality, appearance, and stress
management.

Experience

June 2021-Present
TLC Family Resource Center, Claremont, NH - Family Support Specialist

May 2016 – May 2021
Pathways, Claremont, NH - Family Service Coordinator
● Communication: Facilitated meetings with families, guardians, clinical specialists and other support
team members.
● Problem Solving skills: Conflict and problem resolution with result-oriented teamwork strategies
focused on individualized health and safety priorities.
● Time and Organizational skills: Detailed oriented and heavy caseload management.
● Accomplishments: Nominated each year for yearly employee award. Assisted many individuals and
families in utilizing all their resources to acquire the very best quality of care for their specific support needs.
October 2007 - November 2015
Health Care and Rehabilitation Services, Woodstock, VT - Residential Specialist II
● Modeled appropriate attitudes and behavior, particularly a positive outlook, emotional stability,

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

insight, and compassion.
● Participated in the development and implementation of the scheduling of daily activities and therapeutic services and intervention to residents.
● Provided support in the development of independent living skills, (i.e., shopping, nutrition, cooking,
cleaning, etc.), self-care skills, emotional regulation, and interpersonal functioning.
● Accomplishments: Won quarterly employee awards and cause for applause recognitions for creativity,
teamwork and integrity. Managed increased supervisory responsibilities in my position.

June 1999 - November 2015
Woodstock Inn & Resort, Woodstock, VT- Main Dining Room Coordinator, Hostess & Server
● Maintained a high level of customer service as a server in a fine dining facility as well as in other areas of the Food and Beverage department.
● Coordinated dining reservations for smaller guests' parties as well as for larger holiday events like Mother's Day Brunch, Thanksgiving and Christmas.
● Accomplishments: Meeting and exceeding guests' expectations and overall dining experience. Built lasting professional relationships with long time repeat quests

Education
September 2011 - June 2013
Johnson State College - Bachelor of Arts
Psychology

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Ashley Prior

[redacted]

To continue working with children and families that allows me to serve my community and help others

WORK EXPERIENCE

Family Support Specialist

TLC Family Resource Center- Claremont, NH
June 2020 to Present

Providing parents enrolled in Family Support with parenting education and resources, case management and referrals.

Center Director

Suzy's Little Peanuts Day School LLC -
Ascutney, VT July 2019 to Present

Supervising daily functions of medium sized childcare and preschool program including clerical and administrative work, staff management and collaboration with area service providers and community members.

Lead Preschool Teacher

Suzy's Little Peanuts Day School - Springfield, VT
June 2014 to Present

Responsibilities Planning and teaching curriculum focused on kindergarten readiness and social skills. I held the VT ECE license for the act 166 pubic pre-k for our program.

Program Director

Kidsview Academy Preschool & Daycare - Claremont, NH
July 2010 to May 2014

Responsibilities Running the daily operations of a large childcare center licensed to care for 122 children ages 6 months to 12 years.

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

EDUCATION

Bachelor's of Science in Sociology and Elementary Education

Keene State College
August 2006 to May 2009

Teacher Preparation

River Valley Community College
August 2004 to May 2006

Microsoft Word

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Sabrina Robie

Family Support Specialist

[redacted]

OBJECTIVE

Dedicated Family Support professional with a strong track record of building trust and rapport with diverse families. Skilled in providing resources, guidance, and support to promote family well-being and child development.

SKILLS

Family engagement and outreach

Resource coordination and referral

Home visiting and support

Program facilitation (Miss Kendra, play groups, Circle of Security, support groups)

Effective communication and active listening

Collaborative and creative problem solving

EXPERIENCE

TLC Family Resource Center, Claremont, NH - *Family Support Specialist, HFA, CFSS, Kinship services*

October 2023 - PRESENT

- Provide intensive support and resources to families, resulting in improved child outcomes and increased family stability.
- Conducts home visits to assess family needs and develop individualized support plans.
- Collaborates with community agencies to connect families with essential services (e.g. food banks, healthcare, counseling)
- Facilitates groups, events, and programs on parenting, child development, and family wellness
- Partners with local schools and implements the Miss Kendra program

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

- Facilitates playgroups

Windham Learning Tree Academy - *Associate Preschool Teacher*
September 2021 - June 2023

- Created and implemented developmentally appropriate lesson plans for 24 children aged 2.6-4 years
- Communicated with families via HiMama app and in-person meetings
- Completed child assessments and progress reports

CKO Kickboxing Londonderry NH - *Kickboxing Instructor*
June 2022 - June 2023

- Led cardio kickboxing classes for adults and kids
- Developed class outlines and instructed "kid" boxing program

Country Club for Kids - *Lead Preschool Teacher*
June 2018 - August 2021

- Delivered interactive daily activities for 12 children aged 3-4 years
- Collaborated with co-teachers on student assessments and observations
- Communicated with parents via classroom tablets

Alpha-Bits Learning Center - *Lead Toddler Teacher*
October 2017 - May 2018

- Created positive environment for 15 toddlers aged 12-18 months
- Communicated with parents and staff on child progress

EDUCATION

University of New Hampshire - *Bachelor of Science, HDFS*
May 2017

- Completed requirements for a minor in Education. GPA: 3.74/4.0 Magna Cum Laude

Certifications

- Up to date CPR and First Aid Certification
- Possesses a state of NH child care employment eligibility card

Volunteer Experience or Leadership

- Parent Teacher Organization Vice President, Richards Elementary School Newport NH 9/2025- present
- Challenger’s Camp Junior & Senior Counselor 8/2008-8/2017

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

- Raymond Baptist Church Sunday School Teacher 9/2014-6/2017

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Sarah E. Breisch

Family Support Specialist

[redacted]

OBJECTIVE

Bringing over a decade of experience in education and resource navigation, I am driven to use my excellent communication and collaborative skills, critical and imaginative thinking, and passion for a Strengths-Based approach to nourish the next generation.

EDUCATION —

Thomas More College of Liberal Arts, Merrimack, NH
B.A., Literature
August 2000-May2004

- A four-year Humanities cycle studying the politics, philosophy, and literature of the Western Tradition, from the ancient world to the modern.
- A semester spent studying the art and architecture of Rome *in situ*, while completing the usual course load
- Self-directed Junior Project and Senior Thesis, culminating in

EXPERIENCE

January2018-Present
Family Support Specialist • TLC Family Resource Center

- Pre and Post-natal support and ongoing Education, Case Management and Care Coordination, Referral Services, and Family Advocacy.
- Work in all agency home visiting programs: Health Families America, Comprehensive Family Supports and Services, Child Health Support. Home visiting programs serve all NH families with children from pre-natal to 18 years old.
- Built solid and trusting rapport with children and families, fostering trust and communication to meet case needs.
- Strengths-based approach to help participants develop comprehensive life, technical and job skills.
- Certified in in CPR, Growing Great Kids curriculum, Protective Factors, HIPPA standards, Recovery Coaching, Motivational Interviewing, Adult and Youth Mental Health First Aid, Early Childhood and Family Mental Health Certification.
- Facilitate supervised visits between non-custodial parents and children while assisting parents with meeting court-ordered goals, writing monthly progress reports and attend Court Hearings
- Collaborate with community partners
- Plan, promote and facilitate parent cafe' discussion groups
- Continue to offer all supports to families virtually or by phone as circumstances dictate
- Sustain visit notes and other supporting documentation in an online database
- Regularly participate in trainings related to child development and education, families in crisis, mental health and substance use issues, social determinants of health

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

an in depth-study of the life, works, and impact of an English poet, and 20-page essay on an original topic with an oral presentation.
- Four Semesters of Classical Latin
- Theoretical Mathematics, Biology and Chemistry

- Registered Facilitator of Circle of Security Parenting, regularly facilitating the course in group and one-on-one settings, both in person and virtually.

- Trained facilitator of Parenting a Second time around, and Nurturing Families parenting courses.

August 2009-June2017
Classroom Instructor • New England Classical Academy

- Lead and Assistant classroom teacher for first and second grades (2009-2011), Lead Teacher for fourth grade (2011-2017).
- Curated and designed instructional materials based on the Core Knowledge Foundation syllabus
- Implemented creative, dynamic, and differentiated instruction, in order to challenge and engage students according to their ability
- Used classroom management techniques designed to foster the development of virtue and executive functioning, and to provide a safe and nurturing learning environment
- Integrated Art, Music, and Movement on a daily basis
- Researched local resources for field trips and guest instructors, arranged and led field trips
- Maintained confidential records and information in compliance with federal and state regulations.
- Evaluated progress of individual students to adjust teaching strategies to meet needs.

September 2005-June 2009
Tutor • Mother of Divine Grace Academy

• Provided editing, grading, coaching, and in-depth discussion and explanation of course materials to students via email and phone calls.
• The subjects I covered were Literature, History, and Grammar. I carried an average of 4 students per school year, with 2 subjects each.

KEY SKILLS —

Communication and Collaboration
Writing
Creative Problem Solving
Resource Navigation
Self-direction
Relationship Building
Knowledge of the philosophy and content of Classical Education

Self-Employment

October 2018 – Present
Owner, Artist • Rabbit Dog Fine Arts

• Creating original and commissioned artwork
• Showing and selling artwork in local shows and galleries
• Creating Commissioned drawings for use in a New Hampshire Children's Trust publication in 2020 and 2021

Docusign Envelope ID: 389121CF-C219-87AE-8141-44F083FDD9E1

Teaching printmaking workshops at libraries and community centers
2023: Composed and illustrated a booklet explaining the 5 Protective Factors, funded by the CLIFF foundation
2024: Composed and illustrated three-panel installation promoting Maternal Mental Health Awareness, commissioned by TLC Family Resource Center.
2025: Selected as the Artist in Residence for the Claremont Maker Space for the Summer of 2025.

REFERENCES

[redacted]

Subject: Comprehensive Family Support (CFS) (RFP-2027-DPH-05-COMPR-08)

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 Manchester NH 03105	
1.5 Contractor Phone Number 603-518-4000	1.6 Account Unit and Class TBD	1.7 Completion Date June 30, 2029	1.8 Price Limitation $3,814,855
1.9 Contracting Officer for State Agency Robert W. Moore, Director		1.10 State Agency Telephone Number (603) 271-9631	
1.11 Contractor Signature Signed by: Borja Alvarez de Toledo 2EBDBA264D9F4B0... Date: 5/7/2026		1.12 Name and Title of Contractor Signatory Borja Alvarez de Toledo president and CEO	
1.13 State Agency Signature DocuSigned by: Iain Watt D778BB63F9704C7... Date: 5/7/2026		1.14 Name and Title of State Agency Signatory Iain Watt Director - DPH	
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 748734844941460... On: 5/8/2026			
1.17 Approval by the Governor and Executive Council *(if applicable)* G&C Item number:		G&C Meeting Date:	

Initial BAT
Contractor Initials
Date 5/7/2026

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

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

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

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

4. CONDITIONAL NATURE OF AGREEMENT.

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

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

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

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

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

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

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

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

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

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

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

7. PERSONNEL.

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

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

Initial
BAT
Contractor Initials
Date 5/7/2026

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

8. EVENT OF DEFAULT/REMEDIES.

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

8.1.1 failure to perform the Services satisfactorily or on schedule;

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

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

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

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

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

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

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

9. TERMINATION.

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

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

10. PROPERTY OWNERSHIP/DISCLOSURE.

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

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

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

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

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

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

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

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

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

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

Initial

Contractor Initials BAT

Date 5/7/2026

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

14. INSURANCE.
14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:
14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than $1,000,000 per occurrence and $2,000,000 aggregate or excess; and
14.1.2 special cause of loss coverage form covering all Property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the Property.
14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.
14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or any successor, a certificate(s) of insurance for all insurance required under this Agreement. At the request of the Contracting Officer, or any successor, the Contractor shall provide certificate(s) of insurance for all renewal(s) of insurance required under this Agreement. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

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

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

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

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

19. CHOICE OF LAW AND FORUM.
19.1 This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire except where the Federal supremacy clause requires otherwise. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.
19.2 Any actions arising out of this Agreement, including the breach or alleged breach thereof, may not be submitted to binding arbitration, but must, instead, be brought and maintained in the Merrimack County Superior Court of New Hampshire which shall have exclusive jurisdiction thereof.

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

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

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

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

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

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

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

Initial
Contractor Initials BAT
Date 5/7/2026

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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, this Agreement, and all obligations of the parties hereunder, shall become effective on July 1, 2026 (“Effective Date”).

1.2. Paragraph 3, Effective Date/Completion of Services, is amended by deleting subparagraph 3.3., in its entirety and replacing it as follows:

3.3. Contractor must complete all Services by the Completion Date specified in block 1.7. 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 6, Compliance by Contractor with Laws and Regulations/Equal Employment Opportunity, Subparagraph 6.1., is amended as follows:

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, RSA 151:21 Patients’ Bill of Rights, civil rights and equal employment opportunity laws, and the Governor’s order on Respect and Civility in the Workplace, Executive Order 2020-01. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

1.4. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.5., as follows:

12.5. 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.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

1. Statement of Work

1.1. The Contractor must provide the Comprehensive Family Support (CFS) Program. The Contractor must provide services to pregnant and parenting women as well as other families with children up to eighteen (18) years of age who are:

1.1.1. Experiencing, or at risk of experiencing difficulty with:

1.1.1.1. Pregnancy;

1.1.1.2. Health and nutrition;

1.1.1.3. Education and employment;

1.1.1.4. Parenting challenges;

1.1.1.5. Social isolation;

1.1.1.6. Substance use disorders;

1.1.1.7. Mental health events;

1.1.1.8. Child abuse and neglect; and

1.1.1.9. Substance exposed infants.

1.1.2. Perinatal families of substance exposed infants.

1.1.3. At risk for child abuse and neglect.

1.1.4. Seeking Comprehensive Family Support (CFS) in a voluntary manner.

1.2. The Contractor must ensure all services are provided in the following DHHS Catchment area: Concord, Manchester, and Southern District Office. The Contractor must maintain a physical office located within the Catchment Area. The Contractor must ensure:

1.2.1. The office is accessible to families and staff at least five (5) days per week Monday through Friday during standard business hours of 8:00 am to 4:00 pm, excluding state holidays.

1.2.1.1. Evening hours are available at least one (1) night per week.

1.2.2. Families are provided flexible opportunities to meet in the home or community.

1.2.3. Office locations remain in compliance with the Americans with Disabilities Act (ADA) accessibility requirements.

1.2.4. No duplication of services.

1.3. The Contractor must meet the Standards of Quality for Family Strengthening &

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

Support as defined by the National Family Support Network. This includes:

1.3.1. Maintaining a current status throughout the term of the Agreement of having completed a New Hampshire self-assessment and received designation as a Family Resource Center (FRC) of Quality.

1.4. Comprehensive Family Support (CFS) Home Visiting Program

1.4.1. The Contractor must deliver high-quality, responsive CFS home visiting services to New Hampshire families with children ages 0-18, based on their emerging needs. The Contractor must ensure that families enrolled in CFS have access to all FRC services, home visiting services, parent education, parent support groups, father groups, parent cafes, information and referral, and case management. The Contractor must work collaboratively with the Department to deliver statewide CFS home visiting services that:

1.4.1.1. Promote healthy pregnancy and birth outcomes.

1.4.1.2. Support safe and nurturing environments for children and adolescents.

1.4.1.3. Improve maternal and child health.

1.4.1.4. Encourage positive parenting practices.

1.4.1.5. Reduce child maltreatment.

1.4.1.6. Increase linkages and referrals to community resources and supports.

1.4.2. The Contractor must ensure each family has a completed Individual Service Plan (ISP) that identifies and addresses barriers to achieving optimal health, well-being, and resiliency. The Contractor must use the ISP template provided by the Department and must include information about the education and support services that will be delivered across key outcome domains, which may include but are not limited to:

1.4.2.1. Maternal Health.

1.4.2.2. Child Health.

1.4.2.3. Child Development and School Readiness.

1.4.2.4. Community Linkages and Referrals.

1.4.2.5. Family Economic Self Sufficiency.

1.4.2.6. Positive Parenting Practices.

1.4.2.7. Preventative Child Care Scholarship.

1.4.3. The Contractor must provide CFS services using the Strengthening Families Framework developed by the Center for the Study [illegible]

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

Policy (CSSP), addressing the five (5) Protective Factors which are:

1.4.3.1. Parental Resilience.

1.4.3.2. Social Connections.

1.4.3.3. Knowledge of parenting and child development.

1.4.3.4. Concrete supports in times of need.

1.4.3.5. Social and emotional competence of children.

1.4.4. The Contractor must ensure CFS services are delivered through a variety of methods, including but not limited to:

1.4.4.1. Home visiting services.

1.4.4.2. Educational workshops.

1.4.4.3. Peer-led or professionally facilitated support groups.

1.4.4.4. Parenting education and family support activities.

1.4.4.5. Trauma-informed services that recognize and respond to the impact of adverse experiences.

1.4.4.6. Access to concrete resources in times of need.

1.4.5. The Contractor must provide home visiting services that are respectful of the families served, strengths-based and family-centered, ensuring participation is voluntary and addresses each family's values, traditions, and needs.

1.4.6. The Contractor must collaborate with program participants to develop individualized, goal-oriented plans that improve economic self-sufficiency and long-term family stability. These goals may include, but are not limited to:

1.4.6.1. Planning future pregnancies.

1.4.6.2. Continuing education or vocational training.

1.4.6.3. Securing and maintaining employment.

1.4.6.4. Strengthening the family's Protective Factors.

1.4.6.5. Obtaining safe and stable housing.

1.4.6.6. Accessing community-based services and supports.

1.4.6.7. Participating in parenting education on topics such as:

1.4.6.7.1. Child development.

1.4.6.7.2. Child behavior and emotional regulation.

1.4.6.7.3. Child health and wellness.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

1.4.6.7.4. Coping strategies and problem-solving skills.

1.4.6.7.5. Home and child safety.

1.4.6.7.6. Positive parenting techniques.

1.4.7. The Contractor must promote education on health and safety topics including, but not limited to:

1.4.7.1. Providing child safety education through handouts and discussion using evidence-based curricula, including resources from the Centers for Disease Control (CDC) covering a wide range of topics such as:

1.4.7.1.1. Car seat safety and installation checks.

1.4.7.1.2. Use of safety gates and fall prevention.

1.4.7.1.3. Safe use of portable cribs and sleep environments.

1.4.7.1.4. Safe sleep practices to reduce the risk of Sudden Unexpected Infant Death Syndrome (SUID).

1.4.7.1.5. Lead poisoning prevention, including identification of environmental hazards.

1.4.7.1.6. Home safety strategies, including the use of window guards.

1.4.7.1.7. Oral health education for infants, children, and adolescents.

1.4.7.1.8. Understanding Adverse Childhood Experiences (ACEs) and building Protective Factors.

1.4.7.1.9. Smoking cessation education and referrals.

1.4.7.1.10. Educating families on the importance of primary care and preventative health services, including:

1.4.7.1.11. Access to preventative health care.

1.4.7.1.12. Immunizations.

1.4.7.1.13. Establishing a medical home for ongoing care coordination.

1.4.7.1.14. Improving child safety and health outcomes through regular well-child visits.

1.4.7.1.15. Postpartum health care follow up and planning for future pregnancies.

1.4.8. The Contractor must ensure all women have access to [illegible]

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

screening tools, listed in 1.6.3, for prenatal and postpartum depression, and must refer all women who screen positive for maternal depression to appropriate follow-up care. The Contractor must provide support for participant enrollment in primary care and pediatric services.

1.4.9. The Contractor must complete and renew a Release of Information (ROI) form annually with all CFS participants for all programs, regardless of the type of services they are enrolled in. The ROI must include but is not limited to:

1.4.9.1. Acknowledgement of data collection within the Department's Family and Community Health Data System (FCH-DS).

1.4.9.2. Acknowledgement of sharing personal identifiable information with the Department.

1.4.9.3. Acknowledgement of the purpose of releasing data to the Department to review program outcomes and facilitate quality improvement activities.

1.4.9.4. Acknowledgement that Family Service Record outcome data will be kept and tracked for three (3) subsequent years following discharge.

1.4.9.5. All video recording, storage, access, and sharing requirements set forth elsewhere in this Scope of Services are contingent upon and governed by the participant consent requirements described in Section 1.7. The Contractor must use a paper coaching tool for participants that do not consent to video recording.

1.5. CFS Newborn Navigation Services

1.5.1. The Contractor must provide Newborn Navigation services as part of the CFS home visiting program. The purpose of newborn navigation services is to engage newborn families as early as possible in early childhood home visiting programs, community resources linkage, and services.

1.5.2. The Contractor must engage with families during pregnancy or within six (6) months of birth and provide at minimum one (1) voluntary CFS home visit within that timeframe. The visit must include care coordination services for pregnant and newborn families, with priority given to:

1.5.2.1. Family household at or below 250% of the federal poverty

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

level.

1.5.2.2. Single-parent households.

1.5.2.3. First time parents.

1.5.2.4. Families with other children under three (3) years of age.

1.5.2.5. Parents under twenty-five (25) years of age.

1.5.2.6. Parents with limited educational attainment.

1.5.3. The Contractor must make initial contact with families during pregnancy, prior to hospital discharge, or no later than six (6) months following birth to:

1.5.3.1. Schedule the initial home visit and collect intake prescreening information determined by the Department for follow-up; or

1.5.3.2. Provide FRC information to families who decline the home visit.

1.5.4. The Contractor must collect prescreening intake information and enter it into the FCH-DS prior to conducting the home visit.

1.5.5. For families who consent to CFS Newborn Navigation services, the Contractor must provide a Welcome Newborn Family bag, which includes Department-approved information and resources on topics such as:

1.5.5.1. WIC.

1.5.5.2. Medicaid.

1.5.5.3. Supplemental Nutrition Assistance Program (SNAP).

1.5.5.4. FRC services.

1.5.5.5. Lead poisoning prevention.

1.5.5.6. Safe sleep.

1.5.5.7. Infant nutrition.

1.5.5.8. Additional items as identified by the CFS agency and approved by the Department.

1.5.6. The Contractor must ensure enrolled families may receive up to three (3) Newborn Navigator home visits, all of which must occur within (6) months of enrollment.

1.5.7. The initial CFS Newborn Navigation home visit includes a comprehensive Family Needs Assessment and support services,

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

including but not limited to:

1.5.7.1. Maternal depression screening.

1.5.7.2. Developmental screening.

1.5.7.3. Referrals based on identified family needs.

1.5.7.4. Parent education and child safety (e.g., safe sleep, lead poisoning prevention, home safety).

1.5.7.5. Breastfeeding and lactation support.

1.5.7.6. Postpartum planning future pregnancies.

1.5.7.7. Infant feeding and nutrition support.

1.5.7.8. Positive parenting practices, including attachment.

1.5.7.9. Completion of release of information forms for referrals and sharing programmatic data with the Department.

1.5.8. Information and referral support to enroll in HFA or FCU programs. The CFS family support specialist delivering newborn navigation services must work with families to identify ongoing support needs and facilitate referrals to appropriate services and programs.

1.5.9. These include but are not limited to:

1.5.9.1. Family Resource Center services,

1.5.9.2. Family Check Up,

1.5.9.3. Healthy Families America (HFA),

1.5.9.4. The Supplemental Nutrition Program for Woman, Infants and Children (WIC), and

1.5.9.5. Birth to Three Early Supports and Services.

1.5.10. The Contractor must ensure data related to CFS Newborn Navigation services is collected in the Department owned FCH-DS and reported in coordination with the Department.

1.5.11. The Contractor must collaborate with, build partnerships, and coordinate enrollment planning with local healthcare agencies to promote referrals from healthcare providers to CFS's Newborn Navigation services. Partners and collaboration examples include, but

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

are not limited to:

1.5.11.1. Birthing hospitals.

1.5.11.2. OB/GYN providers.

1.5.11.3. Pediatric healthcare providers.

1.5.11.4. Family medicine and primary care providers.

1.5.11.5. Community Health Centers.

1.5.12. The Contractor must offer satellite health office hours to increase accessibility, as needed.

1.5.13. The Contractor must distribute CFS Newborn Navigation informational and printed materials, as appropriate.

1.5.14. The Contractor must also collaborate and build partnerships with local early care and education programs that serve newborn families to coordinate services, prevent duplication. and enhance care coordination. These programs include, but are not limited to:

1.5.14.1. WIC.

1.5.14.2. Birth to Three Early Supports and Services.

1.5.14.3. Healthy Families America (HFA).

1.5.14.3.1. CFS staff delivering Newborn Navigation services must maintain an active collaboration with HFA, including a clearly defined referral and enrollment process to ensure that families who may be better served through HFA are appropriately connected.

1.5.14.3.2. Pregnant and newborn families identified as having high-risk factors or who meet eligibility criteria for HFA must be engaged and referred or enrolled into HFA through joint home visits and warm handoffs.

1.5.15. The Contractor must work in close collaboration with the Department's Quality Improvement Coordinator to ensure all readiness activities are completed prior to program implementation and support ongoing quality improvement and program oversight. This includes, but is not limited to:

1.5.15.1. Completion of CFS onboarding training.

1.5.15.2. Development and implementation of a family recruitment and

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

enrollment plan.

1.5.15.3. Creation of a health provider and community engagement strategy to align services and strengthen referral pathways.

1.5.15.4. Participation in monthly Community of Practice.

1.5.15.5. Execution of additional activities that support continuous quality improvement.

1.5.15.6. Collection of program data, including administration of a Department-approved post-participant survey, which may include, but is not limited to:

1.5.15.6.1. Assessment of participant knowledge related to community resources, postpartum depression, and newborn care following the initial home visit.

1.5.15.6.2. Evaluation of referrals made and connections established with community resources.

1.5.15.6.3. Measurement of participant satisfaction and likelihood to recommend Newborn Navigation services to others.

1.5.15.6.4. Collection of additional feedback to inform and enhance continuous quality improvement efforts.

1.5.16. The Contractor must collaborate with the Department to provide timely and accurate information related to program evaluation and other data requests necessary to support the Department's goals and reporting requirements. The Contractor must be prepared to share information with various divisions within the Department, including but not limited to:

1.5.16.1. Division of Public Health.

1.5.16.2. Division of Economic Stability.

1.5.16.3. Division of Long Term Supports and Services.

1.6. CFS Assessments and Referrals

1.6.1. The Contractor must actively engage and collaborate with the Department, including the Division for Children, Youth and Families (DCYF), and community partners such as schools, community mental health centers and health clinics to promote referrals into the program and prioritize enrollment of families who may be experiencing

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

circumstances that include, but are not limited to:

1.6.1.1. A previous or current founded or unfounded report to child protective services.

1.6.1.2. Having a child with low birth weight and/or neurodevelopmental delays.

1.6.1.3. A history of, or current, parental or caregiver substance abuse.

1.6.1.4. A history of, or current, mental health concerns affecting the parent, caregiver, or child(ren).

1.6.1.5. Household income at or below 250% of the Federal Poverty Level.

1.6.1.6. A family history of intimate partner violence.

1.6.1.7. Evidence of insecure attachment in the child's early years.

1.6.1.8. Pregnancy; birth of a child within the past twelve (12) months; anticipated birth of an additional child within the next six (6) months; or the birth or expected birth of a child with special healthcare needs.

1.6.1.9. Pregnant participants with prenatal substance use concerns, and families with substance-exposed infants.

1.6.1.10. Pregnant or post-partum participants with a Plan of Safe Care, or those in need of support to develop one.

1.6.1.11. Families with more than one (1) child under the age of three (3).

1.6.1.12. Experiences of physical or social isolation, or any other factors contributing to unhealthy social and emotional outcomes.

1.6.1.13. Home conditions that present a health and/or safety risk to family members.

1.6.1.14. A child or family member with chronic health, behavioral, or developmental conditions that impact parenting.

1.6.1.15. Results from the Ages and Stages Questionnaire (ASQ) or Ages and Stages Questionnaire Social Emotional (ASQ-SE) indicating developmental delays.

1.6.1.16. Families impacted by traumatic events.

1.6.1.17. Families receiving Temporary Assistance to Needy Families (TANF) cash assistance or enrolled in any

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

Medicaid program.

1.6.1.18. Engagement with Substance Use Disorder (SUD) services.

1.6.2. The Contractor must complete a comprehensive Family Needs Assessment identified by the Department for each family served utilizing an intake assessment tool as identified by the Department within the first three (3) home visits, in order to identify family strengths, potential risk factors, and current and emerging needs. The Contractor must also conduct reassessments in accordance with the Family Check Up (FCU) model schedule, at a minimum of every six (6) months and again at twelve (12) months, or as otherwise directed by the Department.

1.6.3. The Contractor must utilize additional validated screening tools to support families and ensure budgeting to access tools, which may include, but are not limited to:

1.6.3.1. The Ages and Stages Questionnaires (ASQ-3 and ASQ:SE).

1.6.3.2. Brief System Inventory (BSI)

1.6.3.3. Edinburg Postnatal Depression Scale. (EPDS)

1.6.3.4. Developmental and social-emotional screenings for children ages one (1) month through five (5) years.

1.6.4. The Contractor must report on a monthly basis the number of families who received ASQ-3 and ASQ:SE screenings in a format specified by the Department.

1.6.5. The Contractor must provide expedited warm hand off referrals to appropriate community-based services and other resources that support families within their home communities, which may include, but are not limited to:

1.6.5.1. Childcare Aware of New Hampshire.

1.6.5.2. The Department's District Offices for assistance with program eligibility determinations.

1.6.5.3. Specialized Medicaid services, including Birth to Three Early Supports and Services.

1.6.5.4. The Supplemental Nutrition Program for Women, Infants and Children (WIC), Nutrition programs for breastfeeding

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

support, nutrition education, and access to healthy foods.

1.6.5.5. NH Employment Security.

1.6.5.6. Local school districts.

1.6.5.7. Family violence prevention agencies.

1.6.5.8. Mental health services.

1.6.5.9. Nutrition education and healthy foods.

1.6.5.10. Financial literacy and money management programs.

1.6.5.11. Smoking cessation programs.

1.6.5.12. Independent living skills programs.

1.6.5.13. Adult education programs.

1.6.5.14. Literacy education services.

1.6.5.15. Employment services.

1.6.5.16. Vocational rehabilitation services.

1.7. CFS Family Check Up Services

1.7.1. The Contractor must implement Northwest Prevention Science's Family Check-Up® (FCU) model, including the FCU portal. The Contactor must execute an agreement with Northwest Prevention Science Inc. before accessing the FCU portal or entering data.

1.7.2. The Contractor must provide at least one (1) trained staff per Catchment Area to implement the FCU model, within year one (1) of this Agreement. Training requirements include but are not limited to:

1.7.2.1. Motivational interviewing.

1.7.2.2. Everyday Parenting Curriculum, provided by the Department.

1.7.2.3. CFS onboarding and orientation training, provided by the Department.

1.7.3. The Contractor must work with the Department to support the implementation of the evidence-based FCU model to enhance the Department's CFS home visiting program services.

1.7.4. The Contractor must obtain all materials and resources required by the Department to successfully implement and deliver the FCU model with fidelity, including but not limited to a FCU informational flyer and/or brochure available for use with families and referral sources according to the FCU model resources.

1.7.5. The Contractor must provide access to computers, laptops, or other devices to use for video recordings, coding interaction,

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

downloading and compiling assessment data. To meet these requirements, the Contractor must ensure the availability of the following specific materials, tools, and resources:

1.7.5.1. Devices with video recording capability to support the following activities:

1.7.5.1.1. Contractor video recording families during family interaction tasks, which are part of the FCU assessment process.

1.7.5.1.2. Contractor video recording family session monthly to share with their Supervisor-Trainers for fidelity checks.

1.7.5.1.3. Supervisor-Trainer's video recording family sessions, supervision, and trainings for the FCU certification process.

1.7.5.2. Devices for families to complete FCU questionnaires on the FCU Portal Website online. Devices must be capable of establishing an internet connection independently or through hotspots. Contractor agrees that while families may use their own devices for the FCU questionnaire, Contractor-provided devices during assessment sessions streamline the process and increase the likelihood of questionnaire completion.

1.7.5.3. Devices must have the following capabilities:

1.7.5.3.1. Able to stand alone on a surface or on a tripod during the video recording process.

1.7.5.3.2. Secure access to prevent unauthorized viewing of confidential information, since providers will leave the room while families complete interaction tasks.

1.7.5.3.3. HIPAA-compliant video storage.

1.7.6. Contractor must provide consent forms that must cover consent for the family for video recording, with separate sections or forms addressing Family Interaction Tasks and session recordings. Consents must clearly outline:

1.7.6.1. The purpose of videos.

1.7.6.2. Who may access them.

1.7.6.3. The timeline for destruction of videos, in accordance with

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

HIPAA retention requirements .

1.7.6.4. A statement that consent to video recording is not required for program participation.

1.7.7. The Contractor must ensure all video recording adheres to the requirements outlined in Exhibit E: DHHS Information Security Requirements.

1.7.8. Contractor must provide toys for family interaction tasks, including:

1.7.8.1. Toys appropriate for children ages two (2) to nine (9) years old.

1.7.8.2. A basket large enough to hold toys for younger children.

1.7.8.3. Several puzzles of varying difficulty.

1.7.8.4. Blocks sufficient to build a tower.

1.7.8.5. Paper and colored pens or crayons.

1.7.9. The Contractor must adapt FRC documentation and intake procedures to integrate FCU model activities. This includes the completion of FCU family questionnaires via the FCU portal.

1.7.10. Until all CFS home visitors are trained to deliver FCU, the Contractor's FCU Specialist must enroll families with children ages 0-18 on a voluntary basis. The target population for the FCU model includes, and priority enrollment through an intake process is given to, families referred to CFS who meet the following criteria:

1.7.10.1. Parents or caregivers with a diagnosed mental illness, and/or families with children who have a diagnosed mental illness.

1.7.10.2. Families with a history of child abuse or neglect or at risk of foster care placement.

1.7.10.3. Families with a history of substance use disorders or those in need of substance use disorder treatment.

1.7.10.4. Families with children experiencing low student achievement.

1.7.10.5. All families with children ages 0-5.

1.7.10.6. Families who meet eligibility criteria for Healthy Families America (HFA) will be enrolled in the Department's HFA program when appropriate and available.

1.7.11. The Contractor must ensure that dedicated FCU staff and supervisors implement the model with fidelity and actively engage

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

with the Department in fidelity monitoring and quality assurance activities. Services must include, but are not limited to:

1.7.11.1. Conducting in-person visits with each FCU-enrolled family, including a minimum of three (3) structured intake and assessment sessions, followed by ongoing support and documentation. These sessions must include:

1.7.11.1.1. An Initial Intake Session to establish rapport, gather information about the family system, and identify existing strengths and challenges.

1.7.11.1.2. A Second Assessment Session in which the Contractor assists the family in completing standardized questionnaires and assessment tools to evaluate needs and areas requiring support.

1.7.11.1.3. A Third Assessment Session focused on collaborative goal setting, which must include:

1.7.11.1.4. Development of a service plan incorporating Everyday Parenting sessions;

1.7.11.1.5. Referral and linkage to appropriate community-based resources; and

1.7.11.1.6. Identification and prioritization of the family's goals and service needs.

1.7.11.2. Following the initial session, within 30 business days, the Contractor's FCU Specialist must:

1.7.11.2.1. Conduct follow-up visits using strategies from the Everyday Parenting curriculum, tailored to the results of the family's assessments.

1.7.11.2.2. Ensure accurate and timely documentation in the FCH-DS and FCU online assessment tools, summarizing recommendations and next steps.

1.7.11.2.3. Review family goals and progress on a quarterly basis in collaboration with the family.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

1.7.11.2.4. Assess the family's readiness to change as part of ongoing engagement and service planning.

1.7.12. The Contractor must ensure the following:

1.7.12.1. Provide the Department with access to video-recorded family sessions to support monitoring of implementation and fidelity to the model, upon consent granted by the family in Section 1.7.3.4.

1.7.12.2. Provide the Department with a written policy regarding the use of video recording for the purpose of home visits. The Contractor must ensure all staff and subcontractors sign a confidentiality agreement and adhere to the confidentiality policy outlined in the written policy, and notify staff and subcontractors that violations may result in disciplinary action.

1.7.12.3. Obtain and document individual consent for all video-recorded sessions, including consent to share recordings with the Department for quality improvement purposes.

1.7.12.4. Ensure that appropriate equipment is available and maintained for home visitors to conduct video recordings, such as video camera, tablet, or other device with recording capabilities. The Contractor must ensure that staff does not use personal cell phones or other personal devices to conduct video recording.

1.7.13. The Contractor must only use marketing materials that have been reviewed and approved by the Department.

1.7.14. The Contractor must collaborate with the Department's CFS Program Manager, Quality Improvement and Training Coordinator, and FCU Model experts to ensure all readiness activities are completed prior to program implementation, including but not limited to:

1.7.14.1. Completion of FCU Model training.

1.7.14.2. Completion of Everyday Parenting Curriculum training.

1.7.14.3. Completion of Motivational Interviewing training.

1.7.14.4. Implementation of data collection processes, including a Department-approved participant post-survey.

1.7.14.5. Participation in monthly Supervisor Consultation, facilitated by the Department, to support implementation

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

and fidelity to the FCU model.

1.8. Staffing and Training

1.8.1. The Contractor must designate at least one (1) dedicated FCU Specialist position as part of the CFS home visiting program. The FCU Specialist must initially allocate a minimum of 20% of their workload to family enrollment and model implementation activities.

1.8.2. The Contractor must:

1.8.2.1. Ensure that all relevant staff participate in and complete these trainings as scheduled, and maintain documentation of completion for Department review.

1.8.2.2. Ensure that all relevant staff are trained in Motivational Interviewing.

1.8.2.3. Budget for additional staff development opportunities based on the needs of their team, as identified in collaboration with the Department's Quality Improvement and Training Coordinator.

1.8.3. The Contractor must ensure the FCU Specialist transitions to dedicating 100% of their workload to the implementation of the FCU model by June 30, 2027.

1.8.4. The Contractor may elect to designate more than one (1) FCU Specialist to implement the model during the first year of program implementation.

1.8.5. The Contractor must identify additional CFS staff to participate in being trained to implement the FCU model in year two and again in year three of program implementation, to support sustainability and build long-term capacity.

1.8.6. The Contractor must ensure all CFS home visitors complete Department provided training in and utilize the Everyday Parenting Curriculum and CFS Program Manual, which is:

1.8.6.1. The Everyday Parenting Manual, Everyday Parenting: A Professional's Guide to Building Family Management Skills (2nd edition). Available at www.researchpress.com

1.8.7. The Contractor must ensure all CFS home visitors are trained in core CFS competencies and collaborate with the Department's Continuous Quality Improvement (CQI) and training coordinator to implement a comprehensive staff training plan that ensures a qualified workforce and identifies training needs and gaps. CFS home visitors must complete Department provided training which will include at a minimum,

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

Everyday Parenting and CFS onboarding training.

1.8.8. The Contractor must identify a qualified supervisor for the FCU staff be trained in the FCU model and be responsible for ensuring adherence to the model's implementation standards. The FCU supervisor must fulfill the following responsibilities:

1.8.8.1. Participate in monthly FCU supervisor consultation meetings, as scheduled by the Department, to enhance supervisory capacity and support fidelity monitoring of the FCU implementation.

1.8.8.2. The Contractor must ensure the FCU supervisor is trained and certified by Northwest Prevention Science as a FCU supervisor. The FCU supervisor must provide implementation support to FCU staff, including but not limited to individualized consultation, direct observation, and performance evaluation, to ensure fidelity to the model.

1.8.9. The Contractor must ensure that both the FCU specialist and FCU supervisor receive training in the Family Check-Up model, Motivational Interviewing, Newborn Navigation Core Training, and Everyday Parenting curriculum, and that they meet the minimum educational qualifications required for their roles.

1.8.10. The Contractor must use the FCU model, Motivational Interviewing and Everyday Parenting curriculum training to support effective implementation.

1.8.11. The Contractor must ensure that all staff, subcontractors, and volunteers undergo the required criminal background checks registry checks, as described in Section 1.12.

1.8.12. If the Contractor provides transportation for individuals served under this Agreement, the Contractor must ensure:

1.8.12.1. The enrolled parent or caregiver must be present for all sessions.

1.8.12.2. All drivers have a valid State Issued and a safe driving record;

1.8.12.2.1. All vehicles are approved by the Contractor and meet applicable safety standards;

1.8.12.2.2. Compliance with all applicable local, state, and federal transportation safety rules and standards;

1.8.12.2.3. Proof of valid automobile insurance is provided to the Department that includes bodily in[illegible]d

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

property damage in amounts of not less than $100,000 per occurrence and $300,000 aggregate or excess, for all owned, hired, or non-owned vehicles used to provide transportation.

1.8.13. The Contractor must ensure staff complete required training in the principles of family support, maternal and child health, HIPAA as well as the child welfare system, with concentrations in service array and working in multidisciplinary teams.

1.8.14. The Contractor must consistently engage in purposeful staff development activities that support professional growth and improve the quality of services provided. These activities must include, but are not limited to, training and enrichment in the following areas: Skills necessary to understand and respond to the unique needs, strengths, and resources of the families and communities served.

1.8.14.1. The ability to exercise empathy, with an understanding of the complex family dynamics and stressors experienced by parents and caregivers.

1.8.14.2. The use of effective, evidence-informed home visiting practices, including strategies that are grounded in research and adapted to family needs, as well as standards for documentation and reporting.

1.8.15. The Contractor must provide an adequate number of home visitors to implement the CFS program, as approved by the Department. All staffing vacancies, transitions, or changes in personnel assignments must be reported to the Department in a timely manner.

1.8.16. The Contractor must ensure the CFS program director, supervisor, or program managers have:

1.8.16.1. A Bachelor's degree in public health, early childhood, social work, human services administration, or a related field focused on supporting children and families, with four (4) years of experience working with families and children in a social service, home health, or other early childhood program setting, including supervisory experience;

1.8.16.2. An Associate degree with five (5) years of prior experience working with families and children in a social service, home health, or early childhood program setting, including supervisory experience;

1.8.16.3. Or at a minimum, high school diploma or equivalent with six (6) years of relevant lived and professional experience working with families and children in a social servic e

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

health, or other early childhood program setting, including supervisory responsibilities, and written approval from the Department to fulfill the duties of the position.

1.8.17. The Contractor must ensure CFS Home Visitors have:

1.8.17.1. An Associate degree with four (4) years of prior experience working with families and children in a social service, home health, or other early childhood program setting;

1.8.17.2. Or at a minimum, a high school diploma or equivalent with five (5) years of experience providing services to families in a social service, home health, or other early childhood program setting; and demonstrated lived and professional experience aligned with this role, with written approval from the Department.

1.8.18. The Contractor must ensure the CFS Family Check Up Home Visitor has at a minimum:

1.8.18.1. A Bachelor's degree or higher; and

1.8.18.2. Two (2) years of experience providing services to families in a social service, home health, or other early childhood program setting.

1.8.18.2.1. If a Bachelor's-level staff is not available, the Contractor may recommend qualified team members to perform FCU. A training plan and summary of relevant skills and clinical experience must be submitted with the application and approved by the Department.

1.8.19. The Contractor must ensure all CFS home visitors across all CFS programs are trained in the "Everyday Parenting" curriculum and Motivational Interviewing and adhere to its requirements within six (6) months of program implementation.

1.8.19.1. Although not required, the Contractor may allocate funding to train staff in additional evidence-based early childhood curricula, such as Growing Great Kids or Parents as Teachers.

1.8.20. The Contractor must demonstrate capacity and readiness to be trained in and implement the Family Check Up model.

1.8.21. Staffing requirements are subject to change, contingent upon the Department's written approval.

1.9. Reporting

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

1.9.1. The Contractor must submit comprehensive quarterly reports highlighting program activities by the 15th calendar day of the month following the end of each reporting period. The first report is due by October 15, 2026, and must include:

1.9.1.1. The progress in achieving the stated outcomes; and

1.9.1.2. Feedback from families regarding the effectiveness, accessibility, and satisfaction of the services provided through participant surveys or post service delivery interviews.

1.9.2. The Contractor must submit an annual performance report to the Department by July 31st of each year, with the first report due on July 31, 2027, which includes, but is not limited to:

1.9.2.1. A summary of program accomplishments and key activities.

1.9.2.2. Staff training plan for each CFS home visitor.

1.9.2.3. Recommendations for service development, program enhancements, and outcome improvements.

1.9.2.4. Identification of systemic barriers impacting service delivery or access.

1.9.2.5. Results of family satisfaction surveys and analysis of trends.

1.9.3. The Contractor must transmit all data in a secure and encrypted format approved by the Department.

1.9.4. The Contractor must designate an FRC staff member to serve as the primary liaison for all programmatic communication between the Department and the Contractor, including, but not limited to:

1.9.4.1. Clinical updates.

1.9.4.2. Program announcements.

1.9.4.3. Reporting changes, errors, and requests.

1.9.4.4. Contract oversight.

1.9.4.5. Oversight of program operations and compliance

1.9.5. The Contractor must evaluate both the progress of parents and caregivers and the effectiveness of the programs and services provided.

1.9.6. The Contractor must maintain a comprehensive and confidential Family Service Record for each family, in compliance with all Health Insurance Portability and Accountability Act (HIPAA) Privacy Rules. The Family Service Record must include, but is not limited to:

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

1.9.6.1. Participant names (Parent(s) and Child(ren)).
1.9.6.2. Participant DOBs (Parent (s) and Child(ren)).
1.9.6.3. Residence.
1.9.6.4. Primary language spoken in the home.
1.9.6.5. Educational level of parent(s) or guardian(s).
1.9.6.6. Digital Resources (phone, laptop, cell).
1.9.6.7. Source of referral.
1.9.6.8. Referral details and contact information.
1.9.6.9. Signed release of information form(s).
1.9.6.10. Household income.
1.9.6.11. Household size.
1.9.6.12. Employment status of parent(s) or guardian(s).
1.9.6.13. Access to prenatal and post-partum healthcare.
1.9.6.14. Home visits conducted and screening tools completed.
1.9.6.15. Topics reviewed during service delivery, including but not limited to:
1.9.6.15.1. Maternal depression screening.
1.9.6.15.2. Planning for future pregnancies.
1.9.6.15.3. Positive parenting practices.
1.9.6.15.4. Breastfeeding/lactation support.
1.9.6.15.5. Nutrition.
1.9.6.15.6. Child health.
1.9.6.15.7. Maternal health and self-care.
1.9.6.15.8. Referrals made for service linkage, including but not limited to:
1.9.6.15.9. Concrete supports (e.g., housing, utilities, transportation).
1.9.6.15.10. Childcare resources.
1.9.6.15.11. Healthcare access and coordination.
1.9.6.15.12. Community-based supports and services.
1.9.6.15.13. Home visiting programs and service type.
1.9.6.15.14. Discharge date and reason for disch

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

1.9.6.15.15. Completion of post-service surveys.

1.9.6.15.16. Family needs assessment.

1.9.6.15.17. Child/Family Individualized Service Plan (ISP).

1.9.6.15.18. Documentation of prenatal and postpartum healthcare received.

1.9.6.15.19. Medicaid and other health insurance coverage.

1.9.6.15.20. Linkages with community-based resources.

1.9.6.16. Receipt of public benefits, including but not limited to:

1.9.6.16.1. SNAP.

1.9.6.16.2. New Hampshire Child Care Scholarship.

1.9.6.16.3. Medicaid.

1.9.6.16.4. Social Security Disability Insurance (SSDI).

1.9.6.16.5. Supplemental Security Income (SSI).

1.9.6.16.6. Temporary Assistance for Needy Families (TANF).

1.9.6.16.7. Special Supplemental Nutrition Program for WIC.

1.9.6.17. Participant service data, including but not limited to:

1.9.6.17.1. Date of service.

1.9.6.17.2. Participants present during service delivery.

1.9.6.17.3. Type of service provided and topics reviewed.

1.10. Performance Measures

1.10.1. The Contractor must provide performance data in a format and at a frequency specified by the Department. The following performance measures will be used to evaluate program effectiveness:

1.10.1.1. A minimum of 80% of participants must report a favorable rating on satisfaction surveys administered by the Contractor.

1.10.1.2. At least 70% of referred families must enroll in services within 30 days of referral.

1.10.1.3. A minimum of 65% of enrolled families must complete the full

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

service cycle as defined by the program model.

1.10.2. The Contractor must demonstrate annual improvement in outreach to high-risk populations, as measured by year-over-year increases in engagement rates.

1.10.3. The Contractor must submit data to support evaluation of long-term outcomes, including family stability, child health indicators, and service retention, as defined by the Department.

1.11. Meetings, Collaboration, and Data Sharing

1.11.1. The Contractor must participate in regular performance review meetings with the Department and peer providers to analyze data, share best practices, and identify areas for improvement.

1.11.2. The Contractor must collect and transmit all required data, including client-level demographic, service utilization, and outcome data, in a secure format specified by the Department.

1.11.3. The Contractor must participate in monthly check-in meetings and Communities of Practice (CoP) for the Department's Comprehensive Family Support (CFS) home visiting program, as scheduled by the Department. CoPs are structured, recurring gatherings of professionals and stakeholders involved in CFS to share best practices, address challenges, and support continuous quality improvement.

1.11.4. The Contractor must participate in monthly meetings with the Department, or as otherwise requested by the Department.

1.11.5. The Contractor may be required to participate in on-site program and file reviews conducted by the Department, as requested.

1.11.6. The Contractor must participate in monthly fidelity reviews of family sessions with the Department for the Family Check Up model.

1.11.7. The Contractor may be required to facilitate annual file reviews conducted by the Department, or as otherwise requested, which may include, but are not limited to:

1.11.7.1. Compliance and documentation standards.

1.11.7.2. Service Delivery alignment and model fidelity.

1.11.7.3. Verification of data entry and reporting accuracy.

1.11.8. The Contractor must ensure Family Service Records are accurately summarized and entered into the Department's Family and Community Health Data System (FCH-DS) in real time and must comply with the confidentiality provisions of RSA 170-G:8-a.

1.11.9. The Contractor must provide the Department with a list of staff (End

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

Users, as defined in Exhibit D) who will be responsible for entering Family Service Record data into the FCH-DS.

1.11.10. The Contractor must notify the Department immediately, and no more than 24 hours of staff changes, to ensure access to the FCH-DS is removed in a timely manner.

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

1.11.12. The Contractor must utilize the Department's closed loop referral system, at an agreed upon start date, whenever applicable to the services they provide for referrals between health and/or human service providers within New Hampshire for referral management and client care coordination. Utilization includes inputting information and data as necessary into the Department's referral solution as part of the NH Care Connections Network to facilitate referrals to participating providers, signing required Network Participation Agreement(s), and obtaining a participant specific consent for services.

1.11.13. The Contractor must utilize the Department's admission, discharge, transfer, and shared care insights solution whenever applicable to the services they provide for client care coordination and management between health providers within New Hampshire. Utilization includes inputting information and data as necessary into the Department's admission, discharge, transfer, and shared care insights platform as part of the NH Care Connections Network to facilitate referrals to participating providers and signing required Participation Agreement(s) for the admission, discharge, transfer, and shared care insights solution

1.11.13.1. The Department's contracts with the closed loop referral and admission, discharge, and transfer vendors incorporate the costs of developing and maintaining the standards-based interface from which the Contractor may choose to configure their systems to communicate securely with the Department's NH Care Connections Network solutions. The Contractor may choose to interface with the Department's closed loop referral and/or the admission discharge transfer solution utilizing a Smart on FHIR or HL-7 standard interface process to connect individuals to health and social service providers. The costs for the Contractor's system or team to develop or utilize the standard Smart on FHIR or HL-7 based interface are the sole responsibility of the Contractor.

1.12. Background Checks

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

1.12.1. Prior to permitting any individual to provide services under this Agreement, the Contractor must ensure that said individual has undergone:

1.12.1.1. A criminal background check, at the Contractor's expense, and has no convictions for crimes that represent evidence of behavior that could endanger individuals served under this Agreement;

1.12.1.2. A name search of the Department's Bureau of Adult and Aging Services (BAAS) State Registry, pursuant to RSA 161-F:49, with results indicating no evidence of behavior that could endanger individuals served under this Agreement; and

1.12.1.3. A name search of the Department's DCYF Central Registry pursuant to RSA 169-C:35, with results indicating no evidence of behavior that could endanger individuals served under this Agreement.

1.13. Confidential Data

1.13.1. The Contractor must meet all information security and privacy requirements as set by the Department and in accordance with the Department's Information Security Requirements Exhibit as referenced below.

1.13.2. The Contractor must ensure any individuals involved in delivering services through this Agreement contract 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 Information Security Requirements Exhibit. The Contractor must ensure said individuals have a justifiable business need to access confidential data. The Contractor must provide attestations upon Department request.

1.14. Privacy Impact Assessment

1.14.1. Upon request, the Contractor must allow and assist the Department in conducting a Privacy Impact Assessment (PIA) of its system(s)/application(s)/web portal(s)/website(s) or Department system(s)/application(s)/web portal(s)/website(s) hosted by the Contractor, if Personally Identifiable Information (PII) is collected, used, accessed, shared, or stored. To conduct the PIA the Contractor must provide the Department access to applicable systems and documentation sufficient to allow the Department to assess, at

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

minimum, the following:

1.14.1.1. How PII is gathered and stored;

1.14.1.2. Who will have access to PII;

1.14.1.3. How PII will be used in the system;

1.14.1.4. How participant consent will be achieved and revoked; and

1.14.1.5. Privacy practices.

1.14.2. 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.

1.15. Department Owned Devices, Systems and Network Usage

1.15.1. Contractor End Users, defined in the Department's Information Security Requirements Exhibit that is incorporated into this Agreement, authorized by the Department's Information Security Office to use a Department issued device (e.g. computer, tablet, mobile telephone) or access the Department network in the fulfilment of this Agreement, each must:

1.15.1.1. Sign and abide by applicable Department and New Hampshire Department of Information Technology (NH DoIT) use agreements, policies, standards, procedures and guidelines, and complete applicable trainings as required;

1.15.1.2. Use the information that they have permission to access solely for conducting official Department business and agree that all other use or access is strictly forbidden including, but not limited, to personal or other private and non-Department use, and that at no time shall they access or attempt to access information without having the express authority of the Department to do so;

1.15.1.3. Not access or attempt to access information in a manner inconsistent with the approved policies, procedures, and/or agreement relating to system entry/access;

1.15.1.4. Not copy, share, distribute, sub-license, modify, reverse engineer, rent, or sell software licensed, developed, or being evaluated by the Department, and at all times must use utmost care to protect and keep such software strictly confidential in accordance with the license or any other agreement executed by the Department;

1.15.1.5. Only use equipment, software, or subscription(s) authorized by the Department's Information Security Office or

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

designee;

1.15.1.6. Not install non-standard software on any Department equipment unless authorized by the Department's Information Security Office or designee;

1.15.1.7. Agree that email and other electronic communication messages created, sent, and received on a Department-issued email system are the property of the Department of New Hampshire and to be used for business purposes only. Email is defined as "internal email systems" or "Department-funded email systems."

1.15.1.8. Agree that use of email must follow Department and NH DoIT policies, standards, and/or guidelines; and

1.15.1.9. Agree when utilizing the Department's email system:

1.15.1.9.1. To only use a Department email address assigned to them with a "@ affiliate.DHHS.NH.Gov".

1.15.1.9.2. Include in the signature lines information identifying the End User as a non-Department workforce member; and

1.15.1.9.3. Ensure the following confidentiality notice is embedded underneath the signature line:

CONFIDENTIALITY NOTICE: "This message may contain information that is privileged and confidential and is intended only for the use of the individual(s) to whom it is addressed. If you receive this message in error, please notify the sender immediately and delete this electronic message and any attachments from your system. Thank you for your cooperation."

1.15.1.10. Contractor End Users with a Department issued email, access or potential access to Confidential Data, and/or a workspace in a Department building/facility, must:

1.15.1.10.1. Complete the Department's Annual Information Security & Compliance Awareness Training prior to accessing, viewing, handling, hearing, or transmitting Department Data or Confidential Data.

1.15.1.10.2. Sign the Department's Business Use and Confidentiality Agreement and Asset Use Agreement, and the NH DoIT Department wide

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

Computer Use Agreement upon execution of the Agreement and annually thereafter.

1.15.1.10.3. Only access the Department's intranet to view the Department's Policies and Procedures and Information Security webpages.

1.15.1.10.4. Contractor agrees, if any End User is found to be in violation of any of the above terms and conditions, said End User may face removal from the Agreement, and/or criminal and/or civil prosecution, if the act constitutes a violation of law.

1.15.1.10.5. Contractor agrees to notify the Department a minimum of three business days prior to any upcoming transfers or terminations of End Users who possess Department credentials and/or badges or who have system privileges. If End Users who possess Department credentials and/or badges or who have system privileges resign or are dismissed without advance notice, the Contractor agrees to notify the Department's Information Security Office or designee immediately.

1.16. Contract End-of-Life Transition Services

1.16.1. General Requirements

1.16.1.1. If applicable, upon early termination or expiration of the Agreement the parties agree to cooperate in good faith to effectuate a secure transition of the services ("Transition Services") from the Contractor to the Department and, if applicable, the new Contractor ("Recipient") engaged by the Department to assume the services. 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 Recipient to develop a Data Transition Plan (DTP). The Department shall provide the DTP template to the Contractor.

1.16.1.2. The Contractor must assist the Recipient, in connection with the transition from the performance of Services by the Contractor and its End Users 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 tran[illegible]f

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

any 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 and assistance to any third-party consultants engaged by Recipient in connection with the Transition Services.

1.16.1.3. If a system, database, hardware, software, and/or software licenses (Tools) was purchased or created to manage, track, and/or store Department Data in relationship to this contract said Tools will be inventoried and returned to the Department, along with the inventory document, once transition of Department data is complete. The internal planning of the Transition Services by the Contractor and its End Users shall be provided to the Department and if applicable the Recipient in a timely manner. Any such Transition Services shall be deemed to be Services for purposes of this Agreement.

1.16.1.4. In the event the data Transition extend beyond the end of the Agreement, the Contractor agrees that the Information Security Requirements, and if applicable, the Department's Business Associate Agreement terms and conditions remain in effect until the Data Transition is accepted as complete by the Department.

1.16.1.5. In the event the Contractor has comingled Department Data and the destruction or Transition of said data is not feasible, the Department and Contractor will jointly evaluate regulatory and professional standards for retention requirements prior to destruction, refer to the terms and conditions of the Department's DHHS Information Security Requirements Exhibit.

1.17. Completion of Transition Services

1.17.1. Each service or transition phase shall be deemed completed (and the transition process finalized) at the end of fifteen (15) business days after the product, resulting from the Service, is delivered to the Department and/or the Recipient in accordance with the mutually agreed upon Transition plan, unless within said fifteen (15) business day term the Contractor notifies the Department of an issue requiring additional time to complete said product.

1.17.2. Once all parties agree the data has been migrated the Contractor will have thirty (30) days to destroy the data per the terms and conditions

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

of the Department's Information Security Requirements Exhibit.

1.18. Disagreement over Transition Services Results

1.18.1. In the event the Department is not satisfied with the results of the Transition Service, the Department shall notify the Contractor, in writing, stating the reason for the lack of satisfaction within fifteen (15) business days of the final product or at any time during the data Transition process. The Parties shall discuss the actions to be taken to resolve the disagreement or issue. If an agreement is not reached, at any time the Department shall be entitled to initiate actions in accordance with the Agreement.

2. Exhibits Incorporated

2.1. The Contractor must comply with all Exhibit D Federal Requirements, which are attached hereto and incorporated by reference herein.

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

2.3. 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 F, Business Associate Agreement, which has been executed by the parties.

3. Additional Terms

3.1. Impacts Resulting from Court Orders or Legislative Changes

3.1.1. 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.

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

3.2.1. The Contractor must submit:

3.2.1.1. A detailed description of the language assistance services, within ten (10) days of the Effective Date of the Agreement, 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

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

who have speech challenges.

3.2.1.2. A written attestation, within forty-five (45) days of the Effective Date of the Agreement and annually thereafter, that all personnel involved the provision of services to individuals under this Agreement have completed, within the last twelve (12) months, the Contractor Required Training Video on Civil Rights-related Provisions in DHHS Procurement Processes, which is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors); and

3.2.1.3. The Department's Federal Civil Rights Compliance Checklist within ten (10) days of the Effective Date of the Agreement. The Federal Civil Rights Compliance Checklist must have been completed within the last twelve (12) months and is accessible on the Department's website (https://www.dhhs.nh.gov/doing-business-dhhs/civil-right-compliance-dhhs-vendors).

3.3. Credits and Copyright Ownership

3.3.1. 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."

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

3.3.3. The Department must retain copyright ownership for any and all original materials produced, including, but not limited to reports, protocols, guidelines, brochures, posters, and resource directories.

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

3.4. Operation of Facilities: Compliance with Laws and Regulations

3.4.1. 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 orde

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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.

4. Records

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

4.1.1. 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.

4.1.2. 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.

4.2. 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.

4.3. If, upon further review, the Department must disallow any expenses claimed by the Contractor as costs hereunder, the Department retains the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

Payment Terms

1. This Agreement is funded by:
   1.1. 73% Federal funds, TEMPORARY ASSISTANCE FOR NEEDY FAMILIES, as awarded on choose a date, December 16, 2026 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.558, FAIN 2601NHTANF.
   1.2. 16% Federal funds SOCIAL SERVICES BLOCK GRANT, as awarded on choose a date, October 1, 2023 by the DHHS ADMINISTRATION FOR CHILDREN AND FAMILIES, ALN 93.667, FAIN 2501NHSOSR.
   1.3. 11% General funds.
2. For the purposes of this Agreement the Department has identified:
   2.1. The Contractor as a Subrecipient, based on criteria specified in 2 CFR §200.331.
   2.2. The Agreement as NON-R&D, in accordance with 2 CFR §200.332.
   2.3. The Indirect Cost Rate for this Agreement in the attached Budget Sheet(s).
3. Payment shall be on a cost reimbursement basis for actual allowable expenditures incurred under this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1, Costs through Exhibits C-3.
4. The Contractor shall submit an invoice 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:
   4.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.
   4.2. Is submitted in a format as provided by or otherwise acceptable to the Department.
   4.3. Identifies and requests payment in accordance with Section 3 above.
   4.4. Includes supporting documentation with each invoice, including, but not limited to, proof of expenditures, receipts for purchases, time sheets, and payroll records, as applicable.
   4.5. Is completed, dated and returned to the Department to initiate payment.
   4.6. Is assigned an electronic signature and is emailed to BFAinvoices@dhhs.nh.gov or mailed to:

   Financial Manager
   Department of Health and Human Services

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

129 Pleasant Street
Concord, NH 03301

5. The Department shall make payments to the Contractor within thirty (30) calendar days of receipt of each invoice and any required supporting documentation, subsequent to approval of the submitted invoice.

6. The final invoice and any required supporting documentation shall be due to the Department no later than forty (40) calendar days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.

7. Notwithstanding Paragraph 18 of the General Provisions Form P-37, changes limited to adjusting direct and indirect cost 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.

8. If applicable, the Contractor must notify the Department of any revisions, updates, or extensions to the Contractor's federal negotiated indirect cost rate agreement (NICRA) by submitting a copy of the revised NICRA to the Department within five (5) business days of the Contractor's receipt of the NICRA from the cognizant federal agency.

9. Audits

9.1. The Contractor must email an annual audit to dhhs.act@dhhs.nh.gov if any of the following conditions exist:

9.1.1. Condition A - The Contractor is subject to a Single Audit pursuant to 2 CFR 200.501 Audit Requirements.

9.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b.

9.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

9.2. If Condition A exists, the Contractor must 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.

9.2.1. The Contractor must submit a copy of any Single Audit findings and any associated corrective action plans. The Contractor

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

must submit quarterly progress reports on the status of implementation of the corrective action plan.

9.3. If Condition B or Condition C exists, the Contractor must submit an annual financial audit performed by an independent CPA within 120 days after the close of the Contractor's fiscal year.

9.4. The Contractor, regardless of the funding source and/or whether Conditions A, B, or C exist, may be required to submit annual financial audits performed by an independent CPA upon request by the Department.

9.5. 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 must 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, within sixty (60) days.

10. If applicable, the Contractor must request disposition instructions from the Department for any equipment, based on 2 CFR 200.313, purchased using funds provided under this Agreement.

Docusign Envelope ID: AB8EC91F-AD03-83E2-809B-6D8FF6EB3C29

Exhibit C-1 Budget

New Hampshire Department of Health and Human Services			
Contractor Name:	*Waypoint (Southern)*		
Budget Request for:	*Comprehensive Family Support (CFS) - RFP-2027-DPH-05-COMPR*		
Budget Period:	*07/01/2026 - 6/30/2029*		
Indirect Cost Rate (if applicable)	16.50%		
Line Item	**Program Cost - Funded by DHHS - SFY 27**	**Program Cost - Funded by DHHS - SFY 28**	**Program Cost - Funded by DHHS - SFY 29**
1. Salary & Wages	$234,229	$241,255	$248,493
2. Fringe Benefits	$77,783	$83,347	$89,402
3. Consultants	$6,250	$5,000	$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.	$0	$0	$0
5.(a) Supplies - Educational	$0	$0	$0
5.(b) Supplies - Lab	$0	$0	$0
5.(c) Supplies - Pharmacy	$0	$0	$0
5.(d) Supplies - Medical	$0	$0	$0
5.(e) Supplies - Office	$795	$815	$888
6. Travel	$6,500	$6,500	$6,500
7. Software	$0	$0	$0
8. (a) Other - Marketing/Communications	$2,500	$150	$150
8. (b) Other - Education and Training	$2,500	$1,750	$1,000
8. (c) Other - Other (specify below)	$0	$0	$0
Family Check Up/Online Training Portal (per staff)	$1,680	$750	$750
0	$0	$0	$0
Other - Occupancy	$14,450	$14,450	$14,450
Other - Communication Costs (Phone, Internet, Postage)	$3,735	$3,735	$3,735
Other - Org Dues	$250	$250	$250
Other - Insurance	$2,000	$2,000	$2,000
Other - Concrete Supports	$2,500	$500	$500
9. Subrecipient Contracts	$10,000	$10,000	$5,000
Total Direct Costs	$365,172	$370,502	$378,118
Total Indirect Costs	$60,253	$61,133	$62,389
Subtotals	$425,425	$431,635	$440,507
		TOTAL	**$ 1,297,567**

Initial

Contractor Initials: BAT

Date: 5/12/2026

Docusign Envelope ID: AB8EC91F-AD03-83E2-809B-6D8FF6EB3C29

New Hampshire Department of Health and Human Services			
Contractor Name:	*Waypoint (Concord)*		
Budget Request for:	*Comprehensive Family Support (CFS) - RFP-2027-DPH-05-COMPR*		
Budget Period:	*07/01/2026 - 6/30/2029*		
Indirect Cost Rate (if applicable)	16.50%		
Line Item	**Program Cost - Funded by DHHS - SFY 27**	**Program Cost - Funded by DHHS - SFY 28**	**Program Cost - Funded by DHHS - SFY 29**
1. Salary & Wages	$233,393	$240,395	$247,607
2. Fringe Benefits	$74,368	$79,597	$85,286
3. Consultants	$8,000	$5,650	$4,050
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0	$0	$0
5.(a) Supplies - Educational	$0	$0	$0
5.(b) Supplies - Lab	$0	$0	$0
5.(c) Supplies - Pharmacy	$0	$0	$0
5.(d) Supplies - Medical	$0	$0	$0
5.(e) Supplies - Office	$962	$936	$493
6. Travel	$10,250	$10,250	$10,250
7. Software	$0	$0	$0
8. (a) Other - Marketing/Communications	$2,500	$150	$150
8. (b) Other - Education and Training	$3,000	$3,000	$1,000
8. (c) Other - Other (specify below)	$0	$0	$0
Family Check Up/Online Training Portal (per staff)	$1,680	$750	$750
0	$0	$0	$0
Other - Occupancy	$20,500	$20,500	$20,500
Other - Communication Costs (Phone, Internet, Postage)	$4,325	$4,325	$4,325
Other - Org Dues	$250	$250	$250
Other - Insurance	$2,580	$2,580	$2,580
Other - Concrete Supports	$3,000	$1,750	$500
9. Subrecipient Contracts	$0	$0	$0
Total Direct Costs	$364,808	$370,133	$377,741
Total Indirect Costs	$60,193	$61,072	$62,327
Subtotals	$425,001	$431,205	$440,068
		TOTAL	**$1,296,274**

Initial

Contractor Initials: BLT

Date: 5/12/2026

Docusign Envelope ID: AB8EC91F-AD03-83E2-809B-6D8FF6EB3C29

Exhibit C-3 Budget

New Hampshire Department of Health and Human Services			
Contractor Name:	*Waypoint (Manchester)*		
Budget Request for:	*Comprehensive Family Support (CFS) - RFP-2027-DPH-05-COMPR*		
Budget Period:	*07/01/2026 - 6/30/2029*		
Indirect Cost Rate (if applicable)	16.50%		
Line Item	**Program Cost - Funded by DHHS - SFY 27**	**Program Cost - Funded by DHHS - SFY 28**	**Program Cost - Funded by DHHS - SFY 29**
1. Salary & Wages	$211,283	$217,622	$224,151
2. Fringe Benefits	$74,391	$79,646	$85,371
3. Consultants	$3,500	$2,750	$2,650
4. Equipment Indirect cost rate cannot be applied to equipment costs per 2 CFR 200.1 and Appendix IV to 2 CFR 200.	$0	$0	$0
5.(a) Supplies - Educational	$0	$0	$0
5.(b) Supplies - Lab	$0	$0	$0
5.(c) Supplies - Pharmacy	$0	$0	$0
5.(d) Supplies - Medical	$0	$0	$0
5.(e) Supplies - Office	$624	$726	$737
6. Travel	$4,500	$4,500	$4,500
7. Software	$0	$0	$0
8. (a) Other - Marketing/Communications	$150	$150	$150
8. (b) Other - Education and Training	$1,500	$1,500	$1,500
8. (c) Other - Other (specify below)	$0	$0	$0
Family Check Up/Online Training Portal (per staff)	$1,680	$750	$750
0	$0	$0	$0
Other - Occupancy	$17,500	$17,500	$17,500
Other - Communication Costs (Phone, Internet, Postage)	$4,500	$4,500	$4,500
Other - Org Dues	$250	$250	$250
Other - Insurance	$3,250	$3,250	$3,250
Other - Concrete Supports	$500	$500	$500
9. Subrecipient Contracts	$20,000	$15,000	$10,000
Total Direct Costs	$343,628	$348,644	$355,809
Total Indirect Costs	$56,698	$57,526	$58,709
Subtotals	$400,326	$406,170	$414,518
		TOTAL	**$1,221,014**

Initial

Contractor Initials: BAT

Date: 5/12/2026

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

SECTION A: CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Contractor 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 CONTRACTORS 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 contractors (and by inference, sub- contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a contractor (and by inference, 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 Agreement 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 Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, 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 Contractor 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 Contractor'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 Contractor'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 Agreement 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 Agreement, 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;

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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 contract officer on whose contract activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected Agreement;

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 Contractor may insert in the space provided below the site(s) for the performance of work done in connection with the specific Agreement.

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.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

SECTION B: CERTIFICATION REGARDING LOBBYING

The Contractor 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 Byrd Anti-Lobbying Amendment (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, loan, or cooperative agreement (and by specific mention 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, loan, or cooperative agreement (and by specific mention sub- contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, see https://omb.report/icr/201009-0348-022/doc/20388401

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, 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.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

SECTION C: 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 12689 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 Agreement, 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 Agreement 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 https://www.govinfo.gov/app/details/CFR-2004-title45-vol1/CFR-2004-title45-vol1-part76/context.

6. The prospective primary participant agrees by submitting this Agreement 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) https://www.ecfr.gov/current/title-22/chapter-V/part-513.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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 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 (Agreement) 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 (Agreement), 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 (Agreement).

14. The prospective lower tier participant further agrees by submitting this proposal (Agreement) 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.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

SECTION D: CERTIFICATION OF COMPLIANCE WITH FEDERAL REQUIREMENTS

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:

The Contractor will comply, and will require any subcontractors to comply, with any applicable federal requirements, which may include but are not limited to:

1. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR 200).
2. 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;
3. 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;
4. 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);
5. 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;
6. 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;
7. 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;
8. 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;
9. 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;
10. 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.
11. The Clean Air Act (42 U.S.C. 7401-7671q.) which seeks to protect human health and the environment from emissions that pollute ambient, or outdoor, air.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

12. The Clean Water Act (33 U.S.C. 1251-1387) which establishes the basic structure for regulating discharges of pollutants into the waters of the United States and regulating quality standards for surface waters.
13. Civilian Agency Acquisition Council and the Defense Acquisition Regulations Council (Councils) (41 U.S.C. 1908) which establishes administrative, contractual, or legal remedies in instances where contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate.
14. Contract Work Hours and Safety Standards Act (40 U.S.C. 3701–3708) which establishes that all contracts awarded by the non-Federal entity in excess of $100,000 that involve the employment of mechanics or laborers must include a provision for compliance with 40 U.S.C. 3702 and 3704, as supplemented by Department of Labor regulations (29 CFR Part 5).
15. Rights to Inventions Made Under a Contract or Agreement 37 CFR § 401.2 (a) which establishes the recipient or subrecipient wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that “funding agreement,” the recipient or subrecipient must comply with the requirements of 37 CFR Part 401, “Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements,” and any implementing regulations issued by the awarding agency.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the Agreement. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of Agreements, or government wide suspension or debarment.

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 Agreement, the Contractor agrees to comply with the provisions indicated above.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

SECTION E: 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 Agreement, 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.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

SECTION F: 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 $30,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $30,000 or more. If the initial award is below $30,000 but subsequent grant modifications result in a total award equal to or over $30,000, 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 sub award 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 Entity Identifier (SAM UEI; DUNS#)
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.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

FORM A

As the Grantee 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: _____

Contractor Name: Waypoint

5/7/2026
Date:

Signed by: Borja Alvarez de Toledo 2EBDBA264D9F4B0...
Name: Borja Alvarez de Toledo
Title: president and CEO

New Hampshire Department of Health and Human Services

Exhibit E

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

Contractor Initials Initial BAT

Date 5/7/2026

or misplacement of hardcopy documents, and misrouting of physical or electronic 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.

Contractor Initials Initial BAT

Date 5/7/2026

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.

Contractor Initials Initial BAT

Date 5/7/2026

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, antihacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a whole, must have aggressive intrusion-detection and firewall protection.

Contractor Initials Initial BAT

Date 5/7/2026

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 Initial BAT

Date 5/7/2026

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

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.

Contractor Initials Initial BAT

Date 5/7/2026

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
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

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement (Form P-37) ("Agreement"), and any of its agents who receive use or have access to protected health information (PHI), as defined herein, shall be referred to as the "Business Associate." The State of New Hampshire, Department of Health and Human Services, "Department" shall be referred to as the "Covered Entity," The Contractor and the Department are collectively referred to as "the parties."

The parties agree, to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191, the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162, and 164 (HIPAA), provisions of the HITECH Act, Title XIII, Subtitle D, Parts 1&2 of the American Recovery and Reinvestment Act of 2009, 42 USC 17934, et sec., applicable to business associates, and as applicable, to be bound by the provisions of the Confidentiality of Substance Use Disorder Patient Records, 42 USC s. 290 dd-2, 42 CFR Part 2, (Part 2), as any of these laws and regulations may be amended from time to time.

(1) Definitions

a. The following terms shall have the same meaning as defined in HIPAA, the HITECH Act, and Part 2, as they may be amended from time to time:

"Breach," "Designated Record Set," "Data Aggregation," Designated Record Set," "Health Care Operations," "HITECH Act," "Individual," "Privacy Rule," "Required by law," "Security Rule," and "Secretary."

b. Business Associate Agreement, (BAA) means the Business Associate Agreement that includes privacy and confidentiality requirements of the Business Associate working with PHI and as applicable, Part 2 record(s) on behalf of the Covered Entity under the Agreement.

c. "Constructively Identifiable," means there is a reasonable basis to believe that the information could be used, alone or in combination with other reasonably available information, by an anticipated recipient to identify an individual who is a subject of the information.

d. "Protected Health Information" ("PHI") as used in the Agreement and the BAA, means protected health information defined in HIPAA 45 CFR 160.103, limited to the information created, received, or used by Business Associate from or on behalf of Covered Entity, and includes any Part 2 records, if applicable, as defined below.

e. "Part 2 record" means any patient "Record," relating to a "Patient," and "Patient Identifying Information," as defined in 42 CFR Part 2.11.

f. "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.

(2) Business Associate Use and Disclosure of Protected Health Information

a. Business Associate shall not use, disclose, maintain, store, or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under the Agreement. Further, Business Associate, including bu

Initial

Contractor Initials BAT

Date 5/7/2026

limited to all its directors, officers, employees, and agents, shall protect any PHI as required by HIPPA and 42 CFR Part 2, and not use, disclose, maintain, store, or transmit PHI in any manner that would constitute a violation of HIPAA or 42 CFR Part 2.

b. Business Associate may use or disclose PHI, as applicable:

I. For the proper management and administration of the Business Associate;

II. As required by law, according to the terms set forth in paragraph c. and d. below;

III. According to the HIPAA minimum necessary standard;

IV. For data aggregation purposes for the health care operations of the Covered Entity; and

V. Data that is de-identified or aggregated and remains constructively identifiable may not be used for any purpose outside the performance of the Agreement.

c. To the extent Business Associate is permitted under the BAA or the Agreement to disclose PHI to any third party or subcontractor prior to making any disclosure, the Business Associate must obtain, a business associate agreement or other agreement with the third party or subcontractor, that complies with HIPAA and ensures that all requirements and restrictions placed on the Business Associate as part of this BAA with the Covered Entity, are included in those business associate agreements with the third party or subcontractor.

d. The Business Associate shall not, disclose any PHI in response to a request or demand for disclosure, such as by a subpoena or court order, on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity can determine how to best protect the PHI. If Covered Entity objects to the disclosure, the Business Associate agrees to refrain from disclosing the PHI and shall cooperate with the Covered Entity in any effort the Covered Entity undertakes to contest the request for disclosure, subpoena, or other legal process. If applicable relating to Part 2 records, the Business Associate shall resist any efforts to access part 2 records in any judicial proceeding.

(3) Obligations and Activities of Business Associate

a. Business Associate shall implement appropriate safeguards to prevent unauthorized use or disclosure of all PHI in accordance with HIPAA Privacy Rule and Security Rule with regard to electronic PHI, and Part 2, as applicable.

b. The Business Associate shall immediately notify the Covered Entity's Privacy Officer at the following email address, DHHSPrivacyOfficer@dhhs.nh.gov after the Business Associate has determined that any use or disclosure not provided for by its contract, including any known or suspected privacy or security incident or breach has occurred potentially exposing or compromising the PHI. This includes inadvertent or accidental uses or disclosures or breaches of unsecured protected health information.

c. In the event of a breach, the Business Associate shall comply with the terms of this Business Associate Agreement, all applicable state and federal laws and regulations and any additional requirements of the Agreement.

d. The Business Associate shall perform a risk assessment, based on the information available at the time it becomes aware of any known or suspected priva

Initial

Contractor Initials BAT

Date 5/7/2026

security breach as described above and communicate the risk assessment to the Covered Entity. The risk assessment shall include, but not be limited to:

I. The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;

II. The unauthorized person who accessed, used, disclosed, or received the protected health information;

III. Whether the protected health information was actually acquired or viewed; and

IV. How the risk of loss of confidentiality to the protected health information has been mitigated.

e. The Business Associate shall complete a risk assessment report at the conclusion of its incident or breach investigation and provide the findings in a written report to the Covered Entity as soon as practicable after the conclusion of the Business Associate's investigation.

f. 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 US Secretary of Health and Human Services for purposes of determining the Business Associate's and the Covered Entity's compliance with HIPAA and the Privacy and Security Rule, and Part 2, if applicable.

g. Business Associate shall require all of its business associates that receive, use or have access to PHI under the BAA to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein.

h. Within ten (10) 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 BAA and the Agreement.

i. 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.

j. 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.

k. Business Associate shall document any disclosures of PHI and information related to any 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.

l. 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 P

Initial
Contractor Initials BAT

5/7/2026
Date

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

accordance with 45 CFR Section 164.528.

m. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within five (5) 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.

n. Within thirty (30) 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-ups of such PHI in any form or platform.

VI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, or if retention is governed by state or federal law, 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 as long as the Business 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 post a current version of the Notice of the Privacy Practices on the Covered Entity's website:

https://www.dhhs.nh.gov/oos/hipaa/publications.htm in accordance with 45 CFR Section 164.520.

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 BAA, 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 of Agreement for Cause

a. In addition to the General Provisions (P-37) of the Agreement, the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a material breach by Business Associate of the Business Associate Agreement. 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.

(6) Miscellaneous

a. Definitions, Laws, and Regulatory References. All laws and regulations

Initial
BAT
Contractor Initials

5/7/2026
Date

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

herein, shall refer to those laws and regulations as amended from time to time. A reference in the Agreement, as amended to include this Business Associate Agreement, to a Section in HIPAA or 42 Part 2, means the Section as in effect or as amended.

b. **Change in law** - Covered Entity and Business Associate agree to take such action as is necessary from time to time for the Covered Entity and/or Business Associate to comply with the changes in the requirements of HIPAA, 42 CFR Part 2 other 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 BAA and the Agreement shall be resolved to permit Covered Entity and the Business Associate to comply with HIPAA and 42 CFR Part 2.

e. **Segregation** - If any term or condition of this BAA 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 BAA are declared severable.

f. **Survival** - Provisions in this BAA regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the BAA in section (3) g. and (3) n.l., and the defense and indemnification provisions of the General Provisions (P-37) of the Agreement, shall survive the termination of the BAA.

IN WITNESS WHEREOF, the parties hereto have duly executed this Business Associate Agreement.

Department of Health and Human Services	Waypoint
The State	Name of the Contractor
DocuSigned by: Iain Watt D778BB63F9704C7...	Signed by: Borja Alvarez de Toledo 2EBDBA264D9F4B0...
Signature of Authorized Representative	Signature of Authorized Representative
Iain Watt	Borja Alvarez de Toledo
Name of Authorized Representative	Name of Authorized Representative
Director - DPH	president and CEO
Title of Authorized Representative	Title of Authorized Representative
5/7/2026	5/7/2026
Date	Date

Initial
Contractor Initials BAT

Date 5/7/2026

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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: **0007910901**

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 17th day of April A.D. 2026.

David M. Scanlan
Secretary of State

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

WAYPOINT
Help Along the Way

CHILD AND FAMILY SERVICES

CERTIFICATE OF VOTE

I, JEN STEBBINS THOMAS, 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.

4-19-2026
Date

Jen Stebbins Thomas

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 12/30/2025

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: Stephanie Peffer	
Cross Insurance-Manchester 1100 Elm Street Manchester NH 03101	PHONE (A/C, No, Ext): (603) 669-3218	FAX (A/C, No): (603) 645-4331
	E-MAIL ADDRESS: manch.certs@crossagency.com	

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 :	

INSURED: Waypoint, Po Box 448, Manchester NH 03105

COVERAGES **CERTIFICATE NUMBER:** 25-26 All 26-27 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	07/01/2025	07/01/2026	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	07/01/2025	07/01/2026	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	07/01/2025	07/01/2026	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		P01710HCHS2026 (3a.) NH	01/01/2026	01/01/2027	[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

NH Department of Health & Human Services Bureau of Contracts & Procurement
129 Pleasant Street
Concord NH 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

© 1988-2015 ACORD CORPORATION. All rights reserved.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NONPROFIT COVER SHEET

A. Entity Name: The Waypoint Endowment

B. Entity's Contact Information:

For Records Requests (e.g., resumes of key personnel; audited financial statements):

Name / Phone / Email: Borja Alvarez de Toledo / 603-518-4000 alvarezdetoledob@waypointnh.org

Person responsible for Accuracy and Completeness of information provided:
Name: Borja Alvarez de Toledo Title: CEO & President
Signature:

C. List Board of Directors and Affiliations

Name (Identify any additional role(s) in Parentheses) E.g., John Doe (President)	Affiliations
Janet Ackerman	Retired VP, Commercial Lending TD Bank
Melissa Biron (Treasurer)	Principal Nathan Wechsler & Company
Megan Carrier	Sheehan Phinney Bass & Green, PA
William Conrad	Retired
Robert Dapice	Executive Director/CEO NH Housing
Courtney Fifield	CEO, Members First Credit Union of NH
Emily Hammond	HR Executive
Mark Lubelczyk	President NH & VT, Citizens Bank
Marilyn Mahoney	Retired Attorney
Arnaldo Negron	Senior Electrical Engineer, Eversource
Zachery Palmer	Commercial and Small Business Leader
Terri Pastori	Managing Attorney, Pastori/Krans PLLC
Mark Rouvalis	Director, McLane Middleton
Timonthy Soucy	Retired
Lisa Kennedy Sheldon	Global Nurse Consultant, Dogcove Consulting
Jennifer Stebbins Thomas (Chair)	Partner,XSS/Tidemark/PROCON

D. List Key Personnel (Resumes must be available upon request to the person(s) listed in section B or may be attached**):**

Name	Role	Annual Salary	Amount Paid From This Contract
Borja Alvarez de Toledo	President/CEO	$200,000	$0
Erin George-Kelly	Chief Operating Officer	$127,500	$0
Kristen Campbell	Vice President of Programs	$119,995	$0

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

DISCLOSURE OF LEGAL ACTIVITIES INVOLVING THE STATE OF NEW HAMPSHIRE OR ANOTHER GOVERNMENT ENTITY

E. Check one of the following:

[X] The entity is **not currently or has not been** party to any legal proceeding involving the State of New Hampshire (or any agency or subdivision thereof) or any other state/federal government entity before any adjudicative body in any jurisdiction **OR**

[ ] The entity is or has been party to one or more legal proceedings as set forth above. Identify the jurisdiction, court or other adjudicative body, case number, and briefly describe the nature of the proceeding (Attached extra sheet if necessary).

_____

_____

_____

CHARITABLE TRUSTS UNIT COMPLIANCE CERTIFICATION

F. Check one of the following:

[X] is registered and in good standing with the New Hampshire Department of Justice Charitable Trusts Unit (** see note below) **or** has submitted a complete application for registration to the Charitable Trusts Unit and is awaiting a registration determination **OR**

[ ] is not required to register with the Charitable Trusts Unit because it is neither tax-exempt under section 501(c)(3) of the Internal Revenue Code nor engages in charitable solicitations in the State of New Hampshire **OR**

[ ] is exempt from registration with the Charitable Trusts Unit because it is a federal or state government, agency, or subdivision or is a religious organization, an integrated auxiliary of a religious organization, or is a convention or association of churches.

** Note: Attached screen shot from the DOJ Registered Charities List found at:

https://mm.nh.gov/files/uploads/doj/remote-docs/registered-charities.pdf

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

FINANCIAL DISCLOSURES

G. Check one the following:

[X] The organization hired an outside firm to audit its financial statements or to prepare GAAP-compliant financial statements for its most recently completed fiscal year. If so, please ensure that the financial statements and audit results are available to be requested from the contact listed on Page 1 (audited financials may be attached) **OR**

[ ] The above does not apply, but the organization filed an IRS Form 990 or Form 990-EZ for its most recently completed fiscal year. Please attach that IRS Form 990 or Form 990-EZ to the submission. (Form 990 Schedule B is not required) **OR**

[ ] ***If neither of the above apply***, complete the Income Statement and Balance Sheet below with the following basic financial information from the organization's most recently completed fiscal year:

1. INCOME STATEMENT (Unaudited 2025)

Revenue		Expenses	
Grants	$9,155,045	*Compensation of officers, directors, and key personnel*	$14,069,007
Donations	$2,664,664		
Program Services Revenue	$9,736,229	*Other salaries & wages*	$
Interest & Dividends	$101,793	*Payroll taxes & employee benefits*	$2,849,896
All other Revenue	$1,313,005	*Occupancy, rent, utilities, and insurance*	$1,405,819
Total Revenue	$22,970,736	*Printing, publications, postage, office supplies, and IT*	$539,159
		All other expenses	$3,771,261
		Total Expenses	$22,635,142

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

2. BALANCE SHEET (Unaudited 2025)

Assets	
Cash & Equivalents	$3,267,101
Investments	$26,285,823
Real Estate (less any depreciation)	$
Other Property & Equipment (less any depreciation)	$7,952,775
Pledges, grants, accounts receivable	$2,260,637
All other assets	$3,644,217
Total Assets	$43,410,553

Liabilities	
Accounts Payable	$302,291
Loans Payable	$
All other liabilities	$43,108,262
Total Liabilities	$43,410,553

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

Reg. No.	Charity Name	Address	City	State	Zip	Status	Report Due
13674	Water Missions International	1150 Molly Greene Way, Building 1605North Charlesto	North Charleston	SC	29405	G	8/15/2026
18186	Water Project, Inc.	17 Depot Street, 2nd Floor	Concord	NH	03301	G	11/15/2026
15714	Water.org, Inc.	117 West 20th Street, Suite 203	Kansas City	MO	64108	G	8/15/2026
30545	Water4, Inc.	2405 NW 10th Street	Oklahoma City	OK	73107	G	5/15/2026
16053	WaterAid America, Inc.	233 Broadway, Room 2705	New York	NY	10279	G	2/15/2026
17152	Waterfront Rescue Mission, Inc.	350 West Herman StreetPensacola, FL 32505	Pensacola	FL	32505	G	5/15/2026
12741	WaterStone Support Foundation, Inc.	10807 New Allegiance Drive Suite 240	Colorado Springs	CO	80921	G	8/15/2026
11178	Waterville Valley Adaptive Sports	PO Box 505	Waterville Valley	NH	03215	G	5/15/2026
19016	Waterville Valley Athletic & Improvement Association	PO Box 412	Waterville Valley	NH	03215	G	5/15/2026
4117	Waterville Valley Black & Blue Trail Smashers/Snow Sports Education	PO Box 277	Waterville Valley	NH	03215	G	11/14/2026
5319	Waterville Valley Foundation	PO Box 464	Waterville Valley	NH	03215	G	5/15/2026
19642	Watoto Child Care Ministry	13617 North Florida Avenue	Tampa	FL	33613	G	11/15/2025
33817	Watts of Love	900 Warren Avenue	Downers Grove	IL	60515	G	11/14/2026
31219	Wawa Foundation, Inc.	260 West Baltimore Pike	Wawa	PA	19063	G	5/15/2026
3869	Way Home, Inc.	555 Auburn Street	Manchester	NH	03103	G	11/14/2026
32668	Way Station	PO Box 1888	North Conway	NH	03860	G	5/15/2027
34986	Way to Rise	1825 K St NW Ste 315	Washington	DC	20036	G	11/15/2025
34983	Way to Win Action Fund, Inc.	1825 K Street NW, Suite 315Washington, DC 20036	Washington	DC	20036	G	5/15/2026
19311	Waynesburg University	51 West College Street	Waynesburg	PA	15370	G	11/14/2026
2242	Waypoint	464 Chestnut Street	Manchester	NH	03105	G	5/15/2026
34889	Waypoint Adventure, Inc.	453 Concord Avenue	Lexington	MA	02421	G	11/15/2025
33693	We Achieve Education Foundation, Inc.	5001 East Commerenter Drive, Suite 265	Bakersfield	CA	93309	X	5/15/2024
6136	We Are Animal Guardians, Inc. (W.A.G.)	PO Box 3054	Peterborough	NH	03458	G	5/15/2026
14224	We Care Charity, Inc.	16 Deerfield Street	Salem	NH	03079	G	5/15/2026
30766	We Care Food Pantry	39 South Main Street #182	Rochester	NH	03867-2755	G	5/15/2026
31412	WE Charity	1959 Palomar Oaks Way, Suite 300	Carlsbad	CA	92011	X	7/15/2024
31578	We Heart West	157 Amory St.Manchester, NH 03102	Manchester	NH	03102	G	5/15/2026
35150	We Must Protect, Inc.	911312 Keoneula BlvdEwa Beach, HI 96706	Ewa Beach	HI	96706	G	10/15/2026
31524	We R H.O.P.E. Inc	27 Weeks Drive	Orford	NH	03777	X	5/15/2021
15692	We Raise Foundation	One Pierce Place, Suite 250E	Itasca	IL	60143	G	5/15/2026
33751	We Ride So They Fly	PO Box 111	Londonderry	NH	03053	G	5/15/2026
32084	We the Best Foundation, Inc.	3000 Marcus Avenue, Suite 1W5Lake Success, NY 1104	Lake Success	NY	11042	X	5/15/2025
33537	We the Protesters, Inc.	30 E 125th StNew York, NY 10035	New York	NY	10035	G	11/15/2026

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

WAYPOINT
Help Along the Way

Waypoint Mission Statement

To empower individuals of all ages through an array of human services and advocacy.

Headquarters: 464 Chestnut Street, P.O. Box 448, Manchester, NH 03105
Toll-free: 1 (800) 640-6486 | Office: (603) 518-4000 | Fax: (603) 668-6260 | waypointnh.org

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

WAYPOINT

CONSOLIDATED FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION

FOR THE YEAR ENDED DECEMBER 31, 2024

(WITH SUMMARIZED FINANCIAL INFORMATION FOR THE YEAR ENDED DECEMBER 31, 2023)

WAYPOINT

Help Along the Way

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

WAYPOINT

CONTENTS

Independent Auditors' Report 1-3

Financial Statements

Consolidated Statement of Financial Position 4
Consolidated Statement of Activities 5
Consolidated Statement of Functional Expenses 6
Consolidated Statement of Cash Flows 7

Notes to Consolidated Financial Statements 8-36

Supplementary Information

Consolidated Schedule of Operating Expenses - 2024 37
Consolidated Schedule of Operating Expenses - 2023 38

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

CBIZ CPAs P.C.

9 Executive Park Drive
Suite 100
Merrimack, NH 03054

P: 603.882.1111

Independent Auditors' Report

To the Board of Trustees
Waypoint
Manchester, NH

Report on the Audit of Financial Statements

Opinion

We have audited the consolidated financial statements of Waypoint (the "Organization"), which comprise the consolidated statement of financial position as of December 31, 2024, 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 (collectively referred to as the "financial statements").

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Organization as of December 31, 2024, 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"). 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 the Organization 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 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 the Organization's ability to continue as a going concern for one year after the date that the consolidated financial statements are available to be issued.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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 GAAS 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 GAAS, 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 the Organization'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 the Organization'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 financial statements as a whole. The accompanying consolidated schedule of operating expenses for 2024 is presented for purposes of additional analysis and are 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 2024 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 GAAS. In our opinion, the accompanying supplementary information is fairly stated in all material respects in relation to the consolidated financial statements as a whole. The 2023 consolidated schedule of operating expenses on page 38 was subjected to the auditing procedures applied in the 2023 audit of the basic financial statements by Marcum LLP, whose report dated May 20, 2024, stated that the information was fairly stated in all material respects in relation to the 2023 financial statements as a whole.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

Other Matter

Report on Summarized Comparative Information

The financial statements of Waypoint as of and for the year ended December 31, 2023, were audited by Marcum, LLP, whose report dated May 20, 2024, 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, 2023 is consistent, in all material respects, with the audited financial statements from which it has been derived.

CBIZ CPAs P.C.

Merrimack, NH
June 3, 2025

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

WAYPOINT

CONSOLIDATED STATEMENT OF FINANCIAL POSITION

DECEMBER 31, 2024

(*with summarized comparative totals as of December 31, 2023*)

	2024			
	Without Donor Restrictions	With Donor Restrictions	2024 Total	2023 Total
Assets				
Current Assets				
Cash and cash equivalents	$ 5,381,870	$ --	$ 5,381,870	$ 5,649,783
Restricted cash	71,739	--	71,739	70,644
Accounts receivable, net of allowance for credit losses of $6,143 and $11,667	712,166	--	712,166	1,011,771
Grants receivable	1,367,610	--	1,367,610	1,649,265
Contributions receivable	238,345	--	238,345	218,258
Prepaid expenses	299,731	--	299,731	198,073
Assets held for sale	504,455	--	504,455	565,398
Total Current Assets	8,575,916	--	8,575,916	9,363,192
Noncurrent Assets				
Investments	18,312,112	4,819,625	23,131,737	21,394,755
Beneficial interest held in trusts	--	2,275,542	2,275,542	2,165,143
Property and equipment, net	9,078,633	--	9,078,633	9,110,157
Operating right-of-use assets, net	747,017	--	747,017	293,239
Total Noncurrent Assets	28,137,762	7,095,167	35,232,929	32,963,294
Total Assets	$ 36,713,678	$ 7,095,167	$ 43,808,845	$ 42,326,486
Liabilities and Net Assets				
Current Liabilities				
Accounts payable	$ 334,063	$ --	$ 334,063	$ 185,519
Accrued payroll and related liabilities	781,496	--	781,496	713,461
Other liabilities	54,799	--	54,799	58,649
Current portion of bonds payable	195,000	--	195,000	180,000
Current portion of operating lease liabilities	203,943	--	203,943	172,933
Refundable advances	257,818	--	257,818	316,902
Total Current Liabilities	1,827,119	--	1,827,119	1,627,464
Noncurrent Liabilities				
Bonds payable, net of current portion	2,976,833	--	2,976,833	3,175,167
Operating lease liabilities, net of current portion	552,821	--	552,821	124,897
Deferred loans - NHHFA	1,250,000	--	1,250,000	1,250,000
Interest rate swap agreements	--	--	--	380,838
Total Noncurrent Liabilities	4,779,654	--	4,779,654	4,930,902
Total Liabilities	6,606,773	--	6,606,773	6,558,366
Net Assets				
Without donor restrictions	30,106,905	--	30,106,905	29,174,355
With donor restrictions	--	7,095,167	7,095,167	6,593,765
Total Net Assets	30,106,905	7,095,167	37,202,072	35,768,120
Total Liabilities and Net Assets	$ 36,713,678	$ 7,095,167	$ 43,808,845	$ 42,326,486

The accompanying notes are an integral part of these consolidated financial statements.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

WAYPOINT

CONSOLIDATED STATEMENT OF ACTIVITIES

FOR THE YEAR ENDED DECEMBER 31, 2024

(*with summarized comparative totals for the year ended December 31, 2023*)

	2024			
	Without Donor Restrictions	With Donor Restrictions	2024 Total	2023 Total
Support and Revenue				
Support:				
Government grants	$ 8,770,270	$ 205,645	$ 8,975,915	$ 9,612,403
Contributions	1,069,405	1,973,913	3,043,318	3,719,281
In-kind contributions	75,404	--	75,404	77,736
Special events:				
Gross revenue	18,148	521,844	539,992	438,255
Less cost of direct benefit to donors	(60,204)	--	(60,204)	(120,158)
Net special events revenue	(42,056)	521,844	479,788	318,097
Revenue:				
Service fees	9,302,115	--	9,302,115	8,084,807
Rental income	37,721	--	37,721	15,641
Other income	117,962	--	117,962	119,368
Net Assets Released From Restrictions:				
Program releases	2,526,087	(2,526,087)	--	--
Endowment releases	99,392	(99,392)	--	--
Endowment Transfer to Support Operations	1,099,141	--	1,099,141	868,594
Total Support and Revenue	23,055,441	75,923	23,131,364	22,815,927
Operating Expenses				
Program services	18,704,392	--	18,704,392	17,015,721
Management and general	3,877,199	--	3,877,199	3,382,989
Fundraising	479,736	--	479,736	465,528
Total Operating Expenses	23,061,327	--	23,061,327	20,864,238
Change in Net Assets From Operations	(5,886)	75,923	70,037	1,951,689
Nonoperating Activities				
Investment income, net	1,911,323	315,080	2,226,403	2,994,248
Unrealized gain on interest rate swap	73,538	--	73,538	19,097
Loss on disposal of asset	(151,419)	--	(151,419)	(4,136)
Change in beneficial interest	--	110,399	110,399	144,402
Interest income	204,135	--	204,135	297,174
Endowment transfer to support operations	(1,099,141)	--	(1,099,141)	(868,594)
Employee retention tax credit, net	--	--	--	4,055,864
Total Nonoperating Activities	938,436	425,479	1,363,915	6,638,055
Change in Net Assets	932,550	501,402	1,433,952	8,589,744
Net Assets, Beginning of Year	29,174,355	6,593,765	35,768,120	27,178,376
Net Assets, End of Year	$ 30,106,905	$ 7,095,167	$ 37,202,072	$ 35,768,120

The accompanying notes are an integral part of these consolidated financial statements.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

WAYPOINT

CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 2024

(with summarized comparative totals for the year ended December 31, 2023)

	2024				
	Program Services	Management and General	Fundraising	2024 Total	2023 Total
Personnel expense:					
Salaries and wages	$ 10,858,994	$ 1,922,147	$ 318,381	$ 13,099,522	$ 11,593,682
Employee benefits	1,908,460	347,144	43,529	2,299,133	1,937,861
Retirement plan	175,555	72,309	5,832	253,696	160,453
Payroll taxes and other	1,063,685	152,744	24,364	1,240,793	1,141,997
Subtotal personnel expense	14,006,694	2,494,344	392,106	16,893,144	14,833,993
Professional fees:					
Accounting	2,135	47,450	--	49,585	45,645
Legal	8,519	13,090	--	21,609	77,657
Contracted services	412,274	487,084	33,566	932,924	877,580
Subtotal professional fees	422,928	547,624	33,566	1,004,118	1,000,882
Assistance to individuals	1,477,779	1,230	23,155	1,502,164	1,345,776
Communications	221,698	41,464	6,439	269,601	244,929
Conferences, conventions, meetings, and trainings	143,980	73,470	5,267	222,717	173,278
Depreciation	408,967	142,677	6,087	557,731	574,675
Insurance	142,204	13,322	2,501	158,027	184,107
Interest	275,293	26,742	4,141	306,176	332,161
Membership dues	44,198	14,792	1,840	60,830	45,738
Miscellaneous	56,919	73,875	14,116	144,910	171,170
Occupancy	842,634	66,877	11,364	920,875	910,109
Printing and publications	19,060	33,577	35,680	88,317	122,970
Equipment rental and maintenance	88,170	315,355	1,221	404,746	401,765
Supplies	91,898	8,666	1,603	102,167	164,340
Travel	461,970	23,184	854	486,008	478,503
Total Expenses By Function	18,704,392	3,877,199	539,940	23,121,531	20,984,396
Less expenses included on the Statement of Activities:					
Cost of direct benefits to donors	--	--	(60,204)	(60,204)	(120,158)
Total Expenses Reported on the Statement of Activities	$ 18,704,392	$ 3,877,199	$ 479,736	$ 23,061,327	$ 20,864,238

The accompanying notes are an integral part of these consolidated financial statements.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

WAYPOINT

CONSOLIDATED STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED DECEMBER 31, 2024

(with summarized comparative totals for the year ended December 31, 2023)

	2024	2023
Cash Flows from Operating Activities		
Change in net assets	$ 1,433,952	$ 8,589,744
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	557,731	574,675
Disposals of fixed assets	156,524	36,625
Amortization of operating right-of-use assets	330,219	212,581
Contributions restricted for endowment	(5,604)	(34,963)
Donation of closely held securities	(700,000)	(750,000)
Realized gain on investments	(743,777)	(308,748)
Unrealized (gain) loss on investments	(756,022)	(2,155,130)
Change in beneficial interest in trusts	(110,399)	(144,402)
Change in interest rate swap	(380,838)	(19,097)
Changes in operating assets and liabilities:		
Accounts receivable	299,605	(340,039)
Grants receivable	281,655	(374,385)
Contributions receivable	(20,087)	(88,258)
Prepaid expenses	(101,658)	388,928
Accounts payable	148,544	(60,793)
Accrued payroll and related liabilities	68,035	(178,028)
Other liabilities	(3,850)	(147,238)
Refundable advances	(59,084)	(126,840)
Operating lease liabilities	(325,062)	(209,548)
Net Cash Provided by Operating Activities	69,884	4,865,084
Cash Flows from Investing Activities		
Purchases of investments	(735,716)	(561,345)
Proceeds from sale of investments	1,198,533	949,237
Purchase of fixed assets	(621,789)	(181,713)
Net Cash (Used in) Provided by Investing Activities	(158,972)	206,179
Cash Flows from Financing Activities		
Contributions restricted for endowment	5,604	34,963
Proceeds from line of credit	744,768	5,505,906
Principal payments on line of credit	(744,768)	(5,505,906)
Payment of long-term debt	(183,334)	(175,000)
Net Cash Used in Financing Activities	(177,730)	(140,037)
Net Change in Cash and Cash Equivalents, and Restricted Cash	(266,818)	4,931,226
Cash and Cash Equivalents, and Restricted Cash, Beginning of Year	5,720,427	789,201
Cash and Cash Equivalents, and Restricted Cash, End of Year	$ 5,453,609	$ 5,720,427
Supplemental Disclosure of Cash Flow Information:		
Cash paid during the year for interest	$ 306,176	$ 332,161
As reported in the Consolidated Statement of Financial Position, cash balance consists of:		
Cash and cash equivalents	$ 5,381,870	$ 5,649,783
Restricted cash	71,739	70,644
Total Cash, Cash Equivalents, and Restricted Cash	$ 5,453,609	$ 5,720,427

The accompanying notes are an integral part of these consolidated financial statements.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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 the Organization serves an average of 7,500 individuals, children, and families across New Hampshire. Nearly 90% of its 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. The Organization 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. The Organization operated a childcare center through August 2024 (the Children's Place and Parent Education Center) which provided a unique combination of educational and family support. Young children starting life at a disadvantage received critical services to ensure a good beginning and to optimize their chances for life-long success.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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. The Organization operates the only low-barrier emergency shelter specifically for adults aged 18-24 who are experiencing or are at-risk of homelessness.

HEALTH AND WELLBEING

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 conditions and their families. The Organization 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. The Organization believes all children and families should have equal opportunities to attain their full health potential. The Organization's health care coordination program supports children (birth to age 21) with special health conditions and their families in managing conditions by providing essential tools and resources for effective care.

The Organization 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 the Organization 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").

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

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".

PRIOR-YEAR SUMMARIZED 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, 2023, 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.

ACCOUNTS RECEIVABLE AND CREDIT POLICIES

Accounts receivable consists primarily of noninterest-bearing amounts due for services and programs. At the end of each reporting period, the Organization estimates the current expected credit loss ("CECL"). 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 2024 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.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

ACCOUNTS RECEIVABLE AND CREDIT POLICIES (CONTINUED)

The Organization writes off receivables when there is information that indicates the debtor is facing significant financial difficulty and there is no possibility of recovery. If any recoveries are made from any accounts previously written off, they will be recognized in income or as an offset to credit loss expense in the year of recovery, in accordance with the Organization's accounting policy election. The total amount of write-offs was $-0- and $18,555 for the years ended December 31, 2024 and 2023, respectively.

GRANTS RECEIVABLE

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. Grants receivable are recorded at net realizable value and are generally due and collectible within one year. 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. Contributions receivable are expected to due and collectable within one year.

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 income 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. External investment expenses totaled $53,933 and $48,133 for the years ended December 31, 2024 and 2023, respectively. Investments include equity-based investments in mutual funds and equity securities of public companies, which are carried at fair value based on quoted market prices.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

INVESTMENTS (CONTINUED)

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 Organization is the sole beneficiary of four funds held by the New Hampshire Charitable Foundation ("NHCF"), as well as two separate charitable remainder trusts, and 50% beneficiary of a third charitable remainder trust. 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 $10,000 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 2024 or 2023.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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. In 2024, the Organization terminated the interest rate swap.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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-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-imposed restrictions. The Board has designated, from net assets without donor restrictions, net assets for a Board-designated endowment and an ERTC reserve.

Net Assets With Donor Restrictions

Net assets with donor restrictions are net assets subject to donor-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 or met performance requirements in compliance with specific contract or grant provisions. Amounts received prior to incurring qualifying expenditures or meeting performance requirements are reported as refundable advances in the consolidated statement of financial position.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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 services are recognized when the performance obligation of providing the services are met. The performance obligation of providing program services is simultaneously received and consumed by the participants; therefore, the revenue is recognized when the service occurs. Service fee revenues are comprised of Medicaid, private insurance, and other sources that reflects the consideration to which the Organization expects to be entitled in exchange for providing client services. Service fees are billed monthly after the services are rendered, at rates established by the New Hampshire Department of Health and Human Services ("DHHS") specific to the level of service provided.

DONATED SERVICES AND IN-KIND CONTRIBUTIONS

Contributed nonfinancial assets include donated food, supplies, professional services, and other in-kind contributions which are recorded at the respective fair values of the goods or services received (Note 14). The Organization does not sell donated gifts-in-kind. In addition to contributed nonfinancial assets, 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.

ADVERTISING COSTS

Advertising costs are expensed as incurred and are reported in the consolidated statement of activities and consolidated statement of functional expenses.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

INCOME TAXES (CONTINUED)

The Organization accounts for uncertain tax provisions under Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("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.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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, 2024 and 2023:

	2024	2023
Financial assets at year end:		
Cash and cash equivalents	$ 5,381,870	$ 5,649,783
Restricted cash	71,739	70,644
Accounts receivable	712,166	1,011,771
Grants receivable	1,367,610	1,649,265
Contributions receivable	238,345	218,258
Investments	23,131,737	21,394,755
Beneficial interest held in trusts	2,275,542	2,165,143
Total financial assets	33,179,009	32,159,619
Less amounts not available to be used within one year:		
Restricted cash not available for general expenditure	71,739	70,644
Net assets with donor restrictions	7,095,167	6,593,765
Add amounts available to spend within one year:		
Net assets with purpose restrictions to be met in less than a year	(1,685,274)	(1,515,563)
Donor-restricted endowment subject to spending policy rate and appropriation	(73,998)	(73,998)
Closely held securities	1,450,000	750,000
Board-designated - ERTC funds	3,954,266	4,261,566
Board-designated endowment	16,651,246	16,173,416
Add amounts available to spend within one year:		
Board-designated endowment annual spending policy rate and appropriation	(883,752)	(899,141)
Total amounts not available to be used within one year	26,579,394	25,360,689
Financial assets available to meet general expenditures over the next year	$ 6,599,615	$ 6,798,930

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 or restricted to the Organization's spending policy. The portion of endowment funds that are perpetual in nature are not available for general expenditure.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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 7).

NOTE 4 - ASSETS HELD FOR SALE

The Organization entered into a purchase and sales agreement to sell the land, building and improvements, and equipment assets for piece of real estate property located in Concord, NH historically referenced as Camp Spaulding. The sale is expected to close in 2025.

NOTE 5 - INVESTMENTS AND FAIR VALUE MEASUREMENTS

Certain assets are reported at fair value in the 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.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 5 - INVESTMENTS AND FAIR VALUE MEASUREMENTS (CONTINUED)

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 in 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.

Certain investment assets are classified within Level 1 because they comprise open-ended mutual funds with readily determinable and quoted fair values based on daily redemption values. The Organization holds equity interest in a private equity limited liability company, received through donation, and is valued at fair value using per share price of an offering occurring around year-end. The equity interest is considered a Level 3 measurement. The fair value of beneficial interest in remainder trust is determined using present value techniques and risk-adjusted discount rates designed to reflect the assumptions market participants would use in pricing the underlying assets and is based on the fair value of trust investments as reported by the trustees. The beneficial interest in remainder trust is considered a Level 3 measurement.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 5 - INVESTMENTS AND FAIR VALUE MEASUREMENTS (CONTINUED)

The following table presents the Organization's assets measured at fair value on a recurring basis at December 31, 2024:

	2024			
	Total	Level 1	Level 2	Level 3
Assets:				
Investments:				
Mutual funds	$21,675,658	$21,675,658	$ --	$ --
Common stock	6,079	6,079	--	--
Closely held securities	1,450,000	--	--	1,450,000
	23,131,737	21,681,737	--	1,450,000
Beneficial interests held in trust:				
NHCF	1,314,217	--	--	1,314,217
Greenleaf	364,739	--	--	364,739
Spaulding	341,630	--	--	341,630
Cogswell	254,956	--	--	254,956
	2,275,542	--	--	2,275,542
Total assets at fair value	$25,407,279	$21,681,737	$ --	$3,725,542

The following table presents the Organization's assets measured at fair value on a recurring basis at December 31, 2023:

	2023			
	Total	Level 1	Level 2	Level 3
Assets:				
Investments:				
Mutual funds	$20,644,755	$20,644,755	$ --	$ --
Closely held securities	750,000	--	--	750,000
	21,394,755	20,644,755	--	750,000
Beneficial interests held in trust:				
NHCF	1,245,254	--	--	1,245,254
Greenleaf	353,987	--	--	353,987
Spaulding	324,126	--	--	324,126
Cogswell	241,776	--	--	241,776
	2,165,143	--	--	2,165,143
Total assets at fair value	$23,559,898	$20,644,755	$ --	$2,915,143

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 5 - INVESTMENTS AND FAIR VALUE MEASUREMENTS (CONTINUED)

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 following is a reconciliation of the beginning and ending balances of assets measured at fair value on a recurring basis using significant unobservable inputs (Level 3) for the year ended December 31, 2024:

	Closely Held Securities	Beneficial Interest Held in Trusts
Balance at December 31, 2023	$ 750,000	$ 2,165,143
Purchases/contributions of investments	700,000	1,543
Investment return, net	--	176,007
Distributions	--	(67,151)
Balance at December 31, 2024	$ 1,450,000	$ 2,275,542

The following is a reconciliation of the beginning and ending balances of assets measured at fair value on a recurring basis using significant unobservable inputs (Level 3) for the year ended December 31, 2023:

	Closely Held Securities	Beneficial Interest Held in Trusts
Balance at December 31, 2022	$ --	$ 2,020,741
Purchases/contributions of investments	750,000	--
Investment return, net	--	202,718
Distributions	--	(58,316)
Balance at December 31, 2023	$ 750,000	$ 2,165,143

Interest and dividends and net unrealized gains on investments and beneficial interest in remainder trusts are reflected in the accompanying statement of activities and changes in net assets as investment income, net and change in beneficial interest.

Investments, in general, are exposed to various risks such as interest rate, credit, and overall market volatility. As such, it is reasonably possible that changes in the value of investments will occur in the near term and that such changes could materially affect the amounts reported in the statement of financial position and the statement of activities and changes in net assets.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 6 - PROPERTY AND EQUIPMENT, NET

Property and equipment, net was comprised of the following at December 31, 2024 and 2023:

	2024	2023
Land and land improvements	$ 958,884	$ 958,884
Buildings and improvements	11,254,235	11,072,089
Furniture, fixtures, and equipment	619,457	619,457
Vehicles	54,663	68,761
Software	465,730	465,730
Construction in progress	237,924	82,075
Subtotal	13,590,893	13,266,996
Less accumulated depreciation	(4,512,260)	(4,156,839)
Total	$ 9,078,633	$ 9,110,157

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 (7.5% at December 31, 2024), adjusted daily. At December 31, 2024 and 2023, 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 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 secured overnight financing rate (“SOFR”) plus 2.75%. Counterparty payments to the Organization were intended to offset the Organization’s payments of variable rate interest to bondholders. Counterparty credit worthiness and market

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 8 - BONDS PAYABLE (CONTINUED)

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 2024 and 2023 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, 2024 and 2023, the Organization recorded the swap liability position of $-0- and $380,838, respectively. The Organization paid off the interest rate swap liability and closed the rate swap agreement during 2024.

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 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 to January 1, 2038 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, 2024 and 2023, the Organization was in compliance with these covenants.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 8 - BONDS PAYABLE (CONTINUED)

The following is a summary of future payments on the previously mentioned bonds payable:

Year	Amount
2025	$ 195,000
2026	200,000
2027	205,000
2028	220,000
2029	225,000
Thereafter	2,126,833
Total	$ 3,171,833

NOTE 9 - LEASES

The Organization rents property and equipment under non-cancelable operating lease agreements with monthly payments ranging from $493 to $4,910. The leases expire at various dates through November 2029.

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, 2024 and 2023 were as follows:

	2024	2023
Fixed lease cost	$ 245,797	$ 209,548
Variable lease cost	65,896	38,797
Total lease cost	$ 311,693	$ 248,345

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 9 - LEASES (CONTINUED)

During the years ended December 31, 2024 and 2023, the Organization had the following cash and non-cash activities related to operating leases:

	2024	2023
Cash paid for amounts included in the measurement of lease liabilities:		
Operating cash flows for operating leases	$ 262,158	$ 213,799
Non-cash investing and financing activities:		
Lease assets obtained in exchange for lease liabilities:		
Operating leases	$ 783,966	$ 168,666

Weighted average lease term and discount rate at December 31, 2024 and 2023, were as follows:

	2024	2023
Weighted average remaining lease term (years)	2.66	1.86
Weighted average discount rate	2.84%	1.36%

Future payments due under operating leases as of December 31, 2024, were as follows for the years ending December 31:

Years ending December, 31	Amount
2025	$ 233,216
2026	179,118
2027	162,446
2028	165,160
2029	86,365
Total lease payments	826,305
Less imputed interest	69,541
Present value of lease liabilities	$ 756,764

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 10 - REFUNDABLE ADVANCES

Refundable advances totaling $257,818 and $316,902 at December 31, 2024 and 2023, respectively, primarily include grant funds received in advance from New Hampshire Department of Health and Human Services for community-based voluntary services and from a foundation for an early childhood and advocacy grant. Revenues will be recognized as the conditions of the grants are met.

NOTE 11 - DEFERRED LOANS – NHHFA

Deferred loans at December 31, 2024 and 2023 were comprised of two notes payable to the New Hampshire Housing and Finance Authority ("NHHFA").

On June 7, 2005, the Organization entered into a note payable to the NHHFA. 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, 2024 and 2023 totaled $29,052 and $30,255, respectively.

On May 22, 2007, the Organization entered into a note payable to the NHHFA. 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, 2024 and 2023 related to this note totaled $42,687 and $40,389, 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.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 12 - ENDOWMENT FUNDS (CONTINUED)

TYPES OF FUNDS (CONTINUED)

Board-Designated Endowment

As of December 31, 2024 and 2023, the Board of Trustees had designated $16,651,246 and $16,173,416, respectively, of net assets without donor restrictions as a general endowment fund to support the mission of the Organization.

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, 2024 or 2023.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 12 - ENDOWMENT FUNDS (CONTINUED)

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.

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 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. This includes interest and dividends paid out to the Organization. In 2024 and 2023, the approved rate was 5.00%.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 12 - ENDOWMENT FUNDS (CONTINUED)

CHANGES IN ENDOWMENT NET ASSETS

The composition of endowment net assets as of December 31, 2024 and changes in endowment net assets for the year ended December 31, 2024 were as follows:

		With Donor Restrictions			Total
	Without Donor Restrictions	Cumulative Appreciation	Perpetually Restricted	Total	Endowment Net Assets
Endowment net assets, beginning of year	$ 16,173,416	$ 1,128,246	$ 1,784,813	$ 2,913,059	$ 19,086,475
Contributions	--	--	5,604	5,604	5,604
Appropriations from endowment	(1,099,141)	(99,392)	--	(99,392)	(1,198,533)
Borrowing from endowment for purpose-restricted net assets	(169,711)	--	--	--	(169,711)
Investment income, net	1,746,682	315,080	--	315,080	2,061,762
Endowment net assets, end of year	$ 16,651,246	$ 1,343,934	$ 1,790,417	$ 3,134,351	$ 19,785,597

The 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	Cumulative Appreciation	Perpetually Restricted	Total	Endowment Net Assets
Endowment net assets, beginning of year	$ 14,896,850	$ 788,401	$ 1,749,850	$ 2,538,251	$ 17,435,101
Contributions	--	--	34,963	34,963	34,963
Appropriations from endowment	(868,594)	(80,643)	--	(80,643)	(949,237)
Borrowing from endowment for purpose-restricted net assets	(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	$ 1,128,246	$ 1,784,813	$ 2,913,059	$ 19,086,475

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 13 - NET ASSETS

NET ASSETS WITHOUT DONOR RESTRICTIONS

Net assets without donor restrictions were comprised of the following at December 31, 2024 and 2023:

	2024	2023
Undesignated net assets	$ 9,501,393	$ 8,739,373
Board-designated ERTC funds	3,954,266	4,261,566
Board-designated endowment	16,651,246	16,173,416
Total	$ 30,106,905	$ 29,174,355

NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions were comprised of the following at December 31, 2024 and 2023:

	2024	2023
Subject to expenditure for specified purpose:		
Camp	$ 7,369	$ 7,689
Runaway and homeless youth	1,058,083	698,184
Family support	146,864	124,891
Health and wellbeing	205,149	231,618
Family resource center	204,636	341,896
Other projects	61,630	104,158
The Children's Place	1,543	7,127
	1,685,274	1,515,563
Accumulated endowment earnings restricted by donors for:		
General operations	208,111	189,575
Camperships	467,352	386,004
Other purposes	668,471	552,667
	1,343,934	1,128,246
Original gift perpetually restricted by donors for:		
General operations	136,529	136,529
Camperships	585,283	581,042
Other purposes	1,068,605	1,067,242
	1,790,417	1,784,813
Not subject to spending policy or appropriation:		
Beneficial interest in trusts	2,275,542	2,165,143
Total	$ 7,095,167	$ 6,593,765

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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, 2024 and 2023:

	2024	2023
Satisfaction of purpose restrictions:		
Camp	$ 14,898	$ 66,451
Runaway and homeless youth	1,055,863	2,450,535
Family support	262,115	181,115
Health and wellbeing	466,307	456,292
Family resource center	328,218	158,981
Other projects	331,456	143,893
The Children's Place	67,230	81,205
	2,526,087	3,538,472
Restricted purpose spending-rate distributions and appropriations:		
General operations	16,443	17,039
Camperships	23,383	--
Other purposes	59,566	63,604
	99,392	80,643
Total	$ 2,625,479	$ 3,619,115

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 14 - CONTRIBUTED NONFINANCIAL ASSETS

The Organization received the following contributions of nonfinancial assets for the years ended December 31, 2024 and 2023:

	Revenue Recognized		Utilization in	Valuation Techniques
	2024	2023	Programs/Activities	and Inputs
Food	$ 30,068	$ 44,631	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.
Supplies	6,279	5,399	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.
Toys	1,804	2,617	Early Childhood & Family Support	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	1,336	10,841	Early Childhood & Family Support, and Administration	Contributed professional services are valued at the estimated fair value based on current rates for similar services.
Items for assistance to individuals	35,917	14,248	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	$ 75,404	$ 77,736		

There were no associated donor restrictions with the above contributed nonfinancial assets.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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, provided 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 could get immediate access to the credit by reducing employment tax deposits they were otherwise required to make. Employers were eligible if they operated a trade or business during January 1, 2021 through September 30, 2021 and experienced either: 1) full or partial suspension of the operation of their trade or business during that 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 were less than 80% of the gross receipts in the same calendar quarter in 2019. For the year ended December 31, 2024, the Organization did not recognize any ERTC income.

NOTE 16 - GRANTS

The Organization has been awarded multi-year cost-reimbursable grants of $12,708,699 and $8,746,467 that have not been recognized as of December 31, 2024 and 2023, respectively, because qualifying expenditures have not yet been incurred. The Organization expects to request reimbursement on these grants over the next several years once the conditions for requesting reimbursement have been met. Grant revenue from federal agencies is subject to independent audit under the Office of Management and Budget's Uniform Guidance, and review by grantor agencies. This review could result in the disallowance of expenditures under the terms of the grant or reductions of future grant funds. Based on prior experience, the Organization's management believes that costs ultimately disallowed, if any, would not materially affect the financial position of the Organization.

Due to the federal government's review and potential restructuring of federal funding priorities, there is uncertainty regarding the continuation and amount of future funding from federal sources. The Organization is monitoring policy developments and may need to explore alternative funding sources to mitigate potential impacts.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 17 - ASSISTANCE TO INDIVIDUALS

Assistance to individuals was comprised of the following for the years ended December 31, 2024 and 2023:

	2024	2023
Payment to parents of foster children	$ 240	$ 13,317
Housing assistance	604,457	388,607
Gift cards provided to families during holiday season	23,155	45,000
Food for at risk youth	133,283	100,322
In-kind assistances	75,175	77,736
Other assistance such as medical, childcare, transportation, and family activities	665,854	720,794
Total	$ 1,502,164	$ 1,345,776

NOTE 18 - 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, 2024 and 2023 totaled $253,696 and $160,453, respectively.

NOTE 19 - 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, 2024 and 2023, total legal expense paid to related parties was $14,898, and $55,702, respectively.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

NOTE 20 - 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 21 - RECLASSIFICATIONS

Certain reclassifications of amounts previously reported have been made to the accompanying consolidated financial statements to maintain consistency between periods presented. The reclassifications had no impact on previously reported net assets.

NOTE 22 - SUBSEQUENT EVENTS

Subsequent events have been evaluated through June 3, 2025, the date the consolidated financial statements were available to be issued. No events were identified which required recognition or disclosure in the financial statements.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

WAYPOINT

CONSOLIDATED SCHEDULE OF OPERATING EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 2024

	Family Preservation & Strengthening	Early Childhood & Family Support	Homeless Youth & Young Adults	Health & Wellbeing	Advocacy	Camp	Total Program Services	Management and General	Fundraising	2024 Total
Personnel Expenses:										
Salaries and wages	$ 3,973,330	$ 3,232,756	$ 1,879,957	$ 1,548,683	$ 224,268	$ --	$ 10,858,994	$ 1,922,147	$ 318,381	$ 13,099,522
Employee benefits	721,250	642,604	373,004	165,721	5,881	--	1,908,460	347,144	43,529	2,299,133
Retirement plan	64,154	63,517	23,461	17,874	6,549	--	175,555	72,309	5,832	253,696
Payroll taxes and other	391,329	319,233	181,778	154,232	17,113	--	1,063,685	152,744	24,364	1,240,793
Subtotal personnel expense	5,150,063	4,258,110	2,458,200	1,886,510	253,811	--	14,006,694	2,494,344	392,106	16,893,144
Professional fees:										
Accounting	--	--	2,135	--	--	--	2,135	47,450	--	49,585
Legal	--	--	1,707	--	--	6,812	8,519	13,090	--	21,609
Other professional fees	49,754	243,338	92,765	10,762	15,655	--	412,274	487,084	33,566	932,924
Subtotal professional fees	49,754	243,338	96,607	10,762	15,655	6,812	422,928	547,624	33,566	1,004,118
Assistance to individuals	303,554	265,477	815,646	93,102	--	--	1,477,779	1,230	23,155	1,502,164
Communications	77,030	66,589	56,652	19,261	2,148	18	221,698	41,464	6,439	269,601
Conferences, conventions, meetings, and trainings	10,269	78,486	5,990	1,307	5,000	42,928	143,980	73,470	5,267	222,717
Depreciation	86,003	126,692	173,924	17,903	3,871	574	408,967	142,677	6,087	557,731
Insurance	39,325	38,380	36,439	15,479	1,041	11,540	142,204	13,322	2,501	158,027
Interest	58,513	86,196	115,378	12,181	2,634	391	275,293	26,742	4,141	306,176
Membership dues	3,304	9,193	25,031	5,949	721	--	44,198	14,792	1,840	60,830
Miscellaneous	19,343	18,285	10,754	8,435	102	--	56,919	73,875	14,116	144,910
Occupancy	249,375	187,561	364,117	36,372	3,045	2,164	842,634	66,877	11,364	920,875
Printing and publications	215	4,726	11,367	875	1,877	--	19,060	33,577	35,680	88,317
Equipment rental and maintenance	18,279	51,180	16,252	2,435	24	--	88,170	315,355	1,221	404,746
Supplies	19,551	32,460	29,443	10,064	339	41	91,898	8,666	1,603	102,167
Travel	222,503	131,058	59,614	40,194	8,601	--	461,970	23,184	854	486,008
Total	$ 6,307,081	$ 5,597,731	$ 4,275,414	$ 2,160,829	$ 298,869	$ 64,468	$ 18,704,392	$ 3,877,199	$ 539,940	$ 23,121,531

See independent auditors' report.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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	30,150	190,276	175,231	5,532	17,000	--	418,189	406,788	52,603	877,580
Subtotal professional fees	30,150	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	38,202	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	38,234	421	34	429	188,633	212,005	1,127	401,765
Supplies	25,468	56,629	62,830	3,362	1,275	--	149,564	12,586	2,190	164,340
Travel	230,603	144,066	54,165	26,351	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	$ 585,686	$ 20,984,396

See independent auditors' report.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

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.

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

ERIN J. GEORGE-KELLY

[redacted]

PROFESSIONAL APPOINTMENTS/MEMBERSHIPS

- 2025-Present Leadership New Hampshire
- 2024-2025 Manchester, NH Planning Board
- 2021-2023 New Hampshire Council on Housing Stability – Governor appointed
- 2018-2021 New Hampshire Interagency Council on Homelessness – Governor appointed
- 2017-2023 Chair Manchester Continuum of Care
- 2013-2014 Leadership Greater Manchester

PROFESSIONAL EXPERIENCE

Effective June 2026
Chief Operating Officer – Waypoint, Manchester, NH

- Oversee daily operations of programs through direct oversight of the Vice President of Programs and facilitating the collaboration and functioning of the Directors' team.Execute strategic leadership and innovation
- Collaborate with the CEO and Board of Directors to develop and execute the organization's strategic initiatives.
- Maintains relationships with Waypoint's external partners and contracting agencies focused on the operational aspects of mission delivery.
- Collaborate with the CEO and Director of Finance in planning for Waypoint real estate needs to ensure they meet current and evolving program needs and provide adequate, safe space for clients and staff in accordance with the strategic plan.
- Oversee development of program outcome measures at the organizational and program levels that will facilitate a fuller understanding of current program mission-related impacts and provide information for making relevant program changes.
- Oversees workflows, establishes policies/procedures, and, in consultation with ELT, allocates resources agency-wide and, with program directors, leads improvement efforts to better meet the organization's mission.
- Develop and maintain acceptable standards of professional practice in the Organization.
- Ensures adequate staff capacity and resources, in conjunction with HR, while promoting a work environment in which staff are supported, offered rich professional development, and held accountable for performance including identifying and intentionally developing rising talent in the organization.
- Partner with the CEO and Director of Finance to manage budgeting, forecasting, and financial reporting.

January 2024- Present
Director of Innovation and Strategic Initiatives - Waypoint, Manchester, NH

- Implement the strategic plan of the organization in collaboration with the Board of Trustees
- Uplift the organizational vision by implementing initiatives that carry Waypoint into the community
- Infusing organizational culture throughout all corners of Waypoint.
- Build collaborative relationships locally and nationally to strategically advance Waypoint

January 2014-January 2024
Director of Homeless Youth and Young Adult Department – Waypoint, Manchester, NH

- Develop and implement strategic plans for all programs
- Oversee local, state, and federal grant applications, reporting and contracts

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

- Develop and manage program budgets
- Provide program evaluation and outcome data
- Facilitate the professional growth of staff by providing guidance around goal development and relevant learning opportunities

January 2022-2024
Alderman, Ward 12 – City of Manchester, NH

- Public Safety, Health and Traffic Committee
- Human Resources and Insurance Committee
- Bills on Second Reading Committee
- Special Committee on Alcohol, Other Drugs, and Youth Services
- Special Committee on Energy Contracts and Related Activities

February 2010-January 2014
Program Manager - Child and Family Services of New Hampshire, Manchester, NH

November 2008-February 2010
Runaway and Homeless Youth Program & Student Assistance Program Supervisor -
Child and Family Services of NH, Manchester, NH

July 2006-November 2008
Home-Based Family Therapist - Child & Family Services of NH, Manchester, NH

September 2005 – May 2006
Masters Level Counseling Intern – New England College Counseling Center, Henniker, NH

August 2005-July 2006
Residential Counselor - Wediko Children's Services, Windsor, NH

November 2004-June 2005
Facilitator of Drug & Alcohol Support Group -Youth Services, Hillsboro, NH

July 2003-June 2005
Out-of-School Suspension Coordinator - Hillsboro-Deering Schools, Hillsboro, NH

EDUCATION

Union Institute and University - Vermont College, Brattleboro, Vermont
2004-2006 Master of Arts, Psychology and Counseling

Gordon College - Wenham, Massachusetts
1997-2001 Bachelor of Arts, Psychology
1997-2001 Bachelor of Arts, Youth Ministry

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

Kristen Alicia Campbell

[redacted]

Professional Profile

Executive Leader and human services professional with 20+ years of experience, including over 10 years in director-level leadership roles. Skilled in driving organizational success through strategic planning, innovation, and relationship-building. Committed to advancing mission-driven goals by developing high-performing teams, strengthening partnerships, and delivering impactful outcomes.

Employment History

Waypoint- Manchester, NH December 2025- Present
Vice President of Program

- Provide strategic oversight of all program departments and directors, ensuring the effective implementation of program design, development, and service delivery.
- Provide executive-level oversight of program and departmental budgets, ensuring alignment with organizational priorities and long-term financial sustainability.
- Lead efforts to implement and sustain a culture of collaboration by breaking down silos, streamlining communication, and supporting integration across departments.
- Oversee organization-wide quality assurance and quality improvement (QA/QI) initiatives to ensure continuous program excellence and compliance.
- Actively participate as a member of the Executive Leadership Team, contributing to organizational strategy, decision-making, and the advancement of agency-wide goals.
- Partner with the COO to implement and oversee strategic initiatives across programs that embed organizational culture and values.

Waypoint- Manchester, NH November 2023- December 2025
Director of Health Wellbeing and Independence

- Provide department oversight and leadership by supervising and coaching department leaders, guiding strategic planning, strengthening both leadership and program capacity, and fostering a culture of accountability, collaboration, and continuous improvement.
- Provide strategic leadership for homecare and health care coordination programs, ensuring compliance, efficiency, and high-quality client-centered services.
- Oversee fiscal management, developing and monitoring departmental budgets in collaboration with ELT and Accounting.
- Directed departmental Q/A and Q/I initiatives, ensuring service excellence, regulatory compliance, and continuous improvement.
- Serves as a member of the senior leadership team, contributing to organizational strategy, decision-making, and cross-departmental alignment.
- Collaborate with stakeholders and community partners to strengthen program outcomes and enhance service delivery across the community.

New Season Treatment Center- Northeast Region March 2020- November 2023
Director of Operations

- Lead multi-site operations across New England, directing teams serving 8,000+ patients while driving compliance, quality outcomes, and financial performance.
- Drove operational excellence by ensuring full compliance with CARF accreditation standards, as well as all

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

local, state, federal, and corporate regulations.
- Establish, monitor, and report on key performance indicators (KPIs) to evaluate program effectiveness, optimize resource allocation, and improve patient outcomes.
- Lead quarterly business reviews and monthly audits, leveraging data-driven insights to strengthen accountability, efficiency, and service delivery.
- Develop and manage annual operating budgets, aligning financial planning with organizational goals while ensuring cost efficiency and sustainability.
- Proactively identify and resolve regulatory and operational risks, providing executive leadership with strategic recommendations and corrective action plans.
- Prepare and deliver comprehensive operational reports to executive leadership, informing strategic planning and decision-making.
- Facilitate leadership meetings and provide Directors with supervision to enhance leadership, accountability, and operational excellence.

New Season Treatment Center- Manchester, NH December 2017- March 2020
Program Director
- Manage a medication-assisted treatment facility, leading clinical, medical, and administrative staff in delivering care to 900+ patients.
- Provide strategic oversight of facility operations, maintaining budget adherence for payroll, supplies, and overall expenditures.
- Foster a culture of employee engagement, professional growth, and high performance across all teams.
- Build and sustain collaborative partnerships with community organizations and local, state, and federal authorities to enhance service delivery and organizational reputation.
- Oversee Quality Assurance (QA) and Quality Improvement (QI) to ensure compliance with CARF, DEA, Board of Pharmacy, and state/federal regulations.

New Season Treatment Center- Manchester, NH June 2015- December 2017
Program Manager
- Conduct regular clinical and administrative record reviews to ensure accuracy, regulatory compliance, and adherence to quality standards.
- Provide supervision, coaching and training to staff, fostering professional growth, accountability, and high-quality patient care.
- Responsible to staff and onboard all clinic positions including contract labor.
- Manage and resolve client grievances and incident reports, ensuring timely response, compliance with regulatory requirements, and commitment to patient satisfaction.

New Season Treatment Center - Manchester, NH April 2012- June 2015
Substance Abuse Counselor
- Managed a diverse caseload of 65+, providing education, referrals, comprehensive case management, and supportive counseling for individuals experiencing substance misuse. Completed client intakes and conducted biopsychosocial assessments to evaluate needs, strengths, and risk factors.
- Developed patient-centered individualized treatment plans using SMART goals, conducted quarterly assessments, and maintained clinical case notes to document progress toward treatment goals and objectives.
- Facilitated therapeutic group sessions on topics including seeking safety, conflict management, relapse prevention, art therapy, mindfulness, and emotional regulation, fostering personal growth and recovery.

Families in Transition - Manchester, NH March 2010- April 2012
Community Organizer/ IOP Treatment Coordinator
- Delivered clinical support services to underserved unhoused women facing concurrent challenges of substance abuse and trauma. Facilitated intensive outpatient groups using evidenced based curriculum.
- Initiated the inception and oversight of the Peer Advocate Leader Program.
- Curated and executed community events on behalf of the organization to enhance community engagement

Docusign Envelope ID: 88FB45D9-1E52-8F6E-82CC-A319CC03436D

and awareness.

Nashua Children's Home - Nashua, NH June 2008- March 2010
Residential Counselor

- Assumed responsibility for overseeing a well-structured residential setting catering to high-risk adolescents grappling with emotional and behavioral challenges.
- Diligently upheld programmatic standards, consistently aligning with organizational protocols. Proficiently managed instances of behavioral concerns, crisis intervention, and interpersonal conflicts within the residential domain.
- Undertook the role of a dedicated child advocate, completion of daily clinical documentation.

Education and Certifications

Southern New Hampshire University - Manchester, NH
Bachelor of Science: Industrial-Organizational Psychology

University of Minnesota - Online
Certificate Program in Business Organizational Leadership Human Resource Management

Johnson & Wales University - Providence, RI
Associate of Science: Criminal Justice
Dual Concentrations: Addiction Studies and Psychology

Professional Affiliations & Projects

- Health Care for the Homeless Board of Governance, Manchester, NH – Active Board Treasurer
- Home Care, Hospice & Palliative Care Alliance – Member
- GSHHA Legislative Advocacy Committee – Active Participant
- National Alliance on Mental Illness NAMI- Member
- Association for Addiction Professionals NAADAC - Member
- Parks and Recreation, New Boston, NH – Director, Town Gymnastics Program *(Aug 2017 – Jun 2020)*
- Successfully achieved CARF accreditation with zero recommendations, demonstrating excellence in compliance, program quality, and organizational standards.
- Led strategic growth initiatives, including the launch of new clinics, to expand patient access and increase organizational reach. Managed end-to-end facility openings, from regulatory approvals to operational infrastructure, ensuring seamless integration into existing operations.

Key Strengths

- Embraces change with agility; fosters innovation and maintains a solution-focused mindset.
- Ensure excellence while driving continuous improvement through data-driven insights.
- Builds trust by demonstrating accountability, transparency, and integrity. Demonstrates strong interpersonal and leadership skills; builds trust, motivates teams, and fosters collaborative, inclusive work environments.
- Collaborates effectively in interdepartmental settings; bridges gaps to achieve alignment.
- Invested in human capital by developing staff potential, enhancing leadership capacity, and fostering a culture of growth and retention.
- Proficient in Microsoft 365, SharePoint, EMR systems, Google Workspace, and Canva.
- EMR Implementation & Optimization.