



SUPPORTIVE AND/OR HOUSING SERVICES MASTER AGREEMENT

WORK ORDER SOLICITATION SHSMA- WOS_CBS-041

FOR

CAPACITY BUILDING SERVICES IN-HOME CAREGIVING

LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES

MAY 2024

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EXHIBITS

EXHIBIT 1: STATEMENT OF WORK
EXHIBIT 2: LIST OF PUBLIC ENTITY CONTRACTS
EXHIBIT 3: SUBMISSION INSTRUCTIONS
EXHIBIT 4: RESPONSE TO REQUESTED INFORMATION
EXHIBIT 5: PROJECT REFERENCES
EXHIBIT 6: PENDING LITIGATIONS AND JUDGMENTS
EXHIBIT 7: BUDGET

WORK ORDER SOLICITATION (WOS) SHSMA-WOS_CBS-041

1.0 INTRODUCTION

The Los Angeles County (County) Department of Health Services (DHS) is seeking to enter into a Work Order with one or more qualified Respondent(s) who can provide Capacity Building Services for In-Home Caregiving (Services) in Los Angeles County for Housing for Health (HFH) which include all age groups from pediatric to geriatric populations (collectively known as “Participants”).

Services can be critical for people as they age and/or need extra support to stay independent and sustain housing. It also aids in reducing unnecessary hospitalizations and/or institutionalized care provided in a skilled nursing facility. The selected Respondent(s) shall provide Services to assist Participants with achieving and maintaining health, mental health, and housing stability. The selected Respondent’s goal is to ensure that care and services are coordinated effectively. The selected Respondent will monitor the intensity of services required and recommend adjustments to Housing for Health (HFH) based on each Participant’s level of functioning and the acuity of their needs.

2.0 SCOPE OF SERVICES

The selected Respondent(s) shall provide Services in accordance with all the requirements described in Exhibit 1, STATEMENT OF WORK (SOW).

3.0 WORK ORDER TERM

It is anticipated the Work Order shall be effective July 1, 2024, through June 30, 2025, with two (2), one (1) year options to extend not to exceed June 30, 2027. The optional period shall be exercised at the sole discretion of the Director of Health Services, or authorized designee, subject to availability of funding and contractor performance.

4.0 FUNDING

The Services are reimbursed on a fee-for-service basis at the hourly rate of \$32 prorated in 15-minute increments. The Caregivers’ hourly rate is all-inclusive including any management fee and overhead. No other compensation will be provided by the County.

5.0 MINIMUM REQUIREMENTS

Interested and qualified Respondents that can demonstrate their ability to successfully provide the required services as outlined in this WOS, Section 2.0, SCOPE OF SERVICES and Exhibit 1, SOW, are invited to submit a Response provided they meet all the Minimum Requirements below:

- 5.1 A. Respondent must have a current Supportive and/or Housing Services Master Agreement (SHSMA) in good standing with DHS.

OR

- B. Respondents that are not current SHSMA contractors may respond to this Work Order Solicitation (WOS) if they submit a Statement of Qualifications to DHS' Request for Statement of Qualifications (RFSQ) for Supportive and/or Housing Services and are issued a Master Agreement. Respondents that fall into this latter category must respond to BOTH the RFSQ and this WOS by the Response Due Date/Time indicated in Section 6.0, Work Order Solicitation Timeline, of this WOS. These Respondents must meet the minimum requirements outlined in the RFSQ Sub-Section 1.4, Agency's Minimum Qualifications, to be a SHSMA contractor in order for their Response to this WOS to be considered. The RFSQ can be found at <https://dhs.lacounty.gov/contracts-and-grants>

5.2 Licensing

- A. Respondent shall be licensed by the state of California Department of Social Services - Home Care Services Branch (HCSB) for respondents only providing home care services and subcontract with a licensed health care professional to provide paramedical services. A copy of the licenses must be provided.

OR

- B. Respondent shall be licensed by the state of California Department of Public Health - as a Home Health Agency for respondents only providing home health services and a copy of the license must be provided.

- 5.3 Respondent shall have three (3) years of experience in the last five (5) years providing In-Home Caregiving services.

- 5.4 Respondent has not had finding(s) made by a public entity of financial mismanagement, financial impropriety, or determination of non-

responsibility, on any contract or solicitation with a public entity, within the past five (5) years. Respondent shall complete EXHIBIT 2 – LIST OF PUBLIC ENTITY CONTRACTS.

- 5.5 **(This requirement only applies to Respondents that have had a County contract reviewed by the Department of the Auditor-Controller within the last 10 years).** Respondent does not have unresolved questioned costs identified by the Department of the Auditor-Controller, in an amount over \$100,000, that are confirmed to be disallowed costs by the contracting County department and remain unpaid for six (6) months or more from the date of disallowance, unless such disallowed costs are the subject of current good faith negotiations to resolve the disallowed costs, in the opinion of the County.

6.0 WORK ORDER SOLICITATION TIMETABLE

- Work Order Solicitation Release: May 17, 2024
- Written Questions Due Date/Time: May 23, 2024, at 11:00 a.m. PDT
- Response Due Date/Time: June 3, 2024, at 11:00 a.m. PDT

7.0 CONTACT WITH COUNTY PERSONNEL

All contact regarding this WOS or any matter relating thereto must be in writing and may be e-mailed as follows:

Attn: Natasha Aceves
County of Los Angeles Department of Health Services
Contracts and Grants Division
E-mail Address: Naceves2@dhs.lacounty.gov

If it is discovered that a Respondent contacted and received information regarding this WOS from any County personnel, other than the contact specified above, the County, in its sole determination, may disqualify the Response(s) of the Respondent from further consideration.

8.0 RESPONDENT QUESTIONS

Questions **must be submitted by e-mail** to the e-mail address identified in Section 7.0, CONTACT WITH COUNTY PERSONNEL, and must be received no later than May 23, 2024 at 11:00 a.m. PDT. All questions, without identifying the submitting Respondent, shall be compiled and, along with the appropriate answers, will be issued as an addendum to the WOS and made available on the DHS Contracts and Grants Portal at <https://dhs.lacounty.gov/contracts-and-grants/>.

When submitting questions, be as specific as possible, indicating the area of the WOS that prompted the question. The County reserves the right to group similar questions when providing answers.

9.0 RESPONSE INSTRUCTIONS

Respondent shall complete the following required Exhibits in accordance with the instructions provided on each Exhibit:

- 9.1 EXHIBIT 2: LIST OF PUBLIC ENTITY CONTRACTS
- 9.2 EXHIBIT 3: SUBMISSION INSTRUCTIONS
- 9.3 EXHIBIT 4: RESPONSE TO REQUESTED INFORMATION
- 9.4 EXHIBIT 5: PROJECT REFERENCES
- 9.5 EXHIBIT 6: PENDING LITIGATIONS AND JUDGMENTS
- 9.6 EXHIBIT 7: BUDGET

10.0 RESPONSE SUBMISSION REQUIREMENTS

The Respondent shall **e-mail** one (1) Response in **PDF format** by the Response Due Date/Time to the individual identified below:

Attn: Natasha Aceves
County of Los Angeles Department of Health Services
Contracts and Grants Division
E-mail Address: Naceves2@dhs.lacounty.gov

All Respondents shall provide the name of their organization and the title and number of the WOS on the subject line of the e-mail. Each Response shall follow the guidelines as indicated in Exhibit 3, SUBMISSION INSTRUCTIONS. Any deviation from these guidelines will result in the Response being disqualified without further review and consideration by DHS, at its sole discretion. Any questions regarding formatting shall be submitted to the individual identified above by the Written Questions Due Date/Time.

It is the sole responsibility of the submitting Respondent to ensure that its Response is received by the Response Due Date/Time. Any Responses received after the Response Due Date/Time, as listed in the Section 6.0, WORK ORDER SOLICITATION TIMETABLE, may be eliminated from consideration by DHS at its sole discretion.

11.0 TRUTH AND ACCURACY OF REPRESENTATIONS

False, misleading, incomplete, or deceptively unresponsive statements in connection with a Response shall be sufficient cause for rejection of the Response. The review and determination in this area shall be at the sole judgment of the DHS Contracts and Grants Director, which shall be final.

12.0 REVIEW AND SELECTION PROCESS

The County reserves the sole right to exercise its judgment concerning the selection and review of the contents of the Responses submitted pursuant to this WOS and to determine which Respondent best serves the interests of the County. As a result of this WOS, the County may as follows:

1. Request from Respondent further information, documents, presentations, and/or conference calls or in-person interviews to substantiate its qualifications, experience, and readiness to provide the services described in the WOS;
2. Award a Work Order to Respondent; and/or
3. Take no further action at this time on this matter.

12.1 Response Selection Process

The selection process will begin with receipt of the Response. Then, the review of the Responses will be conducted in two phases.

12.1.1 Phase One (Acceptable/Unacceptable)

Phase One will be conducted by the DHS Contracts and Grants Division. The Response will be given an overall designation of "Acceptable" or "Unacceptable." The Response must be designated "Acceptable" in both of the reviews below in order to be given an overall designation of "Acceptable." Respondents designated "Acceptable" will move on to Phase Two.

A. Adherence to Minimum Requirements (Acceptable/Unacceptable)

A review will be conducted of the Respondent's Response to Exhibit 4, RESPONSE TO REQUESTED INFORMATION, Section 3.0, RESPONSE QUESTIONS, Sub-Section 3.1, Respondent's Minimum Requirements, to determine if the Respondent meets all of the Section 5.0, MINIMUM REQUIREMENTS, of this WOS. Failure by the Respondent to comply and demonstrate that it meets the Minimum

Requirements may, in the County's sole discretion, result in its Response being disqualified without further review and consideration. The acceptable/unacceptable criteria are as follows:

1. Response was received by the Response Due Date/Time. Any Responses received after the Response Due Date/Time, as listed in the Section 6.0, WORK ORDER SOLICITATION TIMETABLE, may be eliminated from consideration by the County at its sole discretion.
2. The Respondent meets the Minimum Requirements as set forth Section 5.0, MINIMUM REQUIREMENTS of this WOS.

B. Verification Process (Acceptable/Unacceptable)

A review will be conducted of the Respondent's business status by checking with all applicable databases and provided project references. This review may include, but is not limited to, databases available with the California Secretary of State – Business Programs, California Department of Health Care Services' Suspended and Ineligible Provider List for Medi-Cal, California State Department of Justice Office of the Attorney General – Registry of Charitable Trusts, Federal Debarment List, Federal System for Award Management, and if applicable, a review of the Auditor-Controller's Intranet website, and the Contractor Alert Reporting Database reflecting past performance history on County contracts.

The following exhibits shall also be reviewed and assessed to determine the Respondent's business status:

1. EXHIBIT 2 – LIST OF PUBLIC ENTITY CONTRACTS

The County requires this information to determine if the Respondent meets the minimum requirement as described in WOS, Section 5.0, MINIMUM REQUIREMENTS, Sub-Section 5.6.

2. EXHIBIT 5 – PROJECT REFERENCES

The Respondent must provide one (1) or more references who can validate the Respondent's experience and dates of service listed in response to the WOS, Exhibit 4, RESPONSE TO REQUESTED INFORMATION, Section 3.0, RESPONSE QUESTIONS, Sub-Section 3.1, Respondent's Minimum

Requirements, Sections 3.1.2 – 3.1.4. Use additional pages as necessary. It is the sole responsibility of the Respondent to ensure that the reference contact information is up to date and the reference contact person has been notified. The County may disqualify the Respondent if any reference fails to validate any of the requested information or is unreachable after reasonable efforts.

3. EXHIBIT 6 – PENDING LITIGATIONS AND JUDGMENTS

The County will review the number and type of judgments or pending litigation that may interfere with current or future agreements or prohibit the Respondent from entering into a new agreement.

12.1.2 Phase Two – Review of Written Material (Comparative Review)

Phase Two will be conducted by a Review Committee selected by DHS. The Review Committee will conduct a comparative review to assess all Responses for the criteria listed below. Each Response will be assigned a score and be ranked in comparison to other Responses. The highest-ranked Response will be selected. Additionally, the County may select the next highest ranked Respondent(s) if additional capacity is needed.

A. Respondent's Background and Experience

A review will be conducted on the appropriateness and suitability of the Response to Exhibit 4, RESPONSE TO REQUESTED INFORMATION, Section 3.0, RESPONSE QUESTIONS, Sub-Section 3.2, Background and Experience, to determine if the Respondent has the qualifications, experience, and capacity to provide the services outlined therein.

B. Respondent's Approach and Methodology

A review will be conducted on the appropriateness and suitability of the Respondent's narrative responses to Exhibit 4, RESPONSE TO REQUESTED INFORMATION, Section 3.0 RESPONSE QUESTIONS, Sub-Section 3.3, Approach and Methodology, to determine if the Respondent has the capacity to provide, and a good understanding of, the services outlined therein.

C. Respondent's Budget

A review will be conducted on the appropriateness and suitability of the Respondent's response to Exhibit 7, BUDGET.

12.1.3 Financial Capability (Acceptable/Unacceptable)

Prior to a Work Order award, a review will be conducted of the Respondent's financial records provided in Exhibit 3, RESPONSE TO REQUESTED INFORMATION, Section 4.0, FINANCIAL CAPABILITY, to determine the Respondent's financial strength. A subject matter expert will evaluate and make a recommendation of "Acceptable" or "Unacceptable" based on the financial strength and capability of the Respondent to provide the required services throughout the term of any resultant Work Order, as well as evidence of the Respondent's capability to absorb all costs related to the provision of services for a minimum of sixty (60) days. The Respondent will need to demonstrate a history of business stability and financial ability to perform the services required in Exhibit 1, SOW.

Financial statements that do not demonstrate a history of business stability and financial ability to perform the services or meet the sixty (60) day requirement may result in a requirement that the Respondent provide a performance security prior to DHS awarding a Work Order.

The County retains the right to select a Response that is the most overall qualified, cost-effective, responsive, responsible, and in the best interests of the County.

13.0 DISQUALIFICATION REVIEW

A Response may be disqualified from consideration because the County determines that Respondent does not meet the Minimum Requirements and/or was non-responsive at any time during the review process. If the County determines that a submission is disqualified due to the failure to meet the Minimum Requirements and/or non-responsiveness, the County shall notify the Respondent in writing.

Upon receipt of the written determination of disqualification, the Respondent may submit a written request for a Disqualification Review within the timeframe specified in the written determination.

A request for a Disqualification Review may, in the County's sole discretion, be denied if the request does not satisfy all of the following criteria:

- 13.1 The person or entity requesting a Disqualification Review is a Respondent;
- 13.2 The request for a Disqualification Review is submitted timely (i.e., by the date and time specified in the written determination); and
- 13.3 The request for a Disqualification Review asserts that the County's determination of disqualification was erroneous (e.g., factual errors, etc.) and provides factual support on each ground asserted as well as copies of all documents and other material that support the assertions.

Requests for a Disqualification Review not satisfying all these criteria may, in the County's sole discretion, be denied. The Disqualification Review shall be completed, and the determination shall be provided to the requesting Respondent, in writing, prior to the conclusion of the review process.

14.0 APPEAL RIGHTS

14.1 Debriefing Process

- 14.1.1 Upon completion of the review, the County will notify any non-selected Respondent(s) in writing that the County is entering into negotiations with another Respondent. Upon receipt of the letter, any non-selected Respondent may submit a written request for a Debriefing within the timeframe specified in the letter. A request for a Debriefing may, in the County's sole discretion, be denied if the request is not received within the specified timeframe.
- 14.1.2 The purpose of the Debriefing is to compare the requesting Respondent's Response to the WOS with the review document. The requesting Respondent shall be debriefed only on its Response. Since Work Order negotiations would not yet be complete, Responses from other Respondents shall not be discussed, although the County may inform the requesting Respondent of its relative ranking.
- 14.1.3 Respondent may submit an Appeal within two (2) business days after the Debriefing.

14.2 Appeal

The County will consider any appeal regarding Respondents not recommended for award of a Work Order under this WOS, if such appeal is received in writing by the DHS Contracts and Grants Division within two (2) business days after the Debriefing. An appeal may, in the sole discretion of DHS, be denied if the request does not satisfy all of the following criteria:

- 14.2.1 The person or entity requesting an appeal is a Respondent;
- 14.2.2 The request for an appeal is submitted timely (i.e., within two [2] business days after the Debriefing); and
- 14.2.3 The request for appeal asserts, in appropriate detail with factual reasons, one or more of the following grounds for review:
 - A. DHS materially failed to follow procedures specified in its WOS. This includes the following:
 - 1. Failure to correctly apply the standards for reviewing the Response format requirements.
 - 2. Failure to correctly apply the standards and/or follow the prescribed methods for reviewing the Responses.
 - 3. Use of review criteria that was different from the review criteria disclosed in the WOS.
 - B. A member of the Review Committee demonstrated bias in the conduct of the review.
 - C. Another basis for review as provided by State or federal law.

Respondents will be notified by the DHS Contracts and Grants Director of the decision on any appeal which is received by DHS in a timely manner. Such notification will explain the basis for the decision. The DHS Contracts and Grants Director's decision on any appeal will be final.

15.0 WORK ORDER

A Work Order will be executed with the selected Respondent(s) as authorized under delegated authority by the County Board of Supervisors. The Statement of Work to the Work Order shall be agreed upon by the selected Respondent and the County, based on the Respondent's Response.

16.0 NOTICE TO RESPONDENTS REGARDING THE PUBLIC RECORDS ACT

- 16.1 Responses to this solicitation shall become the exclusive property of the County.
- 16.2 Exceptions to disclosure are those parts or portions of all Responses that are justifiably defined as business or trade secrets, and plainly marked by the Respondent as "Trade Secret," "Confidential," or "Proprietary."

- 16.3 The County shall not, in any way, be liable or responsible for the disclosure of any such record or any parts thereof, if disclosure is required or permitted under the California Public Records Act or otherwise by law. **A blanket statement of confidentiality or the marking of each page of the Response as confidential shall not be deemed sufficient notice of exception. The Respondents must specifically label only those provisions of their respective Responses that are “Trade Secrets,” “Confidential,” or “Proprietary” in nature.**
- 16.4 In the event the County is required to defend an action on a Public Records Act request for any of the aforementioned documents, information, books, records, and/or contents of a Response marked “Trade Secrets,” “Confidential,” or “Proprietary,” the Respondent agrees to defend and indemnify County from all costs and expenses, including reasonable attorneys’ fees, incurred in connection with any action, proceedings, or liability arising in connection with the Public Records Act request.

17.0 COUNTY RIGHTS AND RESPONSIBILITIES

The County has the right to amend, re-issue, or cancel this WOS by written addendum. The County is responsible only for that which is expressly stated in this solicitation document and any authorized written addenda thereto. Should such addendum require additional information not previously requested, failure to address the requirements of such addendum may result in the Response not being considered, as determined at the sole discretion of the County. The County is not responsible for and shall not be bound by any representations otherwise made by any individual acting or purporting to act on its behalf.

STATEMENT OF WORK

CAPACITY BUILDING SERVICES
IN-HOME CAREGIVING

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ATTACHMENT

ATTACHMENT A – CONTRACTOR DISCREPANCY REPORT

STATEMENT OF WORK (SOW)

1.0 SCOPE OF WORK

Capacity Building Services for In-Home Caregiving (Services) are critical for Housing for Health (HFH) participants, which include all age groups from pediatric to geriatric populations (collectively known as “Participants”). Services will aid in reducing unnecessary hospitalizations and/or institutionalized care, such as that provided in a skilled nursing facility. The Contractor will serve Participants who need these Services to remain independent in a variety of housing settings which shall include assistance with Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADL) as assessed by the Department of Health Services (DHS) nursing/clinical staff (clinical team).

The Contractor will work in close collaboration with the Participant’s Intensive Case Management Services (ICMS) provider. The Contractor’s goal is to ensure Services are coordinated effectively. The Contractor will monitor the intensity of Services required and recommend adjustments to HFH based on each Participant’s level of functioning and the acuity of their needs.

The County shall determine program eligibility and schedule any needed assessment(s) for the Participant with the DHS clinical team. The County shall notify the Contractor when the Participant’s referral is approved.

2.0 BEST PRACTICES

The Contractor shall provide high quality individualized Services to Participants. The Contractor shall adhere to the following evidence-based best practices:

- 2.1 A comprehensive Participant-centered approach; and provide excellent customer service that is sensitive to the challenges of persons experiencing homelessness and need assistance with a wide range of medical and behavioral health issues as they move into and maintain permanent housing.
- 2.2 A culturally, linguistically, appropriate, and responsive approach.
- 2.3 A “whatever it takes approach” and other evidence-based practices, including housing first and trauma-informed care to assist Participants in their care for ADLs and/or IADLs.
- 2.4 Utilize a trauma-Informed approach, without reinforcing stigma and shame, to address the consequences of trauma and facilitate healing through the core values of safety, trustworthiness, choice, collaboration, and empowerment.

- 2.5 Harm reduction principles and implement overdose prevention interventions (such as naloxone).

3.0 SPECIFIC SERVICES TO BE PROVIDED

The Contractor shall provide Services, under procedures approved by the County, and consistent with laws, regulations, current health and mental health best practices and standards, and the Master Agreement. The Services shall include, but not be limited to, the following:

3.1 Intake and Enrollment

3.1.1 Process Participant Services referrals approved by the County.

3.1.2 Conduct a face-to-face screening within seven (7) business days of receiving a referral.

A. If requested by the County and in urgent cases, a face-to-face screening of the Participants will be done within three (3) business days of receiving a referral, or any time frame as directed by the County.

B. Begin Services to Participants within seven (7) business days after face-to-face screening is completed. Any extension to this timeframe requires a formal request by the Contractor to the County for approval.

3.1.3 Upon assignment of a Caregiver, notify the County staff and the Participant's ICMS provider with the Caregiver's name, contact information and their schedule.

3.2 Services

The Contractor shall recruit Caregivers who in turn shall assist Participants with the following:

3.2.1 Activities of Daily Living (ADLs)

ADLs collectively describes the fundamental skills required to independently care for oneself, such as eating, bathing, and mobility; it is used as an indicator of a person's functional status. The inability to perform ADLs results in the dependence of other individuals and/or mechanical devices which may lead to unsafe conditions and poor quality of life. Caregivers will assist with the following ADL Activities which shall include but not be limited to:

A. Bathing (Bath/Shower)

- a. Obtaining supplies for bathing and putting them away;
- b. Turning on/off faucets and adjusting water temperature;
- c. Cleaning the Participant's body in a tub or shower;
- d. Getting in/out of a tub or shower; and
- e. Provide after shower care by drying, applying lotion, powder, and deodorant.

B. Dressing

- a. Putting on/taking off, fastening/unfastening, buttoning/unbuttoning, zipping/unzipping, and tying/untying of garments, undergarments, corsets, elastic stockings, shoes, and body brace; and
- b. Changing soiled clothing.

C. Grooming

- a. Combing, washing, drying, and brushing of hair;
- b. Hair trimming when Participant cannot get to the barber/salon and need a trim; and
- c. shaving; finger/toenail care; and washing/drying hands.

D. Mouth Care

Applying toothpaste, brushing teeth, rinsing mouth, caring for dentures, and flossing.

E. Bowel and Bladder Care

- a. Using, emptying, and cleaning bed pans/bedside commodes, urinals, ostomy, enema and catheter receptacles;
- b. Application of diapers; managing clothing; changing disposable barrier pads; and

- c. Wiping and cleaning Participant; assistance with getting on/off commode or toilet; and washing/drying Participant's hands.

F. Menstrual Care (If Applicable)

Assist with menstrual care but is limited to external application of sanitary napkins, external cleaning, positioning for sanitary napkin placement, using, disposing of barrier pads, wiping and cleaning, and washing/drying hands before and after performing these tasks.

G. Transfer

This includes transfer from a bed, chair, couch, wheelchair, walker, or other assistive device generally occurring within the same room. Assistance with standing, sitting, or prone position to another position and/or from one piece of equipment or furniture to another.

H. Ambulation

Ambulation includes assistance to/from the front door to the car (including getting in and out of the car) for medical accompaniment and/or alternative resource travel. Assisting with walking or moving from place to place inside the home, including to/from the bathroom; climbing or descending stairs; moving/retrieving assistive devices (e.g., a cane, walker, wheelchair, etc.), and washing/drying hands as needed.

I. Eating

Assistance with oral feedings by providing smaller bites of food if needed and making sure Participant chews, swallows, and doesn't choke.

3.2.2 Instrumental Activities of Daily Living (IADLs)

IADLs are those activities that allow an individual to live independently in a community. Although not necessary for functional living, the ability to perform IADLs can significantly improve the quality of life. The major domains of IADLs include cooking, cleaning, transportation, laundry, and managing finances. The County Occupational therapists will assess IADLs in the setting of rehab to determine the level of an individual's need for assistance and cognitive function. IADL activities include but are not limited to:

A. Shopping for Food/Errands

- a. Making a grocery/shopping list, traveling to/from the store, shopping, loading/unloading and storing food/supplies purchased.
- b. Performing reasonable errands such as delivering a delinquent payment to avert imminent utility shut-off or picking up prescriptions.

B. Cooking

Preparing of meals, which includes but not be limited to the following:

- a. Planning menus;
- b. Washing/drying hands before and after meal preparation;
- c. Removing food from refrigerator or pantry;
- d. Washing, peeling, and slicing vegetables;
- e. Opening packages, cans, and bags;
- f. Measuring and mixing ingredients;
- g. Lifting pots and pans;
- h. Trimming meat;
- i. Reheating food;
- j. Cooking and safely operating stove;
- k. Setting the table and serving the meals; and
- l. Pureeing food and/or cutting the food into bite-size pieces.

C. Using Phone/Computer

- a. Assisting with and teaching to use a cell or landline phone to dial out to communicate with others to get needs met, or for social interaction.

- b. Assisting with and teaching to use a computer to research, play games, use social media, check email, etc.

D. Housework

- a. House clean-up such as sweeping, dusting, vacuuming, washing floors; washing kitchen counters and sinks; cleaning the bathroom; taking out garbage; cleaning oven and stove; cleaning refrigerator; and changing bed linens as needed.
- b. Meal clean-up such as loading and unloading dishwasher; washing, rinsing, and drying; dishes, pots, pans, utensils, and culinary appliances, and putting them away; storing/putting away leftover foods/liquids; wiping up tables, counters, stoves/ovens, and sinks; and washing/drying hands.

E. Laundry

Weekly laundry assistance that includes washing and drying clothing linen, mending, ironing, folding, and storing clothes on shelves or in drawers and making the bed.

F. Public Transportation:

Assisting with taking the bus, ACCESS services, rideshare services and/or Taxi.

G. Finances

Assisting with organizing a system for paying rent and bills on time.

H. Providing linkage to ICMS provider to take the lead in providing additional wrap around services and/or referral to payee services.

I. Medical Equipment/Prosthetic Devices

- a. Limited to non-medical services such as assistance with self-administration of oxygen and cleaning Intermittent Positive Pressure Breathing machines.
- b. Assisting with taking off and putting on, maintaining, and

cleaning prosthetic devices, vision/hearing aids, and washing/drying hands before and after performing task.

J. Medication

- a. Assisting with the self-administration of medications consisting of reminding the Participant to take prescribed and/or over-the-counter medications when they are to be taken, setting up Medi-sets and distributing medications.
- b. Assisting Participants to maintain their medication and treatment regimens.

3.2.3 Gaining, restoring, improving and/or maintaining daily independent living, social/leisure, and personal hygiene skills.

3.2.4 Referring Participants to palliative and/or hospice care as directed by the County.

3.2.5 Accompanying to Medical appointments.

3.2.6 Coordinating with ICMS provider for any necessary transitions of care.

3.2.7 Paramedical Services

Contractor shall be licensed as a Home Health Agency to provide Paramedical Services, or may utilized a subcontract approved by the County, as outlined in the Master Agreement, Sub-paragraph 8.46 – SUBCONTRACTING, to meet the needs of the Participant.

The following Paramedical Services shall be provided by trained medical professional and must be provided under the direction of a licensed healthcare professional. Services may include but not be limited to:

- A. Administering medication or giving injections
- B. Blood/urine testing
- C. Wound care
- D. Catheter care and ostomy irrigation
- E. Any treatments requiring sterile procedures

F. Enemas, digital stimulation, or the insertion of suppositories

G. Suctioning

3.3 Program Requirements

Contractor shall ensure the following:

- 3.3.1 Maintain a regular Caregiver schedule based on the number of Participant's hours approved for Services.
- 3.3.2 Dispatch replacement of Caregivers to Participants within 4 hours of notification that the scheduled Caregiver did not show up for the shift.
- 3.3.3 Educate Participants on the appropriate use of crisis intervention services, versus 911 emergency calls, etc.
- 3.3.4 Improve Participants' community involvement, including linkages to ICMS provider(s) to locate classes, and/or other services that can enrich Participant well-being.
- 3.3.5 Monitor and follow-up with Participants and ICMS provider to confirm timely completion of referrals and linkages, access to services, and maintenance of services.
- 3.3.6 Coordinate with ICMS provider(s) to ensure Participants apply for the In-Home Support Services (IHSS) program and work closely with the ICMS provider on tracking the application date and disposition. Once approved for the IHSS program and a IHSS provider is hired, the Services provided by the Work Order may be terminated.
- 3.3.7 Provide Services in a culturally and linguistically competent manner, that includes but is not limited to, matching a Participant with a Caregiver who can effectively communicate in the language of the Participant's choice.
- 3.3.8 Provide Services through a trauma-informed approach that includes but is not limited to, cultural responsiveness which requires Caregivers to be culturally competent and sensitive to people's backgrounds, history, and trauma.
- 3.3.9 All documentation of Services provided shall be recorded in the Participant's File, at a minimum of one (1) time per month within three (3) business days of service delivery.

4.0 SURVEY

- 4.1 Develop and conduct Participant Satisfaction Surveys. The content, methodology (e.g., one-on-one conversations, anonymously, etc.) and frequency of the survey shall be approved by the County.
- 4.2 Analyze and assess Participant satisfaction surveys, as described in 4.1, annually and provide the County with a report of the results and the findings. Submit additional ad hoc reports as requested by the County. Services should be adjusted as necessary, based on survey findings, while maintaining appropriateness based on County input and approval.

5.0 COLLABORATIONS AND PARTNERSHIPS

- 5.1 Collaborate with the County, any County partners and non-County partners to coordinate the logistics of the Services under the SOW, which may include, but not be limited to, meetings and/or e-mail, phone, and other forms of communication for project management of this Work Order.
- 5.2 Attend regularly scheduled and as-needed coordination and/or team meetings and/or performance improvement meetings with the County, any County partners and non-County partners to resolve problems and/or grievances that arise under this Work Order.
- 5.3 Engage, build, and maintain collaborative partnerships with any County and non-County partners to ensure participants have access to a comprehensive array of wraparound services.

6.0 FORMS AND RECORD KEEPING

The Contractor shall generate and maintain retrievable records, records relating to Services under the Work Order, and data collection/tracking systems as directed by the County, as follows:

6.1 Participant Files

The Contractor shall ensure appropriate safeguards are implemented in accordance with all applicable Federal, State, and local laws and regulations to secure the personal identifying information (PII) and protected health information (PHI) of Participants.

6.1.1 Each Participant file shall include, but not be limited to hard copies of the following:

- A. Participation agreements and consent form documents (e.g., Program policies, Participant rights, Participant confidentiality,

Participant referral documents, etc.).

- B. Participant grievance procedures with signed acknowledgement by Participant and any submitted grievances.
- C. The signed copy of the DHS Consent Form and Notice of Privacy Practices.
- D. Authorizations to release, disclose, use, and/or share information.
- E. All Participant documentation of Services and case notes.
- F. Participant demographic information.
- G. Program start date and exit date.
- H. Number of assigned Service hours; name of the Caregiver and weekly schedule.
- I. IHSS application status.
- J. Other Participant documentation required at the County's discretion.

6.1.2 The Contractor shall provide the County with the Participant Files upon request.

6.2 Contractor Files

The Contractor shall maintain documentation addressing the following areas:

6.3.1 Employee Handbook.

6.3.2 Contractor policy attestation forms.

6.3.3 Policies and Procedures.

6.3.4 Incident reports.

6.3.5 Any meeting minutes and outcomes.

6.3.6 Submitted Participant grievances.

6.3.7 Any County-approved Agreements and/or Memorandums of

Understanding with service providers, project partners, and other providers (if applicable).

6.3.8 Documents related to Quality Control Plan (QCP) and Quality Assurance Plan activities.

6.3.9 Certificates and/or other documentation that verify attendance for all trainings specified in the Work Order shall be maintained for each Contractor staff and documented in the staff files.

6.3.10 A copy of Participants' Satisfaction Surveys and Analysis.

6.3.11 Monthly/quarterly reports directed by the County.

6.3.12 Other records and documentation required at the County's discretion.

7.0 REPORTING

7.1 Provide copies of incident reports to the County within twenty-four (24) hours of the incident taking place. Maintain incident reports, including documentation of how and when issues were resolved. Incidents include injuries, death, disturbances, property damage, etc.

7.2 Submit any other ad hoc reports as requested by the County, Board of Supervisors, the State or other County agencies or entities for budgetary or other purposes. Reports shall include all the required information requested and shall be completed in the manner and time frame described by the County.

7.3 Provide to the County high level summaries on a monthly basis that include but not be limited to the Services under the Work Order.

7.4 Submit, on an annual basis, or as directed by the County, a budget for Services to be provided under the Work Order for County approval.

7.5 Complete Electronic Visit Verification (EVV) training which is a requirement for providers of personal care and home health care services under the California State Department of Social Services.

7.5.1 Required reporting/data elements shall be tracked in the California EVV system and/or a County alternate EVV and include information regarding:

A. Time service begins and ends;

- B. Date of the service;
- C. Location of the service delivery;
- D. Participant receiving the service;
- E. Employee providing the service;
- F. Type of service performed; and
- G. Any other data elements as required by EVV.

- 7.6 Complete and submit weekly, monthly, quarterly, and other reports with the required supporting documentation as requested by the County or non-County partners.

8.0 RESPONSIBILITIES – COUNTY

8.1 Administrative

The County will administer the Work Order according to the Master Agreement, Paragraph 6.0, ADMINISTRATION OF MASTER AGREEMENT – COUNTY. For the purpose of the Work Order, the County's duties may include the following:

- 8.1.1 Monitor the Contractor's performance in the daily operation of this Work Order.
- 8.1.2 Provide guidance and direction to the Contractor on policies and procedures, and data collection.
- 8.1.3 Prepare Amendments in accordance with Paragraph 8.0, STANDARD TERMS AND CONDITIONS, Sub-paragraph 8.1, AMENDMENTS, of the Master Agreement.
- 8.1.4 Provide overall coordination to link the Contractor, County and non-County partners, and other County departments.
- 8.1.5 Notify the Contractor when the Participant's referral is approved.

9.0 RESPONSIBILITIES – CONTRACTOR

9.1 Program Manager

The Contractor shall provide a Program Manager or designated alternate who shall be responsible for the overall day-to-day activities, management,

and coordination of the Work Order, and be a liaison with the County. The County must have access to the Program Manager or designated alternate Monday through Friday between the hours of 8:00 a.m. and 5:00 p.m. (Pacific Standard Time) or as approved by the County. The Contractor shall provide a telephone number where the Program Manager or designated alternate may be reached during these business hours. The Program Manager or designated alternate shall:

- 9.1.1 Have at least one (1) years of experience in the past five (5) years with the following:
 - A. Working with people who would qualify as Participants as described under this SOW.
 - B. Contract management and compliance.
 - C. Budgets and expenditure tracking.
 - D. Providing administrative oversight to staff.
 - E. Developing and implementing QCP on an ongoing basis.
 - F. Building collaborative partnerships.
 - G. Managing social service and/or Caregiver programs.
 - H. Provision of care giving and/or home health, palliative services in interim housing settings, permanent and/or permanent supportive housing, including establishment of a crisis response system.
- 9.1.2 Be responsible for developing policies and procedures and creating forms that facilitate the effective operation and delivery of high-quality services under this SOW.
- 9.1.3 Have proficient writing and computer skills and have the ability to produce reports on a regular basis and as requested by the County.
- 9.1.4 Have full authority to act for Contractor on all matters relating to the daily operation of this Work Order.

9.2 Personnel

- 9.2.1 The Contractor shall provide the County with resumes of current staff and potential candidates to hire under the Work Order and receive approval from the County prior to hiring. The County has the right to approve or disapprove all staff performing work under the Work

Order and any proposed changes to staffing.

- 9.2.2 Staff shall be recruited, or current qualified staff shall be assigned within thirty (30) days of execution of the Work Order. Contractor shall maintain clear and comprehensive job descriptions for all staff positions. Contractor shall ensure staff provides signed acknowledgement of job descriptions.
- 9.2.3 The Contractor shall assign a sufficient number of employees to perform the required work.
- 9.2.4 The Contractor shall ensure all staff levels needed for the delivery of direct Services under this SOW are on site and when there is a vacancy, a replacement is made within thirty (30) days. If a position becomes vacant the Contractor must notify the County within seventy-two (72) hours. If unable to backfill any vacancies within a thirty (30) day period, the Contractor must provide the County with a written reason for the ongoing vacancy, and a plan to backfill the vacant position(s), to be submitted no later than the thirtieth (30th) day.
- 9.2.5 The Contractor shall maintain an organizational chart and staffing roster that lists all staff funded under this Work Order, which shall be submitted monthly to the County and upon request.
- 9.2.6 Staff providing Services under this Work Order shall:
 - A. Have knowledge and experience in one or more of the following areas: chronic homelessness and working with participants in a caregiving capacity with ADLs and IADLs.
 - B. Be responsive to the cultural and linguistic needs of participants in need of caregiving services which would include providing Services in the participants preferred language when appropriate.

9.3 Licensing and Certification

- 9.3.1 The Contractor shall maintain a valid license from either the state of California Department of Social Services - Home Care Services Branch (HCSB) as a Home Care Agency or California Department of Public Health - as a Home Health Agency as required by law which is applicable to perform the Services under the Work Order. The license(s) shall be obtained and maintained by the Contractor in accordance with Paragraph 8.0, STANDARD TERMS AND CONDITIONS, Sub-paragraph 8.31, LICENSES, PERMITS, REGISTRATIONS, ACCREDITATIONS, AND CERTIFICATES, of

the Master Agreement.

- 9.3.2 Any Contractor staff required to maintain a valid license, permit, registration, accreditation, board certification, and/or certificate required by law which are applicable to the performance under the Work Order, shall be obtained and maintained by the Contractor in accordance with Paragraph 8.0, STANDARD TERMS AND CONDITIONS, Sub-paragraph 8.31, LICENSES, PERMITS, REGISTRATIONS, ACCREDITATIONS, AND CERTIFICATES, of the Master Agreement.

9.4 Training

Contractor shall comply with all record-keeping requirements for training certificates and attendance in Section 6.0, FORMS AND RECORD KEEPING, Sub-section 6.3.9.

- 9.4.1 All Contractor staff shall be trained in their assigned tasks within thirty (30) days of assigned to work under this Work Order. Contractor staff providing direct Services shall receive training on topics that include, but are not limited to the following: homelessness, outreach and engagement strategies, best practice models, mental health and substance use disorder services, harm reduction, crisis intervention, suicide assessment and prevention and trauma-informed care.
- 9.4.2 The County may require additional mandatory trainings for any and all Contractor staff.
- 9.4.3 Contractor shall provide ongoing staff training to promote continuous quality improvement.
- 9.4.4 All Contractor staff shall be trained and prepared to assist Participants with safe syringe disposal, providing FDA-cleared sharps disposal on site and/ or to take for use off-site, and provide education to Participants on safer disposal of used syringes and where to dispose of them. Contractor must be authorized to provide syringe access services by local or state government and maintain proper certification throughout the term of the Work Order.
- 9.4.5 All Contractor staff shall be trained in overdose prevention and response, and use and distribution of over-the-counter naloxone, and other prescribed naloxone medication. Any prescribed naloxone shall be pursuant to the County Standing Order to obtain and dispense naloxone hydrochloride or Contractor shall secure their own standing order through the CDPH or another physician.

- 9.4.6 Contractor shall ensure that frontline staff and supervisors providing Harm Reduction Services are properly trained and participate in the harm reduction trainings and technical assistance provided by the County, which may include but not be limited to the following training topics: overdose prevention and response, engaging people who use drugs, harm reduction supplies and how they are used.
- 9.4.7 Ensure that staff providing Services have expertise in or receive training and supervision on topics that include, but are not limited to:
- A. Providing assistance to people who have chronic health conditions;
 - B. Providing trauma-informed care;
 - C. Outreach and engagement strategies to build rapport with people experiencing homelessness;
 - D. Mental health and substance use disorder services;
 - E. Crisis intervention, suicide assessment and prevention;
 - F. Hoarding and life skills;
 - G. Data management;
 - H. Securing protected health information;
 - I. Linkage to health and mental health care;
 - J. IHSS Program, requirements, procedures; and
 - K. Accompaniment to medical appointments and transitions of care

9.5 Policies and Procedures

The Contractor shall submit a copy of the Policies and Procedures to the County for review and approval within thirty (30) calendar days of executing this Work Order as follows:

- 9.5.1 Develop and maintain a written set of Grievance Policies and Procedures.
- 9.5.2 Develop and maintain written procedures for conflict resolution addressing operational concerns reported, including interpersonal conflict between Contractor staff and County and non-County staff

involved in the coordination of providing Services.

9.6 Contractor's Office

The Contractor shall establish a system addressing office management responsibilities including, but not limited to:

9.6.1 Responding within two (2) hours of receipt of the e-mail or call to inquiries and complaints received from the County, other County, and non-County partners, and/or Participants.

9.6.2 Establishing appropriate office hours, handling of after-hours calls, maintaining a working e-mail account(s) that is checked regularly during the hours of 8:00 a.m. to 5:00 p.m., Monday through Friday, etc.

9.7 Meetings

Meetings topics may include but are not limited to discussions about operations, facility updates, Policy and Procedures, risk management, program updates and SOW requirements.

9.7.1 The Contractor agrees to have at least one (1) representative, preferably the Program Manager, or designated alternate, to participate in the following:

A. Weekly check-in meetings with the County.

B. Meetings that the County may schedule during the same business day, depending on the nature of an event or issue.

10.0 QUALITY CONTROL PLAN

The Contractor shall establish and utilize a comprehensive QCP to ensure the County a consistently high level of service throughout the term of this Work Order. The QCP must specify methods for identifying and preventing deficiencies in the quality of service performed before the level of performance becomes unacceptable. The QCP, which is subject to approval by the County prior to QCP implementation, shall be submitted to the County within thirty (30) calendar days from the execution date of this Work Order.

The Contractor shall ensure the QCP includes, but is not limited to the following:

10.1 Methods of monitoring activities and Services to ensure that Work Order and Master Agreement requirements are being met.

- 10.2 Methods of monitoring Subcontractor(s), if any, for compliance and quality of Services.
- 10.3 Update the QCP annually, at a minimum, and as requested by the County. Any revisions to the QCP shall be submitted to the County for approval prior to implementation.

11.0 QUALITY ASSURANCE PLAN

The County will evaluate the Contractor's performance under this Work Order and Master Agreement using the quality assurance procedures as defined in Paragraph 8.0, STANDARD TERMS AND CONDITIONS, Sub-paragraph 8.18, COUNTY'S QUALITY ASSURANCE PLAN, of the Master Agreement.

11.1 Meetings

The Contractor is required to attend any meetings scheduled by the County.

11.2 Contractor Discrepancy Report

11.2.1 The County will issue a CONTRACTOR DISCREPANCY REPORT (CDR) (Attachment A) to the Contractor as soon as possible whenever a discrepancy is identified.

11.2.2 Upon receipt of the CDR, the Contractor is required to respond in writing to the County within five (5) business days with a Corrective Action Plan (CAP) of all deficiencies identified in the CDR. The County will review the CAP for approval or may request an updated CAP to be resubmitted, as necessary.

11.2.3 Any unresolved CDR deficiencies may result in the withholding and/or reclaim of payment(s) for noncompliance.

11.3 County Observations

The County will conduct routinely scheduled administrative and programmatic review of Contractor to ensure contract compliance and quality assurance. In addition to departmental contracting staff, other County personnel may observe performance, activities, and review documents relevant to this Work Order and Master Agreement at any time during normal business hours. However, these personnel may not unreasonably interfere with the Contractor's performance.

12.0 IMPLEMENTATION PLAN

The Contractor shall develop an Implementation Plan for Services under the Work

Order within thirty (30) calendar days of execution, which shall be reviewed and approved by the County. Services under the Work Order shall be performed in accordance with the finalized Implementation Plan and completed within the timeline stated in the Implementation Plan. Any updates to the Implementation Plan must have the County's approval. All program documents, completed materials, evaluations, etc., shall be maintained on file and available for review by the County upon request.

Failure by the Contractor to comply with the Implementation Plan may constitute a material breach of the Work Order, upon which the County may take corrective action, up to and including termination of the Work Order.

13.0 CALAIM REQUIREMENTS

Consistent with the State of California's CalAIM waiver, the State has instituted a new benefit called ECM. According to the State's policy guidance, ECM coordinates all care for the highest risk enrolled members with complex medical and social needs, including across the physical and behavioral health delivery systems. In many of these instances, the ECM benefit is additive, seeks to improve management of care across delivery systems, and aims to comprehensively addresses any unmet medical and/or social needs. The Contractor understands and acknowledges that, from time-to-time, it may provide certain services under the Work Order to individuals who are concurrently enrolled in, and receiving, the ECM benefit (or other services like those approved under 42 C.F.R. § 438.3(e)(2)). Therefore, the Contractor hereby agrees to coordinate with providers, as appropriate, to ensure that there is neither interruption nor duplication of Services. The Contractor further agrees that it shall not, under any circumstances, bill more than one payor for its provision of Services hereunder. Finally, the Contractor agrees to adhere to any and all of the County's policies and procedures guidelines, which may provide additional guidance on who is the appropriate provider or payor.

CONTRACTOR DISCREPANCY REPORT

TO:

FROM:

DATES:

Prepared: _____

Returned by Contractor: _____

Action Completed: _____

DISCREPANCY PROBLEMS: _____

Signature of County Representative_____
DateCONTRACTOR RESPONSE (Cause and Corrective Action): _____

Signature of Contractor Representative_____
DateCOUNTY EVALUATION OF CONTRACTOR RESPONSE: _____

Signature of Contractor Representative_____
DateCOUNTY ACTIONS: _____

CONTRACTOR NOTIFIED OF ACTION:

County Representative's Signature and Date _____

Contractor Representative's Signature and Date _____