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ROBERT L. QUINN COMMISSIONER OF SAFETY State of New Hampshire DEPARTMENT OF SAFETY

OFFICE OF THE COMMISSIONER 33 HAZEN DR. CONCORD, N.H. 03305 603-271-2791

December 5, 2019

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

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Requested Action

Pursuant to RSA 21-P:12-a, authorize the Department of Safety, Division of Fire Standards and Training and Emergency Medical Services (FSTEMS) to enter into a sole source no-cost amendment to the grant agreement (PO#1070770) with the City of Concord (VC#177376-B005) for the purpose of expanding their mobile integrated healthcare (MIH) program, called NH Project FIRST, to include several additional communities. The original agreement was approved by Governor and Council on October 2, 2019 as item #43. This amendment is effective upon Governor and Council approval through September 29, 2020. Funding source: 100% Federal Funds.

Explanation

This amendment is sole source due to the change in work scope. This no-cost amendment is necessary to implement a regional approach to the services provided by the City of Concord in collaboration with interested communities of the Capital Area Mutual Fire Aid Compact. It will enable the Concord Fire Department to use their Program Director as a regional resource to support Capital Area first responder agencies to implement the NH Project FIRST (First responders Initiating Recovery, Support, and Treatment) initiatives. This program, which is already operating in the City of Concord, is designed to use specially trained first responders to connect at-risk individuals and their support systems to treatment and other services; train at-risk individuals and their support systems on overdose emergency care including the use of naloxone; and increase the number of first responders trained to carry and administer naloxone. In addition, the City of Concord will coordinate the implementation of a region-wide naloxone leave-behind initiative in which local first responders will have the ability to provide a dose of naloxone and just-in-time training on its use as well as informational materials on treatment while the individual is awaiting referrals.

Respectfully submitted,

Robert L. Quinn Commissioner of Safety

Contract Amendment

Expand Scope of Project (Purpose for Contract Amendment)

City of Concord (Subrecipient)

It is hereby agreed that the initial contract, approved by Governor and Council on October 2, 2019, Item #43, between the City of Concord (VC# 177376-B005) as "Contractor" and the Department of Safety, Division of Fire Standards and Training and Emergency Medical Services as "State," for the purpose of continuing a mobile integrated healthcare (MIH) program called NH Project FIRST is amended as follows:

1. EXHIBIT A, Scope of services, section 6.

Add a new section numbered 6 to read as follows:

"The Subrecipient" is expanding their MIH program, including the naloxone leave behind initiative, to serve the City of Concord and the additional 23 community members comprising the Capital Area Mutual Aid Fire Compact.

2. EXHIBIT A, Scope of services, section 7.

Add a new section numbered 7 to read as follows:

"The Subrecipient" is responsible for the overall direction and assignment of all grant funded activities. Some activities may be assigned to a Capital Area Mutual Fire Aid Compact community in accordance with the MOU in Exhibit D.

3. EXHIBIT D, Memorandum of Understanding.

Add a new exhibit, EXHIBIT D, MOU with the Capital Area Mutual Fire Aid Compact.

(Contractor) By: Thoma 7 Aspell Za Title: <u>City</u> Manager Company: City of Concard State of: New Hangshing

On the <u>3</u> day of <u>Decendent</u>, 20/? there appeared before me in the state and county foresaid, a person who satisfactorily identified himself as <u>Thomas</u> <u>Thomas</u> and acknowledged that he executed this document.</u>

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

County of: MuRRIMALLS

Notary Public/Justice of the Peace

My Commission Expires: JANICE BONENFANT, Notary Public State of New Hampshire My Commission Expires December 19, 2023

(Affix Seal)

STATE OF NEW HAMPSHIRE

By: ano

_____ Steven R. Lavoie, Dir. of Administration

The foregoing contract, having been reviewed by this office, is approved as to form, substance and execution

OFFICE OF THE ATTORNEY (GENERAL	
By: Assistant Attorney General	On: January 22	_, 20 2 O

Governor and Council of New Hampshire

On:_____, 20____

Signed: _____

Title:

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FIRE DEPARTMENT CITY OF CONCORD

24 Horseshoe Pond Lane Concord, NH 03301 www.onconcord.com/fire

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (MOU) is between the City of Concord-Concord Fire Department's Project FIRST Initiative and the Capital Area Mutual Aid Fire Compact specifically the following Departments/Agencies:

Allenstown Fire Rescue Boscawen Fire Department Bow Fire Rescue Bradford Fire Department Canterbury Fire & Rescue Chichester Fire Department Deering Fire and Rescue Dunbarton Fire Rescue Epsom Fire Rescue Henniker Fire and Rescue Hillsboro Fire Department Hopkinton Fire Department Hooksett Fire Department Loudon Fire Rescue Northwood Fire-Rescue Pembroke Fire Department Pittsfield Fire Department Salisbury Fire Rescue Warner Fire Rescue Webster Fire Department Washington Volunteer Fire Department Penacook Rescue Tri-Town Ambulance

PURPOSE: To establish a "Leave Behind" process for the Opioid Overdose Kits (kits) and to provide for the sharing of data as it relates to the specific communities overdose responses. Expanding the City of Concord's Project FIRST to support a regional program serving the additional 23 communities of the capital area.

CONCORD FIRE DEPARTMENT WILL:

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- 1) Coordinate activities specified in RSA 21-P:12-a and as outlined in the application and grant award documentation.
- 2) Provide education to the staff of the specific department/agency on the subjects of Substance Use Disorder-Opioid Use Disorder, Naloxone utilization and distribution of the Opioid Overdose Kits, and Compassion Fatigue. The classes will be presented by Jeffrey Stewart or his designee at a mutually agreed upon date, time, and location.
- .3) Coordinate the supply of State supplied Opioid Overdose Kits and the tracking information cards to the specific Capital Area Mutual Aid Fire Compact department/agency.

Administration	Prevention	Fire Alarm	Communications
(603) 225-8650	(603) 225-8651	(603) 225-8667	(603) 225-8669
(603) 225-5833 Fax	(603) 228-2782 Fax	(603) 225-8509 Fax	(603) 225-8507 Fax



FIRE DEPARTMENT

24 Horseshoe Pond Lane Concord, NH 03301 www.onconcord.com/fire

4) Acknowledge and be responsible for any and all grant activities and requirements performed by Concord Area Mutual Aid Fire Compact departments in relation to Concord Fire Department's Project FIRST program.

THE COMPACT DEPARTMENT/AGENCY WILL:

- 1) Implement a system and process to report back to CFD on a regular basis not to exceed quarterly;
 - a. When the kit was received
 - b. When the kit was distributed
 - c. How the kit was distributed at an emergency scene, community event, or other situation, and whether the kit was distributed to a person at risk or a significant other of the person at risk
- 2) Store and supply the naloxone kits in the manner specified by Concord Fire Department,
- 3) Implement a loss reporting and expiration monitoring mechanism
- 4) Authorize the Concord Fire Department and the State of New Hampshire's Department of Safety's Division of Fire Standards Training and EMS's to access TEMSIS data as it relates to the specific department/agency's activities under the Project FIRST grant. This data includes –
 - a. Run number
 - b. Age
 - c. Gender
 - d. Date of the Call
 - e. Time of the Call
 - f. Time on Scene
 - g. Transportation / Transportation Destination
 - h. Substance suspected or confirmed

Narrative

TERMINATION: This MOU may be terminated in part or in whole by the Compact or an individual department/agency may choose not to participate for any reason by notifying CFD in writing.

THIS MEMORANDUM OF UNDERSTANDING IS HEREBY EXECUTED ON:

<u>Administration</u> (603) 225-8650 (603) 225-5833 Fax <u>Prevention</u> (603) 225-8651 (603) 228-2782 Fax <u>Fire Alarm</u> (603) 225-8667 (603) 225-8509 Fax

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Communications (603) 225-8669 (603) 225-8507 Fax



FIRE DEPARTMENT CITY OF CONCORD

24 Horseshoe Pond Lane Concord, NH 03301 www.onconcord.com/fire

294 day of September, 2019

AND BY:

Keith Gilbert Chief Coordinator Capital Area Mutual Aid Fire Compact

Aaron McIntire Deputy Chief Concord Fire Department

Administration (603) 225-8650 (603) 225-5833 Fax Prevention (603) 225-8651 (603) 228-2782 Fax <u>Fire Alarm</u> (603) 225-8667 (603) 225-8509 Fax <u>Communications</u> (603) 225-8669 (603) 225-8507 Fax



CERTIFICATE OF AUTHORITY

I, Janice Bonenfant, as City Clerk of the City of Concord New Hampshire, hereby certify that Thomas J. Aspell, Jr. City Manager of the City of Concord New Hampshire, is authorized to act on behalf of the City of Concord in negotiating for and accepting grant funds in connection with the First Responder Comprehensive Addiction and Recovery Act (FR-CARA) Grant, per action taken by the Concord New Hampshire City Council on July 8, 2019.

OFFICIAL SEAL

 Signature:
 QUICENOILENAT

 Date:
 12-3-2019

Constraint Starting

NOTARIZATION

State of New Hampshire

County of Merrimack

On this 3rd day of December 2019, before me Sarah Copp the undersigned officer personally appeared Janice Bonenfant who acknowledged herself to be the City Clerk of the City of Concord NH and that she, as the City Clerk being authorized to do so, executed the foregoing instrument for the purpose of therein contained.

In witness thereof, I hereunto set my hand and official seal

Notary Public: Zarac LCOOP My Commission Expires: 1/24/2023





CERTIFICATE OF COVERAGE

The New Hampshire Public Risk Monogement Exchange (Primer[®]) is organized under the New Hampshire Revised Statutes Annotated, Chapter 6-8, Pooled Risk Management Programs, is accordance with these statutes, its Trust Agreement and bylaws, Primer[®] is authorized to provide pooled disk management programs established for the benefit of political subdivisions in the State of New Hampshire.

Each member of Primax³ is entitled to the categories of coverage set forth below. In addition, Primex³ may extend the same coverage to non-members, However, any coverage extended to a non-member is subject to all of the teams, contributes, exclusions, emendments, rules, policies and procedures that are applicable to the members of Primer⁴, including but not instead to the final and binding exacted on of all claims and coverage deputes before the Primer⁴ Board of Trustees. The Additional Covered Party's per occurrence hall shall be deemed included in the Member's per occurrence famil, and therefore shall reduce the Member's limit of lighting as set facts by the Coverage Documents and Deducations. The final shares may have been reduced by claims path on behalf of the member. General Liability coverage to Coverage Documents and Deducations, they Liability and Coverage B (Property Demoge Liability) only. Coverage's C (Pother Officials Errors and Contexture), D (United Employment Practices), E (Employee Boundit Liability) and F (Educator's Legal Liability Claims-Marke Coverage) are excluded from this provision of coverage.

The below named entity is a member in good standing of the New Hampatine Public Risk Management Exchange. The coverage provided may, however, be revised at any time by the actions of Primax⁹. As of the date this certificate is issued, the information set out below eccurately reflects the categories of coverage established for the current coverage year.

This Certificate is issued as a maller of information only and confers no datas upon the certificate botter. This certificate does not amend, extend, or after the coverage afforded by the coverage categories listed before.

PrimerS Members as per attached Schedule of Members Property & Liability Program	nber Numbers	N 8 44 C	BH Public I Iow Brook 8 Donova Ioncord, N	n Street IH 03501-2624	
X General Liability (Occurrence Form) Professional Liability (describe)	771/2019	7/1/2020	Each	Occurrence	8 5,000,000
Cichins Courrence			(HD)	Canago (Any ano Enp (Any ano paraon)	· · · · · · · · · · · · · · · · · · ·
Automobile Liability Deductible Comp and Coll: Any auto		,	(Cach	bined Single Lind Active) egalo	
Workers' Compensation & Employers' Liability				Statutory Acceleration	
			_	850 - Pokylisk	
Property (Spocks Risk Includes Fire and Theft)			Cost	et Link, Replacement (unless allerwige statud)	
Description: Proof of Primex Member coverage only.					

 CERTIFICATE HOLDER:
 Additional Covered Party
 Loss Payoe
 Primus' – NH Public Risk Management Exchange

 By:
 28 arg Exchange
 By:
 28 arg Exchange

 NH Dept of Safety
 Date:
 0/21/2019
 moursel@nhodmen.org

 S3 Hazen Dr.
 Primus' Change Envices
 B03-225-2841 phone

 603-225-2841 phone
 603-225-3843 fax

P&L Blember Name Albany School District Allenstown School District Alton School District **Amherst School District** Andover School District Ashland School District Ashuelot Pond Dam Village District Autourn School District **Barnstead School District Barrington School District Bartlett School District Bartlett Village Water Precinct Bath School District BCEP Solid Waste Bedford School District Belinso County Conservation District Belknap County Conservation District Benton School District Berlin School District Berlin Water Works Bethlehem School District Bethishem Village District Bow School District Brentwood School District Brookline School District Campton School District Campton Village Precinct Candia School District Carroll County Central NH Special Operations Unit Chatham School District Cheshire County Conservation District Chester School District Chesterfield School District Chichaster School District** City of Berlin City of Concord **City of Dover City of Keene** City of Laconia City of Lebanon City of Portsmouth **City of Rochester City of Somersworth Claremont School District Cocheco Arts and Technology Academy Colebrook Fire Precinct Cancerd School District Contoppool**, Valley School District **Contoocook Village Precinct Convey School District** Coos County Coos County Conservation District **Copple Crown Village District Cornish School District Croydon School District** CSI Charter School Deerfield School District **Deny Cooperative School District** Dover School District **Dresden School District**

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CERTIFICATE OF COVERAGE

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The New Hampshire Public Risk Management Brutrange (Priman[®]) is organized under the New Hampshire Revised Statutos Americand, Chapter 6-B, Peorled Risk Management Programs, in accordance with those statutes, its Trust Agreement and bytaws, Primax[®] is authorized to provide pooled risk management programs established for the benefit of political subdivisions in the State of New Hampshire.

Each member of Primer¹ is entitled to the categories of coverage set forth below. In addition, Primer² may extend the same coverage to ano-members, However, any coverage extended to a non-member is subject to all of the terms, conditions, embediens, manninests, rates, patietes and procedures that are applicable to the members of Primer², including but and indired to the first and binding resolution of all claims and coverage disputes below the Primer² Board of Trustees. The Additional Covered Penty's per accumence lindi shall be deemed included in the Member's per occurrence lindi, and therefore shall reduce the Member's limit of datafity as set faith by the Coverage Occurrences and Declarations. The limit shase may have been reduced by claims paid on tahaff of the member. General Listifity coverage is limited to Coverage A (Pentonal Injury Listifity) and Coverage B (Property Damage Listifity) only, Coverage's C (Public Officials Errors and Contestions), D (Lindar Errorbornet), E (Employee Benefit Listifity) and F (Educator's Legal Listifity Claims-Made Coverage) are excited from this provision of coverage.

The below named earling is a member in good standing of the New Hampshire Public Risk Management Exchange. The coverage provided may, however, be multipled at any time by the optimum of Primar?. As of the date this certificate is issued, the information set out below accurately reflects the categories of coverage established for the current coverage year.

This Certificate is issued as a matter of information only and contens an rights upon the certificate holder. This certificate does not amend, enhand, or alter the coverage afforded by the coverage categories listed below.

Persbeijunting Manufer: Manufer:		Company Attacking Coverage:			
Workers' Compensation Program			NH Public Risk Management Exchange - Primex ⁹ Bow Brook Place 48 Donovan Street Concord, NH 03501-2624		
· 朱 鲁宾克· 鲁克· 鲁克· 鲁克·					
General Liability (Occurrence Form)				Each Occurrence	
Professional Liability (describe)				General Approgate	
				Fire Damage (Any cost fire)	
		l		Med Exp (Any one person)	
Antomobile Lizbility Deductible Comp and Coll: Any auto	-			Commitmed Single Limit (Cash Action) Aggregate	
X Workers' Compensation & Employers' Lisbil	3hr ======	7/1/202	20	X Statutory	\$2,000,000
X Workers' Compensation & Employers' Liabil	17 7/1/2019	11024	പ	Each Acchient	\$2,000,000
				Disease - Each Bryleyn	
				Discase - Paky List	-
Property (Special Risk Includes Fire and Theft)				Blanket Umk, Regincement Cost (urbers of hawing stated)	
Description: Proof of Primer Member coverage only		<u>}</u>		<u> </u>	

CERTIFICATE HOLDER:	Additional Covered Party	Loss Payee	Primex ^a - NH Public Risk Monagament Exchange
			By: 22kry Set Frank
NH Dept of Selety 33 Hazen Dr. Concord, NH 03391			Date: 6/21/2019 manyel@chodmes.on Please direct hundres to: Primers ² Claims/Coveruge Services 603-225-3833 fax

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WC Rember Name	Member Ø
Albany School District	859
Allenstown School District	782
Alton School District	786
Amherst School District	701
Andover School District	702
Androscoggin Vallay Regional Refuse	421
Ashland School District	822
Astruetot Pond Dam Village District	457 902
Aubum School District	502 785
Barnstead School District	838
Berrington School District	903
Bertlett School District	768
Beth School District	779
Bedford School District	597
Belianap County Conservation District Belianap County Conservation District	597
Benton School District	848
Berlin School District	804
Berlin Water Works	600
Bethehem School District	858
Boy School District	703
Brentwood School District	704
Broaking School District	834
Campton School District	705
Candia School District	906
Chatham School District	860
Cheshire County Conservation District	463
Chester School District	707
ChesterRetd School District	708
Chichester School District	708
City of Berlin	120
->City of Concord	145
City of Dover	156
City of Franklin	175
City of Lebenon	217
City of Portsmouth	275
City of Rochester	280
City of Somersworth	293
Claremont School District	909 1203
Cocheco Arts and Technology Academy	400
Concord Regional Solid WesterResource Recovery Cooperative	710
Concord School District	802
Contoecook Velley School District	592
Contoocook Village Precinci	911
Conway School District	456
Copple Crown Village District Cernish School District	912
•	957
Croydon School District CSI Charter School	1209
Deerfield School District	825
Derry Cooperative School District	711
Dover School District	800
Dresden School District	913
Dummer Schoel District	914
Dunbarton School District	712
East Kingston School District	819
Eaton School District	915
Epping School District	713
Epsom School District	714
Erroi School District	917 930
Exeter Region Cooperative School District	. 839

FSTEMS - EMS-07- 2019-01

State of New Hampshire DEPARTMENT OF SAFETY

OFFICE OF THE COMMISSIONER 33 HAZEN DR. CONCORD, N.H. 03305 603-271-2791

ROBERT L. QUINN COMMISSIONER OF SAFETY

August 12, 2019

RQ# 196146 AC#43 No-02-2019

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

Requested Action

Pursuant to RSA 21-P:12-a, the Department of Safety, Division of Fire Standards and Training and Emergency Medical Services (FSTEMS) requests authorization to retroactively enter into a grant agreement with the City of Concord (VC#177376-B005) for a total amount of \$136,999.00 for the purpose of continuing a mobile integrated healthcare (MIH) program called NH Project FIRST. Effective upon Governor and Council approval for the period of September 30, 2019 through September 29, 2020. Funding source: 100% Federal Funds-

Funding is anticipated to be available in the SFY 2020 operating budget as follows:

02-023-023-237010-44570000 Dept. of Safety - FSTEMS - 100% Nat'l Fire Academy Grant (FR-CARA) SFY 2020 072-500574 Granis to Local Gov't - Federal \$136,999.00 -Activity Code: 23SAMHSA20

Explanation

This request is retroactive due to the Continuing Resolution as the funds for this program and position were included in the vetoed budget. NH Project FIRST (First Responders Initiating Recovery, Support, and Treatment) is designed to use specially trained first responders to connect at-risk individuals and their support systems to treatment and other services; train at-risk individuals and their support systems on overdose emergency care including the use of naloxone; and increase the number of first responders trained to carry and administer naloxone.

Since receiving grant funding in February 2019, the City of Concord has hired a full-time first responder to implement a mobile integrated healthcare (MIH) program and has begun conducting outreach to at-risk individuals and their support systems, which has had a substantial impact on the community. To date, Concord has trained 75 first responders on opioid use disorder and compassion fatigue. The opioid use disorder training provides education on recognizing and understanding opioid dependence and how to connect individuals to treatment. Compassion fatigue training educates first responders to recognize the signs and symptoms of stress and the effects on personal and professional performance. Concord has trained 18 support systems of at-risk individuals on naloxone administration, CPR and rescue breathing, and the Good Samaritan Law; distributed 23 naloxone kits to at-risk individuals and their support systems; and conducted two community outreach events. Moreover, the city has successfully integrated with the Doorway-NH at Concord Hospital and has had two successful referrals to treatment. With these requested funds, the City will continue to maintain the program now in place in Concord with a goal to expand to support a regional program of 23 additional communities in the Capital Area.

The grant listed above is funded from the FFY 2020 First Responder Comprehensive Addiction and Recovery Act, which was awarded to the Department of Safety, Division of Fire Standards and Training and Emergency Medical Services (FSTEMS) from the U.S. Department of Health and Human Services' Substance Abuse and Mental Health Services Administration (SAMHSA). The grant funds are to be used to implement the MIH program to reduce the number of opioid overdoses and opioid overdose deaths, and increase the number of at-risk individuals entering into treatment and recovery services throughout the State.

Grant guidance and applications are available to all New Hampshire licensed emergency medical services (EMS) units. Subrecipients submit applications to this office, which are reviewed by FSTEMS FR-CARA Staff, the FR-CARA Advisory His Excellency, Governor Christopher T. Summu and the Honorable Council August 12, 2019 Page 2 of 2

Committee, and approved by the FSTEMS Director. The criteria for approval are based on grant eligibility in accordance with the grant's current guidance and the documented needs of the local communities.

The First Responder Comprehensive Addiction and Recovery Act (FR-CARA) grants are 100% federally funded by SAMHSA with no match requirement. In the event that Federal Funds are no longer available, General Funds and/or Highway Funds will not be requested to support this program.

Respectfully splimitted,

Robert L. Quinn Commissioner of Safety

GRANT AGREEMENT

The State of New Hampshire and the Subrecipient hereby Mutually agree as follows: GENERAL PROVISIONS

1.1. State Agency Name 1.2. State Agency Address					
NH Department of Safety, Fire Standards & 33 Hazen Drive Training and Emergency Medical Services Concord, NH 03305					
1.3. Subrecipient Name1.4. Subrecipient Tel. #/Address603-225-853City of Concord (VC#177376-B005)41 Green Street, Concord, NH 03301					
1.5 Effective Date G & C Approval1.6. Account Number 4445700001.7. Completion Date September 29, 20201.8. Grant Limitation \$136,999.00					
1.9. Grant Officer for State Agency 1.10. State Agency Telephone Number Paula Holigan, FR-CARA Program Manager (603) 223-4200					
"By signing this form we certify that we have complied with any public meeting requirement for acceptance of this grant, including if applicable RSA 31:95-b."					
1.11. Subrecipient Signature 1, Act of Subrecipient Signor 1 Thomas Aspend					
Subrecipient Signature 2 Name & Title of Subrecipient Signor 2					
Subrecipient Signature 3 Name & Title of Subrecipient Signor 3					
1.13 Acknowledgment: State of New Hampshire, County of NECESSIE , on $7/10/17$, before the undersigned officer, personally appeared the person identified in block 1.12., known to me (or satisfactorily proven) to be the person whose name is signed in block 1.11., and acknowledged that he/she executed this document in the capacity indicated in block 1.12.					
Interior Signature of Notary Public or Justice of the Peace					
talite2. Name & Title of Notary Public of Justice of the Peace (Commission Expiration) Expire S					
Velinda Diaz, Notary Public State of Nonethenepshire. Sept 7.20					
1.14. State Agency Signature(s) By: Control of Control of State Agency Signor(s) By: Control of Control of State Agency Signor(s) Steven R. Lavole, Director of Administration					
By: On: 1/5//9 Steven R. Lavole, Director of Administration 1.16. Approval by Attorney General (Form, Substance and Execution) (if G & C approval required)					
By: A Assistant Attorney General, On: 8 130, 2019					
1.17. Approval by Governor and Council (if applicable)					
By: On: / /					

2. <u>SCOPE OF WORK</u>: In exchange for grant funds provided by the State of New Hampshire, acting through the Agency identified in block 1.1 (bereinafter referred to as "the State"), pursuant to RSA 21-P:12-a, the Subrecipient identified in block 1.3 (bereinafter referred to as "the Subrecipient"), shall perform that work identified and more particularly described in the scope of work attached hereto as EXHIBIT A (the scope of work being hereinafter referred to as "the Project").

Date: 7.10.1 3.)_____ _____ Subrecipient Initials: 1.) 2.)_

Page 1 of 6

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 AREA COVERED, Except as otherwise specifically provided for bescin, the Subrecipient shall perform the Project in, and with respect to, the State of New Hampshire.
 9.2.

4. <u>EFFECTIVE DATE: COMPLETION OF PROJECT.</u>

- 4.1. This Agreement, and all obligations of the parties hereunder, shall become effective on the date of approval of this Agreement by the Governor and Council of the State of New Hampshire if required (block 1.17), or upon 9.3. signature by the State Agency as shown in block 1.14 ("the effective date").
- Except as otherwise specifically provided herein, the Project, including all 9.4. reports required by this Agreement, shall be completed in its entirety prior to the date in block 1.7 (hereinsfter referred to as "the Completion Date").
 GRANT AMOUNT: LIMITATION ON AMOUNT: VOIRCISERS:
- 5.1. PAYMENT.
- The Grant Amount is identified and more particularly described in EXIIIBIT 5.2. B, stached beseto.
- 5.3. The manner of, and schedule of payment shall be as set forth in EXHIBIT B. 10. In accordance with the provisions set forth in EXHIBIT B, and in consideration of the satisfactory performance of the Project, as determined by the State, and as limited by subparagraph 5.5 of these general provisions, the State shall pay the Subrecipient the Grant Amount. The State shall withhold from the amount otherwise payable to the Subrecipient under this
- 5.4. subparagraph 5.3 these sums required, or permitted, to be withheld pursuant to N.H. RSA 50.7 through 7-c. The payment by the State of the Grant amount shall be the only, and the complete payment to the Subrecipient for all expenses, of whenever mixer, 11. incurred by the Subrecipient in the performance hereof, and shall be the only, 11.1.
- 5.5. and the complete, compensation to the Subrecipient for the Project. The State shall have no liabilities to the Subrecipient other than the Grant Amount. 11.1.1 Notwithstanding anything in this Agreement to the contrary, and 11.1.2 antwithstanding unexpected circumstances, in no event shall the total of all 11.1.3
- payments sutherized, or actually made, hereunder exceed the Orant limitation 11.1.4 set forth in block 1.8 of these general provisions. 11.2.
 <u>COMPLIANCE BY SUBRECIPIENT WITH LAWS AND REGULATIONS.</u> in connection with the performance of the Project, the Subscriptent shall 11.2.1 comply with all statutes, laws regulations, and orders of federal, state, county.
- or municipal authorities which shall impose any obligations or duty upon the
 Subrecipient, including the acquisition of any and all necessary permits. <u>RECORDS and ACCOUNTS</u>. Between the Effective Date and the date three (3) years after the Completion 11.2.2 Date the Subrecipient shall keep datailed accounts of all expenses incurred in connection with the Project, including, but not limited to, costs of administration, transportation, instrumes, telephone cells, and clarical
 materials and services. Such accounts shall be supported by seccipts,
- 12. Initiality and between solution shall be supported by technology involves, bills and other similar documents. II.2.3 Between the Effective Date and the date three (3) years after the Completion Date, at any time during the Subrecipient's normal basiness hours, and as II.2.4 often as the State shall demand, the Subrecipient shall make available to the State all seconds pertaining to matters covered by this Agreement. The Subrecipient shall permit the State to andit, examine, and reproduce such records, and to make audits of all contracts, invoices, materials, paysolis, I2. Information relating to all matters covered by this Agreement. As used in this paragraph, "Subrecipient" includes all person, natural or fletional, affiliated
- 8. with, controlled by, or under common ownership with, the entity identified as
- 8.1. the Subrecipient in block 1.3 of these provisions <u>PERSONNEL</u>. The Subrecipient shell, at its own expense, provide all personnel necessary to 12.2.
 - perform the Project. The Subrecipient warrants that all personnel engaged in the Project shall be qualified to perform such Project, and shall be property
- 8.2. Its Project shall be qualified to perform such Project, and shall be property licensed and authorized to perform such Project under all applicable laws. The Subscription shall not hire, and it shall not permit any subcontractor, 12.3. subgrantee, or other person, firm or corporation with whom h is engaged in a
- 8.3. combined effort to perform the Project, to hire any person who has a contractual relationship with the State, or who is a State officer or employee, elected or appointed. The Grant Officer shall be the representative of the State hereunder. In the 12.4.
- event of any dispute hereunder, the interpretation of this Agreement by the
- 9.1. Grant Officer, and his/her decision on any dispute, shall be final. DATA: RETENTION OF DATA: ACCESS. As used in this Agreement, the word "data" shall mean all information and 13. things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings,

2.)

Subrecipient Initials: H)

computer programs, computer printouts, notes, letters, memoranda, paper, and documents, all whether finished or unfinished.

- Between the Effective Date and the Completion Date the Subrecipient shall grant to the State, or any person designated by it, unrestricted access to all data for examination, duplication, publication, translation, sale, disposal, or for any other purpose whatsoever.
- No data shall be subject to copyright in the United States or any other country by anyone other than the State.
- On and after the Effective Date all data, and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason, whichever shall first occur.

The Suno, and envous it shell designate, shall have envestment authority to publish, disclose, distribute and otherwise use, in whole or in part, all data.

CONDITIONAL NATURE OR AGREEMENT. Notwithstanding anything in this Agreement to the continuous of payments hereunder, methoding, without limitation, the continuous of payments hereunder, are contingent upon the availability or continuous appropriation of fluids, and in no event shall the State be liable for any payments hereunder in excess of such available or appropriated funds. In the event of a reduction or termination of those funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Subrecipient notice of such termination.

EVENT OF DEFAULT. REMEDIES.

9.5

- Any one or more of the following sets or omissions of the Subrechtent shall constitute an event of default hereunder (hereinziter referred to as "Events of .) Default");
- 1.2 Failure to perform the Project satisfactorily or on schedule; or
- .1.3 Failure to submit any seport required hereunder, or
- .1.4 Feithere to maintain, or permit access to, the records required bereunder; or
- 11.2. Failure to perform any of the other covenants and conditions of this Agreement.
- Upon the occurrence of any Event of Default, the State may take any one, or 12.1 more, or all, of the following actions:
 - Give the Subrecipient a written notice specifying the Event of Definih and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Definih is not timely remedied, terminate this Agreement, effective two 2.2 (2) days after giving the Subrechtent active of termination; and
- Give the Subrecipient a written make specifying the Event of Definit and suspending all payments to be made under this Agreement and ordering that the portion of the Grant Amount which would otherwise accrus to the Subrecipient during the period from the date of such notice until such time as the State 11.2.3 determines that the Subrecipient has cured the Event of Default shall onver be paid to the Subrecipient, and
- 1.2.4 Set off against any other obligation the State may own to the Subscription any damages the State suffers by reason of any Event of Default, and

Treat the agreement as breached and parsue any of its remedies at law or in equity, or both.

- TERMINATION.
 - In the event of any cuty termination of this Agreement for any reason other than the completion of the Project, the Subscriptent shall deriver to the Grant Officer, not later than fifteen (15) days after the date of termination, a report (herritatifer referred to as the "Termination Report") describing in detail all Project Work performed, and the Grant Amount canned, to and including the date of termination.
- In the event of Termination under paragraphs 10 or 12.4 of these general provisions, the approved of such a Termination Report by the State shall enlife the Subvecipient to receive that portion of the Grant amount carned to and including the date of termination.
- In the event of Termination under paragraphs 10 or 12.4 of these general provisions, the approval of such a Termination Report by the State shall in no event relieve the Subrecipient from any and all liability for damages sustained or incurred by the State as a result of the Subrecipient's breach of its obligations hereunder.
- Netwithstanding anything in this Agreement to the convery, either the State or, except where notice default has been given to the Subrecipient hereunder, the Subrecipient, may terminate this Agreement without cause upon thirty (30) days written notice.
- <u>CONFLICT OF INTEREST</u>. No afficer, member of employee of the Subrecipient, and no representative, afficer or employee of the State of New Hampshire or of the governing body of the locality or localities in which the Project is to be performed, who exercises any functions or responsibilities in the

Date: 7.10.19 3.)_ Page 2 of 6

video recordings, picturial reproductions, drawings, analyses, graphic representations.

my decision relating to this Agreement which affects his or her personal interest or the interest of any corporation, partnership, or association in which he or she is directly or indirectly interested, nor shall he or she have any personal or pecuniary interest, direct or indirect, in this Agreement or the soceeds thereof.

SUBRECIPIENT'S RELATION TO THE STATE. In the performance of this 18. Agreement the Subrecipient, its employees, and any subcontractor or subgrantee of the Subrecipient are in all respects independent contractors, and are neither agents nor employees of the State. Neither the Subrecipient nor my of its officers, employees, egents, members, subcontractors or subgrantees, shall have authority to bind the State nor are they entitled to any of the benefits,

15. workmen's compensation or encohments provided by the State to its 19. copioyees ASSIGNMENT AND SUBCONTRACTS. The Subrecipient shall not assign,

or otherwise transfer any interest in this Agroement without the prior written consent of the State. None of the Project Work shall be subcontracted or 20. subgranted by the Subscriptent other than as set forth in Exhibit A without the

prior written consent of the State. INDEMNIFICATION. The Subscriptent shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all 21. insses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties esserted against the State, its officers and employees, by or on behalf of any person, on encount of, based on, resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Subrecipient or subcontractor, or subgrantee or other egent of the Subrecipient. Notwithstanding the foregoing, nothing herein contained shall be deemed to 22. constitute a waiver of the sovereign immunity of the State, which immunity is

hereby reserved to the State. This covenant shall survive the termination of this 23. 17. 17.1 servented.

INSURANCE AND BOND.

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16.

The Subrecipient shall, at its own expense, obtain and maintain in force, or shall require any subcontractor, subgrantes or assignce performing Project 24.

17.1.1 work to obtain and maintain in force, both for the benefit of the State, the following insurance:

17.1.2 Statutory workmen's compensation and employees liability insurance for all employees engaged in the performance of the Project, and Comprehensive public lisbility insurance against all claims of bodily injuries, death or property damage, in amounts not less than \$1,000,000 per occurrence and \$2,000,000 aggregate for bodily injury or death any one incident, and \$500,000 for property damage in any one incident; and

approval of the undertaking or carrying out of such Project, shall participate in 17.2. The policies described in subparagraph 17.1 of this paragraph shall be the standard form employed in the State of New Hampshire, issued by underwriters acceptable to the State, and authorized to do business in the State of New Hampshire. Each policy shall contain a clause prohibiting cancellation or modification of the policy earlier than ten (10) days after written notice thereof has been received by the State.

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

NOTICE. Any notice by a party hereto to the other party shall be docured to have been duly delivered or given at the time of mailing by cestified mail, postage prepaid, in a United States Post Office addressed to the parties at the eddresses first above given.

AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Council of the State of New Hampshire, if required, or by the signing State Agency.

CONSTRUCTION OF AGREEMENT AND TERMS. This Agreement shall be construed in accordance with the law of the State of New Hampshire, and is binding upon and inners to the banefit of the parties and their respective successors and assignces. The captions and contents of the "subject" blank are used only as a matter of convenience, and are not to be considered a part of this Agreement or to be used in determining the intend of the parties herei

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

ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties, and supersedes all prior agreements and understandings relating hereto.

SPECIAL PROVISIONS. The additional provisions set forth in Exhibit C hereto are incorporated as part of this agreement.

review or

Subreciptent Initials: 1.)

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2.)

Date: 7.10.19 Page 3 of 6

EXHIBIT A

Scope of Services

- The Department of Safety, Division of Fire Standards & Training and Emergency Medical Services (hereinafter referred to as "the State") is awarding the City of Concord (hereinafter referred to as "the Subrecipient") \$136,999.00 to implement a Mobile Integrated Healthcare (MIH) program.
- 2. "The Subrecipient" agrees to submit quarterly progress reports and requests for reimbursement within fifteen (15) days after each quarter (January 15th, April 15th, July 15th, and October 15th) until all activities associated with the grant award have been completed.
- 3. "The Subrecipient" agrees that the project grant period ends September 29, 2020 and that a final performance and expenditure report will be sent to "the State" by October 30, 2020.
- 4. "The Subrecipient" agrees to comply with all applicable federal and state laws, rules, regulations, and requirements.
- 5. "The Subrecipient" shall maintain financial records, supporting documents, and all other pertinent records for a period of three (3) years from the grant period end date, or longer if notified by the Department of Safety that an active audit requires the documents to be maintained and accessible for a period longer than the original grant period end date.

Subrecipient Initials: 1.

3.)____

7 19-19 Date: Page 4 of 6

<u>EXHIBIT B</u>

Grant Amount and Method of Payment

1. GRANT AMOUNT

 Total Grant (Federal Award): \$136,999.00
 Project Cost is 100% Federal Funds

 Awarding Agency: Substance Abuse and Mental Health Services Administration (SAMHSA)

 Award Title: First Responders- Comprehensive Addiction & Recovery Act (FR-CARA)

 Award Number: 5H798P080286-03

 Catalog of Federal Domestic Assistance (CFDA) Number: 93.243 (FR-CARA)

 Applicant's Data Universal Numbering System (DUNS): 073976680

2. PAYMENT SCHEDULE

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- a. "The Subrecipient" agrees the total payment by "the State" under this grant agreement shall be up to \$136,999.00.
- b. "The State" shall reimburse up to \$136,999.00 to "the Subrecipient" upon "the State" receiving appropriate documentation of expended funds (i.e., copies of payroll, sign-in sheets, invoices and cancelled checks), and quarterly progress reports from "the Subrecipient".

Subrecipient Initials:

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EXHIBIT C

Special Provisions

- This grant agreement may be terminated upon thirty (30) days written notice by either party. 1.
- "The Subrecipient" ensures Federal award funds will supplement, and not replace (supplant) 2. nonfederal funds for this project and ensures that federal funds do not supplant funds that have been budgeted for the same purpose through non-federal sources. If required, "the Subrecipient" agrees to demonstrate that a reduction in non-federal resources occurred for reasons other than the receipt of expected receipt of federal funds.
- "The Subrecipient" agrees to have an audit conducted in compliance with OMB Circular 2 CFR 3. 200, if applicable. If a compliance audit is not required, at the end of each audit period "the Subrecipient" will certify in writing that they have not expended the amount of federal funds that would require a compliance audit (\$750,000). If required, they will forward for review and clearance a copy of the completed audit(s) to "the State".

Additionally, "the Subrecipient" has or will notify their auditor of the above requirements prior to performance of the audit. "The Subrecipient" will also ensure that, if required, the entire grant period will be covered by a compliance audit, which in some cases will mean more than one audit must be submitted. "The Subrecipient" will advise the auditor to cite specifically that the audit was done in accordance with OMB Circular 2 CFR 200 as codified by HHS at 45 CFR 75. "The Subrecipient" will also ensure that all records concerning this grant will be kept on file for a minimum of three (3) years from the end of this audit period.

- 4. "The Subrecipient" agrees to acknowledge federal funding when issuing statements, press releases, requests for proposals, bid invitations, and other documents describing projects or programs funded in whole or in part with federal funds and will include the percentage and dollar amounts of the total program or project costs financed with federal funds; and the percentage and dollar amount of the total costs financed by nongovernmental sources.
- 5. "The Subrecipient" agrees to comply with all grant compliance and certification requirements as referenced in the NH Project FIRST, FR-CARA Grant Guidance.
- Order of Precedence: In the event of conflict or ambiguity among any of the text of the Contract 6. Documents, the following Order of Precedence shall govern:

a. State of New Hampshire, Department of Safety, Grant Agreement;

b. State of New Hampshire, FR-CARA, NH Project FIRST Grant Guidance Document;

c. State of New Hampshire, FR-CARA, NH Project FIRST Grant Award Letter;

d. State of New Hampshire, FR-CARA, NH Project FIRST Application, which is herein included by reference.

Date: フ・Iフ・レイ Page 6 of 6 Subrecipient Initials: 1.) 3.) 2.)_

Resolution No. 9206 CITY OF CONCORD

In the year of our Lord two thousand and nineteen

RESOLUTION ACCEPTING THE TERMS OF THE FIRST RESPONDER COMPREHENSIVE ADDICTION AND RECOVERY ACT (FR-CARA) GRANT AND ACCEPTING AND APPROPRIATING THE SUM OF ONE HUNDRED THIRTY-SIX THOUSAND NINE HUNDRED NINETY-NINE DOLLARS (\$136,999) TO CONTINUE THE MOBILE INTEGRATED HEALTHCARE (MIH) PROGRAM, PENDING NH FIRE STANDARDS AND TRAINING & EMS APPROVAL AND GOVERNOR AND COUNCIL APPROVAL

Page 1 of 2

The City of Concord resolves as follows:

- WHEREAS, the City of Concord has been notified of available grant funding in the amount of \$136,999 for the continuation of the FR-CARA Project FIRST (First Responders Initiating Recovery, Support, and Treatment) program; and
- WHEREAS, Concord City Council has authorized the City Manager to apply for the above grant; and
- WHEREAS, the City of Concord desires to utilize this funding to continue initiatives for improving access to treatment for at-risk individuals and their families and support networks to access treatment information, and other resources, and to train at-risk individuals and their families and support networks on CPR and naloxone administration; and
- WHEREAS, there is no financial match required for this grant program; and
- WHEREAS, this appropriation is for a purpose not included in the Fiscal Year 2020 adopted budget, therefore Section 37 of the City Charter requires a two-thirds vote of the City Council.

NOW, THERFORE, BE IT RESOLVED by the City Council of the City of Concord that:

1. The sum of\$136,999 be and is hereby appropriated as follows:

Miscellaneous Special Revenue Fund

First Responders Initiating Recovery, Support, and Treatment project\$136,999



In the year of our Lord two thousand and nineteen

RESOLUTION ACCEPTING THE TERMS OF THE FIRST RESPONDER COMPREHENSIVE ADDICTION AND RECOVERY ACT (FR-CARA) GRANT AND ACCEPTING AND APPROPRIATING THE SUM OF ONE HUNDRED THIRTY-SIX THOUSAND NINE HUNDRED NINETY-NINE DOLLARS (\$136,999) TO CONTINUE THE MOBILE INTEGRATED HEALTHCARE (MIH) PROGRAM, PENDING NH FIRE STANDARDS AND TRAINING & EMS APPROVAL AND GOVERNOR AND COUNCIL APPROVAL

Page 2 of 2

2. Revenue to meet said appropriation shall be provided from the following source:

Miscellaneous Special Revenue Fund

Federal Department of Health and Human Services, Substance Abuse and Mental Health Services Administration FR-CARA grant\$136,999

- 3. Sums as appropriated shall be expended under the direction of the City Manager.
- 4. The resolution shall take effect upon its passage.

In City Council July 8, 2019 Passed

Conce Compart City Clark

A true copy; I attest: puty city clear

Resolution No. 9195 CITY OF CONCORD

In the year of our Lord two thousand and nineteen

RESOLUTION AUTHORIZING THE CITY MANAGER OR HIS DESIGNEE TO APPLY FOR FUNDING THROUGH THE NEW HAMPSHIRE PROJECT FIRST GRANT PROGRAM ADMINISTERED BY THE NEW HAMPSHIRE DEPARTMENT OF SAFETY

The City of Concord resolves as follows:

WHEREAS, the New Hampshire Department of Safety has made available grant funding for agencies to implement programs for first responders to connect individuals affected by substance use disorders with treatment resources through the Project First Grant Program; and

WHEREAS, the City of Concord has been very successful in working with community partners to address mental health emergencies and has created a foundation for the expansion of that program to address substance abuse; and

WHEREAS, the New Hampshire Project First Grant Program has an excellent potential to address the growing problem of substance abuse in the City of Concord,

NOW, THEREFORE, BE IT RESOLVED by the City Council of the City of Concord that:

- The City Manager or his designee is hereby authorized to apply for funding through the New Hampshire Project First grant program until the conclusion of the Grant in September 29th, 2021.
- 2. Funds awarded to the City of Concord for purposes included in this or other similar programs are hereby appropriated.
- 3. Within one business day of submitting an application to the granting authority, the City Manager shall advise the City Council of such fact.
- 4. The City Manager shall report to the City Council and Citizens at the next regularly scheduled City Council meeting the details of the application as normally provided and required to properly approve, appropriate, manage, expend, account for, and report upon.
- 5. This resolution shall take effect upon its passage.

In City Council June 10, 2019 Passed

Construction of the Charles



CERTIFICATE OF AUTHORITY

I, Janice Bonenfant, as City Clerk of the City of Concord New Hampshire, hereby certify that Thomas J. Aspell, Jr. City Manager of the City of Concord New Hampshire, is authorized to act on behalf of the City of Concord in negotiating for and accepting grant funds in connection with the First Responder Comprehensive Addiction and Recovery Act (FR-CARA) Grant, per action taken by the Concord New Hampshire City Council on July 8, 2019.

OFFICIAL SEAL

pance somepact Signature:

Date:

NOTARIZATION

State of New Hampshire

County of Merrimack

On this 10th day of July 2019, before me Michelle Mulholland the undersigned officer personally appeared Janice Bonenfant who acknowledged herself to be the City Clerk of the City of Concord NH and that she, as the City Clerk being authorized to do so, executed the foregoing instrument for the purpose of therein contained.

In witness thereof, I hereunto set my hand and official seal

Notary Public: <u>Michan My Commission Expires</u>: <u>3/8/242</u>



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CERTIFICATE OF COVERAGE

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The New Hampshire Public Risk Management Exchange (Primer²) is organized under the New Hampshire Rovisci Sizulas Annotated, Chapter 5-B, Pooled Risk Management Programs, in accordance with those stabilies, its Trust Agreement and bytaws, Primer⁸ is authorized to provide pooled risk management programs established for the benefit of political subdivisions in the Sizte of New Hampshire.

Each member of Primm² is entitled to the categories of coverago set forth below. In addition, Primer² may extend the same coverage to non-membera-However, may coverage extended to a non-member is subject to all of the terms, comfiltuna, exclusiona, unrendmenta, ratha, policies and procedures that are applicable to the members of Primer², including but not limited to the first and binding esochrinn of all claims and coverage disputs before the Primer³ Board of Trustees. The Additional Coverage Parity's per ecourteroe limit shall be deemed included in the Member's per occurrence limit, and Despice shall reduce the Member's limit of bability as set forth by the Coverage Documents and Declarations. The limit shown may have been reduced by claims paid on behalf of the members. General Untility coverage becaments and Declarations. The limit shown may have been reduced by claims paid on behalf of the members. General Untility coverage becaments and Declarations, E (Employee Benefit Liability) and P (Educator's Legal Liability) claims-Made Coverage) are excluded from this provision of coverage.

The below named entity is a member in good standing of the New Hampshire Public Risk Management Exchange. The coverage provided may, however, be revised at any time by the actions of Primori¹. As of the date this cartilizate is issued, the information set out below accurately reflects the categories of coverage established for the current coverage year.

This Certificate is issued as a matter of information only and contens no dights upon the certificate holder. This certificate does not amend, entend, or after the coverage afforded by the coverage entegrates listed below.

Primer/3 Members as per attached Schedule of Members Werkers' Compensation Program		Company Attorney Company NH Public Risk Management Exchange - Prime Bow Brook Pizze 48 Denovan Street Cancord, NH 03301-2824			
	1 Eline Still Dam -				如同和学校的问题
General Lizbilly (Occurrence Form) Professional Lizbilly (describe) Ciatms Courrence Kedp Courrence				Each Occurrence General Appropriate Fire Damage (Any one Any) Mad Exp (Any one person)	
Automobile Liability Deductible Comp and Coll: Any anto				Constituent Singlo Limit (ExchAntion) Aggregate	
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X Workers' Compensation & Employers' Lisbi	7/1/2019	110204	ω I	Each Accident	\$2,000,000
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Property (Bucchi Risk Includes Fire and Theli)				Bigeniegi Linni, Regelinensenst Cost (uniosis etherwise status)	
Description: Proof of Primex Member coverage on	l	┹╼┷┯╴╼╤		1	

CERTIFICATE BOLDER:	Additional Covered Porty	Loss Peyne	Primas" - NH Public Risk Management Exchange
			By: Way Bart Provid
NH Dept of Safety 33 Hazen Dr. Concord, NH 03301			Date: 6/21/2019 mpaces@physhaec.org Pinese direct inquires to: Princes* Claims/Coverage Services 603-225-2843 phone 603-225-3833 fax

Member # WC Bember Name 859 Albany School District 792 Allenstown School District 788 Alten School District 701 Amherst School District 702 Andover School District 421 Androscoppin Vallay Regional Refuse 822 Ashland School District 457 Ashueiot Pond Dam Village District 902 Auburn School District 785 **Barnstead School District** 838 **Barrington School District** 903 Bartlett School District 768 **Bath School District** 779 **Bedford School District** 697 Belimp County Conservation District 607 Belknap County Conservation District 848 Benton School District 904 **Berlin School District** 600 **Berlin Water Works** 858 **Bethiehem School District** 703 **Bow School District** 704 **Brentwood School District** 834 **Broakline School District** 705 **Campton School District** 908 Candia School District 660 **Chatham School District** 468 **Cheshire County Conservation District** 707 **Chester School District** 708 **Chesterfield School District** 708 Chichester School District 120 City of Berlin 146 ->-City of Concord 158 **City of Dover** 175 City of Franklin 217 City of Lebanon 275 City of Pertsmouth 280 **City of Rochester** 293 City of Somersworth 809 **Claremont School District** 1203 **Cocheco Arts and Technology Academy** 400 Concord Regional Solid Weste/Resource Recovery Cooperative 710 **Concord School District** 802 **Contoccook Valley School District** 592 Contoocook Village Precinct 911 **Conway School District** 468 Copple Crown Village District 912 **Cornish School District** 957 **Croydon School District** 1209 **CSI Charter School** 825 **Deerfield School District** 711 **Darry Cooperative School District** 800 **Dover School District** 913 **Dresden School District** 914 Dummer School District 712 **Dunbarton School Oistrict** 819 East Kingston School District 915 Eaton School District 713 **Epoing School District** 714 Epsom School District 917 Errol School District 839

Exeter Region Cooperative School District



CERTIFICATE OF COVERAGE

The New Hampshire Public Risk Management Exchange (Primor[®]) is organized under the New Hampshire Revised Statutes Amounted, Chapter 5-B, Pooted Risk Management Programs, in accordance with those statutes, its Trust Agreement and bytaws, Primor[®] is authorized to provide pooted data management programs established for the benefit of political subdivisions in the State of New Hampshire.

Each member of Primers³ is entitled to the entrypoints of coverage set forth below. In existing, Primers³ may extend the same coverage to non-members, However, any coverage extended to a non-member is subject to all of the terms, conditions, exclusions, emendments, roles, policies and procedures that are applicable to the members of Primers³, Induced in the larms, conditions, exclusions, emendments, roles, policies and procedures that are applicable to the members of Primers³, Induced in the larms, conditions, exclusions, emendments, roles, policies and procedures Primers⁴ Board of Trustmes. The Additional Coverade Party's per occurrence famil shall be deemed included in the Member's per occurrence famil, and Inscribers shall reduce the Member's famil of Eablity as set family the Coverage Documents and Doclarations. The Eablity is not Coverage B (Property Damage Liability) andy. Coverage's C (Public Officials Errors and Omissions), D (Undat Employment Practices), E (Employme Banefit Liability) and F (Educator's Legal Liability Calma-Made Coverage) are excluded from this provision of coverage.

The below named entity is a mamber in good standing of the Naw Hampatine Public Risk Management Exchange. The coverage provided may, however, be revised at any time by the actions of Primar^a. As of the date this certificate is issued, the information set not below accurately reflects the categories of coverage established for the current coverage year.

This Certilizate is issued as a matter of information only and conters no rights upon the certificate holder. This certificate does not amond, extend, or alter the coverage afforded by the coverage categories listed below.

Primera Mambers as per attached Schedule of Mambers Property & Liability Program			Company Allorday Coverage NH Public Risk Management Exchange - Primax ³ Bow Broak Piace 46 Danovan Street Concord, NH 03301-2624
X General Linbility (Occurrence Form) Professional Linbility (describe)	7/1/2019	7/1/2020	Each Occurrence \$ 6,000,000 General Appropria \$ 6,000,000 Fire Damage (Any and
C Otennos C Occurrence			(1)g) Med Exp (Acy one person)
Antomobile Lizbility Deductible Comp and Coll: Any auto			Constrained Single Limit (East-Acation) Aggregate
Workers' Compensation & Employers' Liability			Each Academi Classes - Each Employee
			Discoco - Pulky Link
Property (Special Risk Includes Fire and Thati)			Giunhet Linik, Reyboogsmant Cost (mónus otherwise station)
Description: Proof of Primex Member coverage only.		.	· · · · · · · · · · · · · · · · · · ·

 CERTIFICATE HOLDER:
 Additional Covered Party
 Loss Pape
 Primax* - NN Public Risk Management Exchange

 By:
 Winy Saf Pendit

 NH Dept of Sefety
 Data:
 @21/2019
 management Exchange

 33 Hazen Dr.
 Primax* Concord, NH 03301
 Primax* Concord, NH 03301 fax

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Member Number

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P&L Member Name Albany School District Allenstown School District Alton School District Amherist School District Andover School District Ashland School District Ashueiot Pond Dam Village District Auburn School District **Barnstead School District** Barrington School District **Bartlett School District** Bartleti Village Water Precinct **Bath School District BCEP Solid Weste Bedford School District Beiknap County Conservation District Belknap County Conservation District** Benton School District **Berlin School District Beriln Water Works Bethiehem School District** Bethlehem Village District **Bow School District Brentwood School District Brookline School District Campton School District Campton Village Precinct Candia School District Carroll County Central NH Special Operations Unit** Chatham School District **Cheshire County Conservation District Chester School District** Chesterfield School District **Chichester School District** City of Berlin City of Concord City of Dover **City of Keene** City of Leconia City of Lebanon City of Portsmouth City of Rochester **City of Somersworth Claremont School District** Cocheco Arts and Technology Academy **Calebrack Fire Precinct Concord School District Contocoook Valley School District** Contoocook Village Precinct **Conway School District** Coos County **Coos County Conservation District** Coopte Crown Village District **Comish School District Croydon School District CSI Charter School Deerfield School District Deny Cooperative School District Dover School District Dresden School District**