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STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301-6527
603-271-4517 1-800-852-3345 Ext. 4517
Fax: 603-271-4519 TDD Access: 1-800-735-2964

NH DIVISION OF Public Health Services
Improving health, preventing disease, reducing costs for all

Nicholas A. Toumpas
Commissioner

José Thier Montero
Director

April 3, 2013

Her Excellency, Governor Margaret Wood Hassan
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, Bureau of Population Health and Community Services, Maternal and Child Health to exercise a contract renew and amend option with Child Health Services, Purchase Order #1022981, Vendor #177266-B002, 1245 Elm Street, Manchester, New Hampshire 03101, by increasing the Price Limitation by $413,550 from $275,700 to $689,250 to provide personal responsibility education services, and extend the Completion Date from June 30, 2013 to June 30, 2016, effective July 1, 2013 or the date of Governor and Council approval, whichever is later. This Agreement was originally approved by Governor and Council on May 9, 2012, Item #34. Funds are anticipated to be available in the following accounts for SFY 2014, SFY 2015 and SFY 2016 upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts within the price limitation and amend the related terms of the contract without further approval from Governor and Executive Council.

05-95-90-902010-1844 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF POPULATION HEALTH AND COMMUNITY SERVICES, FED NH PREP GRANT

100% FED

Fiscal Year	Class/Object	Class Title	Job Number	Current Modified Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2012	102-500731	Contracts for Prog Svc	90018440	$128,596	$0	$128,596
SFY 2013	102-500731	Contracts for Prog Svc	90018440	$147,104	$0	$147,104
SFY 2014	102-500731	Contracts for Prog Svc	90018440	$0	$137,850	$137,850
SFY 2015	102-500731	Contracts for Prog Svc	90018440	$0	$137,850	$137,850
SFY 2016	102-500731	Contracts for Prog Svc	90018440	$0	$137,850	$137,850
			Total	$275,700	$413,550	$689,250

EXPLANATION

Funds in this amendment will be used to provide pregnancy prevention and adult skill preparation programs for teens and young adults in the City of Manchester. The curriculum will focus on building personal responsibility skills among 17-19 year olds and pregnant/parenting adolescents up to age 21 through topics such

as prevention of pregnancy and sexually transmitted infection; Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome; healthy relationships; adolescent development; financial literacy; parent-child communication and education and employment skills.

The New Hampshire Division of Public Health Services is committed to helping young people avoid teen pregnancy and sexually transmitted infections by supporting programs that promote healthy and essential life skills. The goal of this funding is to decrease teen birth rates, pregnancies and sexually transmitted infections among 17-19 year olds, as well as, parenting and pregnant teens/young adults up to age 21, in areas of the state with demonstrated need.

New Hampshire is fortunate that it currently has the lowest teen birth rate in the country. In calendar year 2012, 5.1% of births in New Hampshire were those to teen mothers, with a birth rate of 13.7 births per 1,000 teens 15-19. Most teen births (75%) in the state are to 18-19 year olds.

Currently Manchester has among the highest teen birth rate at 33.8 births/1,000 from the years 2010-2012. With support from the Department of Health and Human Services, Administration for Children, Youth and Families for the Personal Responsibility Education Program, the New Hampshire Division of Public Health Services, Maternal and Child Health Section, will be able to provide an opportunity to support evidence-based, teen pregnancy and Sexually Transmitted Infection prevention curricula focused on the city of Manchester.

Should Governor and Executive Council not authorize this request, teen births in Manchester may increase. Without these funds, New Hampshire could face increased long-term costs associated with health care and social services due to unintended pregnancies.

Child Health Services was selected for this project for the City of Manchester target area through a competitive bid process, a bidders conference was held on December 2, 2011. The Request for Proposal was posted on the Department of Health and Human Services web site from November 23, 2011 through December 23, 2011 soliciting proposals to provide services in the city of Manchester and Sullivan County.

The Request for Proposal sought to bid a project in Manchester and in Sullivan County. One for each target area was received. An evaluation committee of three reviewers, internal and external to the Division of Public Health Services, evaluated the proposals. All reviewers have experience in managing agreements with vendors with various public health programs or non-profit programs that serve women, adolescents or families. Areas of specific expertise include public health infrastructure, family planning and maternal and child health services. Reviewers evaluated proposals consistent with the evaluation criteria specified in the Request for Proposals. Both proposals were determined to be of sufficient quality to receive funding. The Request for Proposal scoring summary is attached.

As referenced in the original letter approved by Governor and Council on May 9, 2012, Item #34, and in the Request for Proposal, Renewals Section, this competitively procured Agreement has the option to renew for three (3) additional year(s), contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Council. The Division is exercising this renewal option. These services were contracted previously with this agency in SFY 2012 and SFY 2013 in the amount of $275,700. This represents an increase of $137,850. This increase is due to an additional year of funding.

The following performance measures will be used to measure the effectiveness of the agreement.

Performance Measure #1: 50% of participants ages 17-19, who complete evidence based teen prevention programs, will demonstrate increased knowledge about safer sex practices, including abstinence.

Performance Measure #2: 50% of participants ages 17-19, will complete evidence, based teen prevention programs, and have greater confidence to communicate with parents about their sexual health.

Performance Measure #3: 50% of sexually active participants, ages 17-21, who complete evidence based teen prevention programs, will use contraception to prevent pregnancy the next time they have sexual intercourse.

Performance Measure #4: 50% of participants, ages 17-21, who complete the evidence based teen prevention program, will have improved healthy life skills (e.g. decision making, goal setting, financial literacy, education and career success).

Area served: Manchester, New Hampshire.

Source of Funds: 100% Federal funds from US Department of Health and Human Services, Administration for Children and Families.

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

Respectfully submitted,

Lisa L for

José Thier Montero, MD
Director

Approved by:

Nicholas A. Toumpas
Commissioner

JTM/MRJ/jf

Program Name PREP
Contract Purpose Educational Services
RFP Score Summary

RFA/RFP CRITERIA	Max Pts	Good Beginnings Claremont, NH	Child Health Services Manchester, NH								
Agy Capacity	30	25 00	26 30								
Program Structure	50	38.30	45.30								
Budget & Justification	15	10.50	10 00								
Format	5	4.70	5.00								
Total	100	78.50	86.60	0.00	0.00	0.00	0.00	0 00	0 00	0.00	0.00

BUDGET REQUEST											
Year 01		75,000.00	137,850.00								
Year 02		75,500.00	137,850.00								
Year 03			-	-	-	-	-	-	-	-	-
TOTAL BUDGET REQUEST		150,500.00	275,700.00	-	-	-	-	-	-	-	-
BUDGET AWARDED											
Year 01		62,450.00	137,850.00								
Year 02		87,550.00	137,850.00								
Year 03		-	-	-	-	-	-	-	-	-	-
TOTAL BUDGET AWARDED		150,000.00	275,700.00	-	-	-	-	-	-	-	-

RFP Reviewers

	Name	Job Title	Dept/Agency	Qualifications
1	Deidre Dunn	Home Visiting Program Manager	DHHS/DPHS	The reviewers represent seasoned public health administrators and program managers experienced in contract and vendor management, as well as professionals who work external to the Division of Public Health Services who hold leadership positions in municipal, nonprofit public health, and health policy advocacy organizations Each reviewer was selected for the specific skill set they possess and their experience with family planning and community health centers. The purpose of the review team is to compliment and build upon each of these perspectives for a well-balanced, objective review of the family planning proposals.
2	Rhonda Seigal	Injury Prevention Progarm Manager	DHHS/DPHS	
3	Susan Wnuk	FP Program Director	CAP Belknap/Merrimack Cty.	
4				
5				
6				
7				

EXERCISE OF OPTION TO RENEW AND AMEND ONE

This Agreement (hereinafter called the "Renew and Amend One") dated this 6 day of Feb, 2013 by and between the State of New Hampshire acting by and through its Division of Public Health Services of the Department of Health and Human Services, (hereinafter referred to as the "Division") and the Child Health Services, Purchase Order Number 1022981, a corporation organized under the laws of the State of New Hampshire, with a place of business at 1245 Elm Street, Manchester, New Hampshire 03101 (hereinafter referred to as the "Contractor").

WHEREAS, pursuant to an agreement (hereinafter called the "Agreement") dated May 9, 2012, Item #34, the Contractor agreed to perform certain services upon the terms and conditions specified in the Agreement and in consideration of payment by the Division of certain sums as specified therein;

WHEREAS, pursuant to the provision of Exhibit C, #17 of the Agreement, the Agreement may be renewed for a period of three additional years, pending availability of funding, the agreement of the parties, and approval by Governor and Council;

WHEREAS, pursuant to the provision of Section 18 of the Agreement, the Agreement may be modified or amended only by a written instrument executed by the parties thereto and only after approval of such modification or amendment by the Governor and Council;

WHEREAS, the Provider and the Division have agreed to Exercise the Option to Renew and Amend the Agreement in certain respects;

NOW THEREFORE, in consideration of the foregoing, and the covenants and conditions contained in the Agreement and set forth herein, the parties hereto do hereby agree as follows:

Contractor Initials: RAP
Date: 2/6/13

1. **Exercise Of Option To Renew and Amend For Three Additional Years:**

The Agreement is hereby amended as follows:

Amend Section 1.7 of the General Provisions by extending the completion date to June 30, 2016.

Amend Section 1.8 of the General Provisions by increasing the Price Limitation by $413,550 from $275,700 to $689,250.

Exhibit A – Scope of Services

The attached Exhibit A-1 (or A-2, 3, etc) revokes and replaces the original Exhibit A.

Exhibit B – Contract Price

Exhibit B of the Agreement, including any amendments thereto, is hereby amended as follows:

The contract price shall increase by $137,850 for SFY 14 and $137,850 for SFY 15 and $137,850 for SFY 16. The contract shall total $689,250 for the contract term.

Funding in the amount of $413,550 is available from 010-090-1844-102-500731, 100% Federal Funds from the US Department of Health and Human Services, Administration for Children and Families, CFDA #93.092.

2. **Effective Date of Renew and Amend:**

This Renew and Amend shall take effect on July 1, 2013 or the date of Governor and Council approval, whichever is later.

3. **Continuance of Renewal Agreement:**

Except as specifically amended and modified by the terms and conditions of this Renew and Amend, the Agreement and the obligations of the parties hereunder, shall remain in full force and effect in accordance with the terms and conditions set forth therein.

Contractor Initials: KAP
Date: 2/6/13

The remainder of this page is intentionally left blank.

Contractor Initials: DAA
Date: 2/6/13

IN WITNESS WHEREOF, the parties have hereunto set their hands as of the day and year first above written.

STATE OF NEW HAMPSHIRE
Division of Public Health Services

By: _____ 4/23/13
Lisa L. Bujno, APRN — Date
Bureau Chief

By: Lisa DiBrigida, MD, Medical Director — 2/6/13
Name and Title of Contractor Signator — Date

Child Health Services
Legal Name of Agency

STATE OF NEW HAMPSHIRE

COUNTY OF Hillsborough

On this the 6 day of February 2013, before me, Catheryn Burchett (name of notary), the undersigned officer, Lisa DiBrigida (contract signatory) personally appeared who acknowledged him/herself to be the Medical Director (signatory's title) of the Child Health Services (legal name of agency), a corporation, and that he/she, as such Medical Director (signatory's title), being authorized so to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation by him/herself as Medical Director (signatory's title) of the Child Health Services (legal name of agency).

In witness whereof I hereunto set my hand and official seal.

Catheryn Burchett

Notary Public/Justice of the Peace

My Commission expires:

CATHERYN BURCHETT, Notary Public
My Commission Expires August 19, 2014

Approved as to form, execution and substance:

OFFICE OF THE ATTORNEY GENERAL

By: Joanne P. Herrick

~~Assistant~~ Attorney ~~General~~

Date: 11 Apr. 2013

I hereby certify that the foregoing contract was approved by the Governor and Council of the State of New Hampshire at the Meeting on: _____.

OFFICE OF THE SECRETARY OF STATE

By: _____

Title: _____

NH Department of Health and Human Services

Exhibit A-1
Scope of Services

Personal Responsibility Education Program

CONTRACT PERIOD: July 1, 2013 or date of G&C approval, whichever is later, through June 30, 2016

CONTRACTOR NAME: **Child Health Services**

ADDRESS: **1245 Elm Street**
Manchester, NH 03101

Social Services Director: **Katy Burchett**
TELEPHONE: **603-629-9707**

This Exhibit A-1 revokes and replaces the original Exhibit A

The Contractor shall:

I. General Provisions

A) State and Federal Laws

The contractor is responsible for compliance with all relevant state and federal laws. Special attention is called to the following statutory responsibilities:

1. The Contractor shall report all cases of communicable diseases according to New Hampshire RSA 141-C and He-P 30, effective 01/05.

2. Persons employed by the Contractor shall comply with the reporting requirements of New Hampshire RSA 169:C, Child Protection Act; RSA 161:F46, Protective Services to Adults and RSA 631:6, Assault and Related Offenses.

B) Numbers Served

The contractor will facilitate the implementation of chosen curricula for at least 125 participants age 17-19 year olds, as well as, parenting and pregnant teens/young adults up to age 21 in Manchester, NH.

C) Relevant Policies and Guidelines

Contractor Initials: LAD
Date: 2/6/13

The contractor shall promulgate appropriate policies and guidelines to ensure the consistency and adequacy of work performed by subcontracted agencies and shall, through regular meetings and through quality reviews, monitor and provide support to the work of these agencies.

D) Publications Funded Under Contract

1. The DHHS and/or its funders will retain COPYRIGHT ownership for any and all original materials produced with DHHS contract funding, including, but not limited to, brochures, resource directories, protocols or guidelines, posters, or reports.

2. All documents (written, video, audio) produced, reproduced or purchased under the contract shall have prior approval from BCHS before printing, production, distribution, or use.

3. The Contractor shall credit DHHS on all materials produced under this contract following the instructions outlined in Exhibit C1 (5).

E) Subcontractors

1. If any services required by this exhibit are provided, in whole or in part, by a subcontracted agency or provider, the Division of Public Health Services (DPHS), Maternal and Child Health Section must be notified in writing prior to initiation of the subcontract.

2. The original DPHS contractor will remain responsible and liable for all requirements included in this exhibit and carried out by subcontractors.

F) Culturally and Linguistically Appropriate Standards of Care

The Department of Health and Human Services (DHHS) recognizes that culture and language have considerable impact on how consumers access and respond to public health services. Culturally and linguistically diverse populations experience barriers in efforts to access health services. To ensure equal access to quality health services, the Division of Public Health Services (DPHS) expects that Contractors shall provide culturally and linguistically appropriate services according to the following guidelines:

1. Assess the ethnic/cultural needs, resources and assets of their community.

2. Promote the knowledge and skills necessary for staff to work effectively with consumers with respect to their culturally and linguistically diverse environment.

3. When feasible and appropriate, provide clients of limited English proficiency (LEP) with interpretation services. Persons of LEP are defined as those who do not speak English as their primary language and whose skills in listening to, speaking, or reading English are such that they are unable to adequately understand and participate in the care or in the services provided to them without language assistance.

4. Offer consumers a forum through which clients have the opportunity to provide feedback to providers and organizations regarding cultural and linguistic issues that may deserve response.
5. The Contractor shall maintain a program policy that sets forth compliance with Title VI, Language Efficiency and Proficiency. The policy shall describe the way in which the items listed above were addressed and shall indicate the circumstances in which interpretation services are provided and the

Contractor Initials: LAD
Date: 2/6/13

method of providing service (e.g. trained interpreter, staff person who speaks the language of the client or language line).

II. Minimal Standards of Core Services

A) Service Requirements

The contractor shall carry out the work as described and submitted with the application for funding and as approved by the Maternal and Child Health Section. Either party may amend the performance work plan upon 30 days advance written notice to the other party with the other party's approval.

The Contractor shall administer the Personal Responsibility Education Program in the City of Manchester and shall perform the following services:

1. Maintina a local "implementation" team to include, at a minimum, education, home visiting, and reproductive health professionals and agencies, as well as youth participants.

2. Implement the following curricula:
   1. ***Focus*** (clinical or community based setting)

3. Provide training for selected personal responsibility curricula (Focus)

4. Ensure the adaptions of the curricula continue to include the following required topics:
   - Abstinence
   - Contraception for the prevention of pregnancy and Sexually Transmitted Infections
   - Select and include no less than three (3) of the following "pre-adulthood education" components:
     - Healthy relationships, such as positive self-esteem and relationship dynamics, friendships, dating, romantic involvement, marriage (where applicable), and family interactions.
     - Educational and career success, such as developing skills for employment preparation, job seeking, independent living, financial self-sufficiency, and work-place productivity.
     - Healthy life skills, such as goal setting, decision making, negotiation, communication and interpersonal skills, and stress management.
     - Adolescent Development, such as skills that lead to empowerment, promotion of healthy developmental attitudes, and strengthening the connection to their community.
     - Parent-Child Communication, such as developing activities to increase and/or foster communication between parents and their children as it relates to sexual health and education.

     - Financial Literacy, such as developing skills for a level of basic knowledge or competence about financial concepts such as the ability to balance a checkbook, manage a credit card, prepare a budget, take out a loan, and buy insurance.

Contractor Initials: LAP
Date: 2/6/13

All adaptations to evidence based-curricula must follow federal guidance and be approved by model developers

5. Implementation of the chosen curricula for at least 125 participants in the City of Manchester.

6. Work with the State-identified evaluation specialist, to collect, evaluate and report to the Division of Public Health Services, Maternal and Child Health Section, all required data on program activities and evaluation to include, but not limited to, output measures, fidelity/adaptations, implementation and capacity building, outcome measures, and community data.

7. Attend the State Adolescent Sexual Health Task Force, which will serve as an overall advisory committee to implementation.

8. Attend the Federal grantees' meeting as required by this funding.

B) Coordination of Services

1. The contractor shall coordinate, where possible at the community level, services with the Leadership in Abstinence Education Program, also coordinated by the Maternal and Child Health Section.

2. As appropriate, the Contractor should participate in community needs assessments, public health performance assessments, and the development of regional public health improvement plans through collaboration with the local Public Health Regions, as may be appropriate, to enhance the implementation of community-based public health prevention initiatives being implemented by the contractor.

C) Staffing Provisions

1. New Hires

The Contractor shall notify the MCHS in writing within one month of hire when a new administrator or coordinator or any staff person essential to carrying out this scope of services is hired to work in the program. A resume of the employee shall accompany this notification.

2. Vacancies

The Contractor must notify the MCHS in writing if the executive director or program coordinator position is vacant for more than three months. This may be done through a budget revision. In addition, the MCHS must be notified in writing if at any time any site funded under this agreement does not have adequate staffing to perform all required services for more than one month.

II. Quality or Performance Improvement (QI/PI)

A) Workplans

1. Performance Logic Models are required annually for this program and are used to monitor achievement of standard measures of performance of the services provided under

Contractor Initials: LAP
Date: 2/6/13

this contract. The logic models are a key component of the MCHS performance-based contracting system and of this contract.

2. Performance Logic Models and Data Outcome reports will be submitted according to the schedule and instructions provided by the MCHS. The MCHS shall notify the Contractor at least 30 days in advance of any changes in the submission schedule.

3. The Contractor shall incorporate required and developmental performance measures within a logic model format, defined by the MCHS into the agency's QI/PI plan. Reports on Progress/ Outcomes shall detail the QI/PI plans and activities that monitor and evaluate the agency's progress toward performance measure targets.

B) Data and reporting requirements

The Contractor shall submit to MCHS the following data used to monitor program performance:

1. The Contractor shall provide all information as requested, including, but not limited to, Federal and state documentation forms and performance indicator outcomes for inclusion in documentation submitted by MCHS to the Administration on Children, Youth, and Families. This happens on a bi-annual schedule, as yet to be determined.

2. The Contractor shall, for purposes of program evaluation and federal reporting, collect and submit personally identifiable health data, for all clients served under this contract. Contractors shall be responsible for obtaining any authorizations for release of information from the clients that is necessary to comply with federal and state laws and regulations. All forms developed for authorization for release of information must be approved by DPHS prior to their use.

3. In years when contracts or amendments are not required, the DPHS Budget Form, Budget Justification, Sources of Revenue and Program Staff list forms must be completed according to the relevant instructions and submitted as requested by DPHS and, at minimum, by April 30 of each year.

4. The Sources of Revenue report must be resubmitted at any point when changes in revenue threaten the ability of the agency to carry out the planned program.

B) On-site reviews

1. The contractor shall allow a team or person authorized by the Maternal and Child Health Section to periodically review the contractor's systems of governance, administration, data collection and submission, programmatic, and financial management in order to assure systems are adequate to provide the contracted services.

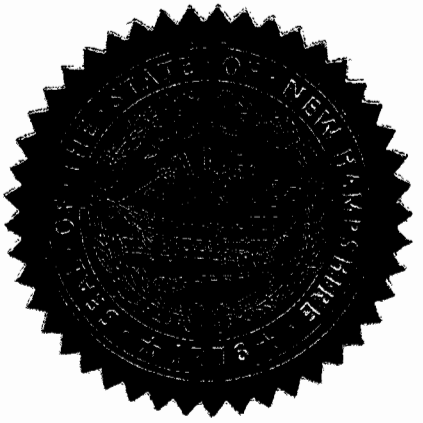
The contractor shall make corrective actions as advised by the review team if contracted services are not found to be provided in accordance with this exhibit.

Contractor Initials: LAD
Date: 2/6/13

State of New Hampshire
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that Child Health Services is a New Hampshire nonprofit corporation formed July 23, 1979. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 1st day of April A.D. 2013

William M. Gardner
Secretary of State

CERTIFICATE OF VOTE/AUTHORITY

I, Laurie Glaude, Board Clerk of Child Health Services, do hereby certify that:

1. I am the duly elected Board Clerk of Child Health Services;

2. The following are true copies of two resolutions duly adopted at a meeting of the Board of Directors of Child Health Services, duly held on February 6, 2013.

   RESOLVED: That this Corporation may enter into any and all contracts, amendments, renewals, revisions or modifications thereto, with the State of New Hampshire, acting through its Department of Health and Human Services, for the provision of Personal Responsibility Education Program services.

   RESOLVED: That the Medical Director is hereby authorized on behalf of this Corporation to enter into said contracts with the State, and to execute any and all documents, agreements, and other instruments, and any amendments, revisions, or modifications thereto, as he/she may deem necessary, desirable or appropriate. Lisa DiBrigida, MD is the Medical Director of the Corporation.

3. The foregoing resolutions have not been amended or revoked and remain in full force and effect as of February 6, 2013.

IN WITNESS WHEREOF, I have hereunto set my hand as the Board Clerk of Child Health Services this 6th day of February 2013.

Laurie Glaude, Board Clerk

STATE OF NH

COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 6th day of February, 2013 by Laurie Glaude in his/her capacity as Board Clerk of Child Health Services, on behalf of said entity.

Catheryn Burchett

Notary Public/Justice of the Peace

My Commission Expires: CATHERYN BURCHETT, Notary Public
My Commission Expires August 19, 2014

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/5/2013

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

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

PRODUCER
FIAI/Cross Ins-Manchester
1100 Elm Street

Manchester NH 03101

CONTACT NAME: Kari Reeves
PHONE (A/C, No, Ext): (603) 669-3218 FAX (A/C, No): (603) 645-4331
E-MAIL ADDRESS: kreeves@crossagency.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Maryland Casualty Co	19356
INSURER B: Maine Employers Mutual Ins Co.	
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURED
CHILD HEALTH SERVICES, INC.
1245 ELM ST

MANCHESTER NH 03101

COVERAGES CERTIFICATE NUMBER: CL1292072344 REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [X] POLICY [ ] PRO-JECT [ ] LOC			PAS000105207	9/7/2012	9/7/2013	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 1,000,000 $ 1,000,000 $ 10,000 $ 1,000,000 $ 2,000,000 $ 2,000,000 $
	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] ALL OWNED AUTOS [ ] HIRED AUTOS [ ] SCHEDULED AUTOS [ ] NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ $ $ $ $
	[ ] UMBRELLA LIAB [ ] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $						EACH OCCURRENCE AGGREGATE	$ $ $
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y/N [N] (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		3102801035 (3a.) NH All officers included	9/7/2012	9/7/2013	[X] WC STATUTORY LIMITS [ ] OTHER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ 500,000 $ 500,000 $ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Refer to policy for exclusionary endorsements and special provisions. 10 Day Cancellation for Non-Payment of Premium

CERTIFICATE HOLDER

NH Department of Health & Human Services
29 Hazen Drive
Concord, NH 03301

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Kari Reeves/KAS Kari A. Reeves

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HOWE RILEY+ HOWE
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
Child Health Services
Manchester, New Hampshire

We have audited the accompanying statements of financial position of **Child Health Services** (a New Hampshire nonprofit corporation) as of June 30, 2012 and 2011, and the related statements of activities, functional expenses and cash flows for the years then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and the significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Child Health Services as of June 30, 2012 and 2011, the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with *Government Auditing Standards*, we have also issued our report dated December 13, 2012 on our consideration of Child Health Services' internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be read in conjunction with this report in assessing the results of our audit.

Our audits were conducted for the purpose of forming an opinion on the financial statements of Child Health Services taken as a whole. The accompanying schedule of expenditures of federal awards as of June 30, 2012 is presented for purposes of additional analysis as required by U.S. Office of Management and Budget Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the financial statements as a whole.

Howe, Riley + Howe, PLLC

December 13, 2012

CHILD HEALTH SERVICES
Statements of Financial Position
June 30, 2012 and 2011

ASSETS

	2012	2011
Cash and cash equivalents	133,439	276,794
Accounts receivable (net of valuation allowance of $143,441 in 2012 and $66,360 in 2011)	278,427	184,886
Contributions receivable	122,718	117,453
Contributions receivable restricted for long-term purposes	10,000	21,342
Investments	1,951,639	2,029,584
Prepaid expenses and deposits	24,038	22,953
Cash restricted for the acquisition of property and equipment	71,670	77,063
Property and equipment, net of accumulated depreciation	404,893	447,855
Total assets	$ 2,996,824	$ 3,177,930

LIABILITIES AND NET ASSETS

LIABILITIES		
Line of credit	117,000	-
Note payable	20,000	30,000
Accounts payable	104,732	82,609
Other accrued expenses	51,285	59,502
Accrued payroll and related expenses	58,926	37,805
Accrued annual leave	94,385	74,029
Refundable advances	7,941	7,941
Total liabilities	454,269	291,886
NET ASSETS (DEFICIT)		
Unrestricted:		
Board designated	22,420	22,497
Undesignated	(28,606)	241,703
Total unrestricted	(6,186)	264,200
Temporarily restricted net assets	565,385	642,961
Permanently restricted net assets	1,983,356	1,978,883
Total net assets	2,542,555	2,886,044
Total liabilities and net assets	$ 2,996,824	$ 3,177,930

The accompanying notes are an integral part of these financial statements.

CHILD HEALTH SERVICES
Statement of Activities
For the Year Ended June 30, 2012

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
PUBLIC SUPPORT				
Received directly:				
Contributions	327,082	39,597	4,473	371,152
Special events	53,359	-	-	53,359
Received indirectly:				
Allocations by the United Way	33,453	130,000	-	163,453
Total public support	413,894	169,597	4,473	587,964
GRANTS	1,621,047	-	-	1,621,047
OTHER REVENUE				
Program fees	541,678	215,279	-	756,957
In-kind donations	29,310	-	-	29,310
Net investment income (loss)	(253)	(8,655)	-	(8,908)
Miscellaneous revenue	13,459	-	-	13,459
Total other revenue	584,194	206,624	-	790,818
NET ASSETS RELEASED FROM RESTRICTIONS				
Expiration of time restriction - United Way and advocate	164,649	(164,649)	-	-
Restrictions satisfied by payments for specified purposes	284,148	(284,148)	-	-
Total net assets released from restrictions	448,797	(448,797)	-	-
Total public support and revenue	3,067,932	(72,576)	4,473	2,999,829
EXPENSES				
Program services:				
Clinical services	1,279,789	-	-	1,279,789
Special medical services and ISG	1,250,389	-	-	1,250,389
Teen Health Clinic	224,009	-	-	224,009
Special projects, advocacy and other	26,277	-	-	26,277
Total program services	2,780,464	-	-	2,780,464

(Continued)

CHILD HEALTH SERVICES
Statement of Activities
For the Year Ended June 30, 2012

(Continued)

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Supporting services:				
Management and general	413,971	-	-	413,971
Fundraising	148,883	-	-	148,883
Total supporting services	562,854	-	-	562,854
Total expenses	3,343,318	-	-	3,343,318
CHANGES IN NET ASSETS, before net assets released from restrictions for capital expenditures	(275,386)	(72,576)	4,473	(343,489)
Net assets released from restrictions upon satisfaction of restriction for capital expenditures	5,000	(5,000)	-	-
CHANGES IN NET ASSETS	(270,386)	(77,576)	4,473	(343,489)
NET ASSETS - beginning of year	264,200	642,961	1,978,883	2,886,044
NET ASSETS (DEFICIT) - end of year	$ (6,186)	$ 565,385	$ 1,983,356	$ 2,542,555

The accompanying notes are an integral part of these financial statements.

CHILD HEALTH SERVICES
Statement of Activities
For the Year Ended June 30, 2011

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
PUBLIC SUPPORT				
Received directly:				
Contributions	551,573	14,974	5,679	572,226
Special events	79,311	-	-	79,311
Received indirectly:				
Allocations by the United Way	28,305	125,000	-	153,305
Total public support	659,189	139,974	5,679	804,842
GRANTS	1,727,281	-	-	1,727,281
OTHER REVENUE				
Program fees	538,962	142,598	-	681,560
In-kind donations	31,037	-	-	31,037
Net investment income	151,820	189,519	-	341,339
Miscellaneous revenue	14,463	-	-	14,463
Total other revenue	736,282	332,117	-	1,068,399
NET ASSETS RELEASED FROM RESTRICTIONS				
Expiration of time restriction - United Way and advocate	154,974	(154,974)	-	-
Restrictions satisfied by payments for specified purposes	276,607	(276,607)	-	-
Total net assets released from restrictions	431,581	(431,581)	-	-
Total public support and revenue	3,554,333	40,510	5,679	3,600,522
EXPENSES				
Program services:				
Clinical services	1,322,246	-	-	1,322,246
Special medical services and ISG	1,185,421	-	-	1,185,421
Teen Health Clinic	236,204	-	-	236,204
Special projects, advocacy and other	19,103	-	-	19,103
Total program services	2,762,974	-	-	2,762,974

(Continued)

CHILD HEALTH SERVICES
Statement of Activities
For the Year Ended June 30, 2011

(Continued)

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Supporting services:				
Management and general	432,959	-	-	432,959
Fundraising	170,074	-	-	170,074
Total supporting services	603,033	-	-	603,033
Total expenses	3,366,007	-	-	3,366,007
CHANGES IN NET ASSETS, before net assets released from restrictions for capital expenditures	188,326	40,510	5,679	234,515
Net assets released from restrictions upon satisfaction of restriction for capital expenditures	41,453	(41,453)	-	-
CHANGES IN NET ASSETS	229,779	(943)	5,679	234,515
NET ASSETS - beginning of year	34,421	643,904	1,973,204	2,651,529
NET ASSETS - end of year	$ 264,200	$ 642,961	$ 1,978,883	$ 2,886,044

The accompanying notes are an integral part of these financial statements.

CHILD HEALTH SERVICES
Statement of Functional Expenses
For the Year Ended June 30, 2012

	Clinical Services	Special Medical Services and ISG	Teen Health Clinic	Special Projects, Advocacy and Other	Total Program Services	Management and General	Fundraising	Total Supporting Services	Total
Salaries	807,448	471,346	140,002	17,644	1,436,440	132,450	89,649	222,099	1,658,539
Payroll taxes	82,391	52,011	13,978	1,472	149,852	12,904	8,127	21,031	170,883
Employee benefits	153,464	74,830	22,617	1,685	252,596	22,992	14,250	37,242	289,838
Audit fees	-	-	-	-	-	26,600	-	26,600	26,600
Consulting fees:									
Clinical	14,096	556,830	8,894	-	579,820	-	-	-	579,820
Administrative	-	3,523	-	-	3,523	-	1,022	1,022	4,545
Secretarial	-	14,106	-	-	14,106	-	-	-	14,106
Other	2,236	-	-	-	2,236	-	1,141	1,141	3,377
Interpretation services	54,685	5,665	788	-	61,138	-	-	-	61,138
Payroll processing	-	-	-	-	-	9,983	-	9,983	9,983
Financial service fees	-	-	-	-	-	58,100	-	58,100	58,100
Insurance	29,984	3,775	88	-	33,847	7,686	-	7,686	41,533
Development and fund raising costs	-	-	-	-	-	-	22,293	22,293	22,293
Program supplies	9,561	1,742	8,703	-	20,006	-	-	-	20,006
Office supplies	1,632	6,940	809	-	9,381	5,649	1,006	6,655	16,036
Printing	85	-	-	-	85	120	329	449	534
Minor equipment purchases and leases	1,584	6,396	-	-	7,980	11,724	1,624	13,348	21,328
Occupancy costs	21,452	10,682	6,490	2,989	41,613	15,878	1,216	17,094	58,707
Telephone	324	2,065	-	-	2,389	28,642	-	28,642	31,031
Parking costs	450	-	-	-	450	1,350	-	1,350	1,800
Information systems expense	7,034	11,081	-	-	18,115	4,813	1,131	5,944	24,059
Employee related costs:									
Auto mileage	512	15,702	-	-	16,214	258	-	258	16,472
Recruitment fees	4,438	-	-	-	4,438	273	-	273	4,711
Staff development	375	1,393	5,100	-	6,868	8,002	326	8,328	15,196
Vehicle costs	7,757	-	-	-	7,757	-	-	-	7,757
Special assistance to clients	14,046	227	1,685	-	15,958	-	-	-	15,958
Client transportation	36,865	-	-	-	36,865	-	-	-	36,865
Postage	25	27	-	-	52	6,454	310	6,764	6,816
Repairs and maintenance	826	-	-	-	826	9,163	2,671	11,834	12,660
Permits, licenses and fees	616	24	75	-	715	8,074	-	8,074	8,789
Miscellaneous	1,419	484	6,446	-	8,349	9,103	95	9,198	17,547
Interest expense	-	-	-	-	-	131	-	131	131
Total before depreciation and in-kind expenses	1,253,305	1,238,849	215,675	23,790	2,731,619	380,349	145,190	525,539	3,257,158
Loss on fixed asset disposal	15	9	330	-	354	2	2	4	358
Depreciation	21,896	11,209	8,004	2,487	43,596	17,705	1,691	19,396	62,992
In-kind expenses	4,573	322	-	-	4,895	15,915	2,000	17,915	22,810
Total expenses	$ 1,279,789	$ 1,250,389	$ 224,009	$ 26,277	$ 2,780,464	$ 413,971	$ 148,883	$ 562,854	$ 3,343,318

The accompanying notes are an integral part of these financial statements.

CHILD HEALTH SERVICES
Statement of Functional Expenses
For the Year Ended June 30, 2011

	Clinical Services	Special Medical Services and ISG	Teen Health Clinic	Special Projects, Advocacy and Other	Total Program Services	Management and General	Fundraising	Total Supporting Services	Total
Salaries	827,137	462,712	152,741	9,346	1,451,936	151,346	100,912	252,258	1,704,194
Payroll taxes	76,274	42,587	13,692	813	133,366	12,793	9,091	21,884	155,250
Employee benefits	157,926	68,888	27,356	1,198	255,368	26,512	12,256	38,768	294,136
Audit fees	-	-	-	-	-	27,900	-	27,900	27,900
Consulting fees:									
Clinical	23,830	509,071	2,616	-	535,517	-	-	-	535,517
Administrative	-	5,130	-	-	5,130	-	1,225	1,225	6,355
Development	-	-	-	-	-	-	-	-	-
Secretarial	-	17,274	-	-	17,274	-	-	-	17,274
Other	1,544	-	4,342	-	5,886	-	-	-	5,886
Interpretation services	59,520	7,342	1,444	754	69,060	-	-	-	69,060
Payroll processing	-	-	-	-	-	11,427	-	11,427	11,427
Financial service fees	-	-	-	-	-	56,787	-	56,787	56,787
Insurance	31,466	3,602	1,076	-	36,144	7,348	-	7,348	43,492
Development and fund raising costs	-	-	-	-	-	-	37,428	37,428	37,428
Program supplies	8,306	6,878	11,198	-	26,382	-	-	-	26,382
Office supplies	1,451	6,748	1,443	-	9,642	4,473	1,411	5,884	15,526
Printing	-	232	-	-	232	38	133	171	403
Minor equipment purchases and leases	630	5,286	28	-	5,944	9,044	235	9,279	15,223
Occupancy costs	19,264	10,796	6,476	4,511	41,047	16,049	1,229	17,278	58,325
Telephone	-	2,208	-	-	2,208	28,501	-	28,501	30,709
Parking costs	-	-	-	-	-	1,728	-	1,728	1,728
Information systems expense	256	2,994	135	-	3,385	5,714	-	5,714	9,099
Employee related costs:									
Auto mileage	342	14,479	-	-	14,821	93	-	93	14,914
Recruitment fees	1,938	-	161	-	2,099	-	-	-	2,099
Staff development	551	6,900	120	-	7,571	6,900	680	7,580	15,151
Vehicle costs	8,338	-	-	-	8,338	-	-	-	8,338
Special assistance to clients	17,681	689	2,999	-	21,369	-	-	-	21,369
Client transportation	33,774	-	-	-	33,774	-	-	-	33,774
Postage	51	123	-	-	174	6,989	44	7,033	7,207
Repairs and maintenance	200	-	-	-	200	13,123	2,644	15,767	15,967
Permits, licenses and fees	578	86	121	-	785	4,012	-	4,012	4,797
Miscellaneous	2,009	173	1,850	-	4,032	8,736	379	9,115	13,147
Interest expense	-	-	-	-	-	259	-	259	259
Total before depreciation and in-kind expenses	1,273,066	1,174,198	227,798	16,622	2,691,684	399,772	167,667	567,439	3,259,123
Loss on fixed asset disposal	-	-	-	-	-	-	-	-	-
Depreciation	36,137	11,223	8,306	2,481	58,147	15,629	2,071	17,700	75,847
In-kind expenses	13,043	-	100	-	13,143	17,558	336	17,894	31,037
Total expenses	$ 1,322,246	$ 1,185,421	$ 236,204	$ 19,103	$ 2,762,974	$ 432,959	$ 170,074	$ 603,033	$ 3,366,007

The accompanying notes are an integral part of these financial statements.

CHILD HEALTH SERVICES
Statements of Cash Flows
For the Years Ended June 30, 2012 and 2011

	2012	2011
CASH FLOWS FROM OPERATING ACTIVITIES:		
Changes in net assets	(343,489)	234,515
Adjustments to reconcile changes in net assets to net cash from operating activities:		
Depreciation and amortization	62,992	75,847
Contributions of marketable securities	(25,236)	(45,945)
Loss on fixed asset disposal	358	-
In-kind donation of fixed asset	(6,500)	-
Contributions restricted for long-term purposes	(4,473)	(5,679)
Realized and unrealized (gain) loss on investments	42,119	(307,417)
Investment income reinvested	(50,010)	(49,672)
Decrease (increase) in:		
Accounts receivable	(93,541)	(17,452)
Prepaid expenses and deposits	(1,085)	17,620
Contributions receivable	(5,265)	1,129
Increase (decrease) in:		
Accounts payable	17,123	30,246
Accrued expenses	(8,217)	12,332
Accrued payroll and related expenses	21,121	2,733
Accrued annual leave	20,356	16,592
Refundable advances	-	(28,013)
Net cash used for operating activities	(373,747)	(63,164)
CASH FLOWS FROM INVESTING ACTIVITIES:		
Proceeds from sale of securities	576,509	462,143
Acquisition of securities	(465,437)	(334,059)
Decrease (increase) in cash restricted for the acquisition of property and equipment, net	5,393	384
Additions to property and equipment	(8,888)	(42,397)
Net cash provided by investing activities	107,577	86,071
CASH FLOWS FROM FINANCING ACTIVITIES:		
Borrowings on line of credit, net	117,000	-
Payments received on contributions restricted for long-term purposes	6,342	28,251
Repayments for note payable	(5,000)	(5,000)
Contributions restricted for long-term purposes	4,473	5,679
Net cash provided by financing activities	122,815	28,930

(Continued)

CHILD HEALTH SERVICES
Statements of Cash Flows
For the Years Ended June 30, 2012 and 2011

	2012	2011
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	(143,355)	51,837
CASH AND CASH EQUIVALENTS - beginning of year	276,794	224,957
CASH AND CASH EQUIVALENTS - end of year	$ 133,439	$ 276,794
SUPPLEMENTAL INFORMATION:		
Interest paid on short-term borrowings	$ 131	$ 259

NON-CASH INVESTING AND FINANCING ACTIVITIES:

During the 2012 and 2011 fiscal years, the Organization received donations of stock valued at $25,236 and $45,945, respectively.

During the 2012 and 2011 fiscal years, the Organization's note payable was reduced by $5,000 each year for the portion forgiven (Note 14).

During 2012, the Organization received a fixed asset donation valued at $6,500.

At June 30, 2012, $5,000 of fixed asset additions were payable to vendors.

The accompanying notes are an integral part of these financial statements.

CHILD HEALTH SERVICES
Supplemental Information
Schedule of Expenditures of Federal Awards
June 30, 2012

Federal Grantor/Pass-through Grantor/Program Title	Federal CFDA Number	Pass-Through Entity Identifying Number	Federal Expenditures
U.S. Department of Health and Human Services			
Pass-through programs from:			
State of New Hampshire, Department of Health & Human Services, Division of Public Health Services			
Maternal and Child Services (Primary care)	93.994	010-090-5190-102-500734	11,878
Maternal and Child Services (Teen Health Care)	93.994	010-090-5190-102-500731	24,000
State of New Hampshire, Department of Health & Human Services, Division of Community Based Care Services			
Comprehensive Nutrition Network	93.994	1005026	85,732
Community Based Care Services	93.994	1000523	52,838
Neuromotor Disabilities Program	93.994	1000531	104,409
Child Development Program Network	93.994	1000522	207,186
Total MCH Block Grant			486,043
State of New Hampshire, Department of Health & Human Services, Division of Public Health Services			
Family Planning Services	93.217	010-090-5530-102-500734	26,975
Personal Responsibility Education Program	93.092	010-090-1844-102-500731	30,172
Family Planning – TANF	93.558	010-045-6146-502-500891	4,981
State of New Hampshire, Department of Health & Human Services, Division of Community Based Care Services			
ARRA -Regional Child Development Clinic	84.393	ARRA 3.6	4,084
Catholic Medical Center			
Poisson Dental Facility	93.991		726
Bureau of Developmental Services			
Facets of Epilepsy Care in NH	93.110	010-093-5949-102-0731	34,112

(Continued)

CHILD HEALTH SERVICES
Supplemental Information
Schedule of Expenditures of Federal Awards
June 30, 2012

(Continued)

Federal Grantor/Pass-through Grantor/Program Title	Federal CFDA Number	Pass-Through Entity Identifying Number	Federal Expenditures
State of New Hampshire, Department of Health & Human Services, Office of Minority Health and Refugee Affairs			
OMHRA Mini-Grant Mental Health	93.296	010-095-5010-95097003	2,000
Total Health and Human Services			589,093
U.S. Department of Housing and Urban Development			
Pass-through programs from:			
City of Manchester, NH			
Community Development Block Grant	14.218	211409	70,000
Community Development Block Grant	14.218	211308	20,000
Total Housing and Urban Development			90,000
U.S. Environmental Protection Agency			
Pass-through programs from:			
City of Manchester, NH			
Manchester's Multi-lingual Asthma Education and Outreach Program	66.110	213908	294
Total expenditures of federal awards			$ 679,387

Note 1 - The Schedule of Expenditures of Federal Awards is prepared on the cash basis of accounting. The information in this Schedule is presented in accordance with the requirement of OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Therefore some amounts presented in this Schedule may differ from amounts presented in or used in the preparation of the basic financial statements.

Note 2 - The City of Manchester Community Development block grant in the amount of $20,000 is a loan.

Child Health Services

Mission Statement

Established in 1980, Child Health Services is dedicated to improving the health and well being of at risk children and adolescents in the Greater Manchester area. A fully integrated system of bio-psychosocial health care, social services, nutrition services and behavioral and mental health services, CHS is a medical home designed to help children and families function to their full capacity.

CHILD HEALTH SERVICES

Board Of Directors *2013-2014*

Andrea G. Chatfield, Esq.
*11/2013***
Committee(s): Human Resources

Kathleen A. Davidson, Esq.
11/2013
Committee(s): Development

CHS - Secretary
Laurie Glaude, PHR
*11/2013***
Committee(s): Human Resources, Executive

CHS - Treasurer
Ted Krantz
*11/2013***
Committee(s): Finance, Executive

Gary Lindner, DMD
*11/2015***
Committee(s): Development, Executive

Robert MacPherson
11/2013
Committee(s): Human Resources

Christine Madden
*11/2013***
Committee(s): Finance

CHS – Vice-President
Denise McDonough
11/2013
Committee(s): Development, Executive

Brian McLaughlin
*11/2015***
Committee(s): Development

John M. Mercier
11/2013
Committee(s): Development

CHS President
Steven Paris, MD
1/2016
Committee(s): Professional Advisory, Executive

Timothy Riley
*11/2014***
Committee(s): Development, Executive

Norm Turcotte
*11/2013***
Committee(s): Development, Executive

REV January 2013 Child Health Services' by-laws limit Board members to six consecutive year of service. Terms of office are for three years.
** Denotes that a board member is serving a second term.

KEY ADMINISTRATIVE PERSONNEL

NH Department of Health and Human Services
Division of Public Health Services

Agency Name: Child Health Services

Name of Bureau/Section: BPHCS, Maternal & Child Health, PREP

BUDGET PERIOD:	SFY 2014	July 1, 2013 - June 30, 2014	
Name & Title Key Administrative Personnel	Annual Salary Of Key Administrative Personnel	Percentage of Salary Paid By Contract	Total Salary Amount Paid By Contract
Lisa DiBrigida, MD - Medical Director	$96,459	5.00%	$4,822.93
Katy Burchett, LICSW - Program Director	$59,670	2.50%	$1,491.75
Sarah Ake, MSW - Program Coordinator	$43,680	100.00%	$43,680.00
	$0	0.00%	$0.00
	$0	0.00%	$0.00
	$0	0.00%	$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)			$49,994.68

BUDGET PERIOD:	SFY 2015	July 1, 2014 - June 30, 2015	
Name & Title Key Administrative Personnel	Annual Salary Of Key Administrative Personnel	Percentage of Salary Paid By Contract	Total Salary Amount Paid By Contract
Lisa DiBrigida, MD - Medical Director	$96,459	5.00%	$4,822.93
Katy Burchett, LICSW - Program Director	$59,670	2.50%	$1,491.75
Sarah Ake, MSW - Program Coordinator	$43,680	100.00%	$43,680.00
	$0	0.00%	$0.00
	$0	0.00%	$0.00
	$0	0.00%	$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)			$49,994.68

BUDGET PERIOD:	SFY 2016	July 1, 2015 - June 30, 2016	
Name & Title Key Administrative Personnel	Annual Salary Of Key Administrative Personnel	Percentage of Salary Paid By Contract	Total Salary Amount Paid By Contract
Lisa DiBrigida, MD - Medical Director	$96,459	5.00%	$4,822.93
Katy Burchett, LICSW - Program Director	$59,670	2.50%	$1,491.75
Sarah Ake, MSW - Program Coordinator	$43,680	100.00%	$43,680.00
	$0	0.00%	$0.00
	$0	0.00%	$0.00
	$0	0.00%	$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)			$49,994.68

Key Administrative Personnel are top-level agency leadership (President, Executive Director, CEO, CFO, etc), and individuals directly involved in operating and managing the program (project director, program manager, etc.). These personnel MUST be listed, **even if no salary is paid from the contract**. Provide their name, title, annual salary and percentage of annual salary paid from agreement.

LISA ALLARD DIBRIGIDA, MS, MD
1245 Elm St
Manchester, NH 03101

EMPLOYMENT EXPERIENCE

MEDICAL

Medical Director, Manchester, NH April 2008 to Present
Child Health Services

Pediatrician, Manchester, NH
Child Health Services April 2003 to Present
Serve as a member of a primary health care team of professionals who provide a medical home for children and adolescents who have special needs: including those with developmental disabilities, those from low income homes and frequently those who are in families who have recently immigrated to the US.

Assistant Professor, Manchester, NH
Massachusetts School of Pharmacy October 2000 to 2004
Teacher in the Physician's Assistant Program

- Newborn and Two Week Exam Class
- Adolescents I and II
- Physical Exam Skills Assessment

Pediatric Supervisor and Preceptor April 2003 to Present

Pediatrician, Manchester, NH September 1993 to February 1999
The Dartmouth Hitchcock Clinic

- Managed and provided care for children from infancy to adolescence
- Emphasized and specialized in, care for children with special needs, chronic healthcare conditions, and adolescent care
- Advocated for holistic family centered care for all children.

Hospital Staff, Manchester, NH September 1993 to September 1999
Elliot Hospital/Optima Healthcare, Catholic Medical Center, and Optima Healthcare.

CONSULTANT

Community Advocate, NH

Early Learning NH 2006-2007

Lead Poisoning Prevention Advisory Group 2007-2009

Asthma Advisory Group 2005-2008

Child Care Consultant, Manchester, NH August 2001-2003

- Medical consultant on Comprehensive team that includes educator and mental health providers
- Consultant to three Child Care facilities in the city of Manchester
- Observation of children within their child care environment
- Recommend improvements
- Aide in the implementation of plans to help children with optimal growth and development

Child Care Consultant Trainer, Concord, NH November 1999 to 2001

- Team member with NH DHHS training participants to become Child Care Consultants
- Providing ongoing support and technical assistance to Day Care Centers in Manchester

EDUCATOR

Kindergarten Teacher, Bedford, NH September 2000, Dec 2000 to January 2001

Bedford Village Morning School
Substitute in classroom of 12 children

- Afternoon daily school program
- Classroom of 18-22 children - Fridays

Assistant Kindergarten Teacher, Manchester, NH 1984-1985
Greater Manchester Child Care Center

VOLUNTEER EXPERIENCE

VNA of Manchester, Board Member	2008-Present
YMCA, Board Member	2006-Present
Executive Advisory Board	2007- Present
The Bean Foundation, Trustee	2004-2010
Chairman	2007-2009
Easter Seal Society, Board Member	1995 -2000
Chairman of the Board	2001- 2002
Child & Family Services, Board Member	1993-1996

EDUCATION

Dartmouth Medical School, Hanover, NH	MD June 1990
Wheelock College, Boston, MA	MS in Early Intervention, August 1986
Dartmouth College, Hanover, NH Third Honors Group, 1984	BA in Psychology, June 1984
Phillips Exeter Academy, Exeter, NH	Graduated with Honors, June 1980

TRAINING

Internship and Residency, Dartmouth/Hitchcock Medical Center, 1990-1993

AFFILIATIONS

Manchester Healthy Leadership Council
Multidisciplinary Advisory Group meeting monthly, coordinated by the Manchester Health Department

New Hampshire Pediatric Society
Treasurer, 1999-2002
Chairman of Child Health Month Committee
Member of Executive Committee, 1994- 2004

PUBLICATIONS

AL Olson and LA DiBrigida
Depressive symptoms and work role satisfaction in mothers of toddlers.
Pediatrics, 1994 94:363-367

CATHERYN BURCHETT
1245 Elm St.
Manchester, NH 03101
603 668-6629

EXPERIENCE

Child Health Services, Manchester, NH
Director, Behavioral Health and Family Support Programs April 2010 – Present

- Responsible for the Family Support and Behavioral Health Programs for a community-based medical clinic serving over 2000 low income children and their families in Manchester, NH.
- Supervise six full-time social service staff along with MSW student interns and VISTA volunteers.
- Develop and manage funding resources including local, state, and federal grant opportunities.
- Participate in local and statewide policy development and implementation around child and adolescent health.
- Member of Child Health Services Management Team participating in all aspects of agency planning and development.

Child Health Services – Teen Health Clinic, Manchester, NH
Teen Health Clinic Coordinator March 2008 – March 2010
Social Worker May 2005 – March 2010

- Provided information and referral, case management, and crisis intervention services to patients and families.
- Developed and implemented health education and prevention programming targeting adolescents.
- Developed, coordinated, and facilitated education and support groups for patients and families.
- Provided technical assistance to local providers and the community on adolescent health issues.
- Participated in local and statewide policy development and implementation around adolescent health issues.

Southern New Hampshire Medical Center, Nashua, NH
Clinical Social Worker 2004-2005

- Provided crisis intervention, case management, and supportive counseling services to patients and families.
- Provided referrals and resources as well as supportive counseling to oncology patients and their families in both inpatient and outpatient settings.
- Participated in hospital and community oncology related planning committees and initiatives.

Healthy Mothers, Health Babies, Seattle, WA
Hepatitis B Project Coordinator 2002-2003

- Developed, implemented, and managed statewide program to increase awareness of and immunization against hepatitis B.
- Participated in development and implementation of statewide immunization policy and project planning.
- Developed targeted hepatitis B prevention programs for specific high-risk populations including youth in secondary and high schools; youth in juvenile detention centers; and recent immigrant Asian and Pacific Islander communities.
- Provided professional consultation and technical assistance to local health jurisdictions, providers, and the community on hepatitis B prevention.

Washington Health Foundation, Seattle, WA
Statewide Campaign Coordinator, Campaign for Kids 2001 1999 -2001

- Developed, implemented and managed statewide program to increase enrollment of children in Medicaid and other health coverage plans.
- Provided policy and program analysis and developed advocacy strategies in support of improving access to healthcare; initiated and facilitated community discussion and input into state health policy and planning.
- Wrote and produced a high quality and innovative quarterly newsletter in support of the program.
- Managed VISTA volunteers at project sites around the state.
- Wrote major sections of Robert Wood Johnson Foundation grant and reports in support of the program.

Women's Healthcare Coordinator 1997-1999

- Developed and coordinated women's healthcare programming for the Community Health Access Program
- Identified and responded to gaps in healthcare access in the Seattle/King County community.

University of Washington Medical Center, Seattle, WA
Medical Social Worker, Women's and Children's Team 1994-1995

- Provided crisis intervention and case management services to patients and families.
- Developed, coordinated, and facilitated community education programs and family support groups.

Social Work Intern 1993-1994

- Provided crisis intervention and case management services to patients and families.
- Participated in various social services and healthcare community networks and advocacy groups.

YWCA of Seattle/King County, Seattle, WA
Social Work Intern 1992-1993

- Developed and prepared grant proposals for funding of emergency housing and job training programs and resources.
- Developed, prepared, and facilitated community job search support group for women.

US West New Vector Group, Bellevue, WA
Administrator, Purchasing and Materials Systems 1989-1994

- Provided system administration and support services and managed purchasing database.
- Developed and facilitated education and training programs for Purchasing and Materials Management departments.

Resource Center for Women and Families, Somerville, NJ
Case Manager 1986-1989

- Provided case management, counseling, and advocacy services to women and children in residential domestic violence program.
- Developed, coordinated, and facilitated support groups volunteer trainings and community education programs; supervised volunteers and student interns.

Morris County ARC, Morristown, NJ
Assistant Manager 1986

- Provided case management, counseling, and advocacy services to developmentally disabled adults in residential program.
- Managed operation of residence and supervision of staff

EDUCATION

University of Washington, Seattle, WA 1994
MSW, Social Work
GPA 3.87

Tufts University, Medford, MA 1985
BA Sociology
Graduated Cum Laude

SARAH GRACE AKE

[redacted]

OBJECTIVE

A challenging position in social work; utilizing my skills in direct services and community outreach to connect clients with services and promote healthy life skills.

EDUCATION & AWARDS

Masters in Social Work, May 2012
University of New Hampshire, Manchester NH

Bachelor's Degree in Social Work and Counseling, Completed May 2009
Franklin Pierce University, Rindge NH, GPA 3.78

Alpha Chi, (2009)
High Honors in Social Work (Franklin Pierce University 2009)
Outstanding Senior in Social Work Award (Franklin Pierce University 2009)

EXPERIENCE

PREP Coordinator, Child Health Services, Manchester, NH May 2012-Present

- Facilitates, coordinates, recruits and retains adolescent teen girls in a sexual health, evidence-based program.
- Mental health counseling with children and teens
- Community outreach to families to connect them to a medical home
- Actively learning grant-work in the social work field

Advanced Clinical Intern, Cynthia Day Family Center, Nashua, August 2011-May 2012

- Providing direct support to women and children in recovery from addiction
- Delivered clinical social work skills with clients on caseload
- Completed evidenced-based groups: *Nurturing Parenting* and *Thinking for a Change*
- Completed bio-psychosocial assessments, mental health assessments, and Alcohol Severity Index (ASI) with clients

Intern, Teen Health Clinic, Manchester, NH August 2010-May 2011

- Met with patients and assess social service needs
- Made referrals for patients to community resources
- Group work, outreach, and program development

Per Diem Residential Counselor, Brigids Crossing, Lowell, MA 2010-Jan 2012

- Supervising adolescent girls with their children in a residential setting
- Completing daily tasks set up by the program
- Encouraging independent living skills

Assistant Manager, Daniel Webster Bookstore, Nashua, NH October 2009- July 2011

- Provided Quality Customer Service
- Assisted General Manager in Daily Operations

Intern, Court Appointed Special Advocates, Keene, NH 2008-2009, 2010

- Organized Paperwork and Mail & Resource Cabinet
- Represented Child in Court including Monthly Visits with Child

Community Development, Fast Friends Greyhound Rescue June 2009-August 2009

- Created Connections between Community and Nonprofit
- Fundraising Event organizer & Basic grant writing

VOLUNTEER POSITIONS

- Volunteer at Keene Community Kitchen, Keene, NH (2007)
- Vice-Chair of the Judicial Board, Franklin Pierce University, Rindge, NH (2006-2009)
- Volunteer at Head Start, Jaffery, NH (2009)
- Volunteer trip to Santo Domingo, Dominican Republic
  March 10, 2012 - March 18, 2012
  Social Service Trip; Worked with Dominican Social Workers, Activists and Community Leaders
- Santo Domingo, Dominican Republic
  January 2, 2013-January 13, 2013

ADDITIONAL TRAININGS

- Provider Strategies to Improve Preconception Health (2010)
- Update on Strategic Planning for Community Health Improvement (2010)
- Health Educators Workshop: Safer Choices (2011)
- Cultural Effectiveness in Understanding Mental Health Issues & Suicide Risk for Diverse Populations (2011)
- MET/CBT Training (2012)
- Overcoming Stigma: Skills for Clients and Clinicians (2012)
- When Parents Return from Prison or Jail: Using a Family Centered Approach to Support Families Dealing with Reintegration Back into the Family and Community (2011)
- The Effects of Media on Child Health: *What We Know, What We Can Do* Workshop (2011)
- FOCUS Training (June 2012, August 2012)
  Social Service Trip; Construction on community center

REFERENCES

- References available upon request.

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD

Bidder/Program Name: Child Health Services

Budget Request for: Personal Responsibility Education Program
(Name of RFP)

Budget Period: July 1, 2013 - June 30, 2014

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	$ 76,218.00	$ 7,600.00	$ 83,818.00	See allocation method for indirect/fixed costs below
2. Employee Benefits	$ 15,500.00	$ 1,550.00	$ 17,050.00	
3. Consultants	$ -	$ -	$ -	
4. Equipment:	$ -	$ -	$ -	
Rental	$ -	$ -	$ -	
Repair and Maintenance	$ -	$ -	$ -	
Purchase/Depreciation	$ -	$ -	$ -	
5. Supplies:	$ -	$ -	$ -	
Educational	$ -	$ -	$ -	
Lab	$ -	$ -	$ -	
Pharmacy	$ -	$ -	$ -	
Medical	$ -	$ -	$ -	
Office	$ -	$ -	$ -	
6. Travel	$ 800.00	$ 80.00	$ 880.00	
7. Occupancy	$ -	$ -	$ -	
8. Current Expenses	$ -	$ -	$ -	
Telephone	$ -	$ -	$ -	
Postage	$ -	$ -	$ -	
Subscriptions	$ -	$ -	$ -	
Audit and Legal	$ -	$ -	$ -	
Insurance	$ -	$ -	$ -	
Board Expenses	$ -	$ -	$ -	
9. Software	$ -	$ -	$ -	
10. Marketing/Communications	$ 15,500.00	$ 1,550.00	$ 17,050.00	
11. Staff Education and Training	$ 1,000.00	$ 100.00	$ 1,100.00	
12. Subcontracts/Agreements	$ 16,320.00	$ 1,632.00	$ 17,952.00	
13. Other (specific details mandatory):	$ -	$ -	$ -	
	$ -	$ -	$ -	
	$ -	$ -	$ -	
	$ -	$ -	$ -	
TOTAL	**$ 125,338.00**	**$ 12,512.00**	**$ 137,850.00**	

Indirect As A Percent of Direct 10.0%

Standard agency indirect cost based on allocated general legal, management, audit, insurance, human resources, payroll, accounting, etc. = 15.95%. The actual total has been discounted to meet the limits of grant funds available – the additional amount of Indirect Fixed Cost will be covered by other CHS funds.

For DPHS use only

Maximum Funds Available - (DPHS program to enter total funds available)	**$ 137,850.00**
Reconciliation - (this line must be equal to or greater than $0)	**$ -**

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD

Bidder/Program Name: Child Health Services

Budget Request for: Personal Responsibility Education Program
(Name of RFP)

Budget Period: July 1, 2014 - June 30, 2015

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	$ 76,218.00	$ 7,600.00	$ 83,818.00	See allocation method
2. Employee Benefits	$ 15,500.00	$ 1,550.00	$ 17,050.00	for indirect/fixed costs
3. Consultants	$ -	$ -	$ -	below
4. Equipment:	$ -	$ -	$ -	
Rental	$ -	$ -	$ -	
Repair and Maintenance	$ -	$ -	$ -	
Purchase/Depreciation	$ -	$ -	$ -	
5. Supplies:	$ -	$ -	$ -	
Educational	$ -	$ -	$ -	
Lab	$ -	$ -	$ -	
Pharmacy	$ -	$ -	$ -	
Medical	$ -	$ -	$ -	
Office	$ -	$ -	$ -	
6. Travel	$ 800.00	$ 80.00	$ 880.00	
7. Occupancy	$ -	$ -	$ -	
8. Current Expenses	$ -	$ -	$ -	
Telephone	$ -	$ -	$ -	
Postage	$ -	$ -	$ -	
Subscriptions	$ -	$ -	$ -	
Audit and Legal	$ -	$ -	$ -	
Insurance	$ -	$ -	$ -	
Board Expenses	$ -	$ -	$ -	
9. Software	$ -	$ -	$ -	
10. Marketing/Communications	$ 15,500.00	$ 1,550.00	$ 17,050.00	
11. Staff Education and Training	$ 1,000.00	$ 100.00	$ 1,100.00	
12. Subcontracts/Agreements	$ 16,320.00	$ 1,632.00	$ 17,952.00	
13. Other (specific details mandatory):	$ -	$ -	$ -	
	$ -	$ -	$ -	
	$ -	$ -	$ -	
	$ -	$ -	$ -	
TOTAL	**$ 125,338.00**	**$ 12,512.00**	**$ 137,850.00**	
Indirect As A Percent of Direct		10.0%		

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For DPHS use only

Maximum Funds Available - (DPHS program to enter total funds available)	**$ 137,850.00**
Reconciliation - (this line must be equal to or greater than $0)	**$ -**

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD

Bidder/Program Name: Child Health Services

Budget Request for: Personal Responsibility Education Program
(Name of RFP)

Budget Period: July 1, 2015 - June 30, 2016

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	$ 76,218.00	$ 7,600.00	$ 83,818.00	See allocation method for indirect/fixed costs below
2. Employee Benefits	$ 15,500.00	$ 1,550.00	$ 17,050.00	
3. Consultants	$ -	$ -	$ -	
4. Equipment:	$ -	$ -	$ -	
Rental	$ -	$ -	$ -	
Repair and Maintenance	$ -	$ -	$ -	
Purchase/Depreciation	$ -	$ -	$ -	
5. Supplies:	$ -	$ -	$ -	
Educational	$ -	$ -	$ -	
Lab	$ -	$ -	$ -	
Pharmacy	$ -	$ -	$ -	
Medical	$ -	$ -	$ -	
Office	$ -	$ -	$ -	
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8. Current Expenses	$ -	$ -	$ -	
Telephone	$ -	$ -	$ -	
Postage	$ -	$ -	$ -	
Subscriptions	$ -	$ -	$ -	
Audit and Legal	$ -	$ -	$ -	
Insurance	$ -	$ -	$ -	
Board Expenses	$ -	$ -	$ -	
9. Software	$ -	$ -	$ -	
10. Marketing/Communications	$ 15,500.00	$ 1,550.00	$ 17,050.00	
11. Staff Education and Training	$ 1,000.00	$ 100.00	$ 1,100.00	
12. Subcontracts/Agreements	$ 16,320.00	$ 1,632.00	$ 17,952.00	
13. Other (specific details mandatory):	$ -	$ -	$ -	
	$ -	$ -	$ -	
	$ -	$ -	$ -	
	$ -	$ -	$ -	
TOTAL	**$ 125,338.00**	**$ 12,512.00**	**$ 137,850.00**	
Indirect As A Percent of Direct		10.0%		

Standard agency indirect cost based on allocated general legal, management, audit, insurance, human resources, payroll, accounting, etc. = 15.95%. The actual total has been discounted to meet the limits of grant funds available – the additional amount of Indirect Fixed Cost will be covered by other CHS funds.

For DPHS use only

Maximum Funds Available - (DPHS program to enter total funds available)	**$ 137,850.00**
Reconciliation - (this line must be equal to or greater than $0)	**$ -**

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301-6527
603-271-4517 1-800-852-3345 Ext. 4517
Fax: 603-271-4519 TDD Access: 1-800-735-2964

NH DIVISION OF Public Health Services
Improving health, preventing disease, reducing costs for all

Nicholas A. Toumpas
Commissioner

José Thier Montero
Director

March 16, 2012

APPROVED F/C _____
DATE _____
APPROVED G&C #34
DATE 5/9/12
NOT APPROVED _____

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, Bureau of Population Health and Community Services, Maternal and Child Health Section, to enter into an agreement with Child Health Services (Vendor #177266-B002), 1245 Elm Street, Manchester, New Hampshire 03101, to provide personal responsibility education services, to be effective March 14, 2012 or date of Governor and Council approval, whichever is later, through June 30, 2013, in an amount not to exceed $275,700.00. Funds are available in SFY 2012 and SFY 2013, with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-90-902010-1844 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF POPULATION HEALTH AND COMMUNITY SERVICES, FED NH PREP GRANT

Fiscal Year	Class/Object	Class Title	Job Number	Total Amount
SFY 2012	102-500731	Contracts for Prog Svc	90018440	$128,596
SFY 2013	102-500731	Contracts for Prog Svc	90018440	$147,104
			Sub-Total	$275,700

EXPLANATION

Funds in this agreement will be used to provide pregnancy prevention and adult skill preparation programs for teens and young adults in the City of Manchester. The curriculum will focus on building personal responsibility skills among 17-19 year olds and pregnant/parenting adolescents up to age 21 through topics such as prevention of pregnancy and sexually transmitted infection; Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome; healthy relationships; adolescent development; financial literacy; parent-child communication and education and employment skills.

New Hampshire Division of Public Health Services is committed to helping young people avoid teen pregnancy and sexually transmitted infections by supporting programs that promote healthy and essential life skills. The goal of this funding is to decrease teen birth rates, pregnancies and sexually transmitted infections among 17-19 year olds, as well as, parenting and pregnant teens/young adults up to age 21, in areas of the state with demonstrated need.

New Hampshire is fortunate that it currently has the lowest teen birth rate in the country. In calendar year 2007, 6.6% of births in New Hampshire were those to adolescent mothers (under 19), with a birth rate of 20.7 births per 1,000 teens 15-19. Most teen births (75%) in the state are to 18-19 year olds. Our state has shown the same trends apparent among all US states where the teen birth rate fell by more than one-third from 1991 through 2005, then increased by 5% over two consecutive years. New Hampshire data for 2008 and 2009, however, indicate that a downward trend has resumed. The percentage of repeat teen births generally mirrors a state's percentage of teen births, 13% of teen births in 2006 were to girls who were already young mothers.

Currently Manchester has among the highest teen birth rate at 39.4 births/1,000 from the years 2000-2006. Nine percent of births in Manchester were to teen mothers in 2007, which was a teen birth rate of 42.3/1000. With support from the Department of Health and Human Services, Administration for Children, Youth and Families for the Personal Responsibility Education Program, the New Hampshire Division of Public Health Services, Maternal and Child Health Section, will be able to provide an opportunity to support evidence-based, teen pregnancy and Sexually Transmitted Infection prevention curricula focused on the city of Manchester.

Should Governor and Executive Council not authorize this request, teen births in Manchester may continue to increase. Without these funds, New Hampshire could face increased long-term costs associated with health care and social services due to unintended pregnancies.

Child Health Services was selected for this project for the City of Manchester target area through a competitive bid process, a bidders conference was held on December 2, 2011. The Request for Proposal was posted on the Department of Health and Human Services web site from November 23, 2011 through December 23, 2011 soliciting proposals to provide services in the city of Manchester and Sullivan County.

The Request for Proposal sought to bid a project in Manchester and in Sullivan County. One for each target area was received. An evaluation committee of three reviewers, internal and external to the Division of Public Health Services, evaluated the proposals. All reviewers have experience in managing agreements with vendors with various public health programs or non-profit programs that serve women, adolescents or families. Areas of specific expertise include public health infrastructure, family planning and maternal and child health services. Reviewers evaluated proposals consistent with the evaluation criteria specified in the Request for Proposals. Both proposals were determined to be of sufficient quality to receive funding. The Request for Proposal scoring summary is attached.

As referenced in the Request for Proposals, Renewals Section, this competitively procured Agreement has the option to renew for three (3) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Council. This is the initial agreement with this Contractor for these services.

The following performance measures will be used to measure the effectiveness of the agreement.

- Among participants ages 17-19, who complete evidence, based teen prevention programs, the percent who indicate greater confidence to communicate with parents about their sexual health.
- Among participants ages 17-21, who complete evidence based teen prevention programs, the percent that demonstrate increased knowledge about safer sex practices, including abstinence.
- Among participants, ages 17-21, who complete evidence based teen prevention programs, the percent that demonstrate increased use of safer sex practices including abstinence.

- Among participants, ages 17-21, who complete the evidence based teen prevention programs, the percent who indicates improved healthy life skills (e.g. decision making, goal setting, financial literacy, education and career success).

Area served: Manchester, NH.

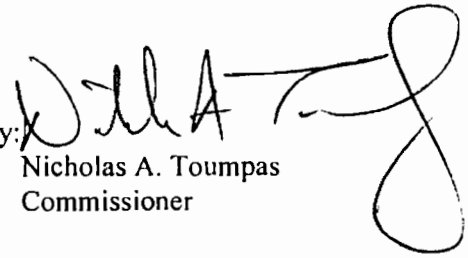
Source of Funds: 100% Federal funds from US Department of Health and Human Services, Administration for Children and Families.

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

Respectfully submitted,

José Thier Montero, MD
Director

Approved by:



Nicholas A. Toumpas
Commissioner

JTM/PT/jf

Marshal and the local fire protection agency, and shall be in conformance with local building and zoning codes, by-laws and regulations.

16. **Insurance:** Select either (1) or (2) below:

As referenced in the Request for Proposal, Comprehensive General Liability Insurance Acknowledgement Form, the Insurance requirement checked under this section is applicable to this contract:

Insurance Requirement for (1) - 501(c) (3) contractors whose annual gross amount of contract work with the State does not exceed $500,000, per RSA 21-I:13, XIV, (Supp. 2006): The general liability insurance requirements of standard state contracts for contractors that qualify for nonprofit status under section 501(c)(3) of the Internal Revenue Code and whose annual gross amount of contract work with the state does not exceed $500,000, is comprehensive general liability insurance in amounts of not less than $1,000,000 per claim or occurrence and $2,000,000 in the aggregate. *These amounts may NOT be modified.*

☐ (1) The contractor certifies that it **IS** a 501(c) (3) contractor whose annual total amount of contract work with the State of New Hampshire does **not** exceed $500,000.

Insurance Requirement for (2) - All other contractors who do not qualify for RSA 21-I:13, XIV, (Supp. 2006), Agreement P-37 General Provisions, 14.1 and 14.1.1. Insurance and Bond, shall apply: The Contractor shall, at its sole expense, obtain and maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, both for the benefits of the State, the following insurance: comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than $250,000 per claim and $2,000,000 per incident or occurrence. *These amounts MAY be modified if the State of NH determines contract activities are a risk of lower liability.*

☒ (2) The contractor certifies it does **NOT** qualify for insurance requirements under RSA 21-I:13, XIV (Supp. 2006).

The State of New Hampshire determined that the contract activities are of a low risk of liability, and the parties waive the requirement of paragraph 14 of the P-37 in that the contractor provide insurance in the amount of $2 million per incident and instead, accept the insurance provided by contractor in the amount of $1,000.000 per incident.

17. **Renewal:**

As referenced in the Request for Proposals, Renewals Section, this competitively procured Agreement has the option to renew for three (3) additional year(s), contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Council.

18. **Subparagraph 4 of the General Provisions of this contract, Conditional Nature of Agreement, is replaced as follows:**

4. CONDITIONAL NATURE OF AGREEMENT.
Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including without limitation, the continuance of payments, in whole or in part, under this Agreement are contingent upon continued appropriation or availability of funds, including any subsequent changes to the appropriation or availability of funds affected by any state or federal legislative or executive action that reduces, eliminates, or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope of Services provided in Exhibit A, Scope of Services, in whole or in part. In no event shall the State be liable for any payments hereunder in excess of appropriated or available funds. In the event

Contractor Initials: [illegible]

Date: 2-22-12