

SEVENTH AMENDMENT CONTRACT NUMBER 17-27-0025-FCSP

BETWEEN THE COUNTY OF ORANGE AND

ST. JUDE HOSPITAL, INC. dba ST. JUDE MEDICAL CENTER For

FAMILY CAREGIVER SUPPORTIVE PROGRAM SERVICES
CFDA# 93.052 TITLE III-E: NFCSP
CALIFORNIA DEPARTMENT OF AGING; OLDER AMERICANS ACT
FAIN # 1901CAOAFC-01

OLDER AMERICANS ACT TITLE III
GRANTS FOR STATE & COMMUNITY PROGRAMS ON AGING
FAMILY CAREGIVER SUPPORT PROGRAM SERVICES
DEPARTMENT OF HEALTH & HUMAN SERVICES GRANT

This Amendment to Contract No. 17-27-0025-FCSP, hereinafter referred to as "Seventh Amendment" is made and entered into upon execution of all necessary signatures between the County of Orange, a political subdivision of the State of California, hereinafter referred to as "County" and St. Jude Hospital, Inc. dba St. Jude Medical Center, a California non-profit Corporation, DUNS #787460625, with a place of business at 130 West Bastanchury Road, Fullerton, CA 92835-2502; hereinafter referred to as "Subrecipient," with County and Subrecipient sometimes referred to as "Party," or collectively as "Parties."

RECITALS

WHEREAS, County and Subrecipient entered into Contract No. 17-27-0025-FCSP, hereinafter referred to as "original Contract," for the provision of Senior Services, commencing July 1, 2017, through June 30, 2018, in the amount not to exceed \$716,977; and

WHEREAS, on February 15, 2018, the County executed the First Amendment to increase the original Contract by the monetary amount of \$80,504, for a new maximum obligation of \$797,481 and replaced Attachment A, Scope of Services, with Attachment A-1; and replaced Attachment C, Budget, with Attachment C-1; and

WHEREAS, on June 26, 2018, the County executed the Second Amendment to renew the service contract for the period of July 1, 2018, through June 30, 2019 with a maximum monetary amount of \$827,584 and replaced Attachment A-1, Scope of Services, with Attachment A-2; replaced Attachment C-1, Budget, with Attachment C-2; and replaced Attachment F, Focal Points, with Attachment F-1

WHEREAS, on December 22, 2018, the County executed the Third Amendment to increase the original Contract by the monetary amount of \$258,729, for a new maximum obligation of \$1,086,313 and replaced Attachment A-2, Scope of Services, with Attachment A-3; and replaced Attachment C-2, Budget, with Attachment C-3; and

WHEREAS, on June 5, 2019, the County executed the Fourth Amendment to renew the service Contract for the period of July 1, 2019, through June 30, 2020, and with a maximum monetary amount of \$1,044,806.00, and replaced Attachment A-3, Scope of Services, with Attachment A-4; and replaced Attachment B, Compensation/Payment, with Attachment B-1; and replaced Attachment C-3, Budget, with Attachment C-4; and replaced Attachment D, Staffing Plan with Attachment D-1; and

WHEREAS, on June 5, 2019, the County executed the Fifth Amendment to amend the original Contract and replaced Attachment A-4, Scope of Services, with Attachment A-5; and added Exhibit 5, Debarment and Suspension Certificate; and

WHEREAS, on August 1, 2019, the County executed the Sixth Amendment to amend the original Contract to decrease the Contract by the monetary amount of \$149,955, for a new maximum obligation of \$894,851 and replaced Attachment A-5, Scope of Services, with Attachment A-6; and replaced Attachment B-1, Compensation/Payment, with Attachment B-2; and replaced Attachment C-4, Budget, with Attachment C-5; and

WHEREAS, the County now desires to amend the original Contract to increase the Contract by the monetary amount of \$175,865, for a new maximum obligation of \$1,070,716, and replace Attachment A-6, Scope of Services, with Attachment A-7; and replace Attachment B-2, Compensation/Payment, with Attachment B-3; and replace Attachment C-5, Budget, with Attachment C-6; and replace Attachment D-1, Staffing Plan with Attachment D-2; and replace Exhibit 2, OC Community Resources Contract Reimbursement Policy with Exhibit 2 – OC Community Resources Contract Reimbursement Policy, as amended January 17, 2020; and

NOW, THEREFORE, in consideration of the mutual obligations set forth herein, both Parties mutually agree to amend as follows:

- 1. The Contract shall be amended to increase the monetary limit in the amount of \$175,865, for a new maximum obligation of \$1,070,716.
- 2. Paragraph 21. Notices of the Contract shall be amended to read as follows:

"21. Notices:

Any and all notices, requests, demands and other communications contemplated, called for, permitted, or required to be given hereunder shall be in writing, except through the course of the PARTIES routine exchange of information and cooperation during the terms of the work and services. Any written communications shall be deemed to have been duly given upon actual in-person delivery, if delivery is by direct hand, or upon delivery on the actual day of receipt or no greater than four calendar days after being mailed by US certified or registered mail, return receipt requested, postage prepaid, whichever occurs first. The date of mailing shall count as the first day. All communications shall be addressed to the appropriate PARTIES at the address stated herein or such other address as the PARTIES hereto may designate by written notice from time to time in the manner aforesaid.

For COUNTY: County of Orange

County of Orange

OC Community Resources
OC Community Services
Office on Aging
PROGRAM MANAGER
1300 S. Grand Ave., Bldg. "B" 2nd Flr.
Santa Ana, CA 92705-4407

OC Community Resources Contract Development & Management CONTRACT ADMINISTRATOR 601 N. Ross St., 6th Floor Santa Ana, CA 92701

For SUBRECIPIENT: St. Jude Hospital, Inc. dba St. Jude Medical Center PROGRAM MANAGER 130 West Bastanchury Road Fullerton, CA 92835-2502"

- 3. Attachment A-6, Scope of Services, shall be replaced with Attachment A-7.
- 4. Attachment B-2, Compensation/Payment, shall be replaced with Attachment B-3.
- 5. Attachment C-5, Budget Schedule(s), shall be replaced with Attachment C-6.
- 6. Attachment D-1, Staffing Plan, shall be replaced with Attachment D-2.
- 7. Exhibit 2 OC Community resources Contract Reimbursement Policy is hereby deleted in its entirety and replaced with Exhibit 2 OC Community Resources Contract Reimbursement Policy, as amended January 17, 2020, below.

Except as otherwise expressly set forth herein, all terms and conditions contained in the Original Contract, including any amendments/modifications, are hereby incorporated herein by this reference as if fully set forth herein and shall remain in full force and effect.

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IN WITNESS WHEREOF, the Parties hereto have executed this Seventh Amendment on the dates with their respective signatures:

*St. Jude	Hospital, Inc. dba St. Jude Medical	Center	
Ву:	Brian Helleland 63C9C0BB385F422	By:	
Name:	Brian Helleland (Print)	Name:	(Print)
Title:	Chief Executive	Title:	
Dated:	2/21/2020	Dated:	
or an Assis For Subrectione of the I	tant Treasurer. ipients that are not corporations, the personines above.	n who has authority	y, any Assistant Secretary, the Chief Financial Officer y to bind the Subrecipient to a Contract, must sign on ***********************************
	Y OF ORANGE al Subdivision of the State of Californ	nia	
Ву:	Dylan Wright, Director OC Community Resources	Dated:	
	VED AS TO FORM Y COUNTY COUNSEL		
Ву:	John Chiviland 74000032EE05457Y COUNSEL	Dated: _	2/21/2020

	FAMILY CAREGI	VER SUPPORT PRO	GRAM	
		Report Period (Fiscal		2019-2020
Scope of Work		Submission Date:		January 23, 2020
PSA	Name of Agency Reporting:			
Number:	St. Jude Hospital, Inc. dba St. Jude Medical Center			
22	Name of Person Completing Report:	E-Mail Addr		Telephone No.:
	Jack W. Light	Jack.Light@stj	oe.org	(714)446-5030
				Total # of Caregivers Served
SECTION 1	INFORMATION SERVICES		Units	146870
	Public Information	# of Activities	77	
		Estimated Audience	126015	
	Community Education	# Activities	244	
	•	Estimated Audience	20886	
	Information Servi	ices Total # of Activities	321	
	Information Services To	•	146901	
SECTION 2	ACCESS ASSISTANCE		Units	14695
	Caregiver Assistance	# Contacts	7670	
	Caregiver Information & Assistance	# Contacts	7670	
	Caregiver Interpretation/ Translation	# Contacts	5075	
	Caregiver Legal Resources	# Contacts	20	
		sistance Total Contacts	20435	
SECTION 3	SUPPORT SERVICES		Units	1475
R	Caregiver Assessment	# Hours	545	
R	Caregiver Counseling	# Hours	545	
R	Caregiver Peer Counseling	# Hours	0	
R	Caregiver Support Group	# Hours	545	
R	Caregiver Training	# Hours	505	
R	Caregiver Case Management	# Hours	4420	
	Suppo	ort Services Total Hours	6560	
SECTION 4	RESPITE CARE		Units	472
R	Respite In-Home Supervision	# Hours	1420	
R	Respite Homemaker Assistance	# Hours	0	
R	Respite In-Home Personal Care	# Hours	1535	
R	Respite Home Chore	# Hours	35	
R	Respite Out-of-Home Day	# Hours	5310	
R	Respite Out-of-Home Overnight	# Hours	0	
		espite Care Total Hours	8300	
SECTION 5	SUPPLEMENTAL		Units	72
R	Assistive Devices for Caregiving	# Occurrences	35	
R	Home Adaptations for Caregiving	# Occurrences	0	
R	Caregiving Services Registry	# Occurrences	0	
R	Emergency Cash/Material Aid	# Occurrences	55	
	9 ,	vices Total Occurrences	90	
1	.,			

Signature Title Date

Family Caregiver Support Program

Family Caregiver Support Program (FCSP) is funded under the Older Americans Act Title IIIE. FCSP services are designed to reduce caregiver burden, enable caregivers to remain in the workforce, and prevent, or delay, the need for a higher level of care for the care receiver.

FCSP services are provided County-wide to eligible older adult's family caregiver, must be 18 years of age or older. Older adult care receivers must be age 60 years or older, or individuals of any age with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.

FCSP services include:

PROJECT COMPONENT	MAIN ACTIVITIES	
Family Caregiver Support Program (FCSP)	Information Services: that provide public information and community education on resources and services available to current and potential caregivers and their families.	
	Access Assistance: including information assistance, interpretation/translation, and legal resources for caregivers.	
	<u>Support Services:</u> including caregiver assessments, counseling, support groups, and training.	
	Respite Care: that provides caregivers with temporary in-home or out of home relief from caregiving responsibilities.	
	<u>Supplemental Services:</u> that provide assistive devices, home adaptations, caregiver registry services, and emergency cash or material aid, on a limited basis, to assist with caregiving responsibilities.	

The following are the CDA Service Categories for the FCSP program as cited in the CDA Service Categories and Data Dictionary revisions effective July 2018.

1. Service Categories:

a. <u>Information Services</u>

Information Services means the provision of public information on caregiving and/or community education on caregiving, including information about available services. **CDA Unit of Service: 1 Activity**

Public Information on Caregiving means an FCSP Information Service designed to provide information about available FCSP and other caregiver support resources and services by disseminating publications, conducting media campaigns, and maintaining electronic information systems (e.g., quarterly newsletter).

Community Education on Caregiving means an FCSP Information Service designed to educate groups of current or potential caregivers and those who may provide them with assistance about available FCSP and other caregiver support resources and services (e.g., booth at a health fair).

b. Access Assistance

Access Assistance means the provision of caregiver outreach, caregiver information and assistance, caregiver interpretation/translation services, and caregiver legal resources in order to link caregivers to the opportunities and services that are available. **CDA Unit of Service: 1 Contact**

Caregiver Outreach means an FCSP Access Assistance service involving interventions (one-on-one contacts with individuals) initiated by an agency or provider for the purpose of identifying caregivers and encouraging their use of existing caregiver support services(e.g., Caregiver Info Van staff-initiated contacts in front of local market.)

Caregiver Information and Assistance means an FCSP Access Assistance service that:

- Provides caregivers with information on services available within the communities, including caregiving information related to assistive technology and caring for older individuals at risk for institutional placement.
- Links caregivers to the services and opportunities that are available within the communities.
- To the maximum extent practicable, establishes adequate follow-up procedures (caregiver may remain anonymous and refuse follow-up contact).

Caregiver Interpretation/ Translation means an FCSP Access Assistance service for the provision of bilingual communication assistance to a caregiver in order to access assistance and receive support for his or her caregiving responsibilities. (e.g., Staff interpreting dialog between caregiver & care consultant staff translating an elder's prescription drug label for his caregiver).

Caregiver Legal Resources means an FCSP Access Assistance service involving one-to-one guidance provided by an attorney (or person under the supervision of an attorney) in the use of legal resources and services when assisting a caregiver with caregiving-related legal issues.

c. Support Services

Support Services means the provision of caregiver assessment, caregiver counseling, caregiver peer counseling, caregiver support groups, caregiver training, and (if necessary) caregiver case management. **CDA Unit of Service: 1 Hour** (time includes preparation, service provision, related travel)

Caregiver Assessment means an FCSP Support Service conducted by persons trained and experienced in the skills required to deliver the service that should result in a plan that includes emergency back-up provisions and is periodically

updated; and will explore options and courses of action for caregivers by identifying their:

- Willingness to provide care
- Duration and care frequency preferences
- Caregiving abilities
- Physical health, psychological, social support, and training needs
- Financial resources relative for caregiving
- Strengths and weaknesses within the immediate caregiving environment and (caregiver's) extended informal support system

Caregiver Counseling means an FCSP Support Service provided to a caregiver by a person appropriately trained and experienced in the skills required to deliver the level of support needed for stress, depression and loss as a result of caregiving responsibilities. This service:

- May involve his or her informal support system
- May be individual direct sessions and/or telephone consultations
- May address caregiving-related financial and long-term care placement responsibilities

Caregiver Peer Counseling means an FCSP Support Service provided by experienced volunteers on the condition that appropriate training and qualified supervision protocols are in place.

Caregiver Support Group means an FCSP Support Service provided to a group of three to twelve caregivers that is led by a competent facilitator; conducted at least monthly within a supportive setting or via a controlled access, moderated online or teleconference approach; for the purpose of sharing experiences and ideas to ease the stress of caregiving, and to improve decision making and problem solving related to their caregiving responsibilities.

Caregiver Training means an FCSP Support Service consisting of workshops or one-on-one individually tailored sessions, conducted either in person or electronically by a skilled and knowledgeable individual, to assist caregivers in developing the skills and gaining the knowledge necessary to fulfill their caregiving responsibilities; and address the areas of health, nutrition, and financial literacy.

Caregiver Case Management means an FCSP Support Service provided by a person who is trained and experienced in the skills that are required to coordinate and monitor the provision of formal caregiver-related services in circumstances where caregivers are experiencing diminished capacities due to mental impairment or temporary severe stress and/or depression.

d. Respite Care

Respite Care means a brief period of relief or rest from caregiving responsibilities, and is provided to caregivers on an intermittent, occasional, or emergency basis in a manner that responds to the individual needs and preferences of the caregivers and their care receivers, rather than a pre-established set amount

offered on a "first come, first served" waiting list basis.**CDA Unit of Service: 1 Hour** (time includes service provision and related travel)

Caregiver Respite In-Home Supervision means an FCSP Respite Care service that includes the provision of care receiver day and/or overnight supervision and friendly visiting by an appropriately skilled provider or volunteer in order to prevent wandering and health or safety incidents.

Caregiver Respite Homemaker Assistance means an FCSP Respite Care service that includes the provision of care receiver assistance with meal preparation, medication management, using the phone, and/or light housework (along with care receiver supervision) by an appropriately skilled provider or volunteer.

Caregiver Respite In-Home Personal Care means an FCSP Respite Care service that includes the provision of care receiver assistance with eating, bathing, toileting, transferring, and/or dressing (along with care receiver supervision and related homemaker assistance) by an appropriately skilled provider.

Caregiver Respite Home Chore means an FCSP Respite Care service that includes an appropriately skilled provider or volunteer assisting a caregiver with heavy housework, yard work, and/or sidewalk and other routine home maintenance (but not structural repairs) associated with caregiving responsibilities.

Caregiver Respite Out-of-Home Day Care means an FCSP Respite Care service where the care receiver attends a supervised/protective, congregate setting during some portion of a day, and includes access to social and recreational activities.

Caregiver Respite Out-of-Home Overnight Care means an FCSP Respite Care service where the care receiver is temporarily placed in a supervised/protective, residential setting for one or more nights, and may include access to nursing and personal care.

e. Supplemental Services

Note: No more than 20 percent of the budget for program services may be expended on Supplemental Services.

Assistive Devices for Caregiving means an FCSP Supplemental Service that involves the purchase, rental and/or service fee of any equipment or product system (ranging from a lift chair or bathtub transfer bench to an electronic pill dispenser or emergency alert fall prevention device) in order to facilitate and fulfill caregiving responsibilities.

CDA Unit of Service: 1 Device is 1 Occurrence.

Home Adaptations for Caregiving means an FCSP Supplemental Service that makes any minor or major physical change to the home (ranging from installation of grab bars or replacement of door handles to construction of an entrance ramp or roll-in shower) in order to fulfill caregiving responsibilities.

CDA Unit of Service: 1 Modification is 1 Occurrence.

Caregiving Services Registry means an FCSP Supplemental Service that recruits,

screens, and maintains a listing of dependable, qualified self-employed homemaker or respite care workers who may be matched with caregivers willing to use personal resources to pay for assistance with their caregiving responsibilities. Both the caregiver and self-employed worker will be:

- Advised about appropriate compensation and workplace performance expectations
- Provided with follow-up to ensure the match is functioning effectively

CDA Unit of Service: 1 Hour of service is 1 Occurrence.

Caregiving Emergency Cash/ Material Aid means an FCSP Supplemental Service that arranges for and provides assistance to caregivers in the form of commodities, surplus food, emergency cash, transit passes, meals and vouchers that will help meet identified needs associated with an individual caregiver's responsibilities.

CDA Unit of Service: 1 Assistance is 1 Occurrence.

- 1. Federal Award Identification (FY 2017-2018, 2018-2019 and 2019-2020)
 - A. Subrecipient Name: St. Jude Hospital, Inc. DBA St. Jude Medical Center
 - B. Subrecipient's Unique Identifier (DUNS): 787460625

NOTE: C. – H. Paragraphs by Program/Fiscal Year:

FY 2017/2018

- C. Federal Award Identification Number (FAIN for FY 2017-2018): 16AACAT3FC & 17AACAT3FC
- D. Federal Award Date (FY 2017-2018): 2017-2018
- E. **Subaward Period of Performance (FY 2017-2018):** July 1, 2017 to June 30, 2018
- F. Total Amount of Federal Funds Obligated by the Action (FY 2017-2018): \$797,481

CFDA	FAIN	Award Date	Formula Funds	Amount
93.052	16AACAT3FC	2017	Title III-E	\$199,370.25
93.052	17AACAT3FC	2018	Title III-E	\$598,110.75
			TOTAL:	\$797,481

- G. Total Amount of Federal Funds Obligated to the Subrecipient (FY 2017-2018): \$797,481
- H. Total Amount of the Federal Award (FY 2017-2018): \$797,481

FY 2018/2019:

C. Federal Award Identification Number (FAIN for FY 2018-2019): 18AACAT3FC and 19AACAT3FC

- D. Federal Award Date (FY 2018-2019): 2018-2019
- E. Subaward Period of Performance (FY 2018-2019): July 1, 2018 to June 30, 2019
- F. Total Amount of Federal Funds Obligated by the Action (FY 2018-2019): \$1,086,313

CFDA	FAIN	Award Date	Formula Funds	Amount
93.052	18AACAT3FC	2018	Title III-E	\$271,578.25
93.052	19AACAT3FC	2019	Title III-E	\$814,734.75
			TOTAL:	\$1,086,313

- G. Total Amount of Federal Funds Obligated to the Subrecipient (FY 2018-2019): \$1,086,313
- H. Total Amount of the Federal Award (FY 2018-2019): \$1,086,313

FY 2019/2020:

- C. Federal Award Identification Number (FAIN for FY 2019-2020): 1901CAOAFC-01 and 2001CAOAFC-00
- D. Federal Award Date (FY 2019-2020): 2019-2020
- E. Subaward Period of Performance (FY 2019-2020): July 1, 2019 to June 30, 2020
- F. Total Amount of Federal Funds Obligated by the Action (FY 2019-2020): \$1,070,716

CFDA	FAIN	Award Date	Formula Funds	Amount
93.052	1901CAOAFC-01	2019	Title III-E	\$267,679
93.052	2001CAOAFC-00	2020	Title III-E	\$803,037
			TOTAL:	\$1,070,716

- G. Total Amount of Federal Funds Obligated to the Subrecipient (FY 2019-2020): \$1,070,716
- H. Total Amount of the Federal Award (FY 2019-2020): \$1,070,716
- I. **Federal Award Project Description:** National Family Caregiver Support, Title III, Part E
- J. **Federal Awarding Agency:** U.S. Department of Health and Human Services; Administration for Community Living
- K. Name of PTE: California Department of Aging and County of Orange Office on Aging
- L. Contact Information for the Awarding Official: Ericka Danczak, Director (714) 480-6465, Ericka.Danczak@occr.ocgov.com

- M. CFDA Number and Name: 93.052 Title III-E: National Family Caregiver Support
- N. Whether Award is R&D: No
- O. Indirect Cost Rate for the Federal Award: 10%



COMPENSATION/PAYMENT FAMILY CAREGIVER SUPPORT PROGRAM SERVICES

1. **COMPENSATION:**

This is a CONTRACT between the COUNTY and the SUBRECIPIENT for \$1,070,716 as set forth in Attachment A. Scope of Services attached hereto and incorporated herein by reference. The SUBRECIPIENT agrees to accept the specified compensation as set forth in this CONTRACT as full remuneration for performing all services and furnishing all staffing and materials required, for any reasonably unforeseen difficulties which may arise or be encountered in the execution of the services until acceptance, for risks connected with the services, and for performance by the SUBRECIPIENT of all its duties and obligations hereunder. The COUNTY shall have no obligation to pay any sum in excess of the total CONTRACT amount specified unless authorized by an amendment in accordance with paragraphs C and R of the COUNTY's General Terms and Conditions.

2. FIRM DISCOUNT AND PRICING STRUCTURE:

SUBRECIPIENT guarantees that prices quoted are equal to or less than prices quoted to any other local, State or Federal government entity for services of equal or lesser scope. SUBRECIPIENT agrees that no price increases shall be passed along to the COUNTY during the term of this CONTRACT not otherwise specified and provided for within this CONTRACT.

3. PAYMENT TERMS:

An invoice for the cost of services/activities shall be submitted to the address specified below upon the completion of the services/activities and approval of the COUNTY Project Manager. SUBRECIPIENT shall reference CONTRACT number on invoice. Payment will be net 30 days after receipt of an invoice in a format acceptable to the COUNTY of Orange and verified and approved by OC Community Services and subject to routine processing requirements of the COUNTY. The responsibility for providing an acceptable invoice rests with the SUBRECIPIENT.

Billing shall cover services not previously invoiced. The SUBRECIPIENT shall reimburse the COUNTY of Orange for any monies paid to the SUBRECIPIENT for services not provided or when services do not meet the CONTRACT requirements.

Payments made by the COUNTY shall not preclude the right of the COUNTY from thereafter disputing any items or services involved or billed under this CONTRACT and shall not be construed as acceptance of any part of the services. Invoice(s) are to be sent to:

OC Community Resources Accounting

601 N. Ross St., 6th Floor

Santa Ana, CA 92701

4. INVOICING INSTRUCTIONS:

Further instructions regarding invoicing/reimbursement as set forth in Exhibit 2-OC Community Resources Contract Reimbursement Policy, as amended on January 17, 2020, are attached hereto and incorporated herein by reference.

The SUBRECIPIENT will provide an invoice on SUBRECIPIENT's letterhead for services rendered. Each invoice will have a number and will include the following information:

The Demand Letter/Invoice must include Delivery Order (DO) Number, Contract Number, Service date(s) – Month of Service along with other required documentation (See Exhibit 2, as amended on January 17, 2020).

5. OC COMMUNITY RESOURCES CONTRACT REIMBURSEMENT POLICY:

Further instructions regarding invoicing/reimbursements as set forth in Exhibit 2 – OC Community Resources Contract Reimbursement Policy, as amended on January 17, 2020, are attached hereto and incorporated herein by reference.



BUDGET FAMILY CAREGIVER SUPPORT PROGRAM SERVICES Title III-E FUNDING

1. SUBRECIPIENT's Budget

Cost Categories	Budgeted Costs
Personnel	\$824,749
Travel and Training	\$0
Equipment	\$0
Consultant/Professional Services	\$169,002
Other Costs	\$76,965
Indirect Costs	\$0
Total Budgeted Costs	\$1,070,716

25% Match		Match Amount
	Cash	\$356,905
	In-Kind	\$0
Total Match		\$356,905

2. The above Cost Categories is an overview of the actual budget approved by the Office on Aging. SUBRECIPIENT shall be responsible for and maintain the approved Budget Summary by Funding Source and Revenue Sources spreadsheet that is provided to SUBRECIPIENT from Office on Aging. The Budget Summary by Funding Source and Revenue Sources spreadsheet shall be maintained and completed in accordance with the Office on Aging policies and processes. Any deviation from the Office on Aging approved budget, may and can delay acceptance of budgets and/or reimbursements.

3. Payments

SUBRECIPIENT agrees that any and all funds received under this CONTRACT annually for each respective fiscal year shall be disbursed on or before June 30, and that any and all funds remaining as of June 30 annually, which have not been disbursed shall be returned by SUBRECIPIENT to COUNTY within thirty (30) days of the expiration or earlier termination of the CONTRACT in accordance with Paragraph K of this CONTRACT. No expense of SUBRECIPIENT will be reimbursed by COUNTY if incurred after June 30 of each fiscal year.

Upon the effective date of this CONTRACT, COUNTY shall make payment to SUBRECIPIENT in accordance with the following payment schedule:

- A. <u>Monthly Payments:</u> Beginning August 1, upon receipt and approval by OC Community Resources OC Community Services of SUBRECIPIENT's invoice showing prior month(s) actual expenditures, COUNTY shall make monthly reimbursement payments based on SUBRECIPIENT's invoice so long as the total payments under this CONTRACT do not exceed the CONTRACT maximum obligation.
- B. <u>COUNTY Discretion</u>: At the sole discretion of COUNTY, payments to SUBRECIPIENT may be made more frequently than monthly, but such payments shall always be in arrears and not in advance of the provision of services by SUBRECIPIENT.
- C. <u>Invoices:</u> SUBRECIPIENT shall provide monthly invoices by the 10th day following the month being reported. Invoices shall show the most up to date costs chargeable to the program(s) referenced in this CONTRACT.
- D. If SUBRECIPIENT expenditures for any program referenced in this CONTRACT fall below 20% of planned expenditures for any cumulative period commencing from the beginning of the term of this CONTRACT, SUBRECIPIENT may be subject to a reduction in funding. No payments will be authorized if any preceding month's reports or invoices have not been received.

STAFFING PLAN

St. Jude Family Caregiver Resource Center July 1, 2019 – June 30, 2020

Title	FTE*
Director	1.00
Program Supervisor	1.00
Social Worker – MSW Syp	1.00
Social Worker – MSW PL	1.00
Social Worker – BSW NE	1.00
Social Worker – BSW CK	1.00
Social Worker – BSW TTH	1.00
Social Worker – BSW ADLK	1.00
Social Worker – MSW AT	1.00
Social Worker – MSW PN	1.00
Admin Assistant – RC	1.00
Admin Assistant – AK	1.00
Accounting Support IB/AM	0.20
TOTAL:	12.20

^{*1.00} FTE = Full-Time Equivalent

The substitution or addition of other key individuals in any given category or classification shall be allowed only with prior written pre-approval of the County Project Manager.

The County may reserve the right to involve other personnel, as their services are required. The specific individuals will be assigned based on the need and time of the service/class required. Assignment of additional key personnel shall be subject to County approval.



Subject: OC Community Resources Effective: July 1, 2010
Contract Reimbursement Policy Revised: January 17, 2020

PURPOSE:

This policy contains updated fiscal documentation requirements for contract reimbursement for OC Community Services and OC Housing & Community Development. The procedures provide instructions for submitting reimbursement demand letter or invoice.

REFERENCES:

Executed County Board of Supervisors approved contract
Budget included in contract or presented as an attachment
48 CFR Part 31 Contract Cost Principles and Procedures
24 CFR Parts 85, 570.502, 570.201, 576.21, 576.51 and 576.61: For OC Housing & Community Development Contracts only.

2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance)

BACKGROUND:

The executed Board of Supervisors approved contract is the authorization for all aspects of payment, including the maximum amount to be paid, the payee, and the scope of services and work. Payments are made in strict accordance with the contract terms. Allowable costs are identified in referenced Uniform Guidance and Code of Federal Regulations (CFR).

ATTACHMENTS:

Reimbursement Policy Status Form (RPS-1)

POLICY:

Contractor is responsible for the submission of accurate claims. This reimbursement policy is intended to ensure that the Contractor is reimbursed based on the code or codes that correctly describe the services provided. This information is intended to serve only as a general reference resource regarding OC Community Services' and OC Housing & Community Development's reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, OC Community Services and OC Housing & Community Development may use reasonable discretion in interpreting and applying this policy to services provided in a particular case. Other factors affecting reimbursement may supplement, modify or, in some cases, supersede this policy. These factors may include, but are not limited to: legislative mandates and County directives. OC Community Services and OC Housing & Community Development may modify this reimbursement policy at any time by publishing a new version of the policy. However, the information presented in this policy is accurate and current as of the date of publication.

Cost incurred by Contractor must be substantiated and incurred during the contract period. Total of all reimbursements cannot exceed the amount of the contract. Cost must be allowable under applicable Code of Federal Regulations (CFR) or Uniform Guidance. All supporting documentation for reimbursement must be submitted with demand letter or invoice. If contract

requires matching contribution, documentation substantiating contribution match must be submitted with demand letter or invoice.

At any time, based on County's business needs and/or Contractor's performance, the County may designate Contractor to submit abbreviated or comprehensive documentation, as identified in the respective sections. Upon designation, Contractor will be notified, in writing via Reimbursement Policy Status Form, of which requirements are in full force. When Contractor is required to submit comprehensive documentation, in addition to the items identified in the Abbreviated Documentation Requirements Section, Contractor must also provide the documentation identified in the Comprehensive Documentation Requirements Section.

PROCEDURES:

Abbreviated Documentation Requirements

Compile and submit:

- 1. Supporting documentation includes, but is not limited to:
 - a. General ledger/expense transaction report
 - b. Payroll register or labor distribution report
 - c. Payroll allocation plan
 - d. Personnel Documentation
 - e. Benefit plan and calculation of benefit
 - f. Employer-employee contract for non-customary benefits (if applicable)
 - g. Pre-approval documentation for equipment purchases equal to or greater than \$5.000
- 2. The following is required with the first month's invoice only:
 - a. Cost allocation plan for rent, utilities, etc.
 - b. Indirect rate approved by cognizant agency (if applicable)
- 3. Summary of leveraged resources (if applicable)
- 4. Demand letters must contain the following certification (if required by Contract):
 - "By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31 Sections 3729-3730 and 3801-3812)"
- 5. Grantee Performance Report (if required by Contract)
- 6. Supporting documentation shall be on single-sided sheets
- 7. Please redact employees' Social Security Number from payroll reports
- 8. Demand letter or invoice, along with supporting documentation shall be submitted to:

OC Community Resources Accounting

601 N. Ross St., 6th Floor

Santa Ana, CA 92701

Comprehensive Documentation Requirements

In addition to abbreviated documentation, compile and submit:

- 9. Purchase orders, invoices, and receipts
- 10. Cashed checks
- 11. Check register
- 12. Consultant/sub-contractor invoices (with description of services)
- 13. Travel expense documentation: mileage reimbursement, hotel bill, meal reimbursement

ACTION:

Distribute this policy to all appropriate staff

<u>INQUIRIES:</u> Inquiries may be directed to OCCR Accounts Payable at: OCCRAccountsPayable@occr.ocgov.com



Reimbursement Policy Status Form

Per OC Community Resources Contract Reimbursement Policy, in regards to the Contract # listed herein, Contractor is designated with the Documentation Status of Abbreviated unless Comprehensive is checked below. If the contractor's designation should change to Abbreviated, a new status form shall be approved. All related documentation requirements are in full force, until further notice.

Contractor: St. Jude Hos	spital, Inc. dba St.	Jude Medical Center
Effective Date: March 24,	, 2020	
Contract #: 17-27-0025-F	FCSP	
Documentation Status:		□ Comprehensive
**********	*******	*****************
Program Authorization b	y:	Auditor Controller Authorization by:
Print Name		Print Name
Signed by:		Signed by:
Date:	Date:	

Distribution:

Contractor Auditor Controller Contract File Program File

Two signatures are required to implement the form.