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STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION FOR BEHAVIORAL HEALTH

Lori A. Shibinette
Commissioner

Katja S. Fox
Director

129 PLEASANT STREET, CONCORD, NH 03301
603-271-9544 1-800-852-3345 Ext. 9544
Fax: 603-271-4332 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

October 20, 2020

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

REQUESTED ACTION

1. Authorize the Department of Health and Human Services, Division for Behavioral Health, to enter into **Sole Source** amendments to existing contracts with the vendors listed below except for The Alternative Life Center and to add Recovery Oriented Step-Up Step-Down programs with a total of twelve (12) beds for the four vendors in **bold**, increasing the total price limitation by $2,400,000 from $16,309,274 to $18,709,274 and no change to the contract completion dates of June 30, 2022 effective November 1, 2020 or upon Governor and Council approval, whichever is later. 100% General Funds.

2. Further, authorize advance payments totaling $532,880 in accordance with the terms of the amendments effective upon Governor and Council approval. 100% General Funds.

The individual contracts were approved by Governor and Council as specified in the table below.

Vendor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
Connections Peer Support Center	**#157070-B001**	**Portsmouth**	**$1,469,950**	**$600,000**	**$2,069,950**	**O:06/29/16 #23 A1: 06/20/18 #33B A2: 06/19/19 #28 A3: 06/24/20 #27**
H.E.A.R.T.S Peer Support Center Region IV	**#209287-B001**	**Nashua**	**$2,313,757**	**$600,000**	**$2,913,757**	**O:06/29/16 #23 A1: 06/20/18 #33B A2: 06/19/19 #28 A3: 06/24/20 #27**
Lakes Region Consumer Advisory Board	#157060-B001	Laconia	$2,036,620	$0	$2,036,620	O:06/29/16 #23 A1: 06/20/18 #33B A2: 06/19/19 #28 A3: 06/24/20 #27
Monadnock Area Peer Support Agency	**#157973-B001**	**Keene**	**$1,623,907**	**$600,000**	**$2,223,907**	**O:06/29/16 #23 A1: 06/20/18 #33B A2: 06/19/19 #28 A3: 06/24/20 #27**

On the Road to Recovery, Inc.	**#158839-B001**	**Manchester**	**$2,566,471**	**$600,000**	**$3,166,471**	**O:06/29/16 #23 A1: 06/20/18 #33B A2: 06/19/19 #28 A3: 06/24/20 #27**
The Alternative Life Center	#168081-B001	Conway	$2,863,522	$0	$2,863,522	O:06/29/16 #23 A1: 06/21/17 #38 A2: 06/20/2018 #33B A3: 06/19/19 #28 A4: 06/24/20 #27
The Stepping Stone Drop-In Center Association	#157697-B001	Claremont	$2,296,642	$0	$2,296,642	O:06/29/16 #23 A1: 06/20/18 #33B A2: 06/19/2018 #28 A3: 06/24/20 #27
Tri-City Consumers' Action Co-operative	#157797-B001	Rochester	$1,138,405	$0	$1,138,405	O:06/29/16 #23 A1: 06/20/18 #33B A2: 06/19/19 #28 A3: 06/24/20 #27
		Total:	**$16,309,274**	**$2,400,000**	**$18,709,274**	

Funds are available in the following accounts for State Fiscal Year 2021, and are anticipated to be available in State Fiscal Year 2022, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See Fiscal Details

EXPLANATION

This request is **Sole Source** because MOP 150 requires an item to be identified as sole source any time the original price limitation is increasing by ten (10) percent or more. Moreover, the Department is adding additional scope to four (4) of the existing contracts not contemplated in the original Request for Proposal for Recovery Oriented Step-Up Step-Down programs.

The purpose of this request is to amend the existing contracts to clarify the scope of services and to establish four (4) Recovery Oriented Step-Up Step-Down programs with four (4) of the vendors to provide short-term, recovery-based transition services to adults 18 year of age and older who require additional support to transition from inpatient or institutional settings into the community, or alternatively require more intensive supports to reduce the need for admission to an inpatient setting. The four (4) programs will provide a total of 12 beds statewide available to individuals with mental illness in need of transitional level of care. A start up payment will be provided to the contracts to cover immediate expenses that will enable to Contractors to provide these Recovery Oriented Step-Up Step-Down Programs by February 1, 2021.

In accordance with the 10 Year Mental Health Plan and funds appropriated in HB 3 of the 2019 Regular Legislative Session, New Hampshire has identified a need to expand programs that support people at risk of hospitalization, safely and therapeutically in their communities, while reducing avoidable psychiatric hospitalization and readmission. Recovery Oriented Step-Up Step-Down programs will provide three (3) beds in each of the four (4) mental health regions for adults experiencing psychiatric distress in an open, home-like environment with 24 hour peer staffing and access to community-based clinical support. Peer support specialists will provide recovery-based transition services for adults for whom a short stay in a recovery-focused residential program would help prevent psychiatric hospitalization (step-up) and for adults preparing for discharge from psychiatric hospitalization to prepare them for living in the community (step-down). Approximately seventy-five (75) individuals will be served from February 1, 2020, to June 30, 2022.

The Department will monitor contracted services by ensuring the Contractors:

- Meet 75 percent minimum occupancy standards annually.
- Successfully divert eighty 80 percent of step-up admissions from resulting in an inpatient stay.
- Successfully facilitate step-down transitions with no more than five (5) percent of people being readmitted to hospital level care within the 90 day period.

As referenced in Exhibit C-1, Revisions to General Provision, Section 3. of the original contracts, the parties have the option to extend the agreements for up to four (4) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and Governor and Council approval. The Department is not exercising its option to renew at this time.

Should the Governor and Executive Council not authorize this request, four (4) Recovery Oriented Step-Up Step-Down programs totaling 12 beds statewide will not be available to individuals with mental illness in need of transitional level of care. Step-Up Step-Down programs support successful transitions to the community following hospitalization and/or prevent hospital-level of care which, in turn, increases the availability of beds for individuals awaiting inpatient hospital services across the State.

Area served: Statewide

Source of Funds: General Funds

Respectfully submitted,

Lori Shibinette

Lori A. Shibinette
Commissioner

05-95-92-920010-7143 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, MENTAL HEALTH BLOCK GRANT					
100% Federal Funds					
Activity Code: 92207143					
The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	**Class Title**	**Class Account**	**Current Budget**	**Amount Increase/ (Decrease)**	**Revised Budget Amount**
2017	Contracts for Prog Svs	102-500731	$ 290,154.00	$ -	$ 290,154.00
2018	Contracts for Prog Svs	102-500731	$ 290,154.00	$ -	$ 290,154.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			**$ 580,308.00**	$ -	**$ 580,308.00**

The Stepping Stone Drop-In Center Association					
Vendor # 157967					
State Fiscal Year	**Class Title**	**Class Account**	**Current Budget**	**Amount Increase/ (Decrease)**	**Revised Budget Amount**
2017	Contracts for Prog Svs	102-500731	$ 209,790.00	$ -	$ 209,790.00
2018	Contracts for Prog Svs	102-500731	$ 209,790.00	$ -	$ 209,790.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			**$ 419,580.00**	$ -	**$ 419,580.00**

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	**Class Title**	**Class Account**	**Current Budget**	**Amount Increase/ (Decrease)**	**Revised Budget Amount**
2017	Contracts for Prog Svs	102-500731	$ 188,183.00	$ -	$ 188,183.00
2018	Contracts for Prog Svs	102-500731	$ 188,183.00	$ -	$ 188,183.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			**$ 376,366.00**	$ -	**$ 376,366.00**

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	**Class Title**	**Class Account**	**Current Budget**	**Amount Increase/ (Decrease)**	**Revised Budget Amount**
2017	Contracts for Prog Svs	102-500731	$ 146,449.00	$ -	$ 146,449.00
2018	Contracts for Prog Svs	102-500731	$ 146,449.00	$ -	$ 146,449.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			**$ 292,898.00**	$ -	**$ 292,898.00**

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	**Class Title**	**Class Account**	**Current Budget**	**Amount Increase/ (Decrease)**	**Revised Budget Amount**
2017	Contracts for Prog Svs	102-500731	$ 211,860.00	$ -	$ 211,860.00
2018	Contracts for Prog Svs	102-500731	$ 211,860.00	$ -	$ 211,860.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			**$ 423,720.00**	$ -	**$ 423,720.00**

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 245,562.00	$ -	$ 245,562.00
2018	Contracts for Prog Svs	102-500731	$ 245,562.00	$ -	$ 245,562.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 491,124.00	$ -	$ 491,124.00

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 135,751.00	$ -	$ 135,751.00
2018	Contracts for Prog Svs	102-500731	$ 135,751.00	$ -	$ 135,751.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 271,502.00	$ -	$ 271,502.00

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 102,362.00	$ -	$ 102,362.00
2018	Contracts for Prog Svs	102-500731	$ 102,362.00	$ -	$ 102,362.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 204,724.00	$ -	$ 204,724.00

SUB TOTAL			$ 3,060,222.00	$ -	$ 3,060,222.00

05-95-92-920010-7011 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, PEER SUPPORT SERVICES

100% General Funds

Activity Code: 92207011

The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 233,122.00	$ -	$ 233,122.00
2018	Contracts for Prog Svs	102-500731	$ 233,122.00	$ -	$ 233,122.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 466,244.00	$ -	$ 466,244.00

The Stepping Stone Drop-In Center Association					
Vendor # 157967					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 168,555.00	$ -	$ 168,555.00
2018	Contracts for Prog Svs	102-500731	$ 168,555.00	$ -	$ 168,555.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 337,110.00	$ -	$ 337,110.00

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 151,196.00	$ -	$ 151,196.00
2018	Contracts for Prog Svs	102-500731	$ 151,196.00	$ -	$ 151,196.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 302,392.00	$ -	$ 302,392.00

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 117,665.00	$ -	$ 117,665.00
2018	Contracts for Prog Svs	102-500731	$ 117,665.00	$ -	$ 117,665.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 235,330.00	$ -	$ 235,330.00

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 170,218.00	$ -	$ 170,218.00
2018	Contracts for Prog Svs	102-500731	$ 170,218.00	$ -	$ 170,218.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 340,436.00	$ -	$ 340,436.00

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 197,296.00	$ -	$ 197,296.00
2018	Contracts for Prog Svs	102-500731	$ 197,296.00	$ -	$ 197,296.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 394,592.00	$ -	$ 394,592.00

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 109,071.00	$ -	$ 109,071.00
2018	Contracts for Prog Svs	102-500731	$ 109,071.00	$ -	$ 109,071.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 218,142.00	$ -	$ 218,142.00

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 82,245.00	$ -	$ 82,245.00
2018	Contracts for Prog Svs	102-500731	$ 82,245.00	$ -	$ 82,245.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -

2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 164,490.00	$ -	$ 164,490.00

SUB TOTAL			$ 2,458,736.00	$ -	$ 2,458,736.00

05-95-92-922010-4118 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, PEER SUPPORT SERVICES

100% General Funds

Activity Code: 92204118

The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	**Class Title**	**Class Account**	**Current Budget**	**Amount Increase/ (Decrease)**	**Revised Budget Amount**
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 233,122.00	$ -	$ 233,122.00
2020	Contracts for Prog Svs	102-500731	$ 197,082.00	$ -	$ 197,082.00
2021	Contracts for Prog Svs	102-500731	$ 190,832.00	$ -	$ 190,832.00
2022	Contracts for Prog Svs	102-500731	$ 190,832.00	$ -	$ 190,832.00
Subtotal			$ 811,868.00	$ -	$ 811,868.00

The Stepping Stone Drop-In Center Association					
Vendor # 157967					
State Fiscal Year	**Class Title**	**Class Account**	**Current Budget**	**Amount Increase/ (Decrease)**	**Revised Budget Amount**
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 168,555.00	$ -	$ 168,555.00
2020	Contracts for Prog Svs	102-500731	$ 177,823.00	$ -	$ 177,823.00
2021	Contracts for Prog Svs	102-500731	$ 171,573.00	$ -	$ 171,573.00
2022	Contracts for Prog Svs	102-500731	$ 171,573.00	$ -	$ 171,573.00
Subtotal			$ 689,524.00	$ -	$ 689,524.00

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	**Class Title**	**Class Account**	**Current Budget**	**Amount Increase/ (Decrease)**	**Revised Budget Amount**
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 151,196.00	$ -	$ 151,196.00
2020	Contracts for Prog Svs	102-500731	$ 156,569.00	$ -	$ 156,569.00
2021	Contracts for Prog Svs	102-500731	$ 150,319.00	$ -	$ 150,319.00
2022	Contracts for Prog Svs	102-500731	$ 150,319.00	$ -	$ 150,319.00
Subtotal			$ 608,403.00	$ -	$ 608,403.00

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	**Class Title**	**Class Account**	**Current Budget**	**Amount Increase/ (Decrease)**	**Revised Budget Amount**
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 117,665.00	$ -	$ 117,665.00
2020	Contracts for Prog Svs	102-500731	$ 128,811.00	$ -	$ 128,811.00
2021	Contracts for Prog Svs	102-500731	$ 122,561.00	$ -	$ 122,561.00
2022	Contracts for Prog Svs	102-500731	$ 122,561.00	$ -	$ 122,561.00
Subtotal			$ 491,598.00	$ -	$ 491,598.00

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	**Class Title**	**Class Account**	**Current Budget**	**Amount Increase/ (Decrease)**	**Revised Budget Amount**
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 170,218.00	$ -	$ 170,218.00
2020	Contracts for Prog Svs	102-500731	$ 200,977.00	$ -	$ 200,977.00
2021	Contracts for Prog Svs	102-500731	$ 194,727.00	$ -	$ 194,727.00
2022	Contracts for Prog Svs	102-500731	$ 194,727.00	$ -	$ 194,727.00

Subtotal			$ 760,649.00	$ -	$ 760,649.00

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 197,296.00	$ -	$ 197,296.00
2020	Contracts for Prog Svs	102-500731	$ 189,153.00	$ -	$ 189,153.00
2021	Contracts for Prog Svs	102-500731	$ 182,903.00	$ -	$ 182,903.00
2022	Contracts for Prog Svs	102-500731	$ 182,903.00	$ -	$ 182,903.00
Subtotal			$ 752,255.00	$ -	$ 752;255.00

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 109,071.00	$ -	$ 109,071.00
2020	Contracts for Prog Svs	102-500731	$ 114,544.00	$ -	$ 114,544.00
2021	Contracts for Prog Svs	102-500731	$ 108,294.00	$ -	$ 108,294.00
2022	Contracts for Prog Svs	102-500731	$ 108,294.00	$ -	$ 108,294.00
Subtotal			$ 440,203.00	$ -	$ 440,203.00

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 82,245.00	$ -	$ 82,245.00
2020	Contracts for Prog Svs	102-500731	$ 64,409.00	$ -	$ 64,409.00
2021	Contracts for Prog Svs	102-500731	$ 58,159.00	$ -	$ 58,159.00
2022	Contracts for Prog Svs	102-500731	$ 58,159.00	$ -	$ 58,159.00
Subtotal			$ 262,972.00	$ -	$ 262,972.00

SUB TOTAL			$ 4,817,472.00	$ -	$ 4,817,472.00

05-95-92-922010-4120 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, MENTAL HEALTH BLOCK GRANT

100% Federal Funds

Activity Code: 92204120

The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 290,154.00	$ -	$ 290,154.00
2020	Contracts for Prog Svs	102-500731	$ 237,516.00	$ -	$ 237,516.00
2021	Contracts for Prog Svs	102-500731	$ 237,516.00	$ -	$ 237,516.00
2022	Contracts for Prog Svs	102-500731	$ 237,516.00	$ -	$ 237,516.00
Subtotal			$ 1,002,702.00	$ -	$ 1,002,702.00

The Stepping Stone Drop-In Center Association					
Vendor # 157967					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 209,790.00	$ -	$ 209,790.00
2020	Contracts for Prog Svs	102-500731	$ 213,546.00	$ -	$ 213,546.00
2021	Contracts for Prog Svs	102-500731	$ 213,546.00	$ -	$ 213,546.00
2022	Contracts for Prog Svs	102-500731	$ 213,546.00	$ -	$ 213,546.00
Subtotal			$ 850,428.00	$ -	$ 850,428.00

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 188,183.00	$ -	$ 188,183.00
2020	Contracts for Prog Svs	102-500731	$ 187,092.00	$ -	$ 187,092.00
2021	Contracts for Prog Svs	102-500731	$ 187,092.00	$ -	$ 187,092.00
2022	Contracts for Prog Svs	102-500731	$ 187,092.00	$ -	$ 187,092.00
Subtotal			**$ 749,459.00**	$ -	**$ 749,459.00**

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 146,449.00	$ -	$ 146,449.00
2020	Contracts for Prog Svs	102-500731	$ 152,544.00	$ -	$ 152,544.00
2021	Contracts for Prog Svs	102-500731	$ 152,544.00	$ -	$ 152,544.00
2022	Contracts for Prog Svs	102-500731	$ 152,544.00	$ -	$ 152,544.00
Subtotal			**$ 604,081.00**	$ -	**$ 604,081.00**

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 211,860.00	$ -	$ 211,860.00
2020	Contracts for Prog Svs	102-500731	$ 192,364.00	$ -	$ 192,364.00
2021	Contracts for Prog Svs	102-500731	$ 192,364.00	$ -	$ 192,364.00
2022	Contracts for Prog Svs	102-500731	$ 192,364.00	$ -	$ 192,364.00
Subtotal			**$ 788,952.00**	$ -	**$ 788,952.00**

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 245,562.00	$ -	$ 245,562.00
2020	Contracts for Prog Svs	102-500731	$ 227,646.00	$ -	$ 227,646.00
2021	Contracts for Prog Svs	102-500731	$ 227,646.00	$ -	$ 227,646.00
2022	Contracts for Prog Svs	102-500731	$ 227,646.00	$ -	$ 227,646.00
Subtotal			**$ 928,500.00**	$ -	**$ 928,500.00**

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 135,751.00	$ -	$ 135,751.00
2020	Contracts for Prog Svs	102-500731	$ 134,784.00	$ -	$ 134,784.00
2021	Contracts for Prog Svs	102-500731	$ 134,784.00	$ -	$ 134,784.00
2022	Contracts for Prog Svs	102-500731	$ 134,784.00	$ -	$ 134,784.00
Subtotal			**$ 540,103.00**	$ -	**$ 540,103.00**

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 102,362.00	$ -	$ 102,362.00

2020	Contracts for Prog Svs	102-500731	$	134,619.00	$ -	$ 134,619.00
2021	Contracts for Prog Svs	102-500731	$	134,619.00	$ -	$ 134,619.00
2022	Contracts for Prog Svs	102-500731	$	134,619.00	$ -	$ 134,619.00
Subtotal			$	506,219.00	$ -	$ 506,219.00

SUB TOTAL			$ 5,970,444.00	$ -	$ 5,970,444.00

05-95-91-910010-5710 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: GLENCLIFF HOME FOR ELDER, GLENCLIFF HOME, PROFESSIONAL CARE

80% Other Funds/ 20% General Funds

Activity Code: 91000000

The Altenative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2018	Consultants	046-500464	$ 1,200.00	$ -	$ 1,200.00
2019	Consultants	046-500464	$ 1,200.00	$ -	$ 1,200.00
2020	Consultants	046-500464	$ -	$ -	$ -
Subtotal			$ 2,400.00	$ -	$ 2,400.00

SUB TOTAL			$ 2,400.00	$ -	$ 2,400.00

05-95-92-922010-4117 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, CMH PROGRAM SUPPORT

100% General Funds

Activity Code: 92204117

The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ -	$ -	$ -

The Stepping Stone Drop-In Center Association					
Vendor # 157967					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ -	$ -	$ -

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ -	$ -	$ -

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2021	Contracts for Prog Svs	102-500731	$ -	$ 300,000.00	$ 300,000.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 300,000.00	$ 300,000.00
Subtotal			$ -	$ 600,000.00	$ 600,000.00

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2021	Contracts for Prog Svs	102-500731	$ -	$ 300,000.00	$ 300,000.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 300,000.00	$ 300,000.00
Subtotal			$ -	$ 600,000.00	$ 600,000.00

On the Road to Recovery, Inc.					

Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2021	Contracts for Prog Svs	102-500731	$ -	$ 300,000.00	$ 300,000.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 300,000.00	$ 300,000.00
Subtotal			$ -	$ 600,000.00	$ 600,000.00

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2021	Contracts for Prog Svs	102-500731	$ -	$ 300,000.00	$ 300,000.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 300,000.00	$ 300,000.00
Subtotal			$ -	$ 600,000.00	$ 600,000.00

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ -	$ -	$ -

SUB TOTAL			$ -	$ 2,400,000.00	$ 2,400,000.00
TOTAL			$ 16,309,274.00	$ 2,400,000.00	$ 18,709,274.00

State of New Hampshire
Department of Health and Human Services
Amendment #4 to the Peer Support Services Contract

This 4th Amendment to the Peer Support Services contract (hereinafter referred to as "Amendment #4") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Connections Peer Support Center, (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 544 Islington Street, Portsmouth, NH 03801.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 29, 2016, (Item #23), as amended on June 20, 2018, (Item #33B), June 19, 2019, (Item #28), and on June 24, 2020, (Item #27), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, and Exhibit C-1, Revisions to General Provisions, Paragraph 3, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to increase the price limitation and modify the scope of services to support continued delivery of these services; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $2,069,950.

2. Delete Exhibit A - Amendment #2, Scope of Services, in its entirety and replace with Exhibit A – Amendment #4, Scope of Services, which is attached hereto and incorporated by reference herein.
3. Delete Exhibit B, Amendment #2, Methods and Conditions Precedent to Payment in its entirety and replace with Exhibit B – Amendment #4, Methods and Conditions Precedent to Payment, which is attached hereto and incorporated by reference herein.
4. Delete Exhibit B-5 - Amendment #3, SFY 2021 Budget, in its entirety and replace with Exhibit B-5 Amendment #4, SFY 2021 Budget, which is attached hereto and incorporated by reference herein.
5. Delete Exhibit B-5 - Amendment #3, SFY 2022 Budget in its entirety and replace with Exhibit B-6 Amendment #4, SFY 2022 Budget, which is attached hereto and incorporated by reference herein.
6. Add Exhibit B-7 Amendment #4, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #4 remain in full force and effect. This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

10/28/2020
Date

DocuSigned by:
Katja Fox
ED9D05B04C63442...

Name: Katja Fox
Title: Director

Connections Peer Support Center

10/27/2020
Date

DocuSigned by:
Gregory Burdwood
E0B1380838714A1...

Name: Gregory Burdwood
Title: Executive Director

New Hampshire Department of Health and Human Services
Peer Support Services

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

10/29/2020

DocuSigned by:
D5CA9202E32C4AE

Date

Name: Catherine Pinos
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _______________ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Scope of Services

1. Provisions Applicable to All Services

1.1. The Contractor shall submit a detailed description of the language assistance services they shall provide to persons with limited English proficiency to ensure meaningful access to their programs and services within ten (10) days of the contract effective date.

1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire (NH) General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

1.3. The Contractor shall provide peer support services in accordance with NH Administrative Rule He-M 400, Community Mental Health, Part 02, Peer Support, referred to as He-M 402, that:

1.3.1. Increase quality of life for individuals living with mental illness in NH.

1.3.2. Increase hope for and belief in the possibility of recovery for individuals living with mental illness in NH.

1.3.3. Increase choice regarding the services and supports available to individuals living with mental illness in NH.

1.3.4. Provide alternatives to and reduce the use of more restrictive and expensive services such as hospitalization.

1.3.5. Increase social connectedness for individuals living with mental illness in NH.

1.3.6. Increase satisfaction with peer support services.

1.4. The Contractor shall provide mental health peer support services to individuals who are eighteen (18) years of age or older who:

1.4.1. Self-identify as a recipient, as a former recipient, or at a significant risk of becoming a recipient of mental health services, and may include individuals who are homeless; and/or

1.4.2. Require additional support to transition from in patient or institutional settings into the community, or alternatively require more intensive supports to reduce the need for admission to an inpatient setting.

1.5. For the purposes of this contract, any reference to days shall mean consecutive calendar days, unless otherwise denoted as business days.

1.6. The Contractor agrees that if the performance of services involves the collection, transmission, storage, or disposition of Part 2 substance use disorder (SUD) information or records created by a Part 2 provider the information or records shall be subject to all safeguards of 42 CFR Part 2.

2. Definitions

2.1. **Board of Directors** means the governing body of a nongovernmental peer support agency.

2.2. **Business Days** are defined as Monday through Friday, excluding Saturday and Sunday.

2.3. **Consumers** are any individual, eighteen (18) years of age or older, who self-identifies as a recipient, as a former recipient, or as a significant risk of becoming a recipient of publically funded mental health services.

2.4. **Guests** are any individuals who are invited to visit the peer support agency by a member, participant, or the peer support agency.

2.5. **Homeless** is (1) an individual or family who lacks a fixed, regular, and adequate nighttime residence; or (2) an individual or family who has a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels and congregate shelters), an institution other than a penal facility that provides temporary residence for individuals intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

2.6. **Members** are any consumers, who have made an informed decision to join, and agree to, abide by, and support the goals and objectives of peer support services.

2.7. **Mental illness** is defined in RSA 135-C:2 X, namely, "a substantial impairment of emotional processes, or of the ability to exercise conscious control of one's actions, or of the ability to perceive reality or to reason, when the impairment is manifested by instances of extremely abnormal behavior or extremely faulty perceptions. It does not include impairment primarily caused by: (a) epilepsy; (b) intellectual disability; (c) continuous or noncontinuous periods of intoxication caused by substances such as alcohol or drugs; or (d) dependence upon or addiction to any substance such as alcohol or drugs."

2.8. **Participant** means a consumer, who is not member, who participates in any aspect of peer support services.

2.9. **Peer Support Agency (PSA)** means an organization whose primary purpose is to provide culturally appropriate peer support, peer education, and peer programming to persons eighteen (18) year of age and older who self- identify as having a mental illness.

2.10. **Quarter or Quarterly** is defined as the periods of July 1 through September 30, October 1 through December 31, January 1 through March 31, and April 1 through June 30.

2.11. **Recovery** means for an individual with a mental illness, development of personal and social skills, beliefs and characters that support choice, increase quality of life, minimize or eliminate impairment, and decrease dependence on professional services.

2.12. **Region** is the geographic area of cities and towns in New Hampshire, as defined by the Department.

2.13. **Serious Mental Illness (SMI)** refers to individuals whom the state defines as having either Serious Mental Illness (SMI) or Serious and Persistent Mental Illness (SPMI) pursuant to N.H. Revised Statutes Annotated (RSA) 135-C:2, XV.

2.14. **Week** is defined as Monday through Sunday.

3. Scope of Services

3.1. Peer Support Services

3.1.1. The Contractor shall provide in-house and community based services for New Hampshire residents.

3.1.2. The Contractor shall provide peer support services that are provided for consumers and by consumers including, but not limited to:

3.1.2.1. Peer support services that include supportive interactions, shared experiences, acceptance, trust, respect, lived experience, and mutual support among members, participants, staff and volunteers.

3.1.2.2. Maintenance of a safe physical location that:

3.1.2.2.1. Is open a minimum of forty-four (44) hours per week, eight (8) hours per day, five (5) days per week and four (4) hours on one (1) additional day per week at each location; and

3.1.2.2.2. Provides face-to-face or telephone peer support services to PSA members or others who contact the PSA at a minimum of forty (40) hours per week at each location.

3.1.2.3. Peer support services based on the Intentional Peer Support model that:

3.1.2.3.1. Foster recovery from mental illness by helping individuals identify and achieve personal goals while building an evolving vision of their recovery.

3.1.2.3.2. Foster self-advocacy skills, autonomy, and independence.

3.1.2.3.3. Emphasize mutuality and reciprocity as demonstrated by shared decision-making; strong conflict resolution; non-medical approaches; and non-static roles, including but not limited to, staff who are members and members who are educators.

3.1.2.3.4. Offer alternative views on mental health, mental illness and the effects of trauma and abuse.

3.1.2.3.5. Encourage informed decision-making about all aspects of people's lives.

3.1.2.3.6. Support people with mental illness in challenging perceived self-limitations, while encouraging the development of beliefs that enhance personal and relational growth.

3.1.2.3.7. Emphasize a holistic approach to health that includes a vision of the whole person.

3.1.2.4. Providing opportunities to learn wellness strategies by using, at a minimum, Wellness Recovery Action Planning (WRAP) and Whole Health Action Management (WHAM), to strengthen individual abilities to attain and maintain their health and recovery from mental illness.

3.1.2.5. Provide in-house and community-based services according to the

Deliverables in Subsection 12.1. through Subsection 12.2.

3.1.2.6. Provide outreach by face-to-face or by telephone contact with consumers by providing support to individuals who are unable to attend agency activities, visiting people who are hospitalized with a psychiatric condition, and reaching out to people who meet membership criteria and are homeless.

3.1.2.7. Provide monthly newsletters published by the peer support agency (PSA) that describes agency services and activities; other community services; social and recreational opportunities; member articles and contributions and other relevant topics that might be of interest to members and participants.

3.1.2.8. Distribute the newsletters to the members and other interested parties, which may include but are not limited to community mental health centers and other appropriate community organizations, at least five (5) business days prior to the upcoming month.

3.1.2.9. Provide monthly education events and presentations topics germane to issues and concerns of consumers of mental health services which must include, but are not limited to:

3.1.2.9.1. Rights Protection.

3.1.2.9.2. Peer Advocacy.

3.1.2.9.3. Recovery.

3.1.2.9.4. Employment.

3.1.2.9.5. Wellness Management.

3.1.2.9.6. Community Resources.

3.1.2.10. Provide an electronic copy of the monthly newsletters and education events in Subparagraph 3.1.2.7. and Paragraph 11.6.3., to the Office of Consumer and Family Affairs within the Department's Bureau of Behavioral Health, and the Mental Health Block Grant State Planner and Mental Health Block Grant Advisory Council no later than five (5) days prior to the beginning of the following month.

3.1.2.11. Provide individual peer assistance by assisting adults to:

3.1.2.11.1. Locate, obtain, and maintain mental health services and supports through referral, consumer education, and self-empowerment;

3.1.2.11.2. Support individuals who are identifying problems by assisting them in addressing the issue and/or in resolving grievances; and

3.1.2.11.3. Promote self-advocacy.

3.1.2.12. Provide employment education by providing members with:

3.1.2.12.1. Information relative to obtaining and maintaining competitive employment.

3.1.2.12.2. Referrals to community mental health center employment programs.

3.1.2.12.3. Employment-related activities, which may include, but are not limited to:

3.1.2.12.3.1. Resume writing.

3.1.2.12.3.2. Interviewing techniques.

3.1.2.12.3.3. Assistance with completing employment applications.

3.1.2.13. Inform members and the general public about peer support and wellness services available by providing Community Education Presentations about mental illness and the peer support community on a monthly basis to potential referral sources, funders, or families of individuals affected by mental illness.

3.1.2.14. Inform local human service providers and the general public about the stigma of mental illness, wellness and recovery and collaborate with other local human service providers that serve consumers in order to facilitate referrals and share information about services and other local resources.

3.1.2.15. Provide training and technical assistance to assist consumers to advocate for themselves and on their own behalf regarding healthcare such as, but not limited to:

3.1.2.15.1. Preparation techniques for doctors' appointments.

3.1.2.15.2. How to take notes.

3.1.2.15.3. How to use the physician's desk reference book for medications and a review of patient rights.

3.1.2.16. Invite guests to participate in peer support activities.

3.1.2.17. Provide residential support services, as needed, by providing support and assistance such as help with staying in their home or apartment, or finding a place to live.

3.1.2.18. Maintain at least a monthly schedule of peer support and wellness services and activities, which includes, but is not limited to:

3.1.2.18.1. Staff development and training.

3.1.2.18.2. Events that include community-based services.

3.1.2.18.3. Community outreach events.

3.2. The Contractor shall provide transportation services to members, participants and guests, as needed. The Contractor shall:

3.2.1. Transport members, participants, guests, in a Contractor owned or leased vehicle, to and from their homes and/or the Contractor's PSA to participate in activities that may include, but not limited to:

3.2.1.1. Peer support services.

3.2.1.2. Wellness and recovery activities.

3.2.1.3. Annual conferences.

3.2.1.4. Regional meetings.

3.2.1.5. Council meetings.

3.2.2. Ensure all vehicles and drivers used for transportation comply with Federal and State Department of Transportation and Department of Safety regulations, which include, but are not limited to:

3.2.2.1. Vehicles must be registered pursuant to NH Administrative Rule Saf-C 500, Vehicle Registration Rules.

3.2.2.2. Vehicles must be inspected in accordance with NH Administrative Rule Saf-C 3200, Official Motor Vehicle Inspection Requirements.

3.2.2.3. Drivers must be licensed in accordance with NH Administrative Rule Saf-C 1000, Driver Licensing.

3.2.3. Require all employees, members, or volunteers who drive Contractor-owned vehicles sign a State of New Hampshire Release of Individual Motor Vehicle Driver Records form in order to access individual driver records that indicate drivers have safe driving records.

3.2.4. Require all employees, members, or volunteers who drive Contractor-owned vehicles complete a National Safety Council Defensive Driving course offered through a State of New Hampshire-approved agency.

3.3. The Contractor shall acknowledge funding from the Department to support transportation costs:

3.3.1. Is not used for activities other than peer support related activities defined in this Agreement.

3.3.2. May be used on an 'as needed' basis to pay for bus rides that are necessary to transport individuals to peer support services provided by the Contractor.

3.4. <u>Warmline Services</u>

3.4.1. The Contractor shall provide warmline services that offer on-call telephone peer support services to members, participants, and others. The Contractor shall ensure warmline services:

3.4.1.1. Are provided to any individual with the ability to receive calls and make calls statewide and who lives or works in the State of New Hampshire.

3.4.1.2. Are provided during the hours the PSA is closed.

3.4.1.3. Assist individuals with addressing a current crisis related to their mental health.

3.4.1.4. Include referrals to appropriate treatment and other resources available in the consumer's service area.

3.4.1.5. Are provided by staff who are trained in providing warmline services.

3.4.1.6. May include outreach calls described in Subparagraph 3.1.2.6.

3.5. Recovery Oriented Step-Up Step-Down Program

3.5.1. The Contractor shall operate a three (3) bed step-up / step-down program that provides short-term recovery-based transition services for individuals:

3.5.1.1. Transitioning from inpatient or institutional settings into the community; or

3.5.1.2. Who require more intensive supports to reduce the need for admission to an inpatient setting.

3.5.2. The Contractor shall ensure each single occupancy bed includes, but is not limited to:

3.5.2.1. A minimum of one (1) bathroom with a sink, toilet, and shower.

3.5.2.2. A specific sleeping area designated for each individual, ensuring common areas are not used as bedrooms.

3.5.2.3. Storage space for each individual's clothing and personal possessions.

3.5.2.4. Kitchen area for the individual(s) to store and prepare meals.

3.5.2.5. A minimum of one (1) telephone for incoming and outgoing calls.

3.5.3. For the purposes of Step-Up / Step-Down services, any reference to business days shall mean Monday through Friday, excluding holidays observed by the State of New Hampshire as non-working days.

3.5.4. The Contractor shall ensure all services are available to individuals, statewide, regardless of insurance coverage or place of employment.

3.5.5. The Contractor shall ensure Step-Up / Step-Down services are in place on or before February 1, 2021, which include, but are not limited to:

3.5.5.1. Program(s) that are voluntary admission, short term, with overnight services.

3.5.5.2. Non-clinical peer supports, which includes access to a twenty-four (24) hour staff.

3.5.5.3. Policies that establish a ninety (90) day maximum stay limit per individual, per episode.

3.5.5.4. Programs staffed by peer support specialists as defined in NH Administrative Rule He-M 400, Community Mental Health, Part 426, Community Mental Health Services, Section 13(d)(4), who have successfully passed the state peer support specialist certification exam; and

3.5.5.5. Coordination with outpatient community-based clinical treatment providers.

3.5.6. The Contractor shall ensure the program accepts individuals:

3.5.6.1. Discharging from inpatient settings; and

3.5.6.2. For whom a short-term stay would prevent a psychiatric hospitalization.

3.5.7. The Contractor shall utilize the Intentional Peer Support (IPS) or another Substance Abuse and Mental Health Services Administration (SAMHSA)-recognized mental health peer support model to facilitate recovery and wellness with individuals. The Contractor shall ensure:

3.5.7.1. Programs operate in accordance with SAMHSA Core Competencies for Peer Support Workers in a behavioral health system.

3.5.7.2. Individuals are referred to other community-based service providers, as appropriate to ensure:

3.5.7.2.1. Individuals are connected to community providers, programs, and applicable services; and

3.5.7.2.2. Whole-health needs of each individual are met.

3.5.7.3. Programs utilize a statewide referral form approved by the Department.

3.5.7.4. Programs adhere to a standardized Department-approved admission criteria that includes, but is not limited to, serving individuals who:

3.5.7.4.1. Are at least eighteen (18) years of age.

3.5.7.4.2. Are residents of the State of New Hampshire.

3.5.7.4.3. Self-identified as being in psychiatric distress.

3.5.7.4.4. Exhibit a willingness to engage in daily services and wellness activities.

3.5.7.4.5. Self-administering medication, if applicable, or receive medication from a community provider or clinician off-site.

3.5.7.5. Referrals for Step-Up services are accepted if submitted through:

3.5.7.5.1. Community mental health programs or providers;

3.5.7.5.2. Mobile Crisis Response Teams;

3.5.7.5.3. Behavioral Health Crisis Treatment Centers;

3.5.7.5.4. Peer Support Agencies; or

3.5.7.5.5. Other entities, as approved by the Department.

3.5.7.6. Referrals for Step-Down are accepted if submitted through:

3.5.7.6.1. New Hampshire Hospital;

3.5.7.6.2. Designated Receiving Facilities;

3.5.7.6.3. Mobile Crisis Response Teams;

3.5.7.6.4. Community mental health providers;

3.5.7.6.5. Hospitals; or

3.5.7.6.6. Other entities, as approved by the Department.

3.5.7.7. Programs are staffed and operated by a minimum of one (1) certified peer support specialist with lived experience with mental illness, twenty-four (24) hours per day when participants are in the program.

3.5.7.8. Programs support recovery and resiliency through interventions and services, or connections to services, which include, but are not limited to:

3.5.7.8.1. Facilitating connections to natural supports, defined as relationships that occur in everyday life, which may include, but are not limited to:

3.5.7.8.1.1. Family.

3.5.7.8.1.2. Friends.

3.5.7.8.1.3. Neighbors.

3.5.7.8.1.4. Peer support networks when transitioning back to their communities.

3.5.7.8.2. Developing and supporting individual discharge plans.

3.5.7.8.3. Providing access to a minimum of one (1) SAMHSA-recognized peer support model who emphasizes physical, psychological, and emotional safety and focuses on individual strengths as a method to rebuild a sense of control and empowerment.

3.5.7.8.4. Providing opportunities for engagement in structured daily activities while participating in the program.

3.5.7.8.5. Developing individualized safety and wellness plans that support person-centered recovery goals, which may include Wellness Recovery Action Plans (WRAP).

3.5.7.9. Programs support connections, allow access to and collaborate with the individual's current services and service providers, including establishing memorandums of understanding, communication protocols and sharing of care plans with written consent.

3.5.7.10. Programs support individuals with maintaining participation in academic coursework and/or employment.

3.5.8. The Contractor shall assist individuals without established service providers to obtain a variety of supports that include, but are not limited to:

3.5.8.1. Referring individuals to Department supports for benefits that may include, but are not limited to:

3.5.8.1.1. Social security.

3.5.8.1.2. Food stamps.

3.5.8.1.3. Utility assistance.

3.5.8.2. Assisting individuals with obtaining, completing, and submitting housing applications.

3.5.8.3. Identifying and connecting participants to resources within the community which may include, but are not limited to:

3.5.8.3.1. Peer support agencies.

3.5.8.3.2. Community mental health centers.

3.5.8.3.3. Faith-based groups.

3.5.8.3.4. Transportation services.

3.5.8.3.5. Primary care services.

3.5.8.3.6. Homemaker and personal care services.

3.5.9. The Contractor shall administer a functional assessment at intake and discharge from the program, as approved by the Department to include, but not be limited to, data identified in Subsection 11.6.

3.5.10. The Contractor shall develop a referral process with the local community mental health center for those individuals who, while in the program, experience a rise in acuity level and:

3.5.10.1. Require a higher level of care; or

3.5.10.2. Require an evaluation for hospitalization.

3.5.11. The Contractor shall ensure individual health needs are addressed during the course of their stay.

3.5.12. The Contractor shall maintain a smoke-free environment and provide tobacco intervention services to individuals who are former or current smokers. The Contractor shall ensure:

3.5.12.1. Former smokers receive appropriate supports that assist with maintaining a non-smoking status.

3.5.12.2. Current smokers are offered smoking cessation treatments.

3.5.13. The Contractor shall ensure the discharge process includes, but is not limited to:

3.5.13.1. Conducting discharge planning meetings that actively include individuals receiving services.

3.5.13.2. Ensuring the first discharge meeting occurs no later than thirty (30) days from the date of the individual's admission

3.5.13.3. Ensuring discharge meetings include, but are not limited to, input from:

3.5.13.3.1. Community mental health centers.

3.5.13.3.2. Primary care services.

3.5.13.3.3. Other providers.

3.5.13.3.4. Natural supports.

3.5.13.4. Ensuring discharge plans are wellness and recovery oriented and include, but are not limited to, individualized:

3.5.13.4.1. Emergency contacts.

3.5.13.4.2. Community support contacts.

3.5.13.4.3. Updates on presenting problem.

3.5.13.4.4. Disposition.

3.5.13.4.5. Recovery goals.

3.5.13.4.6. Action steps to transition back into the community.

3.5.14. The Contractor shall choose to become an enrolled Medicaid provider through the Department's Medicaid program.

3.5.15. The Contractor shall perform, or cooperate with the performance of, such quality improvement and utilization review activities as are determined to be necessary and appropriate by the Department within timeframes reasonably specified by the Department.

4. Geographic Area and Physical Location of Services

4.1. The Contractor shall provide peer support services separately from the confines of a local community mental health center, unless otherwise pre-approved by the Department.

4.2. The Contractor shall provide peer support services at a physical location and/or building that is in compliance with Exhibit C, Section 15. and with the Life Safety requirements, which include, but are not limited to, ensuring the building:

4.2.1. Is in compliance with local health, building and fire safety codes.

4.2.2. Is maintained in good repair and free of hazards, and includes, but is not limited to:

4.2.2.1. A minimum of one (1) indoor bathroom that includes a sink and toilet.

4.2.2.2. A minimum of one (1) telephone for incoming and outgoing calls.

4.2.2.3. A functioning septic or other sewage disposal system.

4.2.2.4. A source of potable water for drinking and food preparation as follows:

4.2.2.4.1. If drinking water is supplied by a non-public water system, the Contractor shall ensure the water is tested and found to be in accordance with NH Administrative Rules Env-Ws 300, Drinking Water Rules, Part 15, Maximum Contaminant Levels and Maximum Contaminant Level Goal for Regulated Organics and Part 316, Regulated Secondary Maximum Contaminant Levels initially and every five (5) years thereafter.

4.2.2.4.2. If the water is not approved for drinking, the Contractor shall implement an alternative method for providing safe drinking water.

5. **Enrolling Consumers for Services and/or as Members with a Peer Support Agency (PSA)**

5.1. The Contractor shall provide peer support services to individuals defined in Subsection 1.4. who have a desire to work on wellness issues, and who have a desire to participate in services.

5.2. The Contractor shall request consumers complete a membership application to join and support the activities and mission of the PSA.

5.3. The Contractor shall ensure the membership application includes, but is not limited to:

5.3.1. The minimum engagement policy.

5.3.2. Suspension of membership policy.

5.3.3. Membership rules.

5.3.4. Attestation that the consumer supports the mission of the PSA.

5.4. The Contractor shall provide services to both members and non-members.

6. **Staffing Requirements for a PSA**

6.1. The Contractors shall employ an Executive Director who:

6.1.1. Is appointed by the Board of Directors.

6.1.2. Is employed by the Contractor and is supervised by the Board of Directors.

6.1.3. Has, at a minimum, the following qualification:

6.1.3.1. One (1) year of supervisory or management experience; and

6.1.3.1.1. An associate's degree or higher administration, business management, education, health, or human services; or

6.1.3.1.2. Additional years of experience in the peer support field that can be substituted for one (1) year of academic experience.

6.1.4. Is evaluated annually by the Board of Directors to ensure peer support and wellness services and activities are provided in accordance with:

6.1.4.1. The performance expectations approved by the Board.

6.1.4.2. The Department's policies and rules.

6.1.4.3. The Contract terms and conditions.

6.1.4.4. The Quality improvement reviews.

6.2. The Contractor shall screen each staff member for tuberculosis prior to employment.

6.3. The Contractor shall not add, delete, defund, or transfer staff positions among programs without prior written permission from the Department.

6.4. The Contractor shall develop a Staffing Contingency Plan for Department approval no later than thirty (30) days from the contract effective date, which includes but is not limited to:

6.4.1. The process for replacement of personnel in the event of loss of key personnel or other personnel during the period of this Agreement.

6.4.2. The description of how additional staff resources shall be allocated to support this Agreement in the event of inability to meet any performance standard.

6.4.3. The description of time frames necessary for obtaining staff replacements.

6.4.4. An explanation of the Contractor's capabilities to provide, in a timely manner, staff replacements/additions with comparable experience.

6.5. The Contractor shall submit an emergency staffing plan within thirty (30) days of the contract effective date if the contract that includes, but not limited to:

6.5.1. Inclement weather notifications for programming and transportation services.

6.5.2. Emergency evacuation plans for the Agency.

6.6. Prior to making an offer of employment or for volunteer work, the Contractor shall, after obtaining signed and notarized authorization from the person or persons for whom information is being sought:

6.6.1. Obtain at least two (2) references for the person;

6.6.2. Submit the person's name for review against the bureau of elderly and adult services (BEAS) state registry maintained pursuant to RSA 161-F:49;

6.6.3. Complete a criminal records check to ensure that the person has no history of:

6.6.3.1. Felony conviction; or

6.6.3.2. Any misdemeanor conviction involving:

6.6.3.2.1. Physical or sexual assault;

6.6.3.2.2. Violence;

6.6.3.2.3. Exploitation;

6.6.3.2.4. Child pornography;

6.6.3.2.5. Threatening or reckless conduct;

6.6.3.2.6. Theft;

6.6.3.2.7. Driving under the influence of drugs or alcohol; or

6.6.3.2.8. Any other conduct that represents evidence of behavior that could endanger the well-being of a consumer; and

6.6.4. Complete a motor vehicles record check to ensure that the person has a valid driver's license if the person will be transporting consumers.

6.7. Unless the Contractor requests and obtains a waiver from the Department, it shall not hire any individual or approve any individual to act as a volunteer if:

6.7.1. The individual's name is on the BEAS state registry;

6.7.2. The individual has a record of a felony conviction; or

6.7.3. The individual has a record of any misdemeanors specified in Subparagraph 6.6.3.2.

7. **Staff Training and Development**

7.1. The Contractor shall verify and document all staff and volunteers have appropriate training, education, experience, and orientation to fulfill the responsibilities of their respective positions. The Contractor shall ensure:

7.1.1. All personnel and training records are current and available to the Department, as requested.

7.1.2. All staff training shall be in accordance with New Hampshire Administrative Rule He-M 400, Community Mental Health, Part 402, Peer Support, Section 402.05, Staff Training, Staff Development and Orientation.

7.2. The Contractor shall maintain documentation in files of the staffs completed trainings and certifications.

7.3. The Contractor shall obtain Department approval thirty (30) days prior to the training date, for all trainings provided by the Contractor or to attend trainings other than offered by the Contractor for staff at least on an annual basis such as, but not limited to:

7.3.1. Peer Support.

7.3.2. Warmline.

7.3.3. Facilitating Peer Support Groups.

7.3.4. Sexual Harassment.

7.3.5. Member Rights.

7.4. The Contractor shall provide Intentional Peer Support training and its required consultations to meet state certification.

7.5. The Contractor shall provide Wellness, Recovery, and Planning training to staff during the years in which Intentional Peer Support is not provided.

7.6. The Contractor shall ensure administrative staff, including the Executive Director, participate in trainings on:

7.6.1. Staff Development.

7.6.2. Supervision.

7.6.3. Performance Appraisals.

7.6.4. Employment Practices.

7.6.5. Harassment.

7.6.6. Program Development.

7.6.7. Complaints and the Complaint Process.

7.6.8. Financial Management.

7.7. The Contractor shall ensure that annual Wellness Training is available to staff and members, and may be provided to other mental health consumers who do not identify themselves as members of a PSA in the region.

7.8. The Contractor shall obtain prior approval by the Department no later than thirty (30) days prior to the training, to provide or refer staff to specific training proposed by either the Department or the Contractor.

7.9. The Contractor shall collaborate with other Peer Support Agencies to offer combined trainings to facilitate efficient use of training funds and to increase the scope of trainings offered.

7.10. The Contractor shall purge all data in accordance with the instructions from the Department pertaining to members, participants, and guests who have not received peer support services within the prior two (2) year period.

8. Composition and Responsibilities of a PSA

8.1. The Contractor shall establish and maintain a status as a PSA by:

8.1.1. Being incorporated with the Secretary of State's Office as a non-for-profit agency.

8.1.2. Having a plan for governance that requires a Board of Directors who:

8.1.2.1. Are responsible for the management and control of the property and affairs of the corporation.

8.1.2.2. Have the powers usually vested in the Board of Directors of a non-for-profit corporation.

8.1.2.3. Are comprised of a minimum of nine (9) individuals with at least 51% of the individuals who self-identify as consumers.

8.1.2.4. Have membership where less than 20% of the Board members are related by blood, marriage, or cohabitation to other Board members.

8.1.2.5. Establish and maintain the bylaws that include, but are not limited to:

8.1.2.5.1. Responsibilities and powers of the Board of Directors.

8.1.2.5.2. Term limits for the Board of Directors officers ensuring not more than 20% of the Board members serve for more than six (6) consecutive years.

8.1.2.5.3. A nominating process that actively recruits diverse individuals whose skills and life experiences serve the needs of the agency.

8.1.2.5.4. A procedure by which inactive PSA members are removed from the PSA Board.

8.2. The Contractor shall submit a corrective action plan to the Department within five (5) days when the Board of Directors membership falls below the required minimum of nine (9) members.

8.3. The Contractor shall submit an updated list of current Board of Directors members and a corrective action plan with timeframes to comply with the required number of members when membership falls below the minimum required number of five (5) members to the Department and NH Department of Justice, Division of Charitable Trusts.

8.4. The Contractor shall have a documented Orientation Process and Manual for the members and officers of the Board of Directors, which includes written descriptions outlining the duties of the members and officers of the Board of Directors.

8.5. The Contractor shall have annual trainings related to the members and officers of the Board of Directors roles and responsibilities, including fiduciary responsibilities.

8.6. The Contractor's Board of Directors shall have fiduciary responsibility for the agency including approval of agency financial policies and procedures that includes, but not be limited to, the following:

8.6.1. Cash Management including, but not limited to:

8.6.1.1. Cash receipts.

8.6.1.2. Cash disbursements.

8.6.1.3. Petty cash.

8.6.2. Accounts Payable/Receivable Procedures, payroll, and fixed assets.

8.6.3. Internal Control Procedures.

8.6.4. Expense Reimbursement and Advance Policy.

8.7. The Contractor shall have open attendance to PSA members during a portion of a Board meeting.

8.8. The Contractor shall publish the times and locations of Board of Directors meetings in an effort to encourage PSA member attendance.

8.9. The Contractor's Board of Directors shall maintain written records that are available to the Department upon request, which include, but are not limited to:

8.9.1. Board of Directors meeting minutes that include, but are not limited to:

8.9.1.1. Topics discussed.

8.9.1.2. Votes and actions taken.

8.9.1.3. A monthly review of the agency's financial status.

8.9.2. Current Board of Directors list that includes, but is not limited to:

8.9.2.1. Member name.

8.9.2.2. Member address.

8.9.2.3. Member phone number.

8.9.2.4. Member e-mail address.

8.9.2.5. Board office held.

8.9.2.6. Date joined the Board.

8.9.2.7. Member Board expiration date.

8.9.3. Documentation of the process and results of annual Board of Directors elections.

8.9.4. Policy manuals that include, but are not limited to policies for:

8.9.4.1. Human Resources.

8.9.4.2. Staff Development.

8.9.4.3. Financial Responsibilities.

8.9.4.4. Protection for member and participant rights.

8.10. The Contractor shall pursue other sources of revenue to support additional peer support services and/or supplement other related activities that the Department may not pay for under this Agreement.

9. Participation in Statewide/Regional Meetings

9.1. The Contractor shall support the recruitment and training of individuals for serving on local, regional and state mental health policy, planning and advisory initiatives.

9.2. The Contractor shall ensure the participation of individuals other than the Contractor's employees who provide leadership development meetings, workshops, and training events.

9.3. The Contractor shall ensure the Executive Director, or designee, attends the Department's monthly Peer Support Directors meeting for the purpose exchanging information as well as supporting and strengthening the statewide Peer Support system.

9.4. The Contractor shall meet, a minimum of two (2) times per year, with other regional community support organizations that serve the same populations, which may include, but are not limited to:

9.4.1. Mental health centers.

9.4.2. Area homeless shelters.

9.4.3. Community action programs.

9.4.4. Housing agencies.

9.5. The Contractor shall submit documentation to the Department that demonstrates attendance at the meetings in Section 9.

10. Grievance and Appeals

10.1. The Contractor shall submit a grievance and appeals process to the Department for approval. The Contractor shall ensure the grievance and appeals process includes, but is not limited to:

10.1.1. How to receive complaints orally, or in writing, ensuring information collected includes, but is not limited to:

10.1.1.1. Consumer name.

10.1.1.2. Date of written grievance.

10.1.1.3. Nature and subject of the grievance.

10.1.1.4. A method to submit an anonymous complaint.

10.1.2. A policy relative to assisting consumers with the grievance and appeal process including, but not limited to, how to file a complaint.

10.1.3. A method to track complaints.

10.1.4. Investigating allegations that a member's or participant's rights have been violated by agency staff, volunteers or consultants.

10.1.5. An immediate review of the complaint and investigation by the Contractor's director or his or her designee.

10.1.6. A process to attempt to resolve every grievance for which a formal investigation is requested.

10.1.7. An appeal process for members or participants to appeal any written decision rendered by the Board of Directors.

10.2. The Contractor shall ensure the Board of Directors issues a written decision to the member or participant filing a grievance upon completing an investigation and within twenty (20) business days setting forth the disposition of the grievance.

10.3. The Contractor shall submit a copy of the written decision in Subsection 10.2. of the complaint to the Department within ten (10) days from the written decision.

11. Reporting Requirements

11.1. The Contractor shall submit a report that lists the names of the trained individuals in accordance with Section 7. Staff Training and Development, utilizing reporting forms provided by the Department.

11.2. The Contractor shall provide the prior month's interim Balance Sheet, and Profit and Loss Statements to the Department no later than the 30th of the month, ensuring the report includes, but is not limited to:

11.2.1. The Current Ratio that measures the Contractor's total current assets available to cover the cost of current liabilities. The Contractor shall:

11.2.1.1. Utilize the following formula: Total current assets divided by total current liabilities.

11.2.1.2. Maintain a minimum current ratio of 1.1:1.0 with no variance allowed.

11.2.2. Accounts Payable that measure the Contractor's timeliness in paying invoices, ensuring no outstanding invoices greater than sixty (60) days.

11.2.3. Budget Management that compares budgets to actual revenues and expenses to determine the percentage of the Contractors budget executed year-to-date.

11.2.4. Ensure revenues are equal to or greater than the year-to-date calculation while ensuring expenses are equal to or less than the year-to-date calculation.

11.3. The Contractor shall prepare an Annual Report presentation for the benefit of the Mental Health Block Grant Advisory Council.

11.4. The Contractor shall submit a quarterly written report to the Department, on a form supplied by the Department, no later than the fifteenth (15th) day of the month following the end of each quarter that includes, but is not limited to:

11.4.1. Community outreach activities as outlined in Section 12. Deliverables.

11.4.2. Compilation of program evaluation and surveys submitted in the past quarter.

11.4.3. Peer support service deliverables as identified on templates provided by the Department.

11.4.4. Statistical data including, but not limited to:

11.4.4.1. The total number of unduplicated participants served on a daily basis.

11.4.4.2. The total number of current members, defined as only those members who have been served within the past year.

11.4.4.3. Program utilization totals by percentage.

11.4.4.4. Number of telephone peer support contacts.

11.4.4.5. Number and description of outreach activities.

11.4.4.6. Number and description of educational events provided:

11.4.4.6.1. On-site; and

11.4.4.6.2. In the community.

11.4.5. Board of Directors meeting minutes for the previous quarter that include, but are not be limited to:

11.4.5.1. Executive Director's report.

11.4.5.2. Board of Directors roster.

11.5. The Contractor shall provide a report for Department approval by July 31 of each State Fiscal Year, which outlines:

11.5.1. Specific steps the Contractor has taken to increase membership in the previous State Fiscal Year.

11.5.2. A plan for how the Contractor shall increase the unduplicated numbers served in the above activities by ten (10) percent of the total served in the previous year, for each subsequent State Fiscal Year.

11.5.3. Monthly in-house schedules and newsletters.

11.5.4. Quarterly revenue and expenses by cost, category and locations.

11.5.5. Quarterly Capital Expenditure Reports.

11.5.6. Quarterly Auditor's Reports: The prior three (3) months of monthly interim Balance Sheet and Profit and Loss Statements including separate statements for related parties that are certified by an officer of the reporting entity to measure the agency's fiscal integrity.

11.6. <u>Recovery Oriented Step-Up Step-Down Program</u>

11.6.1. The Contractor shall submit individual data in the format, content, frequency and method as approved by the Department that includes, but is not be limited to:

11.6.1.1. Admission region.

11.6.1.2. Discharge region.

11.6.1.3. Presenting problem upon admission.

11.6.1.4. If admission was diversion from inpatient care (step-up).

11.6.1.5. If admission facilitated a supported transition out of inpatient care (step-down).

11.6.1.6. Age.

11.6.1.7. Gender.

11.6.1.8. Sexual orientation.

11.6.1.9. Race and ethnicity.

11.6.1.10. Legal status.

11.6.1.11. Employment status.

11.6.1.12. Individual's housing status upon admission and discharge.

11.6.1.13. Discharge reason.

11.6.1.14. Length of stay.

11.6.1.15. Resource referrals.

11.6.1.16. Entry and exit client status indicators, to include, but not be limited to, if the individual:

11.6.1.16.1. Was a step-up or step-down referral;

11.6.1.16.2. Exited to a higher level of care; and

11.6.1.16.3. Was referred from a higher level of care.

11.6.2. The Contractor shall submit program status data to the Department in the format, content, frequency and method as approved by the Department, that includes, but is not limited to:

11.6.2.1. Number of beds occupied.

11.6.2.2. Daily provided programming.

11.6.2.3. Staffing levels.

11.6.2.4. Community outreach efforts, including, but not limited to:

11.6.2.4.1. Family supports.

11.6.2.4.2. Community resource supports.

11.6.2.4.3. Other individuals or entities specified by the individual as a support.

11.6.3. The Contractor shall ensure monthly data is submitted no later than the fifteenth (15th) of each month for the prior month's data, unless otherwise approved by the Department in writing.

11.6.4. The Contractor shall ensure quarterly data is submitted no later than the fifteenth (15th) day of the month following the close of a quarter.

11.6.5. The Contractor shall submit monthly Balance Sheets and Profit and Loss Statements to the Department, ensuring:

11.6.5.1. The Profit and Loss Statements include a budget column allowing for budget-to-actual analysis.

11.6.5.2. Statements are submitted in accordance with Paragraph 11.6.3.

11.6.5.3. Statements are based on the accrual method of accounting and include the Contractor's total revenues and expenditures, whether or not generated by, or resulting from, funds provided pursuant to this contract.

12. Deliverables

12.1. The Contractor shall provide a minimum of fifteen (15) hours of in-house services at each Center each week, of which five (5) hours may be conducted in the Center's community or region, as approved by the Department. The Contractor shall provide services that include, but are not limited to:

12.1.1. New topics introduced every month.

12.1.2. A minimum of five (5) separate discussion groups per week that address emotional wellbeing topics, which may include, but are not limited to:

12.1.2.1. IPS.

12.1.2.2. WRAP.

12.1.2.3. WHAM.

12.1.2.4. Setting boundaries.

12.1.2.5. Positive thinking.

12.1.2.6. Wellness.

12.1.2.7. Stress management.

12.1.2.8. Addressing trauma.

12.1.2.9. Reduction of negative or intrusive thoughts.

12.1.2.10. Management of emotional states including, but not limited to:

12.1.2.10.1. Anger.

12.1.2.10.2. Depression.

12.1.2.10.3. Anxiety.

12.1.2.10.4. Mania

12.1.3. A minimum of five (5) discussion or practice groups per week that address physical wellbeing topics which may include, but are not limited to:

12.1.3.1. Smoking cessation.

12.1.3.2. Weight loss.

12.1.3.3. Nutrition and Cooking.

12.1.3.4. Physical exercise.

12.1.3.5. Mindfulness activities including, but not limited to:

12.1.3.5.1. Yoga.

12.1.3.5.2. Meditation.

12.1.3.5.3. Journaling.

12.1.4. A minimum of four (4) activity groups per week that that provide positive skill-building activities which may include, but are not limited to:

12.1.4.1. Arts and crafts.

12.1.4.2. Music expression.

12.1.4.3. Creative writing.

12.1.4.4. Cooking.

12.1.4.5. Sewing.

12.1.4.6. Gardening.

12.1.4.7. Movies.

12.1.5. A minimum of one (1) group per week based on topics relevant to fostering independence which may include, but are not limited to:

12.1.5.1. Online blogs or articles that relate to mental health.

12.1.5.2. Obtaining employment.

12.1.5.3. Budgeting.

12.1.5.4. Decision-making.

12.1.5.5. Self-advocacy.

12.2. The Contractor shall provide community-based services including, but not limited to a minimum of one (1) trip into the community per month for activities that may include, but are not limited to:

12.2.1. Visiting a natural setting.

12.2.2. Volunteering opportunities.

12.2.3. Visiting a museum.

12.2.4. Visiting a local historical site.

12.2.5. Visiting local farms or gardens.

12.3. The Contractor shall provide community outreach that includes, but is not limited to:

12.3.1. Providing monthly community education presentations about mental illness and the peer support community to potential referral sources, funders, or families of individuals affected by mental illness, including, but not limited to:

12.3.1.1. Local psychiatric hospitals.

12.3.1.2. Local mental health clinics.

12.3.1.3. Local community events.

12.3.2. Providing monthly educational events and presentations to members, participants, or other individuals seeking support and information relating to the issues and concerns of consumers of mental health services which includes~~, but~~

is not limited to educational topics to be covered over the course of the year, which may include, but are not limited to:

12.3.2.1. Rights protection.

12.3.2.2. Peer Advocacy.

12.3.2.3. Recovery.

12.3.2.4. Employment.

12.3.2.5. Wellness Management.

12.3.2.6. Community Resources.

12.4. Recovery Oriented Step-Up Step-Down Program

12.4.1. The Contractor shall perform, or cooperate with the performance of, quality improvement or utilization review activities as are determined necessary and appropriate by the Department within timeframes reasonably specified by the Department including, but not limited to:

12.4.1.1. Meeting 75% minimum occupancy standards annually.

12.4.1.2. Successfully diverting 80% of Step-Up admissions from resulting in an inpatient stay.

12.4.1.3. Successfully facilitating Step-Down transitions with no more than 5% of individuals being readmitted to hospital level care within the ninety (90) day period, referenced in Subparagraph 3.5.5.3.

12.4.2. The Contractor shall actively and regularly collaborate with the Department to enhance contract management, improve results, and adjust program delivery and policy based on successful outcomes.

12.4.3. The Contractor may be required to provide other key data and metrics to the Department, including client-level demographic, performance, and service data.

12.4.4. Where applicable, the Contractor shall collect and share data with the Department in a format specified by the Department.

13. Quality Improvement

13.1. The Contractor shall participate in quality program reviews and site visits on a schedule provided by the Department. All contract deliverables, programs, and activities shall be subject to review during this time. These reviews shall result in a report and potential corrective action.

13.2. The Contractor shall participate in quality assurance reviews as follows:

13.2.1. Ensure the Department has access sufficient for monitoring of contract compliance requirements as identified in OMB Circular A-133.

13.2.2. Ensure the Department is provided with access that shall include, but is not limited to:

13.2.2.1. Data.

13.2.2.2. Financial records.

13.2.2.3. Scheduled access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.4. Unannounced access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.5. Scheduled phone access to Contractor principals and staff.

13.3. The Contractor shall perform monitoring and comprehensive quality and assurance activities including, but not limited to:

13.3.1. Participating in bi-annual quality improvement review as in Subsection 13.1.

13.3.2. Participating in ongoing monitoring and reporting based on the bi-annual review and corrective action plan submitted in conjunction with the Department and Contractor.

13.3.3. Conducting member satisfaction surveys provided by and as instructed the Department.

13.3.4. Reviewing personnel files for completeness.

13.3.5. Reviewing the complaint process.

13.4. The Contractor shall provide a corrective action plan to the Department within thirty (30) days of notification of noncompliance with contract activities.

13.5. The Contractor shall provide all requested audits to the Department no later than ten (10) days after receiving the request from the Department.

Method and Conditions Precedent to Payment

1. The State shall pay the Contractor an amount not to exceed the Price Limitation, Block 1.8, of the General Provisions of this Agreement, Form P-37, for the services provided by the Contractor pursuant to Exhibit A – Amendment #4, Scope of Services.
2. This Agreement is funded by:
   2.1. 100% General funds.
3. The Contractor agrees to provide the services in Exhibit A – Amendment #4, Scope of Services in compliance with funding requirements in Section 2., above.
4. The Contractor shall submit one (1) invoice to the Department upon Governor and Council approval of this Agreement requesting a start-up payment in an amount not to exceed $150,000 for the Recovery Oriented Step-Up Step-Down program, as specified in Exhibit A – Amendment #4, Scope of Services and Exhibit B-7 Amendment #4.
5. The Contractor shall submit one (1) invoice to the Department upon Governor and Council approval of this Agreement requesting an advance payment in an amount not to exceed $20,257 for peer support services as described in Exhibit A – Amendment #4, Scope of Services. The Contractor shall ensure:
   5.1. The invoice clearly states a request for the advance payment, to be provided at the start of each State Fiscal Year (SFY), in the amount of $20,257, referenced in Exhibit A – Amendment #4, Scope of Services,
   5.2. The invoice includes how funds will be utilized toward peer support services in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #4 and Exhibit B-6 Amendment #4.
   5.3. The Contractor shall submit monthly invoices for actual expenditures incurred in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #4 and Exhibit B-6 Amendment #4.
   5.4. The Department shall recoup the advance payment by deducting 1/3rd of the advanced amount from the December 2020, January 2021, and February 2021 invoices, unless otherwise agreed upon by the Department.
6. Subsequent to the action in Section 5., the Department shall make monthly payments to the Contractor based upon cost reimbursement, as submitted by the Contractor to maintain services and as approved by the Department, of the Department approved budget amounts in Exhibit B-1 Budget Form through Exhibit B-6 Amendment #3 SFY 2022 Budget.
   6.1. In no event shall the total of the initial payment in Section 5. and monthly payments in Section 6. exceed the budget amounts set forth in Section 6.
   6.2. The Department will adjust monthly payments for expenditures set forth in Section 10., below and amounts paid to initiate services in Section 5., above.
7. Payment for services provided in Exhibit A – Amendment #4, Scope of Services shall be made as follows:
   7.1. The Contractor shall submit an invoice on Department supplied forms, by the tenth (10th) working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month.

7.2. The State shall make payment to the Contractor on actual expenditures, within thirty (30) days of receipt of each Department-approved invoice for Contractor services provided pursuant to this Agreement.

7.3. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to dhhs.dbhinvoicesmhs@dhhs.nh.gov, or invoices may be mailed to:

Financial Manager
Bureau of Mental Health
Department of Health and Human Services
105 Pleasant Street, Main Building
Concord, NH 03301

8. The Contractor shall provide its Revenue and Expense Budget on Budget Form A supplied by the Department, within twenty (20) calendar days of the contract effective date and then twenty (20) days from the beginning of each fiscal year thereafter.

9. The Contractor shall provide quarterly Revenue and Expense Reports on Budget Form A, within thirty (30) calendar days after the end of each fiscal quarter, defined as July 1 to September 30, October 1 to December 31, January 1 to March 31, and April 1 to June 30.

10. The Contractor shall provide supporting documentation, when required by the Department, to support evidence of actual expenditures, in accordance with the Department approved budgets in Section 6.

11. Any expenditure that exceeds the approved budgets in Section 6. shall be solely the financial responsibility of the Contractor.

12. When the contract price limitation is reached the program shall continue to operate at full capacity at no charge to the Department for the duration of the contract period.

13. Funding may not be used to replace funding for a program already funded from another source.

14. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this Contract may be withheld, in whole or in part, in the event of noncompliance with any State or Federal law, rule or regulation applicable to the services provided, or if the said services have not been completed in accordance with the terms and conditions of this Agreement.

15. Notwithstanding Paragraph 18 of the General Provisions of this Agreement P-37, an amendment limited to the budget amounts identified in Section 6., to adjust amounts within the budgets, within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of Governor and Executive Council.

16. The Department reserves the right to recover any program funds not used, in whole or in part, for the purposes stated in this Agreement from the Contractor within one hundred and twenty (120) days of the Completion Date.

17. Contractor will have forty-five (45) days from the end of each State Fiscal Year to submit to the Department final invoices for payment. Any adjustments made to a prior invoice will need to be accompanied by supporting documentation.

18. Property Standards

18.1. Insurance coverage.

18.1.1. The Contractor shall, at a minimum, provide the equivalent insurance coverage for real property and equipment acquired or improved with State funds as provided to property owned by the Contractor.

18.2. Real property.

18.2.1. Subject to the obligations and conditions set forth in this section, title to real property acquired or improved in whole or in part with State funds will vest upon acquisition in the Contractor.

18.2.2. Except as otherwise provided by State statutes or in this Agreement, real property will be used for the originally authorized purpose as long as needed for that purpose, during which time the Contractor must not dispose of or encumber its title or other interests without State approval.

18.2.3. When real property is no longer needed for the originally authorized purpose, the Contractor must obtain disposition instructions from the State. The instructions must provide for one of the following alternatives:

18.2.3.1. Retain title after compensating the State. The amount paid to the State will be computed by applying the State's percentage of participation in the cost of the original purchase (and costs of any improvements) to the fair market value of the property. However, in those situations where the Contractor is disposing of real property acquired or improved with State funds and acquiring replacement real property prior to expiration of this Agreement and any amendment thereof, the net proceeds from the disposition may be used as an offset to the cost of the replacement property.

18.2.3.2. Sell the property and compensate the State. The amount due to the State will be calculated by applying the State's percentage of participation in the cost of the original purchase (and cost of any improvements) to the proceeds of the sale after deduction of any actual and reasonable selling and fixing-up expenses. If the State appropriation funding this Agreement or any amendment thereof has not been closed out, the net proceeds from sale may be offset against the original cost of the property. When the Contractor is directed to sell property, sales procedures must be followed that provide for competition to the extent practicable and result in the highest possible return.

18.2.3.3. Transfer title to a third party designated/approved by the State. The Contractor is entitled to be paid an amount calculated by applying the State's percentage of participation in the purchase of the real property (and cost of any improvements) to the current fair market value of the property.

18.3. Equipment.

18.3.1. Equipment means tangible personal property (including information technology systems) purchased in whole or in part with State funds and that has a useful life of more than one (1) year and a per-unit acquisition cost which equals or exceeds $5,000.

18.3.2. Subject to the obligations and conditions set forth in this section, title to equipment acquired with State funds will vest upon acquisition in the Contractor subject to the following conditions:

18.3.2.1. Use the equipment for the authorized purposes of the project during the period of performance, or until the property is no longer needed for the purposes of the project.

18.3.2.2. Not encumber the property without approval of the State.

18.3.2.3. Use and dispose of the property in accordance with Paragraph 18.2.2., Paragraph 18.2.1. and Paragraph 18.3.5.

18.3.3. Use.

18.3.3.1. Equipment must be used by the Contractor in the program or project for which it was acquired as long as needed, whether or not the project or program continues to be supported by State funds, and the Contractor must not encumber the property without prior approval of the State. When no longer needed for the original program or project, the equipment may be used in other activities funded by the State.

18.3.3.2. During the time that equipment is used on the project or program for which it was acquired, the Contractor must also make equipment available for use on other projects or programs currently or previously supported by the State, provided that such use will not interfere with the work on the projects or program for which it was originally acquired. First preference for other use must be given to other programs or projects supported by the State that financed the equipment. Use for non-State-funded programs or projects is also permissible with approval from the State.

18.3.3.3. When acquiring replacement equipment, the Contractor may use the equipment to be replaced as a trade-in or sell the property and use the proceeds to offset the cost of the replacement property.

18.3.4. Management requirements. Procedures for managing equipment (including replacement equipment), whether acquired in whole or in part with State funding, until disposition takes place will, as a minimum, meet the following requirements:

18.3.4.1. Property records must be maintained that include a description of the property, a serial number or other identification number, the source of funding for the property, who holds title, the acquisition date, and cost of the property, percentage of State participation in the project costs for the Agreement under which the property was acquired, the location, use and condition of the property, and any ultimate disposition data including the date of disposal and sale price of the property.

18.3.4.2. A physical inventory of the property must be taken and the results reconciled with the property records at least once every two (2) years.

18.3.4.3. A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft must be investigated.

18.3.4.4. Adequate maintenance procedures must be developed to keep the property in good condition.

18.3.4.5. If the Contractor is authorized or required to sell the property, proper sales procedures must be established to ensure the highest possible return.

18.3.5. Disposition. When original or replacement equipment acquired with State funds is no longer needed for the original project or program or for other activities currently or previously supported by the State, except as otherwise provided by State statutes or in this Agreement, the Contractor must request disposition instructions from the State. Disposition of the equipment will be made as follows:

18.3.5.1. Items of equipment with a current per unit fair market value of $5,000 or less may be retained, sold or otherwise disposed of with no further obligation to the State.

18.3.5.2. Items of equipment with a current per-unit fair-market value in excess of $5,000 may be retained by the Contractor or sold. The State is entitled to an amount calculated by multiplying the current market value or proceeds from sale by the State's percentage of participation in the cost of the original purchase. If the equipment is sold, the State may permit the Contractor to deduct and retain from the State's share $500 or ten (10) percent of the proceeds, whichever is less, for its selling and handling expenses.

18.3.5.3. The Contractor may transfer title to the property to an eligible third party provided that, in such cases, the Contractor must be entitled to compensation for its attributable percentage of the current fair market value of the property.

18.3.5.4. In cases where the Contractor fails to take appropriate disposition actions, the State may direct the Contractor to take disposition actions.

19. Property Trust Relationship and Liens

19.1. Real property, equipment, and intangible property, that are acquired or improved with State funds must be held in trust by the Contractor as trustee for the beneficiaries of the project or program under which the property was acquired or improved. The State may require the Contractor to record liens or other appropriate notices of record to indicate that personal or real property has been acquired or improved with State funds and that use and disposition conditions apply to the property.

19.2. The property standards in Subsection 19.1. shall survive termination of this Agreement.

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

Contractor Name: Connections Peer Support Center

Budget Request for: Peer Support Services
Project Title

Budget Period: SFY 2021 (7/1/2020 - 6/30/2021)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	$ 292,910.00	$ -	$ 292,910.00	$ -	$ -	$ -	$ -	$ -	$ -
2. Employee Benefits	$ 6,940.00	$ -	$ 6,940.00	$ -	$ -	$ -	$ -	$ -	$ -
3. Consultants	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
4. Equipment:	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Rental	$ 3,000.00	$ -	$ 3,000.00	$ -	$ -	$ -	$ -	$ -	$ -
Repair and Maintenance	$ 350.00	$ -	$ 350.00	$ -	$ -	$ -	$ -	$ -	$ -
Purchase/Depreciation	$ 2,901.00	$ -	$ 2,901.00	$ -	$ -	$ -	$ -	$ -	$ -
5. Supplies:	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Educational	$ 300.00	$ -	$ 300.00	$ -	$ -	$ -	$ -	$ -	$ -
Lab	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Pharmacy	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Medical	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Office	$ 1,000.00	$ -	$ 1,000.00	$ -	$ -	$ -	$ -	$ -	$ -
6. Travel	$ 7,700.00	$ -	$ 7,700.00	$ -	$ -	$ -	$ -	$ -	$ -
7. Occupancy	$ 28,817.00	$ -	$ 28,817.00	$ -	$ -	$ -	$ -	$ -	$ -
8. Current Expenses	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Telephone	$ 5,769.00	$ -	$ 5,769.00	$ -	$ -	$ -	$ -	$ -	$ -
Postage	$ 310.00	$ -	$ 310.00	$ -	$ -	$ -	$ -	$ -	$ -
Subscriptions	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Audit and Legal	$ 18,100.00	$ -	$ 18,100.00	$ -	$ -	$ -	$ -	$ -	$ -
Insurance	$ 7,300.00	$ -	$ 7,300.00	$ -	$ -	$ -	$ -	$ -	$ -
Board Expenses	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
9. Software	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
10. Marketing/Communications	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
11. Staff Education and Training	$ 9,000.00	$ -	$ 9,000.00	$ -	$ -	$ -	$ -	$ -	$ -
12. Subcontracts/Agreements	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
13. Other (specific details mandatory):	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Food/Building/Consumable Supplies & Clothing	$ 7,150.00	$ -	$ 7,150.00	$ -	$ -	$ -	$ -	$ -	$ -
Membership Dues	$ 1,031.00	$ -	$ 1,031.00	$ -	$ -	$ -	$ -	$ -	$ -
Advertising and Printing	$ 500.00	$ -	$ 500.00	$ -	$ -	$ -	$ -	$ -	$ -
TOTAL	$ 393,078.00	$ -	$ 393,078.00	$ -	$ -	$ -	$ -	$ -	$ -

Indirect As A Percent of Direct 0.0%

GB

Contractor Initials

Date 10/27/2020

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

Contractor Name: Connections Peer Support Center

Budget Request for: Peer Support Services
Project Title
Budget Period: SFY 2022 (7/1/2021 - 6/30/2022)

	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
Line Item	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	$ 301,991.00	$ -	$ 301,991.00	$ -	$ -	$ -	$ -	$ -	$ -
2. Employee Benefits	$ 10,540.00	$ -	$ 10,540.00	$ -	$ -	$ -	$ -	$ -	$ -
3. Consultants	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
4. Equipment	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Rental	$ 3,000.00	$ -	$ 3,000.00	$ -	$ -	$ -	$ -	$ -	$ -
Repair and Maintenance	$ 350.00	$ -	$ 350.00	$ -	$ -	$ -	$ -	$ -	$ -
Purchase/Depreciation	$ 2,901.00	$ -	$ 2,901.00	$ -	$ -	$ -	$ -	$ -	$ -
5. Supplies:	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Educational	$ 300.00	$ -	$ 300.00	$ -	$ -	$ -	$ -	$ -	$ -
Lab	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Pharmacy	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Medical	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Office	$ 1,500.00	$ -	$ 1,500.00	$ -	$ -	$ -	$ -	$ -	$ -
6. Travel	$ 9,000.00	$ -	$ 9,000.00	$ -	$ -	$ -	$ -	$ -	$ -
7. Occupancy	$ 53,734.00	$ -	$ 53,734.00	$ -	$ -	$ -	$ -	$ -	$ -
8. Current Expenses		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Telephone	$ 6,868.00	$ -	$ 6,868.00	$ -	$ -	$ -	$ -	$ -	$ -
Postage	$ 310.00	$ -	$ 310.00	$ -	$ -	$ -	$ -	$ -	$ -
Subscriptions	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Audit and Legal	$ 23,100.00	$ -	$ 23,100.00	$ -	$ -	$ -	$ -	$ -	$ -
Insurance	$ 9,850.00	$ -	$ 9,850.00	$ -	$ -	$ -	$ -	$ -	$ -
Board Expenses	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
9. Software	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
10. Marketing/Communications	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
11. Staff Education and Training	$ 15,000.00	$ -	$ 15,000.00	$ -	$ -	$ -	$ -	$ -	$ -
12. Subcontracts/Agreements	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
13. Other (specific details mandatory):	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Food/Building/Consumable Supplies & Clothing	$ 12,900.00	$ -	$ 12,900.00	$ -	$ -	$ -	$ -	$ -	$ -
Membership Dues	$ 1,233.00	$ -	$ 1,233.00	$ -	$ -	$ -	$ -	$ -	$ -
Advertising & Printing	$ 500.00	$ -	$ 500.00	$ -	$ -	$ -	$ -	$ -	$ -
TOTAL	$ 543,078.00	$ -	$ 543,078.00	$ -	$ -	$ -	$ -	$ -	$ -

Indirect As A Percent of Direct 0.0%

Contractor Initials GB

Date 10/27/2020

New Hampshire Department of Health and Human Services

COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD

Contractor Name: Connections Peer Support Center

Budget Request for: Peer Support Services: SUSD Start Up Budget

Project Title

Budget Period: SFY21

	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
Line Item	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	$ 19,680.00	$ -	$ 19,680.00	$ -	$ -	$ -	$ -	$ -	$ -
2. Employee Benefits	$ 1,500.00	$ -	$ 1,500.00	$ -	$ -	$ -	$ -	$ -	$ -
3. Consultants	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
4. Equipment:	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Rental	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Repair and Maintenance		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Purchase/Depreciation	$ 52,713.00	$ -	$ 52,713.00	$ -	$ -	$ -	$ -	$ -	$ -
5. Supplies:	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Educational	$ 500.00	$ -	$ 500.00	$ -	$ -	$ -	$ -	$ -	$ -
Lab	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Pharmacy	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Medical	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Office	$ 395.00	$ -	$ 395.00	$ -	$ -	$ -	$ -	$ -	$ -
6. Travel	$ 436.00	$ -	$ 436.00	$ -	$ -	$ -	$ -	$ -	$ -
7. Occupancy	$ 33,311.00	$ -	$ 33,311.00	$ -	$ -	$ -	$ -	$ -	$ -
8. Current Expenses	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Telephone	$ 387.00	$ -	$ 387.00	$ -	$ -	$ -	$ -	$ -	$ -
Postage	$ 350.00	$ -	$ 350.00	$ -	$ -	$ -	$ -	$ -	$ -
Subscriptions	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Audit and Legal	$ 3,500.00	$ -	$ 3,500.00	$ -	$ -	$ -	$ -	$ -	$ -
Insurance	$ 5,100.00	$ -	$ 5,100.00	$ -	$ -	$ -	$ -	$ -	$ -
Board Expenses	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
9. Software	$ 288.00	$ -	$ 288.00	$ -	$ -	$ -	$ -	$ -	$ -
10. Marketing/Communications	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
11. Staff Education and Training	$ 7,332.00	$ -	$ 7,332.00	$ -	$ -	$ -	$ -	$ -	$ -
12. Subcontracts/Agreements	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
13. Other (specific details mandatory):	$ 24,508.00	$ -	$ 24,508.00	$ -	$ -	$ -	$ -	$ -	$ -
Non-depreciable furniture, building supplies,	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
PPE, Household supplies, printing	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
TOTAL	$ 150,000.00	$ -	$ 150,000.00	$ -	$ -	$ -	$ -	$ -	$ -

Indirect As A Percent of Direct 0.0%

Contractor Initials GD

Date 10/27/2020

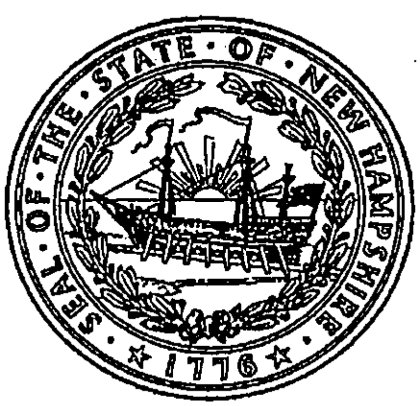
State of New Hampshire
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that CONNECTIONS PEER SUPPORT CENTER is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on June 08, 1992. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 175447

Certificate Number: 0004879099



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. 2020.

William M. Gardner

Secretary of State

CERTIFICATE OF AUTHORITY

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

1. I am a duly elected Clerk/Secretary/Officer of Connections Peer Support Center.
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on October 9, 2020, at which a quorum of the Directors/shareholders were present and voting.
(Date)

VOTED: That Gregory Burdwood (may list more than one person)
(Name and Title of Contract Signatory)

is duly authorized on behalf of Connections Peer Support Center to enter into contracts or agreements with the State
(Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30)** days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: October 9, 2020

Kali Moulton
Signature of Elected Officer
Name: Kali Moulton
Title: Board President

DocuSign Envelope ID: 3F36470D-272E-4295-AA41-E547DA59D0D0

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/09/2020

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

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

PRODUCER
The Demers Agency
200 Lafayette Road, Suite 5
North Hampton, NH 03862

CONTACT NAME: Cyndi Hewitt
PHONE (A/C, No, Ext): 603-964-9555 | FAX (A/C, No): 603-964-1651
E-MAIL ADDRESS: hewittc1@nationwide.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Nationwide Mutual Fire Insurance Company	
INSURER B : Nationwide Mutual Fire Insurance Company	
INSURER C : Mount Vernon Fire Insurance Company	
INSURER D : Hartford Insurance Company	
INSURER E : Merchants Bonding Company	
INSURER F :	

INSURED
Connections Peer Support Center
544 Islington Street
Portsmouth, NH 03801

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY; CLAIMS-MADE [ ] OCCUR [X]; GEN'L AGGREGATE LIMIT APPLIES PER: POLICY [X] PRO-JECT [ ] LOC [ ]; OTHER:			ACP GLO 5413657605	12/18/2019	12/18/2020	EACH OCCURRENCE	$ 2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 2,000,000
							GENERAL AGGREGATE	$ 2,000,000
							PRODUCTS - COMP/OP AGG	$ 2,000,000
								$
B	AUTOMOBILE LIABILITY; ANY AUTO [ ]; OWNED AUTOS ONLY [ ]; SCHEDULED AUTOS [X]; HIRED AUTOS ONLY [ ]; NON-OWNED AUTOS ONLY [ ]			ACP BAF 5413657605	12/18/2019	12/18/2020	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB [ ] OCCUR [ ]; EXCESS LIAB [ ] CLAIMS-MADE [ ]; DED [ ] RETENTION $						EACH OCCURRENCE	$
							AGGREGATE	$
								$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N; ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) [Y]; If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		6S60UB-2E26231-1-20	06/12/2020	06/12/2021	X PER STATUTE / OTH-ER	
							E.L. EACH ACCIDENT	$ 100,000
							E.L. DISEASE - EA EMPLOYEE	$ 100,000
							E.L. DISEASE - POLICY LIMIT	$ 500,000
A	Property Coverage 544 Islington St.			ACP CPP 5413657605	12/18/2019	12/18/2020		Bldg $351,300 Conts $35,900
C	Non Profit Directors & Officers			NDO2006703P-Claims Made	11/17/2020	11/17/2021		

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

E Merchants Bonding Company: Employee Dishonesty Bond # NHF 3234
Bond Limit = $25,000
Term: 10/06/20-10/06/21

CERTIFICATE HOLDER

State of NH, DHHS
129 Pleasant Street
Concord NH 03301

CANCELLATION

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

AUTHORIZED REPRESENTATIVE
Chris R. Demers

reaching for connection. rooted in recovery.

connections

peer support center

MISSION STATEMENT

The mission of CPSC is to promote the health, and wellness and recovery of our members and participants who have had, currently have, or are at risk of having mental health issues. We do this by providing a safe environment for self-reflection using Intentional Peer Support and a daily variety of groups and educational opportunities to support movement toward self-determination and empowerment and hope-based recovery.

Vision

All members will participate and feel comfortable in their community, have the tools to fulfill their basic needs and personal goals and recovery, connect to resources they need, will feel supported by their peers, understand the role of recovery in their lives, contribute to their communities at large, be able to navigate through the system, feel hopeful and empowered, and feel welcome, safe, and comfortable.

Guiding Principles

Our programs are grounded in the principles of:

- Intentional Peer Support;
- Personal responsibility and accountability;
- Holistic perspective on health and well-being;
- Respecting others' thoughts and beliefs as not only valid, but important opportunities for growth;
- Growth beyond the stigma, shame and limits placed on us;
- Creating and maintaining a strong, active voice and presence dedicated to social change;
- Knowledge that this strong, active presence will increase understanding and compsassion and decrease ignorance and denial outside of our community;
- The knowledge that very few individuals, if any, in our society are untouched by mental health issues – within themselves, their families, friends, their communities, and society at large. This is an issue that impacts us all and it needs greater understanding and attention.

Approved by CPSC BoD: 01/04/2016

CONNECTIONS PEER SUPPORT CENTER

FINANCIAL STATEMENTS
FOR THE YEARS ENDED JUNE 30, 2019 AND 2018
AND
INDEPENDENT AUDITORS' REPORT

CONNECTIONS PEER SUPPORT CENTER

FINANCIAL STATEMENTS
FOR THE YEARS ENDED JUNE 30, 2019 AND 2018

TABLE OF CONTENTS

To the Board of Directors of
Connections Peer Support Center
Portsmouth, New Hampshire

Leone,
McDonnell
& Roberts
PROFESSIONAL ASSOCIATION
CERTIFIED PUBLIC ACCOUNTANTS
WOLFEBORO • NORTH CONWAY
DOVER • CONCORD
STRATHAM

INDEPENDENT AUDITORS' REPORT

We have audited the accompanying financial statements of Connections Peer Support Center (a nonprofit organization), which comprise the statements of financial position as of June 30, 2019 and 2018, and the related statements of activities, cash flows, and functional expenses for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

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. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Connections Peer Support Center as of June 30, 2019 and 2018, and the changes in its net assets and its cash flows for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The information included in the Bureau of Mental Health Services Refundable Advance Schedule is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits 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, in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Leone, McDonnell + Roberts
Professional Association

October 16, 2019
Dover, New Hampshire

CONNECTIONS PEER SUPPORT CENTER

STATEMENTS OF FINANCIAL POSITION
JUNE 30, 2019 AND 2018

ASSETS

	2019	2018
CURRENT ASSETS		
Cash	$ 37,411	$ 24,416
Accounts receivable	63	-
Prepaid expenses	2,759	2,404
Total current assets	40,233	26,820
PROPERTY AND EQUIPMENT, NET	145,353	123,487
OTHER ASSETS		
Restricted cash	61,688	111,205
Total assets	$ 247,274	$ 261,512

LIABILITIES AND NET ASSETS

	2019	2018
CURRENT LIABILITIES		
Accounts payable	$ 1,264	$ 284
Accrued expenses	9,735	11,130
Accrued payroll and related taxes	9,643	9,908
Refundable advances	61,688	111,205
Total current liabilities	82,330	132,527
Total liabilities	82,330	132,527
NET ASSETS		
Without donor restrictions	159,944	128,985
With donor restrictions	5,000	-
Total net assets	164,944	128,985
Total liabilities and net assets	$ 247,274	$ 261,512

See Notes to Financial Statements

CONNECTIONS PEER SUPPORT CENTER

STATEMENTS OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2019

	Without Donor Restrictions	With Donor Restrictions	Total
PUBLIC SUPPORT			
Grants and contracts	$ 269,338	$ -	$ 269,338
Donations	9,625	5,000	14,625
Total public support	278,963	5,000	283,963
REVENUES			
Interest	42	-	42
Total public support and revenues	279,005	5,000	284,005
EXPENSES			
Program services	226,424	-	226,424
General and administrative	21,622	-	21,622
Total expenses	248,046	-	248,046
INCREASE IN NET ASSETS	30,959	5,000	35,959
NET ASSETS, BEGINNING OF YEAR	128,985	-	128,985
NET ASSETS, END OF YEAR	$ 159,944	$ 5,000	$ 164,944

See Notes to Financial Statements

CONNECTIONS PEER SUPPORT CENTER

STATEMENTS OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2018

	Without Donor Restrictions	With Donor Restrictions	Total
PUBLIC SUPPORT			
Grants and contracts	$ 250,182	$ -	$ 250,182
Donations	656	-	656
Total public support	250,838	-	250,838
REVENUES			
Interest	51	-	51
Total public support and revenues	250,889	-	250,889
EXPENSES			
Program services	228,859	-	228,859
General and administrative	22,432	-	22,432
Total expenses	251,291	-	251,291
DECREASE IN NET ASSETS	(402)	-	(402)
NET ASSETS, BEGINNING OF YEAR	129,387	-	129,387
NET ASSETS, END OF YEAR	$ 128,985	$ -	$ 128,985

See Notes to Financial Statements

CONNECTIONS PEER SUPPORT CENTER

STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED JUNE 30, 2019 AND 2018

	2019	2018
CASH FLOWS FROM OPERATING ACTIVITIES		
Increase (decrease) in net assets	$ 35,959	$ (402)
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	14,666	10,281
(Increase) decrease in assets:		
Accounts receivable	(63)	-
Prepaid expenses	(355)	7,556
(Decrease) increase in liabilities:		
Accounts payable	980	(2,552)
Accrued expenses	(1,395)	2,336
Accrued payroll and related taxes	(265)	(2,501)
Refundable advances	(49,517)	(5,360)
NET CASH PROVIDED BY OPERATING ACTIVITIES	10	9,358
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of property and equipment	(36,532)	(7,478)
NET CASH USED IN INVESTING ACTIVITIES	(36,532)	(7,478)
CASH FLOWS FROM FINANCING ACTIVITIES		
Principal payments of long term debt	-	(9,335)
NET CASH USED IN FINANCING ACTIVITIES	-	(9,335)
NET DECREASE IN CASH	(36,522)	(7,455)
CASH, BEGINNING OF YEAR	135,621	143,076
CASH, END OF YEAR	$ 99,099	$ 135,621

SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION

	2019	2018
Cash paid for interest during the year	$ -	$ 260

See Notes to Financial Statements

CONNECTIONS PEER SUPPORT CENTER

STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2019

	Program Services	General and Administrative	Total
Salaries	$ 150,247	$ 4,647	$ 154,894
Depreciation	12,906	1,760	14,666
Office supplies and postage	13,053	687	13,740
Payroll taxes	11,999	1,043	13,042
Professional fees	-	9,751	9,751
Benefits	8,910	671	9,581
Travel	4,993	555	5,548
Insurance	4,324	1,081	5,405
Utilities	4,443	664	5,107
Telephone	4,259	-	4,259
Staff development	3,748	416	4,164
Repairs and maintenance	4,145	-	4,145
Other	2,831	315	3,146
Dues and publications	521	27	548
Conferences and meetings	45	5	50
TOTAL	$ 226,424	$ 21,622	$ 248,046

See Notes to Financial Statements

CONNECTIONS PEER SUPPORT CENTER

STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2018

	Program Services	General and Administrative	Total
Salaries	$ 121,095	$ 3,745	$ 124,840
Repairs and maintenance	18,894	-	18,894
Benefits	15,987	1,203	17,190
Staff development	13,208	1,467	14,675
Office supplies and postage	12,822	675	13,497
Depreciation	9,047	1,234	10,281
Payroll taxes	9,212	801	10,013
Professional fees	-	9,975	9,975
Other	8,682	965	9,647
Travel	6,575	730	7,305
Utilities	4,638	693	5,331
Telephone	4,559	-	4,559
Insurance	3,567	892	4,459
Dues and publications	347	18	365
Interest	226	34	260
TOTAL	$ 228,859	$ 22,432	$ 251,291

See Notes to Financial Statements

CONNECTIONS PEER SUPPORT CENTER

NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED JUNE 30, 2019 AND 2018

NOTE 1. ORGANIZATION

Connections Peer Support Center (the Center) is a nonprofit organization that was established on June 8, 1992 and whose operations are located in Portsmouth, New Hampshire. The Center's purpose is to implement a consumer agenda for improving the quality of life of adult consumers of mental health services in Rockingham County. A majority of the Center's support is provided by a grant from the State of New Hampshire Bureau of Mental Health Services, (BMHS).

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting
The Center prepares its financial statements using the accrual method of accounting, in accordance with accounting principles generally accepted in the United States of America, whereby revenue is recognized when earned and expenses are recognized in the period incurred.

Basis of Presentation
The financial statements are presented in accordance with Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 958-205, Not-for-Profit Entities, Presentation of Financial Statements. During 2018, the Center adopted the provisions of Accounting Standards Update ("ASU") 2016-14: Not-for-Profit-Entities (Topic 958) Presentation of Financial Statements of Not-for-Profit Entities, which improves the current net asset classification and the related information presented in the financial statements and notes about the Center's liquidity, financial performance, and cash flows.

New Accounting Pronouncement
On August 18, 2016, FASB issued ASU 2016-14, Not-for-Profit Entities (Topic 958) – *Presentation of Financial Statements of Not-for-Profit Entities.* The update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return. The Center has adjusted the presentation of these statements accordingly. The ASU has been applied retrospectively to all periods presented.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash Equivalents

The Center considers all highly liquid instruments with an original maturity date of three months or less to be cash equivalents. The Center has no cash equivalents as of June 30, 2019 and 2018.

Restricted Cash

Restricted cash represents the refundable advances as June 30, 2019 and 2018, and total $61,688 and $111,205, respectively. The Center must receive prior approval from the State of New Hampshire in order to utilize these funds.

Property and Equipment

Purchases of property and equipment are recorded at cost, while donations of property and equipment are recorded as support at their estimated fair value at the date of donation. Costs for repairs and maintenance are charged against operations. Renewals and betterments, which materially extend the life of the assets, are capitalized.

Property and equipment at June 30, 2019 and 2018, consisted of the following:

	2019	2018
Building	$ 119,482	$ 119,482
Building improvements	73,456	39,640
Furniture and equipment	18,502	15,786
Vehicles	26,692	26,692
Land	37,555	37,555
	275,687	239,155
Less accumulated depreciation	(130,334)	(115,668)
Property and equipment, net	$ 145,353	$ 123,487

Depreciation is provided over the estimated useful lives of the individual assets using the straight-line method. The estimated useful lives are as follows:

	Years
Building and improvements	7 - 40
Vehicles	5
Furniture and equipment	3 - 10

Depreciation expense for the years ended June 30, 2019 and 2018 was $14,666 and $10,281, respectively.

Contributions

Contributions received are recorded as net assets without donor restrictions or net assets with donor restrictions, depending on the existence and/or nature of any donor-imposed restrictions. Support that is restricted is reported as an increase in net assets without donor restrictions if the restriction expires in the reporting period in which the contribution is recognized. All other donor restricted contributions are reported as net assets with donor restrictions, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions.

Net assets without donor restrictions: include net assets that are not subject to any donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Center. These net assets may be used at the discretion of the Center's management and board of directors.

Net assets with donor restrictions: include net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Center or by passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity.

Donor restricted contributions are reported as increases in net assets with donor restrictions. When a restriction expires, net assets are reclassified from net assets with donor restrictions to net assets without donor restrictions in the statement of activities.

Compensated Absences

The Center has accrued a liability for future compensated leave time which its employees have earned and which is vested with the employee. The amounts at June 30, 2019 and 2018, were $2,332 and $4,580, respectively, and are included in accrued payroll and related taxes on the balance sheet.

Functional Allocation of Expenses

The costs of providing various programs and other activities have been summarized on a functional basis in the Statement of Activities. The Statement of Functional Expenses presents the natural classification of expenses by function. Accordingly, certain costs have been allocated among the programs and supporting services benefited. The expenses that are allocated include occupancy and depreciation, which are allocated on a square footage basis, as well as personnel costs, professional services, office expenses, insurance, and other, which are allocated on the basis of estimates of time and effort.

NOTE 3. AVAILABILITY AND LIQUIDITY

The Center's financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the statement of financial position date, are as follows:

	2019	2018
Financial assets at year end:		
Cash	$ 99,099	$ 134,590
Total financial assets	99,099	134,590
Less amounts not available to be used for general expenditures within one year:		
Refundable advances	61,688	111,205
Less net assets with purpose and time Restrictions to be met in less than a year	5,000	-
Total amounts not available within one year	66,688	111,205
Financial assets available to meet general expenditures over the next twelve months	$ 32,411	$ 23,385

NOTE 4. INCOME TAXES

Connections Peer Support Center is currently exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. The Internal Revenue Service has determined the Center to be other than a private foundation.

Accounting Standard Codification No. 740, *"Accounting for Income Taxes,"* established the minimum threshold for recognizing, and a system for measuring, the benefits of tax return positions in financial statements. The Center has analyzed its tax position taken on its information returns for all open tax years (2015 - 2018), and has concluded that no provision for income taxes is necessary in the Center's financial statements.

NOTE 5. LEASE COMMITMENT

The Center entered into an operating lease for a copier during the fiscal year ended June 30, 2018. The lease agreement requires monthly payments of $250 and is due to expire in November, 2023. The lease agreement contains an end of lease purchase option at the fair value of the equipment. As part of the new lease agreement, the Center received funds to buy out the old copier lease.

Minimum lease payments under the terms of the current lease are as follows as of June 30:

2020	$ 3,000
2021	3,000
2022	3,000
2023	1,250
Total	$ 10,250

The copier lease expense of $3,738 and $3,866 is included in office supplies and postage expense for each of the years ended June 30, 2019 and 2018, respectively.

NOTE 6. CONCENTRATION OF RISK

The Center receives the majority of its support from a grant issued by the State of New Hampshire, Department of Health and Human Services, Bureau of Mental Health Services. Continuation of the Center's programs is contingent upon future funding from this agency.

NOTE 7. REFUNDABLE ADVANCES

Refundable advances were $61,688 and $111,205 as of June 30, 2019 and 2018, respectively. The amounts represent revenue received in advance from the Bureau of Mental Health Services (BMHS) for services to be performed by the Center.

The Center must request pre-approval from BMHS before spending these funds. If approval is not obtained, the funds must be returned to BMHS. During the fiscal years ended June 30, 2019 and 2018, the Center had received approval for and spent $58,734 and $21,221, of prior year fund carryovers, respectively.

NOTE 8. NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions were available at June 30 for the following purposes:

	2019	2018
Subject to expenditure for a specific purpose:		
Communications development	$ 5,000	$ -

NOTE 9. RECLASSIFICATIONS

Certain reclassifications have been made to the prior year's financial statements to conform to the current year presentation. These classifications had no effect on the previously reported change in net assets, or net asset amounts.

NOTE 10. SUBSEQUENT EVENTS

The Center has evaluated subsequent events through October 16, 2019 the date the financial statements were available to be issued.

CONNECTIONS PEER SUPPORT CENTER

BUREAU OF MENTAL HEALTH SERVICES (BMHS)
REFUNDABLE ADVANCE SCHEDULE
FOR THE YEAR ENDED JUNE 30, 2019

Reconciliation of BMHS Refundable Advance

Total FY 2019 BMHS funds received	$ 240,822
Recognition of funds released by BMHS	58,734
Total funds received	299,556
Less:	
BMHS expenses	(248,046)
Approved fixed asset purchases	(36,532)
Transfer of funds	(21,000)
Total approved expenses	(305,578)
Add:	
Depreciation expense	14,666
Miscellaneous revenue adjustment	63
Non-approved BMHS expenses	510
Total nonapproved expenses	15,239
BMHS surplus	9,217
Recognition of funds released by BMHS	(58,734)
Change in refundable advance at June 30, 2019	(49,517)
Refundable advance balance at June 30, 2018	111,205
Refundable advance balance at June 30, 2019	$ 61,688

See Independent Auditors' Report

Connections Peer Support Center
BOARD OF DIRECTORS
APRIL 2020

PRESIDENT
Kali Moulton
[redacted]
Joined on: 05-2018
Term#: 1
Term Length: 2 years
Expiration: 05-2020
Office: President: Term: 1 (11/20/19)
Committees: External Affairs, Governance, Internal Affairs, Executive (Chair)

TREASURER
Leslie McCarthy
[redacted]
Joined on: 06-2016
Term #: 2
Term length: 2 yrs
Expiration: 06-2020
Office: Treasurer: Term 2
Committee: Internal Affairs

SECRETARY
Judi Coleman
[redacted]
Joined on: 09-27-2017
Term #: 2
Term Length: 2 yrs
Expiration: 09-2021
Office: Secretary: Term 2
Committee: Internal Affairs

Harry Chase
[redacted]
Joined on: 06-2019
Term #: 1
Term Length: 2 yrs
Expiration: 06-2021
Committee: Internal Affairs

Colby Breen-Pantelakos
[redacted]
Joined on: 07-2016
Term#: 2
Term Length: 2 yr
Expiration: 07-2020
Committee: Governance

Carol Hollis
[redacted]
Joined on: 11-2015
Term#: 3
Term Length: 2 yrs
Expiration: 11-2021
Committee: Internal Affairs, Chair

Paula Rockwell
[redacted]
Joined on: 10-2018
Term #: 1
Term Length: 2 yrs
Expiration 10-2020
Committee: External Affairs

Lauren Rosenzweig
[redacted]
Joined on: 05-19
Term #: 1
Term length: 2 yrs
Expiration: 05-2021
Committee: External Affairs (Chair)

David Sinclair
[redacted]
Joined on: 10-19
Term #: 1
Term Length: 2 yrs
Expiration: 10-2021
Committee: Internal Affairs

Wes Tator
[redacted]

Connections Peer Support Center
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APRIL 2020

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Expiration 10-2020
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[redacted]
Joined on: 10-19
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Term Length: 2 yrs
Expiration: 10-2021
Committee: Internal Affairs

Wes Tator
[redacted]

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GREG BURDWOOD, M.A.

Human Services Professional with proven success in project management, program development, consultation, operations management, supervision, training, grant administration, and direct services.

M.A., *Counseling,* University of New Hampshire, Durham, NH
BA, *Human Development & Social Relations,* Earlham College, Richmond, IN

PROFESSIONAL EXPERIENCE

Connections Peer Support Center, Portsmouth, NH 2018 – present
Executive Director: Responsible for overseeing the administration, programs and strategic plan of the organization. Other key duties include:

- Fundraising, marketing, and community outreach.
- Ensuring that the operation of Connections meets the expectations of its members, board and funders.
- Overseeing the planning, implementation and evaluation of the Connections programs and services.
- Hiring, supervision, and performance management of the Connections staff.
- Providing leadership to staff through effective objective setting, delegation, and communication.

Extended Family, Portsmouth, NH 2017 - 2018
Personal Care Provider: Assist older adults living at home, providing personal care, ambulation/transfer, housekeeping, meal prep, companionship, finding community, accessing healthcare, and health advocacy.

Cooperative Alliance for Seacoast Transportation (COAST) Dover, NH 2015 - 2017
Demand-Response Manager: Managed paratransit program to enhance riders' access to the community.

- Assured compliance with ADA and Medicaid regulations.
- Hiring, firing, and supervision of operators and support staff.
- Coordination of the North Country volunteer driver program.
- Coordination with call center and dispatch for smooth operation and QI.
- Development of rider survey.

NH Department of Health and Human Services, Concord, NH 2014 - 2015
Community Integration Project Manager: Project management of the US Dept. of Justice Olmstead Agreement, to expand and increase access to community-based mental health services statewide.

University of New Hampshire, Concord NH, 2010 - 2014
UNH Institute for Health Policy and Practice, *Behavioral Health Transition Coordinator, 2011 - 2014*
Federal grant to transition older adults with severe mental illness and complex health issues from NH Hospital and other facilities back to their home communities.

- Provided post-transition follow-up support to individuals, facilitating connection to social supports and appropriate health/human service agencies.
- Assessed program satisfaction/effectiveness and developed reports for DHHS leadership.

UNH Institute on Disability, *Project Manager, 2010 - 2011*
One-year grant, for the "Payment & System Reform Project," to shift community mental health centers' Medicaid reimbursements to a managed care model.

- Coordinated regular team meetings.
- Monitored actions and time lines.
- Developed web site and communication plan.
- Convened stakeholder groups for input.
- Lead writer of waiver application to the Centers for Medicare and Medicaid services.

NH House of Representatives, Concord, NH 2012 – 2014
NH Representative for House District 17, Dover Wards 5 & 6 and Somersworth's Ward 2

HUB Family Resource Center, Dover, NH 2004 - 2010
Executive Director: Senior leadership of a human services agency dedicated to supporting parents in raising healthy children in caring homes.

- Hiring and oversight of staff of 20
- Operations management
- HR functions
- Budget development
- Fundraising and grant administration
- Collaborated with community organizations
- Community presentations
- Wrote articles on child development & family life for local media and agency newsletter.

Resource Management Consultants, Concord, NH 2002 - 2004
Employee Assistance Program Contract Manager: Administered EAP Contracts of 17 businesses.

- Trained key employees to deliver program
- Provided consultation to management
- Counseled individuals and families
- Facilitated critical incident stress debriefings
- Provided lunch-and-learn presentations on wellness and work/life balance

Community Partners, Dover, NH 2001 - 2002
Development and Community Relations Manager:

- Managed marketing, promotion and PR
- Wrote/managed foundation, state, and federal grants.
- Worked with consumers, staff, and board to create a new mission statement and vision.

Strafford Guidance Center, Dover, NH 1993 - 2001
Director of Development, 1997 - 2001

- Implemented the center's marketing, public relations and fundraising strategies.
- Wrote grants resulting in $1.2M of funding.

Manager, Adult Outpatient and EAP Services, 1993 - 1997

- Managed general operations
- Provided clinical/administrative supervision
- Managed the center's EAP programs
- Provided individual and couples counseling

Phillips Exeter Academy, Exeter, NH 1991-1993
Student Assistance Program Coordinator

Seacoast Mental Health Center, Dover, NH 1985-1991
Emergency Services Clinician, 1986-1993
Community Support Program Clinician, 1985-1986

Tina M. Dulac

Ability Summary

Bookkeeping/accounting skills, payroll processing, and general Human Resource responsibilities.

Office experience including administrative responsibilities, customer service, and vendor communications.

MS Word and Excel, QuickBooks, ADP Run, Zenefits, as well as many industry-specific applications and programs.

Key strengths include: attention to detail, problem solving, prioritizing, customer/vendor relations and an integrity-based work ethic.

Experience

Connections Peer Support Center, Portsmouth, NH – Nov. 2016 to present

Administrative Services Director

- Prepares, reviews, and finalizes monthly and annual financial reporting materials
- Oversees cash flow for administration and existing programs.
- Coordinates all audit activities.
- Partners with the executive director on the organization's financial, budgeting, and administrative processes, including HR, payroll, and benefits functions, with an eye to continuously developing and improving systems.
- Oversees maintenance and repairs of facilities and grounds and maintenance and repairs and registration/inspection of CPSC van.
- Submits necessary paperwork to BMHS for payment of trainings; provides administrative support to the executive director and the board of directors.
- Be available to run groups, assist with activities, drive the van, provide one-to-one peer support, including ability to teach peer support model by example and instruction.
- Remains up-to-date in trainings in IPS, Warm Line, and WHAM.

The Channel Company, Dover, NH - Apr. 2014 to Dec. 2015

Office Manager

- Performed all tasks related to processing the bi-weekly payroll for 15 employees and coordinated with employment agencies regarding temporary employee's hiring paperwork and payroll.
- Responsible for many bookkeeping/accounting duties, including processing accounts payable, reconciling bank and credit card accounts, and preparing monthly/yearly company financial reports.
- Executed all duties related to Human Resources, such as onboarding paperwork, company orientation, company policy formation, and communication with the state's unemployment office.

Sprague Energy, Portsmouth, NH – Oct. 2001 to May 2004

Marketing Data Coordinator

- Ensured accuracy of all customer data in multiple operating systems, and extracted data to generate information used in strategic decision making.

Customer Pricing Coordinator

- Communicated the company's daily price for oil and gas products to over 400 potential customers.
- Coordinated pricing in multiple platforms for accurate customer billing.
- Liaison between customers, sales, accounting, and billing for resolution of pricing disputes.

Accounts Payable Associate

- Processed accounts payable and maintained accurate account balances for over 400 customers.

Education

Bachelor of Arts Degree, Political Science - University of South Florida, Tampa, FL – 1996

University of Central Florida, Orlando, FL (1999 – 2001)

- Completed 30 hours of undergraduate and 9 hours of graduate course work in accounting and business.

NINA JENSSEN

Connections Peer Support Center Portsmouth NH

Program Coordinator October 9 2015

Plan and implement programming to enhance mental health and well being of members.
Supervise peer support staff and van driver
Facilitate WRAP and IPS groups
Monitor warm line and daily outreach calls

Seacoast Family Promise, Stratham NH
Volunteer Coordinator
Recruitment and training of volunteers for homeless shelter Sept 2004- - June 201 4
Coordination of meal preparation for up to 15 individuals
Liaison between guests, volunteers and program director

END 68 HOURS of HUNGER Eliot ME

MSAD 35 Coordinator June 2012- - Jan 2014
Responsible for startup of backpack program for MSAD 35
Volunteer Recruitment
Coordinator for Weekly Team Leaders

Familles First Portsmouth May 2010=August 2010
Parent Recharge Facilitator
Facilitated biweekly nutrition group for parents

Cooking Matters Jan 201 1- May 201 1
Classrooom Assistant
Support instructors in teaching nutrition classes

Friends of the William Fogg Library sept 2003-Setp 2009
Volunteer Coordinator
Supervise annual OktoberFest

EDUCATION

University of New England - Biddeford ME - BS Environmental Studies Dec 1 991
UNH Durham NH Dietetics Coursework: Jan 2010-May 2015

Rachel A. Williams

EXPERIENCE

Connections Peer Support Center
Portsmouth, NH
Community Outreach Coordinator, October 2019 to present

- Coordinate communications efforts within Connections and to larger community
- Create and manage social media and electronic communication content
- Supervise Warmline staff, scheduling, and training
- Facilitate groups and perform member outreach

Onesky/Community Integrated Services (companies merged 07-01-19)
Portsmouth, NH
Job Developer, December 2018 to October 2019

- Supported disabled adults in obtaining and successfully maintaining employment
- Worked with employed clients to develop skills to become independent workers
- Developed relationships with employers to facilitate successful client placements

Connections Peer Support Center
Portsmouth, NH
Warmline Operator, June 2018 to September 2019

- Provided telephone support to persons with severe and persistent mental illness and/or substance abuse issues
- Maintained confidentiality and triage crisis calls for referral as appropriate

Great Bay Services
Dover, NH
Direct Service Provider, January 2017 to December 2018

- Provided community integration activities to clients
- Designed classes specific to individual clients' needs
- Offered any supports needed to facilitate positive client experience

Delta Management Associates
Dover, NH
PPA Account Manager, June 2014 to June 2015

Managed 500+ accounts in promised payment arrangements (PPA)
Negotiated renewal of payment arrangements and recovery of missed payments, payments-in-full, and settlements-in-full, as well as providing other borrower services as needed
Maintained 90 percent-plus score on all evaluation/compliance audits while reaching budget targets and achieving bonus monthly.

Collection specialist, October 2013 to June 2014

- Used professional skip-tracing tools to locate delinquent borrowers
- Negotiated with borrowers to achieve resolution of delinquent tuition debt
- Maintained high ethical and professional standards while at all times complying with FDCPA

National Passport Information Center
Dover, NH
Senior customer service representative, June 2004 to 2006

- Answered queries from fellow customer service representatives
- Approved high-priority communication with federal passport agencies
- Resolved escalated customer service issues

Customer service representative, March 1999 to June 2004

- Advised individuals regarding citizenship documentation and passport application procedures
- Resolved difficulties with passport applications
- Communicated with passport agencies on customer's behalf, as appropriate

Strawbery Banke Museum
Portsmouth, NH
Teacher/interpreter, May 1987 to December 1992

- Taught school groups of all ages
- Led tours of the museum on variety of topics
- Demonstrated the arts and daily activities of the past to museum visitors

Odiorne Point Visitor Center
Rye, NH
Naturalist, May 1986 to May 1991

- Led classes and tours of various habitats
- Designed classes for families and adults
- Supervised volunteers

EDUCATION

Lakes Region Community College, Laconia, NH
September 2007 to May 2010

- Graduate, A.A.S. degree, Energy Services and Technology

Additional certifications:

- BPI Building Analyst Certification
- CPR Certification, April 2017

COMMUNITY SERVICE

Cocheco Arts and Technology Academy
A charter public high school, Dover, NH

- President, board of trustees, September 2008 to June 2014
- Board member, March 2007 to May 2016

Dover Cooperative Ministries
Dover, NH

- Treasurer, October 2018 to present
- Representative from Dover Friends Meeting (Quaker), March 2018 to present

~*~

NF

NICOLE FORTUNE

PEER SUPPORT

OBJECTIVE

To work on the warm line that is a service at Connections, Inc.

SKILLS

Seven years of experience in hotline work. Thirty years of experience in different roles in human services.

EXPERIENCE

PEER SUPPORT STAFF • CONNECTIONS, INC. • MARCH 2019 – TO PRESENT

Assist and facilitate daily schedule of events, work on art workshops and crafting groups. Facilitation of a dual recovery group. Make connections with other peers.

VOLUNTEER • SAFE HARBOR • 2017 – TO PRESENT

Group facilitation, curriculum development and administration work.

EDUCATION

MPA • 2012 • ASHFORD UNIVERSITY

MA IN PSYCHOLOGY • CURRENTLY WORKING TOWARDS • ASHFORD UNIVERSITY

BA SUFFOLK UNIVERSITY

VOLUNTEER EXPERIENCE OR LEADERSHIP

I have been a Volunteer Coordinator at the Worcester Lyceum program between the years of 2004 and 2007. I assisted in group formations, dinners and events. There was a membership of approximately 50 members.

FORTUNENICOLE@ROCKETMAIL.COM

603-770-5038

CONTRACTOR NAME

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Greg Burdwood	Executive Director	$55,411	100	$55,411
Tina Dulac	Admin. Services Director	$35,750	100	$35,750
Nina Jenssen	Program Coordinator	$30,940	100	$30,940
Rachel Williams	Community Outreach Coord.	$30,940	100	$30,940
Nicole Fortune	Peer Support Staff	$11,310	100	$11,310
Vacant*	Program Manager	$38,480	100	$38,480
Vacant*	Peer Support Staff	$32,240	100	$32,240
Vacant*	Peer Support Staff	$32,240	100	$32,240
Vacant*	Peer Support Staff	$18,720	100	$18,720
Vacant*	Peer Support Staff	$18,720	100	$18,720
Vacant*	Peer Support Staff	$15,600	100	$15,600
Vacant*	Peer Support Staff	$15,600	100	$15,600

* New Step-Up / Step-Down Program

State of New Hampshire
Department of Health and Human Services
Amendment #4 to the Peer Support Services Contract

This 4th Amendment to the Peer Support Services contract (hereinafter referred to as "Amendment #4") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI, (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 5 Pine Street Extension, Suite 1G, Nashua, NH 03060.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 29, 2016, (Item #23), as amended on June 20, 2018, (Item #33B), June 19, 2019, (Item #28), and on June 24, 2020, (Item #27), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, and Exhibit C-1, Revisions to General Provisions, Paragraph 3, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to increase the price limitation and modify the scope of services to support continued delivery of these services; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $2,913,757.

2. Delete Exhibit A - Amendment #2, Scope of Services, in its entirety and replace with Exhibit A – Amendment #4, Scope of Services, which is attached hereto and incorporated by reference herein.
3. Delete Exhibit B, Amendment #2, Methods and Conditions Precedent to Payment in its entirety and replace with Exhibit B – Amendment #4, Methods and Conditions Precedent to Payment, which is attached hereto and incorporated by reference herein.
4. Delete Exhibit B-5 - Amendment #3, SFY 2021 Budget, in its entirety and replace with Exhibit B-5 – Amendment #4, SFY 2021 Budget, which is attached hereto and incorporated by reference herein.
5. Delete Exhibit B-6 - Amendment #3, SFY 2022 Budget in its entirety and replace with Exhibit B-6 – Amendment #4, SFY 2022 Budget, which is attached hereto and incorporated by reference herein.
6. Add Exhibit B-7 Amendment #4, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #4 remain in full force and effect. This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

10/30/2020
Date

DocuSigned by:
Katja Fox
ED9D05B04C83442...
Name: Katja Fox
Title: Director

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI

10/30/2020
Date

DocuSigned by:
Claire Peddle
7DA572B3594042E...
Name: Claire Peddle
Title: Treasurer of BOD's

New Hampshire Department of Health and Human Services
Peer Support Services

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

10/30/2020

Date

DocuSigned by:
D5CA9202E32C4AE...

Name: Catherine Pinos
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _______________ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Exhibit A - Amendment #4

Scope of Services

1. Provisions Applicable to All Services

1.1. The Contractor shall submit a detailed description of the language assistance services they shall provide to persons with limited English proficiency to ensure meaningful access to their programs and services within ten (10) days of the contract effective date.

1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire (NH) General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

1.3. The Contractor shall provide peer support services in accordance with NH Administrative Rule He-M 400, Community Mental Health, Part 02, Peer Support, referred to as He-M 402, that:

1.3.1. Increase quality of life for individuals living with mental illness in NH.

1.3.2. Increase hope for and belief in the possibility of recovery for individuals living with mental illness in NH.

1.3.3. Increase choice regarding the services and supports available to individuals living with mental illness in NH.

1.3.4. Provide alternatives to and reduce the use of more restrictive and expensive services such as hospitalization.

1.3.5. Increase social connectedness for individuals living with mental illness in NH.

1.3.6. Increase satisfaction with peer support services.

1.4. The Contractor shall provide mental health peer support services to individuals who are eighteen (18) years of age or older who:

1.4.1. Self-identify as a recipient, as a former recipient, or at a significant risk of becoming a recipient of mental health services, and may include individuals who are homeless; and/or

1.4.2. Require additional support to transition from in patient or institutional settings into the community, or alternatively require more intensive supports to reduce the need for admission to an inpatient setting.

1.5. For the purposes of this contract, any reference to days shall mean consecutive calendar days, unless otherwise denoted as business days.

1.6. The Contractor agrees that if the performance of services involves the collection, transmission, storage, or disposition of Part 2 substance use disorder (SUD) information or records created by a Part 2 provider the information or records shall be subject to all safeguards of 42 CFR Part 2.

2. Definitions

2.1. **Board of Directors** means the governing body of a nongovernmental peer support agency.

2.2. **Business Days** are defined as Monday through Friday, excluding Saturday and

Sunday.

2.3. **Consumers** are any individual, eighteen (18) years of age or older, who self-identifies as a recipient, as a former recipient, or as a significant risk of becoming a recipient of publically funded mental health services.

2.4. **Guests** are any individuals who are invited to visit the peer support agency by a member, participant, or the peer support agency.

2.5. **Homeless** is (1) an individual or family who lacks a fixed, regular, and adequate nighttime residence; or (2) an individual or family who has a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels and congregate shelters), an institution other than a penal facility that provides temporary residence for individuals intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

2.6. **Members** are any consumers, who have made an informed decision to join, and agree to, abide by, and support the goals and objectives of peer support services.

2.7. **Mental illness** is defined in RSA 135-C:2 X, namely, "a substantial impairment of emotional processes, or of the ability to exercise conscious control of one's actions, or of the ability to perceive reality or to reason, when the impairment is manifested by instances of extremely abnormal behavior or extremely faulty perceptions. It does not include impairment primarily caused by: (a) epilepsy; (b) intellectual disability; (c) continuous or noncontinuous periods of intoxication caused by substances such as alcohol or drugs; or (d) dependence upon or addiction to any substance such as alcohol or drugs."

2.8. **Participant** means a consumer, who is not member, who participates in any aspect of peer support services.

2.9. **Peer Support Agency (PSA)** means an organization whose primary purpose is to provide culturally appropriate peer support, peer education, and peer programming to persons eighteen (18) year of age and older who self- identify as having a mental illness.

2.10. **Quarter or Quarterly** is defined as the periods of July 1 through September 30, October 1 through December 31, January 1 through March 31, and April 1 through June 30.

2.11. **Recovery** means for an individual with a mental illness, development of personal and social skills, beliefs and characters that support choice, increase quality of life, minimize or eliminate impairment, and decrease dependence on professional services.

2.12. **Region** is the geographic area of cities and towns in New Hampshire, as defined by the Department.

2.13. **Serious Mental Illness (SMI)** refers to individuals whom the state defines as having either Serious Mental Illness (SMI) or Serious and Persistent Mental Illness (SPMI) pursuant to N.H. Revised Statutes Annotated (RSA) 135-C:2, XV.

2.14. **Week** is defined as Monday through Sunday.

3. **Scope of Services**

3.1. Peer Support Services

Exhibit A - Amendment #4

3.1.1. The Contractor shall provide in-house and community based services for New Hampshire residents.

3.1.2. The Contractor shall provide peer support services that are provided for consumers and by consumers including, but not limited to:

3.1.2.1. Peer support services that include supportive interactions, shared experiences, acceptance, trust, respect, lived experience, and mutual support among members, participants, staff and volunteers.

3.1.2.2. Maintenance of a safe physical location that:

3.1.2.2.1. Is open a minimum of forty-four (44) hours per week, eight (8) hours per day, five (5) days per week and four (4) hours on one (1) additional day per week at each location; and

3.1.2.2.2. Provides face-to-face or telephone peer support services to PSA members or others who contact the PSA at a minimum of forty (40) hours per week at each location.

3.1.2.3. Peer support services based on the Intentional Peer Support model that:

3.1.2.3.1. Foster recovery from mental illness by helping individuals identify and achieve personal goals while building an evolving vision of their recovery.

3.1.2.3.2. Foster self-advocacy skills, autonomy, and independence.

3.1.2.3.3. Emphasize mutuality and reciprocity as demonstrated by shared decision-making; strong conflict resolution; non-medical approaches; and non-static roles, including but not limited to, staff who are members and members who are educators.

3.1.2.3.4. Offer alternative views on mental health; mental illness and the effects of trauma and abuse.

3.1.2.3.5. Encourage informed decision-making about all aspects of people's lives.

3.1.2.3.6. Support people with mental illness in challenging perceived self-limitations, while encouraging the development of beliefs that enhance personal and relational growth.

3.1.2.3.7. Emphasize a holistic approach to health that includes a vision of the whole person.

3.1.2.4. Providing opportunities to learn wellness strategies by using, at a minimum, Wellness Recovery Action Planning (WRAP) and Whole Health Action

Management (WHAM), to strengthen individual abilities to attain and maintain their health and recovery from mental illness.

3.1.2.5. Provide in-house and community-based services according to the Deliverables in Subsection 12.1. through Subsection 12.2.

3.1.2.6. Provide outreach by face-to-face or by telephone contact with consumers by providing support to individuals who are unable to attend agency activities, visiting people who are hospitalized with a psychiatric condition, and reaching out to people who meet membership criteria and are homeless.

3.1.2.7. Provide monthly newsletters published by the peer support agency (PSA) that describes agency services and activities; other community services; social and recreational opportunities; member articles and contributions and other relevant topics that might be of interest to members and participants.

3.1.2.8. Distribute the newsletters to the members and other interested parties, which may include but are not limited to community mental health centers and other appropriate community organizations, at least five (5) business days prior to the upcoming month.

3.1.2.9. Provide monthly education events and presentations topics germane to issues and concerns of consumers of mental health services which must include, but are not limited to:

3.1.2.9.1. Rights Protection.

3.1.2.9.2. Peer Advocacy.

3.1.2.9.3. Recovery.

3.1.2.9.4. Employment.

3.1.2.9.5. Wellness Management.

3.1.2.9.6. Community Resources.

3.1.2.10. Provide an electronic copy of the monthly newsletters and education events in Subparagraph 3.1.2.7. and Paragraph 11.6.3., to the Office of Consumer and Family Affairs within the Department's Bureau of Behavioral Health, and the Mental Health Block Grant State Planner and Mental Health Block Grant Advisory Council no later than five (5) days prior to the beginning of the following month.

3.1.2.11. Provide individual peer assistance by assisting adults to:

3.1.2.11.1. Locate, obtain, and maintain mental health services and supports through referral, consumer education, and self-empowerment;

3.1.2.11.2. Support individuals who are identifying problems by assisting them in addressing the issue and/or in resolving grievances; and

3.1.2.11.3. Promote self-advocacy.

3.1.2.12. Provide employment education by providing members with:

3.1.2.12.1. Information relative to obtaining and maintaining competitive employment.

3.1.2.12.2. Referrals to community mental health center employment programs.

3.1.2.12.3. Employment-related activities, which may include, but are not limited to:

3.1.2.12.3.1. Resume writing.

3.1.2.12.3.2. Interviewing techniques.

3.1.2.12.3.3. Assistance with completing employment applications.

3.1.2.13. Inform members and the general public about peer support and wellness services available by providing Community Education Presentations about mental illness and the peer support community on a monthly basis to potential referral sources, funders, or families of individuals affected by mental illness.

3.1.2.14. Inform local human service providers and the general public about the stigma of mental illness, wellness and recovery and collaborate with other local human service providers that serve consumers in order to facilitate referrals and share information about services and other local resources.

3.1.2.15. Provide training and technical assistance to assist consumers to advocate for themselves and on their own behalf regarding healthcare such as, but not limited to:

3.1.2.15.1. Preparation techniques for doctors' appointments.

3.1.2.15.2. How to take notes.

3.1.2.15.3. How to use the physician's desk reference book for medications and a review of patient rights.

3.1.2.16. Invite guests to participate in peer support activities.

3.1.2.17. Provide residential support services, as needed, by providing support and assistance such as help with staying in their home or apartment, or finding a place to live.

3.1.2.18. Maintain at least a monthly schedule of peer support and wellness services and activities, which includes, but is not limited to:

3.1.2.18.1. Staff development and training.

3.1.2.18.2. Events that include community-based services.

3.1.2.18.3. Community outreach events.

3.2. The Contractor shall provide transportation services to members, participants and

guests, as needed. The Contractor shall:

3.2.1. Transport members, participants, guests, in a Contractor owned or leased vehicle, to and from their homes and/or the Contractor's PSA to participate in activities that may include, but not limited to:

3.2.1.1. Peer support services.

3.2.1.2. Wellness and recovery activities.

3.2.1.3. Annual conferences.

3.2.1.4. Regional meetings.

3.2.1.5. Council meetings.

3.2.2. Ensure all vehicles and drivers used for transportation comply with Federal and State Department of Transportation and Department of Safety regulations, which include, but are not limited to:

3.2.2.1. Vehicles must be registered pursuant to NH Administrative Rule Saf-C 500, Vehicle Registration Rules.

3.2.2.2. Vehicles must be inspected in accordance with NH Administrative Rule Saf-C 3200, Official Motor Vehicle Inspection Requirements.

3.2.2.3. Drivers must be licensed in accordance with NH Administrative Rule Saf-C 1000, Driver Licensing.

3.2.3. Require all employees, members, or volunteers who drive Contractor-owned vehicles sign a State of New Hampshire Release of Individual Motor Vehicle Driver Records form in order to access individual driver records that indicate drivers have safe driving records.

3.2.4. Require all employees, members, or volunteers who drive Contractor-owned vehicles complete a National Safety Council Defensive Driving course offered through a State of New Hampshire-approved agency.

3.3. The Contractor shall acknowledge funding from the Department to support transportation costs:

3.3.1. Is not used for activities other than peer support related activities defined in this Agreement.

3.3.2. May be used on an 'as needed' basis to pay for bus rides that are necessary to transport individuals to peer support services provided by the Contractor.

3.4. <u>Warmline Services</u>

3.4.1. The Contractor shall provide warmline services that offer on-call telephone peer support services to members, participants, and others. The Contractor shall ensure warmline services:

3.4.1.1. Are provided to any individual with the ability to receive calls and make calls statewide and who lives or works in the State of New Hampshire.

3.4.1.2. Are provided during the hours the PSA is closed.

3.4.1.3. Assist individuals with addressing a current crisis related to their mental health.

3.4.1.4. Include referrals to appropriate treatment and other resources available in the consumer's service area.

3.4.1.5. Are provided by staff who are trained in providing warmline services.

3.4.1.6. May include outreach calls described in Subparagraph 3.1.2.6.

3.5. Recovery Oriented Step-Up Step-Down Program

3.5.1. The Contractor shall operate a three (3) bed step-up / step-down program that provides short-term recovery-based transition services for individuals:

3.5.1.1. Transitioning from inpatient or institutional settings into the community; or

3.5.1.2. Who require more intensive supports to reduce the need for admission to an inpatient setting.

3.5.2. The Contractor shall ensure each single occupancy bed includes, but is not limited to:

3.5.2.1. A minimum of one (1) bathroom with a sink, toilet, and shower.

3.5.2.2. A specific sleeping area designated for each individual, ensuring common areas are not used as bedrooms.

3.5.2.3. Storage space for each individual's clothing and personal possessions.

3.5.2.4. Kitchen area for the individual(s) to store and prepare meals.

3.5.2.5. A minimum of one (1) telephone for incoming and outgoing calls.

3.5.3. For the purposes of Step-Up / Step-Down services, any reference to business days shall mean Monday through Friday, excluding holidays observed by the State of New Hampshire as non-working days.

3.5.4. The Contractor shall ensure all services are available to individuals, statewide, regardless of insurance coverage or place of employment.

3.5.5. The Contractor shall ensure Step-Up / Step-Down services are in place on or before February 1, 2021, which include, but are not limited to:

3.5.5.1. Program(s) that are voluntary admission, short term, with overnight services.

3.5.5.2. Non-clinical peer supports, which includes access to a twenty-four (24) hour staff.

3.5.5.3. Policies that establish a ninety (90) day maximum stay limit per individual, per episode.

3.5.5.4. Programs staffed by peer support specialists as defined in NH

Administrative Rule He-M 400, Community Mental Health, Part 426, Community Mental Health Services, Section 13(d)(4), who have successfully passed the state peer support specialist certification exam; and

3.5.5.5. Coordination with outpatient community-based clinical treatment providers.

3.5.6. The Contractor shall ensure the program accepts individuals:

3.5.6.1. Discharging from inpatient settings; and

3.5.6.2. For whom a short-term stay would prevent a psychiatric hospitalization.

3.5.7. The Contractor shall utilize the Intentional Peer Support (IPS) or another Substance Abuse and Mental Health Services Administration (SAMHSA)-recognized mental health peer support model to facilitate recovery and wellness with individuals. The Contractor shall ensure:

3.5.7.1. Programs operate in accordance with SAMHSA Core Competencies for Peer Support Workers in a behavioral health system.

3.5.7.2. Individuals are referred to other community-based service providers, as appropriate to ensure:

3.5.7.2.1. Individuals are connected to community providers, programs, and applicable services; and

3.5.7.2.2. Whole-health needs of each individual are met.

3.5.7.3. Programs utilize a statewide referral form approved by the Department.

3.5.7.4. Programs adhere to a standardized Department-approved admission criteria that includes, but is not limited to, serving individuals who:

3.5.7.4.1. Are at least eighteen (18) years of age.

3.5.7.4.2. Are residents of the State of New Hampshire.

3.5.7.4.3. Self-identified as being in psychiatric distress.

3.5.7.4.4. Exhibit a willingness to engage in daily services and wellness activities.

3.5.7.4.5. Self-administering medication, if applicable, or receive medication from a community provider or clinician off-site.

3.5.7.5. Referrals for Step-Up services are accepted if submitted through:

3.5.7.5.1. Community mental health programs or providers;

3.5.7.5.2. Mobile Crisis Response Teams;

3.5.7.5.3. Behavioral Health Crisis Treatment Centers;

3.5.7.5.4. Peer Support Agencies; or

3.5.7.5.5. Other entities, as approved by the Department.

3.5.7.6. Referrals for Step-Down are accepted if submitted through:

3.5.7.6.1. New Hampshire Hospital;

3.5.7.6.2. Designated Receiving Facilities;

3.5.7.6.3. Mobile Crisis Response Teams;

3.5.7.6.4. Community mental health providers;

3.5.7.6.5. Hospitals; or

3.5.7.6.6. Other entities, as approved by the Department.

3.5.7.7. Programs are staffed and operated by a minimum of one (1) certified peer support specialist with lived experience with mental illness, twenty-four (24) hours per day when participants are in the program.

3.5.7.8. Programs support recovery and resiliency through interventions and services, or connections to services, which include, but are not limited to:

3.5.7.8.1. Facilitating connections to natural supports, defined as relationships that occur in everyday life, which may include, but are not limited to:

3.5.7.8.1.1. Family.

3.5.7.8.1.2. Friends.

3.5.7.8.1.3. Neighbors.

3.5.7.8.1.4. Peer support networks when transitioning back to their communities.

3.5.7.8.2. Developing and supporting individual discharge plans.

3.5.7.8.3. Providing access to a minimum of one (1) SAMHSA-recognized peer support model who emphasizes physical, psychological, and emotional safety and focuses on individual strengths as a method to rebuild a sense of control and empowerment.

3.5.7.8.4. Providing opportunities for engagement in structured daily activities while participating in the program.

3.5.7.8.5. Developing individualized safety and wellness plans that support person-centered recovery goals, which may include Wellness Recovery Action Plans (WRAP).

3.5.7.9. Programs support connections, allow access to and collaborate with the individual's current services and service providers, including establishing memorandums of understanding, communication protocols and sharing of care plans with written consent.

3.5.7.10. Programs support individuals with maintaining participation in academic coursework and/or employment.

3.5.8. The Contractor shall assist individuals without established service providers to obtain a variety of supports that include, but are not limited to:

3.5.8.1. Referring individuals to Department supports for benefits that may include, but are not limited to:

3.5.8.1.1. Social security.

3.5.8.1.2. Food stamps.

3.5.8.1.3. Utility assistance.

3.5.8.2. Assisting individuals with obtaining, completing, and submitting housing applications.

3.5.8.3. Identifying and connecting participants to resources within the community which may include, but are not limited to:

3.5.8.3.1. Peer support agencies.

3.5.8.3.2. Community mental health centers.

3.5.8.3.3. Faith-based groups.

3.5.8.3.4. Transportation services.

3.5.8.3.5. Primary care services.

3.5.8.3.6. Homemaker and personal care services.

3.5.9. The Contractor shall administer a functional assessment at intake and discharge from the program, as approved by the Department to include, but not be limited to, data identified in Subsection 11.6.

3.5.10. The Contractor shall develop a referral process with the local community mental health center for those individuals who, while in the program, experience a rise in acuity level and:

3.5.10.1. Require a higher level of care; or

3.5.10.2. Require an evaluation for hospitalization.

3.5.11. The Contractor shall ensure individual health needs are addressed during the course of their stay.

3.5.12. The Contractor shall maintain a smoke-free environment and provide tobacco intervention services to individuals who are former or current smokers. The Contractor shall ensure:

3.5.12.1. Former smokers receive appropriate supports that assist with maintaining a non-smoking status.

3.5.12.2. Current smokers are offered smoking cessation treatments.

3.5.13. The Contractor shall ensure the discharge process includes, but is not limited to:

3.5.13.1. Conducting discharge planning meetings that actively include individuals receiving services.

3.5.13.2. Ensuring the first discharge meeting occurs no later than thirty (30) days from the date of the individual's admission

3.5.13.3. Ensuring discharge meetings include, but are not limited to, input from:

3.5.13.3.1. Community mental health centers.

3.5.13.3.2. Primary care services.

3.5.13.3.3. Other providers.

3.5.13.3.4. Natural supports.

3.5.13.4. Ensuring discharge plans are wellness and recovery oriented and include, but are not limited to, individualized:

3.5.13.4.1. Emergency contacts.

3.5.13.4.2. Community support contacts.

3.5.13.4.3. Updates on presenting problem.

3.5.13.4.4. Disposition.

3.5.13.4.5. Recovery goals.

3.5.13.4.6. Action steps to transition back into the community.

3.5.14. The Contractor shall choose to become an enrolled Medicaid provider through the Department's Medicaid program..

3.5.15. The Contractor shall perform, or cooperate with the performance of, such quality improvement and utilization review activities as are determined to be necessary and appropriate by the Department within timeframes reasonably specified by the Department.

3.6. Crisis Respite

3.6.1. The Contractor agrees to operate a peer operated Crisis Respite that provides early intervention for individuals (18) years of age and older who have a mental illness and who are experiencing a crisis in the community as follows:

3.6.2. Provide to any consumer from any of the Regions in New Hampshire regardless of where they live or work.

3.6.3. Provide a short-term crisis respite in a safe environment, staffed by peers, intended to maintain community placement and avoid hospitalization.

3.6.4. Provide interventions using a model of Intentional Peer Support (IPS), that focus on individual's strengths and assists in personal recovery and wellness.

3.6.5. Provide a place for the person to stay temporarily in order to facilitate recovery and shall be staffed with a trained personnel twenty-four (24) hours per day when participants are in the program.

3.6.6. Develop a referral process and making referrals to the local community mental health center for those who require a higher level of care or evaluation for hospitalization.

3.6.7. Offer other peer support agency services and supports during the course of stay at the crisis respite program.

3.6.8. Provide transportation to and from the crisis respite program to other community-based appointments.

3.6.9. Administer a functional assessment that is approved by the Department, at the time of entry and exit from the program.

3.6.10. Provide individualized supports with a focus on wellness and recovery that may include Wellness Recovery Action Plan (WRAP), if applicable.

3.6.11. Support the individual in returning to participation in community activities, services and supports.

3.6.12. Ensure the individual's health needs if they become ill or injured are addressed during the course of their stay in the crisis respite program.

3.6.13. Ensure communication with other service providers involved in the individual's care, with their written consent.

4. Geographic Area and Physical Location of Services

4.1. The Contractor shall provide peer support services separately from the confines of a local community mental health center, unless otherwise pre-approved by the Department.

4.2. The Contractor shall provide peer support services at a physical location and/or building that is in compliance with Exhibit C, Section 15. and with the Life Safety requirements, which include, but are not limited to, ensuring the building:

4.2.1. Is in compliance with local health, building and fire safety codes.

4.2.2. Is maintained in good repair and free of hazards, and includes, but is not limited to:

4.2.2.1. A minimum of one (1) indoor bathroom that includes a sink and toilet.

4.2.2.2. A minimum of one (1) telephone for incoming and outgoing calls.

4.2.2.3. A functioning septic or other sewage disposal system.

4.2.2.4. A source of potable water for drinking and food preparation as follows:

4.2.2.4.1. If drinking water is supplied by a non-public water system, the Contractor shall ensure the water is tested and found to be in accordance with NH Administrative Rules Env-Ws 300, Drinking Water Rules, Part 15, Maximum Contaminant Levels and Maximum Contaminant Level Goal for Regulated Organics and Part 316, Regulated Secondary Maximum

Contaminant Levels initially and every five (5) years thereafter.

4.2.2.4.2. If the water is not approved for drinking, the Contractor shall implement an alternative method for providing safe drinking water.

5. Enrolling Consumers for Services and/or as Members with a Peer Support Agency (PSA)

5.1. The Contractor shall provide peer support services to individuals defined in Subsection 1.4. who have a desire to work on wellness issues, and who have a desire to participate in services.

5.2. The Contractor shall request consumers complete a membership application to join and support the activities and mission of the PSA.

5.3. The Contractor shall ensure the membership application includes, but is not limited to:

5.3.1. The minimum engagement policy.

5.3.2. Suspension of membership policy.

5.3.3. Membership rules.

5.3.4. Attestation that the consumer supports the mission of the PSA.

5.4. The Contractor shall provide services to both members and non-members.

6. Staffing Requirements for a PSA

6.1. The Contractors shall employ an Executive Director who:

6.1.1. Is appointed by the Board of Directors.

6.1.2. Is employed by the Contractor and is supervised by the Board of Directors.

6.1.3. Has, at a minimum, the following qualification:

6.1.3.1. One (1) year of supervisory or management experience; and

6.1.3.1.1. An associate's degree or higher administration, business management, education, health, or human services; or

6.1.3.1.2. Additional years of experience in the peer support field that can be substituted for one (1) year of academic experience.

6.1.4. Is evaluated annually by the Board of Directors to ensure peer support and wellness services and activities are provided in accordance with:

6.1.4.1. The performance expectations approved by the Board.

6.1.4.2. The Department's policies and rules.

6.1.4.3. The Contract terms and conditions.

6.1.4.4. The Quality improvement reviews.

6.2. The Contractor shall screen each staff member for tuberculosis prior to employment.

6.3. The Contractor shall not add, delete, defund, or transfer staff positions among programs without prior written permission from the Department.

6.4. The Contractor shall develop a Staffing Contingency Plan for Department approval no later than thirty (30) days from the contract effective date, which includes but is not limited to:

6.4.1. The process for replacement of personnel in the event of loss of key personnel or other personnel during the period of this Agreement.

6.4.2. The description of how additional staff resources shall be allocated to support this Agreement in the event of inability to meet any performance standard.

6.4.3. The description of time frames necessary for obtaining staff replacements.

6.4.4. An explanation of the Contractor's capabilities to provide, in a timely manner, staff replacements/additions with comparable experience.

6.5. The Contractor shall submit an emergency staffing plan within thirty (30) days of the contract effective date if the contract that includes, but not limited to:

6.5.1. Inclement weather notifications for programming and transportation services.

6.5.2. Emergency evacuation plans for the Agency.

6.6. Prior to making an offer of employment or for volunteer work, the Contractor shall, after obtaining signed and notarized authorization from the person or persons for whom information is being sought:

6.6.1. Obtain at least two (2) references for the person;

6.6.2. Submit the person's name for review against the bureau of elderly and adult services (BEAS) state registry maintained pursuant to RSA 161-F:49;

6.6.3. Complete a criminal records check to ensure that the person has no history of:

6.6.3.1. Felony conviction; or

6.6.3.2. Any misdemeanor conviction involving:

6.6.3.2.1. Physical or sexual assault;

6.6.3.2.2. Violence;

6.6.3.2.3. Exploitation;

6.6.3.2.4. Child pornography;

6.6.3.2.5. Threatening or reckless conduct;

6.6.3.2.6. Theft;

6.6.3.2.7. Driving under the influence of drugs or alcohol; or

6.6.3.2.8. Any other conduct that represents evidence of behavior that could endanger the well-being of a consumer; and

6.6.4. Complete a motor vehicles record check to ensure that the person has a valid driver's license if the person will be transporting consumers.

6.7. Unless the Contractor requests and obtains a waiver from the Department, it shall not hire any individual or approve any individual to act as a volunteer if:

6.7.1. The individual's name is on the BEAS state registry;

6.7.2. The individual has a record of a felony conviction; or

6.7.3. The individual has a record of any misdemeanors specified in Subparagraph 6.6.3.2.

7. Staff Training and Development

7.1. The Contractor shall verify and document all staff and volunteers have appropriate training, education, experience, and orientation to fulfill the responsibilities of their respective positions. The Contractor shall ensure:

7.1.1. All personnel and training records are current and available to the Department, as requested.

7.1.2. All staff training shall be in accordance with New Hampshire Administrative Rule He-M 400, Community Mental Health, Part 402, Peer Support, Section 402.05, Staff Training, Staff Development and Orientation.

7.2. The Contractor shall maintain documentation in files of the staffs completed trainings and certifications.

7.3. The Contractor shall obtain Department approval thirty (30) days prior to the training date, for all trainings provided by the Contractor or to attend trainings other than offered by the Contractor for staff at least on an annual basis such as, but not limited to:

7.3.1. Peer Support.

7.3.2. Warmline.

7.3.3. Facilitating Peer Support Groups.

7.3.4. Sexual Harassment.

7.3.5. Member Rights.

7.4. The Contractor shall provide Intentional Peer Support training and its required consultations to meet state certification.

7.5. The Contractor shall provide Wellness, Recovery, and Planning training to staff during the years in which Intentional Peer Support is not provided.

7.6. The Contractor shall ensure administrative staff, including the Executive Director, participate in trainings on:

7.6.1. Staff Development.

7.6.2. Supervision.

7.6.3. Performance Appraisals.

7.6.4. Employment Practices.

7.6.5. Harassment.

Exhibit A - Amendment #4

7.6.6. Program Development.

7.6.7. Complaints and the Complaint Process.

7.6.8. Financial Management.

7.7. The Contractor shall ensure that annual Wellness Training is available to staff and members, and may be provided to other mental health consumers who do not identify themselves as members of a PSA in the region.

7.8. The Contractor shall obtain prior approval by the Department no later than thirty (30) days prior to the training, to provide or refer staff to specific training proposed by either the Department or the Contractor.

7.9. The Contractor shall collaborate with other Peer Support Agencies to offer combined trainings to facilitate efficient use of training funds and to increase the scope of trainings offered.

7.10. The Contractor shall purge all data in accordance with the instructions from the Department pertaining to members, participants, and guests who have not received peer support services within the prior two (2) year period.

8. Composition and Responsibilities of a PSA

8.1. The Contractor shall establish and maintain a status as a PSA by:

8.1.1. Being incorporated with the Secretary of State's Office as a non-for-profit agency.

8.1.2. Having a plan for governance that requires a Board of Directors who:

8.1.2.1. Are responsible for the management and control of the property and affairs of the corporation.

8.1.2.2. Have the powers usually vested in the Board of Directors of a non-for-profit corporation.

8.1.2.3. Are comprised of a minimum of nine (9) individuals with at least 51% of the individuals who self-identify as consumers.

8.1.2.4. Have membership where less than 20% of the Board members are related by blood, marriage, or cohabitation to other Board members.

8.1.2.5. Establish and maintain the bylaws that include, but are not limited to:

8.1.2.5.1. Responsibilities and powers of the Board of Directors.

8.1.2.5.2. Term limits for the Board of Directors officers ensuring not more than 20% of the Board members serve for more than six (6) consecutive years.

8.1.2.5.3. A nominating process that actively recruits diverse individuals whose skills and life experiences serve the needs of the agency.

8.1.2.5.4. A procedure by which inactive PSA members are removed from the PSA Board.

Exhibit A - Amendment #4

8.2. The Contractor shall submit a corrective action plan to the Department within five (5) days when the Board of Directors membership falls below the required minimum of nine (9) members.

8.3. The Contractor shall submit an updated list of current Board of Directors members and a corrective action plan with timeframes to comply with the required number of members when membership falls below the minimum required number of five (5) members to the Department and NH Department of Justice, Division of Charitable Trusts.

8.4. The Contractor shall have a documented Orientation Process and Manual for the members and officers of the Board of Directors, which includes written descriptions outlining the duties of the members and officers of the Board of Directors.

8.5. The Contractor shall have annual trainings related to the members and officers of the Board of Directors roles and responsibilities, including fiduciary responsibilities.

8.6. The Contractor's Board of Directors shall have fiduciary responsibility for the agency including approval of agency financial policies and procedures that includes, but not be limited to, the following:

8.6.1. Cash Management including, but not limited to:

8.6.1.1. Cash receipts.

8.6.1.2. Cash disbursements.

8.6.1.3. Petty cash.

8.6.2. Accounts Payable/Receivable Procedures, payroll, and fixed assets.

8.6.3. Internal Control Procedures.

8.6.4. Expense Reimbursement and Advance Policy.

8.7. The Contractor shall have open attendance to PSA members during a portion of a Board meeting.

8.8. The Contractor shall publish the times and locations of Board of Directors meetings in an effort to encourage PSA member attendance.

8.9. The Contractor's Board of Directors shall maintain written records that are available to the Department upon request, which include, but are not limited to:

8.9.1. Board of Directors meeting minutes that include, but are not limited to:

8.9.1.1. Topics discussed.

8.9.1.2. Votes and actions taken.

8.9.1.3. A monthly review of the agency's financial status.

8.9.2. Current Board of Directors list that includes, but is not limited to:

8.9.2.1. Member name.

8.9.2.2. Member address.

8.9.2.3. Member phone number.

8.9.2.4. Member e-mail address.

8.9.2.5. Board office held.

8.9.2.6. Date joined the Board.

8.9.2.7. Member Board expiration date.

8.9.3. Documentation of the process and results of annual Board of Directors elections.

8.9.4. Policy manuals that include, but are not limited to policies for:

8.9.4.1. Human Resources.

8.9.4.2. Staff Development.

8.9.4.3. Financial Responsibilities.

8.9.4.4. Protection for member and participant rights.

8.10. The Contractor shall pursue other sources of revenue to support additional peer support services and/or supplement other related activities that the Department may not pay for under this Agreement.

9. Participation in Statewide/Regional Meetings

9.1. The Contractor shall support the recruitment and training of individuals for serving on local, regional and state mental health policy, planning and advisory initiatives.

9.2. The Contractor shall ensure the participation of individuals other than the Contractor's employees who provide leadership development meetings, workshops, and training events.

9.3. The Contractor shall ensure the Executive Director, or designee, attends the Department's monthly Peer Support Directors meeting for the purpose exchanging information as well as supporting and strengthening the statewide Peer Support system.

9.4. The Contractor shall meet, a minimum of two (2) times per year, with other regional community support organizations that serve the same populations, which may include, but are not limited to:

9.4.1. Mental health centers.

9.4.2. Area homeless shelters.

9.4.3. Community action programs.

9.4.4. Housing agencies.

9.5. The Contractor shall submit documentation to the Department that demonstrates attendance at the meetings in Section 9.

10. Grievance and Appeals

10.1. The Contractor shall submit a grievance and appeals process to the Department for approval. The Contractor shall ensure the grievance and appeals process includes, but is not limited to:

10.1.1. How to receive complaints orally, or in writing, ensuring information collected includes, but is not limited to:

10.1.1.1. Consumer name.

10.1.1.2. Date of written grievance.

10.1.1.3. Nature and subject of the grievance.

10.1.1.4. A method to submit an anonymous complaint.

10.1.2. A policy relative to assisting consumers with the grievance and appeal process including, but not limited to, how to file a complaint.

10.1.3. A method to track complaints.

10.1.4. Investigating allegations that a member's or participant's rights have been violated by agency staff, volunteers or consultants.

10.1.5. An immediate review of the complaint and investigation by the Contractor's director or his or her designee.

10.1.6. A process to attempt to resolve every grievance for which a formal investigation is requested.

10.1.7. An appeal process for members or participants to appeal any written decision rendered by the Board of Directors.

10.2. The Contractor shall ensure the Board of Directors issues a written decision to the member or participant filing a grievance upon completing an investigation and within twenty (20) business days setting forth the disposition of the grievance.

10.3. The Contractor shall submit a copy of the written decision in Subsection 10.2. of the complaint to the Department within ten (10) days from the written decision.

11. Reporting Requirements

11.1. The Contractor shall submit a report that lists the names of the trained individuals in accordance with Section 7. Staff Training and Development, utilizing reporting forms provided by the Department.

11.2. The Contractor shall provide the prior month's interim Balance Sheet, and Profit and Loss Statements to the Department no later than the 30th of the month, ensuring the report includes, but is not limited to:

11.2.1. The Current Ratio that measures the Contractor's total current assets available to cover the cost of current liabilities. The Contractor shall:

11.2.1.1. Utilize the following formula: Total current assets divided by total current liabilities.

11.2.1.2. Maintain a minimum current ratio of 1.1:1.0 with no variance allowed.

11.2.2. Accounts Payable that measure the Contractor's timeliness in paying invoices, ensuring no outstanding invoices greater than sixty (60) days.

11.2.3. Budget Management that compares budgets to actual revenues and expenses to determine the percentage of the Contractors budget executed year-to-date.

11.2.4. Ensure revenues are equal to or greater than the year-to-date calculation while ensuring expenses are equal to or less than the year-to-date calculation.

11.3. The Contractor shall prepare an Annual Report presentation for the benefit of the Mental Health Block Grant Advisory Council.

11.4. The Contractor shall submit a quarterly written report to the Department, on a form supplied by the Department, no later than the fifteenth (15th) day of the month following the end of each quarter that includes, but is not limited to:

11.4.1. Community outreach activities as outlined in Section 12. Deliverables.

11.4.2. Compilation of program evaluation and surveys submitted in the past quarter.

11.4.3. Peer support service deliverables as identified on templates provided by the Department.

11.4.4. Statistical data including, but not limited to:

11.4.4.1. The total number of unduplicated participants served on a daily basis.

11.4.4.2. The total number of current members, defined as only those members who have been served within the past year.

11.4.4.3. Program utilization totals by percentage.

11.4.4.4. Number of telephone peer support contacts.

11.4.4.5. Number and description of outreach activities.

11.4.4.6. Number and description of educational events provided:

11.4.4.6.1. On-site; and

11.4.4.6.2. In the community.

11.4.5. Board of Directors meeting minutes for the previous quarter that include, but are not be limited to:

11.4.5.1. Executive Director's report.

11.4.5.2. Board of Directors roster.

11.5. The Contractor shall provide a report for Department approval by July 31 of each State Fiscal Year, which outlines:

11.5.1. Specific steps the Contractor has taken to increase membership in the previous State Fiscal Year.

11.5.2. A plan for how the Contractor shall increase the unduplicated numbers served in the above activities by ten (10) percent of the total served in the previous year, for each subsequent State Fiscal Year.

11.5.3. Monthly in-house schedules and newsletters.

11.5.4. Quarterly revenue and expenses by cost, category and locations.

11.5.5. Quarterly Capital Expenditure Reports.

Exhibit A - Amendment #4

11.5.6. Quarterly Auditor's Reports: The prior three (3) months of monthly interim Balance Sheet and Profit and Loss Statements including separate statements for related parties that are certified by an officer of the reporting entity to measure the agency's fiscal integrity.

11.6. Recovery Oriented Step-Up Step-Down Program

11.6.1. The Contractor shall submit individual data in the format, content, frequency and method as approved by the Department that includes, but is not be limited to:

11.6.1.1. Admission region.

11.6.1.2. Discharge region.

11.6.1.3. Presenting problem upon admission.

11.6.1.4. If admission was diversion from inpatient care (step-up).

11.6.1.5. If admission facilitated a supported transition out of inpatient care (step-down).

11.6.1.6. Age.

11.6.1.7. Gender.

11.6.1.8. Sexual orientation.

11.6.1.9. Race and ethnicity.

11.6.1.10. Legal status.

11.6.1.11. Employment status.

11.6.1.12. Individual's housing status upon admission and discharge.

11.6.1.13. Discharge reason.

11.6.1.14. Length of stay.

11.6.1.15. Resource referrals.

11.6.1.16. Entry and exit client status indicators, to include, but not be limited to, if the individual:

11.6.1.16.1. Was a step-up or step-down referral;

11.6.1.16.2. Exited to a higher level of care; and

11.6.1.16.3. Was referred from a higher level of care.

11.6.2. The Contractor shall submit program status data to the Department in the format, content, frequency and method as approved by the Department, that includes, but is not limited to:

11.6.2.1. Number of beds occupied.

11.6.2.2. Daily provided programming.

11.6.2.3. Staffing levels.

11.6.2.4. Community outreach efforts, including, but not limited to:

11.6.2.4.1. Family supports.

11.6.2.4.2. Community resource supports.

11.6.2.4.3. Other individuals or entities specified by the individual as a support.

11.6.3. The Contractor shall ensure monthly data is submitted no later than the fifteenth (15th) of each month for the prior month's data, unless otherwise approved by the Department in writing.

11.6.4. The Contractor shall ensure quarterly data is submitted no later than the fifteenth (15th) day of the month following the close of a quarter.

11.6.5. The Contractor shall submit monthly Balance Sheets and Profit and Loss Statements to the Department, ensuring:

11.6.5.1. The Profit and Loss Statements include a budget column allowing for budget-to-actual analysis.

11.6.5.2. Statements are submitted in accordance with Paragraph 11.6.3.

11.6.5.3. Statements are based on the accrual method of accounting and include the Contractor's total revenues and expenditures, whether or not generated by, or resulting from, funds provided pursuant to this contract.

12. Deliverables

12.1. The Contractor shall provide a minimum of fifteen (15) hours of in-house services at each Center each week, of which five (5) hours may be conducted in the Center's community or region, as approved by the Department. The Contractor shall provide services that include, but are not limited to:

12.1.1. New topics introduced every month.

12.1.2. A minimum of five (5) separate discussion groups per week that address emotional wellbeing topics, which may include, but are not limited to:

12.1.2.1. IPS.

12.1.2.2. WRAP.

12.1.2.3. WHAM.

12.1.2.4. Setting boundaries.

12.1.2.5. Positive thinking.

12.1.2.6. Wellness.

12.1.2.7. Stress management.

12.1.2.8. Addressing trauma.

12.1.2.9. Reduction of negative or intrusive thoughts.

12.1.2.10. Management of emotional states including, but not limited to:

12.1.2.10.1. Anger.

12.1.2.10.2. Depression.

12.1.2.10.3. Anxiety.

12.1.2.10.4. Mania

12.1.3. A minimum of five (5) discussion or practice groups per week that address physical wellbeing topics which may include, but are not limited to:

12.1.3.1. Smoking cessation.

12.1.3.2. Weight loss.

12.1.3.3. Nutrition and Cooking.

12.1.3.4. Physical exercise.

12.1.3.5. Mindfulness activities including, but not limited to:

12.1.3.5.1. Yoga.

12.1.3.5.2. Meditation.

12.1.3.5.3. Journaling.

12.1.4. A minimum of four (4) activity groups per week that that provide positive skill-building activities which may include, but are not limited to:

12.1.4.1. Arts and crafts.

12.1.4.2. Music expression.

12.1.4.3. Creative writing.

12.1.4.4. Cooking.

12.1.4.5. Sewing.

12.1.4.6. Gardening.

12.1.4.7. Movies.

12.1.5. A minimum of one (1) group per week based on topics relevant to fostering independence which may include, but are not limited to:

12.1.5.1. Online blogs or articles that relate to mental health.

12.1.5.2. Obtaining employment.

12.1.5.3. Budgeting.

12.1.5.4. Decision-making.

12.1.5.5. Self-advocacy.

12.2. The Contractor shall provide community-based services including, but not limited to a minimum of one (1) trip into the community per month for activities that may include, but are not limited to:

12.2.1. Visiting a natural setting.

12.2.2. Volunteering opportunities.

12.2.3. Visiting a museum.

12.2.4. Visiting a local historical site.

12.2.5. Visiting local farms or gardens.

12.3. The Contractor shall provide community outreach that includes, but is not limited to:

12.3.1. Providing monthly community education presentations about mental illness and the peer support community to potential referral sources, funders, or families of individuals affected by mental illness, including, but not limited to:

12.3.1.1. Local psychiatric hospitals.

12.3.1.2. Local mental health clinics.

12.3.1.3. Local community events.

12.3.2. Providing monthly educational events and presentations to members, participants, or other individuals seeking support and information relating to the issues and concerns of consumers of mental health services which includes, but is not limited to educational topics to be covered over the course of the year, which may include, but are not limited to:

12.3.2.1. Rights protection.

12.3.2.2. Peer Advocacy.

12.3.2.3. Recovery.

12.3.2.4. Employment.

12.3.2.5. Wellness Management.

12.3.2.6. Community Resources.

12.4. Recovery Oriented Step-Up Step-Down Program

12.4.1. The Contractor shall perform, or cooperate with the performance of, quality improvement or utilization review activities as are determined necessary and appropriate by the Department within timeframes reasonably specified by the Department including, but not limited to:

12.4.1.1. Meeting 75% minimum occupancy standards annually.

12.4.1.2. Successfully diverting 80% of Step-Up admissions from resulting in an inpatient stay.

12.4.1.3. Successfully facilitating Step-Down transitions with no more than 5% of individuals being readmitted to hospital level care within the ninety (90) day period, referenced in Subparagraph 3.5.5.3.

12.4.2. The Contractor shall actively and regularly collaborate with the Department to enhance contract management, improve results, and adjust program delivery and policy based on successful outcomes.

12.4.3. The Contractor may be required to provide other key data and metrics to the Department, including client-level demographic, performance, and service data.

12.4.4. Where applicable, the Contractor shall collect and share data with the Department in a format specified by the Department.

13. Quality Improvement

13.1. The Contractor shall participate in quality program reviews and site visits on a schedule provided by the Department. All contract deliverables, programs, and activities shall be subject to review during this time. These reviews shall result in a report and potential corrective action.

13.2. The Contractor shall participate in quality assurance reviews as follows:

13.2.1. Ensure the Department has access sufficient for monitoring of contract compliance requirements as identified in OMB Circular A-133.

13.2.2. Ensure the Department is provided with access that shall include, but is not limited to:

13.2.2.1. Data.

13.2.2.2. Financial records.

13.2.2.3. Scheduled access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.4. Unannounced access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.5. Scheduled phone access to Contractor principals and staff.

13.3. The Contractor shall perform monitoring and comprehensive quality and assurance activities including, but not limited to:

13.3.1. Participating in bi-annual quality improvement review as in Subsection 13.1.

13.3.2. Participating in ongoing monitoring and reporting based on the bi-annual review and corrective action plan submitted in conjunction with the Department and Contractor.

13.3.3. Conducting member satisfaction surveys provided by and as instructed the Department.

13.3.4. Reviewing personnel files for completeness.

13.3.5. Reviewing the complaint process.

13.4. The Contractor shall provide a corrective action plan to the Department within thirty (30) days of notification of noncompliance with contract activities.

13.5. The Contractor shall provide all requested audits to the Department no later than ten (10) days after receiving the request from the Department.

Exhibit B – Amendment #4

Method and Conditions Precedent to Payment

1. The State shall pay the Contractor an amount not to exceed the Price Limitation, Block 1.8, of the General Provisions of this Agreement, Form P-37, for the services provided by the Contractor pursuant to Exhibit A – Amendment #4, Scope of Services.
2. This Agreement is funded by:
   2.1. 100% General Funds.
3. The Contractor agrees to provide the services in Exhibit A – Amendment #4, Scope of Services in compliance with funding requirements in Section 2., above.
4. The Contractor shall submit one (1) invoice to the Department upon Governor and Council approval of this Agreement requesting a start-up payment in an amount not to exceed $100,000.00 for the recovery oriented step-up step-down program as stated in Exhibit A – Amendment #4, Scope of Services and Exhibit B-7 Amendment #4.
5. The Contractor shall submit one (1) invoice to the Department upon Governor and Council approval of this Agreement requesting an advance payment in an amount not to exceed $32,258 for peer support services as described in Exhibit A – Amendment #4, Scope of Services. The Contractor shall ensure:
   5.1. The invoice clearly states a request for the advance payment, to be provided at the start of each State Fiscal Year (SFY), in the amount of $32,258, referenced in Exhibit A – Amendment #4, Scope of Services,
   5.2. The invoice includes how funds will be utilized toward peer support services in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #4 and Exhibit B-6 Amendment #4.
   5.3. The Contractor shall submit monthly invoices for actual expenditures incurred in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #4 and Exhibit B-6 Amendment #4.
   5.4. The Department shall recoup the advance payment by deducting 1/3rd of the advanced amount from the December 2020, January 2021, and February 2021 invoices, unless otherwise agreed upon by the Department.
6. Subsequent to the action in Section 5., the Department shall make monthly payments to the Contractor based upon cost reimbursement, as submitted by the Contractor to maintain services and as approved by the Department, of the Department approved budget amounts in Exhibit B-1 Budget Form through Exhibit B-6 Amendment #3 SFY 2022 Budget.
   6.1. In no event shall the total of the initial payment in Section 5. and monthly payments in Section 6. exceed the budget amounts set forth in Section 6.
   6.2. The Department will adjust monthly payments for expenditures set forth in Section 10., below and amounts paid to initiate services in Section 5., above.
7. Payment for services provided in Exhibit A – Amendment #4, Scope of Services shall be made as follows:

7.1. The Contractor shall submit an invoice on Department supplied forms, by the tenth (10th) working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month.

7.2. The State shall make payment to the Contractor on actual expenditures, within thirty (30) days of receipt of each Department-approved invoice for Contractor services provided pursuant to this Agreement.

7.3. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to dhhs.dbhinvoicesmhs@dhhs.nh.gov, or invoices may be mailed to:

Financial Manager
Bureau of Mental Health
Department of Health and Human Services
105 Pleasant Street, Main Building
Concord, NH 03301

8. The Contractor shall provide its Revenue and Expense Budget on Budget Form A supplied by the Department, within twenty (20) calendar days of the contract effective date and then twenty (20) days from the beginning of each fiscal year thereafter.

9. The Contractor shall provide quarterly Revenue and Expense Reports on Budget Form A, within thirty (30) calendar days after the end of each fiscal quarter, defined as July 1 to September 30, October 1 to December 31, January 1 to March 31, and April 1 to June 30.

10. The Contractor shall provide supporting documentation, when required by the Department, to support evidence of actual expenditures, in accordance with the Department approved budgets in Section 6.

11. Any expenditure that exceeds the approved budgets in Section 6. shall be solely the financial responsibility of the Contractor.

12. When the contract price limitation is reached the program shall continue to operate at full capacity at no charge to the Department for the duration of the contract period.

13. Funding may not be used to replace funding for a program already funded from another source.

14. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this Contract may be withheld, in whole or in part, in the event of noncompliance with any State or Federal law, rule or regulation applicable to the services provided, or if the said services have not been completed in accordance with the terms and conditions of this Agreement.

15. Notwithstanding Paragraph 18 of the General Provisions of this Agreement P-37, an amendment limited to the budget amounts identified in Section 6., to adjust amounts within the budgets, within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of Governor and Executive Council.

16. The Department reserves the right to recover any program funds not used, in whole or in part, for the purposes stated in this Agreement from the Contractor within one hundred and twenty (120) days of the Completion Date.

17. Contractor will have forty-five (45) days from the end of each State Fiscal Year to submit to the Department final invoices for payment. Any adjustments made to a prior invoice will need to be accompanied by supporting documentation.

18. Property Standards

18.1. Insurance coverage.

18.1.1. The Contractor shall, at a minimum, provide the equivalent insurance coverage for real property and equipment acquired or improved with State funds as provided to property owned by the Contractor.

18.2. Real property.

18.2.1. Subject to the obligations and conditions set forth in this section, title to real property acquired or improved in whole or in part with State funds will vest upon acquisition in the Contractor.

18.2.2. Except as otherwise provided by State statutes or in this Agreement, real property will be used for the originally authorized purpose as long as needed for that purpose, during which time the Contractor must not dispose of or encumber its title or other interests without State approval.

18.2.3. When real property is no longer needed for the originally authorized purpose, the Contractor must obtain disposition instructions from the State. The instructions must provide for one of the following alternatives:

18.2.3.1. Retain title after compensating the State. The amount paid to the State will be computed by applying the State's percentage of participation in the cost of the original purchase (and costs of any improvements) to the fair market value of the property. However, in those situations where the Contractor is disposing of real property acquired or improved with State funds and acquiring replacement real property prior to expiration of this Agreement and any amendment thereof, the net proceeds from the disposition may be used as an offset to the cost of the replacement property.

18.2.3.2. Sell the property and compensate the State. The amount due to the State will be calculated by applying the State's percentage of participation in the cost of the original purchase (and cost of any improvements) to the proceeds of the sale after deduction of any actual and reasonable selling and fixing-up expenses. If the State appropriation funding this Agreement or any amendment thereof has not been closed out, the net proceeds from sale may be offset against the original cost of the property. When the Contractor is directed to sell property, sales procedures must be followed that provide for competition to the extent practicable and result in the highest possible return.

18.2.3.3. Transfer title to a third party designated/approved by the State. The Contractor is entitled to be paid an amount calculated by applying the State's percentage of participation in the purchase of the real property (and cost of any improvements) to the current fair market value of the property.

18.3. Equipment.

18.3.1. Equipment means tangible personal property (including information technology systems) purchased in whole or in part with State funds and that has a useful life of more than one (1) year and a per-unit acquisition cost which equals or exceeds $5,000.

18.3.2. Subject to the obligations and conditions set forth in this section, title to equipment acquired with State funds will vest upon acquisition in the Contractor subject to the following conditions:

18.3.2.1. Use the equipment for the authorized purposes of the project during the period of performance, or until the property is no longer needed for the purposes of the project.

18.3.2.2. Not encumber the property without approval of the State.

18.3.2.3. Use and dispose of the property in accordance with Paragraph 18.2.2., Paragraph 18.2.1. and Paragraph 18.3.5.

18.3.3. Use.

18.3.3.1. Equipment must be used by the Contractor in the program or project for which it was acquired as long as needed, whether or not the project or program continues to be supported by State funds, and the Contractor must not encumber the property without prior approval of the State. When no longer needed for the original program or project, the equipment may be used in other activities funded by the State.

18.3.3.2. During the time that equipment is used on the project or program for which it was acquired, the Contractor must also make equipment available for use on other projects or programs currently or previously supported by the State, provided that such use will not interfere with the work on the projects or program for which it was originally acquired. First preference for other use must be given to other programs or projects supported by the State that financed the equipment. Use for non-State-funded programs or projects is also permissible with approval from the State.

18.3.3.3. When acquiring replacement equipment, the Contractor may use the equipment to be replaced as a trade-in or sell the property and use the proceeds to offset the cost of the replacement property.

18.3.4. Management requirements. Procedures for managing equipment (including replacement equipment), whether acquired in whole or in part with State funding, until disposition takes place will, as a minimum, meet the following requirements:

18.3.4.1. Property records must be maintained that include a description of the property, a serial number or other identification number, the source of funding for the property, who holds title, the acquisition date, and cost of the property, percentage of State participation in the project costs for the Agreement under which the property was acquired, the location, use and condition of the property, and any ultimate disposition data including the date of disposal and sale price of the property.

18.3.4.2. A physical inventory of the property must be taken and the results reconciled with the property records at least once every two (2) years.

18.3.4.3. A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft must be investigated.

18.3.4.4. Adequate maintenance procedures must be developed to keep the property in good condition.

18.3.4.5. If the Contractor is authorized or required to sell the property, proper sales procedures must be established to ensure the highest possible return.

18.3.5. Disposition. When original or replacement equipment acquired with State funds is no longer needed for the original project or program or for other activities currently or previously supported by the State, except as otherwise provided by State statutes or in this Agreement, the Contractor must request disposition instructions from the State. Disposition of the equipment will be made as follows:

18.3.5.1. Items of equipment with a current per unit fair market value of $5,000 or less may be retained, sold or otherwise disposed of with no further obligation to the State.

18.3.5.2. Items of equipment with a current per-unit fair-market value in excess of $5,000 may be retained by the Contractor or sold. The State is entitled to an amount calculated by multiplying the current market value or proceeds from sale by the State's percentage of participation in the cost of the original purchase. If the equipment is sold, the State may permit the Contractor to deduct and retain from the State's share $500 or ten (10) percent of the proceeds, whichever is less, for its selling and handling expenses.

18.3.5.3. The Contractor may transfer title to the property to an eligible third party provided that, in such cases, the Contractor must be entitled to compensation for its attributable percentage of the current fair market value of the property.

18.3.5.4. In cases where the Contractor fails to take appropriate disposition actions, the State may direct the Contractor to take disposition actions.

19. Property Trust Relationship and Liens

19.1. Real property, equipment, and intangible property, that are acquired or improved with State funds must be held in trust by the Contractor as trustee for the beneficiaries of the project or program under which the property was acquired or improved. The State may require the Contractor to record liens or other appropriate notices of record to indicate that personal or real property has been acquired or improved with State funds and that use and disposition conditions apply to the property.

Exhibit B-5 - Amendment #4

SFY 2021 Budget

New Hampshire Department of Health and Human Services

Contractor Name: H.E.A.R.T.S. Peer Support Center of Greater Nashua

Budget Request for: Peer Support Services

Budget Period: SFY21 (7/1/20 through 6/30/21)

Line Item Budget Reference Number	Line Item Budget Description	Total Amount
600	**PERSONNEL COSTS**	
601	Salary & Wages	371,139
602	Employee Benefit	44,329
603	Payroll taxes	27,624
	Subtotal	**443,092**
620	**PROFESSIONAL FEES**	
624	Accounting	9,755
625	Audit Fees	5,667
626	Legal Fees	
627	Other Professional Fees and Consultants	
	Subtotal	**15,422**
630	**STAFF DEVELOPMENT AND TRAINING**	
631	Publications and Journals	
632	In-Service Training	3,000
633	Conferences and Conventions	
634	Other Staff Development	
	Subtotal	**3,000**
640	**OCCUPANCY COSTS**	
641	Rent	84,000
642	Mortgage Payments	
643	Heating Costs	
644	Other Utilities	
645	Maintenance and Repairs	
646	Taxes	
647	Other Occupancy Costs	
	Subtotal	**84,000**
650	**CONSUMABLE SUPPLIES**	
651	Office	3,800
652	Building/Household	4,767
653	Rehabilitation/Training	
655	Food	2,500
657	Other Consumable Supplies	
	Subtotal	**11,067**
	Other Expenses	
660	CAPITAL EXPENDITURES	
665	DEPRECIATION	
670	EQUIPMENT RENTAL	
680	EQUIPMENT MAINTENANCE	
700	ADVERTISING	1,500
710	PRINTING	2,167
720	TELEPHONE/COMMUNICATIONS	7,033
730	POSTAGE/SHIPPING	530
	Subtotal	**11,230**
740	**TRANSPORTATION**	
741	Board Members	
742	Staff	1,600
743	Members and Participants	8,763
	Subtotal	**10,363**
750	**Assistance to Individuals**	
751	Client Services	
752	Clothing	
	Subtotal	
760	**INSURANCE**	
761	Malpractice & Bonding	1,200
762	Vehicles	4,600
763	Comprehensive Property & Liability	3,117
800	OTHER EXPENDITURES	
801	INTEREST EXPENSE	
	Subtotal	**8,917**
	TOTAL PROGRAM EXPENSES	**$587,091**

DS
CP
Contractor Initials

Date 10/30/2020

Exhibit B-6 - Amendment #4

SFY 2022 Budget

New Hampshire Department of Health and Human Services

Contractor Name: H.E.A.R.T.S. Peer Support Center of Greater Nashua

Budget Request for: Peer Support Services - Region VIII

Budget Period: SFY21 (7/1/21 through 6/30/22)

Line Item Budget Reference Number	Line Item Budget Description	Total Amount
600	**PERSONNEL COSTS**	
601	Salary & Wages	443,390
602	Employee Benefit	49,817
603	Payroll taxes	33,151
	Subtotal	**526,358**
620	**PROFESSIONAL FEES**	
624	Accounting	10,975
625	Audit Fees	6,000
626	Legal Fees	
627	Other Professional Fees and Consultants	
	Subtotal	**16,975**
630	**STAFF DEVELOPMENT AND TRAINING**	
631	Publications and Journals	
632	In-Service Training	3,000
633	Conferences and Conventions	
634	Other Staff Development	
	Subtotal	**3,000**
640	**OCCUPANCY COSTS**	
641	Rent	96,000
642	Mortgage Payments	
643	Heating Costs	
644	Other Utilities	
645	Maintenance and Repairs	
646	Taxes	
647	Other Occupancy Costs	
	Subtotal	**96,000**
650	**CONSUMABLE SUPPLIES**	
651	Office	4,200
652	Building/Household	5,400
653	Rehabilitation/Training	
655	Food	2,500
657	Other Consumable Supplies	
	Subtotal	**12,100**
	Other Expenses	
660	CAPITAL EXPENDITURES	
665	DEPRECIATION	
670	EQUIPMENT RENTAL	
680	EQUIPMENT MAINTENANCE	
700	ADVERTISING	1,500
710	PRINTING	2,500
720	TELEPHONE/COMMUNICATIONS	7,800
730	POSTAGE/SHIPPING	580
	Subtotal	**12,380**
740	**TRANSPORTATION**	
741	Board Members	
742	Staff	1,600
743	Members and Participants	9,144
	Subtotal	**10,744**
750	**Assistance to Individuals**	
751	Client Services	
752	Clothing	
	Subtotal	
760	**INSURANCE**	
761	Malpractice & Bonding	1,300
762	Vehicles	5,000
763	Comprehensive Property & Liability	3,234
800	OTHER EXPENDITURES	
801	INTEREST EXPENSE	
	Subtotal	**9,534**
	TOTAL PROGRAM EXPENSES	**$687,091**

Contractor Initials DS CP

Date 10/30/2020

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New Hampshire Department of Health and Human Services

Contractor Name: H.E.A.R.T.S. Peer Support Center of Greater Nashua Region

Budget Request for: Peer Support Services: SUSD Services Start Up Budget

Startup Funds for Step-up Step-down Program

Budget Period: FY21

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	$ 5,072.00	$ -	$ 5,072.00	$ -	$ -	$ -	$ -	$ -	$ -
2. Employee Benefits	$ 675.00	$ -	$ 675.00	$ -	$ -	$ -	$ -	$ -	$ -
3. Consultants/Bookkeeper	$ 305.00	$ -	$ 305.00	$ -	$ -	$ -	$ -	$ -	$ -
4. Equipment	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Rental + Deposit	$ 6,000.00	$ -	$ 6,000.00	$ -	$ -	$ -	$ -	$ -	$ -
Repair / Retrofit Building for Turn Key	$ 30,000.00	$ -	$ 30,000.00	$ -	$ -	$ -	$ -	$ -	$ -
Purchase/Furniture	$ 37,400.00	$ -	$ 37,400.00	$ -	$ -	$ -	$ -	$ -	$ -
5. Supplies:	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Educational		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Printing	$ 1,000.00	$ -	$ 1,000.00	$ -	$ -	$ -	$ -	$ -	$ -
Food	$ 1,000.00	$ -	$ 1,000.00	$ -	$ -	$ -	$ -	$ -	$ -
Medical	$ 1,000.00	$ -	$ 1,000.00	$ -	$ -	$ -	$ -	$ -	$ -
Office-Computers and printer	$ 5,000.00	$ -	$ 5,000.00	$ -	$ -	$ -	$ -	$ -	$ -
6. Travel	$ 297.00	$ -	$ 297.00	$ -	$ -	$ -	$ -	$ -	$ -
7. Occupancy	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
8. Current Expenses	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Telephone	$ 750.00	$ -	$ 750.00	$ -	$ -	$ -	$ -	$ -	$ -
Postage	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Subscriptions	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Audit and Legal	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Insurance	$ 750.00	$ -	$ 750.00	$ -	$ -	$ -	$ -	$ -	$ -
Board Expenses	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
9. Software for Computers	$ 1,200.00	$ -	$ 1,200.00	$ -	$ -	$ -	$ -	$ -	$ -
10. Marketing/Communications/Printing	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
11. Staff Education and Training	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
12. Subcontracts/Agreements	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
13. Other (Zoning Application Fee):	$ 1,500.00	$ -	$ 1,500.00	$ -	$ -	$ -	$ -	$ -	$ -
14. Payroll Taxes	$ 851.00	$ -	$ 851.00	$ -	$ -	$ -	$ -	$ -	$ -
15. Advertizement	$ 1,200.00	$ -	$ 1,200.00	$ -	$ -	$ -	$ -	$ -	$ -
16. Training	$ 6,000.00	$ -	$ 6,000.00	$ -	$ -	$ -	$ -	$ -	$ -
TOTAL	$ 100,000.00	$ -	$ 100,000.00	$ -	$ -	$ -	$ -	$ -	$ -

Indirect As A Percent of Direct 0.0%

DS

Contractor Initials CP

Date 10/30/2020

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 H.E.A.R.T.S. PEER SUPPORT CENTER OF GREATER NASHUA REGION VI is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on February 19, 2009. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: **608796**

Certificate Number: **0004926301**

IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 5th day of June A.D. 2020.

William M. Gardner

Secretary of State

CERTIFICATE OF AUTHORITY

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

1. I am a duly elected President of the BOD's of H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI.
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called, and held on October 9, 2020, at which a quorum of the Directors/shareholders were present and voting.
(Date)

VOTED: That Claire Peddle; Treasurer of Board of Directors
(Name and Title of Contract Signatory)

is duly authorized on behalf of H.E.A.R.T.S. PSA to enter into contracts or agreements with the State
(Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30)** days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 10/9/2020

Signature of Elected Officer
Name: Tim Lopez
Title: President of BOD's

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ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/06/2020

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

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

PRODUCER
E & S Insurance Services LLC
21 Meadowbrook Lane
P O Box 7425
Gilford NH 03247-7425

CONTACT NAME: Fairley Kenneally
PHONE (A/C, No, Ext): (603) 293-2791 FAX (A/C, No): (603) 293-7188
E-MAIL ADDRESS: fairley@esinsurance.net

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A :	Great American Insurance Group	GAIG
INSURER B :	FirstComp	27626
INSURER C :	United States Liability Insurance Group	
INSURER D :		
INSURER E :		
INSURER F :		

INSURED
H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI
P O Box 1564
Nashua NH 03061

COVERAGES CERTIFICATE NUMBER: 2020 REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	[X] COMMERCIAL GENERAL LIABILITY; [ ] CLAIMS-MADE [X] OCCUR; GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [ ] PRO-JECT [ ] LOC; OTHER:			PAC098773206	07/01/2020	07/01/2021	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 50,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 2,000,000
							PRODUCTS - COMP/OP AGG	$ included
								$
A	AUTOMOBILE LIABILITY; [ ] ANY AUTO; [ ] OWNED AUTOS ONLY [X] SCHEDULED AUTOS; [ ] HIRED AUTOS ONLY [ ] NON-OWNED AUTOS ONLY			CAP 098773306	07/15/2020	07/15/2021	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
							Uninsured motorist	$ 1,000,000
	[ ] UMBRELLA LIAB [ ] OCCUR; [ ] EXCESS LIAB [ ] CLAIMS-MADE; DED RETENTION $						EACH OCCURRENCE	$
							AGGREGATE	$
								$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY; ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N: Y; If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WC0112725-11	07/01/2020	07/01/2021	PER STATUTE / OTH-ER	
							E.L. EACH ACCIDENT	$ 100,000
							E.L. DISEASE - EA EMPLOYEE	$ 100,000
							E.L. DISEASE - POLICY LIMIT	$ 500,000
C	Directors & Officers; Employment Practices			NDO2010584D	07/01/2018	07/01/2021	Directors & Officers	1,000,000
							Employment Practices	1,000,000

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

CERTIFICATE HOLDER

NH DHHS
129 Pleasant Street
Concord NH 03301

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Fairley Kenneally

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI

Mission Statement

Our mission, as peers, is to support one another as people who are challenged by the daily effects of living with, coping with, and recovering from mental health issues. Everyone will be encouraged to develop relationships that will enable and empower each other to learn, to grow, and to understand each other's world view. In addition, our aim is to develop greater awareness of personal and relational patterns and to support and challenge each other through peer support, self-advocacy, empowerment, and education. Our ultimate goal is to achieve recovery and ongoing wellness.

H.E.A.R.T.S. PEER SUPPORT CENTER OF GREATER NASHUA

FINANCIAL STATEMENTS

AND SUPPLEMENTAL INFORMATION

Years Ended June 30, 2019 and 2018

TABLE OF CONTENTS

ROWLEY & ASSOCIATES, P.C.

CERTIFIED PUBLIC ACCOUNTANTS

46 N. STATE STREET
CONCORD, NEW HAMPSHIRE 03301
TELEPHONE (603) 228-5400
FAX # (603) 226-3532

MEMBER
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

MEMBER OF THE PRIVATE
COMPANIES PRACTICE SECTION

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
H.E.A.R.T.S. Peer Support Center of Greater Nashua
Nashua, New Hampshire

We have audited the accompanying financial statements H.E.A.R.T.S. Peer Support Center of Greater Nashua (a New Hampshire nonprofit corporation), which comprise the statement of financial position as of June 30, 2019 and the related statements of activities and changes in net assets, cash flows and functional expenses for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. 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 involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of H.E.A.R.T.S. Peer Support Center of Greater Nashua as of June 30, 2019 and the changes in its net assets, its cash flows and functional expenses for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited H.E.A.R.T.S. Peer Support Center of Greater Nashua's 2018 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated October 30, 2018. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2018, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary information is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Rowley & Associates, PC

Rowley & Associates, P.C.
Concord, New Hampshire
January 24, 2020

H.E.A.R.T.S. PEER SUPPORT CENTER OF GREATER NASHUA
STATEMENT OF FINANCIAL POSITION
JUNE 30, 2019 AND 2018

ASSETS	2019	2018
CURRENT ASSETS		
Cash and cash equivalents		
Operating	$ -	$ 4,170
BMHS refundable	11,313	38,013
Total cash and cash equivalents	11,313	42,183
Accounts receivable	31,840	9,025
Total Current Assets	43,153	51,208
PROPERTY AND EQUIPMENT, at cost	28,549	28,549
Less accumulated depreciation	24,033	21,323
	4,516	7,226
OTHER ASSETS		
Security deposit	5,000	5,000
Total Assets	52,669	63,434
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Accounts payable	7,326	889
Accrued expenses	7,985	6,105
Refundable advance, BMHS	13,301	26,941
Refundable advance, Crisis Respite	-	11,072
Other liabilities	140	140
Total Current Liabilities	28,752	45,147
NET ASSETS		
Net Assets Without Donor Restriction	23,917	18,287
Net Assets With Donor Restriction	-	-
Total Net Assets	23,917	18,287
Total Liabilities and Net Assets	$ 52,669	$ 63,434

See Independent Auditors' Report and Notes to Financial Statements

H.E.A.R.T.S. PEER SUPPORT CENTER OF GREATER NASHUA
STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS
YEARS ENDED JUNE 30, 2019 and 2018

	2019	2018
REVENUES, GAINS AND OTHER SUPPORT		
Grant income	$ 389,198	$ 384,066
Donations	4,570	5,426
Program service revenue	6,423	-
Interest income	11	11
Total support and revenue	400,202	389,503
EXPENSES		
Program	334,788	340,940
Management & general	59,784	47,898
Total expenses	394,572	388,838
Increase in net assets	5,630	665
Net assets, beginning of year	18,287	17,622
Net assets, end of year	$ 23,917	$ 18,287

See Independent Auditors' Report and Notes to Financial Statements

H.E.A.R.T.S. PEER SUPPORT CENTER OF GREATER NASHUA
STATEMENTS OF CASH FLOWS
YEARS ENDED JUNE 30, 2019 AND 2018

	2019	2018
CASH FLOWS FROM OPERATING ACTIVITIES		
Increase in net assets	$ 5,630	$ 665
Adjustments to reconcile excess of revenue and support over expenses to net assets provided by operating activities		
Depreciation	2,710	2,710
(Increase) decrease in operating assets		
Accounts receivable	(22,815)	(3,050)
Increase (decrease) in operating liabilities		
Accounts payable and accrued expenses	6,437	(694)
Accrued expenses	1,880	(509)
Refundable advances	(24,712)	(11,188)
Net Cash Provided (Used) By Operating Activities	(30,870)	(12,066)
CASH USED BY INVESTING ACTIVITIES,		
Purchases of property and equipment	-	-
Net Decrease in Cash and Cash Equivalents	(30,870)	(12,066)
Cash and Cash Equivalents, Beginning of Year	42,183	54,249
Cash and Cash Equivalents, End of Year	$ 11,313	$ 42,183

See Independent Auditors' Report and Notes to Financial Statements

H.E.A.R.T.S. PEER SUPPORT CENTER OF GREATER NASHUA
STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED JUNE 30, 2019 WITH COMPARATIVE TOTALS FOR THE YEAR ENDED JUNE 30, 2018

	Program Services	Management & General	Total 2019	2018
Salaries and wages	$ 198,981	$ 29,733	$ 228,714	$ 207,329
Employee benefits	17,820	2,663	20,483	22,407
Payroll taxes	16,389	2,449	18,838	17,915
Rent	52,200	7,800	60,000	60,000
Accounting fees	-	13,310	13,310	13,006
Training	11,236	-	11,236	19,067
Insurance	10,847	705	11,552	11,961
Client travel and transportation	5,738		5,738	10,390
Telephone	4,689	145	4,834	4,882
Building and household supplies	4,994	-	4,994	4,141
Office supplies and equipment	-	2,413	2,413	4,227
Client food	2,432	-	2,432	3,281
Member support	2,799	-	2,799	1,531
Advertsing and promotion	1,005	-	1,005	772
Staff travel and transportation	2,948	-	2,948	3,566
Other expenses	-	37	37	490
Printing	-	296	296	933
Postage and shipping	-	233	233	230
Depreciation	2,710	-	2,710	2,710
	$ 334,788	$ 59,784	$ 394,572	$ 388,838

See Independent Auditors' Report and Notes to Financial Statements

NOTE 1 NATURE OF ORGANIZATION

H.E.A.R.T.S. Peer Support Center of Greater Nashua (the Organization) is a New Hampshire nonprofit organization corporation providing support to people who are challenged by the daily effects of living with, coping with and recovering from mental health issues. Program support is derived primarily from fee for service contracts through the State of New Hampshire.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES

The summary of significant accounting policies of the Organization is presented to assist in understanding the organization's financial statements. The financial statements and notes are representations of the Organization's management who is responsible for their integrity and objectivity. These accounting policies conform to generally accepted accounting principles and have been consistently applied in the preparation of the financial statements.

Basis of Accounting

The financial records for the Organization are maintained on the accrual basis of accounting. Consequently, revenues are recognized when earned and expenses are recognized when incurred.

Basis of Presentation

Basis of Presentation: The Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

The organization reports information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions.

> Net assets without donor restrictions - These net assets generally result from revenues generated by receiving contributions that have no donor restrictions, providing services, and receiving interest from operating investments, less expenses incurred in providing program-related services raising contributions, and performing administrative functions.
>
> Net assets with donor restrictions - These net assets result from gifts of cash and other assets that are received with donor stipulations that limit the use of the donated assets, either temporarily or permanently, until the donor restriction expires, that is until the stipulated time restriction ends or the purpose of the restriction is accomplished, the net assets are restricted.

H.E.A.R.T.S. PEER SUPPORT CENTER OF GREATER NASHUA
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Cash equivalents

For purposes of the statement of cash flows, the Organization considers cash on hand, deposits in banks and investments to be cash equivalents.

Support and revenue

H.E.A.R.T.S. Peer Support Center of Greater Nashua receives support primarily through grants from the Federal Government and the State of New Hampshire.

Property and Equipment

Property and equipment are recorded at cost of purchase or, if contributed, at fair market value at the date of donation. If donors stipulate how long the assets must be used, the contributions are recorded as restricted support. In the absence of such stipulation, contributions of property and equipment are recorded as unrestricted support. Depreciation is computed on the Modified Accelerated Cost Recovery System (MACRS) and on the straight-line basis over the useful lives of the assets as listed below. Depreciation expense was $2,710 and $2,710 for the years ended June 30, 2019 and 2018, respectively. Expenditures for repairs and maintenance are expensed when incurred.

Furniture & Fixtures	7 Years
Office Equipment	5-7 Years
Vehicles	5 Years

As of June 30, 2019 and 2018, property and equipment consisted of vehicles only.

Functional allocation of items

The costs of providing various program, management and rental services have been summarized in the statement of activities. Accordingly, certain costs have been allocated among the programs.

Cost Allocation

Certain categories of expenses are attributable to more than one program or supporting function and are allocated on a reasonable basis that is consistently applied. The expenses that are allocated are compensation and insurances, which are allocated on the basis of estimates of time and effort; occupancy costs, which are allocated on a square footage basis; and supplies and telephone costs, which are allocated based on usage studies.

H.E.A.R.T.S. PEER SUPPORT CENTER OF GREATER NASHUA
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Accounts Receivable

Accounts receivable are comprised of amounts due from customers for services provided. The Organization considers accounts receivable to be fully collectible; accordingly, no allowance for doubtful accounts has been established. If accounts become uncollectible, they will be charged to operations when that determination is made. Collections on accounts previously written off are included in revenue as received.

Advertising costs

The Organization expenses advertising costs as they are incurred. Advertising expense was \$1,005 and \$772 for the years ended June 30, 2019 and 2018, respectively.

Use of estimates

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

Income tax status

The Organization has been notified by the Internal Revenue Service that it is exempt from federal income tax under Section 501(c) (3) of the Internal Revenue Code. The Organization is further classified as an organization that is not a private foundation under Section 509(a)(3) of the Code. The most significant tax positions of the Organization are its assertion that it is exempt from income taxes and its determination of whether any amounts are subject to unrelated business tax (UBIT). The Organization follows guidance of Accounting Standards Codification (ASC) 740, Accounting for Income Taxes, related to uncertain income taxes, which prescribes a threshold of more likely than not for recognition of tax positions taken or expected to be taken in a tax return. All significant tax positions have been considered by management. It has been determined that it is more likely than not that all tax positions would be sustained upon examination by taxing authorities. Accordingly, no provision for income taxes has been recorded.

In-Kind Contributions

In-kind contributions are recorded at fair market value and recognized as revenue in the accounting period in which they are received. Volunteers, mainly board members, donate time to the Organization's program services. These services are not included in donated materials and services because the value has not been determined.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Donated Materials and Services

It is the intent of the Organization to record the value of donated goods and services when there is an objective basis available to measure their value. For the years ended June 30, 2019 and 2018, there were no donated goods or services.

Comparative Financial Information

The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended June 30, 2018, from which the summarized information was derived.

Financial Instruments

The carrying value of cash and cash equivalents, accounts receivable, accounts payable and accrued expenses are stated at carrying cost at June 30, 2019 and 2018, which approximates fair value due to the relatively short maturity of these instruments.

New Accounting Pronouncement

During the year ended June 30, 2019, the Organization adopted the requirements of the Financial Accounting Standards Board's Accounting Standards Update No. 2016- 14—Not-for-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities (ASU 2016- 14). This Update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return between not-for-profit entities. A key change required by ASU 2016-14 is the net asset classes used in these financial statements. Amounts previously reported as unrestricted net assets are now reported as net assets without donor restrictions and amounts previously reported as temporarily restricted net assets and permanently restricted net assets are now reported as net assets with donor restrictions.

The accompanying information from the 2018 financial statements has been restated to conform to the 2019 presentation and disclosure requirements of ASU 2016-14.

Reclassifications

Certain financial statement and note information from the prior year financial statements has been reclassified to conform with current year presentation format.

H.E.A.R.T.S. PEER SUPPORT CENTER OF GREATER NASHUA
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 3 SUBSEQUENT EVENTS

Management has evaluated subsequent events through January 24, 2020, the date on which the financial statements were available to be issued, to determine if any are of such significance to require disclosure. It has been determined that no subsequent events matching this criterion occurred during this period.

NOTE 4 CONCENTRATION OF CREDIT RISK

Economic Dependency
The Organization currently receives grant funds from the State of New Hampshire Bureau of Mental Health Services. These funds are the primary source of the Organization's support. If a significant reduction or delay in the level of support were to occur, it would have an adverse effect on the Organization's programs and activities. For the years ended June 30, 2019 and 2018, the State grants made up 99% and 99% of the Organization's total support.

Cash Balances
The Organization maintains cash balances in several accounts at local banks. These accounts are insured by the Federal Deposit Insurance Corporation up to $250,000. At various times throughout the year, the Organization may have cash balances at the financial institution that exceeds the insured amount. Management does not believe this concentration of cash results in a high level of risk for the Organization. At June 30, 2019 and 2018 the Organization had no uninsured cash balances.

NOTE 5 LEASES

The Organization leases office space under the terms of a non-cancellable lease agreement. The Organization was a tenant at will from July 1, 2019 to December 31, 2019. The Organization entered a new lease agreement beginning January 1, 2020 and expiring in one year on December 31, 2020. Rent expense related to this agreement was $60,000 for the years ended June 30, 2019 and 2018, respectively. Future minimum rent expense for the years ended June 30 are:

2020:	$ 30,000
2021:	30,000
	$ 60,000

NOTE 6 COMPENSATED ABSENCES

The Organization has accrued a liability for future compensated vacation leave time that its employees have earned and which is vested with the employees. Accrued vacation time as of June 30, 2019 and 2018 was $3,373 and $1,644 respectively.

H.E.A.R.T.S. PEER SUPPORT CENTER OF GREATER NASHUA
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 7 REFUNDABLE ADVANCES

Under the terms of the service agreement with the Bureau of Mental Health (BMHS), a division of the State of New Hampshire's Department of Health and Human Services, the Organization is required to segregate amounts received in excess of allowable expenses. Funds set aside in accordance with this requirement amounted to $13,301 and $26,941 for the years ended June 30, 2019 and 2018, respectively.

The Organization is also required to segregate amounts received in excess of allowable expenses specifically for crisis respite. Funds set aside in accordance with this requirement amounted to $0 and $11,072 for the years ended June 30, 2019 and 2018, respectively.

NOTE 8 FAIR VALUE MEASUREMENTS

In accordance with FASB ASC 820, *Fair Value Measurements and Disclosures*, the Organization is required to disclose certain information about its financial assets and liabilities. Fair values of assets measured on a recurring basis at June 30 were as follows:

	Fair Value	Quoted Prices in Active Markets For Identical Assets (Level 1)	Significant other Observable inputs (Level 2)
2019			
Accounts Receivable	$ 31,840	$ -	$ 31,840
2018			
Accounts Receivable	$ 9,025	$ -	$ 9,025

The fair value of accounts receivable are estimated at the present value of expected future cash flows.

NOTE 9 RETIREMENT PLAN

The Organization implemented an employee IRA plan for full time employees. The State of New Hampshire approves the allocation of retirement funds and reimburses the Organization for the expenses. Eligible employees do not make salary reduction contributions. The Organization made $2,110 and $2,110 in retirement contributions for the years ended June 30, 2019 and 2018, respectfully.

NOTE 10 BOARD DESIGNATED NET ASSETS

The Organization has no board designated net assets as of June 30, 2019.

H.E.A.R.T.S. PEER SUPPORT CENTER OF GREATER NASHUA
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 11 LIQUIDITY & AVAILABILITY OF FINANCIAL ASSETS

The Organization has a policy to structure its financial assets to be available as its general expenditures, liabilities and other obligations come due. The Organization's primary source of support is grants. That support is held for the purpose of supporting the Organization's budget. The Organization had the following financial assets that could be readily made available within one year to fund expenses without limitations:

	2019	2018
Cash and cash equivalents	$ 11,313	$ 42,183
Accounts receivable	31,840	9,025
	43,153	51,208
Less amounts:		
Funds required to be maintained under State agreement		
BMHS:	13,301	26,941
Crisis Respite:	-	11,072
	13,301	38,013
	$ 29,852	$ 13,195

H.E.A.R.T.S. PEER SUPPORT CENTER OF GREATER NASHUA
STATEMENT OF ACTIVITIES
BY STATE APPROVED BMHS FUNDS
YEAR ENDED JUNE 30, 2019

	State Approved BMHS Funds	Non-BMHS Funds	Total
REVENUES, GAINS AND OTHER SUPPORT			
Grant income, current year	$ 364,486	$ -	$ 364,486
Grant income, prior year release	24,712	-	24,712
Donations	-	4,570	4,570
Program service revenue	-	6,423	6,423
Interest income	11	-	11
Total support and revenue	389,209	10,993	400,202
EXPENSES			
Salaries and wages	228,714	-	228,714
Employee benefits	20,483	-	20,483
Payroll taxes	18,838	-	18,838
Rent	60,000	-	60,000
Accounting fees	13,310	-	13,310
Training	11,236	-	11,236
Insurance	11,552	-	11,552
Client travel and transportation	5,738	-	5,738
Telephone	4,834	-	4,834
Building and household supplies	4,994	-	4,994
Office supplies and equipment	2,413	-	2,413
Client food	2,432	-	2,432
Member support	146	2,653	2,799
Advertsing and promotion	1,005	-	1,005
Staff travel and transportation	2,948	-	2,948
Other expenses	37	-	37
Printing	296	-	296
Postage and shipping	233	-	233
Depreciation	-	2,710	2,710
Total expenses	389,209	5,363	394,572
Net Increase in Net Assets	-	5,630	5,630
Net assets, beginning of year	-	18,287	18,287
Net assets assets, end of year	$ -	$ 23,917	$ 23,917

H.E.A.R.T.S.
Board of Directors
February 28, 2020

President: Tim Lopez
[redacted]
Joined 7/16/2016
Term #2, Term Length: 2 years
Term Expiration: 6/30/2021

Vice President: Vacant

Treasurer: Claire Peddle
[redacted]
Joined 5/17/2012
Term #4, Term Length: 2 years
Term Expiration: 6/30/2021

Secretary: Stacie Laughton
[redacted]
Joined 11/20/2014
Term #1, Term Length: 1 year
Term Expiration: 6/30/2020

Board Members: Pat Worsley

[redacted]

Joined 9/15/2011
Term #5, Term Length: 1 years
Term Expiration: 6/30/2020

Scott Wellman

[redacted]

Joined 6/19/2014
Term #4, Term Length: 1 years
Term Expiration: 6/30/2020

Ed Bowman

[redacted]

Joined 05/31/2018
Term #2, Term Length: 1 years
Term Expiration: 6/30/2020

Martha Perricone

[redacted]

Joined 08/22/2018
Term #2 Term Length: 1 years
Term Expiration: 6/30/2020

Nicole Rochon
[redacted]
Joined 9/28/2018
Term #2, Term Length: 1 years
Term Expiration: 6/30/2020

Nick Perricone
[redacted]
Joined 02/27/2020
Term #1 Term Length: 1 years
Term Expiration: 6/30/2020

Kenneth Lewis

PROFESSIONAL PROFILE

Executive Director with 5+ years experience gaining an understanding of the full workings of this Trauma Informed, Intentional Peer Support agency. Successfully and compassionately performed all duties by incorporating personal experiential knowledge with formal peer-support training. Current duties include:

- Skilled preparation of presentations, preparing agency reports and maintaining the utmost confidentiality
- Adept at coordination and communication
- Possess comprehensive knowledge of Microsoft Word, Excel, and Outlook
- Meets all DBH filing and reporting procedures

PROFESSIONAL EXPERIENCE

H.E.A.R.T.S. Peer Support Center of the Greater Nashua Region VI
Executive Director, 2009 – present

- Read and analyze memos, submissions and reports to determine their significance and plan their distribution
- Conduct research, compile data, and prepare contractual reports & other materials as requested for the BBH and Board of directors.
- Coordinate and direct agency services, greater community awareness of this peer support adult wellness center and the offerings, facilitate accurate record keeping, manage State & private funding, financial oversight, budget preparation, personal issues, staff development and training, always creating opportunities for membership to exercise their "ownership" of HEARTS and this peer community including member's personal development, relationship skills, leadership skills and wellness training/education .
- Possess ability to wear the hat of Executive Director as well as the hat of Member, simultaneously.

Connections at Harbor Homes, Nashua, New Hampshire
Program Manager, 2007 – 2009

- Responsible for the day-to-day supervision and operation of the peer support and information resource program for Harbor Homes, a community mental health center.
- Possess knowledge of available services and proved proficient in referring mentally challenged individuals to the proper agencies and resources.
- Duties included but not limited to; daily supervising staff, volunteers, and members utilizing this peer environment, assuring facility's operational safety.
- Track data necessary for grant outcomes, supported the creation and organization new program emphasizing peer support, organizing and facilitating wellness groups using Intentional Peer Support and WRAP training methods.
- Responsible for evolving the peer support program to becoming it's own independent 501c3, Peer Support Center along with an Interim Board of Directors and reporting all facets to the Bureau of Behavioral Health.

Connections at Harbor Homes, Nashua, New Hampshire
Program Coordinator, 2005 – 2007

- Assisted the Program Manager in the day-to-day supervision and operation of the Peer Support/Information Resource Program for Harbor Homes, gaining full knowledge of this agency's operations and services.

EDUCATION

New Hampshire Technical College, Nashua, NH.

Certification

- 2005 – 2007 Deaf Culture I, II
- 2005 - 2007 American Sign Language I, II, III VI

Kenneth Lewis

EDUCATION

State of New Hampshire, Bureau of Behavioral Health, Peer Support Contract Training

2007 – Present Peer Support Trainings:

- Certified in Intentional Peer Support and Intentional Peer Support Co-Supervision
- Certified in WRAP
- Substance Abuse State of New Hampshire Training
- Planting the Seeds for Health and Wholeness Training
- Smoking Cessation Program
- Certified in SOAR Program
- Certified in First-Aid and CPR
- Continued education in American Sign Language
- Safe Food Handling Class from New Hampshire Food Bank, Manchester, NH.
- Administrator Training
- Members Rights and Responsibilities Workshop
- Sexual Harassment Education

ADDITIONAL SKILLS

2003-2005	Machine Operator/NC Operator at Sanmina-Science Corp. in Wilmington, MA
2002-2003	Assistance Manager at Spring Glow Services in Oroville, CA
1998-2002	Craftsman-Pipe Fitter/Boilermaker at NEPCO Corp. in Sacramento, CA
1989-1998	Engineering Technician at HADCO Corp. in Hudson, NH
1986-1989	Incoming Inspection QA/QC at Digital Corp. in Nashua, NH
1984-1986	Electronic Technician at Wang Corp. in Haverhill, MA
1983-1984	Electronic Technician at Lockheed/Sanders in Nashua, NH

H.E.A.R.T.S.

Peer Support & Crisis Respite Center of Greater Nashua Area Region VI

Reports To:

Board of Directors

Supervised By:

President and Members of the Board

Goals:

As the Executive Director I shall provide oversite of all day to day operational functions of H.E.A.R.T.S. PSA. The Executive Director shall encourage the development of an environment that will foster Peer Support, Peer Support Activities, and Respect of the Dignity and safety of all Members, Staff and visitors.

Responsibilities:

1. Provide oversight of all functions of H.E.A.R.T.S. PSA using appropriate delegation skills to accomplish this responsibility.
2. Implement Board Policies.
3. Attend Board Meetings and act as a resource to the Board in its deliberations.
4. Provide a monthly report to the Board of Directors on issues and Peer Support Activities.
5. To keep the Board of Directors informed of any substantial issues of concern.
6. Provide supervision of staff as designated.
7. Provide oversight of the fiscal affairs of H.E.A.R.T.S. PSA.
8. To judiciously monitor revenues and expenses with of the Financial Manager.
9. To develop with the assistance of the Financial Manager the Operational Budget of H.E.A.R.T.S. PSA.
10. To develop alternate sources of revenue.
11. To insure the policies and procedures stipulated in the Fiscal Manual are implemented and maintained.
12. To provide leadership in the development of Programs that supports the principles and concepts of Peer Support.
13. To practice, Educate and Promote Wellness and Recovery and Alternate Treatments.
14. To stay current with Developments in Peer Support Curriculum and Research.
15. To promote Community Relations, Public and Media Relations.
16. To Attend Directors Meetings with other PSA Directors.
17. To Attend, Participate and Represent H.E.A.R.T.S. PSA at meetings, presentations, trainings, and conferences focused on aspects of Peer Support.

Responsibilities:

18. To develop collaborations with other Mental Wellness Groups, attend collaborative meetings and other related events.

19. To develop in collaboration with the President of the Board quarterly Performance Goals.

20. To perform other responsibilities assigned by the Board not specifically described in this job description.

Qualifications:

The Executive Director shall:

1. Possess a minimum of Bachelor's Degree from an accredited Institution of Higher Learning, or experience equivalence to four of employment to related field.

2. Demonstrated skills and/or experience in Operational Management, Administration and Supervision, preferably in the Not-for-Profit sector.

3. Demonstrated skill and/or experience in Personnel Management.

4. Demonstrated skills and/or experience in Fiscal Management.

5. Demonstrated skills and/or experience in Program Development.

6. A knowledge, understanding, experience and sensitivity to the issues facing individuals with mental wellness issues.

7. Training or a commitment to be trained in Intentional Peer Support As well as W.R.A.P.

8. Demonstrate computer skills sets especially, Word, Excel, Power Point and Publisher programs.

9. Demonstrated skills and/or experience in making Public Presentations.

Position Classification:

Salaried, full time exempt regular employee, See Personnel Policy II 2.1

Performance Evaluation:

The Executive Director shall be evaluated at the discretion of the Board a minimum of one time annually.

Recipients of the Greater Nashua Mental Health Center Leadership Award 2012

H.E.A.R.T.S. Peer Support Center of Greater Nashua Area Region VI
(Hope, Empowerment, Advocacy, Recovery, Towards, Support)
An Adult Educational Wellness Center

Crisis Respite

Job Description
Peer Support Respite Staff

Name: Ken Lewis
Position: Director
Salary: To split time with PSC's Salary
Hours: Hours may vary-week to week
Supervisor: BOD's

Requirements:

- Personal experience with mental health issues & managing your own wellness
- Model Intentional Peer Support
- Ability to demonstrate empathy for peers
- Basic reading & writing skills
- Ability to learn new skills
- Facilitating skills
- Certified in WRAP
- Be able to work with guest(s) on a WRAP Daily Maintenance Plan
- Certified in IPS
- Certified in IPS Peer Support Crisis Respite Care
- To participate in all Staff Trainings
- Be able to have peer support based discussions with one or two guests
- Facilitate positive discussions with guests
- Encourage and support guests to participate in center activities
- Be able to complete guest paper work upon arrival that is legible
- Be completely familiar with all Respite forms
- Be able to take legible notes to share at shift change
- Ability to supervise and support staff and help coordinate shift schedules
- Provide and insure other staff shift communication and co-supervisions
- Oversee all daily functions of program and oversee all staff.

The above tasks are a sample of the responsibilities that need to be fulfilled but are not limited to the above tasks. The BOD's may require additional tasks as problems or different circumstances present themselves.

Staff Signature____________________________________

Executive Director ____________________________________

BOD's President____________________________________

Tom Doucette

Objectives

Would like to work with my peers to learn and grow in a safe non-judgmental environment.
To be able to share lived experience.

Experience

Date of Employment : July 7, 2010
H.E.A.R.T.S. Peer Support Center and Crisis Respite Center Nashua, NH 03060

Job Title

Assistant Executive Director

Experience

Connections 2005-2009
Harbor Homes
Nashua, NH 03060

Job Title

Assistant Program Manager

- Provided peer support to members and resources (shelter, food, state and local services) available to the members. Sign-up new members and Input stats.

Experience

1996-2000 Date
AAA Plating, Inc.
East Providence, RI

Job Title

President/Owner

- Complete operation of the Corporation.

Experience

1992-1996
AA Plating and Equipment, Inc.
Providence, RI

Job Title

President/Owner
Complete operation of the Corporation.

Professional Experience

Served committee that worked on the ten year plan, Team I with Representative Jim MacKay
Served on numerus State committees on mental health

Academic Experience

IPS 101
IPS CORE Training
IPS Co-Reflection
IPS Crisis Respite Training
IPS Crisis Respite Refresher
Facilitator of WRAP
WRAP Refresher
Advanced Level Facilitator of WRAP
State Trainer of WRAP

State Trainings

WRAP Overview
WRAP Facilitator Training's
WRAP Facilitator Refresher's

H.E.A.R.T.S.

Peer Support & Crisis Respite Center of Greater Nashua Area Region VI

Reports To:

Executive Director

Supervised By:

Executive Director

Goals:

To encourage members of H.E.A.R.T.S. PSA to actively participate in Peer Support Activities. To provide supervision and mentoring of all Peer Support Programs Assisting Staff using positive modeling techniques in the implementation of Principles of Exemplary Peer Support. The Assistant Director will assist the Executive Director in establishing and development of an environment conducive to Peer Support.

Responsibilities:

1. To present Power Point presentations to organizations as recommended by the Community Relations Committee to the Director when Executive Director is unavailable.
2. To insure input of statistical data and submit to Executive Director before the 10th working day of the following month. Quarterly statistical data to be submitted to Executive Director before on or before the 5th working day of the first month of next quarter.
3. To act as member/staff point person in the intake and interview process of the new members insuring the completeness of the intake process.
4. To facilitate Peer Groups serving as a model for Members/Staff to emulate the Principles of Excellence in Intentional Peer Support.
5. To provide direct supervision of Members and Member/Staff to insure contract compliance and performance excellence.
6. To resolve issues of conflict, complaint or incident between Member/Staff and Member/Staff, Member and Member, Member/Staff and Member once an effort has been made by each party at a direct level using the principles of peer support.
7. To actively solicit participation , seek program feedback from members and to conduct needs assessments to further develop programs. To present recommendations to the Executive Director based on the data obtained from these sources.
8. To provide the Executive Director with copies of any and all action taken related to issues of conflict, complaint or incident.
9. To complete periodic Performance Reviews of Member/Staff.
10. To meet with, confer and discuss Performance Reviews with individual Member/Staff and the Executive Director.
11. To provide the Executive Director with appropriately signed Performance Reviews, Letters of Commendation, and Recommendation or Disciplinary action.

12. To make recommendations to the Executive Director regarding employment retention, advancement or termination.

13. To provide information and make recommendations for program development to Executive Director so (s) he can make informed decisions.

14. To assist in the documentation of all pertinent program information necessary for the completion of Bureau of Behavioral Health reports.

Responsibilities:

15. To oversee the Members with the monthly Newsletter for the general membership and distribution of the Newsletter to all those who are listed to inform and promote agency.

16. To review the supply list to be presented to the Executive Director for approval.

17. To inform the Executive Director of any developments that may have an impact on the Mission of H.E.A.R.T.S. PSA.

18. To keep current with Peer Support skills and attend trainings as asked by the Executive Director and to comply with Federal and State Laws, requirements, and contractual agreements.

19. To complete any other job related functions as ask by the Executive Director not specifically described in this Job Description.

Qualifications:

The Executive Director shall have demonstrated expertise in Intentional Peer Support. The Assistant Executive Director shall be certified in Intentional Peer Support, W.R.A.P. or working on said certification.

Position Classification:

This position, with the approval of BBH, shall be a salaried, exempt full time regular employee. For details regarding a full time regular employee please refer to the Personnel Policy Article II 2.1

Performance Evaluation:

The Assistant Executive Director shall have annual Performance Evaluations. The Executive Director shall perform the evaluations.

Recipients of the Greater Nashua Mental Health Center Leadership Award 2012

H.E.A.R.T.S. Peer Support Center of Greater Nashua Area Region VI
(Hope, Empowerment, Advocacy, Recovery, Towards, Support)
An Adult Educational Wellness Center

Crisis Respite

Job Description
Peer Support Respite Staff

Name: Tom Doucette
Position: Assistant Director
Salary: To split time with PSC's Salary
Hours: Hours may vary-week to week
Supervisor: Executive Director

Requirements:

- Personal experience with mental health issues & managing your own wellness
- Model Intentional Peer Support
- Ability to demonstrate empathy for peers
- Basic reading & writing skills
- Ability to learn new skills
- Facilitating skills
- Certified in WRAP
- Be able to work with guest(s) on a WRAP Daily Maintenance Plan
- Certified in IPS
- Certified in IPS Peer Support Crisis Respite Care
- To participate in all Staff Trainings
- Be able to have peer support based discussions with one or two guests
- Facilitate positive discussions with guests
- Encourage and support guests to participate in center activities
- Be able to complete guest paper work upon arrival that is legible
- Be completely familiar with all Respite forms
- Be able to take legible notes to share at shift change
- Ability to supervise and support staff and help coordinate shift schedules
- Provide and insure other staff shift communication and co-supervisions
- Oversee all daily functions of program and oversee all staff.

The above tasks are a sample of the responsibilities that need to be fulfilled but are not limited to the above tasks. The Executive Director may require additional tasks as problems or different circumstances present themselves.

Staff Signature________________________________

Executive Director ______________________________

BOD's President_______________________________

Cheryl Thibodeau

March 1, 2019

Skills

- Time Management
- Manager-Customer Service
- Accounting
- Case Management-Out Reach
- Designer-Special Projects
- Professional Writing
- Communication Skills

Education

- Associate Degree Human Services
- Continuing on Bachelor Degree
- IPS Crisis Respite Training Refresher
- Co-Reflection
- Wrap Groups

Training

- Peer Support Specialist
- Respite Staff
- Co-Facilitator of WRAP
- Co-Facilitator of IPS
- WHAM Course
- Recovery Coach

Life Experience

Single parent raised 4 boys with mental health issues involving Bi-polar, ADHD, High Function Autism, OCD, and a Severe Brain Injury. Involved with Nashua Community Council for over 20 years and recognizing behavioral patterns and applying coping skills as a parent. Recently graduate with a 4 year Associate Degree in Human Services at Nashua Community College and will continue an education for Bachelor, Master, and PHD in Behavioral Mental Health.

Employment

H.E.A.R.T.S Center:	Member/Staff Peer Support Specialist
Crisis Respite Center:	Member/Staff Peer Support Specialist
Wal-Mart:	Cashier, Customer Service Manager, Accounting
Afternoon Delight:	Prep Food-Delivery
Michael's Arts:	Floral Designer
Mountain Ridgeview:	Distributed Pet Toys, Designed, Inventory, Shipping
Cleaning Business:	Owned a cleaning business for homes and restaurants
Child Care:	Home Day Care

CONTRACTOR NAME

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Ken Lewis	Executive Director	$ 52,016.00	100%	$ 52,016.00
Tom Doucette	Assistant Director	$ 31,886.00	100%	$ 31,886.00
Cheryl Thibodeau	Peer Housing Program Manager	$ 27,040.00	100%	$ 27,040.00

State of New Hampshire
Department of Health and Human Services
Amendment #4 to the Peer Support Services Contract

This 4th Amendment to the Peer Support Services contract (hereinafter referred to as "Amendment #4") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Lakes Region Consumer Advisory Board, (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 328 Union Avenue, Laconia, NH 03247.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 29, 2016, (Item #23), as amended on June 20, 2018, (Item #33B), June 19, 2019, (Item #28), and on June 24, 2020, (Item #27), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, and Exhibit C-1, Revisions to General Provisions, Paragraph 3, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to increase the price limitation and modify the scope of services to support continued delivery of these services; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Delete Exhibit A - Amendment #2, Scope of Services, in its entirety and replace with Exhibit A – Amendment #4, Scope of Services, which is attached hereto and incorporated by reference herein.
2. Delete Exhibit B, Amendment #2, Methods and Conditions Precedent to Payment in its entirety and replace with Exhibit B – Amendment #4, Methods and Conditions Precedent to Payment, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #4 remain in full force and effect. This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

DocuSigned by:
Katja Fox
ED9D05B04C63442

10/29/2020
Date

Name: Katja Fox
Title: Director

Lakes Region Consumer Advisory Board

DocuSigned by:
Patricia Mahon
041A67F6600248...

10/29/2020
Date

Name: Patricia Mahon
Title: President of Lakes Region Consumer Advisory Board

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

10/30/2020

Date

DocuSigned by:

D5CA0302E72C4AE...

Name: Catherine Pinos

Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _______________ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:

Title:

Exhibit A - Amendment #4

Scope of Services

1. **Provisions Applicable to All Services**

   1.1. The Contractor shall submit a detailed description of the language assistance services they shall provide to persons with limited English proficiency to ensure meaningful access to their programs and services within ten (10) days of the contract effective date.

   1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire (NH) General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

   1.3. The Contractor shall provide peer support services in accordance with NH Administrative Rule He-M 400, Community Mental Health, Part 02, Peer Support, referred to as He-M 402, that:

      1.3.1. Increase quality of life for individuals living with mental illness in NH.

      1.3.2. Increase hope for and belief in the possibility of recovery for individuals living with mental illness in NH.

      1.3.3. Increase choice regarding the services and supports available to individuals living with mental illness in NH.

      1.3.4. Provide alternatives to and reduce the use of more restrictive and expensive services such as hospitalization.

      1.3.5. Increase social connectedness for individuals living with mental illness in NH.

      1.3.6. Increase satisfaction with peer support services.

   1.4. The Contractor shall provide mental health peer support services to individuals who are eighteen (18) years of age or older who:

      1.4.1. Self-identify as a recipient, as a former recipient, or at a significant risk of becoming a recipient of mental health services, and may include individuals who are homeless.

   1.5. For the purposes of this contract, any reference to days shall mean consecutive calendar days, unless otherwise denoted as business days.

   1.6. The Contractor agrees that if the performance of services involves the collection, transmission, storage, or disposition of Part 2 substance use disorder (SUD) information or records created by a Part 2 provider the information or records shall be subject to all safeguards of 42 CFR Part 2.

2. **Definitions**

   2.1. **Board of Directors** means the governing body of a nongovernmental peer support agency.

   2.2. **Business Days** are defined as Monday through Friday, excluding Saturday and Sunday.

   2.3. **Consumers** are any individual, eighteen (18) years of age or older, who self-identifies as a recipient, as a former recipient, or as a significant risk of becoming a recipient of publically funded mental health services.

2.4. **Guests** are any individuals who are invited to visit the peer support agency by a member, participant, or the peer support agency.

2.5. **Homeless** is (1) an individual or family who lacks a fixed, regular, and adequate nighttime residence; or (2) an individual or family who has a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels and congregate shelters), an institution other than a penal facility that provides temporary residence for individuals intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

2.6. **Members** are any consumers, who have made an informed decision to join, and agree to, abide by, and support the goals and objectives of peer support services.

2.7. **Mental illness** is defined in RSA 135-C:2 X, namely, "a substantial impairment of emotional processes, or of the ability to exercise conscious control of one's actions, or of the ability to perceive reality or to reason, when the impairment is manifested by instances of extremely abnormal behavior or extremely faulty perceptions. It does not include impairment primarily caused by: (a) epilepsy; (b) intellectual disability; (c) continuous or noncontinuous periods of intoxication caused by substances such as alcohol or drugs; or (d) dependence upon or addiction to any substance such as alcohol or drugs."

2.8. **Participant** means a consumer, who is not member, who participates in any aspect of peer support services.

2.9. **Peer Support Agency (PSA)** means an organization whose primary purpose is to provide culturally appropriate peer support, peer education, and peer programming to persons eighteen (18) year of age and older who self- identify as having a mental illness.

2.10. **Quarter or Quarterly** is defined as the periods of July 1 through September 30, October 1 through December 31, January 1 through March 31, and April 1 through June 30.

2.11. **Recovery** means for an individual with a mental illness, development of personal and social skills, beliefs and characters that support choice, increase quality of life, minimize or eliminate impairment, and decrease dependence on professional services.

2.12. **Region** is the geographic area of cities and towns in New Hampshire, as defined by the Department.

2.13. **Serious Mental Illness (SMI)** refers to individuals whom the state defines as having either Serious Mental Illness (SMI) or Serious and Persistent Mental Illness (SPMI) pursuant to N.H. Revised Statutes Annotated (RSA) 135-C:2, XV.

2.14. **Week** is defined as Monday through Sunday.

3. Scope of Services

3.1. Peer Support Services

3.1.1. The Contractor shall provide in-house and community based services for New Hampshire residents.

3.1.2. The Contractor shall provide peer support services that are provided for consumers and by consumers including, but not limited to:

3.1.2.1. Peer support services that include supportive interactions, shared experiences, acceptance, trust, respect, lived experience, and mutual support among members, participants, staff and volunteers.

3.1.2.2. Maintenance of a safe physical location that:

3.1.2.2.1. Is open a minimum of forty-four (44) hours per week, eight (8) hours per day, five (5) days per week and four (4) hours on one (1) additional day per week at each location; and

3.1.2.2.2. Provides face-to-face or telephone peer support services to PSA members or others who contact the PSA at a minimum of forty (40) hours per week at each location.

3.1.2.3. Peer support services based on the Intentional Peer Support model that:

3.1.2.3.1. Foster recovery from mental illness by helping individuals identify and achieve personal goals while building an evolving vision of their recovery.

3.1.2.3.2. Foster self-advocacy skills, autonomy, and independence.

3.1.2.3.3. Emphasize mutuality and reciprocity as demonstrated by shared decision-making; strong conflict resolution; non-medical approaches; and non-static roles, including but not limited to, staff who are members and members who are educators.

3.1.2.3.4. Offer alternative views on mental health, mental illness and the effects of trauma and abuse.

3.1.2.3.5. Encourage informed decision-making about all aspects of people's lives.

3.1.2.3.6. Support people with mental illness in challenging perceived self-limitations, while encouraging the development of beliefs that enhance personal and relational growth.

3.1.2.3.7. Emphasize a holistic approach to health that includes a vision of the whole person.

3.1.2.4. Providing opportunities to learn wellness strategies by using, at a minimum, Wellness Recovery Action Planning (WRAP) and Whole Health Action Management (WHAM), to strengthen individual abilities to attain and maintain their health and recovery from mental illness.

3.1.2.5. Provide in-house and community-based services according to the

Deliverables in Subsection 12.1. through Subsection 12.2.

3.1.2.6. Provide outreach by face-to-face or by telephone contact with consumers by providing support to individuals who are unable to attend agency activities, visiting people who are hospitalized with a psychiatric condition, and reaching out to people who meet membership criteria and are homeless.

3.1.2.7. Provide monthly newsletters published by the peer support agency (PSA) that describes agency services and activities; other community services; social and recreational opportunities; member articles and contributions and other relevant topics that might be of interest to members and participants.

3.1.2.8. Distribute the newsletters to the members and other interested parties, which may include but are not limited to community mental health centers and other appropriate community organizations, at least five (5) business days prior to the upcoming month.

3.1.2.9. Provide monthly education events and presentations topics germane to issues and concerns of consumers of mental health services which must include, but are not limited to:

3.1.2.9.1. Rights Protection.

3.1.2.9.2. Peer Advocacy.

3.1.2.9.3. Recovery.

3.1.2.9.4. Employment.

3.1.2.9.5. Wellness Management.

3.1.2.9.6. Community Resources.

3.1.2.10. Provide an electronic copy of the monthly newsletters and education events in Subparagraph 3.1.2.7. and Paragraph 11.6.3., to the Office of Consumer and Family Affairs within the Department's Bureau of Behavioral Health, and the Mental Health Block Grant State Planner and Mental Health Block Grant Advisory Council no later than five (5) days prior to the beginning of the following month.

3.1.2.11. Provide individual peer assistance by assisting adults to:

3.1.2.11.1. Locate, obtain, and maintain mental health services and supports through referral, consumer education, and self-empowerment;

3.1.2.11.2. Support individuals who are identifying problems by assisting them in addressing the issue and/or in resolving grievances; and

3.1.2.11.3. Promote self-advocacy.

3.1.2.12. Provide employment education by providing members with:

3.1.2.12.1. Information relative to obtaining and maintaining competitive employment.

3.1.2.12.2. Referrals to community mental health center employment programs.

3.1.2.12.3. Employment-related activities, which may include, but are not limited to:

3.1.2.12.3.1. Resume writing.

3.1.2.12.3.2. Interviewing techniques.

3.1.2.12.3.3. Assistance with completing employment applications.

3.1.2.13. Inform members and the general public about peer support and wellness services available by providing Community Education Presentations about mental illness and the peer support community on a monthly basis to potential referral sources, funders, or families of individuals affected by mental illness.

3.1.2.14. Inform local human service providers and the general public about the stigma of mental illness, wellness and recovery and collaborate with other local human service providers that serve consumers in order to facilitate referrals and share information about services and other local resources.

3.1.2.15. Provide training and technical assistance to assist consumers to advocate for themselves and on their own behalf regarding healthcare such as, but not limited to:

3.1.2.15.1. Preparation techniques for doctors' appointments.

3.1.2.15.2. How to take notes.

3.1.2.15.3. How to use the physician's desk reference book for medications and a review of patient rights.

3.1.2.16. Invite guests to participate in peer support activities.

3.1.2.17. Provide residential support services, as needed, by providing support and assistance such as help with staying in their home or apartment, or finding a place to live.

3.1.2.18. Maintain at least a monthly schedule of peer support and wellness services and activities, which includes, but is not limited to:

3.1.2.18.1. Staff development and training.

3.1.2.18.2. Events that include community-based services.

3.1.2.18.3. Community outreach events.

3.2. The Contractor shall provide transportation services to members, participants and guests, as needed. The Contractor shall:

3.2.1. Transport members, participants, guests, in a Contractor owned or leased vehicle, to and from their homes and/or the Contractor's PSA to participate in activities that may include, but not limited to:

3.2.1.1. Peer support services.

3.2.1.2. Wellness and recovery activities.

3.2.1.3. Annual conferences.

3.2.1.4. Regional meetings.

3.2.1.5. Council meetings.

3.2.2. Ensure all vehicles and drivers used for transportation comply with Federal and State Department of Transportation and Department of Safety regulations, which include, but are not limited to:

3.2.2.1. Vehicles must be registered pursuant to NH Administrative Rule Saf-C 500, Vehicle Registration Rules.

3.2.2.2. Vehicles must be inspected in accordance with NH Administrative Rule Saf-C 3200, Official Motor Vehicle Inspection Requirements.

3.2.2.3. Drivers must be licensed in accordance with NH Administrative Rule Saf-C 1000, Driver Licensing.

3.2.3. Require all employees, members, or volunteers who drive Contractor-owned vehicles sign a State of New Hampshire Release of Individual Motor Vehicle Driver Records form in order to access individual driver records that indicate drivers have safe driving records.

3.2.4. Require all employees, members, or volunteers who drive Contractor-owned vehicles complete a National Safety Council Defensive Driving course offered through a State of New Hampshire-approved agency.

3.3. The Contractor shall acknowledge funding from the Department to support transportation costs:

3.3.1. Is not used for activities other than peer support related activities defined in this Agreement.

3.3.2. May be used on an 'as needed' basis to pay for bus rides that are necessary to transport individuals to peer support services provided by the Contractor.

3.4. <u>Warmline Services</u>

3.4.1. The Contractor shall provide warmline services that offer on-call telephone peer support services to members, participants, and others. The Contractor shall ensure warmline services:

3.4.1.1. Are provided to any individual with the ability to receive calls and make calls statewide and who lives or works in the State of New Hampshire.

3.4.1.2. Are provided during the hours the PSA is closed.

3.4.1.3. Assist individuals with addressing a current crisis related to their mental health.

3.4.1.4. Include referrals to appropriate treatment and other resources available in the consumer's service area.

3.4.1.5. Are provided by staff who are trained in providing warmline services.

3.4.1.6. May include outreach calls described in Subparagraph 3.1.2.6.

4. Geographic Area and Physical Location of Services

4.1. The Contractor shall provide peer support services separately from the confines of a local community mental health center, unless otherwise pre-approved by the Department.

4.2. The Contractor shall provide peer support services at a physical location and/or building that is in compliance with Exhibit C, Section 15. and with the Life Safety requirements, which include, but are not limited to, ensuring the building:

4.2.1. Is in compliance with local health, building and fire safety codes.

4.2.2. Is maintained in good repair and free of hazards, and includes, but is not limited to:

4.2.2.1. A minimum of one (1) indoor bathroom that includes a sink and toilet.

4.2.2.2. A minimum of one (1) telephone for incoming and outgoing calls.

4.2.2.3. A functioning septic or other sewage disposal system.

4.2.2.4. A source of potable water for drinking and food preparation as follows:

4.2.2.4.1. If drinking water is supplied by a non-public water system, the Contractor shall ensure the water is tested and found to be in accordance with NH Administrative Rules Env-Ws 300, Drinking Water Rules, Part 15, Maximum Contaminant Levels and Maximum Contaminant Level Goal for Regulated Organics and Part 316, Regulated Secondary Maximum Contaminant Levels initially and every five (5) years thereafter.

4.2.2.4.2. If the water is not approved for drinking, the Contractor shall implement an alternative method for providing safe drinking water.

5. Enrolling Consumers for Services and/or as Members with a Peer Support Agency (PSA)

5.1. The Contractor shall provide peer support services to individuals defined in Subsection 1.4. who have a desire to work on wellness issues, and who have a desire to participate in services.

5.2. The Contractor shall request consumers complete a membership application to join and support the activities and mission of the PSA.

5.3. The Contractor shall ensure the membership application includes, but is not limited to:

5.3.1. The minimum engagement policy.

5.3.2. Suspension of membership policy.

5.3.3. Membership rules.

Exhibit A - Amendment #4

5.3.4. Attestation that the consumer supports the mission of the PSA.

5.4. The Contractor shall provide services to both members and non-members.

6. Staffing Requirements for a PSA

6.1. The Contractors shall employ an Executive Director who:

6.1.1. Is appointed by the Board of Directors.

6.1.2. Is employed by the Contractor and is supervised by the Board of Directors.

6.1.3. Has, at a minimum, the following qualification:

6.1.3.1. One (1) year of supervisory or management experience; and

6.1.3.1.1. An associate's degree or higher administration, business management, education, health, or human services; or

6.1.3.1.2. Additional years of experience in the peer support field that can be substituted for one (1) year of academic experience.

6.1.4. Is evaluated annually by the Board of Directors to ensure peer support and wellness services and activities are provided in accordance with:

6.1.4.1. The performance expectations approved by the Board.

6.1.4.2. The Department's policies and rules.

6.1.4.3. The Contract terms and conditions.

6.1.4.4. The Quality improvement reviews.

6.2. The Contractor shall screen each staff member for tuberculosis prior to employment.

6.3. The Contractor shall not add, delete, defund, or transfer staff positions among programs without prior written permission from the Department.

6.4. The Contractor shall develop a Staffing Contingency Plan for Department approval no later than thirty (30) days from the contract effective date, which includes but is not limited to:

6.4.1. The process for replacement of personnel in the event of loss of key personnel or other personnel during the period of this Agreement.

6.4.2. The description of how additional staff resources shall be allocated to support this Agreement in the event of inability to meet any performance standard.

6.4.3. The description of time frames necessary for obtaining staff replacements.

6.4.4. An explanation of the Contractor's capabilities to provide, in a timely manner, staff replacements/additions with comparable experience.

6.5. The Contractor shall submit an emergency staffing plan within thirty (30) days of the contract effective date if the contract that includes, but not limited to:

6.5.1. Inclement weather notifications for programming and transportation services.

6.5.2. Emergency evacuation plans for the Agency.

Exhibit A - Amendment #4

6.6. Prior to making an offer of employment or for volunteer work, the Contractor shall, after obtaining signed and notarized authorization from the person or persons for whom information is being sought:

6.6.1. Obtain at least two (2) references for the person;

6.6.2. Submit the person's name for review against the bureau of elderly and adult services (BEAS) state registry maintained pursuant to RSA 161-F:49;

6.6.3. Complete a criminal records check to ensure that the person has no history of:

6.6.3.1. Felony conviction; or

6.6.3.2. Any misdemeanor conviction involving:

6.6.3.2.1. Physical or sexual assault;

6.6.3.2.2. Violence;

6.6.3.2.3. Exploitation;

6.6.3.2.4. Child pornography;

6.6.3.2.5. Threatening or reckless conduct;

6.6.3.2.6. Theft;

6.6.3.2.7. Driving under the influence of drugs or alcohol; or

6.6.3.2.8. Any other conduct that represents evidence of behavior that could endanger the well-being of a consumer; and

6.6.4. Complete a motor vehicles record check to ensure that the person has a valid driver's license if the person will be transporting consumers.

6.7. Unless the Contractor requests and obtains a waiver from the Department, it shall not hire any individual or/approve any individual to act as a volunteer if:

6.7.1. The individual's name is on the BEAS state registry;

6.7.2. The individual has a record of a felony conviction; or

6.7.3. The individual has a record of any misdemeanors specified in Subparagraph 6.6.3.2.

7. **Staff Training and Development**

7.1. The Contractor shall verify and document all staff and volunteers have appropriate training, education, experience, and orientation to fulfill the responsibilities of their respective positions. The Contractor shall ensure:

7.1.1. All personnel and training records are current and available to the Department, as requested.

7.1.2. All staff training shall be in accordance with New Hampshire Administrative Rule He-M 400, Community Mental Health, Part 402, Peer Support, Section 402.05, Staff Training, Staff Development and Orientation.

7.2. The Contractor shall maintain documentation in files of the staffs completed trainings and certifications.

Exhibit A - Amendment #4

7.3. The Contractor shall obtain Department approval thirty (30) days prior to the training date, for all trainings provided by the Contractor or to attend trainings other than offered by the Contractor for staff at least on an annual basis such as, but not limited to:

7.3.1. Peer Support.

7.3.2. Warmline.

7.3.3. Facilitating Peer Support Groups.

7.3.4. Sexual Harassment.

7.3.5. Member Rights.

7.4. The Contractor shall provide Intentional Peer Support training and its required consultations to meet state certification.

7.5. The Contractor shall provide Wellness, Recovery, and Planning training to staff during the years in which Intentional Peer Support is not provided.

7.6. The Contractor shall ensure administrative staff, including the Executive Director, participate in trainings on:

7.6.1. Staff Development.

7.6.2. Supervision.

7.6.3. Performance Appraisals.

7.6.4. Employment Practices.

7.6.5. Harassment.

7.6.6. Program Development.

7.6.7. Complaints and the Complaint Process.

7.6.8. Financial Management.

7.7. The Contractor shall ensure that annual Wellness Training is available to staff and members, and may be provided to other mental health consumers who do not identify themselves as members of a PSA in the region.

7.8. The Contractor shall obtain prior approval by the Department no later than thirty (30) days prior to the training, to provide or refer staff to specific training proposed by either the Department or the Contractor.

7.9. The Contractor shall collaborate with other Peer Support Agencies to offer combined trainings to facilitate efficient use of training funds and to increase the scope of trainings offered.

7.10. The Contractor shall purge all data in accordance with the instructions from the Department pertaining to members, participants, and guests who have not received peer support services within the prior two (2) year period.

8. Composition and Responsibilities of a PSA

8.1. The Contractor shall establish and maintain a status as a PSA by:

8.1.1. Being incorporated with the Secretary of State's Office as a non-for-profit agency.

8.1.2. Having a plan for governance that requires a Board of Directors who:

8.1.2.1. Are responsible for the management and control of the property and affairs of the corporation.

8.1.2.2. Have the powers usually vested in the Board of Directors of a non-for-profit corporation.

8.1.2.3. Are comprised of a minimum of nine (9) individuals with at least 51% of the individuals who self-identify as consumers.

8.1.2.4. Have membership where less than 20% of the Board members are related by blood, marriage, or cohabitation to other Board members.

8.1.2.5. Establish and maintain the bylaws that include, but are not limited to:

8.1.2.5.1. Responsibilities and powers of the Board of Directors.

8.1.2.5.2. Term limits for the Board of Directors officers ensuring not more than 20% of the Board members serve for more than six (6) consecutive years.

8.1.2.5.3. A nominating process that actively recruits diverse individuals whose skills and life experiences serve the needs of the agency.

8.1.2.5.4. A procedure by which inactive PSA members are removed from the PSA Board.

8.2. The Contractor shall submit a corrective action plan to the Department within five (5) days when the Board of Directors membership falls below the required minimum of nine (9) members.

8.3. The Contractor shall submit an updated list of current Board of Directors members and a corrective action plan with timeframes to comply with the required number of members when membership falls below the minimum required number of five (5) members to the Department and NH Department of Justice, Division of Charitable Trusts.

8.4. The Contractor shall have a documented Orientation Process and Manual for the members and officers of the Board of Directors, which includes written descriptions outlining the duties of the members and officers of the Board of Directors.

8.5. The Contractor shall have annual trainings related to the members and officers of the Board of Directors roles and responsibilities, including fiduciary responsibilities.

8.6. The Contractor's Board of Directors shall have fiduciary responsibility for the agency including approval of agency financial policies and procedures that includes, but not be limited to, the following:

8.6.1. Cash Management including, but not limited to:

8.6.1.1. Cash receipts.

8.6.1.2. Cash disbursements.

8.6.1.3. Petty cash.

8.6.2. Accounts Payable/Receivable Procedures, payroll, and fixed assets.

8.6.3. Internal Control Procedures.

8.6.4. Expense Reimbursement and Advance Policy.

8.7. The Contractor shall have open attendance to PSA members during a portion of a Board meeting.

8.8. The Contractor shall publish the times and locations of Board of Directors meetings in an effort to encourage PSA member attendance.

8.9. The Contractor's Board of Directors shall maintain written records that are available to the Department upon request, which include, but are not limited to:

8.9.1. Board of Directors meeting minutes that include, but are not limited to:

8.9.1.1. Topics discussed.

8.9.1.2. Votes and actions taken.

8.9.1.3. A monthly review of the agency's financial status.

8.9.2. Current Board of Directors list that includes, but is not limited to:

8.9.2.1. Member name.

8.9.2.2. Member address.

8.9.2.3. Member phone number.

8.9.2.4. Member e-mail address.

8.9.2.5. Board office held.

8.9.2.6. Date joined the Board.

8.9.2.7. Member Board expiration date.

8.9.3. Documentation of the process and results of annual Board of Directors elections.

8.9.4. Policy manuals that include, but are not limited to policies for:

8.9.4.1. Human Resources.

8.9.4.2. Staff Development.

8.9.4.3. Financial Responsibilities.

8.9.4.4. Protection for member and participant rights.

8.10. The Contractor shall pursue other sources of revenue to support additional peer support services and/or supplement other related activities that the Department may not pay for under this Agreement.

9. Participation in Statewide/Regional Meetings

9.1. The Contractor shall support the recruitment and training of individuals for serving on local, regional and state mental health policy, planning and advisory initiatives.

9.2. The Contractor shall ensure the participation of individuals other than the Contractor's employees who provide leadership development meetings, workshops, and training events.

9.3. The Contractor shall ensure the Executive Director, or designee, attends the Department's monthly Peer Support Directors meeting for the purpose exchanging information as well as supporting and strengthening the statewide Peer Support system.

9.4. The Contractor shall meet, a minimum of two (2) times per year, with other regional community support organizations that serve the same populations, which may include, but are not limited to:

9.4.1. Mental health centers.

9.4.2. Area homeless shelters.

9.4.3. Community action programs.

9.4.4. Housing agencies.

9.5. The Contractor shall submit documentation to the Department that demonstrates attendance at the meetings in Section 9.

10. Grievance and Appeals

10.1. The Contractor shall submit a grievance and appeals process to the Department for approval. The Contractor shall ensure the grievance and appeals process includes, but is not limited to:

10.1.1. How to receive complaints orally, or in writing, ensuring information collected includes, but is not limited to:

10.1.1.1. Consumer name.

10.1.1.2. Date of written grievance.

10.1.1.3. Nature and subject of the grievance.

10.1.1.4. A method to submit an anonymous complaint.

10.1.2. A policy relative to assisting consumers with the grievance and appeal process including, but not limited to, how to file a complaint.

10.1.3. A method to track complaints.

10.1.4. Investigating allegations that a member's or participant's rights have been violated by agency staff, volunteers or consultants.

10.1.5. An immediate review of the complaint and investigation by the Contractor's director or his or her designee.

10.1.6. A process to attempt to resolve every grievance for which a formal investigation is requested.

10.1.7. An appeal process for members or participants to appeal any written decision rendered by the Board of Directors.

10.2. The Contractor shall ensure the Board of Directors issues a written decision to the member or participant filing a grievance upon completing an investigation and within twenty (20) business days setting forth the disposition of the grievance.

10.3. The Contractor shall submit a copy of the written decision in Subsection 10.2. of the complaint to the Department within ten (10) days from the written decision.

11. Reporting Requirements

11.1. The Contractor shall submit a report that lists the names of the trained individuals in accordance with Section 7. Staff Training and Development, utilizing reporting forms provided by the Department.

11.2. The Contractor shall provide the prior month's interim Balance Sheet, and Profit and Loss Statements to the Department no later than the 30th of the month, ensuring the report includes, but is not limited to:

11.2.1. The Current Ratio that measures the Contractor's total current assets available to cover the cost of current liabilities. The Contractor shall:

11.2.1.1. Utilize the following formula: Total current assets divided by total current liabilities.

11.2.1.2. Maintain a minimum current ratio of 1.1:1.0 with no variance allowed.

11.2.2. Accounts Payable that measure the Contractor's timeliness in paying invoices, ensuring no outstanding invoices greater than sixty (60) days.

11.2.3. Budget Management that compares budgets to actual revenues and expenses to determine the percentage of the Contractors budget executed year-to-date.

11.2.4. Ensure revenues are equal to or greater than the year-to-date calculation while ensuring expenses are equal to or less than the year-to-date calculation.

11.3. The Contractor shall prepare an Annual Report presentation for the benefit of the Mental Health Block Grant Advisory Council.

11.4. The Contractor shall submit a quarterly written report to the Department, on a form supplied by the Department, no later than the fifteenth (15th) day of the month following the end of each quarter that includes, but is not limited to:

11.4.1. Community outreach activities as outlined in Section 12. Deliverables.

11.4.2. Compilation of program evaluation and surveys submitted in the past quarter.

11.4.3. Peer support service deliverables as identified on templates provided by the Department.

11.4.4. Statistical data including, but not limited to:

11.4.4.1. The total number of unduplicated participants served on a daily basis.

11.4.4.2. The total number of current members, defined as only those members who have been served within the past year.

11.4.4.3. Program utilization totals by percentage.

11.4.4.4. Number of telephone peer support contacts.

11.4.4.5. Number and description of outreach activities.

11.4.4.6. Number and description of educational events provided:

11.4.4.6.1. On-site; and

11.4.4.6.2. In the community.

11.4.5. Board of Directors meeting minutes for the previous quarter that include, but are not be limited to:

11.4.5.1. Executive Director's report.

11.4.5.2. Board of Directors roster.

11.5. The Contractor shall provide a report for Department approval by July 31 of each State Fiscal Year, which outlines:

11.5.1. Specific steps the Contractor has taken to increase membership in the previous State Fiscal Year.

11.5.2. A plan for how the Contractor shall increase the unduplicated numbers served in the above activities by ten (10) percent of the total served in the previous year, for each subsequent State Fiscal Year.

11.5.3. Monthly in-house schedules and newsletters.

11.5.4. Quarterly revenue and expenses by cost, category and locations.

11.5.5. Quarterly Capital Expenditure Reports.

11.5.6. Quarterly Auditor's Reports: The prior three (3) months of monthly interim Balance Sheet and Profit and Loss Statements including separate statements for related parties that are certified by an officer of the reporting entity to measure the agency's fiscal integrity.

12. Deliverables

12.1. The Contractor shall provide a minimum of fifteen (15) hours of in-house services at each Center each week, of which five (5) hours may be conducted in the Center's community or region, as approved by the Department. The Contractor shall provide services that include, but are not limited to:

12.1.1. New topics introduced every month.

12.1.2. A minimum of five (5) separate discussion groups per week that address emotional wellbeing topics, which may include, but are not limited to:

12.1.2.1. IPS.

12.1.2.2. WRAP.

12.1.2.3. WHAM.

12.1.2.4. Setting boundaries.

12.1.2.5. Positive thinking.

12.1.2.6. Wellness.

12.1.2.7. Stress management.

12.1.2.8. Addressing trauma.

12.1.2.9. Reduction of negative or intrusive thoughts.

12.1.2.10. Management of emotional states including, but not limited to:

12.1.2.10.1. Anger.

12.1.2.10.2. Depression.

12.1.2.10.3. Anxiety.

12.1.2.10.4. Mania

12.1.3. A minimum of five (5) discussion or practice groups per week that address physical wellbeing topics which may include, but are not limited to:

12.1.3.1. Smoking cessation.

12.1.3.2. Weight loss.

12.1.3.3. Nutrition and Cooking.

12.1.3.4. Physical exercise.

12.1.3.5. Mindfulness activities including, but not limited to:

12.1.3.5.1. Yoga.

12.1.3.5.2. Meditation.

12.1.3.5.3. Journaling.

12.1.4. A minimum of four (4) activity groups per week that that provide positive skill-building activities which may include, but are not limited to:

12.1.4.1. Arts and crafts.

12.1.4.2. Music expression.

12.1.4.3. Creative writing.

12.1.4.4. Cooking.

12.1.4.5. Sewing.

12.1.4.6. Gardening.

12.1.4.7. Movies.

12.1.5. A minimum of one (1) group per week based on topics relevant to fostering independence which may include, but are not limited to:

12.1.5.1. Online blogs or articles that relate to mental health.

12.1.5.2. Obtaining employment.

12.1.5.3. Budgeting.

12.1.5.4. Decision-making.

12.1.5.5. Self-advocacy.

12.2. The Contractor shall provide community-based services including, but not limited to a minimum of one (1) trip into the community per month for activities that may include, but are not limited to:

12.2.1. Visiting a natural setting.

12.2.2. Volunteering opportunities.

12.2.3. Visiting a museum.

12.2.4. Visiting a local historical site.

12.2.5. Visiting local farms or gardens.

12.3. The Contractor shall provide community outreach that includes, but is not limited to:

12.3.1. Providing monthly community education presentations about mental illness and the peer support community to potential referral sources, funders, or families of individuals affected by mental illness, including, but not limited to:

12.3.1.1. Local psychiatric hospitals.

12.3.1.2. Local mental health clinics.

12.3.1.3. Local community events.

12.3.2. Providing monthly educational events and presentations to members, participants, or other individuals seeking support and information relating to the issues and concerns of consumers of mental health services which includes, but is not limited to educational topics to be covered over the course of the year, which may include, but are not limited to:

12.3.2.1. Rights protection.

12.3.2.2. Peer Advocacy.

12.3.2.3. Recovery.

12.3.2.4. Employment.

12.3.2.5. Wellness Management.

12.3.2.6. Community Resources.

13. Quality Improvement

13.1. The Contractor shall participate in quality program reviews and site visits on a schedule provided by the Department. All contract deliverables, programs, and activities shall be subject to review during this time. These reviews shall result in a report and potential corrective action.

13.2. The Contractor shall participate in quality assurance reviews as follows:

13.2.1. Ensure the Department has access sufficient for monitoring of contract compliance requirements as identified in OMB Circular A-133.

13.2.2. Ensure the Department is provided with access that shall include, but is not limited to:

13.2.2.1. Data.

13.2.2.2. Financial records.

13.2.2.3. Scheduled access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.4. Unannounced access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.5. Scheduled phone access to Contractor principals and staff.

13.3. The Contractor shall perform monitoring and comprehensive quality and assurance activities including, but not limited to:

13.3.1. Participating in bi-annual quality improvement review as in Subsection 13.1.

13.3.2. Participating in ongoing monitoring and reporting based on the bi-annual review and corrective action plan submitted in conjunction with the Department and Contractor.

13.3.3. Conducting member satisfaction surveys provided by and as instructed the Department.

13.3.4. Reviewing personnel files for completeness.

13.3.5. Reviewing the complaint process.

13.4. The Contractor shall provide a corrective action plan to the Department within thirty (30) days of notification of noncompliance with contract activities.

13.5. The Contractor shall provide all requested audits to the Department no later than ten (10) days after receiving the request from the Department.

Method and Conditions Precedent to Payment

1. The State shall pay the Contractor an amount not to exceed the Price Limitation, Block 1.8, of the General Provisions of this Agreement, Form P-37, for the services provided by the Contractor pursuant to Exhibit A – Amendment #4, Scope of Services.
2. This Agreement is funded by:
   2.1. 100% General Funds.
3. The Contractor agrees to provide the services in Exhibit A – Amendment #4, Scope of Services in compliance with funding requirements in Section 2., above.
4. The Contractor shall submit one (1) invoice to the Department upon Governor and Council approval of this Agreement requesting an advance payment in an amount not to exceed $28,118 for peer support services as stated in Exhibit A – Amendment #4, Scope of Services. The Contractor shall ensure:
   4.1. The invoice clearly states a request for the advance payment, to be provided at the start of each State Fiscal Year (SFY), in the amount of $28,118, referenced in Exhibit A – Amendment #4, Scope of Services.
   4.2. The invoice includes how funds will be utilized toward peer support services in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #3 and Exhibit B-6 Amendment #3.
   4.3. The Contractor shall submit monthly invoices for actual expenditures incurred in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #3 and Exhibit B-6 Amendment #3.
   4.4. The Department shall recoup the advance payment back by deducting 1/3rd of the advanced amount from the December 2020, January 2021, and February 2021 invoices, unless otherwise agreed upon by the Department.
5. Subsequent to the action in Section 4., the Department shall make monthly payments to the Contractor based upon cost reimbursement, as submitted by the Contractor to maintain services and as approved by the Department, of the Department approved budget amounts in Exhibit B-1 Budget Form through Exhibit B-6 Amendment #3 SFY 2022 Budget.
   5.1. In no event shall the total of the initial payment in Section 4. and monthly payments in Section 5. exceed the budget amounts set forth in Section 5.
   5.2. The Department will adjust monthly payments for expenditures set forth in Section 10., below and amounts paid to initiate services in Section 4., above.
6. Notwithstanding Paragraph 18 of the General Provisions of this Agreement P-37, an amendment limited to the budget amounts identified in Section 5., to adjust amounts within the budgets, within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of Governor and Executive Council.
7. Payment for services provided in Exhibit A – Amendment #4, Scope of Services shall be made as follows:
   7.1. The Contractor shall submit an invoice on Department supplied forms, by the tenth (10th) working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month.

7.2. The State shall make payment to the Contractor on actual expenditures, within thirty (30) days of receipt of each Department-approved invoice for Contractor services provided pursuant to this Agreement.

7.3. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to dhhs.dbhinvoicesmhs@dhhs.nh.gov, or invoices may be mailed to:

Financial Manager
Bureau of Mental Health
Department of Health and Human Services
105 Pleasant Street, Main Building
Concord, NH 03301

8. The Contractor shall provide its Revenue and Expense Budget on Budget Form A supplied by the Department, within twenty (20) calendar days of the contract effective date and then twenty (20) days from the beginning of each fiscal year thereafter.

9. The Contractor shall provide quarterly Revenue and Expense Reports on Budget Form A, within thirty (30) calendar days after the end of each fiscal quarter, defined as July 1 to September 30, October 1 to December 31, January 1 to March 31, and April 1 to June 30.

10. The Contractor shall provide supporting documentation, when required by the Department, to support evidence of actual expenditures, in accordance with the Department approved budgets in Section 5.

11. Any expenditure that exceeds the approved budgets in Section 5. shall be solely the financial responsibility of the Contractor.

12. When the contract price limitation is reached the program shall continue to operate at full capacity at no charge to the Department for the duration of the contract period.

13. Funding may not be used to replace funding for a program already funded from another source.

14. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this Contract may be withheld, in whole or in part, in the event of noncompliance with any State or Federal law, rule or regulation applicable to the services provided, or if the said services have not been completed in accordance with the terms and conditions of this Agreement.

15. Notwithstanding Paragraph 18 of the General Provisions of this Agreement P-37, an amendment limited to the budget amounts identified in Section 5., to adjust amounts within the budgets, within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of Governor and Executive Council.

16. The Department reserves the right to recover any program funds not used, in whole or in part, for the purposes stated in this Agreement from the Contractor within one hundred and twenty (120) days of the Completion Date.

17. Contractor will have forty-five (45) days from the end of each State Fiscal Year to submit to the Department final invoices for payment. Any adjustments made to a prior invoice will need to be accompanied by supporting documentation.

18. Property Standards

18.1. Insurance coverage.

18.1.1. The Contractor shall, at a minimum, provide the equivalent insurance coverage for real property and equipment acquired or improved with State funds as provided to property owned by the Contractor.

18.2. Real property.

18.2.1. Subject to the obligations and conditions set forth in this section, title to real property acquired or improved in whole or in part with State funds will vest upon acquisition in the Contractor.

18.2.2. Except as otherwise provided by State statutes or in this Agreement, real property will be used for the originally authorized purpose as long as needed for that purpose, during which time the Contractor must not dispose of or encumber its title or other interests without State approval.

18.2.3. When real property is no longer needed for the originally authorized purpose, the Contractor must obtain disposition instructions from the State. The instructions must provide for one of the following alternatives:

18.2.3.1. Retain title after compensating the State. The amount paid to the State will be computed by applying the State's percentage of participation in the cost of the original purchase (and costs of any improvements) to the fair market value of the property. However, in those situations where the Contractor is disposing of real property acquired or improved with State funds and acquiring replacement real property prior to expiration of this Agreement and any amendment thereof, the net proceeds from the disposition may be used as an offset to the cost of the replacement property.

18.2.3.2. Sell the property and compensate the State. The amount due to the State will be calculated by applying the State's percentage of participation in the cost of the original purchase (and cost of any improvements) to the proceeds of the sale after deduction of any actual and reasonable selling and fixing-up expenses. If the State appropriation funding this Agreement or any amendment thereof has not been closed out, the net proceeds from sale may be offset against the original cost of the property. When the Contractor is directed to sell property, sales procedures must be followed that provide for competition to the extent practicable and result in the highest possible return.

18.2.3.3. Transfer title to a third party designated/approved by the State. The Contractor is entitled to be paid an amount calculated by applying the State's percentage of participation in the purchase of the real property (and cost of any improvements) to the current fair market value of the property.

18.3. Equipment.

18.3.1. Equipment means tangible personal property (including information technology systems) purchased in whole or in part with State funds and that has a useful life of more than one (1) year and a per-unit acquisition cost which equals or exceeds $5,000.

18.3.2. Subject to the obligations and conditions set forth in this section, title to equipment acquired with State funds will vest upon acquisition in the Contractor subject to the following conditions:

18.3.2.1. Use the equipment for the authorized purposes of the project during the period of performance, or until the property is no longer needed for the purposes of the project.

18.3.2.2. Not encumber the property without approval of the State.

18.3.2.3. Use and dispose of the property in accordance with Paragraph 18.2.2., Paragraph 18.2.1. and Paragraph 18.3.5.

18.3.3. Use.

18.3.3.1. Equipment must be used by the Contractor in the program or project for which it was acquired as long as needed, whether or not the project or program continues to be supported by State funds, and the Contractor must not encumber the property without prior approval of the State. When no longer needed for the original program or project, the equipment may be used in other activities funded by the State.

18.3.3.2. During the time that equipment is used on the project or program for which it was acquired, the Contractor must also make equipment available for use on other projects or programs currently or previously supported by the State, provided that such use will not interfere with the work on the projects or program for which it was originally acquired. First preference for other use must be given to other programs or projects supported by the State that financed the equipment. Use for non-State-funded programs or projects is also permissible with approval from the State.

18.3.3.3. When acquiring replacement equipment, the Contractor may use the equipment to be replaced as a trade-in or sell the property and use the proceeds to offset the cost of the replacement property.

18.3.4. Management requirements. Procedures for managing equipment (including replacement equipment), whether acquired in whole or in part with State funding, until disposition takes place will, as a minimum, meet the following requirements:

18.3.4.1. Property records must be maintained that include a description of the property, a serial number or other identification number, the source of funding for the property, who holds title, the acquisition date, and cost of the property, percentage of State participation in the project costs for the Agreement under which the property was acquired, the location, use and condition of the property, and any ultimate disposition data including the date of disposal and sale price of the property.

18.3.4.2. A physical inventory of the property must be taken and the results reconciled with the property records at least once every two (2) years.

18.3.4.3. A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft must be investigated.

18.3.4.4. Adequate maintenance procedures must be developed to keep the property in good condition.

18.3.4.5. If the Contractor is authorized or required to sell the property, proper sales procedures must be established to ensure the highest possible return.

18.3.5. Disposition. When original or replacement equipment acquired with State funds is no longer needed for the original project or program or for other activities currently or previously supported by the State, except as otherwise provided by State statutes or in this Agreement, the Contractor must request disposition instructions from the State. Disposition of the equipment will be made as follows:

18.3.5.1. Items of equipment with a current per unit fair market value of $5,000 or less may be retained, sold or otherwise disposed of with no further obligation to the State.

18.3.5.2. Items of equipment with a current per-unit fair-market value in excess of $5,000 may be retained by the Contractor or sold. The State is entitled to an amount calculated by multiplying the current market value or proceeds from sale by the State's percentage of participation in the cost of the original purchase. If the equipment is sold, the State may permit the Contractor to deduct and retain from the State's share $500 or ten (10) percent of the proceeds, whichever is less, for its selling and handling expenses.

18.3.5.3. The Contractor may transfer title to the property to an eligible third party provided that, in such cases, the Contractor must be entitled to compensation for its attributable percentage of the current fair market value of the property.

18.3.5.4. In cases where the Contractor fails to take appropriate disposition actions, the State may direct the Contractor to take disposition actions.

19. Property Trust Relationship and Liens

19.1. Real property, equipment, and intangible property, that are acquired or improved with State funds must be held in trust by the Contractor as trustee for the beneficiaries of the project or program under which the property was acquired or improved. The State may require the Contractor to record liens or other appropriate notices of record to indicate that personal or real property has been acquired or improved with State funds and that use and disposition conditions apply to the property.

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 CORNERBRIDGE is a New Hampshire Trade Name registered to transact business in New Hampshire on January 28, 2016. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 738226
Certificate Number: 0004907609

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 5th day of May A.D. 2020.

William M. Gardner
Secretary of State

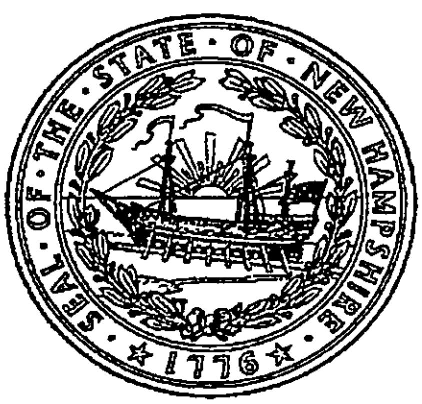
State of New Hampshire
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that LAKES REGION CONSUMER ADVISORY BOARD is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on October 19, 1993. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: **196694**

Certificate Number: **0004907615**



IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 5th day of May A.D. 2020.

William M. Gardner
Secretary of State

CERTIFICATE OF AUTHORITY

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

1. I am a duly elected Clerk/Secretary/Officer of Lakes Region Consumer Advisory Board.
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on October 8, 2020, at which a quorum of the Directors/shareholders were present and voting.
(Date)

VOTED: That Patricia Mahon, Chair President (may list more than one person)
(Name and Title of Contract Signatory)

is duly authorized on behalf of Lakes Region Consumer Advisory Board to enter into contracts or agreements with the State
(Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority remains valid for thirty (30) days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 10-8-20

Kim Bruneau
Signature of Elected Officer
Name: Kim Bruneau
Title: LRCAB Secretary

DocuSign Envelope ID: 3F02E5E6-E464-4A4F-97B9-E7FEF28CFB2E

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 05/20/2020

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

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

PRODUCER	
FIAI/Cross Insurance 1100 Elm Street Manchester NH 03101	CONTACT NAME: Vivian Pinette PHONE (A/C, No, Ext): (603) 669-3218 FAX (A/C, No): (603) 645-4331 E-MAIL ADDRESS: vpinette@crossagency.com

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A :	Philadelphia Indemnity Ins Co	18058
INSURER B :	Wesco Ins Co	25011
INSURER C :		
INSURER D :		
INSURER E :		
INSURER F :		

INSURED

Lakes Region Consumer Advisory Board, DBA: Cornerbridge
P.O. Box 304
Laconia NH 03247

COVERAGES CERTIFICATE NUMBER: 20-21 All Lines REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	[X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [ ] PRO-JECT [X] LOC OTHER:			PHPK2107686	05/01/2020	05/01/2021	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 3,000,000
							PRODUCTS - COMP/OP AGG	$ 3,000,000
								$
A	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] OWNED AUTOS ONLY [X] SCHEDULED AUTOS [X] HIRED AUTOS ONLY [X] NON-OWNED AUTOS ONLY			PHPK2107679	05/01/2020	05/01/2021	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							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 Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [N] (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		WWC3461897 (3a.) NH	04/01/2020	04/01/2021	[X] PER STATUTE [ ] OTH-ER	
							E.L. EACH ACCIDENT	$ 500,000
							E.L. DISEASE - EA EMPLOYEE	$ 500,000
							E.L. DISEASE - POLICY LIMIT	$ 500,000

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

CERTIFICATE HOLDER	CANCELLATION
State of NH, DHHS 129 Pleasant Street Concord NH 03301	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 DA Schroeder

Lakes Region Consumer Advisory Board
Mission Statement

The Lakes Region Consumer Advisory Board is the foundation for US to reach our goals and change our lives by changing the perception we have of ourselves as we relate to larger community and the perception the larger community has of US. We are people learning to work strategies of Recovery, Wellness, and Empowerment.

Lakes Region Consumer Advisory Board is a Peer Support network enabling US to reach our goals and change our lives by nurturing our personal strengths.

Our vision is to create a culture that promotes personal responsibility for Recovery, Wellness, Empowerment, and Advocacy for oneself and others while acknowledging the dive right we have as Human Beings.

LAKES REGION CONSUMER ADVISORY BOARD

FINANCIAL STATEMENTS

AND SUPPLEMENTAL INFORMATION

Years Ended June 30, 2019 and 2018

TABLE OF CONTENTS

ROWLEY & ASSOCIATES, P.C.

CERTIFIED PUBLIC ACCOUNTANTS

46 N. STATE STREET
CONCORD, NEW HAMPSHIRE 03301
TELEPHONE (603) 228-5400
FAX # (603) 226-3532

MEMBER
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

MEMBER OF THE PRIVATE
COMPANIES PRACTICE
SECTION

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
Lakes Region Consumer Advisory Board
Laconia, New Hampshire

We have audited the accompanying financial statements of Lakes Region Consumer Advisory Board (a New Hampshire nonprofit corporation), which comprise the statement of financial position as of June 30, 2019 and the related statements of activities and changes in net assets, cash flows and functional expenses for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. 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 involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Lakes Region Consumer Advisory Board as of June 30, 2019, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited Lakes Region Consumer Advisory Board's 2018 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated October 29, 2018. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2018, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary information on page 13 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Rowley & Associates, PC

Rowley & Associates, P.C.
Concord, New Hampshire
August 30, 2019

LAKES REGION CONSUMER ADVISORY BOARD
STATEMENTS OF FINANCIAL POSITION
JUNE 30, 2019 AND 2018
See Independent Auditors' Report

ASSETS	**2019**	**2018**
CURRENT ASSETS		
Cash and cash equivalents:		
Operating	$ 27,491	$ 33,073
BMHS refundable	37,453	111,467
Total cash and cash equivalents	64,944	144,540
Prepaid expenses	5,164	7,548
Total Current Assets	135,052	296,628
PROPERTY AND EQUIPMENT, at cost		
Building and land	198,236	175,865
Equipment	63,834	53,041
Furniture and fixtures	13,689	13,689
Total property & equipment	275,759	242,595
Less accumulated depreciation	131,658	135,520
	144,101	107,075
LONG TERM ASSETS		
Security deposit	2,000	2,000
Total Assets	281,153	405,703
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Accounts payable and accrued expenses	28,748	36,653
Total Current Liabilities	28,748	36,653
LONG-TERM LIABILITIES		
Refundable BMHS advance	37,453	111,467
Security deposit	850	850
Total Long-Term Liabilities	38,303	112,317
NET ASSETS		
Without donor restriction	149,158	112,193
With donor restriction	-	-
Total Net Assets	149,158	112,193
Total Liabilities and Net Assets	$ 216,209	$ 261,163

LAKES REGION CONSUMER ADVISORY BOARD
STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS
YEARS ENDED JUNE 30, 2019 AND 2018
See Independent Auditors' Report

	2019	2018
REVENUES, GAINS AND OTHER SUPPORT		
Grant income	$ 375,668	$ 358,165
Donations	5,551	5
Interest income	82	20
Rental income	11,700	9,350
Loss on sale of fixed asset	(2,349)	-
Total support and revenue	390,652	367,540
EXPENSES		
Program	333,388	320,618
Management & general	8,990	8,857
Rental unit expense	11,309	10,072
Total expenses	353,687	339,548
Increase in net assets	36,965	27,992
Net assets, beginning of year	112,193	84,201
Net assets, end of year	$ 149,158	$ 112,193

Notes to Financial Statements

LAKES REGION CONSUMER ADVISORY BOARD
STATEMENTS OF CASH FLOWS
YEARS ENDED JUNE 30, 2019 AND 2018
See Independent Auditors' Report

	2019	2018
CASH FLOWS FROM OPERATING ACTIVITIES		
Increase in net assets	$ 36,965	$ 27,992
Adjustments to reconcile excess of revenue and support over expenses to net assets provided by operating activities		
Depreciation	11,339	9,247
Loss on sale of fixed asset	2,349	-
(Increase) decrease in operating assets		
Accounts receivable	-	-
Prepaid expenses	2,384	(1,888)
Increase (decrease) in operating liabilities		
Accounts payable and accrued expenses	(7,905)	17,135
Security deposits	-	-
Refundable BMHS advance	(52,818)	20,916
BMHS funds transferred to other agency	(21,196)	(40,350)
Net Cash Provided (Used) By Operating Activities	(28,882)	33,052
CASH USED BY INVESTING ACTIVITIES,		
Purchases of property and equipment	(52,164)	(27,890)
Proceeds on sale of fixed asset	1,450	-
Net Cash (Used) By Investing Activities	(50,714)	(27,890)
Net increase (decrease) in cash and cash equivalents	(79,596)	5,162
Cash and Cash Equivalents, Beginning of Year	144,540	139,378
Cash and Cash Equivalents, End of Year	$ 64,944	$ 144,540

SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION

Cash paid during the year for:

Interest	$ -	$ 34

Notes to Financial Statements

LAKES REGION CONSUMER ADVISORY BOARD
STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED JUNE 30, 2019 WITH COMPARATIVE TOTALS FOR THE YEAR ENDED JUNE 30, 2018

See Independent Auditors' Report

	Program Services	Management & General	Rental Unit Costs	Total 2019	2018
Wages	$ 189,819	$ -	$ -	189,819	177,522
Employee benefits	20,817	-	-	20,817	21,207
Rent	24,000	-	-	24,000	24,000
Payroll taxes	14,663	-	-	14,663	13,712
Supplies	10,388	-	-	10,388	5,746
Telephone	8,453	-	3,127	11,580	10,610
Utilities	11,696	-	-	11,696	10,453
Workers compensation	3,708	-	1,372	5,080	3,691
Insurance	6,066	696	3,182	9,944	10,141
Repairs and maintenance	5,061	-	-	5,061	13,306
Food	3,838	-	-	3,838	4,274
Audit fees	-	7,500	-	7,500	7,500
Other expenses	1,261	-	-	1,261	1,477
Travel	11,445	-	-	11,445	9,209
Training	3,117	-	-	3,117	9,797
Depreciation	6,917	794	3,628	11,339	9,247
Equipment rental & maintenance	4,393	-	-	4,393	2,952
Vehicle expense	2,922	-	-	2,922	4,046
Postage	237	-	-	237	191
Bank fees	160	-	-	160	100
Advertising	4,370	-	-	4,370	307
Licenses & permits	57	-	-	57	60
	$ 333,388	$ 8,990	$ 11,309	$ 353,687	$ 339,548

Notes to Financial Statements

LAKES REGION CONSUMER ADVISORY BOARD
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 1 NATURE OF ORGANIZATION

Lakes Region Consumer Advisory Board (LRCAB) is a nonprofit organization incorporated under the laws of the State of New Hampshire on October 19, 1993. Its mission is to provide peer support to those who are currently receiving or have received mental health services and to empower them to control their own lives and to influence the resources that affect their lives. Program support is derived primarily from fee for service contracts through the State of New Hampshire.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES

The summary of significant accounting policies of LRCAB is presented to assist in understanding the organization's financial statements. The financial statements and notes are representations of LRCAB's management who is responsible for their integrity and objectivity. These accounting policies conform to generally accepted accounting principles and have been consistently applied in the preparation of the financial statements.

Basis of Accounting

The financial records for LRCAB are maintained on the accrual basis of accounting. Consequently, revenues are recognized when earned and expenses are recognized when incurred.

Basis of Presentation

The organization reports information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions.

> Net assets without donor restrictions - These net assets generally result from revenues generated by receiving contributions that have no donor restrictions, providing services, and receiving interest from operating investments, less expenses incurred in providing program-related services raising contributions, and performing administrative functions.
>
> Net assets with donor restrictions - These net assets result from gifts of cash and other assets that are received with donor stipulations that limit the use of the donated assets, either temporarily or permanently, until the donor restriction expires, that is until the stipulated time restriction ends or the purpose of the restriction is accomplished, the net assets are restricted.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Cash equivalents

For purposes of the statement of cash flows, LRCAB considers cash on hand, deposits in banks and investments to be cash equivalents.

Support and revenue

Lakes Region Consumer Advisory Board receives support primarily through grants from the Federal Government and the State of New Hampshire.

Property and Equipment

Property and equipment are recorded at cost of purchase or, if contributed, at fair market value at the date of donation. If donors stipulate how long the assets must be used, the contributions are recorded as restricted support. In the absence of such stipulation, contributions of property and equipment are recorded as unrestricted support. Depreciation is computed on the Modified Accelerated Cost Recovery System (MACRS) and on the straight-line basis over the useful lives of the assets as listed below. Depreciation expense was $11,339 and $9,247 for the years ended June 30, 2019 and 2018, respectively. Expenditures for repairs and maintenance are expensed when incurred.

Building & Improvement	27.5 Years
Furniture & Fixtures	7 Years
Office Equipment	5-7 Years
Vehicles	5 Years

Functional allocation of items

The costs of providing various program, management and rental services have been summarized in the statement of activities. Accordingly, certain costs have been allocated among the programs.

Accounts Receivable

Accounts receivable are comprised of amounts due from customers for services provided. LRCAB considers accounts receivable to be fully collectible; accordingly, no allowance for doubtful accounts has been established. If accounts become uncollectible, they will be charged to operations when that determination is made. Collections on accounts previously written off are included in revenue as received.

Advertising costs

The Organization expenses advertising costs as they are incurred. Advertising expense was $4,370 and $307 for the year ended June 30, 2019 and 2018, respectively.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Use of estimates

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

Income taxes

The Organization has been notified by the Internal Revenue Service that it is exempt from federal income tax under Section 501(c) (3) of the Internal Revenue Code. The Organization is further classified as an organization that is not a private foundation under Section 509(a)(3) of the Code. The most significant tax positions of the Organization are its assertion that it is exempt from income taxes and its determination of whether any amounts are subject to unrelated business tax (UBIT). The Organization follows guidance of Accounting Standards Codification (ASC) 740, Accounting for Income Taxes, related to uncertain income taxes, which prescribes a threshold of more likely than not for recognition of tax positions taken or expected to be taken in a tax return. All significant tax positions have been considered by management. It has been determined that it is more likely than not that all tax positions would be sustained upon examination by taxing authorities. Accordingly, no provision for income taxes has been recorded.

In-Kind Contributions

In-kind contributions are recorded at fair market value and recognized as revenue in the accounting period in which they are received. Volunteers, mainly board members, donate time to LRCAB's program services. These services are not included in donated materials and services because the value has not been determined.

Donated Materials and Services

It is the intent of LRCAB to record the value of donated goods and services when there is an objective basis available to measure their value. For the years ended June 30, 2019 and 2018, there were no donated goods or services.

Concentration of Risk

The Organization maintains cash balances in several accounts at local banks. These accounts are insured by the Federal Deposit Insurance Corporation up to $250,000. At various times throughout the year, the Organization may have cash balances at the financial institution that exceeds the insured amount. Management does not believe this concentration of cash results in a high level of risk for the Organization. At June 30, 2019 and 2018 the Organization had no uninsured cash balances.

LAKES REGION CONSUMER ADVISORY BOARD
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Comparative Financial Information

The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended June 30, 2018, from which the summarized information was derived.

Financial Instruments

The carrying value of cash and cash equivalents, prepaid expenses, accounts payable and accrued expenses are stated at carrying cost at June 30, 2019 and 2018, which approximates fair value due to the relatively short maturity of these instruments.

New Accounting Pronouncement

During the year ended June 30, 2019, the Organization adopted the requirements of the Financial Accounting Standards Board's Accounting Standards Update No. 2016- 14—Not-for-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities (ASU 2016- 14). This Update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return between not-for-profit entities. A key change required by ASU 2016-14 is the net asset classes used in these financial statements. Amounts previously reported as unrestricted net assets are now reported as net assets without donor restrictions and amounts previously reported as temporarily restricted net assets and permanently restricted net assets are now reported as net assets with donor restrictions.

The accompanying information from the 2018 financial statements has been restated to conform to the 2019 presentation and disclosure requirements of ASU 2016-14.

Reclassifications

Certain financial statement and note information from the prior year financial statements has been reclassified to conform with current year presentation format.

NOTE 3 ECONOMIC DEPENDENCY

LRCAB currently receives grant funds from the State of New Hampshire Bureau of Mental Health Services. These funds are the primary source of the Organization's support. If a significant reduction or delay in the level of support were to occur, it would have an adverse effect on the Organization's programs and activities. For the years ended June 30, 2019 and 2018, the State grants made up 96% and 97% of LRCAB's total support.

LAKES REGION CONSUMER ADVISORY BOARD
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 4 LEASES

LRCAB leases premises in Concord, New Hampshire. In February 2008, LRCAB's lease expired and they are currently operating on a month to month basis. The current lease payment is $2,000 per month. Rent expense was $24,000 for the years ended June 30, 2019 and 2018. There is no future required minimum required rent expense.

NOTE 5 REAL ESTATE RENTAL

In February LRCAB entered a one-year lease with tenants, expiring January 2018. The Organization continues to operate under a month-to-month basis. Total rental income was $11,700 and $9,350 for the years ended June 30, 2019 and 2018. There is no future minimum rental income.

NOTE 6 LINE OF CREDIT

LRCAB has a $10,000 line of credit with Laconia Savings Bank. The interest rates as of June 30, 2019 and 2018 were 6.25% and 5.50%, respectively. Interest payments are required monthly. The line of credit expires December 2020. There was no principal balance as of June 30, 2019 and 2018, respectively.

NOTE 7 RETIREMENT PLAN

The Organization implemented an employee IRA plan for full time employees. The State of New Hampshire approves the allocation of retirement funds and reimburses LRCAB for the expenses. Eligible employees do not make salary reduction contributions. The Organization made $2,110 and $2,590 in retirement contributions for the years ended June 30, 2019 and 2018, respectfully.

NOTE 8 REFUNDABLE ADVANCE

Under the terms of the service agreement with the Bureau of Behavioral Health (BMHS), a division of the State of New Hampshire's Department of Health and Human Services, LRCAB was required to segregate amounts received in excess of allowable expenses. Funds set aside in accordance with this requirement amounted to $37,453 and $111,467 for the years ended June 30, 2019 and 2018, respectively.

During the year ended June 30, 2019 BMH changed their policy regarding excess of allowable expenses. The new terms require BMH to adjust future grant distributions according to the net excess or deficit of funds per the organization's audited financial reports.

LAKES REGION CONSUMER ADVISORY BOARD
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 9 SUBSEQUENT EVENT

Management has evaluated subsequent events through August 30, 2019, the date on which the financial statements were available to be issued, to determine if any are of such significance to require disclosure. It has been determined that no subsequent events matching this criterion occurred during this period.

NOTE 10 BOARD DESIGNATED NET ASSETS

The Organization has no board designated net assets as of June 30, 2019.

NOTE 11 LIQUIDITY & AVAILABILITY OF FINANCIAL ASSETS

The Organization has a policy to structure its financial assets to be available as its general expenditures, liabilities and other obligations come due. The Organization's primary source of support is grants. That support is held for the purpose of supporting the Organization's budget. The Organization had the following financial assets that could be readily made available within one year to fund expenses without limitations:

	2019	2018
Cash and cash equivalents	$ 64,944	$144,540
Less amounts:		
Refundable BMHS funds required to be maintained under State agreement	(37,453)	(111,467)
	$ 27,491	$ 33,073

LAKES REGION CONSUMER ADVISORY BOARD
STATEMENT OF ACTIVITIES
BY STATE APPROVED BMHS FUNDS
YEAR ENDED JUNE 30, 2019
See Independent Auditors' Report

	State Approved BMHS Funds	Non-BMHS Funds	Total
REVENUES, GAINS AND OTHER SUPPORT			
Grant income, current year	$ 315,430	$ -	$ 315,430
Grant income, prior year release	52,818	-	52,818
Grant income, supplemental grant	7,420	-	7,420
Donations	-	5,551	5,551
Interest income	82	-	82
Rental income	-	11,700	11,700
Loss on sale of fixed asset	-	(2,349)	(2,349)
Total support and revenue	375,750	14,902	390,652
EXPENSES			
Wages	189,819	-	189,819
Employee benefits	20,817	-	20,817
Rent	24,000	-	24,000
Payroll taxes	14,663	-	14,663
Supplies	10,388	-	10,388
Telephone	11,580	-	11,580
Utilities	11,696	-	11,696
Workers compensation	5,080	-	5,080
Insurance	9,944	-	9,944
Repairs and maintenance	5,061	-	5,061
Food	3,838	-	3,838
Audit fees	7,500	-	7,500
Other expenses	1,261	-	1,261
Travel	11,445	-	11,445
Training	3,117	-	3,117
Depreciation	-	11,339	11,339
Equipment rental & maintenance	4,393	-	4,393
Vehicle expense	2,922	-	2,922
Postage	237	-	237
Bank fees	160	-	160
Advertising	4,370	-	4,370
Licenses & permits	57	-	57
Total expenses	342,348	11,339	353,687
Net Operating Increase in Net Assets	33,402	3,563	36,965
BMHS funds allowed for capital purchases	(52,164)	52,164	-
Net Increase (Decrease) in Net Assets	(18,762)	55,727	36,965
Net assets, beginning of year	3	112,190	112,193
Net assets (deficit), end of year	$ (18,759)	$ 167,917	$ 149,158

Notes to Financial Statements

Lakes Region Consumer Advisory Board
Board of Directors List
May 2020

Co-President(s)
Patricia (Trish) Mahon
Joined: 2016
Term: #4
Expiration: 2020

Co-President(s)
C.Joyce Ringleb
Joined: 2019
Term: #1
Expiration: 2023

Vice-President
Raunie Amado
Joined: 2019
Term: #1
Expiration: 2023

Secretary
Kim Bruneau
Joined: 2019
Term: 1
Expiration: 2023

Treasurer
Trish Mahon
Joined: 2016
Term: #4
Expiration: 2020

Bob Shastany
Joined: 2019
Term: #1
Expiration: 2023

John Murphy
Joined: 2020
Term: #1
Expiration: 2024

Glenn Frederick
Joined: 2020
Term: 1
Expiration: 2024

Megan Hanson
Joined: 2020
Term: 1
Expiration: 2024

PATRICIA FANCY

PROFESSIONAL PROFILE

A compassionate and energetic professional with 7+ years of human services industry experience. Accustomed to working in environments where accuracy and accountability are essential. Consistently model and inspire high levels of integrity. Adapt at handling delicate situations requiring discretion and tact.

- High Academic Honors Recognition / Awards: Dean's List.
- Strong verbal, written and interpersonal communication skills.
- Makes decisions based on facts and experience.
- Possesses problem solving skills to facilitate problem identification and generation of alternative solutions.
- Function independently with minimal direction and guidance.
- Maintains and ensures patient privacy and confidentiality - abides by HIPAA policies.
- Microsoft Office Suite / MS Excel; MS Word; MS PowerPoint.

KEY QUALIFICATIONS

Basic Understanding of Cognitive and Emotional Crises • Intervention Strategies • Client Confidentiality Legalities
HIPAA Compliance • Community Based Referrals • Individual • Group & Community Advocacy
Critical Thinking & Crisis Intervention • Human Growth & Development • Individual & Family Life Cycles
Self-Care Strategies • Appropriate Boundaries • Preventative & Remedial Approaches to Public Health
Planning & Coordination for Vulnerable Populations • Social Welfare Systems Competencies
Cultural Diversity & Social Group Dynamics • Ethical & Value System Identification

EDUCATION

Ultimate Medical Academy | Associate of Science Degree – Health and Human Services, 2019
Southern New Hampshire University – Bachelors Degree of Arts- Psychology/Mental Health

PROFESSIONAL EXPERIENCE

Lakes Region Consumer Advisory Board – Laconia, NH — 10/2014 - Present

Executive Director

- Supervise and lead the advisory board and 14+ employees.
- Create and implement agency policies and procedures.
- Set goals and establish direction for the organization.
- Ensure effective communication and organizations abilities.
- Complete administrative and financial tasks for the organization.
- Train employees on organization policies and procedures.
- Reviewed records and reports about activities such as production, payroll, and performance.
- Supervised the work of employees to ensure adherence to quality standards, deadlines, and proper procedures, correcting errors and problems.

Lakes Region Consumer Advisory Board – Concord, NH — 12/2011 - 10/2014

Program Director

- Practiced intentional peer support and modeled and empowered consumer for advocacy.
- Evaluated employees' job performance and conformance to regulations and recommend an appropriate personnel action.
- Trained instruct employees in job duties and company policies.
- Provided employees with guidance in handling difficult and complex problems.

Easter Seals | Social Services Organization – Bow, NH — 03/2006 - 04/2011

Direct Support Associate

- Ensured a safe practice of medication administration.
- Provided a safe and comfortable environment and integrated individuals in their community.
- Remained knowledgeable on the best care practices for developmental and mentally disabled adults.

Robin Greenly

Professional Strengths:
Exceptional work ethic and attention to detail; strong writing, communication and technology skills; high standards and integrity; self motivated and intellectually curious; intuitive and thoughtful.

Technical:
Access, Excel, Word, AS400, Act, Outlook, Adobe Reader and Writer, FoxPro, PCLaw, Amicus, Acrobat, Crystal Reports

Work Experience:

CornerBridge Peer Support Center **11/1/19 to Present**

Program Director

- Responsibilities include for writing monthly calendar and newsletter. Schedule and mentor staff daily. Maintain household needs. Practice intentional peers support. Evaluate employee performance. Train employees as needed.

Lakes Region Community Advisory Board **5/14/18-11/1/19**

Peer Advocate

- Responsible for scheduled groups and transportation when necessary as well as incoming phone calls.

Southern Wine & Spirits Concord, NH **2006-2018**

Admin. Assistant

- Responsibilities for monitoring and maintaining inventory levels in the states of Maine and Vermont of liquor products. Input billing on a monthly basis. Recommend sales programming to increase market share and submit sales information to the states of Vermont and Maine.

Perfect Fit Industries, Pembroke, NH **2003-Present**

Production Assistant

- Responsibilities include directing workflow and AS400 maintenance. Daily routine includes prioritizing work load for staff. Redirect resources as needed. Monitor inventory levels. Report on material shortages.
- Establish work flow to maintain consistent production levels. Work with upper management in identifying weak areas of production to make improvements.

Access Database Design, Bow, NH **2001-2003**

Owner

- **Accomplishments:** Designed and created database for use in Civil Practice Clinic, the Children's Advocacy Clinic, the Administrative Advocacy Clinic, the Advanced Criminal Clinic, the Nonprofit Clinic, the Criminal Practice Clinic, the Mediation Clinic, and the Creativity and Innovation Clinic. Database used for tracking client files including storage and activity in files. Designed and maintain Access database used for tracking Law Professor located throughout the U.S. for Moot Court Applications. Designed an Access database for NH Appellate Defenders Office.

- Designed Access database for Marketing firm
- Designed and created Access database for Car Dealership.

Basch Subscriptions Inc. Concord, NH **1999 -2001**

Publisher Relations

- **Accomplishments:** Maintained FoxPro pricing database for hundreds of publishers and their respective titles. Negotiated discounts with publishers. Tracked foreign currency rates and worked with exchange banks for rates. Designed and maintained database of credit card purchases of over $5 million. Problem solved on a daily basis.

YBP Inc. Contoocook, NH **1987 - 1999**

Publisher Relations Book Buyer

- **Accomplishments:** 1999 -Maintain speculative buy for over 150 publishers and 450+ imprints. Partnered with manager to design and program a turnkey Access system, which expedited tracking of vendor catalog receipts and provided tracking and statistical record keeping.
- 1998- Traveled to the UK to assist in company startup operation. Directed the workflow and trained staff performing order entry, speculative purchasing, publisher relations, shipping and warehouse management. Console operator responsible for data processing and printing and pooling all work for delivery to operators.
- 1995 -Designed and programmed a turnkey Access system for tracking British ApprovalBuys, Museum Buys and Association Buys, which provided management with order statistics and management reports. Trained staff performing Museum Buys and Association Buys.
- 1992 - Researched and resolved problematic library orders making it possible for order processing. Developed and maintain procedures and reference tools to assist in research. Trained staff performing detailed research remained an in-house consultant to this function.
- 1990 - Maintained computerized customer profiles allowing order processing, book processing, customer invoicing and shipping to occur. Trained staff performing customer file maintenance.

CONTRACTOR NAME
Lakes Region Consumer Advisory Board

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Patricia Fancy	Ex. Director	$42,000	100%	$42,000
Robin Greenly	CornerBridge Program Director	$ 28,080.00	100%	$28,080.00
Liane Sauerheber	Concord Peer Support Program Director	$28,080.00	100%	$28,080.00

State of New Hampshire
Department of Health and Human Services
Amendment #4 to the Peer Support Services Contract

This 4th Amendment to the Peer Support Services contract (hereinafter referred to as "Amendment #4") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Monadnock Area Peer Support Agency, (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 290 Main Street, Keene, NH 03431.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 29, 2016, (Item #23), as amended on June 20, 2018, (Item #33B), June 19, 2019, (Item #28), and on June 24, 2020, (Item #27), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, and Exhibit C-1, Revisions to General Provisions, Paragraph 3, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to increase the price limitation and modify the scope of services to support continued delivery of these services; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $2,223,907.

2. Delete Exhibit A - Amendment #2, Scope of Services, in its entirety and replace with Exhibit A – Amendment #4, Scope of Services, which is attached hereto and incorporated by reference herein.
3. Delete Exhibit B, Amendment #2, Methods and Conditions Precedent to Payment in its entirety and replace with Exhibit B – Amendment #4, Methods and Conditions Precedent to Payment, which is attached hereto and incorporated by reference herein.
4. Delete Exhibit B-5 - Amendment #3, SFY 2021 Budget, in its entirety and replace with Exhibit B-5 – Amendment #4, SFY 2021 Budget, which is attached hereto and incorporated by reference herein.
5. Delete Exhibit B-6 - Amendment #3, SFY 2022 Budget in its entirety and replace with Exhibit B-6 – Amendment #4, SFY 2022 Budget, which is attached hereto and incorporated by reference herein.
6. Add Exhibit B-7 – Amendment #4, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #4 remain in full force and effect. This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

11/2/2020
Date

DocuSigned by:
Katja Fox
ED9D05B04C63442...
Name: Katja Fox
Title: Director

Monadnock Area Peer Support Agency

11/2/2020
Date

DocuSigned by:
7082AEEA0208406...
Name: Peter Starkey
Title: Executive Director, Peter Starkey

New Hampshire Department of Health and Human Services
Peer Support Services

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

11/2/2020

Date

DocuSigned by:

D5CA8202532C4A5...

Name: Catherine Pinos
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _______________ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Exhibit A - Amendment #4

Scope of Services

1. **Provisions Applicable to All Services**

1.1. The Contractor shall submit a detailed description of the language assistance services they shall provide to persons with limited English proficiency to ensure meaningful access to their programs and services within ten (10) days of the contract effective date.

1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire (NH) General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

1.3. The Contractor shall provide peer support services in accordance with NH Administrative Rule He-M 400, Community Mental Health, Part 02, Peer Support, referred to as He-M 402, that:

1.3.1. Increase quality of life for individuals living with mental illness in NH.

1.3.2. Increase hope for and belief in the possibility of recovery for individuals living with mental illness in NH.

1.3.3. Increase choice regarding the services and supports available to individuals living with mental illness in NH.

1.3.4. Provide alternatives to and reduce the use of more restrictive and expensive services such as hospitalization.

1.3.5. Increase social connectedness for individuals living with mental illness in NH.

1.3.6. Increase satisfaction with peer support services.

1.4. The Contractor shall provide mental health peer support services to individuals who are eighteen (18) years of age or older who:

1.4.1. Self-identify as a recipient, as a former recipient, or at a significant risk of becoming a recipient of mental health services, and may include individuals who are homeless; and/or

1.4.2. Require additional support to transition from in patient or institutional settings into the community, or alternatively require more intensive supports to reduce the need for admission to an inpatient setting.

1.5. For the purposes of this contract, any reference to days shall mean consecutive calendar days, unless otherwise denoted as business days.

1.6. The Contractor agrees that if the performance of services involves the collection, transmission, storage, or disposition of Part 2 substance use disorder (SUD) information or records created by a Part 2 provider the information or records shall be subject to all safeguards of 42 CFR Part 2.

2. **Definitions**

2.1. **Board of Directors** means the governing body of a nongovernmental peer support agency.

2.2. **Business Days** are defined as Monday through Friday, excluding Saturday and

Sunday.

2.3. **Consumers** are any individual, eighteen (18) years of age or older, who self-identifies as a recipient, as a former recipient, or as a significant risk of becoming a recipient of publically funded mental health services.

2.4. **Guests** are any individuals who are invited to visit the peer support agency by a member, participant, or the peer support agency.

2.5. **Homeless** is (1) an individual or family who lacks a fixed, regular, and adequate nighttime residence; or (2) an individual or family who has a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels and congregate shelters), an institution other than a penal facility that provides temporary residence for individuals intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

2.6. **Members** are any consumers, who have made an informed decision to join, and agree to, abide by, and support the goals and objectives of peer support services.

2.7. **Mental illness** is defined in RSA 135-C:2 X, namely, "a substantial impairment of emotional processes, or of the ability to exercise conscious control of one's actions, or of the ability to perceive reality or to reason, when the impairment is manifested by instances of extremely abnormal behavior or extremely faulty perceptions. It does not include impairment primarily caused by: (a) epilepsy; (b) intellectual disability; (c) continuous or noncontinuous periods of intoxication caused by substances such as alcohol or drugs; or (d) dependence upon or addiction to any substance such as alcohol or drugs."

2.8. **Participant** means a consumer, who is not member, who participates in any aspect of peer support services.

2.9. **Peer Support Agency (PSA)** means an organization whose primary purpose is to provide culturally appropriate peer support, peer education, and peer programming to persons eighteen (18) year of age and older who self- identify as having a mental illness.

2.10. **Quarter or Quarterly** is defined as the periods of July 1 through September 30, October 1 through December 31, January 1 through March 31, and April 1 through June 30.

2.11. **Recovery** means for an individual with a mental illness, development of personal and social skills, beliefs and characters that support choice, increase quality of life, minimize or eliminate impairment, and decrease dependence on professional services.

2.12. **Region** is the geographic area of cities and towns in New Hampshire, as defined by the Department.

2.13. **Serious Mental Illness (SMI)** refers to individuals whom the state defines as having either Serious Mental Illness (SMI) or Serious and Persistent Mental Illness (SPMI) pursuant to N.H. Revised Statutes Annotated (RSA) 135-C:2, XV.

2.14. **Week** is defined as Monday through Sunday.

3. Scope of Services

3.1. Peer Support Services

3.1.1. The Contractor shall provide in-house and community based services for New Hampshire residents.

3.1.2. The Contractor shall provide peer support services that are provided for consumers and by consumers including, but not limited to:

3.1.2.1. Peer support services that include supportive interactions, shared experiences, acceptance, trust, respect, lived experience, and mutual support among members, participants, staff and volunteers.

3.1.2.2. Maintenance of a safe physical location that:

3.1.2.2.1. Is open a minimum of forty-four (44) hours per week, eight (8) hours per day, five (5) days per week and four (4) hours on one (1) additional day per week at each location; and

3.1.2.2.2. Provides face-to-face or telephone peer support services to PSA members or others who contact the PSA at a minimum of forty (40) hours per week at each location.

3.1.2.3. Peer support services based on the Intentional Peer Support model that:

3.1.2.3.1. Foster recovery from mental illness by helping individuals identify and achieve personal goals while building an evolving vision of their recovery.

3.1.2.3.2. Foster self-advocacy skills, autonomy, and independence.

3.1.2.3.3. Emphasize mutuality and reciprocity as demonstrated by shared decision-making; strong conflict resolution; non-medical approaches; and non-static roles, including but not limited to, staff who are members and members who are educators.

3.1.2.3.4. Offer alternative views on mental health, mental illness and the effects of trauma and abuse.

3.1.2.3.5. Encourage informed decision-making about all aspects of people's lives.

3.1.2.3.6. Support people with mental illness in challenging perceived self-limitations, while encouraging the development of beliefs that enhance personal and relational growth.

3.1.2.3.7. Emphasize a holistic approach to health that includes a vision of the whole person.

3.1.2.4. Providing opportunities to learn wellness strategies by using, at a minimum, Wellness Recovery Action Planning (WRAP) and Whole Health Action

Management (WHAM), to strengthen individual abilities to attain and maintain their health and recovery from mental illness.

3.1.2.5. Provide in-house and community-based services according to the Deliverables in Subsection 12.1. through Subsection 12.2.

3.1.2.6. Provide outreach by face-to-face or by telephone contact with consumers by providing support to individuals who are unable to attend agency activities, visiting people who are hospitalized with a psychiatric condition, and reaching out to people who meet membership criteria and are homeless.

3.1.2.7. Provide monthly newsletters published by the peer support agency (PSA) that describes agency services and activities; other community services; social and recreational opportunities; member articles and contributions and other relevant topics that might be of interest to members and participants.

3.1.2.8. Distribute the newsletters to the members and other interested parties, which may include but are not limited to community mental health centers and other appropriate community organizations, at least five (5) business days prior to the upcoming month.

3.1.2.9. Provide monthly education events and presentations topics germane to issues and concerns of consumers of mental health services which must include, but are not limited to:

3.1.2.9.1. Rights Protection.

3.1.2.9.2. Peer Advocacy.

3.1.2.9.3. Recovery.

3.1.2.9.4. Employment.

3.1.2.9.5. Wellness Management.

3.1.2.9.6. Community Resources.

3.1.2.10. Provide an electronic copy of the monthly newsletters and education events in Subparagraph 3.1.2.7. and Paragraph 11.6.3., to the Office of Consumer and Family Affairs within the Department's Bureau of Behavioral Health, and the Mental Health Block Grant State Planner and Mental Health Block Grant Advisory Council no later than five (5) days prior to the beginning of the following month.

3.1.2.11. Provide individual peer assistance by assisting adults to:

3.1.2.11.1. Locate, obtain, and maintain mental health services and supports through referral, consumer education, and self-empowerment;

3.1.2.11.2. Support individuals who are identifying problems by assisting them in addressing the issue and/or in resolving grievances; and

3.1.2.11.3. Promote self-advocacy.

3.1.2.12. Provide employment education by providing members with:

3.1.2.12.1. Information relative to obtaining and maintaining competitive employment.

3.1.2.12.2. Referrals to community mental health center employment programs.

3.1.2.12.3. Employment-related activities, which may include, but are not limited to:

3.1.2.12.3.1. Resume writing.

3.1.2.12.3.2. Interviewing techniques.

3.1.2.12.3.3. Assistance with completing employment applications.

3.1.2.13. Inform members and the general public about peer support and wellness services available by providing Community Education Presentations about mental illness and the peer support community on a monthly basis to potential referral sources, funders, or families of individuals affected by mental illness.

3.1.2.14. Inform local human service providers and the general public about the stigma of mental illness, wellness and recovery and collaborate with other local human service providers that serve consumers in order to facilitate referrals and share information about services and other local resources.

3.1.2.15. Provide training and technical assistance to assist consumers to advocate for themselves and on their own behalf regarding healthcare such as, but not limited to:

3.1.2.15.1. Preparation techniques for doctors' appointments.

3.1.2.15.2. How to take notes.

3.1.2.15.3. How to use the physician's desk reference book for medications and a review of patient rights.

3.1.2.16. Invite guests to participate in peer support activities.

3.1.2.17. Provide residential support services, as needed, by providing support and assistance such as help with staying in their home or apartment, or finding a place to live.

3.1.2.18. Maintain at least a monthly schedule of peer support and wellness services and activities, which includes, but is not limited to:

3.1.2.18.1. Staff development and training.

3.1.2.18.2. Events that include community-based services.

3.1.2.18.3. Community outreach events.

3.2. The Contractor shall provide transportation services to members, participants and

guests, as needed. The Contractor shall:

3.2.1. Transport members, participants, guests, in a Contractor owned or leased vehicle, to and from their homes and/or the Contractor's PSA to participate in activities that may include, but not limited to:

3.2.1.1. Peer support services.

3.2.1.2. Wellness and recovery activities.

3.2.1.3. Annual conferences.

3.2.1.4. Regional meetings.

3.2.1.5. Council meetings.

3.2.2. Ensure all vehicles and drivers used for transportation comply with Federal and State Department of Transportation and Department of Safety regulations, which include, but are not limited to:

3.2.2.1. Vehicles must be registered pursuant to NH Administrative Rule Saf-C 500, Vehicle Registration Rules.

3.2.2.2. Vehicles must be inspected in accordance with NH Administrative Rule Saf-C 3200, Official Motor Vehicle Inspection Requirements.

3.2.2.3. Drivers must be licensed in accordance with NH Administrative Rule Saf-C 1000, Driver Licensing.

3.2.3. Require all employees, members, or volunteers who drive Contractor-owned vehicles sign a State of New Hampshire Release of Individual Motor Vehicle Driver Records form in order to access individual driver records that indicate drivers have safe driving records.

3.2.4. Require all employees, members, or volunteers who drive Contractor-owned vehicles complete a National Safety Council Defensive Driving course offered through a State of New Hampshire-approved agency.

3.3. The Contractor shall acknowledge funding from the Department to support transportation costs:

3.3.1. Is not used for activities other than peer support related activities defined in this Agreement.

3.3.2. May be used on an 'as needed' basis to pay for bus rides that are necessary to transport individuals to peer support services provided by the Contractor.

3.4. <u>Warmline Services</u>

3.4.1. The Contractor shall provide warmline services that offer on-call telephone peer support services to members, participants, and others. The Contractor shall ensure warmline services:

3.4.1.1. Are provided to any individual with the ability to receive calls and make calls statewide and who lives or works in the State of New Hampshire.

3.4.1.2. Are provided during the hours the PSA is closed.

3.4.1.3. Assist individuals with addressing a current crisis related to their mental health.

3.4.1.4. Include referrals to appropriate treatment and other resources available in the consumer's service area.

3.4.1.5. Are provided by staff who are trained in providing warmline services.

3.4.1.6. May include outreach calls described in Subparagraph 3.1.2.6.

3.5. <u>Recovery Oriented Step-Up Step-Down Program</u>

3.5.1. The Contractor shall operate a three (3) bed step-up / step-down program that provides short-term recovery-based transition services for individuals:

3.5.1.1. Transitioning from inpatient or institutional settings into the community; or

3.5.1.2. Who require more intensive supports to reduce the need for admission to an inpatient setting.

3.5.2. The Contractor shall ensure each single occupancy bed includes, but is not limited to:

3.5.2.1. A minimum of one (1) bathroom with a sink, toilet, and shower.

3.5.2.2. A specific sleeping area designated for each individual, ensuring common areas are not used as bedrooms.

3.5.2.3. Storage space for each individual's clothing and personal possessions.

3.5.2.4. Kitchen area for the individual(s) to store and prepare meals.

3.5.2.5. A minimum of one (1) telephone for incoming and outgoing calls.

3.5.3. For the purposes of Step-Up / Step-Down services, any reference to business days shall mean Monday through Friday, excluding holidays observed by the State of New Hampshire as non-working days.

3.5.4. The Contractor shall ensure all services are available to individuals, statewide, regardless of insurance coverage or place of employment.

3.5.5. The Contractor shall ensure Step-Up / Step-Down services are in place on or before February 1, 2021, which include, but are not limited to:

3.5.5.1. Program(s) that are voluntary admission, short term, with overnight services.

3.5.5.2. Non-clinical peer supports, which includes access to a twenty-four (24) hour staff.

3.5.5.3. Policies that establish a ninety (90) day maximum stay limit per individual, per episode.

3.5.5.4. Programs staffed by peer support specialists as defined in NH Administrative Rule He-M 400, Community Mental Health, Part 426, Community Mental Health Services, Section 13(d)(4), who have successfully passed the state peer support specialist certification exam; and

3.5.5.5. Coordination with outpatient community-based clinical treatment providers.

3.5.6. The Contractor shall ensure the program accepts individuals:

3.5.6.1. Discharging from inpatient settings; and

3.5.6.2. For whom a short-term stay would prevent a psychiatric hospitalization.

3.5.7. The Contractor shall utilize the Intentional Peer Support (IPS) or another Substance Abuse and Mental Health Services Administration (SAMHSA)-recognized mental health peer support model to facilitate recovery and wellness with individuals. The Contractor shall ensure:

3.5.7.1. Programs operate in accordance with SAMHSA Core Competencies for Peer Support Workers in a behavioral health system.

3.5.7.2. Individuals are referred to other community-based service providers, as appropriate to ensure:

3.5.7.2.1. Individuals are connected to community providers, programs, and applicable services; and

3.5.7.2.2. Whole-health needs of each individual are met.

3.5.7.3. Programs utilize a statewide referral form approved by the Department.

3.5.7.4. Programs adhere to a standardized Department-approved admission criteria that includes, but is not limited to, serving individuals who:

3.5.7.4.1. Are at least eighteen (18) years of age.

3.5.7.4.2. Are residents of the State of New Hampshire.

3.5.7.4.3. Self-identified as being in psychiatric distress.

3.5.7.4.4. Exhibit a willingness to engage in daily services and wellness activities.

3.5.7.4.5. Self-administering medication, if applicable, or receive medication from a community provider or clinician off-site.

3.5.7.5. Referrals for Step-Up services are accepted if submitted through:

3.5.7.5.1. Community mental health programs or providers;

3.5.7.5.2. Mobile Crisis Response Teams;

3.5.7.5.3. Behavioral Health Crisis Treatment Centers;

3.5.7.5.4. Peer Support Agencies; or

3.5.7.5.5. Other entities, as approved by the Department.

3.5.7.6. Referrals for Step-Down are accepted if submitted through:

3.5.7.6.1. New Hampshire Hospital;

3.5.7.6.2. Designated Receiving Facilities;

3.5.7.6.3. Mobile Crisis Response Teams;

3.5.7.6.4. Community mental health providers;

3.5.7.6.5. Hospitals; or

3.5.7.6.6. Other entities, as approved by the Department.

3.5.7.7. Programs are staffed and operated by a minimum of one (1) certified peer support specialist with lived experience with mental illness, twenty-four (24) hours per day when participants are in the program.

3.5.7.8. Programs support recovery and resiliency through interventions and services, or connections to services, which include, but are not limited to:

3.5.7.8.1. Facilitating connections to natural supports, defined as relationships that occur in everyday life, which may include, but are not limited to:

3.5.7.8.1.1. Family.

3.5.7.8.1.2. Friends.

3.5.7.8.1.3. Neighbors.

3.5.7.8.1.4. Peer support networks when transitioning back to their communities.

3.5.7.8.2. Developing and supporting individual discharge plans.

3.5.7.8.3. Providing access to a minimum of one (1) SAMHSA-recognized peer support model who emphasizes physical, psychological, and emotional safety and focuses on individual strengths as a method to rebuild a sense of control and empowerment.

3.5.7.8.4. Providing opportunities for engagement in structured daily activities while participating in the program.

3.5.7.8.5. Developing individualized safety and wellness plans that support person-centered recovery goals, which may include Wellness Recovery Action Plans (WRAP).

3.5.7.9. Programs support connections, allow access to and collaborate with the individual's current services and service providers, including establishing memorandums of understanding, communication protocols and sharing of care plans with written consent.

3.5.7.10. Programs support individuals with maintaining participation in academic coursework and/or employment.

3.5.8. The Contractor shall assist individuals without established service providers to obtain a variety of supports that include, but are not limited to:

3.5.8.1. Referring individuals to Department supports for benefits that may include, but are not limited to:

3.5.8.1.1. Social security.

3.5.8.1.2. Food stamps.

3.5.8.1.3. Utility assistance.

3.5.8.2. Assisting individuals with obtaining, completing, and submitting housing applications.

3.5.8.3. Identifying and connecting participants to resources within the community which may include, but are not limited to:

3.5.8.3.1. Peer support agencies.

3.5.8.3.2. Community mental health centers.

3.5.8.3.3. Faith-based groups.

3.5.8.3.4. Transportation services.

3.5.8.3.5. Primary care services.

3.5.8.3.6. Homemaker and personal care services.

3.5.9. The Contractor shall administer a functional assessment at intake and discharge from the program, as approved by the Department to include, but not be limited to, data identified in Subsection 11.6.

3.5.10. The Contractor shall develop a referral process with the local community mental health center for those individuals who, while in the program, experience a rise in acuity level and:

3.5.10.1. Require a higher level of care; or

3.5.10.2. Require an evaluation for hospitalization.

3.5.11. The Contractor shall ensure individual health needs are addressed during the course of their stay.

3.5.12. The Contractor shall maintain a smoke-free environment and provide tobacco intervention services to individuals who are former or current smokers. The Contractor shall ensure:

3.5.12.1. Former smokers receive appropriate supports that assist with maintaining a non-smoking status.

3.5.12.2. Current smokers are offered smoking cessation treatments.

3.5.13. The Contractor shall ensure the discharge process includes, but is not limited to:

3.5.13.1. Conducting discharge planning meetings that actively include individuals receiving services.

3.5.13.2. Ensuring the first discharge meeting occurs no later than thirty (30) days from the date of the individual's admission

3.5.13.3. Ensuring discharge meetings include, but are not limited to, input from:

3.5.13.3.1. Community mental health centers.

3.5.13.3.2. Primary care services.

3.5.13.3.3. Other providers.

3.5.13.3.4. Natural supports.

3.5.13.4. Ensuring discharge plans are wellness and recovery oriented and include, but are not limited to, individualized:

3.5.13.4.1. Emergency contacts.

3.5.13.4.2. Community support contacts.

3.5.13.4.3. Updates on presenting problem.

3.5.13.4.4. Disposition.

3.5.13.4.5. Recovery goals.

3.5.13.4.6. Action steps to transition back into the community.

3.5.14. The Contractor shall choose to become an enrolled Medicaid provider through the Department's Medicaid program.

3.5.15. The Contractor shall perform, or cooperate with the performance of, such quality improvement and utilization review activities as are determined to be necessary and appropriate by the Department within timeframes reasonably specified by the Department.

3.6. Crisis Respite

3.6.1. The Contractor agrees to operate a peer operated Crisis Respite that provides early intervention for individuals (18) years of age and older who have a mental illness and who are experiencing a crisis in the community as follows:

3.6.2. Provide to any consumer from any of the Regions in New Hampshire regardless of where they live or work.

3.6.3. Provide a short-term crisis respite in a safe environment, staffed by peers, intended to maintain community placement and avoid hospitalization.

3.6.4. Provide interventions using a model of Intentional Peer Support (IPS), that focus on individual's strengths and assists in personal recovery and wellness.

3.6.5. Provide a place for the person to stay temporarily in order to facilitate recovery and shall be staffed with a trained personnel twenty-four (24) hours per day when participants are in the program.

3.6.6. Develop a referral process and making referrals to the local community mental health center for those who require a higher level of care or evaluation for hospitalization.

3.6.7. Offer other peer support agency services and supports during the course of stay at the crisis respite program.

3.6.8. Provide transportation to and from the crisis respite program to other community-based appointments.

3.6.9. Administer a functional assessment that is approved by the Department, at the time of entry and exit from the program.

3.6.10. Provide individualized supports with a focus on wellness and recovery that may include Wellness Recovery Action Plan (WRAP), if applicable.

3.6.11. Support the individual in returning to participation in community activities, services and supports.

3.6.12. Ensure the individual's health needs if they become ill or injured are addressed during the course of their stay in the crisis respite program.

3.6.13. Ensure communication with other service providers involved in the individual's care, with their written consent.

4. Geographic Area and Physical Location of Services

4.1. The Contractor shall provide peer support services separately from the confines of a local community mental health center, unless otherwise pre-approved by the Department.

4.2. The Contractor shall provide peer support services at a physical location and/or building that is in compliance with Exhibit C, Section 15. and with the Life Safety requirements, which include, but are not limited to, ensuring the building:

4.2.1. Is in compliance with local health, building and fire safety codes.

4.2.2. Is maintained in good repair and free of hazards, and includes, but is not limited to:

4.2.2.1. A minimum of one (1) indoor bathroom that includes a sink and toilet.

4.2.2.2. A minimum of one (1) telephone for incoming and outgoing calls.

4.2.2.3. A functioning septic or other sewage disposal system.

4.2.2.4. A source of potable water for drinking and food preparation as follows:

4.2.2.4.1. If drinking water is supplied by a non-public water system, the Contractor shall ensure the water is tested and found to be in accordance with NH Administrative Rules Env-Ws 300, Drinking Water Rules, Part 15, Maximum Contaminant Levels and Maximum Contaminant Level Goal for Regulated Organics and Part 316, Regulated Secondary Maximum Contaminant Levels initially and every five (5) years thereafter.

4.2.2.4.2. If the water is not approved for drinking, the Contractor shall implement an alternative method for providing safe drinking water.

5. Enrolling Consumers for Services and/or as Members with a Peer Support Agency (PSA)

5.1. The Contractor shall provide peer support services to individuals defined in Subsection 1.4. who have a desire to work on wellness issues, and who have a desire to participate in services.

5.2. The Contractor shall request consumers complete a membership application to join and support the activities and mission of the PSA.

5.3. The Contractor shall ensure the membership application includes, but is not limited to:

5.3.1. The minimum engagement policy.

5.3.2. Suspension of membership policy.

5.3.3. Membership rules.

5.3.4. Attestation that the consumer supports the mission of the PSA.

5.4. The Contractor shall provide services to both members and non-members.

6. Staffing Requirements for a PSA

6.1. The Contractors shall employ an Executive Director who:

6.1.1. Is appointed by the Board of Directors.

6.1.2. Is employed by the Contractor and is supervised by the Board of Directors.

6.1.3. Has, at a minimum, the following qualification:

6.1.3.1. One (1) year of supervisory or management experience; and

6.1.3.1.1. An associate's degree or higher administration, business management, education, health, or human services; or

6.1.3.1.2. Additional years of experience in the peer support field that can be substituted for one (1) year of academic experience.

6.1.4. Is evaluated annually by the Board of Directors to ensure peer support and wellness services and activities are provided in accordance with:

6.1.4.1. The performance expectations approved by the Board.

6.1.4.2. The Department's policies and rules.

6.1.4.3. The Contract terms and conditions.

6.1.4.4. The Quality improvement reviews.

6.2. The Contractor shall screen each staff member for tuberculosis prior to employment.

6.3. The Contractor shall not add, delete, defund, or transfer staff positions among programs without prior written permission from the Department.

6.4. The Contractor shall develop a Staffing Contingency Plan for Department approval no later than thirty (30) days from the contract effective date, which includes but is not limited to:

6.4.1. The process for replacement of personnel in the event of loss of key personnel or other personnel during the period of this Agreement.

6.4.2. The description of how additional staff resources shall be allocated to support this Agreement in the event of inability to meet any performance standard.

6.4.3. The description of time frames necessary for obtaining staff replacements.

6.4.4. An explanation of the Contractor's capabilities to provide, in a timely manner, staff replacements/additions with comparable experience.

6.5. The Contractor shall submit an emergency staffing plan within thirty (30) days of the contract effective date if the contract that includes, but not limited to:

6.5.1. Inclement weather notifications for programming and transportation services.

6.5.2. Emergency evacuation plans for the Agency.

6.6. Prior to making an offer of employment or for volunteer work, the Contractor shall, after obtaining signed and notarized authorization from the person or persons for whom information is being sought:

6.6.1. Obtain at least two (2) references for the person;

6.6.2. Submit the person's name for review against the bureau of elderly and adult services (BEAS) state registry maintained pursuant to RSA 161-F:49;

6.6.3. Complete a criminal records check to ensure that the person has no history of:

6.6.3.1. Felony conviction; or

6.6.3.2. Any misdemeanor conviction involving:

6.6.3.2.1. Physical or sexual assault;

6.6.3.2.2. Violence;

6.6.3.2.3. Exploitation;

6.6.3.2.4. Child pornography;

6.6.3.2.5. Threatening or reckless conduct;

6.6.3.2.6. Theft;

6.6.3.2.7. Driving under the influence of drugs or alcohol; or

6.6.3.2.8. Any other conduct that represents evidence of behavior that could endanger the well-being of a consumer; and

6.6.4. Complete a motor vehicles record check to ensure that the person has a valid driver's license if the person will be transporting consumers.

6.7. Unless the Contractor requests and obtains a waiver from the Department, it shall not hire any individual or approve any individual to act as a volunteer if:

6.7.1. The individual's name is on the BEAS state registry;

6.7.2. The individual has a record of a felony conviction; or

6.7.3. The individual has a record of any misdemeanors specified in Subparagraph

6.6.3.2.

7. **Staff Training and Development**

7.1. The Contractor shall verify and document all staff and volunteers have appropriate training, education, experience, and orientation to fulfill the responsibilities of their respective positions. The Contractor shall ensure:

7.1.1. All personnel and training records are current and available to the Department, as requested.

7.1.2. All staff training shall be in accordance with New Hampshire Administrative Rule He-M 400, Community Mental Health, Part 402, Peer Support, Section 402.05, Staff Training, Staff Development and Orientation.

7.2. The Contractor shall maintain documentation in files of the staffs completed trainings and certifications.

7.3. The Contractor shall obtain Department approval thirty (30) days prior to the training date, for all trainings provided by the Contractor or to attend trainings other than offered by the Contractor for staff at least on an annual basis such as, but not limited to:

7.3.1. Peer Support.

7.3.2. Warmline.

7.3.3. Facilitating Peer Support Groups.

7.3.4. Sexual Harassment.

7.3.5. Member Rights.

7.4. The Contractor shall provide Intentional Peer Support training and its required consultations to meet state certification.

7.5. The Contractor shall provide Wellness, Recovery, and Planning training to staff during the years in which Intentional Peer Support is not provided.

7.6. The Contractor shall ensure administrative staff, including the Executive Director, participate in trainings on:

7.6.1. Staff Development.

7.6.2. Supervision.

7.6.3. Performance Appraisals.

7.6.4. Employment Practices.

7.6.5. Harassment.

7.6.6. Program Development.

7.6.7. Complaints and the Complaint Process.

7.6.8. Financial Management.

7.7. The Contractor shall ensure that annual Wellness Training is available to staff and members, and may be provided to other mental health consumers who do not identify themselves as members of a PSA in the region.

7.8. The Contractor shall obtain prior approval by the Department no later than thirty (30) days prior to the training, to provide or refer staff to specific training proposed by either the Department or the Contractor.

7.9. The Contractor shall collaborate with other Peer Support Agencies to offer combined trainings to facilitate efficient use of training funds and to increase the scope of trainings offered.

7.10. The Contractor shall purge all data in accordance with the instructions from the Department pertaining to members, participants, and guests who have not received peer support services within the prior two (2) year period.

8. Composition and Responsibilities of a PSA

8.1. The Contractor shall establish and maintain a status as a PSA by:

8.1.1. Being incorporated with the Secretary of State's Office as a non-for-profit agency.

8.1.2. Having a plan for governance that requires a Board of Directors who:

8.1.2.1. Are responsible for the management and control of the property and affairs of the corporation.

8.1.2.2. Have the powers usually vested in the Board of Directors of a non-for-profit corporation.

8.1.2.3. Are comprised of a minimum of nine (9) individuals with at least 51% of the individuals who self-identify as consumers.

8.1.2.4. Have membership where less than 20% of the Board members are related by blood, marriage, or cohabitation to other Board members.

8.1.2.5. Establish and maintain the bylaws that include, but are not limited to:

8.1.2.5.1. Responsibilities and powers of the Board of Directors.

8.1.2.5.2. Term limits for the Board of Directors officers ensuring not more than 20% of the Board members serve for more than six (6) consecutive years.

8.1.2.5.3. A nominating process that actively recruits diverse individuals whose skills and life experiences serve the needs of the agency.

8.1.2.5.4. A procedure by which inactive PSA members are removed from the PSA Board.

8.2. The Contractor shall submit a corrective action plan to the Department within five (5) days when the Board of Directors membership falls below the required minimum of nine (9) members.

8.3. The Contractor shall submit an updated list of current Board of Directors members and a corrective action plan with timeframes to comply with the required number of members when membership falls below the minimum required number of five (5) members to the Department and NH Department of Justice, Division of Charitable Trusts.

8.4. The Contractor shall have a documented Orientation Process and Manual for the members and officers of the Board of Directors, which includes written descriptions outlining the duties of the members and officers of the Board of Directors.

8.5. The Contractor shall have annual trainings related to the members and officers of the Board of Directors roles and responsibilities, including fiduciary responsibilities.

8.6. The Contractor's Board of Directors shall have fiduciary responsibility for the agency including approval of agency financial policies and procedures that includes, but not be limited to, the following:

8.6.1. Cash Management including, but not limited to:

8.6.1.1. Cash receipts.

8.6.1.2. Cash disbursements.

8.6.1.3. Petty cash.

8.6.2. Accounts Payable/Receivable Procedures, payroll, and fixed assets.

8.6.3. Internal Control Procedures.

8.6.4. Expense Reimbursement and Advance Policy.

8.7. The Contractor shall have open attendance to PSA members during a portion of a Board meeting.

8.8. The Contractor shall publish the times and locations of Board of Directors meetings in an effort to encourage PSA member attendance.

8.9. The Contractor's Board of Directors shall maintain written records that are available to the Department upon request, which include, but are not limited to:

8.9.1. Board of Directors meeting minutes that include, but are not limited to:

8.9.1.1. Topics discussed.

8.9.1.2. Votes and actions taken.

8.9.1.3. A monthly review of the agency's financial status.

8.9.2. Current Board of Directors list that includes, but is not limited to:

8.9.2.1. Member name.

8.9.2.2. Member address.

8.9.2.3. Member phone number.

8.9.2.4. Member e-mail address.

8.9.2.5. Board office held.

8.9.2.6. Date joined the Board.

8.9.2.7. Member Board expiration date.

8.9.3. Documentation of the process and results of annual Board of Directors elections.

8.9.4. Policy manuals that include, but are not limited to policies for:

8.9.4.1. Human Resources.

8.9.4.2. Staff Development.

8.9.4.3. Financial Responsibilities.

8.9.4.4. Protection for member and participant rights.

8.10. The Contractor shall pursue other sources of revenue to support additional peer support services and/or supplement other related activities that the Department may not pay for under this Agreement.

9. Participation in Statewide/Regional Meetings

9.1. The Contractor shall support the recruitment and training of individuals for serving on local, regional and state mental health policy, planning and advisory initiatives.

9.2. The Contractor shall ensure the participation of individuals other than the Contractor's employees who provide leadership development meetings, workshops, and training events.

9.3. The Contractor shall ensure the Executive Director, or designee, attends the Department's monthly Peer Support Directors meeting for the purpose exchanging information as well as supporting and strengthening the statewide Peer Support system.

9.4. The Contractor shall meet, a minimum of two (2) times per year, with other regional community support organizations that serve the same populations, which may include, but are not limited to:

9.4.1. Mental health centers.

9.4.2. Area homeless shelters.

9.4.3. Community action programs.

9.4.4. Housing agencies.

9.5. The Contractor shall submit documentation to the Department that demonstrates attendance at the meetings in Section 9.

10. Grievance and Appeals

10.1. The Contractor shall submit a grievance and appeals process to the Department for approval. The Contractor shall ensure the grievance and appeals process includes, but is not limited to:

10.1.1. How to receive complaints orally, or in writing, ensuring information collected includes, but is not limited to:

10.1.1.1. Consumer name.

10.1.1.2. Date of written grievance.

10.1.1.3. Nature and subject of the grievance.

10.1.1.4. A method to submit an anonymous complaint.

10.1.2. A policy relative to assisting consumers with the grievance and appeal process including, but not limited to, how to file a complaint.

10.1.3. A method to track complaints.

10.1.4. Investigating allegations that a member's or participant's rights have been violated by agency staff, volunteers or consultants.

10.1.5. An immediate review of the complaint and investigation by the Contractor's director or his or her designee.

10.1.6. A process to attempt to resolve every grievance for which a formal investigation is requested.

10.1.7. An appeal process for members or participants to appeal any written decision rendered by the Board of Directors.

10.2. The Contractor shall ensure the Board of Directors issues a written decision to the member or participant filing a grievance upon completing an investigation and within twenty (20) business days setting forth the disposition of the grievance.

10.3. The Contractor shall submit a copy of the written decision in Subsection 10.2. of the complaint to the Department within ten (10) days from the written decision.

11. Reporting Requirements

11.1. The Contractor shall submit a report that lists the names of the trained individuals in accordance with Section 7. Staff Training and Development, utilizing reporting forms provided by the Department.

11.2. The Contractor shall provide the prior month's interim Balance Sheet, and Profit and Loss Statements to the Department no later than the 30th of the month, ensuring the report includes, but is not limited to:

11.2.1. The Current Ratio that measures the Contractor's total current assets available to cover the cost of current liabilities. The Contractor shall:

11.2.1.1. Utilize the following formula: Total current assets divided by total current liabilities.

11.2.1.2. Maintain a minimum current ratio of 1.1:1.0 with no variance allowed.

11.2.2. Accounts Payable that measure the Contractor's timeliness in paying invoices, ensuring no outstanding invoices greater than sixty (60) days.

11.2.3. Budget Management that compares budgets to actual revenues and expenses to determine the percentage of the Contractors budget executed year-to-date.

11.2.4. Ensure revenues are equal to or greater than the year-to-date calculation while ensuring expenses are equal to or less than the year-to-date calculation.

11.3. The Contractor shall prepare an Annual Report presentation for the benefit of the Mental Health Block Grant Advisory Council.

11.4. The Contractor shall submit a quarterly written report to the Department, on a form supplied by the Department, no later than the fifteenth (15th) day of the month following the end of each quarter that includes, but is not limited to:

11.4.1. Community outreach activities as outlined in Section 12. Deliverables.

11.4.2. Compilation of program evaluation and surveys submitted in the past quarter.

11.4.3. Peer support service deliverables as identified on templates provided by the Department.

11.4.4. Statistical data including, but not limited to:

11.4.4.1. The total number of unduplicated participants served on a daily basis.

11.4.4.2. The total number of current members, defined as only those members who have been served within the past year.

11.4.4.3. Program utilization totals by percentage.

11.4.4.4. Number of telephone peer support contacts.

11.4.4.5. Number and description of outreach activities.

11.4.4.6. Number and description of educational events provided:

11.4.4.6.1. On-site; and

11.4.4.6.2. In the community.

11.4.5. Board of Directors meeting minutes for the previous quarter that include, but are not be limited to:

11.4.5.1. Executive Director's report.

11.4.5.2. Board of Directors roster.

11.5. The Contractor shall provide a report for Department approval by July 31 of each State Fiscal Year, which outlines:

11.5.1. Specific steps the Contractor has taken to increase membership in the previous State Fiscal Year.

11.5.2. A plan for how the Contractor shall increase the unduplicated numbers served in the above activities by ten (10) percent of the total served in the previous year, for each subsequent State Fiscal Year.

11.5.3. Monthly in-house schedules and newsletters.

11.5.4. Quarterly revenue and expenses by cost, category and locations.

11.5.5. Quarterly Capital Expenditure Reports.

11.5.6. Quarterly Auditor's Reports: The prior three (3) months of monthly interim Balance Sheet and Profit and Loss Statements including separate statements for related parties that are certified by an officer of the reporting entity to measure the agency's fiscal integrity.

11.6. <u>Recovery Oriented Step-Up Step-Down Program</u>

11.6.1. The Contractor shall submit individual data in the format, content, frequency and method as approved by the Department that includes, but is not be limited to:

11.6.1.1. Admission region.

11.6.1.2. Discharge region.

11.6.1.3. Presenting problem upon admission.

11.6.1.4. If admission was diversion from inpatient care (step-up).

11.6.1.5. If admission facilitated a supported transition out of inpatient care (step-down).

11.6.1.6. Age.

11.6.1.7. Gender.

11.6.1.8. Sexual orientation.

11.6.1.9. Race and ethnicity.

11.6.1.10. Legal status.

11.6.1.11. Employment status.

11.6.1.12. Individual's housing status upon admission and discharge.

11.6.1.13. Discharge reason.

11.6.1.14. Length of stay.

11.6.1.15. Resource referrals.

11.6.1.16. Entry and exit client status indicators, to include, but not be limited to, if the individual:

11.6.1.16.1. Was a step-up or step-down referral;

11.6.1.16.2. Exited to a higher level of care; and

11.6.1.16.3. Was referred from a higher level of care.

11.6.2. The Contractor shall submit program status data to the Department in the format, content, frequency and method as approved by the Department, that includes, but is not limited to:

11.6.2.1. Number of beds occupied.

11.6.2.2. Daily provided programming.

11.6.2.3. Staffing levels.

11.6.2.4. Community outreach efforts, including, but not limited to:

11.6.2.4.1. Family supports.

11.6.2.4.2. Community resource supports.

11.6.2.4.3. Other individuals or entities specified by the individual as a support.

11.6.3. The Contractor shall ensure monthly data is submitted no later than the fifteenth (15th) of each month for the prior month's data, unless otherwise approved by the Department in writing.

11.6.4. The Contractor shall ensure quarterly data is submitted no later than the fifteenth (15th) day of the month following the close of a quarter.

11.6.5. The Contractor shall submit monthly Balance Sheets and Profit and Loss Statements to the Department, ensuring:

11.6.5.1. The Profit and Loss Statements include a budget column allowing for budget-to-actual analysis.

11.6.5.2. Statements are submitted in accordance with Paragraph 11.6.3.

11.6.5.3. Statements are based on the accrual method of accounting and include the Contractor's total revenues and expenditures, whether or not generated by, or resulting from, funds provided pursuant to this contract.

12. Deliverables

12.1. The Contractor shall provide a minimum of fifteen (15) hours of in-house services at each Center each week, of which five (5) hours may be conducted in the Center's community or region, as approved by the Department. The Contractor shall provide services that include, but are not limited to:

12.1.1. New topics introduced every month.

12.1.2. A minimum of five (5) separate discussion groups per week that address emotional wellbeing topics, which may include, but are not limited to:

12.1.2.1. IPS.

12.1.2.2. WRAP.

12.1.2.3. WHAM.

12.1.2.4. Setting boundaries.

12.1.2.5. Positive thinking.

12.1.2.6. Wellness.

12.1.2.7. Stress management.

12.1.2.8. Addressing trauma.

12.1.2.9. Reduction of negative or intrusive thoughts.

12.1.2.10. Management of emotional states including, but not limited to:

12.1.2.10.1. Anger.

12.1.2.10.2. Depression.

12.1.2.10.3. Anxiety.

12.1.2.10.4. Mania

12.1.3. A minimum of five (5) discussion or practice groups per week that address physical wellbeing topics which may include, but are not limited to:

12.1.3.1. Smoking cessation.

Exhibit A - Amendment #4

12.1.3.2. Weight loss.

12.1.3.3. Nutrition and Cooking.

12.1.3.4. Physical exercise.

12.1.3.5. Mindfulness activities including, but not limited to:

12.1.3.5.1. Yoga.

12.1.3.5.2. Meditation.

12.1.3.5.3. Journaling.

12.1.4. A minimum of four (4) activity groups per week that that provide positive skill-building activities which may include, but are not limited to:

12.1.4.1. Arts and crafts.

12.1.4.2. Music expression.

12.1.4.3. Creative writing.

12.1.4.4. Cooking.

12.1.4.5. Sewing.

12.1.4.6. Gardening.

12.1.4.7. Movies.

12.1.5. A minimum of one (1) group per week based on topics relevant to fostering independence which may include, but are not limited to:

12.1.5.1. Online blogs or articles that relate to mental health.

12.1.5.2. Obtaining employment.

12.1.5.3. Budgeting.

12.1.5.4. Decision-making.

12.1.5.5. Self-advocacy.

12.2. The Contractor shall provide community-based services including, but not limited to a minimum of one (1) trip into the community per month for activities that may include, but are not limited to:

12.2.1. Visiting a natural setting.

12.2.2. Volunteering opportunities.

12.2.3. Visiting a museum.

12.2.4. Visiting a local historical site.

12.2.5. Visiting local farms or gardens.

12.3. The Contractor shall provide community outreach that includes, but is not limited to:

12.3.1. Providing monthly community education presentations about mental illness and the peer support community to potential referral sources, funders, or families of individuals affected by mental illness, including, but not limited to:

12.3.1.1. Local psychiatric hospitals.

12.3.1.2. Local mental health clinics.

12.3.1.3. Local community events.

12.3.2. Providing monthly educational events and presentations to members, participants, or other individuals seeking support and information relating to the issues and concerns of consumers of mental health services which includes, but is not limited to educational topics to be covered over the course of the year, which may include, but are not limited to:

12.3.2.1. Rights protection.

12.3.2.2. Peer Advocacy.

12.3.2.3. Recovery.

12.3.2.4. Employment.

12.3.2.5. Wellness Management.

12.3.2.6. Community Resources.

12.4. <u>Recovery Oriented Step-Up Step-Down Program</u>

12.4.1. The Contractor shall perform, or cooperate with the performance of, quality improvement or utilization review activities as are determined necessary and appropriate by the Department within timeframes reasonably specified by the Department including, but not limited to:

12.4.1.1. Meeting 75% minimum occupancy standards annually.

12.4.1.2. Successfully diverting 80% of Step-Up admissions from resulting in an inpatient stay.

12.4.1.3. Successfully facilitating Step-Down transitions with no more than 5% of individuals being readmitted to hospital level care within the ninety (90) day period, referenced in Subparagraph 3.5.5.3.

12.4.2. The Contractor shall actively and regularly collaborate with the Department to enhance contract management, improve results, and adjust program delivery and policy based on successful outcomes.

12.4.3. The Contractor may be required to provide other key data and metrics to the Department, including client-level demographic, performance, and service data.

12.4.4. Where applicable, the Contractor shall collect and share data with the Department in a format specified by the Department.

13. Quality Improvement

13.1. The Contractor shall participate in quality program reviews and site visits on a schedule provided by the Department. All contract deliverables, programs, and activities shall be subject to review during this time. These reviews shall result in a report and potential corrective action.

Exhibit A - Amendment #4

13.2. The Contractor shall participate in quality assurance reviews as follows:

13.2.1. Ensure the Department has access sufficient for monitoring of contract compliance requirements as identified in OMB Circular A-133.

13.2.2. Ensure the Department is provided with access that shall include, but is not limited to:

13.2.2.1. Data.

13.2.2.2. Financial records.

13.2.2.3. Scheduled access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.4. Unannounced access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.5. Scheduled phone access to Contractor principals and staff.

13.3. The Contractor shall perform monitoring and comprehensive quality and assurance activities including, but not limited to:

13.3.1. Participating in bi-annual quality improvement review as in Subsection 13.1.

13.3.2. Participating in ongoing monitoring and reporting based on the bi-annual review and corrective action plan submitted in conjunction with the Department and Contractor.

13.3.3. Conducting member satisfaction surveys provided by and as instructed the Department.

13.3.4. Reviewing personnel files for completeness.

13.3.5. Reviewing the complaint process.

13.4. The Contractor shall provide a corrective action plan to the Department within thirty (30) days of notification of noncompliance with contract activities.

13.5. The Contractor shall provide all requested audits to the Department no later than ten (10) days after receiving the request from the Department.

Exhibit B – Amendment #4

Method and Conditions Precedent to Payment

1. The State shall pay the Contractor an amount not to exceed the Price Limitation, Block 1.8, of the General Provisions of this Agreement, Form P-37, for the services provided by the Contractor pursuant to Exhibit A – Amendment #4, Scope of Services.
2. This Agreement is funded by:
   2.1. 100% General Funds.
3. The Contractor agrees to provide the services in Exhibit A – Amendment #4, Scope of Services in compliance with funding requirements in Section 2., above.
4. The Contractor shall submit one (1) invoice to the Department upon Governor and Council approval of this Agreement requesting a start-up payment in an amount not to exceed $149,978 for the recovery oriented step-up step-down program as stated in Exhibit A – Amendment #4, Scope of Services and Exhibit B-7 Amendment #4.
5. The Contractor shall submit one (1) invoice to the Department upon Governor and Council approval of this Agreement requesting an advance payment in an amount not to exceed $22,926 for peer support services as described in Exhibit A – Amendment #4, Scope of Services. The Contractor shall ensure:
   5.1. The invoice clearly states a request for the advance payment, to be provided at the start of each State Fiscal Year (SFY), in the amount of $22,926, referenced in Exhibit A – Amendment #4, Scope of Services,
   5.2. The invoice includes how funds will be utilized toward peer support services in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #4 and Exhibit B-6 Amendment #4.
   5.3. The Contractor shall submit monthly invoices for actual expenditures incurred in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #4 and Exhibit B-6 Amendment #4.
   5.4. The Department shall recoup the advance payment back by deducting 1/3rd of the advanced amount from the December 2020, January 2021, and February 2021 invoices, unless otherwise agreed upon by the Department.
6. Subsequent to the action in Section 5., the Department shall make monthly payments to the Contractor based upon cost reimbursement, as submitted by the Contractor to maintain services and as approved by the Department, of the Department approved budget amounts in Exhibit B-1 Budget Form through Exhibit B-6 Amendment #3 SFY 2022 Budget.
   6.1. In no event shall the total of the initial payment in Section 5. and monthly payments in Section 6. exceed the budget amounts set forth in Section 6.
   6.2. The Department will adjust monthly payments for expenditures set forth in Section 10., below and amounts paid to initiate services in Section 5., above.
7. Payment for services provided in Exhibit A – Amendment #4, Scope of Services shall be made as follows:
   7.1. The Contractor shall submit an invoice on Department supplied forms, by the tenth (10th) working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month.

7.2. The State shall make payment to the Contractor on actual expenditures, within thirty (30) days of receipt of each Department-approved invoice for Contractor services provided pursuant to this Agreement.

7.3. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to dhhs.dbhinvoicesmhs@dhhs.nh.gov, or invoices may be mailed to:

Financial Manager
Bureau of Mental Health
Department of Health and Human Services
105 Pleasant Street, Main Building
Concord, NH 03301

8. The Contractor shall provide its Revenue and Expense Budget on Budget Form A supplied by the Department, within twenty (20) calendar days of the contract effective date and then twenty (20) days from the beginning of each fiscal year thereafter.

9. The Contractor shall provide quarterly Revenue and Expense Reports on Budget Form A, within thirty (30) calendar days after the end of each fiscal quarter, defined as July 1 to September 30, October 1 to December 31, January 1 to March 31, and April 1 to June 30.

10. The Contractor shall provide supporting documentation, when required by the Department, to support evidence of actual expenditures, in accordance with the Department approved budgets in Section 6.

11. Any expenditure that exceeds the approved budgets in Section 6. shall be solely the financial responsibility of the Contractor.

12. When the contract price limitation is reached the program shall continue to operate at full capacity at no charge to the Department for the duration of the contract period.

13. Funding may not be used to replace funding for a program already funded from another source.

14. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this Contract may be withheld, in whole or in part, in the event of noncompliance with any State or Federal law, rule or regulation applicable to the services provided, or if the said services have not been completed in accordance with the terms and conditions of this Agreement.

15. Notwithstanding Paragraph 18 of the General Provisions of this Agreement P-37, an amendment limited to the budget amounts identified in Section 6., to adjust amounts within the budgets, within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of Governor and Executive Council.

16. The Department reserves the right to recover any program funds not used, in whole or in part, for the purposes stated in this Agreement from the Contractor within one hundred and twenty (120) days of the Completion Date.

17. Contractor will have forty-five (45) days from the end of each State Fiscal Year to submit to the Department final invoices for payment. Any adjustments made to a prior invoice will need to be accompanied by supporting documentation.

18. Property Standards

18.1. Insurance coverage.

18.1.1. The Contractor shall, at a minimum, provide the equivalent insurance coverage for real property and equipment acquired or improved with State funds as provided to property owned by the Contractor.

18.2. Real property.

18.2.1. Subject to the obligations and conditions set forth in this section, title to real property acquired or improved in whole or in part with State funds will vest upon acquisition in the Contractor.

18.2.2. Except as otherwise provided by State statutes or in this Agreement, real property will be used for the originally authorized purpose as long as needed for that purpose, during which time the Contractor must not dispose of or encumber its title or other interests without State approval.

18.2.3. When real property is no longer needed for the originally authorized purpose, the Contractor must obtain disposition instructions from the State. The instructions must provide for one of the following alternatives:

18.2.3.1. Retain title after compensating the State. The amount paid to the State will be computed by applying the State's percentage of participation in the cost of the original purchase (and costs of any improvements) to the fair market value of the property. However, in those situations where the Contractor is disposing of real property acquired or improved with State funds and acquiring replacement real property prior to expiration of this Agreement and any amendment thereof, the net proceeds from the disposition may be used as an offset to the cost of the replacement property.

18.2.3.2. Sell the property and compensate the State. The amount due to the State will be calculated by applying the State's percentage of participation in the cost of the original purchase (and cost of any improvements) to the proceeds of the sale after deduction of any actual and reasonable selling and fixing-up expenses. If the State appropriation funding this Agreement or any amendment thereof has not been closed out, the net proceeds from sale may be offset against the original cost of the property. When the Contractor is directed to sell property, sales procedures must be followed that provide for competition to the extent practicable and result in the highest possible return.

18.2.3.3. Transfer title to a third party designated/approved by the State. The Contractor is entitled to be paid an amount calculated by applying the State's percentage of participation in the purchase of the real property (and cost of any improvements) to the current fair market value of the property.

18.3. Equipment.

18.3.1. Equipment means tangible personal property (including information technology systems) purchased in whole or in part with State funds and that has a useful life of more than one (1) year and a per-unit acquisition cost which equals or exceeds $5,000.

18.3.2. Subject to the obligations and conditions set forth in this section, title to equipment acquired with State funds will vest upon acquisition in the Contractor subject to the following conditions:

18.3.2.1. Use the equipment for the authorized purposes of the project during the period of performance, or until the property is no longer needed for the purposes of the project.

18.3.2.2. Not encumber the property without approval of the State.

18.3.2.3. Use and dispose of the property in accordance with Paragraph 18.2.2., Paragraph 18.2.1. and Paragraph 18.3.5.

18.3.3. Use.

18.3.3.1. Equipment must be used by the Contractor in the program or project for which it was acquired as long as needed, whether or not the project or program continues to be supported by State funds, and the Contractor must not encumber the property without prior approval of the State. When no longer needed for the original program or project, the equipment may be used in other activities funded by the State.

18.3.3.2. During the time that equipment is used on the project or program for which it was acquired, the Contractor must also make equipment available for use on other projects or programs currently or previously supported by the State, provided that such use will not interfere with the work on the projects or program for which it was originally acquired. First preference for other use must be given to other programs or projects supported by the State that financed the equipment. Use for non-State-funded programs or projects is also permissible with approval from the State.

18.3.3.3. When acquiring replacement equipment, the Contractor may use the equipment to be replaced as a trade-in or sell the property and use the proceeds to offset the cost of the replacement property.

18.3.4. Management requirements. Procedures for managing equipment (including replacement equipment), whether acquired in whole or in part with State funding, until disposition takes place will, as a minimum, meet the following requirements:

18.3.4.1. Property records must be maintained that include a description of the property, a serial number or other identification number, the source of funding for the property, who holds title, the acquisition date, and cost of the property, percentage of State participation in the project costs for the Agreement under which the property was acquired, the location, use and condition of the property, and any ultimate disposition data including the date of disposal and sale price of the property.

18.3.4.2. A physical inventory of the property must be taken and the results reconciled with the property records at least once every two (2) years.

18.3.4.3. A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft must be investigated.

18.3.4.4. Adequate maintenance procedures must be developed to keep the property in good condition.

18.3.4.5. If the Contractor is authorized or required to sell the property, proper sales procedures must be established to ensure the highest possible return.

18.3.5. Disposition. When original or replacement equipment acquired with State funds is no longer needed for the original project or program or for other activities currently or previously supported by the State, except as otherwise provided by State statutes or in this Agreement, the Contractor must request disposition instructions from the State. Disposition of the equipment will be made as follows:

18.3.5.1. Items of equipment with a current per unit fair market value of $5,000 or less may be retained, sold or otherwise disposed of with no further obligation to the State.

18.3.5.2. Items of equipment with a current per-unit fair-market value in excess of $5,000 may be retained by the Contractor or sold. The State is entitled to an amount calculated by multiplying the current market value or proceeds from sale by the State's percentage of participation in the cost of the original purchase. If the equipment is sold, the State may permit the Contractor to deduct and retain from the State's share $500 or ten (10) percent of the proceeds, whichever is less, for its selling and handling expenses.

18.3.5.3. The Contractor may transfer title to the property to an eligible third party provided that, in such cases, the Contractor must be entitled to compensation for its attributable percentage of the current fair market value of the property.

18.3.5.4. In cases where the Contractor fails to take appropriate disposition actions, the State may direct the Contractor to take disposition actions.

19. Property Trust Relationship and Liens

19.1. Real property, equipment, and intangible property, that are acquired or improved with State funds must be held in trust by the Contractor as trustee for the beneficiaries of the project or program under which the property was acquired or improved. The State may require the Contractor to record liens or other appropriate notices of record to indicate that personal or real property has been acquired or improved with State funds and that use and disposition conditions apply to the property.

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

Contractor Name: Monadnock Area Peer Support Agency

Budget Request for: Peer Support Services
Project Title

Budget Period: SFY21 (7/1/20 through 6/30/21)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	$ 256,563.00		$ 256,563.00	$ -	$ -	$ -	$ -	$ -	$ -
2. Employee Benefits	$ 49,258.50		$ 49,258.50	$ -	$ -	$ -	$ -	$ -	$ -
3. Consultants	$ 8,000.00		$ 8,000.00	$ -	$ -	$ -	$ -	$ -	$ -
4. Equipment				$ -	$ -	$ -	$ -	$ -	$ -
Rental	$ 1,660.00		$ 1,660.00	$ -	$ -	$ -	$ -	$ -	$ -
Repair and Maintenance	$ 3,105.00		$ 3,105.00	$ -	$ -	$ -	$ -	$ -	$ -
Purchase/Depreciation				$ -	$ -	$ -	$ -	$ -	$ -
5. Supplies:	$ 7,780.00		$ 7,780.00	$ -	$ -	$ -	$ -	$ -	$ -
Educational				$ -	$ -	$ -	$ -	$ -	$ -
Lab				$ -	$ -	$ -	$ -	$ -	$ -
Pharmacy				$ -	$ -	$ -	$ -	$ -	$ -
Medical				$ -	$ -	$ -	$ -	$ -	$ -
Office	$ 5,995.00		$ 5,995.00	$ -	$ -	$ -	$ -	$ -	$ -
6. Travel	$ 7,997.00		$ 7,997.00	$ -	$ -	$ -	$ -	$ -	$ -
7. Occupancy	$ 39,292.00		$ 39,292.00	$ -	$ -	$ -	$ -	$ -	$ -
8. Current Expenses				$ -	$ -	$ -	$ -	$ -	$ -
Telephone	$ 4,340.00		$ 4,340.00	$ -	$ -	$ -	$ -	$ -	$ -
Postage	$ 500.00		$ 500.00	$ -	$ -	$ -	$ -	$ -	$ -
Subscriptions	$ 200.00		$ 200.00	$ -	$ -	$ -	$ -	$ -	$ -
Audit and Legal	$ 8,430.00		$ 8,430.00	$ -	$ -	$ -	$ -	$ -	$ -
Insurance	$ 10,151.00		$ 10,151.00	$ -	$ -	$ -	$ -	$ -	$ -
Board Expenses				$ -	$ -	$ -	$ -	$ -	$ -
9. Software				$ -	$ -	$ -	$ -	$ -	$ -
10. Marketing/Communications				$ -	$ -	$ -	$ -	$ -	$ -
11. Staff Education and Training	$ 3,000.00		$ 3,000.00	$ -	$ -	$ -	$ -	$ -	$ -
12. Subcontracts/Agreements				$ -	$ -	$ -	$ -	$ -	$ -
13. Other (Payroll Taxes)	$ 19,857.00		$ 19,857.00	$ -	$ -	$ -	$ -	$ -	$ -
				$ -	$ -	$ -	$ -	$ -	$ -
				$ -	$ -	$ -	$ -	$ -	$ -
				$ -	$ -	$ -	$ -	$ -	$ -
TOTAL	$ 425,127.50	$ -	$ 425,127.50	$ -	$ -	$ -	$ -	$ -	$ -

Indirect As A Percent of Direct 0.0%

DS
PS
Contractor Initials
Date 11/2/2020

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

Contractor Name: Monadnock Area Peer Support Agency

Budget Request for: Peer Support Services
Project Title

Budget Period: SFY22 (7/1/21 through 6/30/22)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	$ 349,205.00		$ 349,205.00	$ -	$ -	$ -	$ -	$ -	$ -
2. Employee Benefits	$ 87,968.00		$ 87,968.00	$ -	$ -	$ -	$ -	$ -	$ -
3. Consultants	$ 7,200.00		$ 7,200.00	$ -	$ -	$ -	$ -	$ -	$ -
4. Equipment				$ -	$ -	$ -	$ -	$ -	$ -
Rental	$ 1,680.00		$ 1,680.00	$ -	$ -	$ -	$ -	$ -	$ -
Repair and Maintenance	$ 4,387.00		$ 4,387.00	$ -	$ -	$ -	$ -	$ -	$ -
Purchase/Depreciation				$ -	$ -	$ -	$ -	$ -	$ -
5. Supplies	$ 13,500.00		$ 13,500.00	$ -	$ -	$ -	$ -	$ -	$ -
Educational				$ -	$ -	$ -	$ -	$ -	$ -
Lab				$ -	$ -	$ -	$ -	$ -	$ -
Pharmacy				$ -	$ -	$ -	$ -	$ -	$ -
Medical				$ -	$ -	$ -	$ -	$ -	$ -
Office	$ 7,680.00		$ 7,680.00	$ -	$ -	$ -	$ -	$ -	$ -
6. Travel	$ 8,994.00		$ 8,994.00	$ -	$ -	$ -	$ -	$ -	$ -
7. Occupancy	$ 61,378.00		$ 61,378.00	$ -	$ -	$ -	$ -	$ -	$ -
8. Current Expenses				$ -	$ -	$ -	$ -	$ -	$ -
Telephone	$ 4,840.00		$ 4,840.00	$ -	$ -	$ -	$ -	$ -	$ -
Postage	$ 500.00		$ 500.00	$ -	$ -	$ -	$ -	$ -	$ -
Subscriptions	$ 200.00		$ 200.00	$ -	$ -	$ -	$ -	$ -	$ -
Audit and Legal	$ 8,438.00		$ 8,438.00	$ -	$ -	$ -	$ -	$ -	$ -
Insurance	$ 11,401.00		$ 11,401.00	$ -	$ -	$ -	$ -	$ -	$ -
Board Expenses				$ -	$ -	$ -	$ -	$ -	$ -
9. Software				$ -	$ -	$ -	$ -	$ -	$ -
10. Marketing/Communications				$ -	$ -	$ -	$ -	$ -	$ -
11. Staff Education and Training	$ 3,000.00		$ 3,000.00	$ -	$ -	$ -	$ -	$ -	$ -
12. Subcontracts/Agreements				$ -	$ -	$ -	$ -	$ -	$ -
13. Other (Payroll Taxes)	$ 26,715.00		$ 26,715.00	$ -	$ -	$ -	$ -	$ -	$ -
				$ -	$ -	$ -	$ -	$ -	$ -
				$ -	$ -	$ -	$ -	$ -	$ -
				$ -	$ -	$ -	$ -	$ -	$ -
TOTAL	$ 575,106.00	$ -	$ 575,106.00	$ -	$ -	$ -	$ -	$ -	$ -
Indirect As A Percent of Direct		0.0%							

DS
PS
Contractor Initials
Date ~~11/2~~/2020

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

Contractor Name: Monadnock Area Peer Support Agency

Budget Request for: Peer Support Services: SUSD Start Up Budget
Project Title

Budget Period: SFY21

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	$ 7,000.00	$ -	$ 7,000.00	$ -	$ -	$ -	$ -	$ -	$ -
2. Employee Benefits	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
3. Consultants	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
4. Equipment	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Rental	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Repair and Maintenance	$ 2,000.00	$ -	$ 2,000.00	$ -	$ -	$ -	$ -	$ -	$ -
Purchase/Depreciation	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
5. Supplies	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Educational	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Lab	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Pharmacy	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Medical	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Office	$ 10,000.00	$ -	$ 10,000.00	$ -	$ -	$ -	$ -	$ -	$ -
6. Travel	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
7. Occupancy		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
8. Current Expenses	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Telephone	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Postage	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Subscriptions	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Audit and Legal	$ 978.00	$ -	$ 978.00	$ -	$ -	$ -	$ -	$ -	$ -
Insurance	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Board Expenses	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
9. Software	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
10. Marketing/Communications	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
11. Staff Education and Training	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
12. Subcontracts/Agreements	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
13. Other (specific details mandatory):	$ 130,000.00	$ -	$ 130,000.00	$ -	$ -	$ -	$ -	$ -	$ -
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
TOTAL	$ 149,978.00	$ -	$ 149,978.00	$ -	$ -	$ -	$ -	$ -	$ -

Indirect As A Percent of Direct 0.0%

Contractor Initials PS
Date ~~11/2~~/2020

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 MONADNOCK AREA PEER SUPPORT AGENCY is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on October 23, 1995. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 239259

Certificate Number: 0004923518

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 June A.D. 2020.

William M. Gardner
Secretary of State

CERTIFICATE OF AUTHORITY

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

1. I am a duly elected Clerk/Secretary/Officer of Monadnock Area Peer Support Agency.
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on October 8, 2020, at which a quorum of the Directors/shareholders were present and voting.
(Date)

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

is duly authorized on behalf of Monadnock Area Peer Support Agency to enter into contracts or agreements with the State
(Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30)** days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 10/9/20

Christine Nowill

Signature of Elected Officer
Name: Christine Nowill
Title: Chair

DocuSign Envelope ID: 7DFE3106-4F6D-44C5-BEB3-DD132034360D

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/1/2020

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
Clark - Mortenson Insurance
P.O. Box 606
Keene NH 03431

CONTACT NAME:
PHONE (A/C, No, Ext): 603-352-2121 FAX (A/C, No): 603-357-8491
E-MAIL ADDRESS: csr24admin@clark-mortenson.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Tudor Insurance Company	
INSURER B : Progressive Insurance Company	38628
INSURER C : Central Insurance Companies	
INSURER D : Mount Vernon Fire Insurance	
INSURER E :	
INSURER F :	

INSURED MONADNOCK29
Monadnock Area Peer Support Agency
P.O. Box 258
64 Beaver Street
Keene NH 03431

COVERAGES CERTIFICATE NUMBER: 1341059711 REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY			NPP8508203	2/5/2020	2/5/2021	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 50,000
							MED EXP (Any one person)	$ 1,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	POLICY PRO-JECT X LOC						PRODUCTS - COMP/OP AGG	$ Included
	OTHER:							$
B	AUTOMOBILE LIABILITY			058012153	1/3/2020	1/3/2021	COMBINED SINGLE LIMIT (Ea accident)	$ 500,000
	ANY AUTO						BODILY INJURY (Per person)	$
	ALL OWNED AUTOS X SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DED RETENTION $							$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			WC8624826	1/1/2020	1/1/2021	X PER STATUTE OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) N	N/A					E.L. EACH ACCIDENT	$ 100,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 100,000
							E.L. DISEASE - POLICY LIMIT	$ 500,000
D	DIRECTORS & OFFICERS			NDO2003305L	1/1/2020	1/1/2021	EACH OCCURRENCE AGGREGATE	1,000,000 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
3a state: NH

CERTIFICATE HOLDER

DHHS
129 Pleasant Street
Concord NH 03301

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Monadnock Area Peer Support Agency

Mission Statement

As a peer driven organization, it is the mission of Monadnock Peer Support to promote wellness and recovery, as defined by the individual, through intentional peer support, and to provide advocacy, educational, vocational, interpersonal, social, and spiritual opportunities to adults who utilize mental health services to learn wellness strategies, develop mutually beneficial relationships, and to support each other in attaining increased capacities for self-determination, independence, and personal growth.

The community, in conjunction with the Board of Directors, generates all rules, policy and direction with equal consideration given to the input of all members. We emphasize understanding, mutual accountability and respect for diversity in relationships. We offer groups, activities and events in which we learn more about ourselves, and how we interact with others. We utilize shared leadership, skill development, team activities and a holistic model of health to make these groups and events a valuable opportunity for growth and strength.

MONADNOCK AREA PEER SUPPORT AGENCY

FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION

Years Ended June 30, 2019 and 2018

TABLE OF CONTENTS

ROWLEY & ASSOCIATES, P.C.

CERTIFIED PUBLIC ACCOUNTANTS

46 N. STATE STREET
CONCORD, NEW HAMPSHIRE 03301
TELEPHONE (603) 228-5400
FAX # (603) 226-3532

MEMBER
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

MEMBER OF THE PRIVATE
COMPANIES PRACTICE SECTION

INDEPENDENT AUDITORS' REPORT

To the Board of Trustees
Monadnock Area Peer Support Agency
Keene, New Hampshire

We have audited the accompanying financial statements Monadnock Area Peer Support Agency (a New Hampshire nonprofit corporation), which comprises the statement of financial position as of June 30, 2019 and the related statements of activities and changes in net assets, cash flows and functional expenses for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. 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 involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Monadnock Area Peer Support Agency as of June 30, 2019 and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America

Report on Summarized Comparative Information

We have previously audited Monadnock Area Peer Support Agency financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated December 5, 2018. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2018, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The statement of activities by state approved BMHS Funds on page 14 are presented for purposes of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The 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 information is fairly stated in all material respects in relation to the financial statements as a whole.

Rowley & Associates, PC

Rowley & Associates, P.C.
Concord, New Hampshire
January 6, 2020

MONADNOCK AREA PEER SUPPORT AGENCY
STATEMENTS OF FINANCIAL POSITION
JUNE 30, 2019 WITH COMPARATIVE TOTALS, JUNE 30, 2018

ASSETS	Net Assets Without Donor Restriction	Net Assets With Donor Restriction	Total 2019	2018
CURRENT ASSETS				
Cash and cash equivalents				
Operating	$ 65,094	$ 5,000	$ 70,094	$ 67,326
BMHS & Respite refundable	1,108	-	1,108	6,036
Total cash and cash equivalents	66,202	5,000	71,202	73,362
Accounts receivable	2,559	-	2,559	5,837
Prepaid expenses	7,935	-	7,935	6,539
Total Current Assets	76,696	5,000	81,696	85,738
PROPERTY AND EQUIPMENT, at cost				
Building and improvements	128,510	-	128,510	128,510
Land	22,750	-	22,750	22,750
Equipment and vehicle	37,870	-	37,870	37,870
Total property & equipment	189,130	-	189,130	189,130
Less accumulated depreciation	102,014	-	102,014	93,708
	87,116	-	87,116	95,422
Total Assets	163,812	5,000	168,812	181,160
LIABILITIES AND NET ASSETS				
CURRENT LIABILITIES				
Accounts payable	11,168	-	11,168	7,915
Accrued expenses	6,439	-	6,439	6,585
Long-term debt, current portion	7,565	-	7,565	7,342
Total Current Liabilities	25,172	-	25,172	21,842
LONG-TERM LIABILITIES				
Refundable advance, Respite	-	-	-	2,642
Refundable advance, BMHS	1,108	-	1,108	3,394
Long-term debt, net of current portion	19,040	-	19,040	26,398
Total Long-Term Liabilities	20,148	-	20,148	32,434
NET ASSETS				
Without donor restriction	118,492	-	118,492	118,024
With donor restriction	-	5,000	5,000	8,860
Total Net Assets	118,492	5,000	123,492	126,884
Total Liabilities and Net Assets	$ 163,812	$ 5,000	$ 168,812	$ 181,160

See Independent Auditors' Report and Notes to Financial Statements

MONADNOCK AREA PEER SUPPORT AGENCY
STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS
FOR THE YEAR ENDED JUNE 30, 2019 WITH
COMPARATIVE TOTALS FOR THE YEAR ENDED JUNE 30, 2018

	Net Assets Without Donor Restriction	Net Assets With Donor Restriction	2019	2018
REVENUE AND SUPPORT				
State Grant income	$ 254,930	$ -	$ 254,930	$ 279,590
Contributions	10,451	-	10,451	29,623
Interest income	64	-	64	47
Rental income	-	-	-	1,750
Program & other income	14,853	-	14,853	1,238
Total revenue and support	280,298	-	280,298	312,248
Net assets released from donor imposed restrictions	3,860	(3,860)	-	-
EXPENSES				
Program	268,022	-	268,022	274,671
Management & general	15,318	-	15,318	21,533
Fundraising	350	-	350	1,079
Total expenses	283,690	-	283,690	297,283
Increase (decrease) in net assets	468	(3,860)	(3,392)	14,965
Net assets, beginning of year	118,024	8,860	126,884	111,919
Net assets, end of year	$ 118,492	$ 5,000	$ 123,492	$ 126,884

See Independent Auditors' Report and Notes to Financial Statements

MONADNOCK AREA PEER SUPPORT AGENCY
STATEMENTS OF CASH FLOWS
YEARS ENDED JUNE 30, 2019 AND 2018

	2019	2018
CASH FLOWS FROM OPERATING ACTIVITIES		
Increase (decrease) in net assets	$ (3,392)	$ 14,965
Adjustments to reconcile excess of revenue and support over expenses to net assets provided by operating activities		
Depreciation	8,306	8,306
(Increase) decrease in operating assets		
Accounts receivable	3,278	2,364
Prepaid expenses	(1,396)	(1,843)
Increase (decrease) in operating liabilities		
Accounts payable	3,253	(523)
Accrued expenses	(146)	(1,597)
Security deposit	-	(900)
Refundable advance, Respite	(2,642)	(4,443)
Refundable advance, BMHS	(2,286)	(11,207)
Net Cash Provided By Operating Activities	4,975	5,122
CASH USED BY INVESTING ACTIVITIES,		
Purchases of property and equipment	-	-
CASH USED BY FINANCING ACTIVITIES,		
Repayments of long-term notes payable	(7,135)	(6,883)
Net Decrease in Cash and Cash Equivalents	(2,160)	(1,761)
Cash and Cash Equivalents, Beginning of Year	73,362	75,123
Cash and Cash Equivalents, End of Year	$ 71,202	$ 73,362

SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION

Cash paid during the year for:

	2019	2018
Interest	$ 1,963	$ 1,980

See Independent Auditors' Report and Notes to Financial Statements

MONADNOCK AREA PEER SUPPORT AGENCY
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2019 WITH
COMPARATIVE TOTALS FOR THE YEAR ENDED JUNE 30, 2018

	Program Services	Management & General	Fundraising	Total 2019	Total 2018
Wages	$ 156,768	$ -	$ -	156,768	$ 150,201
Employee benefits	18,371	-	-	18,371	22,052
Payroll taxes	12,266	-	-	12,266	11,590
Outside services	-	-	-	-	11,741
Supplies and office expense	3,697	411	-	4,108	10,819
Telephone	3,104	345	-	3,449	5,020
Utilities	11,666	1,296	-	12,962	12,976
Insurance	6,410	712	-	7,122	7,247
Repairs and maintenance	2,619	291	-	2,910	3,256
Interest expense	1,767	196	-	1,963	1,980
Food	2,247	250	-	2,497	2,052
Professional fees	-	11,201	-	11,201	16,561
Other expenses	1,038	-	-	1,038	956
Travel	18,412	-	-	18,412	1,247
Training	7,994	-	-	7,994	18,980
Depreciation	8,306	-	-	8,306	8,306
Property taxes	2,088	232	-	2,320	1,526
Equipment rental	2,615	291	-	2,905	3,576
Vehicle expense	7,813	-	-	7,813	4,850
Postage	842	94	-	935	1,268
Advertising	-	-	350	350	1,079
	$ 268,022	$ 15,318	$ 350	$ 283,690	$ 297,283

See Independent Auditors' Report and Notes to Financial Statements

MONADNOCK AREA PEER SUPPORT AGENCY
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 1 NATURE OF ORGANIZATION

Monadnock Area Peer Support Agency (MAPSA) is a nonprofit organization incorporated, that promotes peer support through educations, vocational, interpersonal, social and spiritual opportunities for consumers of mental health services and by facilitating recovery through peer support, empowerment and personal growth. The organization operates in Keene, New Hampshire.

The revenue of the Organization is derived primarily from a contract with the State of New Hampshire Department of Health and Human Services.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES

The summary of significant accounting policies of MAPSA is presented to assist in understanding the Organization's financial statements. The financial statements and notes are representations of MAPSA's management who is responsible for their integrity and objectivity. These accounting policies conform to generally accepted accounting principles and have been consistently applied in the preparation of the financial statements.

Basis of Accounting

The financial records for the Organization are maintained on the accrual basis of accounting. Consequently, revenues are recognized when earned and expenses are recognized when incurred.

Basis of Presentation

The organization reports information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions.

Net assets without donor restrictions - These net assets generally result from revenues generated by receiving contributions that have no donor restrictions, providing services, and receiving interest from operating investments, less expenses incurred in providing program-related services raising contributions, and performing administrative functions.

Net assets with donor restrictions - These net assets result from gifts of cash and other assets that are received with donor stipulations that limit the use of the donated assets, either temporarily or permanently, until the donor restriction expires, that is until the stipulated time restriction ends or the purpose of the restriction is accomplished, the net assets are restricted.

MONADNOCK AREA PEER SUPPORT AGENCY
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Cash equivalents

For purposes of the Statements of Cash Flows, the Organization considers all highly liquid investments (short-term investments such as certificates of deposits and money market accounts) with an initial maturity of three months or less to be cash equivalents. There were no cash equivalents as of June 30, 2019 and 2018.

Support and revenue

The Organization receives most of its revenue in the form of grants from the State of New Hampshire Department of Health and Human Services Division of Behavioral Health (BMHS).

Property and Equipment

Property and equipment are carried at cost. Depreciation is calculated on the straight-line method over the estimated useful lives of the assets. Minor repairs and maintenance are expensed as incurred. Major repairs and renovations which materially extend the useful lives of the assets are capitalized. Major classes of depreciable assets and their estimated lives are as follows:

Description	Years
Building improvements	10-39
Equipment	5-7
Vehicle	5

Depreciation expense was $8,306 and $8,306 for the years ended June 30, 2019 and 2018, respectively.

Function Allocation of items

The costs of providing various program, management and rental services have been summarized in the statement of activities. Accordingly, certain costs have been allocated among the programs.

Cost Allocation

Certain categories of expenses are attributable to more than one program or supporting function and are allocated on a reasonable basis that is consistently applied. The expenses that are allocated are compensation and insurances, which are allocated on the basis of estimates of time and effort; occupancy costs, which are allocated on a square footage basis; and supplies and telephone costs, which are allocated based on usage studies.

MONADNOCK AREA PEER SUPPORT AGENCY
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Advertising

The Organization expenses advertising costs as incurred. MAPSA had advertising costs of $350 and $1,079 as of June 30, 2019 and 2018, respectively.

Use of estimates

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

Income taxes

The Organization has been notified by the Internal Revenue Service that it is exempt from federal income tax under Section 501(c) (3) of the Internal Revenue Code. The Organization is further classified as an organization that is not a private foundation under Section 509(a)(3) of the Code. The most significant tax positions of the Organization are its assertion that it is exempt from income taxes and its determination of whether any amounts are subject to unrelated business tax (UBIT). The Organization follows guidance of Accounting Standards Codification (ASC) 740, Accounting for Income Taxes, related to uncertain income taxes, which prescribes a threshold of more likely than not for recognition of tax positions taken or expected to be taken in a tax return. All significant tax positions have been considered by management. It has been determined that it is more likely than not that all tax positions would be sustained upon examination by taxing authorities. Accordingly, no provision for income taxes has been recorded.

In-Kind Contributions

In-kind contributions are recorded at fair market value and recognized as revenue in the accounting period in which they are received. Volunteers, mainly board members, donate time to MAPSA's program services. These services are not included in donated materials and services because the value has not been determined.

Donated Materials and Services

It is the intent of MAPSA to record the value of donated goods and services when there is an objective basis available to measure their value. For the years ended June 30, 2019 and 2018, there were no donated goods or services.

MONADNOCK AREA PEER SUPPORT AGENCY
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Subsequent Event

Management has evaluated subsequent events through January 6, 2020, the date on which the financial statements were available to be issued to determine if any are of such significance to require disclosure. It has been determined that no subsequent events matching this criterion occurred during this period.

Comparative Financial Information

The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended June 30, 2018, from which the summarized information was derived.

Financial Instruments

The carrying value of cash and cash equivalents, accounts receivable, prepaid expenses, accounts payable and accrued expenses are stated at carrying cost at June 30, 2019 and 2018, which approximates fair value due to the relatively short maturity of these instruments.

New Accounting Pronouncement

During the year ended June 30, 2019, the Organization adopted the requirements of the Financial Accounting Standards Board's Accounting Standards Update No. 2016- 14— Not-for-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities (ASU 2016- 14). This Update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return between not-for-profit entities. A key change required by ASU 2016-14 is the net asset classes used in these financial statements. Amounts previously reported as unrestricted net assets are now reported as net assets without donor restrictions and amounts previously reported as temporarily restricted net assets and permanently restricted net assets are now reported as net assets with donor restrictions.

The accompanying information from the 2018 financial statements has been restated to conform to the 2019 presentation and disclosure requirements of ASU 2016-14.

Reclassifications

Certain financial statement and note information from the prior year financial statements has been reclassified to conform with current year presentation format.

MONADNOCK AREA PEER SUPPORT AGENCY
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 3 REVIEW BY OUTSIDE AGENCIES

The activities of the Organization are subject to examination for compliance with the requirements of the granting agency.

NOTE 4 CONCENTRATION OF CREDIT RISK

The Organization maintains cash balances in several accounts at a local bank. These accounts are insured by the Federal Deposit Insurance Corporation up to $250,000. At June 30, 2019 and 2018 the Organization had no uninsured cash balances.

The Organization earned a substantial portion of its revenue from the State of New Hampshire. The State of New Hampshire contract accounted for approximately 90% and 89% of total revenue in the years ended June 30, 2019 and 2018, respectively.

NOTE 5 RETIREMENT PLAN

The Organization implemented an employee IRA plan for full time employees. The State of New Hampshire approves the allocation of retirement funds and reimburses MAPSA for the expenses. Eligible employees do not make salary reduction contributions. There were contributions of $1,000 and $1,000 for the years ended June 30, 2019 and 2018, respectively.

NOTE 6 REFUNDABLE BMHS AND RESPITE ADVANCES

Under the terms of the service agreement with the Bureau of Behavioral Health (BMHS), a division of the State of New Hampshire's Department of Health and Human Services, MAPSA is required to segregate amounts received in excess of allowable expenses. Funds set aside in accordance with this requirement amounted to $1,108 and $3,394 for the years ended June 30, 2019 and 2018, respectively.

The Organization is also required to segregate amounts received in excess of allowable expenses specifically for crisis respite. Funds set aside in accordance with this requirement amounted to $0 and $2,642 for the years ended June 30, 2019 and 2018, respectively.

NOTE 7 COMPENSATED ABSENCES

Employees of the Organization are entitled to paid time off depending on job classification, length of services and other factors. The Organization had no accrued time earned, but unpaid as of June 30, 2019 and 2018, respectively.

MONADNOCK AREA PEER SUPPORT AGENCY
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 8 FAIR VALUE MEASUREMENTS

In accordance with FASB ASC 820, *Fair Value Measurements and Disclosures*, the Organization is required to disclose certain information about its financial assets and liabilities. Fair values of assets measured on a recurring basis at June 30 were as follows:

	Fair Value	Quoted Prices in Active Markets For Identical Assets (Level 1)	Significant other Observable inputs (Level 2)
2019			
Accounts Receivable	$ 2,559	$ -	$ 2,559
2018			
Accounts Receivable	$ 5,837	$ -	$ 5,837

The fair value of accounts receivable are estimated at the present value of expected future cash flows.

NOTE 9 REAL ESTATE RENTAL

The Organization derives revenue from renting a portion of its building under short term rental arrangements.

Total rental income related was $0 and $1,750 for the years ended June 30, 2019 and 2018, respectively.

NOTE 10 LONG-TERM DEBT

Long-term debt consisted of the following as of June 30:	2019	2018
Mortgage payable to a bank in monthly installments of $763 including principal and interest beginning December 1999. The interest is 6.875%. The note is secured by a mortgage on real estate and Matures September 2022.	$ 26,605	$ 33,740
Less current portion	7,565	7,342
	$ 19,040	$ 26,398

The maturities on long-term debt as of June 30 are as follows:

2020	$ 7,565
2021	8,102
2022	8,676
Thereafter	2,262
	$26,605

MONADNOCK AREA PEER SUPPORT AGENCY
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 11 BOARD DESIGNATED NET ASSETS

The Organization has no board designated net assets as of June 30, 2019.

NOTE 12 NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restriction consisted of the following as of June 30:

	2019	2018
Alt Life funds	$ -	$ 3,860
NHCF funds	5,000	5,000
	$ 5,000	$ 8,860

NOTE 13 LIQUIDITY & AVAILABILITY OF FINANCIAL ASSETS

The Organization has a policy to structure its financial assets to be available as its general expenditures, liabilities and other obligations come due. The Organization's primary source of support is grants. That support is held for the purpose of supporting the Organization's budget. The Organization had the following financial assets that could be readily made available within one year to fund expenses without limitations:

	2019	2018
Cash and cash equivalents	$ 71,202	$ 73,362
Accounts receivable	2,559	5,837
	73,761	79,199
Less amounts:		
Funds required to be maintained under State agreement		
BMHS:	1,108	3,394
Crisis Respite:	-	2,642
	1,108	6,036
	$ 72,653	$ 73,163

MONADNOCK AREA PEER SUPPORT AGENCY
STATEMENT OF ACTIVITIES
BY STATE APPROVED BMHS FUNDS
FOR THE YEAR ENDED JUNE 30, 2019

	State Approved BMHS Funds	State Approved Respite Funds	Non-BMHS Funds	Total
REVENUE AND SUPPORT				
Grant income, current year	$ 194,772	$ 55,230	$ -	250,002
Grant income, prior year release	2,286	2,642	-	4,928
Contributions	-	-	10,451	10,451
Interest income	-	-	64	64
Program & other income	-	-	14,853	14,853
Total support and revenue	197,058	57,872	25,368	280,298
EXPENSES				
Wages	119,032	37,736	-	156,768
Employee benefits	15,945	2,426	-	18,371
Payroll taxes	9,385	2,881	-	12,266
Supplies and office expense	2,371	1,648	89	4,108
Telephone	2,091	1,358	-	3,449
Utilities	7,724	4,899	339	12,962
Insurance	3,719	3,381	22	7,122
Repairs and maintenance	2,722	188	-	2,910
Interest expense	1,963	-	-	1,963
Food	1,431	-	1,066	2,497
Professional fees	6,364	2,453	2,384	11,201
Other expenses	420	-	618	1,038
Travel	3,888	3	14,521	18,412
Training	2,981	-	5,013	7,994
Depreciation	-	-	8,306	8,306
Property taxes	-	-	2,320	2,320
Equipment-rental	1,723	420	762	2,905
Vehicle expense	7,601	212	-	7,813
Postage	668	267	-	935
Advertising	350	-	-	350
Total expenses	190,378	57,872	35,440	283,690
Net Increase (Decrease) in Net Assets	6,680	-	(10,072)	(3,392)
BMHS funds allowed for debt reduction	(6,680)	-	6,680	-
Net assets, beginning of year	-	-	126,884	126,884
Net assets, end of year	$ -	$ -	$ 123,492	$ 123,492

See Independent Auditors' Report and Notes to Financial Statements

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Monadnock Area Peer Support Agency
Board of Directors

March 2020

Chair
Melissa Chickering
25 Prospect Street
Keene, NH 03431
(C) 603-209-0227
E-mail:
mchickering@antioch.edu
Joined: 5/2017
Term #: 2
Term Length: 2 years
Expiration: 5/2021

TREASURER
Christine Nowill
112 PLeasant St.
Marlborough, NH 03455
Cell: 603-313-2720
christine@mds-nh.org
Joined: 2/2020
Term #: 1
Term Length: 2 years
Expiration: 2/2022

SECRETARY
Scott Folson
44 Heritage Way
Milford, NH 03055
(C) 603-499-1116
Keene, NH 03431
scottfolson@rocketmail.com
Joined: 4/2018
Term #:1
Term Length: 2 years
Expiration: 4/2020

AT-LARGE BOARD MEMBERS

Martha Barnard
141 George Street, Apt. B
Keene, NH 03431
(C) 512-808-6215
mbarnard@antioch.edu
Joined: 4/2018
Term #:1
Term Length: 2 years
Expiration: 4/2020

Joe Frankel
85 River Street
Keene, NH 03431
(C) 516-776-0908
E-mail: jmf117@yahoo.com
Joined: 9/2017
Term #: 2
Term Length: 2 years
Expiration: 9/2021

Renee Sangermano
14 Nutting Road
Jaffrey, NH 03452
Cell: 603-562-8994
rsangermano@townofjaffrey.co
m
Joined: 2/2020
Term #: 1
Term Length: 2 years
Expiration: 2/2022

Daria Levy
39 N. Lincoln Street, Apt. 2
Keene, NH 03431
(C) 603-757-3943
Joined: 9/2017
Term #: 1
Term Length: 2 years
Expiration: 4/2020

Amanda Pirner
59 Maple Avenue Apt. 5
Keene, NH 03431
Cell 301-455-6106
amandapirner@gmail.com
Joined: 2/2020
Term #: 1
Term Length: 2 years
Expiration: 2/2022

EXECUTIVE DIRECTOR
Peter Starkey
88 Howard Street
Keene, NH 03431
(C) 603-303-7247
pstarkey@monadnockpsa.org
Joined: 1/2018

Peter Starkey

EXPERIENCE

Executive Director, Monadnock Peer Support
Keene, NH | January 2018 - Present

•Direct all aspects of operations; including human resources, marketing, budgeting, utilization review, cost control, quality improvement, community/government relations, and risk management/safety.
•Advocate on behalf of agency constituents to local, state, and federal representatives and government agencies
•Supervise recruitment, training, and professional development of all staff
•Collaborate with staff and membership to develop & promote programming
•Responsible for financial stability and development of growth strategies from multiple revenue streams, including grant funding, fundraising, event management, and annual appeal
•Cultivate relationships with external audiences to form partnerships
•Accounting and fiscal management included preparation and presentation of financial reports for Board of Directors and governmental entities.
•Serve as media and community spokesperson:

Student Affairs Coordinator, School for International Training
Brattleboro, VT | August. 2014 - December 2017

•Assessment of global risks (civil unrest, epidemics, terrorism) from various sources for a portfolio of worldwide programs in order to ensure student safety
•Manage undergraduate student mental health and wellbeing, formulate wellness plans, and work with students and staff when issues of psychological distress arise
•Coordinate crisis management response, in collaboration with designated staff and senior leadership, while communicating appropriate measures being executed to stakeholders (parents and schools)
•Primary point of contact as an approachable resource to parents and students for all wellness related questions, concerns, and issues
•Collaborate across the academic institution to design and implement specific resources and trainings to meet the needs of international staff and diverse students
•Aptitude toward identifying opportunities for improvement and utilizing current technology, in an effort to create more streamlined and efficient communication
•Overhaul policies & procedures to establish standards of excellence for the college

EDUCATION

George Washington University, Washington, DC
B.A. International Affairs - Aug. 2010- May 2014

SKILLS

•Policy development
•Government relations
•Budget development
•Fundraising/Grant Writing
•Crisis/Risk Management
•Staff development & training
•Conflict Resolution
•Microsoft Office and Google
•Database management
•Social Media (Facebook, Twitter, Instagram)

LEADERSHIP

Member, Board of Directors
NH Peer Voice

Past-President,
Greater Keene Rotaract

TEDx Speaker,
TEDxKeene 2018

50 Under $50K Honoree
BuzzFeed/Bank of America

2019 Trendsetter Award
The Keene Sentinel

JUDE GROPHEAR
[redacted]

WORK EXPERIENCE:

Advanced Level WRAP (Wellness Recovery Action Plan) Facilitator, October 2016 to Present

- Provides WRAP trainings through NH Peer Voice to employees of NH Peer Support Agencies and NH Community Mental Health Centers, including but not limited to WRAP Seminar I and WRAP Seminar II (Facilitator) Trainings
- Provides ongoing technical assistance to participants trained in WRAP/WRAP Facilitation

Organizational Intentional Peer Support (IPS) Trainer
Monadnock Area Peer Support Agency (MPS), Keene, NH, August 2016 to Present

- Provides IPS training to employees of MPS
- Provides IPS training through MPS to community members in the Monadnock Region and Southwest NH

Program Director
Monadnock Peer Support, Keene, NH, November 2011 to present

- Part of the Administrative Team providing logistical supervision and direction for Wellness Programs including administrative and operational support
- Utilizes organizational, logistical, and interpersonal skills to work effectively with diverse teams and actively engage with other team members, community partners, and external audiences.
- Actively supports recovery, promotes wellness, ensures sustainability in operational functions.
- Designs and implements innovative peer wellness programs to serve those in the greater Monadnock and Southwest NH community.
- Facilitates groups utilizing IPS, WRAP and Hearing Voices Network-USA peer support modalities

Co-Director
Elm City Child Care Keene, NH, February 2011 to November 2011

- Promoted from Lead Teacher to Director in February 2011.
- Acted as sole Director until Co-Director was hired in June 2011.
- Handled principle responsibilities for re-licensing with New Hampshire Child Care Licensing Unit through June 2011 (new license received June 2011).
- Supervised and supported 9 staff members, including Infant, Toddler and Preschool teams.
- Maintained interactive and collaborative relationships with families.

EDUCATION:

Bachelor of Science in Early Childhood Education
Bachelor of Arts in English; Minor: French
Keene State College, Keene, NH, December 2005

- International Exchange: Campus International, Tulon, France, Summer 2001

CERTIFICATIONS:

- CPR (2018-present) and Narcan (2017-present) certified
- Advanced Level WRAP (Wellness Recovery Action Plan) Facilitator, October 2016-Present
- Intentional Peer Support (IPS) Organizational Trainer, August 2016-Present
- Hearing Voices Network-USA Facilitator, April 2015-Present
- NH Teacher Certification in Early Childhood Education, 2005-Present

COMMUNITY INVOLVEMENT:

- Performer/Singer, Various Local Venues, 2004-Present
- Panelist, "The S Word" Screening and Panel with Lisa Klein, Film Director, 2019
- Presenter, Annual Peer Support Agency Conference, 2018
- Presenter, Alternatives Conference, 2018
- Presenter, World Hearing Voices Congress, 2017
- Presenter, Academic Excellence Conference at Keene State College, 2004, 2005
- Volunteer, Cohen Center for Holocaust Studies, Keene State College, 2003-2004

MEMBERSHIPS, HONORS & AWARDS:

- Recipient, NAMI (National Alliance on Mental Illness) NH Peer Support Award, 2018
- Recipient, Monadnock Area Peer Support Agency Great Commitment to IPS Award, 2016
- Recipient, New Hampshire Charitable Foundation Grant, 2016
- Recipient, Monadnock Area Peer Support Agency Excellence Award, 2013
- Member, National Association For the Education of Young Children, 2008-Present
- Member, *Sigma Tau Delta* (National English Honor Society) 2002-Present
- Member, National Society for Collegiate Scholars 2001-Present
- Recipient, New Hampshire Parent Teacher Association Scholarship December 2004
- Recipient, William D. Eppes Arts and Humanities Award Spring 2003
- Recipient, Charles Hilderbrant Holocaust Studies Award Spring 2003
- Recipient, Teacher Education Scholarship (KSC) 2003-2005

ADDITIONAL SKILLS:

- Knowledge of Microsoft Word, Excel, Publisher, PowerPoint, AppleWorks, iPhoto, iTunes
- Basic French

Sarah Harris

[redacted]

RECENT EXPERIENCE:

2017-Present Monadnock Area Peer Support Agency Keene, NH
Support staff, Group Facilitator

- Provide and practice Intentional Peer Support (IPS)
- Facilitate support groups
- Provide assistance to administrative team as needed
- Resolve conflicts with members using skill sets learned here
- To welcome visitors, and new members
- Attend all trainings and meetings
- Proficient office skills such as phone, fax, Microsoft Office, Sling, Google Apps

2014-2016 Cheshire Medical Center/Dartmouth Hitchcock Keene, NH
RN- Specialty Medicine- Float Pool (per diem)

- Work with doctor, LNA, patient to coordinate care
- Medication refills via fax, and phone calls to pharmacy
- Maintain and update patient records as needed
- Prepare patients (gather vital signs, update current medications, and allergies)
- Phone triage

2013-2014 Cheshire Medical Center/Dartmouth Hitchcock Keene, NH
RN- Farnum Rehabilitation

- Administer oral and IV medication
- Resident assessment
- Wound treatment
- FIM scoring with charting
- Work with PT, OT, ST to help patient regain or maintain highest functioning level

2010-2013 Genesis Healthcare Keene, NH
LPN

- Administer medication
- Resident assessment
- Wound treatment
- Provide end of life care

EDUCATION:

Associate of Science Degree in Nursing, 2013
Joseph School of Nursing 2013
Nashua, NH

Practical Nurse License, 2010
St. Joseph School of Nursing 2010
Keene, NH

CERTIFICATIONS:
IV certification class, IPS, 101, IPS Core, Wrap Overview, Wrap Facilitator, CPR, Facilitator Training, CPR, Narcan Training

CLINICAL TRAINING:
Apply the nursing process for patients in a variety of settings including Operating Room, Intensive Care Unit, Medical-Surgical, Labor and Delivery, Orthopedics, and Neurology

Karen Carrien

EDUCATION

Bachelor of Arts in History (Specialization in American History)
May 2017
Minor in Writing
GPA: 3.22
Keene State College, Keene, NH

RELEVENT EXPERIENCE:

Assistant Program Director, *Monadnock Area Peer Support Agency, Keene, NH* July 2019-Present

- Assist Program Director in any tasks of greater or lesser responsibility
- Support management in developing and implementing policies and procedures
- Designed programs and educational clubs for large and small groups of students

Program Assistant II, *Brattleboro Retreat, Brattleboro, VT* November 2017-Present

- Organize and maintain patient charts and paperwork
- Facilitate communication between parents and their children as well as doctors and social workers
- Order, stock, and organize supplies to facilitate program development

Presentation Team Member, *Target, Keene, NH* May 2017-November 2017

- Set sections of the store for seasonal change, product placement, and new product both independently and as a team
- Aid guests by answering questions and pulling items while providing fast and friendly service
- Be cross-trained in cashiering and soft lines work centers

Tour Guide, *Historical Society of Cheshire County, Keene, NH* June-August 2016

- Educated the public on early colonial tavern culture, and adjusted presentations based on the interests, size, and age of groups
- Transcribed and analyzed an 1800's account book into Microsoft Excel and Word
- Assisted in the measuring, photographing, and archiving of various objects into the collection of the Historical Society of Cheshire County
- Oversaw the monetary exchanges of the shop inside the museum as well as during other events

Student Technology Assistant, *Office of Disability Services, Keene State College, Keene, NH* 2014-2017

- Greet students at the front desk and assist with scheduling appointments and other student needs
- Train students on the use of assistive technology to facilitate their learning
- Write technical guides for utilizing advanced assistive technology programs such as ABBYY, Echo Livescribe Pen, Read and Write Gold

RELEVENT SKILLS:

- Proficient in assistive technology applications as well as Microsoft Word, Excel, and Power Point

- Strong writing, spelling, and editing skills
- Great attention to detail and organization
- Ability to multitask and operate in stressful conditions
- Excellent customer service skills

Kyle Pence

Kyle Pence
[redacted]

Experience

11-2017 – Present

Respite curator, Support staff, Driver Monadnock area Peer support agency

Talk to respite guest
Answer phones
Support members and peers in day to day activities
Take members and staff to and from MPS in van

4-15-2015 – 11-2015

Flooring Associate, Home Depot

Sold flooring installations including hardwood, laminate, tile, and carpet
Assisted customers with selection and purchasing of merchandise
Answered any and all questions regarding the installation process
Merchandised products and implemented cap designs

Education

June 1987

HS diploma, moorestown HIgh School

June 2001

De Anza college

Training

- IPS 101
- IPS CORE
- WRAP OVERVIEW
- NARCAN TRAINING
- CPR CERTIFIED
- DEFENSIVE DRIVING

Jim McLaughlin

EXPERIENCE

Monadnock Peer Support, Keene, NH— *Respite Manager*

February 2014 - PRESENT

-Supervise planning, scheduling, and supervision of staff for Peer Respite program
-Oversee Peer Respite budget and financial transactions
-Develop quality assurance strategies for all Peer Respite programming
-Represent the agency at community meetings and/or events
-Submit required documentation pertaining to Peer Respite as mandated in state contract
-Collaborate with Administrative Team on agency priorities and goals
-Certified in Intentional Peer Support, Wellness Recovery Action Plan, and a group facilitator

Massachusetts Department of Public Health, Boston, MA— *Training Supervisor*

April 1989 - July 1994

-Managed quality assurance of statewide HIV antibody counseling and testing sites
-Provided initial and ongoing training support and supervision for 10 counselors and 40 direct service providers
-Administered contract for counselor training with Latino Health Network
-Authored the Massachusetts Counseling and Trainings Testing policy for adolescents at risk for HIV infection

Project RAP, Beverly, MA— *Shelter Assistant Director*

May 1983- August 1987

-Supported the director in all aspects of an emergency shelter for adolescents
-Supervised 6 direct service providers and 25 volunteers
-Managed the shelter monthly budget and finance documents

EDUCATION

Centre College, Danville, Kentucky — *B.S. Psychology*
August 1970 - May 1974

Antioch University New England, Keene, NH— *M.A. Clinical Mental Health Counseling*
August 20XX - May 20XX

OTHER RELEVANT EXPERIENCE

1991- 1994- National Trainer, Westover Consultants, Washington, DC
1983-1984- Home Health Aide, Boston Visiting Nurses, Boston, MA
1981-1982- Case Manager- Tri-Town Council, Topsfield, MA
1977-1980- Counselor- Patchwork (Shelter for abused kids), Charleston, WV

Douglas Burdick
[redacted]

Experience

5/2017 – Present

Driver, support staff, Monadnock area Peer support agency
Provides transportation to and from Monadnock Peer Support from within Cheshire County
Fill out paperwork, fill out mileage log
Get gas as needed
Answer phone calls
Give support to members and peers

12/90 – 11/2007

window clerk, united states postal office
Wait on the public selling stamps, mailing packages, selling a wide variety of mailing services to the public
Sort and distribute mail to the mail carriers

Education

06/1991

Hs diploma, Keene High school, keene, nh

Skills

- Retail Sales
- Experienced customer service with the public
- Experienced Driver
- *Intentional Peer Support 101*
- *Intentional Peer Support-Core Training*
- *Safe Driving Skills*
- *Wellness Recovery Action Plan (WRAP)*
- *Suicide Prevention*

JUSTIN YATES CROCKETT

[redacted]

{Education}

COMMONWEALTH SCHOOL 151
Commonwealth Avenue Boston, Massachusetts
02167 (INDEPENDENT SCHOOL Grades 9
through 12) HIGH SCHOOL DIPLOMA

UNIVERSITY OF VERMONT
Burlington, VT 05049 ONE and a HALF
YEARS COMPLETED

{Work Experience}

STARBUCKS COFFEE
474 Woodward Street
Newton, Massachusetts

PHOENIX HOUSE
Roxbury Street Keene,
New Hampshire

{Certifications}

CERTIFIED RECOVERY COACH (January 2016)
CERTIFIED in CPR (August 2019)

INTENTIONAL PEER SUPPORT
WELLNESS RECOVERY ACTION PLAN FACILITATOR TRAINING

CONTRACTOR NAME

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Peter Starkey	Executive Director	60,000	100	60,000
Jude Grophear	Wellness Program Director	43,000	72	31,000
Jim McLaughlin	Overnight Program Director	42,000	100	42,000
Karen Carrien	Operations Director	40,000	100	40,000
Kyle Pence	Residential Manager	40,000	100	40,000
Justin Crockett	Overnight Peer	33,000	100	33,000
VACANT	Overnight Peer	33,000	100	32,000
VACANT	Overnight Peer	33,000	100	32,000
Doug Burdick	Peer/Driver	8000	100	8000
Sarah Harris	Executive Assistant	9000	100	9000

State of New Hampshire
Department of Health and Human Services
Amendment #4 to the Peer Support Services Contract

This 4th Amendment to the Peer Support Services contract (hereinafter referred to as "Amendment #4") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and On the Road to Recovery, Inc., (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 377 South Willow Street, Suite B2-4, Manchester, NH 03103.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 29, 2016, (Item #23), as amended on June 20, 2018, (Item #33B), June 19, 2019, (Item #28), and on June 24, 2020, (Item #27), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, and Exhibit C-1, Revisions to General Provisions, Paragraph 3, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to increase the price limitation and modify the scope of services to support continued delivery of these services; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:

   $3,166,471.
2. Delete Exhibit A - Amendment #2, Scope of Services, in its entirety and replace with Exhibit A – Amendment #4, Scope of Services, which is attached hereto and incorporated by reference herein.
3. Delete Exhibit B, Amendment #2, Methods and Conditions Precedent to Payment in its entirety and replace with Exhibit B – Amendment #4, Methods and Conditions Precedent to Payment, which is attached hereto and incorporated by reference herein.
4. Delete Exhibit B-5 - Amendment #3, SFY 2021 Budget, in its entirety and replace with Exhibit B-5 – Amendment #4, SFY 2021 Budget, which is attached hereto and incorporated by reference herein.
5. Delete Exhibit B-6 - Amendment #3, SFY 2022 Budget in its entirety and replace with Exhibit B-6 – Amendment #4, SFY 2022 Budget, which is attached hereto and incorporated by reference herein.
6. Add Exhibit B-7 – Amendment #4, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #4 remain in full force and effect. This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

11/2/2020
Date

DocuSigned by:
Katja Fox
ED9D05B04C63442
Name: Katja Fox
Title: Director

On the Road to Recovery, Inc.

10/30/2020
Date

DocuSigned by:
Kyle Winston
97A00F092B8044E...
Name: Kyle Winston
Title: Board president

New Hampshire Department of Health and Human Services
Peer Support Services

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

11/2/2020

Date

DocuSigned by:

Name: Catherine Pinos
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _______________ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Exhibit A - Amendment #4

Scope of Services

1. **Provisions Applicable to All Services**

1.1. The Contractor shall submit a detailed description of the language assistance services they shall provide to persons with limited English proficiency to ensure meaningful access to their programs and services within ten (10) days of the contract effective date.

1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire (NH) General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

1.3. The Contractor shall provide peer support services in accordance with NH Administrative Rule He-M 400, Community Mental Health, Part 02, Peer Support, referred to as He-M 402, that:

1.3.1. Increase quality of life for individuals living with mental illness in NH.

1.3.2. Increase hope for and belief in the possibility of recovery for individuals living with mental illness in NH.

1.3.3. Increase choice regarding the services and supports available to individuals living with mental illness in NH.

1.3.4. Provide alternatives to and reduce the use of more restrictive and expensive services such as hospitalization.

1.3.5. Increase social connectedness for individuals living with mental illness in NH.

1.3.6. Increase satisfaction with peer support services.

1.4. The Contractor shall provide mental health peer support services to individuals who are eighteen (18) years of age or older who:

1.4.1. Self-identify as a recipient, as a former recipient, or at a significant risk of becoming a recipient of mental health services, and may include individuals who are homeless; and/or

1.4.2. Require additional support to transition from in patient or institutional settings into the community, or alternatively require more intensive supports to reduce the need for admission to an inpatient setting.

1.5. For the purposes of this contract, any reference to days shall mean consecutive calendar days, unless otherwise denoted as business days.

1.6. The Contractor agrees that if the performance of services involves the collection, transmission, storage, or disposition of Part 2 substance use disorder (SUD) information or records created by a Part 2 provider the information or records shall be subject to all safeguards of 42 CFR Part 2.

2. **Definitions**

2.1. **Board of Directors** means the governing body of a nongovernmental peer support agency.

2.2. **Business Days** are defined as Monday through Friday, excluding Saturday and

Sunday.

2.3. **Consumers** are any individual, eighteen (18) years of age or older, who self-identifies as a recipient, as a former recipient, or as a significant risk of becoming a recipient of publically funded mental health services.

2.4. **Guests** are any individuals who are invited to visit the peer support agency by a member, participant, or the peer support agency.

2.5. **Homeless** is (1) an individual or family who lacks a fixed, regular, and adequate nighttime residence; or (2) an individual or family who has a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels and congregate shelters), an institution other than a penal facility that provides temporary residence for individuals intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

2.6. **Members** are any consumers, who have made an informed decision to join, and agree to, abide by, and support the goals and objectives of peer support services.

2.7. **Mental illness** is defined in RSA 135-C:2 X, namely, "a substantial impairment of emotional processes, or of the ability to exercise conscious control of one's actions, or of the ability to perceive reality or to reason, when the impairment is manifested by instances of extremely abnormal behavior or extremely faulty perceptions. It does not include impairment primarily caused by: (a) epilepsy; (b) intellectual disability; (c) continuous or noncontinuous periods of intoxication caused by substances such as alcohol or drugs; or (d) dependence upon or addiction to any substance such as alcohol or drugs."

2.8. **Participant** means a consumer, who is not member, who participates in any aspect of peer support services.

2.9. **Peer Support Agency (PSA)** means an organization whose primary purpose is to provide culturally appropriate peer support, peer education, and peer programming to persons eighteen (18) year of age and older who self- identify as having a mental illness.

2.10. **Quarter or Quarterly** is defined as the periods of July 1 through September 30, October 1 through December 31, January 1 through March 31, and April 1 through June 30.

2.11. **Recovery** means for an individual with a mental illness, development of personal and social skills, beliefs and characters that support choice, increase quality of life, minimize or eliminate impairment, and decrease dependence on professional services.

2.12. **Region** is the geographic area of cities and towns in New Hampshire, as defined by the Department.

2.13. **Serious Mental Illness (SMI)** refers to individuals whom the state defines as having either Serious Mental Illness (SMI) or Serious and Persistent Mental Illness (SPMI) pursuant to N.H. Revised Statutes Annotated (RSA) 135-C:2, XV.

2.14. **Week** is defined as Monday through Sunday.

3. Scope of Services

3.1. Peer Support Services

Exhibit A - Amendment #4

3.1.1. The Contractor shall provide in-house and community based services for New Hampshire residents.

3.1.2. The Contractor shall provide peer support services that are provided for consumers and by consumers including, but not limited to:

3.1.2.1. Peer support services that include supportive interactions, shared experiences, acceptance, trust, respect, lived experience, and mutual support among members, participants, staff and volunteers.

3.1.2.2. Maintenance of a safe physical location that:

3.1.2.2.1. Is open a minimum of forty-four (44) hours per week, eight (8) hours per day, five (5) days per week and four (4) hours on one (1) additional day per week at each location; and

3.1.2.2.2. Provides face-to-face or telephone peer support services to PSA members or others who contact the PSA at a minimum of forty (40) hours per week at each location.

3.1.2.3. Peer support services based on the Intentional Peer Support model that:

3.1.2.3.1. Foster recovery from mental illness by helping individuals identify and achieve personal goals while building an evolving vision of their recovery.

3.1.2.3.2. Foster self-advocacy skills, autonomy, and independence.

3.1.2.3.3. Emphasize mutuality and reciprocity as demonstrated by shared decision-making; strong conflict resolution; non-medical approaches; and non-static roles, including but not limited to, staff who are members and members who are educators.

3.1.2.3.4. Offer alternative views on mental health, mental illness and the effects of trauma and abuse.

3.1.2.3.5. Encourage informed decision-making about all aspects of people's lives.

3.1.2.3.6. Support people with mental illness in challenging perceived self-limitations, while encouraging the development of beliefs that enhance personal and relational growth.

3.1.2.3.7. Emphasize a holistic approach to health that includes a vision of the whole person.

3.1.2.4. Providing opportunities to learn wellness strategies by using, at a minimum, Wellness Recovery Action Planning (WRAP) and Whole Health Action

Management (WHAM), to strengthen individual abilities to attain and maintain their health and recovery from mental illness.

3.1.2.5. Provide in-house and community-based services according to the Deliverables in Subsection 12.1. through Subsection 12.2.

3.1.2.6. Provide outreach by face-to-face or by telephone contact with consumers by providing support to individuals who are unable to attend agency activities, visiting people who are hospitalized with a psychiatric condition, and reaching out to people who meet membership criteria and are homeless.

3.1.2.7. Provide monthly newsletters published by the peer support agency (PSA) that describes agency services and activities; other community services; social and recreational opportunities; member articles and contributions and other relevant topics that might be of interest to members and participants.

3.1.2.8. Distribute the newsletters to the members and other interested parties, which may include but are not limited to community mental health centers and other appropriate community organizations, at least five (5) business days prior to the upcoming month.

3.1.2.9. Provide monthly education events and presentations topics germane to issues and concerns of consumers of mental health services which must include, but are not limited to:

3.1.2.9.1. Rights Protection.

3.1.2.9.2. Peer Advocacy.

3.1.2.9.3. Recovery.

3.1.2.9.4. Employment.

3.1.2.9.5. Wellness Management.

3.1.2.9.6. Community Resources.

3.1.2.10. Provide an electronic copy of the monthly newsletters and education events in Subparagraph 3.1.2.7. and Paragraph 11.6.3., to the Office of Consumer and Family Affairs within the Department's Bureau of Behavioral Health, and the Mental Health Block Grant State Planner and Mental Health Block Grant Advisory Council no later than five (5) days prior to the beginning of the following month.

3.1.2.11. Provide individual peer assistance by assisting adults to:

3.1.2.11.1. Locate, obtain, and maintain mental health services and supports through referral, consumer education, and self-empowerment;

3.1.2.11.2. Support individuals who are identifying problems by assisting them in addressing the issue and/or in resolving grievances; and

Exhibit A - Amendment #4

3.1.2.11.3. Promote self-advocacy.

3.1.2.12. Provide employment education by providing members with:

3.1.2.12.1. Information relative to obtaining and maintaining competitive employment.

3.1.2.12.2. Referrals to community mental health center employment programs. .

3.1.2.12.3. Employment-related activities, which may include, but are not limited to:

3.1.2.12.3.1. Resume writing.

3.1.2.12.3.2. Interviewing techniques.

3.1.2.12.3.3. Assistance with completing employment applications.

3.1.2.13. Inform members and the general public about peer support and wellness services available by providing Community Education Presentations about mental illness and the peer support community on a monthly basis to potential referral sources, funders, or families of individuals affected by mental illness.

3.1.2.14. Inform local human service providers and the general public about the stigma of mental illness, wellness and recovery and collaborate with other local human service providers that serve consumers in order to facilitate referrals and share information about services and other local resources.

3.1.2.15. Provide training and technical assistance to assist consumers to advocate for themselves and on their own behalf regarding healthcare such as, but not limited to:

3.1.2.15.1. Preparation techniques for doctors' appointments.

3.1.2.15.2. How to take notes.

3.1.2.15.3. How to use the physician's desk reference book for medications and a review of patient rights.

3.1.2.16. Invite guests to participate in peer support activities.

3.1.2.17. Provide residential support services, as needed, by providing support and assistance such as help with staying in their home or apartment, or finding a place to live.

3.1.2.18. Maintain at least a monthly schedule of peer support and wellness services and activities, which includes, but is not limited to:

3.1.2.18.1. Staff development and training.

3.1.2.18.2. Events that include community-based services.

3.1.2.18.3. Community outreach events.

3.2. The Contractor shall provide transportation services to members, participants and

guests, as needed. The Contractor shall:

3.2.1. Transport members, participants, guests, in a Contractor owned or leased vehicle, to and from their homes and/or the Contractor's PSA to participate in activities that may include, but not limited to:

3.2.1.1. Peer support services.

3.2.1.2. Wellness and recovery activities.

3.2.1.3. Annual conferences.

3.2.1.4. Regional meetings.

3.2.1.5. Council meetings.

3.2.2. Ensure all vehicles and drivers used for transportation comply with Federal and State Department of Transportation and Department of Safety regulations, which include, but are not limited to:

3.2.2.1. Vehicles must be registered pursuant to NH Administrative Rule Saf-C 500, Vehicle Registration Rules.

3.2.2.2. Vehicles must be inspected in accordance with NH Administrative Rule Saf-C 3200, Official Motor Vehicle Inspection Requirements.

3.2.2.3. Drivers must be licensed in accordance with NH Administrative Rule Saf-C 1000, Driver Licensing.

3.2.3. Require all employees, members, or volunteers who drive Contractor-owned vehicles sign a State of New Hampshire Release of Individual Motor Vehicle Driver Records form in order to access individual driver records that indicate drivers have safe driving records.

3.2.4. Require all employees, members, or volunteers who drive Contractor-owned vehicles complete a National Safety Council Defensive Driving course offered through a State of New Hampshire-approved agency.

3.3. The Contractor shall acknowledge funding from the Department to support transportation costs:

3.3.1. Is not used for activities other than peer support related activities defined in this Agreement.

3.3.2. May be used on an 'as needed' basis to pay for bus rides that are necessary to transport individuals to peer support services provided by the Contractor.

3.4. <u>Warmline Services</u>

3.4.1. The Contractor shall provide warmline services that offer on-call telephone peer support services to members, participants, and others. The Contractor shall ensure warmline services:

3.4.1.1. Are provided to any individual with the ability to receive calls and make calls statewide. and who lives or works in the State of New Hampshire.

3.4.1.2. Are provided during the hours the PSA is closed.

3.4.1.3. Assist individuals with addressing a current crisis related to their mental health.

3.4.1.4. Include referrals to appropriate treatment and other resources available in the consumer's service area.

3.4.1.5. Are provided by staff who are trained in providing warmline services.

3.4.1.6. May include outreach calls described in Subparagraph 3.1.2.6.

3.5. Recovery Oriented Step-Up Step-Down Program

3.5.1. The Contractor shall operate a three (3) bed step-up / step-down program that provides short-term recovery-based transition services for individuals:

3.5.1.1. Transitioning from inpatient or institutional settings into the community; or

3.5.1.2. Who require more intensive supports to reduce the need for admission to an inpatient setting.

3.5.2. The Contractor shall ensure each single occupancy bed includes, but is not limited to:

3.5.2.1. A minimum of one (1) bathroom with a sink, toilet, and shower.

3.5.2.2. A specific sleeping area designated for each individual, ensuring common areas are not used as bedrooms.

3.5.2.3. Storage space for each individual's clothing and personal possessions.

3.5.2.4. Kitchen area for the individual(s) to store and prepare meals.

3.5.2.5. A minimum of one (1) telephone for incoming and outgoing calls.

3.5.3. For the purposes of Step-Up / Step-Down services, any reference to business days shall mean Monday through Friday, excluding holidays observed by the State of New Hampshire as non-working days.

3.5.4. The Contractor shall ensure all services are available to individuals, statewide, regardless of insurance coverage or place of employment.

3.5.5. The Contractor shall ensure Step-Up / Step-Down services are in place on or before February 1, 2021, which include, but are not limited to:

3.5.5.1. Program(s) that are voluntary admission, short term, with overnight services.

3.5.5.2. Non-clinical peer supports, which includes access to a twenty-four (24) hour staff.

3.5.5.3. Policies that establish a ninety (90) day maximum stay limit per individual, per episode.

3.5.5.4. Programs staffed by peer support specialists as defined in NH Administrative Rule He-M 400, Community Mental Health, Part 426, Community Mental Health Services, Section 13(d)(4), who have successfully passed the state peer support specialist certification exam; and

3.5.5.5. Coordination with outpatient community-based clinical treatment providers.

3.5.6. The Contractor shall ensure the program accepts individuals:

3.5.6.1. Discharging from inpatient settings; and

3.5.6.2. For whom a short-term stay would prevent a psychiatric hospitalization.

3.5.7. The Contractor shall utilize the Intentional Peer Support (IPS) or another Substance Abuse and Mental Health Services Administration (SAMHSA)-recognized mental health peer support model to facilitate recovery and wellness with individuals. The Contractor shall ensure:

3.5.7.1. Programs operate in accordance with SAMHSA Core Competencies for Peer Support Workers in a behavioral health system.

3.5.7.2. Individuals are referred to other community-based service providers, as appropriate to ensure:

3.5.7.2.1. Individuals are connected to community providers, programs, and applicable services; and

3.5.7.2.2. Whole-health needs of each individual are met.

3.5.7.3. Programs utilize a statewide referral form approved by the Department.

3.5.7.4. Programs adhere to a standardized Department-approved admission criteria that includes, but is not limited to, serving individuals who:

3.5.7.4.1. Are at least eighteen (18) years of age.

3.5.7.4.2. Are residents of the State of New Hampshire.

3.5.7.4.3. Self-identified as being in psychiatric distress.

3.5.7.4.4. Exhibit a willingness to engage in daily services and wellness activities.

3.5.7.4.5. Self-administering medication, if applicable, or receive medication from a community provider or clinician off-site.

3.5.7.5. Referrals for Step-Up services are accepted if submitted through:

3.5.7.5.1. Community mental health programs or providers;

3.5.7.5.2. Mobile Crisis Response Teams;

3.5.7.5.3. Behavioral Health Crisis Treatment Centers;

3.5.7.5.4. Peer Support Agencies; or

3.5.7.5.5. Other entities, as approved by the Department.

3.5.7.6. Referrals for Step-Down are accepted if submitted through:

3.5.7.6.1. New Hampshire Hospital;

3.5.7.6.2. Designated Receiving Facilities;

3.5.7.6.3. Mobile Crisis Response Teams;

3.5.7.6.4. Community mental health providers;

3.5.7.6.5. Hospitals; or

3.5.7.6.6. Other entities, as approved by the Department.

3.5.7.7. Programs are staffed and operated by a minimum of one (1) certified peer support specialist with lived experience with mental illness, twenty-four (24) hours per day when participants are in the program.

3.5.7.8. Programs support recovery and resiliency through interventions and services, or connections to services, which include, but are not limited to:

3.5.7.8.1. Facilitating connections to natural supports, defined as relationships that occur in everyday life, which may include, but are not limited to:

3.5.7.8.1.1. Family.

3.5.7.8.1.2. Friends.

3.5.7.8.1.3. Neighbors.

3.5.7.8.1.4. Peer support networks when transitioning back to their communities.

3.5.7.8.2. Developing and supporting individual discharge plans.

3.5.7.8.3. Providing access to a minimum of one (1) SAMHSA-recognized peer support model who emphasizes physical, psychological, and emotional safety and focuses on individual strengths as a method to rebuild a sense of control and empowerment.

3.5.7.8.4. Providing opportunities for engagement in structured daily activities while participating in the program.

3.5.7.8.5. Developing individualized safety and wellness plans that support person-centered recovery goals, which may include Wellness Recovery Action Plans (WRAP).

3.5.7.9. Programs support connections, allow access to and collaborate with the individual's current services and service providers, including establishing memorandums of understanding, communication protocols and sharing of care plans with written consent.

3.5.7.10. Programs support individuals with maintaining participation in academic coursework and/or employment.

3.5.8. The Contractor shall assist individuals without established service providers to obtain a variety of supports that include, but are not limited to:

3.5.8.1. Referring individuals to Department supports for benefits that may include, but are not limited to:

3.5.8.1.1. Social security.

3.5.8.1.2. Food stamps.

3.5.8.1.3. Utility assistance.

3.5.8.2. Assisting individuals with obtaining, completing, and submitting housing applications.

3.5.8.3. Identifying and connecting participants to resources within the community which may include, but are not limited to:

3.5.8.3.1. Peer support agencies.

3.5.8.3.2. Community mental health centers.

3.5.8.3.3. Faith-based groups.

3.5.8.3.4. Transportation services.

3.5.8.3.5. Primary care services.

3.5.8.3.6. Homemaker and personal care services.

3.5.9. The Contractor shall administer a functional assessment at intake and discharge from the program, as approved by the Department to include, but not be limited to, data identified in Subsection 11.6.

3.5.10. The Contractor shall develop a referral process with the local community mental health center for those individuals who, while in the program, experience a rise in acuity level and:

3.5.10.1. Require a higher level of care; or

3.5.10.2. Require an evaluation for hospitalization.

3.5.11. The Contractor shall ensure individual health needs are addressed during the course of their stay.

3.5.12. The Contractor shall maintain a smoke-free environment and provide tobacco intervention services to individuals who are former or current smokers. The Contractor shall ensure:

3.5.12.1. Former smokers receive appropriate supports that assist with maintaining a non-smoking status.

3.5.12.2. Current smokers are offered smoking cessation treatments.

3.5.13. The Contractor shall ensure the discharge process includes, but is not limited to:

3.5.13.1. Conducting discharge planning meetings that actively include individuals receiving services.

3.5.13.2. Ensuring the first discharge meeting occurs no later than thirty (30) days from the date of the individual's admission

3.5.13.3. Ensuring discharge meetings include, but are not limited to, input from:

3.5.13.3.1. Community mental health centers.

3.5.13.3.2. Primary care services.

3.5.13.3.3. Other providers.

3.5.13.3.4. Natural supports.

3.5.13.4. Ensuring discharge plans are wellness and recovery oriented and include, but are not limited to, individualized:

3.5.13.4.1. Emergency contacts.

3.5.13.4.2. Community support contacts.

3.5.13.4.3. Updates on presenting problem.

3.5.13.4.4. Disposition.

3.5.13.4.5. Recovery goals.

3.5.13.4.6. Action steps to transition back into the community.

3.5.14. The Contractor shall choose to become an enrolled Medicaid provider through the Department's Medicaid program.

3.5.15. The Contractor shall perform, or cooperate with the performance of, such quality improvement and utilization review activities as are determined to be necessary and appropriate by the Department within timeframes reasonably specified by the Department.

4. Geographic Area and Physical Location of Services

4.1. The Contractor shall provide peer support services separately from the confines of a local community mental health center, unless otherwise pre-approved by the Department.

4.2. The Contractor shall provide peer support services at a physical location and/or building that is in compliance with Exhibit C, Section 15. and with the Life Safety requirements, which include, but are not limited to, ensuring the building:

4.2.1. Is in compliance with local health, building and fire safety codes.

4.2.2. Is maintained in good repair and free of hazards, and includes, but is not limited to:

4.2.2.1. A minimum of one (1) indoor bathroom that includes a sink and toilet.

4.2.2.2. A minimum of one (1) telephone for incoming and outgoing calls.

4.2.2.3. A functioning septic or other sewage disposal system.

4.2.2.4. A source of potable water for drinking and food preparation as follows:

4.2.2.4.1. If drinking water is supplied by a non-public water system, the Contractor shall ensure the water is tested and found to be in accordance with NH Administrative Rules Env-Ws 300, Drinking Water Rules, Part 15, Maximum Contaminant Levels and Maximum Contaminant Level Goal for Regulated Organics and Part 316, Regulated Secondary Maximum Contaminant Levels initially and every five (5) years thereafter.

4.2.2.4.2. If the water is not approved for drinking, the Contractor shall implement an alternative method for providing safe drinking water.

5. Enrolling Consumers for Services and/or as Members with a Peer Support Agency (PSA)

5.1. The Contractor shall provide peer support services to individuals defined in Subsection 1.4. who have a desire to work on wellness issues, and who have a desire to participate in services.

5.2. The Contractor shall request consumers complete a membership application to join and support the activities and mission of the PSA.

5.3. The Contractor shall ensure the membership application includes, but is not limited to:

5.3.1. The minimum engagement policy.

5.3.2. Suspension of membership policy.

5.3.3. Membership rules.

5.3.4. Attestation that the consumer supports the mission of the PSA.

5.4. The Contractor shall provide services to both members and non-members.

6. Staffing Requirements for a PSA

6.1. The Contractors shall employ an Executive Director who:

6.1.1. Is appointed by the Board of Directors.

6.1.2. Is employed by the Contractor and is supervised by the Board of Directors.

6.1.3. Has, at a minimum, the following qualification:

6.1.3.1. One (1) year of supervisory or management experience; and

6.1.3.1.1. An associate's degree or higher administration, business management, education, health, or human services; or

6.1.3.1.2. Additional years of experience in the peer support field that can be substituted for one (1) year of academic experience.

6.1.4. Is evaluated annually by the Board of Directors to ensure peer support and wellness services and activities are provided in accordance with:

6.1.4.1. The performance expectations approved by the Board.

Exhibit A - Amendment #4

6.1.4.2. The Department's policies and rules.

6.1.4.3. The Contract terms and conditions.

6.1.4.4. The Quality improvement reviews.

6.2. The Contractor shall screen each staff member for tuberculosis prior to employment.

6.3. The Contractor shall not add, delete, defund, or transfer staff positions among programs without prior written permission from the Department.

6.4. The Contractor shall develop a Staffing Contingency Plan for Department approval no later than thirty (30) days from the contract effective date, which includes but is not limited to:

6.4.1. The process for replacement of personnel in the event of loss of key personnel or other personnel during the period of this Agreement.

6.4.2. The description of how additional staff resources shall be allocated to support this Agreement in the event of inability to meet any performance standard.

6.4.3. The description of time frames necessary for obtaining staff replacements.

6.4.4. An explanation of the Contractor's capabilities to provide, in a timely manner, staff replacements/additions with comparable experience.

6.5. The Contractor shall submit an emergency staffing plan within thirty (30) days of the contract effective date if the contract that includes, but not limited to:

6.5.1. Inclement weather notifications for programming and transportation services.

6.5.2. Emergency evacuation plans for the Agency.

6.6. Prior to making an offer of employment or for volunteer work, the Contractor shall, after obtaining signed and notarized authorization from the person or persons for whom information is being sought:

6.6.1. Obtain at least two (2) references for the person;

6.6.2. Submit the person's name for review against the bureau of elderly and adult services (BEAS) state registry maintained pursuant to RSA 161-F:49;

6.6.3. Complete a criminal records check to ensure that the person has no history of:

6.6.3.1. Felony conviction; or

6.6.3.2. Any misdemeanor conviction involving:

6.6.3.2.1. Physical or sexual assault;

6.6.3.2.2. Violence;

6.6.3.2.3. Exploitation;

6.6.3.2.4. Child pornography;

6.6.3.2.5. Threatening or reckless conduct;

6.6.3.2.6. Theft;

6.6.3.2.7. Driving under the influence of drugs or alcohol; or

6.6.3.2.8. Any other conduct that represents evidence of behavior that could endanger the well-being of a consumer; and

6.6.4. Complete a motor vehicles record check to ensure that the person has a valid driver's license if the person will be transporting consumers.

6.7. Unless the Contractor requests and obtains a waiver from the Department, it shall not hire any individual or approve any individual to act as a volunteer if:

6.7.1. The individual's name is on the BEAS state registry;

6.7.2. The individual has a record of a felony conviction; or

6.7.3. The individual has a record of any misdemeanors specified in Subparagraph 6.6.3.2.

7. Staff Training and Development

7.1. The Contractor shall verify and document all staff and volunteers have appropriate training, education, experience, and orientation to fulfill the responsibilities of their respective positions. The Contractor shall ensure:

7.1.1. All personnel and training records are current and available to the Department, as requested.

7.1.2. All staff training shall be in accordance with New Hampshire Administrative Rule He-M 400, Community Mental Health, Part 402, Peer Support, Section 402.05, Staff Training, Staff Development and Orientation.

7.2. The Contractor shall maintain documentation in files of the staffs completed trainings and certifications.

7.3. The Contractor shall obtain Department approval thirty (30) days prior to the training date, for all trainings provided by the Contractor or to attend trainings other than offered by the Contractor for staff at least on an annual basis such as, but not limited to:

7.3.1. Peer Support.

7.3.2. Warmline.

7.3.3. Facilitating Peer Support Groups.

7.3.4. Sexual Harassment.

7.3.5. Member Rights.

7.4. The Contractor shall provide Intentional Peer Support training and its required consultations to meet state certification.

7.5. The Contractor shall provide Wellness, Recovery, and Planning training to staff during the years in which Intentional Peer Support is not provided.

7.6. The Contractor shall ensure administrative staff, including the Executive Director, participate in trainings on:

7.6.1. Staff Development.

7.6.2. Supervision.

7.6.3. Performance Appraisals.

7.6.4. Employment Practices.

7.6.5. Harassment.

7.6.6. Program Development.

7.6.7. Complaints and the Complaint Process.

7.6.8. Financial Management.

7.7. The Contractor shall ensure that annual Wellness Training is available to staff and members, and may be provided to other mental health consumers who do not identify themselves as members of a PSA in the region.

7.8. The Contractor shall obtain prior approval by the Department no later than thirty (30) days prior to the training, to provide or refer staff to specific training proposed by either the Department or the Contractor.

7.9. The Contractor shall collaborate with other Peer Support Agencies to offer combined trainings to facilitate efficient use of training funds and to increase the scope of trainings offered.

7.10. The Contractor shall purge all data in accordance with the instructions from the Department pertaining to members, participants, and guests who have not received peer support services within the prior two (2) year period.

8. Composition and Responsibilities of a PSA

8.1. The Contractor shall establish and maintain a status as a PSA by:

8.1.1. Being incorporated with the Secretary of State's Office as a non-for-profit agency.

8.1.2. Having a plan for governance that requires a Board of Directors who:

8.1.2.1. Are responsible for the management and control of the property and affairs of the corporation.

8.1.2.2. Have the powers usually vested in the Board of Directors of a non-for-profit corporation.

8.1.2.3. Are comprised of a minimum of nine (9) individuals with at least 51% of the individuals who self-identify as consumers.

8.1.2.4. Have membership where less than 20% of the Board members are related by blood, marriage, or cohabitation to other Board members.

8.1.2.5. Establish and maintain the bylaws that include, but are not limited to:

8.1.2.5.1. Responsibilities and powers of the Board of Directors.

8.1.2.5.2. Term limits for the Board of Directors officers ensuring not more than 20% of the Board members serve for more than six (6) consecutive years.

8.1.2.5.3. A nominating process that actively recruits diverse individuals whose skills and life experiences serve the needs of the agency.

8.1.2.5.4. A procedure by which inactive PSA members are removed from the PSA Board.

8.2. The Contractor shall submit a corrective action plan to the Department within five (5) days when the Board of Directors membership falls below the required minimum of nine (9) members.

8.3. The Contractor shall submit an updated list of current Board of Directors members and a corrective action plan with timeframes to comply with the required number of members when membership falls below the minimum required number of five (5) members to the Department and NH Department of Justice, Division of Charitable Trusts.

8.4. The Contractor shall have a documented Orientation Process and Manual for the members and officers of the Board of Directors, which includes written descriptions outlining the duties of the members and officers of the Board of Directors.

8.5. The Contractor shall have annual trainings related to the members and officers of the Board of Directors roles and responsibilities, including fiduciary responsibilities.

8.6. The Contractor's Board of Directors shall have fiduciary responsibility for the agency including approval of agency financial policies and procedures that includes, but not be limited to, the following:

8.6.1. Cash Management including, but not limited to:

8.6.1.1. Cash receipts.

8.6.1.2. Cash disbursements.

8.6.1.3. Petty cash.

8.6.2. Accounts Payable/Receivable Procedures, payroll, and fixed assets.

8.6.3. Internal Control Procedures.

8.6.4. Expense Reimbursement and Advance Policy.

8.7. The Contractor shall have open attendance to PSA members during a portion of a Board meeting.

8.8. The Contractor shall publish the times and locations of Board of Directors meetings in an effort to encourage PSA member attendance.

8.9. The Contractor's Board of Directors shall maintain written records that are available to the Department upon request, which include, but are not limited to:

8.9.1. Board of Directors meeting minutes that include, but are not limited to:

8.9.1.1. Topics discussed.

8.9.1.2. Votes and actions taken.

8.9.1.3. A monthly review of the agency's financial status.

8.9.2. Current Board of Directors list that includes, but is not limited to:

8.9.2.1. Member name.

8.9.2.2. Member address.

8.9.2.3. Member phone number.

8.9.2.4. Member e-mail address.

8.9.2.5. Board office held.

8.9.2.6. Date joined the Board.

8.9.2.7. Member Board expiration date.

8.9.3. Documentation of the process and results of annual Board of Directors elections.

8.9.4. Policy manuals that include, but are not limited to policies for:

8.9.4.1. Human Resources.

8.9.4.2. Staff Development.

8.9.4.3. Financial Responsibilities.

8.9.4.4. Protection for member and participant rights.

8.10. The Contractor shall pursue other sources of revenue to support additional peer support services and/or supplement other related activities that the Department may not pay for under this Agreement.

9. Participation in Statewide/Regional Meetings

9.1. The Contractor shall support the recruitment and training of individuals for serving on local, regional and state mental health policy, planning and advisory initiatives.

9.2. The Contractor shall ensure the participation of individuals other than the Contractor's employees who provide leadership development meetings, workshops, and training events.

9.3. The Contractor shall ensure the Executive Director, or designee, attends the Department's monthly Peer Support Directors meeting for the purpose exchanging information as well as supporting and strengthening the statewide Peer Support system.

9.4. The Contractor shall meet, a minimum of two (2) times per year, with other regional community support organizations that serve the same populations, which may include, but are not limited to:

9.4.1. Mental health centers.

9.4.2. Area homeless shelters.

9.4.3. Community action programs.

9.4.4. Housing agencies.

9.5. The Contractor shall submit documentation to the Department that demonstrates attendance at the meetings in Section 9.

10. Grievance and Appeals

10.1. The Contractor shall submit a grievance and appeals process to the Department for approval. The Contractor shall ensure the grievance and appeals process includes, but is not limited to:

10.1.1. How to receive complaints orally, or in writing, ensuring information collected includes, but is not limited to:

10.1.1.1. Consumer name.

10.1.1.2. Date of written grievance.

10.1.1.3. Nature and subject of the grievance.

10.1.1.4. A method to submit an anonymous complaint.

10.1.2. A policy relative to assisting consumers with the grievance and appeal process including, but not limited to, how to file a complaint.

10.1.3. A method to track complaints.

10.1.4. Investigating allegations that a member's or participant's rights have been violated by agency staff, volunteers or consultants.

10.1.5. An immediate review of the complaint and investigation by the Contractor's director or his or her designee.

10.1.6. A process to attempt to resolve every grievance for which a formal investigation is requested.

10.1.7. An appeal process for members or participants to appeal any written decision rendered by the Board of Directors.

10.2. The Contractor shall ensure the Board of Directors issues a written decision to the member or participant filing a grievance upon completing an investigation and within twenty (20) business days setting forth the disposition of the grievance.

10.3. The Contractor shall submit a copy of the written decision in Subsection 10.2. of the complaint to the Department within ten (10) days from the written decision.

11. Reporting Requirements

11.1. The Contractor shall submit a report that lists the names of the trained individuals in accordance with Section 7. Staff Training and Development, utilizing reporting forms provided by the Department.

11.2. The Contractor shall provide the prior month's interim Balance Sheet, and Profit and Loss Statements to the Department no later than the 30th of the month, ensuring the report includes, but is not limited to:

11.2.1. The Current Ratio that measures the Contractor's total current assets available to cover the cost of current liabilities. The Contractor shall:

11.2.1.1. Utilize the following formula: Total current assets divided by total current liabilities.

11.2.1.2. Maintain a minimum current ratio of 1.1:1.0 with no variance allowed.

11.2.2. Accounts Payable that measure the Contractor's timeliness in paying invoices, ensuring no outstanding invoices greater than sixty (60) days.

11.2.3. Budget Management that compares budgets to actual revenues and expenses to determine the percentage of the Contractors budget executed year-to-date.

11.2.4. Ensure revenues are equal to or greater than the year-to-date calculation while ensuring expenses are equal to or less than the year-to-date calculation.

11.3. The Contractor shall prepare an Annual Report presentation for the benefit of the Mental Health Block Grant Advisory Council.

11.4. The Contractor shall submit a quarterly written report to the Department, on a form supplied by the Department, no later than the fifteenth (15th) day of the month following the end of each quarter that includes, but is not limited to:

11.4.1. Community outreach activities as outlined in Section 12. Deliverables.

11.4.2. Compilation of program evaluation and surveys submitted in the past quarter.

11.4.3. Peer support service deliverables as identified on templates provided by the Department.

11.4.4. Statistical data including, but not limited to:

11.4.4.1. The total number of unduplicated participants served on a daily basis.

11.4.4.2. The total number of current members, defined as only those members who have been served within the past year.

11.4.4.3. Program utilization totals by percentage.

11.4.4.4. Number of telephone peer support contacts.

11.4.4.5. Number and description of outreach activities.

11.4.4.6. Number and description of educational events provided:

11.4.4.6.1. On-site; and

11.4.4.6.2. In the community.

11.4.5. Board of Directors meeting minutes for the previous quarter that include, but are not be limited to:

11.4.5.1. Executive Director's report.

11.4.5.2. Board of Directors roster.

11.5. The Contractor shall provide a report for Department approval by July 31 of each State Fiscal Year, which outlines:

11.5.1. Specific steps the Contractor has taken to increase membership in the previous State Fiscal Year.

11.5.2. A plan for how the Contractor shall increase the unduplicated numbers served in the above activities by ten (10) percent of the total served in the previous year, for each subsequent State Fiscal Year.

11.5.3. Monthly in-house schedules and newsletters.

11.5.4. Quarterly revenue and expenses by cost, category and locations.

11.5.5. Quarterly Capital Expenditure Reports.

11.5.6. Quarterly Auditor's Reports: The prior three (3) months of monthly interim Balance Sheet and Profit and Loss Statements including separate statements for related parties that are certified by an officer of the reporting entity to measure the agency's fiscal integrity.

11.6. <u>Recovery Oriented Step-Up Step-Down Program</u>

11.6.1. The Contractor shall submit individual data in the format, content, frequency and method as approved by the Department that includes, but is not be limited to:

11.6.1.1. Admission region.

11.6.1.2. Discharge region.

11.6.1.3. Presenting problem upon admission.

11.6.1.4. If admission was diversion from inpatient care (step-up).

11.6.1.5. If admission facilitated a supported transition out of inpatient care (step-down).

11.6.1.6. Age.

11.6.1.7. Gender.

11.6.1.8. Sexual orientation.

11.6.1.9. Race and ethnicity.

11.6.1.10. Legal status.

11.6.1.11. Employment status.

11.6.1.12. Individual's housing status upon admission and discharge.

11.6.1.13. Discharge reason.

11.6.1.14. Length of stay.

11.6.1.15. Resource referrals.

11.6.1.16. Entry and exit client status indicators, to include, but not be limited to, if the individual:

11.6.1.16.1. Was a step-up or step-down referral;

11.6.1.16.2. Exited to a higher level of care; and

11.6.1.16.3. Was referred from a higher level of care.

11.6.2. The Contractor shall submit program status data to the Department in the format, content, frequency and method as approved by the Department, that includes, but is not limited to:

11.6.2.1. Number of beds occupied.

11.6.2.2. Daily provided programming.

11.6.2.3. Staffing levels.

11.6.2.4. Community outreach efforts, including, but not limited to:

11.6.2.4.1. Family supports.

11.6.2.4.2. Community resource supports.

11.6.2.4.3. Other individuals or entities specified by the individual as a support.

11.6.3. The Contractor shall ensure monthly data is submitted no later than the fifteenth (15th) of each month for the prior month's data, unless otherwise approved by the Department in writing.

11.6.4. The Contractor shall ensure quarterly data is submitted no later than the fifteenth (15th) day of the month following the close of a quarter.

11.6.5. The Contractor shall submit monthly Balance Sheets and Profit and Loss Statements to the Department, ensuring:

11.6.5.1. The Profit and Loss Statements include a budget column allowing for budget-to-actual analysis.

11.6.5.2. Statements are submitted in accordance with Paragraph 11.6.3.

11.6.5.3. Statements are based on the accrual method of accounting and include the Contractor's total revenues and expenditures, whether or not generated by, or resulting from, funds provided pursuant to this contract.

12. Deliverables

12.1. The Contractor shall provide a minimum of fifteen (15) hours of in-house services at each Center each week, of which five (5) hours may be conducted in the Center's community or region, as approved by the Department. The Contractor shall provide services that include, but are not limited to:

12.1.1. New topics introduced every month.

12.1.2. A minimum of five (5) separate discussion groups per week that address emotional wellbeing topics, which may include, but are not limited to:

12.1.2.1. IPS.

12.1.2.2. WRAP.

12.1.2.3. WHAM.

12.1.2.4. Setting boundaries.

12.1.2.5. Positive thinking.

12.1.2.6. Wellness.

12.1.2.7. Stress management.

12.1.2.8. Addressing trauma.

12.1.2.9. Reduction of negative or intrusive thoughts.

12.1.2.10. Management of emotional states including, but not limited to:

12.1.2.10.1. Anger.

12.1.2.10.2. Depression.

12.1.2.10.3. Anxiety.

12.1.2.10.4. Mania

12.1.3. A minimum of five (5) discussion or practice groups per week that address physical wellbeing topics which may include, but are not limited to:

12.1.3.1. Smoking cessation.

12.1.3.2. Weight loss.

12.1.3.3. Nutrition and Cooking.

12.1.3.4. Physical exercise.

12.1.3.5. Mindfulness activities including, but not limited to:

12.1.3.5.1. Yoga.

12.1.3.5.2. Meditation.

12.1.3.5.3. Journaling.

12.1.4. A minimum of four (4) activity groups per week that that provide positive skill-building activities which may include, but are not limited to:

12.1.4.1. Arts and crafts.

12.1.4.2. Music expression.

12.1.4.3. Creative writing.

12.1.4.4. Cooking.

12.1.4.5. Sewing.

12.1.4.6. Gardening.

12.1.4.7. Movies.

12.1.5. A minimum of one (1) group per week based on topics relevant to fostering independence which may include, but are not limited to:

12.1.5.1. Online blogs or articles that relate to mental health.

12.1.5.2. Obtaining employment.

12.1.5.3. Budgeting.

12.1.5.4. Decision-making.

12.1.5.5. Self-advocacy.

12.2. The Contractor shall provide community-based services including, but not limited to a minimum of one (1) trip into the community per month for activities that may include, but are not limited to:

12.2.1. Visiting a natural setting.

12.2.2. Volunteering opportunities.

12.2.3. Visiting a museum.

12.2.4. Visiting a local historical site.

12.2.5. Visiting local farms or gardens.

12.3. The Contractor shall provide community outreach that includes, but is not limited to:

12.3.1. Providing monthly community education presentations about mental illness and the peer support community to potential referral sources, funders, or families of individuals affected by mental illness, including, but not limited to:

12.3.1.1. Local psychiatric hospitals.

12.3.1.2. Local mental health clinics.

12.3.1.3. Local community events.

12.3.2. Providing monthly educational events and presentations to members, participants, or other individuals seeking support and information relating to the issues and concerns of consumers of mental health services which includes, but is not limited to educational topics to be covered over the course of the year, which may include, but are not limited to:

12.3.2.1. Rights protection.

12.3.2.2. Peer Advocacy.

12.3.2.3. Recovery.

12.3.2.4. Employment.

12.3.2.5. Wellness Management.

12.3.2.6. Community Resources.

12.4. Recovery Oriented Step-Up Step-Down Program

12.4.1. The Contractor shall perform, or cooperate with the performance of, quality improvement or utilization review activities as are determined necessary and appropriate by the Department within timeframes reasonably specified by the Department including, but not limited to:

12.4.1.1. Meeting 75% minimum occupancy standards annually.

12.4.1.2. Successfully diverting 80% of Step-Up admissions from resulting in an inpatient stay.

12.4.1.3. Successfully facilitating Step-Down transitions with no more than 5% of individuals being readmitted to hospital level care within the ninety (90) day period, referenced in Subparagraph 3.5.5.3.

12.4.2. The Contractor shall actively and regularly collaborate with the Department to enhance contract management, improve results, and adjust program delivery and policy based on successful outcomes.

12.4.3. The Contractor may be required to provide other key data and metrics to the Department, including client-level demographic, performance, and service data.

12.4.4. Where applicable, the Contractor shall collect and share data with the Department in a format specified by the Department.

13. Quality Improvement

13.1. The Contractor shall participate in quality program reviews and site visits on a schedule provided by the Department. All contract deliverables, programs, and activities shall be subject to review during this time. These reviews shall result in a report and potential corrective action.

13.2. The Contractor shall participate in quality assurance reviews as follows:

13.2.1. Ensure the Department has access sufficient for monitoring of contract compliance requirements as identified in OMB Circular A-133.

13.2.2. Ensure the Department is provided with access that shall include, but is not limited to:

13.2.2.1. Data.

13.2.2.2. Financial records.

13.2.2.3. Scheduled access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.4. Unannounced access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.5. Scheduled phone access to Contractor principals and staff.

13.3. The Contractor shall perform monitoring and comprehensive quality and assurance activities including, but not limited to:

13.3.1. Participating in bi-annual quality improvement review as in Subsection 13.1.

13.3.2. Participating in ongoing monitoring and reporting based on the bi-annual review and corrective action plan submitted in conjunction with the Department and Contractor.

13.3.3. Conducting member satisfaction surveys provided by and as instructed the Department.

13.3.4. Reviewing personnel files for completeness.

13.3.5. Reviewing the complaint process.

13.4. The Contractor shall provide a corrective action plan to the Department within thirty (30) days of notification of noncompliance with contract activities.

13.5. The Contractor shall provide all requested audits to the Department no later than ten (10) days after receiving the request from the Department.

Exhibit B – Amendment #4

Method and Conditions Precedent to Payment

1. The State shall pay the Contractor an amount not to exceed the Price Limitation, Block 1.8, of the General Provisions of this Agreement, Form P-37, for the services provided by the Contractor pursuant to Exhibit A – Amendment #4, Scope of Services.

2. This Agreement is funded by:

   2.1. 100% General Funds.

3. The Contractor agrees to provide the services in Exhibit A – Amendment #4, Scope of Services in compliance with funding requirements in Section 2., above.

4. The Contractor shall submit one (1) invoice to the Department upon Governor and Council approval of this Agreement requesting a start-up payment in an amount not to exceed $132,902 for the recovery oriented step-up step-down program as stated in Exhibit A – Amendment #4, Scope of Services and Exhibit B-7 Amendment #4.

5. The Contractor shall submit one (1) invoice to the Department upon Governor and Council approval of this Agreement requesting an advance payment in an amount not to exceed $34,213 for peer support services as described in Exhibit A – Amendment #4, Scope of Services. The Contractor shall ensure:

   5.1. The invoice clearly states a request for the advance payment, to be provided at the start of each State Fiscal Year (SFY), in the amount of $34,213, referenced in Exhibit A – Amendment #4, Scope of Services,

   5.2. The invoice includes how funds will be utilized toward peer support services in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #4 and Exhibit B-6 Amendment #4.

   5.3. The Contractor shall submit monthly invoices for actual expenditures incurred in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #4 and Exhibit B-6 Amendment #4 shall be submitted to the Department.

   5.4. The Department shall recoup the advance payment back by deducting 1/3rd of the advanced amount from the December 2020, January 2021, and February 2021 invoices, unless otherwise agreed upon by the Department.

6. Subsequent to the action in Section 5., the Department shall make monthly payments to the Contractor based upon cost reimbursement, as submitted by the Contractor to maintain services and as approved by the Department, of the Department approved budget amounts in Exhibit B-1 Budget Form through Exhibit B-6 Amendment #3 SFY 2022 Budget.

   6.1. In no event shall the total of the initial payment in Section 5. and monthly payments in Section 6. exceed the budget amounts set forth in Section 6.

   6.2. The Department will adjust monthly payments for expenditures set forth in Section 10., below and amounts paid to initiate services in Section 5., above.

7. Payment for services provided in Exhibit A – Amendment #4, Scope of Services shall be made as follows:

   7.1. The Contractor shall submit an invoice on Department supplied forms, by the tenth (10th) working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month.

7.2. The State shall make payment to the Contractor on actual expenditures, within thirty (30) days of receipt of each Department-approved invoice for Contractor services provided pursuant to this Agreement.

7.3. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to dhhs.dbhinvoicesmhs@dhhs.nh.gov, or invoices may be mailed to:

Financial Manager
Bureau of Mental Health
Department of Health and Human Services
105 Pleasant Street, Main Building
Concord, NH 03301

8. The Contractor shall provide its Revenue and Expense Budget on Budget Form A supplied by the Department, within twenty (20) calendar days of the contract effective date and then twenty (20) days from the beginning of each fiscal year thereafter.

9. The Contractor shall provide quarterly Revenue and Expense Reports on Budget Form A, within thirty (30) calendar days after the end of each fiscal quarter, defined as July 1 to September 30, October 1 to December 31, January 1 to March 31, and April 1 to June 30.

10. The Contractor shall provide supporting documentation, when required by the Department, to support evidence of actual expenditures, in accordance with the Department approved budgets in Section 6.

11. Any expenditure that exceeds the approved budgets in Section 6. shall be solely the financial responsibility of the Contractor.

12. When the contract price limitation is reached the program shall continue to operate at full capacity at no charge to the Department for the duration of the contract period.

13. Funding may not be used to replace funding for a program already funded from another source.

14. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this Contract may be withheld, in whole or in part, in the event of noncompliance with any State or Federal law, rule or regulation applicable to the services provided, or if the said services have not been completed in accordance with the terms and conditions of this Agreement.

15. Notwithstanding Paragraph 18 of the General Provisions of this Agreement P-37, an amendment limited to the budget amounts identified in Section 6., to adjust amounts within the budgets, within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of Governor and Executive Council.

16. The Department reserves the right to recover any program funds not used, in whole or in part, for the purposes stated in this Agreement from the Contractor within one hundred and twenty (120) days of the Completion Date.

17. Contractor will have forty-five (45) days from the end of each State Fiscal Year to submit to the Department final invoices for payment. Any adjustments made to a prior invoice will need to be accompanied by supporting documentation.

18. Property Standards

18.1. Insurance coverage.

18.1.1. The Contractor shall, at a minimum, provide the equivalent insurance coverage for real property and equipment acquired or improved with State funds as provided to property owned by the Contractor.

18.2. Real property.

18.2.1. Subject to the obligations and conditions set forth in this section, title to real property acquired or improved in whole or in part with State funds will vest upon acquisition in the Contractor.

18.2.2. Except as otherwise provided by State statutes or in this Agreement, real property will be used for the originally authorized purpose as long as needed for that purpose, during which time the Contractor must not dispose of or encumber its title or other interests without State approval.

18.2.3. When real property is no longer needed for the originally authorized purpose, the Contractor must obtain disposition instructions from the State. The instructions must provide for one of the following alternatives:

18.2.3.1. Retain title after compensating the State. The amount paid to the State will be computed by applying the State's percentage of participation in the cost of the original purchase (and costs of any improvements) to the fair market value of the property. However, in those situations where the Contractor is disposing of real property acquired or improved with State funds and acquiring replacement real property prior to expiration of this Agreement and any amendment thereof, the net proceeds from the disposition may be used as an offset to the cost of the replacement property.

18.2.3.2. Sell the property and compensate the State. The amount due to the State will be calculated by applying the State's percentage of participation in the cost of the original purchase (and cost of any improvements) to the proceeds of the sale after deduction of any actual and reasonable selling and fixing-up expenses. If the State appropriation funding this Agreement or any amendment thereof has not been closed out, the net proceeds from sale may be offset against the original cost of the property. When the Contractor is directed to sell property, sales procedures must be followed that provide for competition to the extent practicable and result in the highest possible return.

18.2.3.3. Transfer title to a third party designated/approved by the State. The Contractor is entitled to be paid an amount calculated by applying the State's percentage of participation in the purchase of the real property (and cost of any improvements) to the current fair market value of the property.

18.3. Equipment.

18.3.1. Equipment means tangible personal property (including information technology systems) purchased in whole or in part with State funds and that has a useful life of more than one (1) year and a per-unit acquisition cost which equals or exceeds $5,000.

18.3.2. Subject to the obligations and conditions set forth in this section, title to equipment acquired with State funds will vest upon acquisition in the Contractor subject to the following conditions:

18.3.2.1. Use the equipment for the authorized purposes of the project during the period of performance, or until the property is no longer needed for the purposes of the project.

18.3.2.2. Not encumber the property without approval of the State.

18.3.2.3. Use and dispose of the property in accordance with Paragraph 18.2.2., Paragraph 18.2.1. and Paragraph 18.3.5.

18.3.3. Use.

18.3.3.1. Equipment must be used by the Contractor in the program or project for which it was acquired as long as needed, whether or not the project or program continues to be supported by State funds, and the Contractor must not encumber the property without prior approval of the State. When no longer needed for the original program or project, the equipment may be used in other activities funded by the State.

18.3.3.2. During the time that equipment is used on the project or program for which it was acquired, the Contractor must also make equipment available for use on other projects or programs currently or previously supported by the State, provided that such use will not interfere with the work on the projects or program for which it was originally acquired. First preference for other use must be given to other programs or projects supported by the State that financed the equipment. Use for non-State-funded programs or projects is also permissible with approval from the State.

18.3.3.3. When acquiring replacement equipment, the Contractor may use the equipment to be replaced as a trade-in or sell the property and use the proceeds to offset the cost of the replacement property.

18.3.4. Management requirements. Procedures for managing equipment (including replacement equipment), whether acquired in whole or in part with State funding, until disposition takes place will, as a minimum, meet the following requirements:

18.3.4.1. Property records must be maintained that include a description of the property, a serial number or other identification number, the source of funding for the property, who holds title, the acquisition date, and cost of the property, percentage of State participation in the project costs for the Agreement under which the property was acquired, the location, use and condition of the property, and any ultimate disposition data including the date of disposal and sale price of the property.

18.3.4.2. A physical inventory of the property must be taken and the results reconciled with the property records at least once every two (2) years.

18.3.4.3. A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft must be investigated.

18.3.4.4. Adequate maintenance procedures must be developed to keep the property in good condition.

18.3.4.5. If the Contractor is authorized or required to sell the property, proper sales procedures must be established to ensure the highest possible return.

18.3.5. Disposition. When original or replacement equipment acquired with State funds is no longer needed for the original project or program or for other activities currently or previously supported by the State, except as otherwise provided by State statutes or in this Agreement, the Contractor must request disposition instructions from the State. Disposition of the equipment will be made as follows:

18.3.5.1. Items of equipment with a current per unit fair market value of $5,000 or less may be retained, sold or otherwise disposed of with no further obligation to the State.

18.3.5.2. Items of equipment with a current per-unit fair-market value in excess of $5,000 may be retained by the Contractor or sold. The State is entitled to an amount calculated by multiplying the current market value or proceeds from sale by the State's percentage of participation in the cost of the original purchase. If the equipment is sold, the State may permit the Contractor to deduct and retain from the State's share $500 or ten (10) percent of the proceeds, whichever is less, for its selling and handling expenses.

18.3.5.3. The Contractor may transfer title to the property to an eligible third party provided that, in such cases, the Contractor must be entitled to compensation for its attributable percentage of the current fair market value of the property.

18.3.5.4. In cases where the Contractor fails to take appropriate disposition actions, the State may direct the Contractor to take disposition actions.

19. Property Trust Relationship and Liens

19.1. Real property, equipment, and intangible property, that are acquired or improved with State funds must be held in trust by the Contractor as trustee for the beneficiaries of the project or program under which the property was acquired or improved. The State may require the Contractor to record liens or other appropriate notices of record to indicate that personal or real property has been acquired or improved with State funds and that use and disposition conditions apply to the property.

Exhibit B-5 - Amendment #4

SFY 2021 Budget

New Hampshire Department of Health and Human Services

Contractor Name: On the Road to Recovery, Inc.

Budget Request for: Peer Support Services

Budget Period: SFY21 (7/1/20 through 6/30/21)

Line Item Budget Reference Number	Line Item Budget Description	Total Amount
600	**PERSONNEL COSTS**	
601	Salary & Wages	270,171
602	Employee Benefit	39,171
603	Payroll taxes	20,668
	Subtotal	**330,010**
620	**PROFESSIONAL FEES**	
624	Accounting	
625	Audit Fees	7,500
626	Legal Fees	
627	Other Professional Fees and Consultants	
	Subtotal	**7,500**
630	**STAFF DEVELOPMENT AND TRAINING**	
631	Publications and Journals	
632	In-Service Training	7,000
633	Conferences and Conventions	
634	Other Staff Development	
	Subtotal	**7,000**
640	**OCCUPANCY COSTS**	
641	Rent	111,860
642	Mortgage Payments	
643	Heating Costs	11,063
644	Other Utilities	9,840
645	Maintenance and Repairs	5,130
646	Taxes	
647	Other Occupancy Costs	3,300
	Subtotal	**141,193**
650	**CONSUMABLE SUPPLIES**	
651	Office	9,592
652	Building/Household	10,529
653	Rehabilitation/Training	
655	Food	4,900
657	Other Consumable Supplies	2,581
	Subtotal	**27,602**
	Other Expenses	
660	CAPITAL EXPENDITURES	
665	DEPRECIATION	2,901
670	EQUIPMENT RENTAL	5,540
680	EQUIPMENT MAINTENANCE	
700	ADVERTISING	2,622
710	PRINTING	350
720	TELEPHONE/COMMUNICATIONS	14,300
730	POSTAGE/SHIPPING	1,650
	Subtotal	**27,363**
740	**TRANSPORTATION**	
741	Board Members	
742	Staff	4,190
743	Members and Participants	16,664
	Subtotal	**20,854**
750	**Assistance to Individuals**	
751	Client Services	
752	Clothing	
	Subtotal	**0**
760	**INSURANCE**	
761	Malpractice & Bonding	1,730
762	Vehicles	5,076
763	Comprehensive Property & Liability	8,319
800	OTHER EXPENDITURES	1,000
801	INTEREST EXPENSE	
	Subtotal	**16,125**
	TOTAL PROGRAM EXPENSES	**$577,647**

DS
kW

Exhibit B-6 - Amendment #4

SFY 2022 Budget

New Hampshire Department of Health and Human Services

Contractor Name: On the Road to Recovery, Inc.

Budget Request for: Peer Support Services - Region VIII

Budget Period: SFY21 (7/1/21 through 6/30/22)

Line Item Budget Reference Number	Line Item Budget Description	Total Amount
600	**PERSONNEL COSTS**	
601	Salary & Wages	358,571
602	Employee Benefit	48,012
603	Payroll taxes	27,431
	Subtotal	**434,014**
620	**PROFESSIONAL FEES**	
624	Accounting	
625	Audit Fees	10,000
626	Legal Fees	
627	Other Professional Fees and Consultants	
	Subtotal	**10,000**
630	**STAFF DEVELOPMENT AND TRAINING**	
631	Publications and Journals	
632	In-Service Training	7,000
633	Conferences and Conventions	
634	Other Staff Development	
	Subtotal	**7,000**
640	**OCCUPANCY COSTS**	
641	Rent	131,860
642	Mortgage Payments	
643	Heating Costs	12,938
644	Other Utilities	11,090
645	Maintenance and Repairs	5,630
646	Taxes	
647	Other Occupancy Costs	3,453
	Subtotal	**164,971**
650	**CONSUMABLE SUPPLIES**	
651	Office	9,092
652	Building/Household	12,196
653	Rehabilitation/Training	
655	Food	6,400
657	Other Consumable Supplies	1,238
	Subtotal	**28,926**
	Other Expenses	
660	CAPITAL EXPENDITURES	
665	DEPRECIATION	2,901
670	EQUIPMENT RENTAL	5,540
680	EQUIPMENT MAINTENANCE	
700	ADVERTISING	2,624
710	PRINTING	350
720	TELEPHONE/COMMUNICATIONS	14,894
730	POSTAGE/SHIPPING	1,650
	Subtotal	**27,959**
740	**TRANSPORTATION**	
741	Board Members	
742	Staff	3,890
743	Members and Participants	17,664
	Subtotal	**21,554**
750	**Assistance to Individuals**	
751	Client Services	
752	Clothing	
	Subtotal	
760	**INSURANCE**	
761	Malpractice & Bonding	1,730
762	Vehicles	5,076
763	Comprehensive Property & Liability	8,319
800	OTHER EXPENDITURES	
801	INTEREST EXPENSE	1,000
	Subtotal	**16,125**
	TOTAL PROGRAM EXPENSES	**$710,549**

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

Contractor Name: On the Road to Recovery, Inc.

Budget Request for: Peer Support Services: SUSD Start Up Budget
Project Title

Budget Period: SFY21

Line Item	Total Program Cost Direct	Total Program Cost Indirect	Total Program Cost Total	Contractor Share / Match Direct	Contractor Share / Match Indirect	Contractor Share / Match Total	Funded by DHHS contract share Direct	Funded by DHHS contract share Indirect	Funded by DHHS contract share Total
1. Total Salary/Wages	$ 18,252.00	$ -	$ 18,252.00	$ -	$ -	$ -	$ -	$ -	$ -
2. Employee Benefits	$ 2,705.00	$ -	$ 2,705.00	$ -	$ -	$ -	$ -	$ -	$ -
3. Consultants	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
4. Equipment:	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Rental	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Repair and Maintenance	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Purchase/Depreciation	$ 36,000.00	$ -	$ 36,000.00	$ -	$ -	$ -	$ -	$ -	$ -
5. Supplies:	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Educational	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Lab	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Pharmacy	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Medical	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Office	$ 7,000.00	$ -	$ 7,000.00	$ -	$ -	$ -	$ -	$ -	$ -
6. Travel	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
7. Occupancy	$ 15,100.00	$ -	$ 15,100.00	$ -	$ -	$ -	$ -	$ -	$ -
8. Current Expenses	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Telephone	$ 300.00	$ -	$ 300.00	$ -	$ -	$ -	$ -	$ -	$ -
Postage	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Subscriptions	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Audit and Legal	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Insurance	$ 6,800.00	$ -	$ 6,800.00	$ -	$ -	$ -	$ -	$ -	$ -
Board Expenses	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
9. Software	$ 600.00	$ -	$ 600.00	$ -	$ -	$ -	$ -	$ -	$ -
10. Marketing/Communications	$ 1,500.00	$ -	$ 1,500.00	$ -	$ -	$ -	$ -	$ -	$ -
11. Staff Education and Training	$ 5,000.00	$ -	$ 5,000.00	$ -	$ -	$ -	$ -	$ -	$ -
12. Subcontracts/Agreements	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
13. Other (specific details mandatory):		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	$ 39,645.00	$ -	$ 39,645.00	$ -	$ -	$ -	$ -	$ -	$ -
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
TOTAL	$ 132,902.00	$ -	$ 132,902.00	$ -	$ -	$ -	$ -	$ -	$ -

Indirect As A Percent of Direct 0.0%

DS
Contractor Initials KW

Date 10/27/2020

DocuSign Envelope ID: 53EF2862-7A7D-4AF9-9D24-2C75E6E32B76

State of New Hampshire

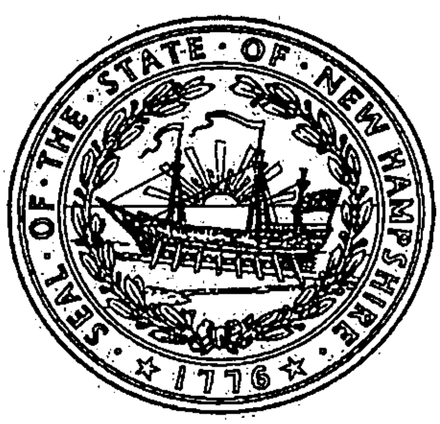
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that ON THE ROAD TO RECOVERY, INC. is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on November 16, 1988. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: **136413**

Certificate Number: **0004918587**



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed

the Seal of the State of New Hampshire,

this 20th day of May A.D. 2020.

William M. Gardner

Secretary of State

CERTIFICATE OF AUTHORITY

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

1. I am a duly elected Clerk/Secretary/Officer of ____On the Road to Recovery__________________________.
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on ___October 6_______, 2020___, at which a quorum of the Directors/shareholders were present and voting.
(Date)

VOTED: That _____Kyle Winston, Chairman of the Board_______________ (may list more than one person)
(Name and Title of Contract Signatory)

is duly authorized on behalf of _On the Road to Recovery___ to enter into contracts or agreements with the State
(Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30)** days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated:_October 6, 2020

Kathleen M Abate

Signature of Elected Officer
Name: Kathleen Abate
Title: Secretary/Treasurer

DocuSign Envelope ID: 53EF2862-7A7D-4AF9-9D24-2C75E6E32B76

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 05/26/2020

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

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

PRODUCER	CONTACT NAME: Eleanor Spinazzola	
E & S Insurance Services LLC	PHONE (A/C, No, Ext): (603) 293-2791	FAX (A/C, No): (603) 293-7188
21 Meadowbrook Lane	E-MAIL ADDRESS: Eleanorspinazzola@esinsurance.net	
P O Box 7425	INSURER(S) AFFORDING COVERAGE	NAIC #
Gilford NH 03247-7425	INSURER A : Philadelphia Insurance Co	
INSURED	INSURER B : FirstComp	27626
On The Road To Recovery, Inc., DBA: On The Road To Wellness	INSURER C :	
373 South Willow Street	INSURER D :	
D1-1 Box 316	INSURER E :	
Manchester NH 03103	INSURER F :	

COVERAGES CERTIFICATE NUMBER: 21-22 REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	[X] COMMERCIAL GENERAL LIABILITY; [ ] CLAIMS-MADE [X] OCCUR; GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [ ] PRO-JECT [ ] LOC; OTHER:			PHPK2139589	07/01/2020	07/01/2021	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 2,000,000
							PRODUCTS - COMP/OP AGG	$ 2,000,000
								$
A	AUTOMOBILE LIABILITY; [ ] ANY AUTO; [ ] OWNED AUTOS ONLY; [X] SCHEDULED AUTOS; [X] HIRED AUTOS ONLY; [X] NON-OWNED AUTOS ONLY			PHPK2139595	07/01/2020	07/01/2021	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
							Terrorism Coverage	$
A	[X] UMBRELLA LIAB [X] OCCUR; [ ] EXCESS LIAB [ ] CLAIMS-MADE; [ ] DED [X] RETENTION $ 10,000			PHUB724657	07/01/2020	07/01/2021	EACH OCCURRENCE	$ 1,000,000
							AGGREGATE	$ 1,000,000
								$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY; ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N: Y; If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WC0195685-02	03/19/2020	03/19/2021	PER STATUTE / OTH-ER	
							E.L. EACH ACCIDENT	$ 100,000
							E.L. DISEASE - EA EMPLOYEE	$ 100,000
							E.L. DISEASE - POLICY LIMIT	$ 500,000

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

CERTIFICATE HOLDER	CANCELLATION
DHHS 129 Pleasant Street Concord NH 03301	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 Kailey Kennedy

On the Road to Wellness
An Adult Education and Mental Wellness Center

On the Road to Recovery
(dba On the Road to Wellness)

Mission Statement

On the Road to Wellness is a Not-for-Profit Consumer-Driven Community of Peers Dedicated to Educate, Advocate, and Empower our Members to Manage and Maintain their Mental Health and Wellness.

377 South Willow Street, B2-4 · Manchester, NH 03103 · 603.623.4523 · Fax 603.623.2873
45 South Main Street · Derry, NH 03038 · 603.552.3177 · Fax 603.552.3179
www.otrtw.org

ON THE ROAD TO RECOVERY, INC

FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION

Years Ended June 30, 2019 and 2018

TABLE OF CONTENTS

ROWLEY & ASSOCIATES, P.C.

CERTIFIED PUBLIC ACCOUNTANTS

46 N. STATE STREET
CONCORD, NEW HAMPSHIRE 03301
TELEPHONE (603) 228-5400
FAX # (603) 226-3532

MEMBER
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

MEMBER OF THE PRIVATE
COMPANIES PRACTICE SECTION

INDEPENDENT AUDITORS' REPORT

To the Board of Trustees
On The Road to Recovery, Inc.
Manchester, New Hampshire

We have audited the accompanying financial statements On The Road to Recovery, Inc. (a New Hampshire nonprofit corporation), which comprises the statements of financial position as of June 30, 2019 and the related statements of activities and changes in net assets, cash flows and functional expenses for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. 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 involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of On The Road to Recovery, Inc. as of June 30, 2019, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America

Report on Summarized Comparative Information

We have previously audited On The Road to Recovery, Inc.'s 2018 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated October 26, 2018. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2018, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary information on page 14 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Rowley & Associates, PC

Rowley & Associates, P.C.
Concord, New Hampshire
August 23, 2019

ON THE ROAD TO RECOVERY, INC
STATEMENT OF FINANCIAL POSITION
JUNE 30, 2019 AND 2018
See Independent Auditors' Report

ASSETS	**2019**	**2018**
CURRENT ASSETS		
Cash and cash equivalents		
Operating	$ 43,443	$ 44,616
BMHS refundable	35,769	96,795
Total cash and cash equivalents	79,212	141,411
Accounts receivable	8,643	5,251
Funds held for others	-	2,171
Prepaid expenses	11,686	17,375
Total Current Assets	99,541	166,208
PROPERTY AND EQUIPMENT, at cost		
Leasehold improvements	57,154	53,144
Vehicles	66,095	48,071
Equipment & furniture	42,292	42,292
	165,541	143,507
Less accumulated depreciation	(96,734)	(98,301)
	68,807	45,206
OTHER ASSETS		
Investments	1,427	1,427
Deposits	6,675	6,675
	8,102	8,102
Total Assets	176,450	219,516
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Accounts payable	20,416	20,080
Accrued expenses	13,473	19,137
Housing escrow payable	-	2,171
Deferred revenue, BMHS funds	35,769	96,795
Total Current Liabilities	69,658	138,183
NET ASSETS		
With donor restriction	-	-
Without donor restriction	106,792	81,333
	106,792	81,333
Total Liabilities and Net Assets	$ 176,450	$ 219,516

Notes to Financial Statements

ON THE ROAD TO RECOVERY, INC
STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS
YEARS ENDED JUNE 30, 2019 AND 2018
See Independent Auditors' Report

	2019	2018
REVENUES, GAINS AND OTHER SUPPORT		
Grant income	$ 442,897	$ 444,756
Contribution income	7,851	4,734
Program service and other revenue	3,499	3,425
Interest income	324	107
Total support and revenue	454,571	453,022
EXPENSES		
Program	415,660	422,576
Management & general	13,452	10,771
Total expenses	429,112	433,347
Increase in net assets	25,459	19,675
Net assets, beginning of year	81,333	61,658
Net assets, end of year	$ 106,792	$ 81,333

ON THE ROAD TO RECOVERY, INC
STATEMENTS OF CASH FLOWS
YEARS ENDED JUNE 30, 2019 AND 2018
See Independent Auditors' Report

	2019	2018
CASH FLOWS FROM OPERATING ACTIVITIES		
Increase in net assets	$ 25,459	$ 19,675
Adjustments to reconcile excess of revenue and support over expenses to net assets provided by operating activities		
Depreciation & amortization	10,375	11,429
(Increase) Decrease in operating assets		
Funds held for others	2,171	(1)
Accounts Receivable	(3,392)	(388)
Prepaid expenses	5,689	(1,924)
Deposits	-	(4,000)
Increase (Decrease) in operating liabilities		
Accounts payable	336	14,842
Accrued expenses	(5,664)	2,878
Housing escrow	(2,171)	1
Deferred revenue, restricted BMHS funds	(61,026)	(1,898)
BMHS funds transferred to other agency	-	-
Net Cash Provided (Used) By Operating Activities	(28,223)	40,614
CASH USED BY INVESTING ACTIVITIES		
Purchases of vehicle and equipment	(33,976)	(23,208)
Net Increase (Decrease) in Cash and Cash Equivalents	(62,199)	17,406
Cash and Cash Equivalents, Beginning of Year	141,411	124,005
Cash and Cash Equivalents, End of Year	$ 79,212	$ 141,411

ON THE ROAD TO RECOVERY, INC
STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED JUNE 30, 2019 WITH COMPARATIVE TOTALS FOR THE YEAR ENDED JUNE 30, 2018
See Independent Auditors' Report

	Derry Costs	Manchester Costs	Total Programs	Management & General	Total 2019	Total 2018
Wages	$ 52,859	$ 139,228	$ 192,087	$ 1,500	$ 193,587	$ 170,773
Employee benefits	1,998	14,638	16,636	-	16,636	12,484
Payroll taxes	4,177	11,021	15,198	115	15,313	13,205
Rent	33,000	47,999	80,999	-	80,999	87,350
In-service training	49	5,474	5,523	-	5,523	4,519
Journals and publications	-	50	50	-	50	-
Telephone and internet	6,304	6,727	13,031	-	13,031	10,854
Utilities	8,436	5,585	14,021	-	14,021	12,697
Insurance	1,920	10,108	12,028		12,028	11,447
Repairs and maintenance	900	4,596	5,496	-	5,496	9,387
Office supplies	3,778	12,077	15,855	1,040	16,895	17,792
Household supplies	5,381	9,925	15,306	1,123	16,429	15,305
Other occupancy costs	-	-	-	-	-	8,025
Advertising	469	2,310	2,779	-	2,779	1,060
Food and consumable supplies	1,826	612	2,438	161	2,599	3,038
Legal and accounting	2,380	4,620	7,000	-	7,000	11,480
Equipment rental	2,200	3,200	5,400	-	5,400	5,521
Transportation	723	315	1,038	-	1,038	1,618
Vehicle expense	1,356	2,840	4,196	-	4,196	10,395
Depreciation and amortization	-	2,901	2,901	7,474	10,375	11,429
Printing	-	224	224	-	224	2,235
Postage	-	1,949	1,949	-	1,949	1,641
Dues and subscriptions	-	580	580	-	580	295
Other expenses	31	894	925	2,039	2,964	10,797
	$ 127,787	$ 287,873	$ 415,660	$ 13,452	$ 429,112	$ 433,347

ON THE ROAD TO RECOVERY, INC
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 1 NATURE OF ORGANIZATION

On The Road to Recovery, Inc. (OTRTR) is a nonprofit organization incorporated, operating under the DBA, On The Road to Wellness, under the laws of the State of New Hampshire. It operates as a consumer directed peer support organization for adults with long term mental illness, enhancing personal wellness, independence and responsibility. The Organization is supported primarily by grants from the State of New Hampshire.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES

The summary of significant accounting policies of OTRTR is presented to assist in understanding the Organization's financial statements. The financial statements and notes are representations of OTRTR's management who is responsible for their integrity and objectivity. These accounting policies conform to generally accepted accounting principles and have been consistently applied in the preparation of the financial statements.

Basis of Accounting

The financial records for OTRTR are maintained on the accrual basis of accounting. Consequently, revenues are recognized when earned and expenses are recognized when incurred.

Basis of Presentation

The financial statements of OTRTR have been prepared on the accrual basis of accounting whereby revenues are recorded when earned and expenses are recorded when the obligation is incurred. The organization reports information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions.

Net assets without donor restrictions - These net assets generally result from revenues generated by receiving contributions that have no donor restrictions, providing services, and receiving interest from operating investments, less expenses incurred in providing program-related services raising contributions, and performing administrative functions.

Net assets with donor restrictions - These net assets result from gifts of cash and other assets that are received with donor stipulations that limit the use of the donated assets, either temporarily or permanently, until the donor restriction expires, that is until the stipulated time restriction ends or the purpose of the restriction is accomplished, the net assets are restricted.

Cash equivalents

For purposes of the statement of cash flows, OTRTR considers cash on hand, deposits in banks and investments to be cash equivalents.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Support and revenue

The Organization receives most of its revenue in the form of grants from the State of New Hampshire Department of Health and Human Services Division of Behavioral Health (BMHS) and from the United States Department of Housing and Urban Development (HUD). The Organization participates in wagering programs in connection with its fundraising programs and also accepts voluntary contributions for meals.

Property and Equipment

Property and equipment are carried at cost. Depreciation is calculated on the straight-line method over the estimated useful lives of the assets. Minor repairs and maintenance are expensed as incurred. Major repairs and renovations which materially extend the useful lives of the assets are capitalized. Major classes of depreciable assets and their estimated lives are as follows:

Description	Years
Leasehold improvements	10
Equipment	5
Vehicle	5

Depreciation expense was $10,375 and $11,429 for the years ended June 30, 2019 and 2018, respectively.

Function Allocation of items

The costs of providing various program, management and rental services have been summarized in the statement of activities. Accordingly, certain costs have been allocated among the programs.

Advertising

The Organization expenses advertising costs as incurred. OTRTR had advertising costs of $2,779 and $1,060 as of June 30, 2019 and 2018, respectively.

Use of estimates

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Income taxes

The Organization has been notified by the Internal Revenue Service that it is exempt from federal income tax under Section 501(c) (3) of the Internal Revenue Code. The Organization is further classified as an organization that is not a private foundation under Section 509(a)(3) of the Code. The most significant tax positions of the Organization are its assertion that it is exempt from income taxes and its determination of whether any amounts are subject to unrelated business tax (UBIT). The Organization follows guidance of Accounting Standards Codification (ASC) 740, Accounting for Income Taxes, related to uncertain income taxes, which prescribes a threshold of more likely than not for recognition of tax positions taken or expected to be taken in a tax return. All significant tax positions have been considered by management. It has been determined that it is more likely than not that all tax positions would be sustained upon examination by taxing authorities. Accordingly, no provision for income taxes has been recorded.

In-Kind Contributions

In-kind contributions are recorded at fair market value and recognized as revenue in the accounting period in which they are received. Volunteers, mainly board members, donate time to OTRTR's program services. These services are not included in donated materials and services because the value has not been determined.

Donated Materials and Services

It is the intent of OTRTR to record the value of donated goods and services when there is an objective basis available to measure their value. For the years ended June 30, 2019 and 2018, there were no donated goods or services.

Concentration of Risk

The Organization maintains cash balances in several accounts at local banks. These accounts are insured by the Federal Deposit Insurance Corporation up to $250,000. At various times throughout the year, the Organization may have cash balances at the financial institution that exceeds the insured amount. Management does not believe this concentration of cash results in a high level of risk for the Organization. At June 30, 2019 and 2018 the Organization had no uninsured cash balances.

Comparative Financial Information

The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended June 30, 2018, from which the summarized information was derived.

ON THE ROAD TO RECOVERY, INC
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Financial Instruments

The carrying value of cash and cash equivalents, prepaid expenses, accounts receivable accounts payable and accrued expenses are stated at carrying cost at June 30, 2019 and 2018, which approximates fair value due to the relatively short maturity of these instruments.

New Accounting Pronouncement

During the year ended June 30, 2019, the Organization adopted the requirements of the Financial Accounting Standards Board's Accounting Standards Update No. 2016- 14— Not-for-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities (ASU 2016- 14). This Update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return between not-for-profit entities. A key change required by ASU 2016-14 is the net asset classes used in these financial statements. Amounts previously reported as unrestricted net assets are now reported as net assets without donor restrictions and amounts previously reported as temporarily restricted net assets and permanently restricted net assets are now reported as net assets with donor restrictions.

The accompanying information from the 2018 financial statements has been restated to conform to the 2019 presentation and disclosure requirements of ASU 2016-14.

Reclassifications

Certain financial statement and note information from the prior year financial statements has been reclassified to conform with current year presentation format.

NOTE 3 ECONOMIC DEPENDENCY

OTRTR currently receives grant funds from the State of New Hampshire Bureau of Mental Health Services. These funds are the primary source of the Organization's support. If a significant reduction or delay in the level of support were to occur, it would have an adverse effect on the Organization's programs and activities. For the years ended June 30, 2019 and 2018, the State grants made up 97% and 98% of OTRTR's total support.

NOTE 4 REVIEW BY OUTSIDE AGENCIES

The activities of the Organization are subject to examination for compliance with the requirements of the granting agency.

NOTE 5 RETIREMENT PLAN

The Organization implemented an employee IRA plan for full time employees. The State of New Hampshire approves the allocation of retirement funds and reimburses OTRTR for the expenses. Eligible employees do not make salary reduction contributions. There were contributions of $2,350 and $2,350 for the years ended June 30, 2019 and 2018, respectively.

NOTE 6 OPERATING LEASE COMMITMENT

Since July 1, 2011 OTRTR has been a tenant at will for its Derry, New Hampshire location. Total rent expense for the years ended June 30, 2019 and 2018 was $33,000 and $32,100, respectively. There is no required future minimum payment.

OTRTR was a tenant at will for its Manchester, New Hampshire location until April 2018. Total rent expense related to this location was $-0- and $47,250 for the years ended June 30, 2019 and 2018, respectively.

In May 2018 the Organization entered a ten-year, four-month lease for its Manchester, New Hampshire location. Total rent expense related to this location was $47,999 and $8,000 for the years ended June 30, 2019 and 2018, respectively. Future minimum rent as of June 30 is as follows:

2020	$ 48,758
2021	49,701
2022	50,675
2023	51,678
2024	52,711
Thereafter	174,009
	$427,532

NOTE 7 FUNDS HELD FOR OTHERS

The Organization has entered into an agreement in which it operates Bingo games on behalf of other not for profit agencies. Undistributed cash from these activities are recorded as a liability. Funds held for others consisted of the following on June 30:

	2019	2018
Housing escrow payable	$ -0-	$ 2,171

NOTE 8 SUBSEQUENT EVENTS

Management has evaluated subsequent events through August 23, 2019, the date on which the financial statements were available to be issued to determine if any are of such significance to require disclosure. It has been determined that no subsequent events matching this criterion occurred during this period.

ON THE ROAD TO RECOVERY, INC
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 9 REFUNDABLE BMHS ADVANCE

Under the terms of the service agreement with the Bureau of Behavioral Health (BMHS), a division of the State of New Hampshire's Department of Health and Human Services, OTRTR was required to segregate amounts received in excess of allowable expenses. Funds set aside in accordance with this requirement amounted to $35,769 and $96,795 for the years ended June 30, 2019 and 2018, respectively.

During the year ended June 30, 2019 BMH changed their policy regarding excess of allowable expenses. The new terms require BMH to adjust future grant distributions according to the net excess or deficit of funds per the organization's audited financial reports.

NOTE 10 FAIR VALUE MEASUREMENTS

In accordance with FASB ASC 820, *Fair Value Measurements and Disclosures*, the Organization is required to disclose certain information about its financial assets and liabilities. Fair values of assets measured on a recurring basis at June 30 were as follows:

2019	Fair Value	Quoted Prices in Active Markets For Identical Assets (Level 1)	Significant other Observable inputs (Level 2)
Accounts Receivable	$ 8,643	$ -	$ 8,643
Investments	1,427	1,427	-
	$ 10,070	$ 1,427	$ 8,643
2018			
Accounts Receivable	$ 5,251	$ -	$ 5,251
Investments	1,427	1,427	-
	$ 6,678	$ 1,427	$ 5,251

Fair values for investments were determined by reference to quoted market prices and other relevant information generated by market transactions. The fair value of accounts receivable are estimated at the present value of expected future cash flows.

NOTE 11 BOARD DESIGNATED NET ASSETS

The Organization has no board designated net assets as of June 30, 2019.

ON THE ROAD TO RECOVERY, INC
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 12 LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS

The Organization has a policy to structure its financial assets to be available as its general expenditures, liabilities and other obligations come due. The Organization's primary source of support is grants. That support is held for the purpose of supporting the Organization's budget. The Organization had the following financial assets that could be readily made available within one year to fund expenses without limitations:

	2019	2018
Cash and cash equivalents	$ 79,212	$141,411
Accounts receivable	8,643	5,251
Funds held for others	-	2,171
	87,855	148,833
Less amounts:		
Deferred revenue, BMHS funds required to be maintained under State agreement	(35,769)	(96,795)
Housing escrow payable, held for others	-	(2,171)
	(35,769)	(98,966)
	$ 52,086	$ 49,867

ON THE ROAD TO RECOVERY, INC
STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS
BY STATE APPROVED BMHS FUNDS
YEAR ENDED JUNE 30, 2019
See Independent Auditors' Report

	State Approved BMHS Funds	Non-BMHS Funds	Total
REVENUES, GAINS AND OTHER SUPPORT			
Grant income, current year	$ 422,858	$ -	$ 422,858
Grant income, prior year release	11,396	-	11,396
Grant income, supplemental grant	8,643	-	8,643
Contribution income	-	7,851	7,851
Program service and other revenue	-	3,499	3,499
Interest income	320	4	324
Total support and revenue	443,217	11,354	454,571
EXPENSES			
Wages	192,087	1,500	193,587
Employee benefits	16,636	-	16,636
Payroll taxes	15,198	115	15,313
Rent	80,999	-	80,999
In-service training	5,523	-	5,523
Journals and publications	50	-	50
Telephone	13,031	-	13,031
Utilities	14,021	-	14,021
Insurance	12,028	-	12,028
Repairs and maintenance	5,496	-	5,496
Office supplies	15,855	1,040	16,895
Household supplies	15,306	1,123	16,429
Advertising	2,779	-	2,779
Food and consumable supplies	2,438	161	2,599
Audit fees	7,000	-	7,000
Equipment rental	5,400	-	5,400
Transportation	1,038	-	1,038
Vehicle maintenance	4,196	-	4,196
Depreciation and amortization	2,901	7,474	10,375
Printing	224	-	224
Postage	1,949	-	1,949
Dues and subscriptions	580	-	580
Other expenses	925	2,039	2,964
Total expenses	415,660	13,452	429,112
Net Operating Increase (Decrease) in Net Assets	27,557	(2,098)	25,459
BMHS funds allowed for capital purchases	(33,976)	33,976	-
Net Increase (Decrease) in Net Assets	(6,419)	31,878	25,459
Net assets, beginning of year	$ -	$ 81,333	$ 81,333
Net assets (deficit), end of year	$ (6,419)	$ 113,211	$ 106,792

Notes to Financial Statements

On the Road to Recovery
(dba On the Road to Wellness)
BOARD OF DIRECTORS
Updated May 21, 2020

Executive Committee

Chairman
Kyle Winston
[redacted]
Joined: 10-19-2017
Term #1
Term Length: 3 Years
Expiration: 03-2020 (extended - COVID)

Vice-Chairman
Amy Pratte
[redacted]
Joined: 01-10-2013
Term #2
Term Length: 3 Years
Expiration: 03-2022

Secretary/Treasurer
Kathleen Abate
[redacted]
Joined: 08-11-2016
Term #1
Term Length: 3 Years
Expiration: 03-2020 (extended - COVID)

Directors

Juanita Leach
[redacted]
Joined: 01-10-2013
Term #2
Term Length: 3 Years
Expiration: 03-2022

Directors (Continued)

Heather Williams
[redacted]
Joined: 02-21-2019
Term #1
Term Length: 3 Years
Expiration: 03-2022

Thomas (Thom) DeFelice
[redacted]
Joined: 01-18-2018
Term #1
Term Length: 3 Years
Expiration: 03-2021

David Carroll
[redacted]
Joined: 01-18-2018
Term #1
Term Length: 3 Years
Expiration: 03-2021

George Proulx
[redacted]
Joined: 01-18-2018
Term #2
Term Length: 3 Years
Expiration: 03-2020 (extended - COVID)

Directors (Continued)

Elias Koester
[redacted]
Joined: 05-31-2018
Term #1
Term Length: 3 Years
Expiration: 03-2021

William (Bill) Keating
[redacted]
Joined: 07-18-2019
Term #1
Term Length: 3 Years
Expiration: 03-2022

Administrative Team

Executive Director
David Blacksmith
[redacted]

Business Manager
Peter DeLeault
[redacted]

Carly Amico

[redacted]

Summary

Efficient technology skills. Dedicated attention to detail. Effective communicator and proficient customer service skills.

Education

Timberlane Regional High School — Plaistow, NH

Scholastic Diploma July 2018

Work Experience

Market Basket

Cashier July 2016 - September 2018

- Utilized strong capability to follow instructions and learn new skills quickly as needed
- Employed keen eye for detail when stocking shelves and closing the store
- Satisfied customer needs and maintained good relationships with consumers as well as coworkers

On the Road to Wellness

Peer Support Facilitator March 2019 - current day

- Received various peer support training such as IPS core training and WRAP training
- Acclimated quickly to and enjoyed working with people on a more personal level
- Offered reliable and exceptional performance regarding office responsibilities and peer interaction

Volunteer Experience

Zoo Creatures

Volunteer July 2016 - September 2018

- Educated customers about animal care, and assisted their interaction with the animals in the store
- Cleaned animal enclosures and organized store

David J. Blacksmith

[redacted] [redacted]

HIGHLIGHTS

- Keen Ability to Network People and Resources
- Well-Developed Listening, Counseling, Problem Solving and Teaching Skills
- Excellent Verbal and Written Communication
- Team Minded Servant Leader with Strong Administrative Abilities
- Able to Handle Crisis or Stressful Situations with Ease
- Technically Proficient with Computers, Networking, Donor Software, Microsoft Office

WORK HISTORY

On the Road to Wellness, Manchester & Derry 2008 – Present
Executive Director (Since September, 2017)

Provide leadership and oversight to all areas related to peer-support agency, specializing in people managing their mental health, as well as addressing homelessness, and substance misuse. Responsibilities include: agency oversight; fiscal management; maintain integrity to the contractual relationship with the State (BMHS); all aspects of agency relationships and interagency collaborations.

- Successfully wrote high-scoring RFP for FY15 and FY17 funding cycle for BBH during previous Executive Director's absence
- Re-written/Updated Board Policies and Procedures
- Encourage expanded sustainability plans ... fund-raising, grant writing
- Successfully launched a secondary site in Derry to provide IPS services to that Region
- Effectively increased membership and active participation at both sites
- Responsible for recruiting, hiring, and supervising staff of 15
- Serving as agency representative on the Steering Committee and Workforce Development Committee for Network4Health (1115 Waiver)
- Created a vibrant newsletter which led to expanded readership/ increased membership
- Trained multiple employees and peers in the Principles and Tasks of Intentional Peer Support
- Built strong working relationships with other area agencies, thus enhancing the reputation of our agency and enhancing the programming for our members
- Encouraged expansion of programming to include outreach and community service
- Given oversight of both peer centers, keeping all things within budget requirements
- Effectively developed a contractual relationship with Mental Health Center of Great Manchester by modeling and coaching Peer Support Specialist Services to their ACT Teams

Southern New Hampshire Rescue Mission 2003 - 2008
Founder/Executive Director

Responsibilities: Staff and volunteer development, community relations, human resources, programming, outreach, counseling, fund-raising, budgeting, and public speaking.

- Founded this on-going social service agency to the homeless and poor
- Secured and enlarged donor and volunteer base
- Built strong relationships with clientele, neighborhood, community leaders, churches
- Located and purchased facilities for the work, thus creating a long-standing relationship and presence within the community
- Supervised a handful of staff and hundreds of volunteers
- Successfully began residential shelter for single homeless men

WORK HISTORY *(continued)*

Las Vegas Rescue Mission 1999 – 2003
Executive Director

Responsibilities: Staff and volunteer development, community relations, fund-raising, budgeting, human resources, programming, outreach, counseling, and public speaking.

- Initiated comprehensive Case Management Program
- Initiated and completed $1.2m building project to expand services to homeless men, and specialized population of single-fathers with children
- Effectively built relationships with area agencies to create a network for a holistic approach to enable clients to succeed
- Established an extensive and effective Job Development Program which generated over $250k into the pockets of the homeless, many securing permanent employment through the Program
- Implemented Recovery Program for those struggling with addictive behaviors
- Expanded donor base 150%; volunteer base 300%
- Responsible for recruiting, hiring, scheduling and supervising staff of 20
- Dramatically increased community involvement

EDUCATION

Moody Bible Institute, Chicago, IL 1983 – 1987
Ministerial Studies

University of Massachusetts, Lowell, MA 1973 – 1977
Bachelor of Arts
Concentrations: Music Education / Business Administration

Bedford High School, Bedford, MA 1969 – 1973
College Preparatory

ADDITIONAL TRAINING

Train the Trainer – Intentional Peer Support; Middletown, CT
Intentional Peer Support: An Alternative Approach; BBH, Concord, NH
Prison Volunteer Training, Concord, NH
Art of Listening, Hospital Chaplaincy Services
Powerful Business Writing Skills, National Seminars, Inc.
Business Management, Cornell University, Ithaca, NY (Extension)
Essentials in Management, American Management Association (Extension)

OTHER SKILLS

PC Windows Literate; Proficient in Microsoft Office; Database, Website and Newsletter Design and Development; Donor Management Software; Prolific Writer

CIVIC ACTIVITIES

Member, Nashua Continuum of Care	2003 – 2008
Member, Southern Nevada Homeless Coalition	1999 – 2003
Member, Emergency Food and Shelter Board	1999 – 2003
Chairman, Child Evangelism Fellowship	1999 – 2001
Member, Manchester Rotary, Manchester, VT	1997 – 1999
Director of Volunteer Chaplains, Sonoma Valley Hospital	1991 – 1992
Southern Nevada Task Force for the Homeless	1987 – 1990

Personal and Professional References Available Upon Request

JAYSON BLACKSMITH

CONTACT

[redacted]
[redacted]

EDUCATION

BACHELOR OF SCIENCE IN AUDIO AND MEDIA TECHNOLOGIES

New England Institute of Art

June 2016

TECHNICAL SKILLS

Live Audio Production
Video Producing
Lighting Systems
DAW Operation
Studio & Post Production
Camera Operations
Graphic Design
Adobe Creative Suite
Equipment Maintenance
Signal Routing & Troubleshooting
Audio, Video & Photo Editing
Video & Audio Distribution

PERSONAL SKILLS

Problem Solving
Detail-oriented
Time management
Communication
Leadership
Teamwork

REFERENCES

Provided upon request

PROFILE

Detail-oriented and innovative professional with vast technical knowledge and more than 8 years hands-on experience in creating, integrating and finetuning a distraction-free, consistent environment into the overall technical production of services and events. Known and respected as a creative solutions provider and out-of-the-box thinker with track of overseeing live production for services and events with emphasis on efficiency, and translating service requirements into system improvements. Proven leader that thrives in high-pressure collaborative environments.

PROFESSIONAL EXPERIENCE

Production Engineer
Production Management Intern
Front of House Engineer
At Manchester Christian Church | Aug. 2016 – Present

- Collaborate with the Pastor, Worship Director and Technical Director to create a cohesive, engaging, spiritually authentic worship service
- Perform core Production Engineer duties including service producing, sound reinforcement, front of house mixing, video production, lighting design, signal routing, and troubleshooting
- Implement and maintain development best practices
- Train and mentor volunteers for proper maintenance of production equipment

Audio Designer and Team Lead
At The Palace Theatre | May 2018 – Mar. 2018

- Organized and led the team to The Palace Theatre's most ambitious and successful show in its 100+ years of history
- Responsible for all sound reinforcements and creative decisions as it pertained to audio
- Provided technical support and oversaw ways to develop and improve audio tools and workflow
- Worked effectively under pressure and managed the audio team

Production Team Lead
Youth Director and Worship Leader
At Manchester Vineyard Community Church | Jun. 2010 – Aug. 2016

- Provided live Front of House and Monitor mixing
- Edited sermons for online distribution
- Performed live worship, and developed and maintained curriculum for middle & high school students
- Coached team in basic AVL operation
- Assembling and coordinating new volunteers

John G. Brodeur

[redacted]

Objective

Assist On the Road to Wellness Program as a driver for their program recipients.

Employment

October 2019 – Present – On The Road To Wellness

Hired as driver for members unable to drive to Wellness Center, as well as other duties requested. During COVID-19 pandemic holding ZOOM daily peer group sessions at Wellness Center to help members through the isolation of the pandemic and delivering peer support group kits.

1981 - 2012

Retired from BAE Systems, Nashua, N.H. after 31 years as a Program Planning Specialist supporting multiple programs throughout my tenure.

Performance Reviews during BAE Employment

Received excellent performance ratings throughout my 31 years at BAE Systems.

Education

Graduate of Bishop Guertin High School Class of 1978, and Associates Degree in Business from Hesser College in 1991.

Military Service

U.S. Army 1978 – 1981 with Honorable Discharge.

LEE ANN HUSSEY

[redacted]
[redacted] [redacted]

Summary
Service professional with over 20 years of experience providing support to customers or Members

Education and Certificates
- IPS Core Training
- WRAP Facilitator Training
- Conflict Resolution Training
- Sexual Harassment Training
- Member Rights Training
- Hesser College, Associate in Psychology

Experience
2009 – Present
Team Leader, On the Road to Recovery, Inc.
- Provide leadership to fellow teammates
- Assist in the implementation of program at peer support center
- Create an environment for learning how to live with mental health issues
- Provide an example of the ten values of intentional peer support
- Practice the four tasks and three principles of intentional peer support
- Create, research, and facilitate several peer support groups per week
- Welcome new Member to center and explain the purpose of the center
- Process new Membership Application Forms and maintain Membership Records
- Provide support by developing wellness plans with Members
- Provide conflict resolution for Members and staff
- Co-facilitate Wellness Recovery Action Plan workshops
- Provide outreach on telephone and in community
- Participate in co-reflection
- Open and close center
- Assist in maintaining physical center
- Order and replenish supplies for the center

2007 – 2009
Transitional Housing Manager, On the Road to Recovery, Inc.
- Notified social workers at New Hampshire Hospital of vacancies
- Collected rent and maintained documentation
- Facilitated meetings between residents
- Met with individuals regarding their progress
- Provided conflict resolution for residents
- Communicated with agencies that referred candidates
- Communicated with agencies that provided housing for residents
- Created and implemented a statistics form, saving hours every month
- Assisted in maintaining physical facility
- Ordered and replenished supplies for the facility

Mallory Manning

[redacted]

Education:

Londonderry High School, Londonderry, NH — June 2014

Work Experience:

Ticket Sales for Athletic Events — January 2012-October 2013

Windham High School, Windham, NH

I sold tickets and calculated change for many customers in a limited time

Hostess — March 2014-August 2014

Cracker Barrel Old Country Store, Derry, NH

Maintained an equal number of customers for each server
Marketed special menu items to guests
Serviced customer complaints
I have seated over 100 guests in less than 30 minutes

Hostess

Airport Diner, Manchester, NH — April 2015-July 2015

Maintained an equal number of customers for each server
Serviced customer complaints
Answered telephone calls
Took to-go orders and room service orders for the connecting hotel
Cashier
Delivered room service orders to hotel
Assisted servers

Cashier

Hazelton Orchards, Chester, NH — December 2016-November 2017

Cashier
Restocked produce
Ran pick-your-own stand
Created visual advertisements
Serviced customer complaints
Assisted in taking down netting over blueberry fields at the end of the season

Peer Support Facilitator March 2019-Current

On The Road to Wellness, Derry, NH

Facilitate peer support groups

Make and answer outreach calls with new and existing members

Make lunch for members

Various cleaning tasks

Ran workshop during retreat event

Member of re-opening committee following COVID-19

Technical Skills:

Microsoft Office: Word, Excel, and PowerPoint

Social Media: YouTube, Facebook, Instagram, Twitter

MARK A. SANFORD

[redacted]

PROFESSIONAL OBJECTIVE

Experience IT professional over 23 years performing Business Systems Analysis. It is my goal to utilize my knowledge and expertise to create solutions to challenging and complex problems enhancing the company's growth and success.

EDUCATION & TEACHING EXPERIENCE

Rivier College, Nashua, NH – Masters of Business Administration

Saint Anselm College, Manchester, NH – Bachelor of Arts in Business

Bryant University, Smithfield, RI - Business Analyst Certificate

Instructor:

Massasoit Community College, Brocton, MA 2001-2002
Bristol Community College, Fall River, MA 1998-2001

– Taught core computer classes: MS office, Windows, Outlook, Internet, & COBOL Programming

TECHNICAL COMPETENCIES

OPERATING SYSTEMS: WINDOWS XP 7, 8.1 10 ♦ IBM 3090,3741 ♦ WINDOWS SERVER 2000/2005

SOFTWARE: PEOPLESOFT HR & FINANCIAL SUPPLY CHAIN 8.4 ♦ SQR ♦ MS OFFICE ♦ LOTUS NOTES ♦ SAS ♦ DATAFLUX ♦ CRYSTAL REPORTS ♦ IDMS ♦ JCL ♦ EASYTRIEVE ♦ CICS ♦ VSAM ♦ TSO/ISPF ♦ XPEDITOR ♦ NICELABEL ♦ VAI

APPLICATIONS: SQL-SERVER ♦ ORACLE ♦ PEOPLESOFT ♦ SYMANTEC ♦ MS ACTIVE DIRECTORY

NETWORKING: NOVELL ♦ VMWARE ♦ ESXI.LAN/WAN ♦ TCP/IP

LANGUAGES: COBOL ♦ PEOPLESOFT ♦ CRYSTAL REPORTS ♦ LMS ♦ FINANCIAL SUPPLY CHAIN ♦ WAREHOUSING ♦ HTML ♦ RPG ♦ SQL ♦ TSQL

PROFESSIONAL EXPERIENCE

Peer Support Driver **2020-Present**
On the Road to Wellness (OTRTW)

- Drive Support Van to pick up and drop off Center Members at their place of residence
- Lead Peer Support Groups – online (Zoom and Facebook LIVE) and in-person.
- Keep update records on Support Van
- Provide Peer Support Outreach to Members
- Participate in IPS (Intentional Peer Support) Certified Training
- Assist Members with crisis, trauma, homelessness, and mental health lived experience

MARK A. SANFORD

[redacted]

Application Support — **2014 – 2019**

ACE Surgical Supply Company

- Monitoring MS SQL-Server system & supporting system back-ups
- Providing help desk support & tech support for MS office suite
- Quality assurance & testing continuity planning: disaster recovery protocols
- Maintaining System Documentation
- Designing & conduction training programs for users
- Performed User Acceptance Testing (UAT) process
- Designed, programmed and implemented tech solutions on proprietary software

Inventory Specialist — **2011 – 2012**

GolfSmith, Inc.

- Provided high quality customer service
- Processed orders & return requests
- Acted as team leader
- Performed year-end inventory & developed and managed all inventory reporting

Systems Analyst — **2008 – 2010**

JGCMI, Inc.

- Designed & conducted training programs, provided MS Office support
- Performed business and data analysis on all facets of the business
- Maintained marketing documentation
- Maintained internal network
- Provided processes and procedures companywide

Project Manager — **2006 – 2008**

S.A.S. Institute

- Facilitated SAS-Retail software installations for high profile clients
- Interfaced with clients nation-wide providing technical configurations, support, & implementation
- Lead Project Manager successfully implementing the SAS-Merchandise Planning software platform
- Directed several data conversion projects and implemented Customer Data Integration projects
- Managed the implementation of an automated credit collections software saving over $30M
- Recognized by on-site CEO for relationship building

Business Systems Analyst — **2004 – 2006**

SAS-Dataflux

- Designed and conducted training programs
- Performed business and data analysis on all facets of the business
- Maintained IT protocols. technical specifications, and network requirements
- Monitored system performance, supported system back-ups, provided helpdesk support
- Developed and maintained trusted business relationships with a large customer base
- Lead consultant of system implementation of marketing & solution delivery, provided gap analysis, requirement gathering, testing, integration, strategy consulting and processed all requirements into solution documentation
- Interfaced with external consultant to manage all Network & IT efforts

MARK A. SANFORD

[redacted]

Sr. Program Analyst **1996 – 2004**

Converse, Inc (1996-1998) Acushnet Company (1998-2004)

- Developed computer programming for Finance & HR departments for PeopleSoft applications
- Sr. Program Administrator/Project Manager for Web-based Legacy AS400 application software, Crystal Reports, PeopleSoft, & SQL-Server
- Programmed in COBOL, JCL, RPGIII, CL, CICS, VSAM, TSO/ISPF, Xpediter, and DB2 with extensive SQL coding/testing and worked with TSO/ISPF, Xpediter
- Sr. Program Administrator/Project Manager consultant of automated Accounts Receivable Credit application software platform, acting as a liaison between IT, HR, and Finance department

Peter P. Deleault

[redacted]

Experience:

3/2007 to Present: Concord Food Cooperative, Inc., 24 S. Main St., Concord, NH 03301 and 52 Newport Rd., New London, NH 03257

Controller: Concord Food Cooperative is a cooperative natural and organic grocery store with 2 locations with sales of over 7.5 million and 74 employees. Oversee accounting department and all accounting functions including but not limited to all State and Federal tax filings and deposits, AP/AR, account reconciliation, budget analysis and preparation, monthly and quarterly financial reports and analysis, cash flow analysis and cash management.

06/2007 to Present: On The Road To Recovery Inc., 373 South Willow St., PMB 316, Manchester, NH 03103

Controller: OTRTR is a non-profit peer support mental health organization funded by State and Federal funds covering Manchester and Derry areas. Responsible for all payroll and all State and Federal tax filings and deposits, AP/AR, account reconciliation, budget analysis and preparation, monthly and quarterly financial reports and analysis, cash flow analysis, cost center management. Prepare and file quarterly financial reports to the State Bureau of Behavioral Health. Prepare and work with State Accountants and Auditors for required annual audits.

07/2007 to Present: Tri-city Consumer Cooperative, Inc., 55 Summer St., Rochester, NH 03867

Controller: TCC is a non-profit peer support mental health organization funded by State and Federal funds covering the greater Rochester area. Responsible for all payroll and all State and Federal tax filings and deposits, AP/AR, account reconciliation, budget analysis and preparation, monthly and quarterly financial reports and analysis, cash flow analysis, cost center management. Prepare and file quarterly financial reports to the State Bureau of Behavioral Health. Prepare and work with State Accountants and Auditors for required annual audits.

04/2004 to Present: Lakes Region Consumer Advisory Board, Inc., 328 Union Ave., Laconia, NH 03246

Controller: LRCAB is a non-profit peer support mental health organization funded by State and Federal funds covering Lakes Region and Concord. Responsible for all payroll and all State and Federal tax filings and deposits, AP/AR, account reconciliation, budget analysis and preparation, monthly and quarterly financial reports and analysis, cash flow analysis, cost center management. Prepare and file quarterly financial reports to the State Bureau of Behavioral Health. Prepare and work with State Accountants and Auditors for required annual audits.

07/1992 to 01/2007: Sarabby, Inc., dba APPS Paramedical Services, 1 Old Hill Rd. Bow, NH, 03304.

Owner, Business Manager. Responsible for all aspects of business management, marketing, human resources and all of the bookkeeping and accounting responsibilities including payroll, all the monthly and quarterly tax deposits and filings for both Federal and State, AR/AP, account reconciliation. Sold business.

03/1995 to 03/2000: Chemdata Occupational Health & Drug Testing.

Owner, Business Manager. Responsible for all aspects of business management, marketing, human resources and all accounting responsibilities. Provided health and drug screens, DOT physicals and pulmonary function testing to local construction and trucking industries as well as municipal Firefighters and other industry workers utilizing respirators. Sold business.

1980 to 1990: Bank of New Hampshire, N. Main St., Concord, NH 03301.

Assistant Vice President-Loan Officer & Department Manager. Review financial statements, loan decision and processing, oversee loan department processes and personnel. Business marketing and loan development.

Education:

09/2004 to 04/2005: Hesser College, Manchester, NH. Advanced Computer course program to obtain certifications in both A+ and Network+.

1985-1989: University of New Hampshire, various courses in accounting, business management, bank management.

1973-1976: St. Anselm's College, 2 ½ years pre-med.

References upon request.

RENEE ROUTHIER

[redacted] • [redacted] • [redacted] • [redacted]

SUMMARY OF QUALIFICATIONS

Highly organized and detail-focused **Bookkeeper** with an exceptional track record of accurately handling financial reporting in deadline-oriented environments.

- ➢ Proficient in all aspects of recording transactions, posting debits and credits, reconciling accounts, and ensuring accuracy and completeness of data.
- ➢ Abilities include, but are not limited to, developing and accurately producing monthly, quarterly, and annual financial statements as well as payroll and other tax returns.
- ➢ Experience in managing accounts payable, including proof of statements from vendors, and accounts receivable, including generating invoices and monthly statements for clients.
- ➢ Proven ability to identify and implement improvements to streamline processes and increase efficiency and productivity.
- ➢ Excellent computer skills; proficient with Microsoft Word, Microsoft Excel, QuickBooks, Microsoft Money and various other Accouting softwares with the able to learn proprietary systems/applications quickly and easily.

Attentive and compassionate **Peer Support Team Leader** whose strong work ethics provide for a well rounded individual.

- ➢ Teaches Creative Arts
- ➢ Researches and teaches Recovery Topics, Tasks & Values, Principles of IPS, Music Appreciation, among many other informative and fun groups.

Skill Proficiencies

- Accounts Payable/Receivable
- Financial Statements
- Intentional Peer Support
- Customer Service
- Account Reconciliation
- Insurance Audits
- Bank Reconciliations

EDUCATION

Credits earned in Accounting/Finance equal to Junior year in College

Southern New Hampshire University, Manchester, NH

TRAININGS

- IPS CORE TRAINING
- MENTAL HEALTH FIRST AID
- SUICIDE TRAINING
- LBGTQ TRAINING
- ATTENDANCE OF PEER SUPPORT CONFERENCE
- WHAM

Continued...

RENEE ROUTHIER

TRAININGS CONTINUED

- WRAP
- ONGOING CO-REFLECTIONS, WEBINARS AND OTHER TRAININGS

PROFESSIONAL EXPERIENCE

On The Road To Wellness 5/2018 to present

Team Leader

Changed to Team Leader and overseeing Derry staff and location. Still facilitating groups with members. Researching subjects and sharing knowledge found to enhance member's knowledge and lives. Teaching Creative Arts. Assisting members with computer research. Keeping track of petty cash and café cash among other duties for the Center.

Peer Support Driver/Assistant

Driving van to pickup and drop off members from On The Road To Wellness doing peer support on the van while driving by asking how people's days were and how they were feeling.

Changed to Peer Support Assistant and facilitating groups with members. Researching subjects and sharing knowledge found to enhance member's knowledge and lives. Teaching Creative Arts. Assisting members with computer research.

Hitachi Cable America, Inc. 9/2016 to 5/2017

Payable/Payroll Assistant

Processing Accounts Payable in proven batches, proving statements from vendors and communicating with vendors researching problems with invoices.

Processing Payroll with time card information in ADP on a weekly basis including, but not limited to, proving timecards, processing advances, processing changes in deductions, etc...

Also assisted with Receptionist duties.

Accountemps/Robert Half International, Inc. 11/2015-9/2016

Accounts Payable/Payroll Assistant

Processing Accounts Payable in proven batches, proving statements from vendors and communicating with vendors researching problems with invoices.

Processing Payroll with time card information in ADP on a weekly basis including, but not limited to, proving timecards, processing advances, processing changes in deductions, etc...

Also assisted with Receptionist duties. This was a temp to hire position.

RENEE ROUTHIER

Town of Derry, NH 3/2006 to 3/2016

Supervisor of the Checklist

- responsibilities include registering voters, running the registration portion at the polls, doing change requests, answering questions on voting registration and the like. Chairman for the last 4 years.

Self employed Bookkeeper and Tax preparer 1/2003 to present

- responsibilities included bank reconciliation, accounts payable, accounts receivable, input into Quickbooks, general ledger and financial reporting to customer.

Circle of L.I.F.E. 9/2006 through 4/2008

Driver/Arts & Crafts Instructor/Computer Class Instructor

- Drove 60 mile one way pick up route to bring psychologically disabled persons to activities and classes at the Circle of L.I.F.E. Later changed to instructing Arts & Crafts class where I planned activities and
- instructed members on completing the crafts. Also taught the Computer class by teaching use of Windows, handling and assembling hardware and Microsoft Word use.

Accountemps 2005

Accounting/Bookkeeping Assignment

Temporary Agency assigned me to a lawyer's office to

- Perform Accounts Receivable reconciliations, Bank reconciliations and any other detailed research needed for their and client's books.

Key Contributions:

- Detailed research in balancing over a year's worth of bank reconciliations
- Detailed research and matching of Accounts Receivable and bank transactions

Scott McCormack

[redacted]

March 1, 1994 –Present

On the Road to Wellness
Peer Support Assistant

Objective:
Intentional peer support
Help members unlearn learned helplessness.

Education:

Salem High School	1985-1989	Salem, NH
Granite State College	2005-2009	Manchester, NH

Associates in arts and general studies, Dean's list 2008 and 2009

Granite State College
Bachelor of Science and Behavioral Science 2009-2011
Graduated Magna cum Laude

Additional Training

Intentional Peer Support Core
WRAP 101
Warm-Line

Sean D. Jameson
[redacted]

Education

2012- Present — **New Hampshire Institute of Art**, Manchester, NH
- Open studio classes
- Continuing Education

Sept. 2008-2011 — **New Hampshire Technical Institute**, Concord, NH
- Architectural CAD Certification

2005-May 2008 — **New England College**, Bridge St., Henniker, NH
- B.A. Art Major with concentrations in Studio Art, Painting and Drawing, and Graphic Design
- 3.2 GPA

2004 – 2005 — **Franklin Pierce College**, 20 College Rd, Rindge,NH
- Major: Art

2000-2004 — **Pinkerton Academy**, Derry, NH
- High School Graduate

Employment:

Jan. 2019-present — **On the Road to Wellness, Manchester, NH**
- Peer Support Staff
- Peer Support Certification
- Trained annually in Peer Support Co-Reflection
- Responsible for running groups and State of NH paperwork
- Mental Health First Aid Certification
- Attended State of NH Mental Health Professional Development
- Clerical responsibilities

2015-Present — **Artist**
- Founder of **Phenomenon Art** **www.phenomenonart.com**

Spring, 2018 — **Dollar Tree**, Manchester, NH
- New Store set up crew, Preparation for opening.
- Unloading trucks
- Stocking selves
- Organizing store displays

2006-Present **Manchester Artists Association,** Manchester, NH
- Board Member, Program Director
- Selects professional speakers for Monthly meetings
- Recipient of Artist of the Month on several occasions

Feb. 2012 - Present **Granite Pathways**, Manchester & Portsmouth, NH
- Volunteer
- Member Representative
- Assisted the Director in numerous projects
- Non-profit development initiatives

August 2012- 2013 **Easter Seals**
- Bus Monitor- Disability Services

2011-2012 **Allstate Insurance**, Hudson, NH
Customer Service
- General clerical
- Manage payments from customers
- Data entry
- File management
- Telemarketing

2009-2010 **On the Road to Wellness**, Manchester, NH
- Peer Support Cert. State of NH
- Transitional Housing Coordinator
- Ran and sat in on groups for peer support
- Managed 6 bedrooms for agency

Community Service and Member Participation

2010-Present
- State of NH Mental Health Planning & Advisory Council (2015-present)
- On the Road to Wellness
- Granite Pathways
- Celebrate Recovery Program at Manchester Christian Church
- Main Street Mission Bible Study
- Local Manchester Art Shows with professional affiliation at Jupiter Hall, Manchester, NH

Technical Skills
- Microsoft Office Suite
- Zoom and other video conferencing platforms
- Facebook
- Auto Cad

Shelby Hedlund

[redacted]

Qualifications

NH Certified Peer Support Specialist
Certified WRAP Co-Facilitator
Certified in Intentional Peer Support
Certified WHAM Facilitator
Completed Mental Health First Aide training

Work History

Program Director
On The Road to Wellness
January 2018 to Present
Creates the monthly calendar and group schedules, manages staff and day to day operations of both centers.

Peer Respite Staff H.E.A.R.T.S Crisis Respite
February 2017 to January 2018

Uses knowledge of WRAP and IPS to support guests. Responsibilities include supervision of up to two guests, taking notes, light cleaning, and answering the Respite phone.

Peer Support Assistant
On The Road To Wellness
September 2016 to January 2018

Uses IPS to establish relationships with members and support them in their wellness. Responsibilities include running groups, one on one support, answering phones, light cooking and cleaning, updating all bulletin boards in the center, and remaining available as a backup driver when needed.

Key holder
Advanced Spa and Pool

2013 to Present

Previous full time and current seasonal key holder.
Obtained 3 levels of certification in pool water chemistry including the highest possible of Water Care Expert. Responsibilities include opening and closing the store, training new employees on water testing and chlorine demands, running water tests, answering phones, counting inventory, operating register, assisting customers with finding the correct chemicals.

Shelby Hedlund

[redacted]

Education

Eastern Nazarene College

September 2013 to April 2015

Communications and Religion

Alvirne High School
September 2009 to May 2013

Majored in Early Childhood Education

Received High School Diploma

Skills
Customer Service (7 years)

Cash Register (7 years)

Microsoft Office (5 years)

Lesson Planning (2 years)

Retail (7 years)

Employer Contacts:
Jim Hedlund
Owner at Advanced Spa and Pool

603-235-1679

H.E.A.R.T.S. Repsite

Tom Doucette Director

603-882-8400

Tara R. Shramek

[redacted]

Education

Hesser College

Hesser College Manchester

Associates of Business – Broadcast Management

Graduated- May 2007

Manchester Memorial High School

Manchester Institute of Technology- Video Productions
Graduated- June 2005

Work Experience

Helped take care of Handicapped Mother (2013 - Present)

- Provides transportation for handicapped Mother to Doctors Appointments and where ever else she needs to go.

Jobs for New Hampshire Graduates (2004-2005)

- Packing boxes at a warehouse for food banks at Southern New Hampshire Services

Spooky World New England – Seasonal (Sept-Nov) 2010 to 2017

- Scare Actor, trusted to the first room of the Torment haunted house. Trained new people working in the room for the first time on their duties.

Studied With Jordon Rich. Professional Tape available.

On The Road to Wellness – February 10th, 2020 to Present.

- Driving the van for members, facilitating peer support groups.

Mental Health First Aid training certificate.

Activities

Anime

Voice Over Work

Video editing

Blogging

College theater club

Radio DJ for college radio station

On the Road to Recovery

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
David Blacksmith	Executive Director	54,000.00	100	54,000.00
Peter DeLeault	Finance Officer	22,000.00	100	22,000.00
Shelby Hedlund	Program Director	34,320.00	100	34,320.00
Lee Ann Hussey	Team Leader - Manchester	10,920.00	100	10,920.00
Scott McCormack	Peer Support Facilitator	1,976.00	100	1,976.00
Sean Jameson	Peer Support Facilitator	9,880.00	100	9,880.00
Mark Sanford	Peer Support Facilitator	9,880.00	100	9,880.00
Jayson Blacksmith	IT/Maintenance/Driver	7,904.00	100	7,904.00
Tara Shramek	Driver	7,410.00	100	7,410.00
Michael Kustra	Driver	7,410.00	100	7,410.00
Janice Pushor	Peer Support Facilitator	9,880.00	100	9,880.00
Carly Amico	Peer Support Facilitator	9,880.00	100	9,880.00
Mallory Manning	Peer Support Facilitator	9,880.00	100	9,880.00
John Brodeur	Driver	13,832.00	100	13,832.00
New Hire	SUSD Program Manager	38,420.00	100	38,420.00
New Hire	SUSD PS Facilitator	32,240.00	100	32,240.00
New Hire	SUSD PS Driver	32,240.00	100	32,240.00
New Hire	SUSD PS Facilitator	18,720.00	100	18,720.00
New Hire	SUSD PS Facilitator	18,720.00	100	18,720.00
New Hire	SUSD PS Facilitator	15,600.00	100	15,600.00
New Hire	SUSD PS Facilitator	15,600.00	100	15,600.00

State of New Hampshire
Department of Health and Human Services
Amendment #4 to the Peer Support Services Contract

This 4th Amendment to the Peer Support Services contract (hereinafter referred to as "Amendment #4") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and The Stepping Stone Drop-In Center Association (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 108 Pleasant Street, Claremont, NH 03743.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 29, 2016, (Item #23), as amended on June 20, 2018, (Item #33B), June 19, 2019, (Item #28), and on June 24, 2020, (Item #27), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, and Exhibit C-1, Revisions to General Provisions, Paragraph 3, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to increase the price limitation and modify the scope of services to support continued delivery of these services; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Delete Exhibit A - Amendment #2, Scope of Services, in its entirety and replace with Exhibit A – Amendment #4, Scope of Services, which is attached hereto and incorporated by reference herein.
2. Delete Exhibit B, Amendment #2, Methods and Conditions Precedent to Payment in its entirety and replace with Exhibit B – Amendment #4, Methods and Conditions Precedent to Payment, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #4 remain in full force and effect. This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

10/31/2020
Date

DocuSigned by:
Katja Fox
ED9D05B04C83442...
Name: Katja Fox
Title: Director

The Stepping Stone Drop-In Center Association

10/31/2020
Date

DocuSigned by:
Paul Marinelli
8ADFDA666B2944D...
Name: Paul Marinelli
Title: Treasurer

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

11/1/2020

Date

DocuSigned by:

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Name: Catherine Pinos
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: ________________ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Exhibit A - Amendment #4

Scope of Services

1. **Provisions Applicable to All Services**

1.1. The Contractor shall submit a detailed description of the language assistance services they shall provide to persons with limited English proficiency to ensure meaningful access to their programs and services within ten (10) days of the contract effective date.

1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire (NH) General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

1.3. The Contractor shall provide peer support services in accordance with NH Administrative Rule He-M 400, Community Mental Health, Part 02, Peer Support, referred to as He-M 402, that:

1.3.1. Increase quality of life for individuals living with mental illness in NH.

1.3.2. Increase hope for and belief in the possibility of recovery for individuals living with mental illness in NH.

1.3.3. Increase choice regarding the services and supports available to individuals living with mental illness in NH.

1.3.4. Provide alternatives to and reduce the use of more restrictive and expensive services such as hospitalization.

1.3.5. Increase social connectedness for individuals living with mental illness in NH.

1.3.6. Increase satisfaction with peer support services.

1.4. The Contractor shall provide mental health peer support services to individuals who are eighteen (18) years of age or older who:

1.4.1. Self-identify as a recipient, as a former recipient, or at a significant risk of becoming a recipient of mental health services, and may include individuals who are homeless.

1.5. For the purposes of this contract, any reference to days shall mean consecutive calendar days, unless otherwise denoted as business days.

1.6. The Contractor agrees that if the performance of services involves the collection, transmission, storage, or disposition of Part 2 substance use disorder (SUD) information or records created by a Part 2 provider the information or records shall be subject to all safeguards of 42 CFR Part 2.

2. **Definitions**

2.1. **Board of Directors** means the governing body of a nongovernmental peer support agency.

2.2. **Business Days** are defined as Monday through Friday, excluding Saturday and Sunday.

2.3. **Consumers** are any individual, eighteen (18) years of age or older, who self-identifies as a recipient, as a former recipient, or as a significant risk of becoming a recipient of publically funded mental health services.

2.4. **Guests** are any individuals who are invited to visit the peer support agency by a member, participant, or the peer support agency.

2.5. **Homeless** is (1) an individual or family who lacks a fixed, regular, and adequate nighttime residence; or (2) an individual or family who has a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels and congregate shelters), an institution other than a penal facility that provides temporary residence for individuals intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

2.6. **Members** are any consumers, who have made an informed decision to join, and agree to, abide by, and support the goals and objectives of peer support services.

2.7. **Mental illness** is defined in RSA 135-C:2 X, namely, "a substantial impairment of emotional processes, or of the ability to exercise conscious control of one's actions, or of the ability to perceive reality or to reason, when the impairment is manifested by instances of extremely abnormal behavior or extremely faulty perceptions. It does not include impairment primarily caused by: (a) epilepsy; (b) intellectual disability; (c) continuous or noncontinuous periods of intoxication caused by substances such as alcohol or drugs; or (d) dependence upon or addiction to any substance such as alcohol or drugs."

2.8. **Participant** means a consumer, who is not member, who participates in any aspect of peer support services.

2.9. **Peer Support Agency (PSA)** means an organization whose primary purpose is to provide culturally appropriate peer support, peer education, and peer programming to persons eighteen (18) year of age and older who self- identify as having a mental illness.

2.10. **Quarter or Quarterly** is defined as the periods of July 1 through September 30, October 1 through December 31, January 1 through March 31, and April 1 through June 30.

2.11. **Recovery** means for an individual with a mental illness, development of personal and social skills, beliefs and characters that support choice, increase quality of life, minimize or eliminate impairment, and decrease dependence on professional services.

2.12. **Region** is the geographic area of cities and towns in New Hampshire, as defined by the Department.

2.13. **Serious Mental Illness (SMI)** refers to individuals whom the state defines as having either Serious Mental Illness (SMI) or Serious and Persistent Mental Illness (SPMI) pursuant to N.H. Revised Statutes Annotated (RSA) 135-C:2, XV.

2.14. **Week** is defined as Monday through Sunday.

3. Scope of Services

3.1. Peer Support Services

3.1.1. The Contractor shall provide in-house and community based services for New

Exhibit A - Amendment #4

Hampshire residents.

3.1.2. The Contractor shall provide peer support services that are provided for consumers and by consumers including, but not limited to:

3.1.2.1. Peer support services that include supportive interactions, shared experiences, acceptance, trust, respect, lived experience, and mutual support among members, participants, staff and volunteers.

3.1.2.2. Maintenance of a safe physical location that:

3.1.2.2.1. Is open a minimum of forty-four (44) hours per week, eight (8) hours per day, five (5) days per week and four (4) hours on one (1) additional day per week at each location; and

3.1.2.2.2. Provides face-to-face or telephone peer support services to PSA members or others who contact the PSA at a minimum of forty (40) hours per week at each location.

3.1.2.3. Peer support services based on the Intentional Peer Support model that:

3.1.2.3.1. Foster recovery from mental illness by helping individuals identify and achieve personal goals while building an evolving vision of their recovery.

3.1.2.3.2. Foster self-advocacy skills, autonomy, and independence.

3.1.2.3.3. Emphasize mutuality and reciprocity as demonstrated by shared decision-making; strong conflict resolution; non-medical approaches; and non-static roles, including but not limited to, staff who are members and members who are educators.

3.1.2.3.4. Offer alternative views on mental health, mental illness and the effects of trauma and abuse.

3.1.2.3.5. Encourage informed decision-making about all aspects of people's lives.

3.1.2.3.6. Support people with mental illness in challenging perceived self-limitations, while encouraging the development of beliefs that enhance personal and relational growth.

3.1.2.3.7. Emphasize a holistic approach to health that includes a vision of the whole person.

3.1.2.4. Providing opportunities to learn wellness strategies by using, at a minimum, Wellness Recovery Action Planning (WRAP) and Whole Health Action

Management (WHAM), to strengthen individual abilities to attain and maintain their health and recovery from mental illness.

3.1.2.5. Provide in-house and community-based services according to the Deliverables in Subsection 12.1. through Subsection 12.2.

3.1.2.6. Provide outreach by face-to-face or by telephone contact with consumers by providing support to individuals who are unable to attend agency activities, visiting people who are hospitalized with a psychiatric condition, and reaching out to people who meet membership criteria and are homeless.

3.1.2.7. Provide monthly newsletters published by the peer support agency (PSA) that describes agency services and activities; other community services; social and recreational opportunities; member articles and contributions and other relevant topics that might be of interest to members and participants.

3.1.2.8. Distribute the newsletters to the members and other interested parties, which may include but are not limited to community mental health centers and other appropriate community organizations, at least five (5) business days prior to the upcoming month.

3.1.2.9. Provide monthly education events and presentations topics germane to issues and concerns of consumers of mental health services which must include, but are not limited to:

3.1.2.9.1. Rights Protection.

3.1.2.9.2. Peer Advocacy.

3.1.2.9.3. Recovery.

3.1.2.9.4. Employment.

3.1.2.9.5. Wellness Management.

3.1.2.9.6. Community Resources.

3.1.2.10. Provide an electronic copy of the monthly newsletters and education events in Subparagraph 3.1.2.7. and Paragraph 11.6.3., to the Office of Consumer and Family Affairs within the Department's Bureau of Behavioral Health, and the Mental Health Block Grant State Planner and Mental Health Block Grant Advisory Council no later than five (5) days prior to the beginning of the following month.

3.1.2.11. Provide individual peer assistance by assisting adults to:

3.1.2.11.1. Locate, obtain, and maintain mental health services and supports through referral, consumer education, and self-empowerment;

3.1.2.11.2. Support individuals who are identifying problems by assisting them in addressing the issue and/or in resolving grievances; and

3.1.2.11.3. Promote self-advocacy.

3.1.2.12. Provide employment education by providing members with:

3.1.2.12.1. Information relative to obtaining and maintaining competitive employment.

3.1.2.12.2. Referrals to community mental health center employment programs.

3.1.2.12.3. Employment-related activities, which may include, but are not limited to:

3.1.2.12.3.1. Resume writing.

3.1.2.12.3.2. Interviewing techniques.

3.1.2.12.3.3. Assistance with completing employment applications.

3.1.2.13. Inform members and the general public about peer support and wellness services available by providing Community Education Presentations about mental illness and the peer support community on a monthly basis to potential referral sources, funders, or families of individuals affected by mental illness.

3.1.2.14. Inform local human service providers and the general public about the stigma of mental illness, wellness and recovery and collaborate with other local human service providers that serve consumers in order to facilitate referrals and share information about services and other local resources.

3.1.2.15. Provide training and technical assistance to assist consumers to advocate for themselves and on their own behalf regarding healthcare such as, but not limited to:

3.1.2.15.1. Preparation techniques for doctors' appointments.

3.1.2.15.2. How to take notes.

3.1.2.15.3. How to use the physician's desk reference book for medications and a review of patient rights.

3.1.2.16. Invite guests to participate in peer support activities.

3.1.2.17. Provide residential support services, as needed, by providing support and assistance such as help with staying in their home or apartment, or finding a place to live.

3.1.2.18. Maintain at least a monthly schedule of peer support and wellness services and activities, which includes, but is not limited to:

3.1.2.18.1. Staff development and training.

3.1.2.18.2. Events that include community-based services.

3.1.2.18.3. Community outreach events.

3.2. The Contractor shall provide transportation services to members, participants and guests, as needed. The Contractor shall:

3.2.1. Transport members, participants, guests, in a Contractor owned or leased vehicle, to and from their homes and/or the Contractor's PSA to participate in activities that may include, but not limited to:

3.2.1.1. Peer support services.

3.2.1.2. Wellness and recovery activities.

3.2.1.3. Annual conferences.

3.2.1.4. Regional meetings.

3.2.1.5. Council meetings.

3.2.2. Ensure all vehicles and drivers used for transportation comply with Federal and State Department of Transportation and Department of Safety regulations, which include, but are not limited to:

3.2.2.1. Vehicles must be registered pursuant to NH Administrative Rule Saf-C 500, Vehicle Registration Rules.

3.2.2.2. Vehicles must be inspected in accordance with NH Administrative Rule Saf-C 3200, Official Motor Vehicle Inspection Requirements.

3.2.2.3. Drivers must be licensed in accordance with NH Administrative Rule Saf-C 1000, Driver Licensing.

3.2.3. Require all employees, members, or volunteers who drive Contractor-owned vehicles sign a State of New Hampshire Release of Individual Motor Vehicle Driver Records form in order to access individual driver records that indicate drivers have safe driving records.

3.2.4. Require all employees, members, or volunteers who drive Contractor-owned vehicles complete a National Safety Council Defensive Driving course offered through a State of New Hampshire-approved agency.

3.3. The Contractor shall acknowledge funding from the Department to support transportation costs:

3.3.1. Is not used for activities other than peer support related activities defined in this Agreement.

3.3.2. May be used on an 'as needed' basis to pay for bus rides that are necessary to transport individuals to peer support services provided by the Contractor.

3.4. <u>Warmline Services</u>

3.4.1. The Contractor shall provide warmline services that offer on-call telephone peer support services to members, participants, and others. The Contractor shall ensure warmline services:

3.4.1.1. Are provided to any individual with the ability to receive calls and make calls statewide and who lives or works in the State of New Hampshire.

3.4.1.2. Are provided during the hours the PSA is closed.

3.4.1.3. Assist individuals with addressing a current crisis related to their mental health.

3.4.1.4. Include referrals to appropriate treatment and other resources available in the consumer's service area.

3.4.1.5. Are provided by staff who are trained in providing warmline services.

3.4.1.6. May include outreach calls described in Subparagraph 3.1.2.6.

3.5. Crisis Respite

3.5.1. The Contractor agrees to operate a peer operated Crisis Respite that provides early intervention for individuals (18) years of age and older who have a mental illness and who are experiencing a crisis in the community as follows:

3.5.1.1. Provide to any consumer from any of the Regions in New Hampshire regardless of where they live or work.

3.5.1.2. Provide a short-term crisis respite in a safe environment, staffed by peers, intended to maintain community placement and avoid hospitalization.

3.5.1.3. Provide interventions using a model of Intentional Peer Support (IPS), that focus on individual's strengths and assists in personal recovery and wellness.

3.5.1.4. Provide a place for the person to stay temporarily in order to facilitate recovery and shall be staffed with a trained personnel twenty-four (24) hours per day when participants are in the program.

3.5.1.5. Develop a referral process and making referrals to the local community mental health center for those who require a higher level of care or evaluation for hospitalization.

3.5.1.6. Offer other peer support agency services and supports during the course of stay at the crisis respite program.

3.5.1.7. Provide transportation to and from the crisis respite program to other community-based appointments.

3.5.1.8. Administer a functional assessment that is approved by the Department, at the time of entry and exit from the program.

3.5.1.9. Provide individualized supports with a focus on wellness and recovery that may include Wellness Recovery Action Plan (WRAP), if applicable.

3.5.1.10. Support the individual in returning to participation in community activities, services and supports.

3.5.1.11. Ensure the individual's health needs if they become ill or injured are addressed during the course of their stay in the crisis respite program.

3.5.1.12. Ensure communication with other service providers involved in the individual's care, with their written consent.

4. Geographic Area and Physical Location of Services

4.1. The Contractor shall provide peer support services separately from the confines of a local community mental health center, unless otherwise pre-approved by the Department.

4.2. The Contractor shall provide peer support services at a physical location and/or building that is in compliance with Exhibit C, Section 15. and with the Life Safety requirements, which include, but are not limited to, ensuring the building:

4.2.1. Is in compliance with local health, building and fire safety codes.

4.2.2. Is maintained in good repair and free of hazards, and includes, but is not limited to:

4.2.2.1. A minimum of one (1) indoor bathroom that includes a sink and toilet.

4.2.2.2. A minimum of one (1) telephone for incoming and outgoing calls.

4.2.2.3. A functioning septic or other sewage disposal system.

4.2.2.4. A source of potable water for drinking and food preparation as follows:

4.2.2.4.1. If drinking water is supplied by a non-public water system, the Contractor shall ensure the water is tested and found to be in accordance with NH Administrative Rules Env-Ws 300, Drinking Water Rules, Part 15, Maximum Contaminant Levels and Maximum Contaminant Level Goal for Regulated Organics and Part 316, Regulated Secondary Maximum Contaminant Levels initially and every five (5) years thereafter.

4.2.2.4.2. If the water is not approved for drinking, the Contractor shall implement an alternative method for providing safe drinking water.

5. Enrolling Consumers for Services and/or as Members with a Peer Support Agency (PSA)

5.1. The Contractor shall provide peer support services to individuals defined in Subsection 1.4. who have a desire to work on wellness issues, and who have a desire to participate in services.

5.2. The Contractor shall request consumers complete a membership application to join and support the activities and mission of the PSA.

5.3. The Contractor shall ensure the membership application includes, but is not limited to:

5.3.1. The minimum engagement policy.

5.3.2. Suspension of membership policy.

5.3.3. Membership rules.

5.3.4. Attestation that the consumer supports the mission of the PSA.

5.4. The Contractor shall provide services to both members and non-members.

6. Staffing Requirements for a PSA

6.1. The Contractors shall employ an Executive Director who:

6.1.1. Is appointed by the Board of Directors.

6.1.2. Is employed by the Contractor and is supervised by the Board of Directors.

6.1.3. Has, at a minimum, the following qualification:

6.1.3.1. One (1) year of supervisory or management experience; and

6.1.3.1.1. An associate's degree or higher administration, business management, education, health, or human services; or

6.1.3.1.2. Additional years of experience in the peer support field that can be substituted for one (1) year of academic experience.

6.1.4. Is evaluated annually by the Board of Directors to ensure peer support and wellness services and activities are provided in accordance with:

6.1.4.1. The performance expectations approved by the Board.

6.1.4.2. The Department's policies and rules.

6.1.4.3. The Contract terms and conditions.

6.1.4.4. The Quality improvement reviews.

6.2. The Contractor shall screen each staff member for tuberculosis prior to employment.

6.3. The Contractor shall not add, delete, defund, or transfer staff positions among programs without prior written permission from the Department.

6.4. The Contractor shall develop a Staffing Contingency Plan for Department approval no later than thirty (30) days from the contract effective date, which includes but is not limited to:

6.4.1. The process for replacement of personnel in the event of loss of key personnel or other personnel during the period of this Agreement.

6.4.2. The description of how additional staff resources shall be allocated to support this Agreement in the event of inability to meet any performance standard.

6.4.3. The description of time frames necessary for obtaining staff replacements.

6.4.4. An explanation of the Contractor's capabilities to provide, in a timely manner, staff replacements/additions with comparable experience.

6.5. The Contractor shall submit an emergency staffing plan within thirty (30) days of the contract effective date if the contract that includes, but not limited to:

6.5.1. Inclement weather notifications for programming and transportation services.

6.5.2. Emergency evacuation plans for the Agency.

6.6. Prior to making an offer of employment or for volunteer work, the Contractor shall, after obtaining signed and notarized authorization from the person or persons for whom information is being sought:

6.6.1. Obtain at least two (2) references for the person;

6.6.2. Submit the person's name for review against the bureau of elderly and adult services (BEAS) state registry maintained pursuant to RSA 161-F:49;

6.6.3. Complete a criminal records check to ensure that the person has no history of:

6.6.3.1. Felony conviction; or

6.6.3.2. Any misdemeanor conviction involving:

6.6.3.2.1. Physical or sexual assault;

6.6.3.2.2. Violence;

6.6.3.2.3. Exploitation;

6.6.3.2.4. Child pornography;

6.6.3.2.5. Threatening or reckless conduct;

6.6.3.2.6. Theft;

6.6.3.2.7. Driving under the influence of drugs or alcohol; or

6.6.3.2.8. Any other conduct that represents evidence of behavior that could endanger the well-being of a consumer; and

6.6.4. Complete a motor vehicles record check to ensure that the person has a valid driver's license if the person will be transporting consumers.

6.7. Unless the Contractor requests and obtains a waiver from the Department, it shall not hire any individual or approve any individual to act as a volunteer if:

6.7.1. The individual's name is on the BEAS state registry;

6.7.2. The individual has a record of a felony conviction; or

6.7.3. The individual has a record of any misdemeanors specified in Subparagraph 6.6.3.2.

7. Staff Training and Development

7.1. The Contractor shall verify and document all staff and volunteers have appropriate training, education, experience, and orientation to fulfill the responsibilities of their respective positions. The Contractor shall ensure:

7.1.1. All personnel and training records are current and available to the Department, as requested.

7.1.2. All staff training shall be in accordance with New Hampshire Administrative Rule He-M 400, Community Mental Health, Part 402, Peer Support, Section 402.05, Staff Training, Staff Development and Orientation.

7.2. The Contractor shall maintain documentation in files of the staffs completed trainings and certifications.

7.3. The Contractor shall obtain Department approval thirty (30) days prior to the training date, for all trainings provided by the Contractor or to attend trainings other than offered by the Contractor for staff at least on an annual basis such as, but not limited to:

7.3.1. Peer Support.

7.3.2. Warmline.

7.3.3. Facilitating Peer Support Groups.

7.3.4. Sexual Harassment.

7.3.5. Member Rights.

7.4. The Contractor shall provide Intentional Peer Support training and its required consultations to meet state certification.

7.5. The Contractor shall provide Wellness, Recovery, and Planning training to staff during the years in which Intentional Peer Support is not provided.

7.6. The Contractor shall ensure administrative staff, including the Executive Director, participate in trainings on:

7.6.1. Staff Development.

7.6.2. Supervision.

7.6.3. Performance Appraisals.

7.6.4. Employment Practices.

7.6.5. Harassment.

7.6.6. Program Development.

7.6.7. Complaints and the Complaint Process.

7.6.8. Financial Management.

7.7. The Contractor shall ensure that annual Wellness Training is available to staff and members, and may be provided to other mental health consumers who do not identify themselves as members of a PSA in the region.

7.8. The Contractor shall obtain prior approval by the Department no later than thirty (30) days prior to the training, to provide or refer staff to specific training proposed by either the Department or the Contractor.

7.9. The Contractor shall collaborate with other Peer Support Agencies to offer combined trainings to facilitate efficient use of training funds and to increase the scope of trainings offered.

Exhibit A - Amendment #4

7.10. The Contractor shall purge all data in accordance with the instructions from the Department pertaining to members, participants, and guests who have not received peer support services within the prior two (2) year period.

8. Composition and Responsibilities of a PSA

8.1. The Contractor shall establish and maintain a status as a PSA by:

8.1.1. Being incorporated with the Secretary of State's Office as a non-for-profit agency.

8.1.2. Having a plan for governance that requires a Board of Directors who:

8.1.2.1. Are responsible for the management and control of the property and affairs of the corporation.

8.1.2.2. Have the powers usually vested in the Board of Directors of a non-for-profit corporation.

8.1.2.3. Are comprised of a minimum of nine (9) individuals with at least 51% of the individuals who self-identify as consumers.

8.1.2.4. Have membership where less than 20% of the Board members are related by blood, marriage, or cohabitation to other Board members.

8.1.2.5. Establish and maintain the bylaws that include, but are not limited to:

8.1.2.5.1. Responsibilities and powers of the Board of Directors.

8.1.2.5.2. Term limits for the Board of Directors officers ensuring not more than 20% of the Board members serve for more than six (6) consecutive years.

8.1.2.5.3. A nominating process that actively recruits diverse individuals whose skills and life experiences serve the needs of the agency.

8.1.2.5.4. A procedure by which inactive PSA members are removed from the PSA Board.

8.2. The Contractor shall submit a corrective action plan to the Department within five (5) days when the Board of Directors membership falls below the required minimum of nine (9) members.

8.3. The Contractor shall submit an updated list of current Board of Directors members and a corrective action plan with timeframes to comply with the required number of members when membership falls below the minimum required number of five (5) members to the Department and NH Department of Justice, Division of Charitable Trusts.

8.4. The Contractor shall have a documented Orientation Process and Manual for the members and officers of the Board of Directors, which includes written descriptions outlining the duties of the members and officers of the Board of Directors.

8.5. The Contractor shall have annual trainings related to the members and officers of the

Exhibit A - Amendment #4

Board of Directors roles and responsibilities, including fiduciary responsibilities.

8.6. The Contractor's Board of Directors shall have fiduciary responsibility for the agency including approval of agency financial policies and procedures that includes, but not be limited to, the following:

8.6.1. Cash Management including, but not limited to:

8.6.1.1. Cash receipts.

8.6.1.2. Cash disbursements.

8.6.1.3. Petty cash.

8.6.2. Accounts Payable/Receivable Procedures, payroll, and fixed assets.

8.6.3. Internal Control Procedures.

8.6.4. Expense Reimbursement and Advance Policy.

8.7. The Contractor shall have open attendance to PSA members during a portion of a Board meeting.

8.8. The Contractor shall publish the times and locations of Board of Directors meetings in an effort to encourage PSA member attendance.

8.9. The Contractor's Board of Directors shall maintain written records that are available to the Department upon request, which include, but are not limited to:

8.9.1. Board of Directors meeting minutes that include, but are not limited to:

8.9.1.1. Topics discussed.

8.9.1.2. Votes and actions taken.

8.9.1.3. A monthly review of the agency's financial status.

8.9.2. Current Board of Directors list that includes, but is not limited to:

8.9.2.1. Member name.

8.9.2.2. Member address.

8.9.2.3. Member phone number.

8.9.2.4. Member e-mail address.

8.9.2.5. Board office held.

8.9.2.6. Date joined the Board.

8.9.2.7. Member Board expiration date.

8.9.3. Documentation of the process and results of annual Board of Directors elections.

8.9.4. Policy manuals that include, but are not limited to policies for:

8.9.4.1. Human Resources.

8.9.4.2. Staff Development.

8.9.4.3. Financial Responsibilities.

8.9.4.4. Protection for member and participant rights.

8.10. The Contractor shall pursue other sources of revenue to support additional peer support services and/or supplement other related activities that the Department may not pay for under this Agreement.

9. Participation in Statewide/Regional Meetings

9.1. The Contractor shall support the recruitment and training of individuals for serving on local, regional and state mental health policy, planning and advisory initiatives.

9.2. The Contractor shall ensure the participation of individuals other than the Contractor's employees who provide leadership development meetings, workshops, and training events.

9.3. The Contractor shall ensure the Executive Director, or designee, attends the Department's monthly Peer Support Directors meeting for the purpose exchanging information as well as supporting and strengthening the statewide Peer Support system.

9.4. The Contractor shall meet, a minimum of two (2) times per year, with other regional community support organizations that serve the same populations, which may include, but are not limited to:

9.4.1. Mental health centers.

9.4.2. Area homeless shelters.

9.4.3. Community action programs.

9.4.4. Housing agencies.

9.5. The Contractor shall submit documentation to the Department that demonstrates attendance at the meetings in Section 9.

10. Grievance and Appeals

10.1. The Contractor shall submit a grievance and appeals process to the Department for approval. The Contractor shall ensure the grievance and appeals process includes, but is not limited to:

10.1.1. How to receive complaints orally, or in writing, ensuring information collected includes, but is not limited to:

10.1.1.1. Consumer name.

10.1.1.2. Date of written grievance.

10.1.1.3. Nature and subject of the grievance.

10.1.1.4. A method to submit an anonymous complaint.

10.1.2. A policy relative to assisting consumers with the grievance and appeal process including, but not limited to, how to file a complaint.

10.1.3. A method to track complaints.

10.1.4. Investigating allegations that a member's or participant's rights have been violated by agency staff, volunteers or consultants.

10.1.5. An immediate review of the complaint and investigation by the Contractor's director or his or her designee.

10.1.6. A process to attempt to resolve every grievance for which a formal investigation is requested.

10.1.7. An appeal process for members or participants to appeal any written decision rendered by the Board of Directors.

10.2. The Contractor shall ensure the Board of Directors issues a written decision to the member or participant filing a grievance upon completing an investigation and within twenty (20) business days setting forth the disposition of the grievance.

10.3. The Contractor shall submit a copy of the written decision in Subsection 10.2. of the complaint to the Department within ten (10) days from the written decision.

11. Reporting Requirements

11.1. The Contractor shall submit a report that lists the names of the trained individuals in accordance with Section 7. Staff Training and Development, utilizing reporting forms provided by the Department.

11.2. The Contractor shall provide the prior month's interim Balance Sheet, and Profit and Loss Statements to the Department no later than the 30th of the month, ensuring the report includes, but is not limited to:

11.2.1. The Current Ratio that measures the Contractor's total current assets available to cover the cost of current liabilities. The Contractor shall:

11.2.1.1. Utilize the following formula: Total current assets divided by total current liabilities.

11.2.1.2. Maintain a minimum current ratio of 1.1:1.0 with no variance allowed.

11.2.2. Accounts Payable that measure the Contractor's timeliness in paying invoices, ensuring no outstanding invoices greater than sixty (60) days.

11.2.3. Budget Management that compares budgets to actual revenues and expenses to determine the percentage of the Contractors budget executed year-to-date.

11.2.4. Ensure revenues are equal to or greater than the year-to-date calculation while ensuring expenses are equal to or less than the year-to-date calculation.

11.3. The Contractor shall prepare an Annual Report presentation for the benefit of the Mental Health Block Grant Advisory Council.

11.4. The Contractor shall submit a quarterly written report to the Department, on a form supplied by the Department, no later than the fifteenth (15th) day of the month following the end of each quarter that includes, but is not limited to:

11.4.1. Community outreach activities as outlined in Section 12. Deliverables.

11.4.2. Compilation of program evaluation and surveys submitted in the past quarter.

Exhibit A - Amendment #4

11.4.3. Peer support service deliverables as identified on templates provided by the Department.

11.4.4. Statistical data including, but not limited to:

11.4.4.1. The total number of unduplicated participants served on a daily basis.

11.4.4.2. The total number of current members, defined as only those members who have been served within the past year.

11.4.4.3. Program utilization totals by percentage.

11.4.4.4. Number of telephone peer support contacts.

11.4.4.5. Number and description of outreach activities.

11.4.4.6. Number and description of educational events provided:

11.4.4.6.1. On-site; and

11.4.4.6.2. In the community.

11.4.5. Board of Directors meeting minutes for the previous quarter that include, but are not be limited to:

11.4.5.1. Executive Director's report.

11.4.5.2. Board of Directors roster.

11.5. The Contractor shall provide a report for Department approval by July 31 of each State Fiscal Year, which outlines:

11.5.1. Specific steps the Contractor has taken to increase membership in the previous State Fiscal Year.

11.5.2. A plan for how the Contractor shall increase the unduplicated numbers served in the above activities by ten (10) percent of the total served in the previous year, for each subsequent State Fiscal Year.

11.5.3. Monthly in-house schedules and newsletters.

11.5.4. Quarterly revenue and expenses by cost, category and locations.

11.5.5. Quarterly Capital Expenditure Reports.

11.5.6. Quarterly Auditor's Reports: The prior three (3) months of monthly interim Balance Sheet and Profit and Loss Statements including separate statements for related parties that are certified by an officer of the reporting entity to measure the agency's fiscal integrity.

12. Deliverables

12.1. The Contractor shall provide a minimum of fifteen (15) hours of in-house services at each Center each week, of which five (5) hours may be conducted in the Center's community or region, as approved by the Department. The Contractor shall provide services that include, but are not limited to:

Exhibit A - Amendment #4

12.1.1. New topics introduced every month.

12.1.2. A minimum of five (5) separate discussion groups per week that address emotional wellbeing topics, which may include, but are not limited to:

12.1.2.1. IPS.

12.1.2.2. WRAP.

12.1.2.3. WHAM.

12.1.2.4. Setting boundaries.

12.1.2.5. Positive thinking.

12.1.2.6. Wellness.

12.1.2.7. Stress management.

12.1.2.8. Addressing trauma.

12.1.2.9. Reduction of negative or intrusive thoughts.

12.1.2.10. Management of emotional states including, but not limited to:

12.1.2.10.1. Anger.

12.1.2.10.2. Depression.

12.1.2.10.3. Anxiety.

12.1.2.10.4. Mania

12.1.3. A minimum of five (5) discussion or practice groups per week that address physical wellbeing topics which may include, but are not limited to:

12.1.3.1. Smoking cessation.

12.1.3.2. Weight loss.

12.1.3.3. Nutrition and Cooking.

12.1.3.4. Physical exercise.

12.1.3.5. Mindfulness activities including, but not limited to:

12.1.3.5.1. Yoga.

12.1.3.5.2. Meditation.

12.1.3.5.3. Journaling.

12.1.4. A minimum of four (4) activity groups per week that that provide positive skill-building activities which may include, but are not limited to:

12.1.4.1. Arts and crafts.

12.1.4.2. Music expression.

12.1.4.3. Creative writing.

12.1.4.4. Cooking.

12.1.4.5. Sewing.

12.1.4.6. Gardening.

12.1.4.7. Movies.

12.1.5. A minimum of one (1) group per week based on topics relevant to fostering independence which may include, but are not limited to:

12.1.5.1. Online blogs or articles that relate to mental health.

12.1.5.2. Obtaining employment.

12.1.5.3. Budgeting.

12.1.5.4. Decision-making.

12.1.5.5. Self-advocacy.

12.2. The Contractor shall provide community-based services including, but not limited to a minimum of one (1) trip into the community per month for activities that may include, but are not limited to:

12.2.1. Visiting a natural setting.

12.2.2. Volunteering opportunities.

12.2.3. Visiting a museum.

12.2.4. Visiting a local historical site.

12.2.5. Visiting local farms or gardens.

12.3. The Contractor shall provide community outreach that includes, but is not limited to:

12.3.1. Providing monthly community education presentations about mental illness and the peer support community to potential referral sources, funders, or families of individuals affected by mental illness, including, but not limited to:

12.3.1.1. Local psychiatric hospitals.

12.3.1.2. Local mental health clinics.

12.3.1.3. Local community events.

12.3.2. Providing monthly educational events and presentations to members, participants, or other individuals seeking support and information relating to the issues and concerns of consumers of mental health services which includes, but is not limited to educational topics to be covered over the course of the year, which may include, but are not limited to:

12.3.2.1. Rights protection.

12.3.2.2. Peer Advocacy.

12.3.2.3. Recovery.

12.3.2.4. Employment.

12.3.2.5. Wellness Management.

12.3.2.6. Community Resources.

13. Quality Improvement

13.1. The Contractor shall participate in quality program reviews and site visits on a schedule provided by the Department. All contract deliverables, programs, and activities shall be subject to review during this time. These reviews shall result in a report and potential corrective action.

13.2. The Contractor shall participate in quality assurance reviews as follows:

13.2.1. Ensure the Department has access sufficient for monitoring of contract compliance requirements as identified in OMB Circular A-133.

13.2.2. Ensure the Department is provided with access that shall include, but is not limited to:

13.2.2.1. Data.

13.2.2.2. Financial records.

13.2.2.3. Scheduled access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.4. Unannounced access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.5. Scheduled phone access to Contractor principals and staff.

13.3. The Contractor shall perform monitoring and comprehensive quality and assurance activities including, but not limited to:

13.3.1. Participating in bi-annual quality improvement review as in Subsection 13.1.

13.3.2. Participating in ongoing monitoring and reporting based on the bi-annual review and corrective action plan submitted in conjunction with the Department and Contractor.

13.3.3. Conducting member satisfaction surveys provided by and as instructed the Department.

13.3.4. Reviewing personnel files for completeness.

13.3.5. Reviewing the complaint process.

13.4. The Contractor shall provide a corrective action plan to the Department within thirty (30) days of notification of noncompliance with contract activities.

13.5. The Contractor shall provide all requested audits to the Department no later than ten (10) days after receiving the request from the Department.

Method and Conditions Precedent to Payment

1. The State shall pay the Contractor an amount not to exceed the Price Limitation, Block 1.8, of the General Provisions of this Agreement, Form P-37, for the services provided by the Contractor pursuant to Exhibit A – Amendment #4, Scope of Services.
2. This Agreement is funded by:
   2.1. 100% General Funds.
3. The Contractor agrees to provide the services in Exhibit A – Amendment #4, Scope of Services in compliance with funding requirements in Section 2., above.
4. The Contractor shall submit one (1) invoice to the Department upon Governor and Council approval of this Agreement requesting an advance payment in an amount not to exceed $28,118 for peer support services as stated in Exhibit A – Amendment #4, Scope of Services. The Contractor shall ensure:
   4.1. The invoice clearly states a request for the advance payment, to be provided at the start of each State Fiscal Year (SFY), in the amount of $28,118, referenced in Exhibit A – Amendment #4, Scope of Services.
   4.2. The invoice includes how funds will be utilized toward peer support services in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #3 and Exhibit B-6 Amendment #3.
   4.3. The Contractor shall submit monthly invoices for actual expenditures incurred in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #3 and Exhibit B-6 Amendment #3.
   4.4. The Department shall recoup the advance payment back by deducting 1/3rd of the advanced amount from the December 2020, January 2021, and February 2021 invoices, unless otherwise agreed upon by the Department.
5. Subsequent to the action in Section 4., the Department shall make monthly payments to the Contractor based upon cost reimbursement, as submitted by the Contractor to maintain services and as approved by the Department, of the Department approved budget amounts in Exhibit B-1 Budget Form through Exhibit B-6 Amendment #3 SFY 2022 Budget.
   5.1. In no event shall the total of the initial payment in Section 4. and monthly payments in Section 5. exceed the budget amounts set forth in Section 5.
   5.2. The Department will adjust monthly payments for expenditures set forth in Section 10., below and amounts paid to initiate services in Section 4., above.
6. Notwithstanding Paragraph 18 of the General Provisions of this Agreement P-37, an amendment limited to the budget amounts identified in Section 5., to adjust amounts within the budgets, within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of Governor and Executive Council.
7. Payment for services provided in Exhibit A – Amendment #4, Scope of Services shall be made as follows:
   7.1. The Contractor shall submit an invoice on Department supplied forms, by the tenth (10th) working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month.

7.2. The State shall make payment to the Contractor on actual expenditures, within thirty (30) days of receipt of each Department-approved invoice for Contractor services provided pursuant to this Agreement.

7.3. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to dhhs.dbhinvoicesmhs@dhhs.nh.gov, or invoices may be mailed to:

Financial Manager
Bureau of Mental Health
Department of Health and Human Services
105 Pleasant Street, Main Building
Concord, NH 03301

8. The Contractor shall provide its Revenue and Expense Budget on Budget Form A supplied by the Department, within twenty (20) calendar days of the contract effective date and then twenty (20) days from the beginning of each fiscal year thereafter.

9. The Contractor shall provide quarterly Revenue and Expense Reports on Budget Form A, within thirty (30) calendar days after the end of each fiscal quarter, defined as July 1 to September 30, October 1 to December 31, January 1 to March 31, and April 1 to June 30.

10. The Contractor shall provide supporting documentation, when required by the Department, to support evidence of actual expenditures, in accordance with the Department approved budgets in Section 5.

11. Any expenditure that exceeds the approved budgets in Section 5. shall be solely the financial responsibility of the Contractor.

12. When the contract price limitation is reached the program shall continue to operate at full capacity at no charge to the Department for the duration of the contract period.

13. Funding may not be used to replace funding for a program already funded from another source.

14. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this Contract may be withheld, in whole or in part, in the event of noncompliance with any State or Federal law, rule or regulation applicable to the services provided, or if the said services have not been completed in accordance with the terms and conditions of this Agreement.

15. Notwithstanding Paragraph 18 of the General Provisions of this Agreement P-37, an amendment limited to the budget amounts identified in Section 5., to adjust amounts within the budgets, within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of Governor and Executive Council.

16. The Department reserves the right to recover any program funds not used, in whole or in part, for the purposes stated in this Agreement from the Contractor within one hundred and twenty (120) days of the Completion Date.

17. Contractor will have forty-five (45) days from the end of each State Fiscal Year to submit to the Department final invoices for payment. Any adjustments made to a prior invoice will need to be accompanied by supporting documentation.

18. Property Standards

18.1. Insurance coverage.

18.1.1. The Contractor shall, at a minimum, provide the equivalent insurance coverage for real property and equipment acquired or improved with State funds as provided to property owned by the Contractor.

18.2. Real property.

18.2.1. Subject to the obligations and conditions set forth in this section, title to real property acquired or improved in whole or in part with State funds will vest upon acquisition in the Contractor.

18.2.2. Except as otherwise provided by State statutes or in this Agreement, real property will be used for the originally authorized purpose as long as needed for that purpose, during which time the Contractor must not dispose of or encumber its title or other interests without State approval.

18.2.3. When real property is no longer needed for the originally authorized purpose, the Contractor must obtain disposition instructions from the State. The instructions must provide for one of the following alternatives:

18.2.3.1. Retain title after compensating the State. The amount paid to the State will be computed by applying the State's percentage of participation in the cost of the original purchase (and costs of any improvements) to the fair market value of the property. However, in those situations where the Contractor is disposing of real property acquired or improved with State funds and acquiring replacement real property prior to expiration of this Agreement and any amendment thereof, the net proceeds from the disposition may be used as an offset to the cost of the replacement property.

18.2.3.2. Sell the property and compensate the State. The amount due to the State will be calculated by applying the State's percentage of participation in the cost of the original purchase (and cost of any improvements) to the proceeds of the sale after deduction of any actual and reasonable selling and fixing-up expenses. If the State appropriation funding this Agreement or any amendment thereof has not been closed out, the net proceeds from sale may be offset against the original cost of the property. When the Contractor is directed to sell property, sales procedures must be followed that provide for competition to the extent practicable and result in the highest possible return.

18.2.3.3. Transfer title to a third party designated/approved by the State. The Contractor is entitled to be paid an amount calculated by applying the State's percentage of participation in the purchase of the real property (and cost of any improvements) to the current fair market value of the property.

18.3. Equipment.

18.3.1. Equipment means tangible personal property (including information technology systems) purchased in whole or in part with State funds and that has a useful life of more than one (1) year and a per-unit acquisition cost which equals or exceeds $5,000.

18.3.2. Subject to the obligations and conditions set forth in this section, title to equipment acquired with State funds will vest upon acquisition in the Contractor subject to the following conditions:

18.3.2.1. Use the equipment for the authorized purposes of the project during the period of performance, or until the property is no longer needed for the purposes of the project.

18.3.2.2. Not encumber the property without approval of the State.

18.3.2.3. Use and dispose of the property in accordance with Paragraph 18.2.2., Paragraph 18.2.1. and Paragraph 18.3.5.

18.3.3. Use.

18.3.3.1. Equipment must be used by the Contractor in the program or project for which it was acquired as long as needed, whether or not the project or program continues to be supported by State funds, and the Contractor must not encumber the property without prior approval of the State. When no longer needed for the original program or project, the equipment may be used in other activities funded by the State.

18.3.3.2. During the time that equipment is used on the project or program for which it was acquired, the Contractor must also make equipment available for use on other projects or programs currently or previously supported by the State, provided that such use will not interfere with the work on the projects or program for which it was originally acquired. First preference for other use must be given to other programs or projects supported by the State that financed the equipment. Use for non-State-funded programs or projects is also permissible with approval from the State.

18.3.3.3. When acquiring replacement equipment, the Contractor may use the equipment to be replaced as a trade-in or sell the property and use the proceeds to offset the cost of the replacement property.

18.3.4. Management requirements. Procedures for managing equipment (including replacement equipment), whether acquired in whole or in part with State funding, until disposition takes place will, as a minimum, meet the following requirements:

18.3.4.1. Property records must be maintained that include a description of the property, a serial number or other identification number, the source of funding for the property, who holds title, the acquisition date, and cost of the property, percentage of State participation in the project costs for the Agreement under which the property was acquired, the location, use and condition of the property, and any ultimate disposition data including the date of disposal and sale price of the property.

18.3.4.2. A physical inventory of the property must be taken and the results reconciled with the property records at least once every two (2) years.

18.3.4.3. A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft must be investigated.

18.3.4.4. Adequate maintenance procedures must be developed to keep the property in good condition.

18.3.4.5. If the Contractor is authorized or required to sell the property, proper sales procedures must be established to ensure the highest possible return.

18.3.5. Disposition. When original or replacement equipment acquired with State funds is no longer needed for the original project or program or for other activities currently or previously supported by the State, except as otherwise provided by State statutes or in this Agreement, the Contractor must request disposition instructions from the State. Disposition of the equipment will be made as follows:

18.3.5.1. Items of equipment with a current per unit fair market value of $5,000 or less may be retained, sold or otherwise disposed of with no further obligation to the State.

18.3.5.2. Items of equipment with a current per-unit fair-market value in excess of $5,000 may be retained by the Contractor or sold. The State is entitled to an amount calculated by multiplying the current market value or proceeds from sale by the State's percentage of participation in the cost of the original purchase. If the equipment is sold, the State may permit the Contractor to deduct and retain from the State's share $500 or ten (10) percent of the proceeds, whichever is less, for its selling and handling expenses.

18.3.5.3. The Contractor may transfer title to the property to an eligible third party provided that, in such cases, the Contractor must be entitled to compensation for its attributable percentage of the current fair market value of the property.

18.3.5.4. In cases where the Contractor fails to take appropriate disposition actions, the State may direct the Contractor to take disposition actions.

19. Property Trust Relationship and Liens

19.1. Real property, equipment, and intangible property, that are acquired or improved with State funds must be held in trust by the Contractor as trustee for the beneficiaries of the project or program under which the property was acquired or improved. The State may require the Contractor to record liens or other appropriate notices of record to indicate that personal or real property has been acquired or improved with State funds and that use and disposition conditions apply to the property.

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 THE STEPPING STONE DROP-IN CENTER ASSOCIATION is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on September 08, 1995. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 235613
Certificate Number: 0004914893

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 14th day of May A.D. 2020.

William M. Gardner
Secretary of State

CERTIFICATE OF AUTHORITY

I, Lori Brown Yanklowitz, hereby certify that:
(Name of the elected Officer of the Corporation)

1. I am a duly elected President of The Stepping Stone Drop-In Center Association.
(Name of Corporation)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors, duly called and held on October 9, 2020, at which a quorum of the Directors was present and voting.
(Date)

VOTED:
That Paul J. Marinelli, Treasurer, is duly authorized on behalf of The Stepping Stone Drop-In Center Association
(Name and Title of Contract Signatory) (Name of Corporation)

to enter into contracts or agreements with the State of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30)** days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person listed above currently occupies the position indicated and that he has full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 10/9/20

Lori Brown Yanklowitz
Signature of Elected Officer
Name: Lori Brown Yanklowitz
Title: Board President

DocuSign Envelope ID: D757CECF-A093-48DB-BEB8-C55D0FAA6D6F

ACORD

STEPSTO-04 PSMITH

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/19/2020

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

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

PRODUCER A. B. Gile, Inc. PO Box 66 Hanover, NH 03755	CONTACT NAME: PHONE (A/C, No, Ext): (603) 643-4540 FAX (A/C, No): (603) 643-6382 E-MAIL ADDRESS:
	INSURER(S) AFFORDING COVERAGE — NAIC #
	INSURER A: Philadelphia Insurance Co.
INSURED Stepping Stone Drop In Center Association 108 Pleasant Street Claremont, NH 03743	INSURER B: Eastern Alliance
	INSURER C:
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE [X] OCCUR X PROFESSIONAL GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO-JECT LOC OTHER:			PHPK2111089	3/22/2020	3/22/2021	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 2,000,000
							PRODUCTS - COMP/OP AGG	$ 2,000,000
							ABUSE AND MOLES	$ 1,000,000
A	AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY / SCHEDULED AUTOS HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY			PHPK2111091	3/22/2020	3/22/2021	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							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 Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) [Y] If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		01-125157-01	3/22/2020	3/22/2021	X PER STATUTE / OTH-ER	
							E.L. EACH ACCIDENT	$ 100,000
							E.L. DISEASE - EA EMPLOYEE	$ 100,000
							E.L. DISEASE - POLICY LIMIT	$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Workers Compensation Covered States 3.A. Part One: NH; 3.C. Part Three: Refer To Residual Market Limited Other States Insurance Endorsement WC000326A. Excluded Officers: Paul J. Marinelli, Gretchen Stokes, and Lori Brown Yanklowitz.

Evidence of Insurance - Employee Dishonesty - Limit: $30,000 - Deductible: $500 (Part of Policy PHPK1958461 - Policy Dates 3/22/20 - 3/22/21

CERTIFICATE HOLDER	CANCELLATION
NH DHHS 129 Pleasant Street Concord, NH 03301	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 Ajrmgo

The Stepping Stone Drop In Center Association

Mission Statement

To support our mental health peers on their personal paths toward wellness within a community free from judgment where we share feelings, experiences, and tools in a respectful way.

Approved by Board of Directors 3/13/19

Financial Statements

STEPPING STONE DROP-IN CENTER ASSOCIATION

FOR THE YEARS ENDED JUNE 30, 2019 AND 2018
AND
INDEPENDENT AUDITORS' REPORT

Leone, McDonnell & Roberts
PROFESSIONAL ASSOCIATION

CERTIFIED PUBLIC ACCOUNTANTS

STEPPING STONE DROP-IN CENTER ASSOCIATION

FINANCIAL STATEMENTS

FOR THE YEARS ENDED JUNE 30, 2019 AND 2018

TABLE OF CONTENTS

Leone, McDonnell & Roberts
Professional Association
CERTIFIED PUBLIC ACCOUNTANTS
WOLFEBORO • NORTH CONWAY,
DOVER • CONCORD
STRATHAM

To the Board of Directors of
Stepping Stone Drop-In Center Association
Claremont, New Hampshire

INDEPENDENT AUDITORS' REPORT

We have audited the accompanying statements of Stepping Stone Drop-In Center Association (the "Association") (a New Hampshire nonprofit corporation), which compromise the statements of financial position as of June 30, 2019 and 2018, and the related statement of cash flows, and the notes to the financial statements for the years then ended, and the related statement of activities for the year ended June 30, 2019.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

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. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the express purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting principles used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Stepping Stone Drop-In Center Association as of June 30, 2019 and 2018 and its cash flows for the years then ended, and the changes in its net assets for the year ended June 30, 2019 in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited Stepping Stone Drop-In Center Association's 2018 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated October 31, 2018. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2018, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The Schedule of Functional Revenue, Support and Expenses on page 12 and The Bureau of Mental Health Services Refundable Advance – Designated and Surplus on page 13 are presented for purposes of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The 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 information is fairly stated in all material respects in relation to the financial statements as a whole.

Leone, McDonnell & Roberts
Professional Association

November 22, 2019
Wolfeboro, New Hampshire

STEPPING STONE DROP-IN CENTER ASSOCIATION

STATEMENTS OF FINANCIAL POSITION
AS OF JUNE 30, 2019 AND 2018

ASSETS

	2019	2018
CURRENT ASSETS		
Cash and cash equivalents, designated	$ 42,639	$ 64,615
Cash and cash equivalents, undesignated	74,747	46,389
Accounts receivable, net	7,449	3,694
Contributions receivable	-	1,000
Prepaid expenses	5,528	6,175
Total current assets	130,363	121,873
PROPERTY		
Building	453,689	453,689
Equipment	93,467	74,755
Total	547,156	528,444
Less: accumulated depreciation	(201,977)	(191,407)
Property, net	345,179	337,037
TOTAL ASSETS	$ 475,542	$ 458,910

LIABILITIES AND NET ASSETS

	2019	2018
CURRENT LIABILITIES		
Current portion of long-term debt	$ 13,467	$ 12,950
Accounts payable and accrued expenses	5,680	2,445
Accrued payroll and related liabilities	48,642	12,617
Refundable advances	7,494	13,549
Refundable advances, designated	35,145	51,066
Total current liabilities	110,428	92,627
LONG-TERM DEBT, NET OF CURRENT PORTION SHOWN ABOVE	197,126	211,187
Total liabilities	307,554	303,814
NET ASSETS		
Without donor restrictions	167,848	154,956
With donor restrictions	140	140
Total net assets	167,988	155,096
TOTAL LIABILITIES AND NET ASSETS	$ 475,542	$ 458,910

See Notes to Financial Statements

STEPPING STONE DROP-IN CENTER ASSOCIATION

STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2019
WITH PRIOR YEAR SUMMARIZED COMPARATIVE INFORMATION

	Without Donor Restrictions	With Donor Restrictions	2019 Total	2018 Total
REVENUE AND SUPPORT				
Grants	$ 333,546	$ -	$ 333,546	$ 348,044
Third-party reimbursements	190,109	-	190,109	106,900
Contributions	4,286	-	4,286	40,371
Rental income	12,672	-	12,672	11,603
Other	2,148	-	2,148	1,595
Total revenues and support	542,761	-	542,761	508,513
EXPENSES				
Program services:				
Stepping Stone	349,070	-	349,070	292,191
Next Step	98,078	-	98,078	96,016
Warm Line	23,761	-	23,761	23,596
Respite	41,331	-	41,331	30,970
Other Programs	17,629	-	17,629	28,430
General management allocation	(33,771)	-	(33,771)	(23,636)
Supporting activities:				
General management	33,771	-	33,771	23,636
Total expenses	529,869	-	529,869	471,203
CHANGES IN NET ASSETS	12,892	-	12,892	37,310
NET ASSETS, BEGINNING OF YEAR	154,956	140	155,096	117,786
NET ASSETS, END OF YEAR	$ 167,848	$ 140	$ 167,988	$ 155,096

See Notes to Financial Statements

STEPPING STONE DROP-IN CENTER ASSOCIATION

STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED JUNE 30, 2019 AND 2018

	2019	2018
CASH FLOWS FROM OPERATING ACTIVITIES		
Changes in net assets	$ 12,892	$ 37,310
Adjustments to reconcile increase in net assets to net cash from operating activities:		
Depreciation	25,670	20,004
(Increase) decrease in assets:		
Accounts receivable, net	(3,755)	3,751
Contributions receivable	1,000	1,000
Prepaid expenses	647	3,315
Increase (decrease) in liabilities:		
Accounts payable and accrued expenses	3,235	1,308
Accrued payroll and related liabilities	36,025	1,935
Refundable advances	(6,055)	1,710
Refundable advances - designated	(15,921)	(17,865)
NET CASH PROVIDED BY OPERATING ACTIVITIES	53,738	52,468
CASH FLOWS USED IN INVESTING ACTIVITIES		
Additions to property	(33,812)	(22,087)
NET CASH USED IN INVESTING ACTIVITIES	(33,812)	(22,087)
CASH FLOWS USED IN FINANCING ACTIVITIES		
Repayment of long-term notes payable	(13,544)	(13,470)
NET CASH USED IN FINANCING ACTIVITIES	(13,544)	(13,470)
NET INCREASE IN CASH AND CASH EQUIVALENTS	6,382	16,911
CASH AND CASH EQUIVALENTS, BEGINNING OF YEAR	111,004	94,093
CASH AND CASH EQUIVALENTS, END OF YEAR	$ 117,386	$ 111,004
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION		
Cash paid during the year for interest	$ 9,006	$ 8,916

See Notes to Financial Statements

STEPPING STONE DROP-IN CENTER ASSOCIATION

NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED JUNE 30, 2019 AND 2018

NOTE 1 ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization
Stepping Stone Drop-In Center Association, (the Association) is a nonprofit organization incorporated under the laws of the State of New Hampshire on September 8, 1995. The Association is a voluntary, non-profit, educational, social, peer support association formed to support and assist people who are, have been, or could be at risk of becoming a consumer of psychiatric and/or psychological services. Services include provision of community resources to consumers through mutual peer support, education of the public regarding human and civil rights of the consumers, as well as societal responsibility for supporting those rights. In addition, Stepping Stone Drop-In Center Association provides assistance and support to consumers in their efforts to improve their own quality of life. Program support is derived primarily from fee for service contracts through the State of New Hampshire.

Basis of Accounting
The financial statements of the Association have been prepared on the accrual basis of accounting in accordance with generally accepted accounting standards and principles established by the Financial Accounting Standards Board (FASB).

Estimates
The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and the liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reported period. Actual results could differ from those estimates.

Basis of Presentation
The financial statements of the Association have been prepared in accordance with U.S. generally accepted accounting principles (US GAAP), which require the Association to report information regarding its financial position and activities according to the following net asset classifications:

> Net assets without donor restrictions – Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Association. These net assets may be used at the discretion of the Association's management and board of directors.

Net assets with donor restrictions – Net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Association or by passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity.

Donor restricted contributions are reported as increases in net assets with donor restrictions. When restriction expires, net assets are reclassified from net assets with donor restrictions to net assets without donor restrictions in the statement of activities.

Cash and Cash Equivalents
The Association considers all highly liquid investments with a maturity of three months or less to be cash equivalents.

Accounts Receivable
Accounts receivable are stated at the amount management expects to collect from balances outstanding at year-end. Management closely monitors outstanding balances and writes off all balances deemed uncollectible. No allowance for doubtful accounts was considered necessary at June 30, 2019 and 2018.

Contributions Receivable
Contributions receivable, net of allowances for estimated uncollectible amounts, are recorded when there is sufficient evidence in the form of verifiable documentation that an unconditional promise was received. Management has determined that a discount for amounts to be received after one year is not material to record and the contributions are recorded at their initial promise amount.

Advertising
The Association expenses advertising costs as incurred.

Property and Depreciation
Property is stated at cost or fair value at date of donation. Material assets with a useful life in excess of one year are capitalized. Depreciation is computed using straight-line methods over the estimated lives of the related assets as follows:

Equipment	5 - 7 years
Buildings	39 years

Costs for repairs and maintenance are expensed when incurred and betterments are capitalized with authorization from the State of New Hampshire. Assets sold or otherwise disposed of are removed from the accounts, along with the related depreciation allowances, and any gain or loss is recognized.

Depreciation expense was $25,670 and $20,004 for the years ended June 30, 2019 and 2018, respectively.

Income Taxes

The Association is a nonprofit corporation exempt from income tax under Section 501(c)(3) of the Internal Revenue Code. Accordingly, no provision for income taxes has been recorded in the accompanying financial statements.

Management has evaluated the Association's tax positions and concluded that the Association has maintained its tax-exempt status, does not have any significant unrelated business income and has taken no uncertain tax positions that require adjustment to the financial statements. With few exceptions, the Association is no longer subject to income tax examinations by the United States Federal or State tax authorities prior to 2015.

Functional Allocation of Expenses

The costs of providing the various programs and other activities have been summarized on a functional basis. Accordingly, costs have been allocated among the program services and supporting activities benefited. Occupancy costs have been grouped and allocated to the programs as a line item. Such allocations have been determined by management on an equitable basis.

The expenses that are allocated include the following:

Expense	Method of allocation
Salaries and benefits	Time and effort
Occupancy	Square footage
Depreciation	Direct assignment
All other expenses	Direct assignment

The costs of providing various programs and other activities have been summarized below.

	2019	2018
Program Services	$ 496,098	$ 447,567
Management and general	33,771	23,636
Total	$ 529,869	$ 471,203

Contributions

Donated materials and equipment are reflected as contributions in the accompanying financial statements at their estimated values at date of receipt. No amounts have been reflected in the statements for donated services, as no objective basis is available to measure the value of such services; however, a number of volunteers have donated time to the Association's program services. The Board of Directors serves in a volunteer capacity.

Reclassifications

Certain amounts in the prior year financial statements have been reclassified for comparative purposes to conform with the presentation in the current year financial statements.

Subsequent Events
Events occurring after the statement of financial position date are evaluated by management to determine whether such events should be recognized or disclosed in the financial statements. Management has evaluated subsequent events through November 22, 2019 which is the date that the financial statements were available to be issued.

New Accounting Pronouncement
On August 18, 2016, FASB issued ASU 2016-14, Not-for-Profit Entities (Topic 958) – *Presentation of Financial Statements of Not-for-Profit Entities*. The update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return. The Association has adjusted the presentation of these statements accordingly. The ASU has been applied retrospectively to all periods presented.

NOTE 2 AVAILABILITY AND LIQUIDITY

The following represents the Association's financial assets as of June 30, 2019 and 2018:

Financial assets at year-end:

	2019	2018
Cash and cash equivalents	$ 117,386	$ 111,004
Accounts receivable, net	7,449	3,694
Contributions receivable	-	1,000
Total financial assets	$ 124,835	$ 115,698
Less amounts not available to be used within one year:		
Net assets with donor restrictions	$ 140	$ 140
Cash and equivalents – designated	42,639	64,615
Amounts not available within one year	42,779	64,755
Financial assets available to meet general expenditures over the next twelve months	$ 82,056	$ 50,943

The Association's goal is generally to maintain financial assets to meet 60 days of operating expenses (approximately $83,000).

NOTE 3 DESIGNATED CASH

Certain grant awards contain provisions requiring the Association to maintain separate cash accounts. Amounts deposited in these accounts are designated as to use and are not available for day to day operations. As of June 30, 2019 and 2018, designated cash aggregated $42,639 and $64,615, respectively.

NOTE 4 **LONG-TERM DEBT**

Long-term debt consisted of the following as of June 30, 2019 and 2018:

	2019	2018
Mortgage note payable to a bank in monthly installments of $485 for principal and interest through June of 2033. Interest was stated at 6.625% and 6.375% at June 30, 2019 and 2018, respectively. The note is secured by certain real estate of the Association.	$ 53,830	$ 56,140
Mortgage payable to a bank in monthly installments of $1,394 for principal and interest through May of 2031. Interest is stated at the five year treasury rate plus 1.5% (adjusted every three years) which resulted in an interest rate of 3.375% at June 30, 2019 and 2018. The note is secured by certain real estate of the Association.	156,763	167,997
	210,593	224,137
Less current portion due within one year	(13,467)	(12,950)
Total	$ 197,126	$ 211,187

The scheduled maturities of the notes payable at June 30, 2019 were as follows:

Year Ending June 30	Amount Due
2020	$ 13,467
2021	14,006
2022	14,568
2023	15,156
2024	15,768
Thereafter	137,628
Total	$ 210,593

NOTE 5 **REFUNDABLE ADVANCES - DESIGNATED**

Under the terms of the service agreement with the Bureau of Mental Health Services (BMHS), a division of the State of New Hampshire's Department of Health and Human Services, the Association is required to segregate amounts received in excess of allowable expenses. As of June 30, 2019 and 2018, funds set aside in accordance with this requirement amounted to $35,145 and $51,066, respectively.

NOTE 6 **ECONOMIC DEPENDENCY**

Over 96% and 89% of the total support and revenue was derived from the New Hampshire Department of Health and Human Services for the years ended June 30, 2019 and 2018, respectively. The future existence of the Association is dependent upon the funding policies and continued support of this source. The loss of this funding could have a material adverse effect on the Association.

NOTE 7 **LEASE AGREEMENT**

The Association entered into a lease agreement in April of 2016. The tenant was to pay the Association $1,200 per month with the lease expiring as of April 30, 2020. The Association received $12,672 and $11,603 in rental income for the years ended June 30, 2019 and 2018, respectively.

NOTE 8 **NET ASSETS**

Net assets with donor restrictions were as follows for the years ended June 30, 2019 and 2018:

	2019	2018
Special Purpose Restrictions:		
Various donations	$ 140	$ 140
Total net assets with donor restrictions	$ 140	$ 140

NOTE 9 **CONTINGENCIES**

Grant Compliance

The Association receives funds under a state grant and from Federal sources. Under the terms of these agreements, the Association is required to use the funds within a certain period and for purposes specified by the governing laws and regulations. If expenditures were found not to have been made in compliance with the laws and regulations, the Association might be required to repay the funds.

No provisions have been made for these contingencies because specific amounts, if any, have not been determined or assessed by government audits as of June 30, 2019 and 2018.

STEPPING STONE DROP-IN CENTER ASSOCIATION

SCHEDULE OF FUNCTIONAL REVENUE, SUPPORT AND EXPENSES
FOR THE YEAR ENDED JUNE 30, 2019
WITH PRIOR YEAR SUMMARIZED COMPARATIVE INFORMATION

	Stepping Stone	Next Step	Warm Line	Respite	Total BBH Funds	Other Non-BBH Programs	2019 Total	2018 Total
REVENUE AND SUPPORT								
Grants	$ 169,682	$ 105,237	$ 24,474	$ 34,153	$ 333,546	$ -	$ 333,546	$ 348,044
Third-party reimbursements	167,514	-	-	22,595	190,109	-	190,109	106,900
Rental income	-	-	-	-	-	12,672	12,672	11,603
Contributions	-	-	-	-	-	4,286	4,286	40,371
Other income	-	-	-	-	-	2,148	2,148	1,595
Total revenue and support	$ 337,196	$ 105,237	$ 24,474	$ 56,748	$ 523,655	$ 19,106	$ 542,761	$ 508,513
EXPENSES								
Salaries and wages	$ 112,300	$ 49,532	$ 17,768	$ 32,466	$ 212,066	$ -	$ 212,066	$ 205,435
Statewide training fees	122,874	-	-	-	122,874	-	122,874	102,177
Occupancy costs	17,875	5,764	-	131	23,770	6,901	30,671	24,447
Depreciation	15,024	10,149	-	-	25,173	497	25,670	20,004
Utilities	9,279	4,529	1,244	975	16,027	7,077	23,104	13,773
Employee benefits	12,291	5,171	437	1,614	19,513	-	19,513	26,614
Payroll taxes	9,637	4,280	1,385	2,495	17,797	-	17,797	17,556
Insurance	11,211	3,617	-	255	15,083	139	15,222	13,877
Strategic planning expense	14,175	-	-	-	14,175	-	14,175	-
Telephone	3,687	3,173	2,927	-	9,787	-	9,787	9,230
Audit and accounting fees	5,244	4,050	-	-	9,294	-	9,294	8,673
Interest expense	3,523	3,988	-	-	7,511	1,495	9,006	8,527
Client consumables	2,868	1,575	-	-	4,443	520	4,963	2,929
Travel	2,734	1,660	-	338	4,732	-	4,732	4,061
Staff development and training	1,484	250	-	2,863	4,597	-	4,597	1,518
Office supplies and expense	3,120	340	-	50	3,510	-	3,510	4,053
Legal fees	82	-	-	-	82	-	82	205
Other	1,662	-	-	144	1,806	1,000	2,806	8,124
Total expenses	$ 349,070	$ 98,078	$ 23,761	$ 41,331	$ 512,240	$ 17,629	$ 529,869	$ 471,203

STEPPING STONE DROP-IN CENTER ASSOCIATION

BUREAU OF MENTAL HEALTH SERVICES (BMHS)
REFUNDABLE ADVANCE - DESIGNATED and SURPLUS
FOR THE YEAR ENDED JUNE 30, 2019

Reconciliation of BMHS Refundable Advance

Total FY 2019 BMHS funds received	$ 344,288
Accounts receivable - BMHS	4,781
Carried over from prior years	13,549
Recognition of funds released by BMHS	167,514
Total funds received	530,132
Less: BMHS expenses	(512,240)
Total approved expenses	(512,240)
Less: Approved BMHS Expenses	
Mortgage principle reduction - Claremont at 100%	(2,310)
Mortgage principle reduction - Lebanon at 72%	(8,088)
Total approved expenses	(10,398)
BMHS Surplus at June 30, 2019	7,494
Refundable advance balance at June 30, 2018	51,066
Refundable advance used in FY 2019	(15,921)
BMHS surplus and refundable advance balance at June 30, 2019	42,639
Less: crises respite advance	(954)
BMHS surplus and refundable advance (designated) at June 30, 2019	41,685
Less: refundable advance (designated) at June 30, 2019	(35,145)
BMHS operating advance	6,540
Add: crises respite advance	954
Refundable advance at June 30, 2019	$ 7,494

The Stepping Stone Drop-in Center Association

BOARD OF DIRECTORS
May 20, 2020

PRESIDENT
Lori Brown Yanklowitz
Joined on: 3/2014
Term #: 2
Term length: 3 yrs
Expiration: 2020

VICE PRESIDENT
Marilyn Marinelli
Joined on: 7/2014
Term #: 2
Term length: 3 yrs
Expiration: 2020

SECRETARY
Gretchen Stokes
Joined on: 5/2017
Term #: 1
Term length: 3 yrs
Expiration: 2020

TREASURER
Paul Marinelli
Joined on: 2/2015
Term #: 2
Term length: 3 yrs
Expiration: 2021

Nancy Beaudoin
Joined on: 9/2016
Term #: 2
Term length: 3 yrs
Expiration: 2022

Laura Byrne
Joined on: 3/2015
Term #: 2
Term length: 3 yrs
Expiration: 2021

Laurie Cummings-Bowen
Joined on: 5/2016
Term #: 2
Term length: 3 yrs
Expiration: 2022

Colleen Fisk
Joined on: 8/2011
Term #: 3
Term length: 3 yrs
Expiration: 2020

Debra Jayne
Joined on: 11/2019
Term #: 1
Term length: 3 yrs
Expiration: 2022

Jeff White
Joined on: 5/2018
Term #: 1
Term length: 3 yrs
Expiration: 2021

Susan E. Seidler

Objective

To be a member of an organization with a firm commitment to its mission and which aligns with my commitment to intentional peer support, diversity, exceptional work quality, teamwork, personal growth and development, and new ideas.

Skills

I have extensive experience in management, including over 30 years of supervisory experience. My organizational strengths include systems thinking, project management, communication, organization, initiative, attention to detail, multi-tasking, discretion, problem-solving, trouble-shooting, creativity, sense of humor, and teamwork.

I am proficient in Mac- and PC-based operating systems and software programs.

Experience

10/2018-Present **Region 1 IDN Executive Committee**

12/2006-Present **The Stepping Stone Drop-In Center Association (aka Stepping Stone)** **Claremont, NH**

1/2014-Present: Executive Director

- Provide overall management of the organization, including program development, resource allocation, and business operations.
- Establish clear goals and direction for the organization.
- Inspire and lead a diverse team of professionals as well as the Management Team.
- Advise and inform the Board of Directors.
- Champion the organization's vision, goals, and values.
- Promote the principles and values of Intentional Peer Support, WRAP®, and Peer Respite internally and within the greater community.
- Coordinate logistics and payment for statewide peer support training.

2/2007-1/2014: Site & Program Supports Coordinator

- Oversaw the Stepping Stone site and all aspects of program supports.
- Practiced and modeled peer support.
- Participated as member of the Management Team.
- Supervised staff.
- Maintained accurate and reliable program statistics for BBH contract compliance, Board of Director reports, and Food Bank requirements; submitted same according to established timelines.
- Co-facilitated monthly staff meetings.
- Maintained Intentional Peer Support certification and attended trainings as required and recommended.
- Produced monthly newsletter and oversaw distribution.
- Participated as member of Fundraising Committee and PR sub-committee.
- Worked with the Executive Director on RFP, budgeting, audit, and contracts.
- Oversaw business office and human resources functions, including payroll, earned time records, and staff schedule.

12/2006-2/2007: Interim Executive Director

6/2005-12/2006 **Kendal at Hanover** **Hanover, NH**

Health Services Administrative Assistant

- Provided direct support to the Director of Resident Health Care Services and the Director of Nursing; administrative support to the Health Services Management Team and nursing staff.
- Coordinated and scheduled staff development activities and training for the Health Services department, including maintenance of HealthStream database of credit hours.
- Provided help-desk and in-depth training in computer software.
- Participated on the Pharmacy Committee, which included analysis of medication use within Kendal's resident contracts and selection of Medicare D provider.

Susan E. Seidler

Experience continued **1983-6/2005** **United Developmental Services** **Lebanon, NH**

1987-2005: Administrative Assistant for Operations

- Supervised administrative support staff.
- Provided direct support to the Chief Operating Officer/Chief Financial Officer.
- Developed and coordinated efficient and effective office procedures.
- Prepared and disseminated annual budget and funding proposals within established deadlines; prepared *ad hoc* statistical reports; performed data entry and quality control for various State-mandated reports; performed miscellaneous accounting duties; signed company checks.
- Developed and reviewed internal systems to prepare for yearly State inspections of over 30 residences; refined infrastructure according to changes in State and Federal standards.
- Maintained telephone and voice messaging systems with regard to orientation, training, and programming in accordance with staff preference and company policy.

Ad hoc Responsibilities: member of UDS committees on Recruitment, Compensation, Downsizing, Criminal Justice, and Workplace Violence; member of State of NH DHHS committee to revise State certification requirements and evaluation tools; officer on UDS's HIPAA committee.

1996-2005: Network Administrator (concurrently with AA for Operations)

- Provided support across multiple sites in the administration and maintenance of a Windows-based network for 50+ users in accordance with user preference and company protocols.
- Provided help-desk and in-depth training in all aspects of computer hardware and software.
- Developed and maintained data systems to track and graph program utilization and contract compliance.
- Participated in monthly meetings of the NH Bureau of Developmental Services Shared IT Group.

1983-1987: Secretary, Early Intervention Program

Volunteerism

NH Notary Public

NH Peer Voice – Treasurer, Board of Directors

Stepping Stone – Treasurer, Board of Directors until 12/2006

Education

Certified in Intentional Peer Support – Shery Mead Consultants (aka Intentional Peer Support, LLC)

WRAP® Overview – The Copeland Center

Warmline and Peer Respite – NH State Trainers certified by Intentional Peer Support, LLC

NH Grants Institute – NH Center for Nonprofits

Complaint Investigation – NH Division of Mental Health & Developmental Services

Granite State College (University System of NH)

AA, General Studies, Concentration in Business Management, Organizational Development, and Finance

Additional coursework in database development, network management, and accounting

References References are available on request.

Tiffany R. DeGraff

[redacted]

Education

ASSOCIATES DEGREE | 2011 | RIVER VALLEY COMMUNITY COLLEGE

- Associates Degree in Business Management

ASSOCIATES DEGREE | 2009 | RIVER VALLEY COMMUNITY COLLEGE

- Associates Degree in Science of Accounting

CERTIFICATE PROGRAM| 2005 |NEW HAMPSHIRE COMMUNITY TECHNICAL COLLEGE

- Accounting Certificate

Skills & Abilities

MANAGEMENT

- 10 years of teaching at the community college has given me a handle of managing people and working with others to get things done.
- My years at Stepping Stone have prepared me to work with people to accomplish a desired outcome, both for the person and for the agency.
- Working at many places in a team environment has given me the skills to work well with others and also keep in mind deadlines and what is required of people to get things finished.
- In both my Accounting Program and my Management Program I took, and excelled in, several classes including Human Resources and General Management.

BOOKEEPING

I have learned, and continue to learn, the skills needed to keep proper books as required by the State of New Hampshire and a Non Profit Agency. The skills needed for this particular type of accounting have been a challenge as they are different from the basic For Profit Accounting that is taught in an Associates Program of Accounting

JOB TRAINING

- In 5 years at Stepping Stone I have completed many of the core classes and taken many classes to acquire the skills needed to work in the mental health field.
  - Member Rights Training 2018
  - Sexual Harassment Training 2018
  - 2 day WRAP Seminar 2018
  - 5 day Intention Peer Support Training 2018
  - New Hampshire Peer Support Conference 2018
  - Warmline 101 Training 2019
  - 5 day WRAP Seminar II 2019

Experience

BOOKKEEPER | STEPPING STONE | JANUARY 2014 - TO PRESENT

- As the full-charge bookkeeper I am in charge, and comfortable, with all areas of payroll and producing required financial reports. I have used and continue to use many versions of Quickbooks and am comfortable using Quickbooks for all areas of daily bookkeeping.

ACCOUNTANT | POLISH AMERICAN CITIZENS CLUB | JULY 2014 - TO PRESENT

- At the Polish Club, I am the payroll manager, general bookkeeper including all preparations of taxes and interface with the CPA

TEACHER | RIVER VALLEY COMMUNITY COLLEGE | JANUARY 2011 - TO MAY 2017

- I taught in the Continueing education department for several years, Quickbooks for the beginner and Quickbooks for the workplace.
- I also taught credit classes in the accounting and business management departments as an adjunct professor.

ACCOUNTANT | ESERSKYS HARDWARE | JUNE 2004 - MAY 2011

- I was the full charge bookeeper at Eserskys, I handled payroll, payroll taxes, worked with our tax accountant for end-of-year reports, mailed out monthly statements , maintained a data base of customers, did annual mailings and kept inventory up to date.

Shanon Pyatt

[redacted]

Experience

Support Coordinator, Stepping Stone/Next Step Peer Support Agency

8/14-Current

Produce Newsletter, staff schedule, Signup sheets, Plan Educational Events as well as trips /events, screen requests for Respite as well as update files as needed, make weekly timesheets, produce a payroll summary for the bookkeeper, gather data for quarterly statistics and perform other duties as assigned.

I have my certification in IPS (2012); Completion of Administration training (2012); Attended WRAP® 101 (2012); WRAP® Overview (2013); IPS Refresher (2015, 2016, and 2018); Sexual Harassment training (2018); Members Rights training (2018); Excel Advanced training (2018).

Assistant Coordinator, Stepping Stone/ Next Step Peer Support Agency

10/10-8/14

Statistics involving Daily calls, Number of daily membership, all calls through Warmline, Filing, Crisis Respite, Promoting Wellness and perform other duties as assigned.

Floor, Warmline & Crisis Respite worker, Stepping Stone/Next Step Peer Support Agency

5/09-10/10

Check in with members, Make & take phone calls, 1 on 1 Peer Support.

Durgin & Crowell Lumber Mill

5/05-2/06

Cleaned Machines

Rugerio's

1/04-3/05

Head cook and prep work. Team player.

Payless Asphalt

6/02-11/03

Worked with Asphalt & gravel in residential areas

Education

1997	Belmont High School, Belmont NH.
1991	Beech Street Elementary School, Manchester NH.

References upon request

KIMBERLY J. METCALFE

[redacted]

EXPERIENCE

10/2019-Present	Peer Respite Coordinator, The Stepping Stone Drop-In Center Assn, Claremont NH
1/2017-10/2019	Volunteer, Baby Steps Family Assistance, Claremont NH
8/2012-1/2018	Peer Support Staff, The Stepping Stone Drop-In Center Assn, Claremont NH
2014	Administrative Assistant, The Stepping Stone Drop-In Center Assn, Claremont NH
2002-2003	Director, Community Alliance Day Care
2000	Director, Springfield Health and Rehab, Springfield

EDUCATION

1988	Mt. Anthony Union High School, Bennington, VT College Prep
1994	North Adams State College, North Adams, MA B.S., Elementary Education
	Keene State College, Keene NH Grant Writing

REFERENCES UPON REQUEST

The Stepping Stone Drop-In Center Association

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Susan E Seidler	Executive Director	$47,840	100%	$47,840
Tiffany DeGraff	Finance & Operations Mgr	$37,440	100%	$37,440
Shanon Pyatt	Support Coordinator	$29,120	100%	$29,120
Kimberly Metcalfe	Respite Coordinator	$15,600	100%	$15,600

State of New Hampshire
Department of Health and Human Services
Amendment #4 to the Peer Support Services Contract

This 4th Amendment to the Peer Support Services contract (hereinafter referred to as "Amendment #4") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Tri-City Consumers' Action Co-operative (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 55 Summer Street, Rochester, NH 03867.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 29, 2016, (Item #23), as amended on June 20, 2018, (Item #33B), June 19, 2019, (Item #28), and on June 24, 2020, (Item #27), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, and Exhibit C-1, Revisions to General Provisions, Paragraph 3, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to increase the price limitation and modify the scope of services to support continued delivery of these services; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Delete Exhibit A - Amendment #2, Scope of Services, in its entirety and replace with Exhibit A – Amendment #4, Scope of Services, which is attached hereto and incorporated by reference herein.
2. Delete Exhibit B, Amendment #2, Methods and Conditions Precedent to Payment in its entirety and replace with Exhibit B – Amendment #4, Methods and Conditions Precedent to Payment, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #4 remain in full force and effect. This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

10/30/2020
Date

DocuSigned by:
Katja Fox
ED9D05B04C63442...
Name: Katja Fox
Title: Director

Tri-City Consumer's Action Co-operative

10/30/2020
Date

DocuSigned by:
Sharon Reynold
C38E403C1D364D0...
Name: Sharon Reynold
Title: Board President

New Hampshire Department of Health and Human Services
Peer Support Services

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

10/30/2020
Date

DocuSigned by:
Name: Catherine Pinos
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _______________ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Exhibit A - Amendment #4

Scope of Services

1. **Provisions Applicable to All Services**

   1.1. The Contractor shall submit a detailed description of the language assistance services they shall provide to persons with limited English proficiency to ensure meaningful access to their programs and services within ten (10) days of the contract effective date.

   1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire (NH) General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

   1.3. The Contractor shall provide peer support services in accordance with NH Administrative Rule He-M 400, Community Mental Health, Part 02, Peer Support, referred to as He-M 402, that:

      1.3.1. Increase quality of life for individuals living with mental illness in NH.

      1.3.2. Increase hope for and belief in the possibility of recovery for individuals living with mental illness in NH.

      1.3.3. Increase choice regarding the services and supports available to individuals living with mental illness in NH.

      1.3.4. Provide alternatives to and reduce the use of more restrictive and expensive services such as hospitalization.

      1.3.5. Increase social connectedness for individuals living with mental illness in NH.

      1.3.6. Increase satisfaction with peer support services.

   1.4. The Contractor shall provide mental health peer support services to individuals who are eighteen (18) years of age or older who:

      1.4.1. Self-identify as a recipient, as a former recipient, or at a significant risk of becoming a recipient of mental health services, and may include individuals who are homeless.

   1.5. For the purposes of this contract, any reference to days shall mean consecutive calendar days, unless otherwise denoted as business days.

   1.6. The Contractor agrees that if the performance of services involves the collection, transmission, storage, or disposition of Part 2 substance use disorder (SUD) information or records created by a Part 2 provider the information or records shall be subject to all safeguards of 42 CFR Part 2.

2. **Definitions**

   2.1. **Board of Directors** means the governing body of a nongovernmental peer support agency.

   2.2. **Business Days** are defined as Monday through Friday, excluding Saturday and Sunday.

   2.3. **Consumers** are any individual, eighteen (18) years of age or older, who self-identifies as a recipient, as a former recipient, or as a significant risk of becoming a recipient of

Exhibit A - Amendment #4

publically funded mental health services.

2.4. **Guests** are any individuals who are invited to visit the peer support agency by a member, participant, or the peer support agency.

2.5. **Homeless** is (1) an individual or family who lacks a fixed, regular, and adequate nighttime residence; or (2) an individual or family who has a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels and congregate shelters), an institution other than a penal facility that provides temporary residence for individuals intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

2.6. **Members** are any consumers, who have made an informed decision to join, and agree to, abide by, and support the goals and objectives of peer support services.

2.7. **Mental illness** is defined in RSA 135-C:2 X, namely, "a substantial impairment of emotional processes, or of the ability to exercise conscious control of one's actions, or of the ability to perceive reality or to reason, when the impairment is manifested by instances of extremely abnormal behavior or extremely faulty perceptions. It does not include impairment primarily caused by: (a) epilepsy; (b) intellectual disability; (c) continuous or noncontinuous periods of intoxication caused by substances such as alcohol or drugs; or (d) dependence upon or addiction to any substance such as alcohol or drugs."

2.8. **Participant** means a consumer, who is not member, who participates in any aspect of peer support services.

2.9. **Peer Support Agency (PSA)** means an organization whose primary purpose is to provide culturally appropriate peer support, peer education, and peer programming to persons eighteen (18) year of age and older who self- identify as having a mental illness.

2.10. **Quarter or Quarterly** is defined as the periods of July 1 through September 30, October 1 through December 31, January 1 through March 31, and April 1 through June 30.

2.11. **Recovery** means for an individual with a mental illness, development of personal and social skills, beliefs and characters that support choice, increase quality of life, minimize or eliminate impairment, and decrease dependence on professional services.

2.12. **Region** is the geographic area of cities and towns in New Hampshire, as defined by the Department.

2.13. **Serious Mental Illness (SMI)** refers to individuals whom the state defines as having either Serious Mental Illness (SMI) or Serious and Persistent Mental Illness (SPMI) pursuant to N.H. Revised Statutes Annotated (RSA) 135-C:2, XV.

2.14. **Week** is defined as Monday through Sunday.

3. **Scope of Services**

3.1. Peer Support Services

3.1.1. The Contractor shall provide in-house and community based services for New Hampshire residents.

3.1.2. The Contractor shall provide peer support services that are provided for consumers and by consumers including, but not limited to:

3.1.2.1. Peer support services that include supportive interactions, shared experiences, acceptance, trust, respect, lived experience, and mutual support among members, participants, staff and volunteers.

3.1.2.2. Maintenance of a safe physical location that:

3.1.2.2.1. Is open a minimum of forty-four (44) hours per week, eight (8) hours per day, five (5) days per week and four (4) hours on one (1) additional day per week at each location; and

3.1.2.2.2. Provides face-to-face or telephone peer support services to PSA members or others who contact the PSA at a minimum of forty (40) hours per week at each location.

3.1.2.3. Peer support services based on the Intentional Peer Support model that:

3.1.2.3.1. Foster recovery from mental illness by helping individuals identify and achieve personal goals while building an evolving vision of their recovery.

3.1.2.3.2. Foster self-advocacy skills, autonomy, and independence.

3.1.2.3.3. Emphasize mutuality and reciprocity as demonstrated by shared decision-making; strong conflict resolution; non-medical approaches; and non-static roles, including but not limited to, staff who are members and members who are educators.

3.1.2.3.4. Offer alternative views on mental health, mental illness and the effects of trauma and abuse.

3.1.2.3.5. Encourage informed decision-making about all aspects of people's lives.

3.1.2.3.6. Support people with mental illness in challenging perceived self-limitations, while encouraging the development of beliefs that enhance personal and relational growth.

3.1.2.3.7. Emphasize a holistic approach to health that includes a vision of the whole person.

3.1.2.4. Providing opportunities to learn wellness strategies by using, at a minimum, Wellness Recovery Action Planning (WRAP) and Whole Health Action Management (WHAM), to strengthen individual abilities to attain and maintain their health and recovery from mental illness.

3.1.2.5. Provide in-house and community-based services according to the

Deliverables in Subsection 12.1. through Subsection 12.2.

3.1.2.6. Provide outreach by face-to-face or by telephone contact with consumers by providing support to individuals who are unable to attend agency activities, visiting people who are hospitalized with a psychiatric condition, and reaching out to people who meet membership criteria and are homeless.

3.1.2.7. Provide monthly newsletters published by the peer support agency (PSA) that describes agency services and activities; other community services; social and recreational opportunities; member articles and contributions and other relevant topics that might be of interest to members and participants.

3.1.2.8. Distribute the newsletters to the members and other interested parties, which may include but are not limited to community mental health centers and other appropriate community organizations, at least five (5) business days prior to the upcoming month.

3.1.2.9. Provide monthly education events and presentations topics germane to issues and concerns of consumers of mental health services which must include, but are not limited to:

3.1.2.9.1. Rights Protection.

3.1.2.9.2. Peer Advocacy.

3.1.2.9.3. Recovery.

3.1.2.9.4. Employment.

3.1.2.9.5. Wellness Management.

3.1.2.9.6. Community Resources.

3.1.2.10. Provide an electronic copy of the monthly newsletters and education events in Subparagraph 3.1.2.7. and Paragraph 11.6.3., to the Office of Consumer and Family Affairs within the Department's Bureau of Behavioral Health, and the Mental Health Block Grant State Planner and Mental Health Block Grant Advisory Council no later than five (5) days prior to the beginning of the following month.

3.1.2.11. Provide individual peer assistance by assisting adults to:

3.1.2.11.1. Locate, obtain, and maintain mental health services and supports through referral, consumer education, and self-empowerment;

3.1.2.11.2. Support individuals who are identifying problems by assisting them in addressing the issue and/or in resolving grievances; and

3.1.2.11.3. Promote self-advocacy.

3.1.2.12. Provide employment education by providing members with:

3.1.2.12.1. Information relative to obtaining and maintaining competitive employment.

3.1.2.12.2. Referrals to community mental health center employment programs.

3.1.2.12.3. Employment-related activities, which may include, but are not limited to:

3.1.2.12.3.1. Resume writing.

3.1.2.12.3.2. Interviewing techniques.

3.1.2.12.3.3. Assistance with completing employment applications.

3.1.2.13. Inform members and the general public about peer support and wellness services available by providing Community Education Presentations about mental illness and the peer support community on a monthly basis to potential referral sources, funders, or families of individuals affected by mental illness.

3.1.2.14. Inform local human service providers and the general public about the stigma of mental illness, wellness and recovery and collaborate with other local human service providers that serve consumers in order to facilitate referrals and share information about services and other local resources.

3.1.2.15. Provide training and technical assistance to assist consumers to advocate for themselves and on their own behalf regarding healthcare such as, but not limited to:

3.1.2.15.1. Preparation techniques for doctors' appointments.

3.1.2.15.2. How to take notes.

3.1.2.15.3. How to use the physician's desk reference book for medications and a review of patient rights.

3.1.2.16. Invite guests to participate in peer support activities.

3.1.2.17. Provide residential support services, as needed, by providing support and assistance such as help with staying in their home or apartment, or finding a place to live.

3.1.2.18. Maintain at least a monthly schedule of peer support and wellness services and activities, which includes, but is not limited to:

3.1.2.18.1. Staff development and training.

3.1.2.18.2. Events that include community-based services.

3.1.2.18.3. Community outreach events.

3.2. The Contractor shall provide transportation services to members, participants and guests, as needed. The Contractor shall:

3.2.1. Transport members, participants, guests, in a Contractor owned or leased vehicle, to and from their homes and/or the Contractor's PSA to participate in activities that may include, but not limited to:

3.2.1.1. Peer support services.

3.2.1.2. Wellness and recovery activities.

3.2.1.3. Annual conferences.

3.2.1.4. Regional meetings.

3.2.1.5. Council meetings.

3.2.2. Ensure all vehicles and drivers used for transportation comply with Federal and State Department of Transportation and Department of Safety regulations, which include, but are not limited to:

3.2.2.1. Vehicles must be registered pursuant to NH Administrative Rule Saf-C 500, Vehicle Registration Rules.

3.2.2.2. Vehicles must be inspected in accordance with NH Administrative Rule Saf-C 3200, Official Motor Vehicle Inspection Requirements.

3.2.2.3. Drivers must be licensed in accordance with NH Administrative Rule Saf-C 1000, Driver Licensing.

3.2.3. Require all employees, members, or volunteers who drive Contractor-owned vehicles sign a State of New Hampshire Release of Individual Motor Vehicle Driver Records form in order to access individual driver records that indicate drivers have safe driving records.

3.2.4. Require all employees, members, or volunteers who drive Contractor-owned vehicles complete a National Safety Council Defensive Driving course offered through a State of New Hampshire-approved agency.

3.3. The Contractor shall acknowledge funding from the Department to support transportation costs:

3.3.1. Is not used for activities other than peer support related activities defined in this Agreement.

3.3.2. May be used on an 'as needed' basis to pay for bus rides that are necessary to transport individuals to peer support services provided by the Contractor.

3.4. <u>Warmline Services</u>

3.4.1. The Contractor shall provide warmline services that offer on-call telephone peer support services to members, participants, and others. The Contractor shall ensure warmline services:

3.4.1.1. Are provided to any individual with the ability to receive calls and make calls statewide and who lives or works in the State of New Hampshire.

3.4.1.2. Are provided during the hours the PSA is closed.

3.4.1.3. Assist individuals with addressing a current crisis related to their mental health.

3.4.1.4. Include referrals to appropriate treatment and other resources available in the consumer's service area.

3.4.1.5. Are provided by staff who are trained in providing warmline services.

3.4.1.6. May include outreach calls described in Subparagraph 3.1.2.6.

4. **Geographic Area and Physical Location of Services**

4.1. The Contractor shall provide peer support services separately from the confines of a local community mental health center, unless otherwise pre-approved by the Department.

4.2. The Contractor shall provide peer support services at a physical location and/or building that is in compliance with Exhibit C, Section 15. and with the Life Safety requirements, which include, but are not limited to, ensuring the building:

4.2.1. Is in compliance with local health, building and fire safety codes.

4.2.2. Is maintained in good repair and free of hazards, and includes, but is not limited to:

4.2.2.1. A minimum of one (1) indoor bathroom that includes a sink and toilet.

4.2.2.2. A minimum of one (1) telephone for incoming and outgoing calls.

4.2.2.3. A functioning septic or other sewage disposal system.

4.2.2.4. A source of potable water for drinking and food preparation as follows:

4.2.2.4.1. If drinking water is supplied by a non-public water system, the Contractor shall ensure the water is tested and found to be in accordance with NH Administrative Rules Env-Ws 300, Drinking Water Rules, Part 15, Maximum Contaminant Levels and Maximum Contaminant Level Goal for Regulated Organics and Part 316, Regulated Secondary Maximum Contaminant Levels initially and every five (5) years thereafter.

4.2.2.4.2. If the water is not approved for drinking, the Contractor shall implement an alternative method for providing safe drinking water.

5. **Enrolling Consumers for Services and/or as Members with a Peer Support Agency (PSA)**

5.1. The Contractor shall provide peer support services to individuals defined in Subsection 1.4. who have a desire to work on wellness issues, and who have a desire to participate in services.

5.2. The Contractor shall request consumers complete a membership application to join and support the activities and mission of the PSA.

5.3. The Contractor shall ensure the membership application includes, but is not limited to:

5.3.1. The minimum engagement policy.

5.3.2. Suspension of membership policy.

5.3.3. Membership rules.

5.3.4. Attestation that the consumer supports the mission of the PSA.

5.4. The Contractor shall provide services to both members and non-members.

6. Staffing Requirements for a PSA

6.1. The Contractors shall employ an Executive Director who:

6.1.1. Is appointed by the Board of Directors.

6.1.2. Is employed by the Contractor and is supervised by the Board of Directors.

6.1.3. Has, at a minimum, the following qualification:

6.1.3.1. One (1) year of supervisory or management experience; and

6.1.3.1.1. An associate's degree or higher administration, business management, education, health, or human services; or

6.1.3.1.2. Additional years of experience in the peer support field that can be substituted for one (1) year of academic experience.

6.1.4. Is evaluated annually by the Board of Directors to ensure peer support and wellness services and activities are provided in accordance with:

6.1.4.1. The performance expectations approved by the Board.

6.1.4.2. The Department's policies and rules.

6.1.4.3. The Contract terms and conditions.

6.1.4.4. The Quality improvement reviews.

6.2. The Contractor shall screen each staff member for tuberculosis prior to employment.

6.3. The Contractor shall not add, delete, defund, or transfer staff positions among programs without prior written permission from the Department.

6.4. The Contractor shall develop a Staffing Contingency Plan for Department approval no later than thirty (30) days from the contract effective date, which includes but is not limited to:

6.4.1. The process for replacement of personnel in the event of loss of key personnel or other personnel during the period of this Agreement.

6.4.2. The description of how additional staff resources shall be allocated to support this Agreement in the event of inability to meet any performance standard.

6.4.3. The description of time frames necessary for obtaining staff replacements.

6.4.4. An explanation of the Contractor's capabilities to provide, in a timely manner, staff replacements/additions with comparable experience.

6.5. The Contractor shall submit an emergency staffing plan within thirty (30) days of the contract effective date if the contract that includes, but not limited to:

6.5.1. Inclement weather notifications for programming and transportation services.

6.5.2. Emergency evacuation plans for the Agency.

Exhibit A - Amendment #4

6.6. Prior to making an offer of employment or for volunteer work, the Contractor shall, after obtaining signed and notarized authorization from the person or persons for whom information is being sought:

6.6.1. Obtain at least two (2) references for the person;

6.6.2. Submit the person's name for review against the bureau of elderly and adult services (BEAS) state registry maintained pursuant to RSA 161-F:49;

6.6.3. Complete a criminal records check to ensure that the person has no history of:

6.6.3.1. Felony conviction; or

6.6.3.2. Any misdemeanor conviction involving:

6.6.3.2.1. Physical or sexual assault;

6.6.3.2.2. Violence;

6.6.3.2.3. Exploitation;

6.6.3.2.4. Child pornography;

6.6.3.2.5. Threatening or reckless conduct;

6.6.3.2.6. Theft;

6.6.3.2.7. Driving under the influence of drugs or alcohol; or

6.6.3.2.8. Any other conduct that represents evidence of behavior that could endanger the well-being of a consumer; and

6.6.4. Complete a motor vehicles record check to ensure that the person has a valid driver's license if the person will be transporting consumers.

6.7. Unless the Contractor requests and obtains a waiver from the Department, it shall not hire any individual or approve any individual to act as a volunteer if:

6.7.1. The individual's name is on the BEAS state registry;

6.7.2. The individual has a record of a felony conviction; or

6.7.3. The individual has a record of any misdemeanors specified in Subparagraph 6.6.3.2.

7. Staff Training and Development

7.1. The Contractor shall verify and document all staff and volunteers have appropriate training, education, experience, and orientation to fulfill the responsibilities of their respective positions. The Contractor shall ensure:

7.1.1. All personnel and training records are current and available to the Department, as requested.

7.1.2. All staff training shall be in accordance with New Hampshire Administrative Rule He-M 400, Community Mental Health, Part 402, Peer Support, Section 402.05, Staff Training, Staff Development and Orientation.

7.2. The Contractor shall maintain documentation in files of the staffs completed trainings and certifications.

7.3. The Contractor shall obtain Department approval thirty (30) days prior to the training date, for all trainings provided by the Contractor or to attend trainings other than offered by the Contractor for staff at least on an annual basis such as, but not limited to:

7.3.1. Peer Support.

7.3.2. Warmline.

7.3.3. Facilitating Peer Support Groups.

7.3.4. Sexual Harassment.

7.3.5. Member Rights.

7.4. The Contractor shall provide Intentional Peer Support training and its required consultations to meet state certification.

7.5. The Contractor shall provide Wellness, Recovery, and Planning training to staff during the years in which Intentional Peer Support is not provided.

7.6. The Contractor shall ensure administrative staff, including the Executive Director, participate in trainings on:

7.6.1. Staff Development.

7.6.2. Supervision.

7.6.3. Performance Appraisals.

7.6.4. Employment Practices.

7.6.5. Harassment.

7.6.6. Program Development.

7.6.7. Complaints and the Complaint Process.

7.6.8. Financial Management.

7.7. The Contractor shall ensure that annual Wellness Training is available to staff and members, and may be provided to other mental health consumers who do not identify themselves as members of a PSA in the region.

7.8. The Contractor shall obtain prior approval by the Department no later than thirty (30) days prior to the training, to provide or refer staff to specific training proposed by either the Department or the Contractor.

7.9. The Contractor shall collaborate with other Peer Support Agencies to offer combined trainings to facilitate efficient use of training funds and to increase the scope of trainings offered.

7.10. The Contractor shall purge all data in accordance with the instructions from the Department pertaining to members, participants, and guests who have not received peer support services within the prior two (2) year period.

8. Composition and Responsibilities of a PSA

8.1. The Contractor shall establish and maintain a status as a PSA by:

8.1.1. Being incorporated with the Secretary of State's Office as a non-for-profit agency.

8.1.2. Having a plan for governance that requires a Board of Directors who:

8.1.2.1. Are responsible for the management and control of the property and affairs of the corporation.

8.1.2.2. Have the powers usually vested in the Board of Directors of a non-for-profit corporation.

8.1.2.3. Are comprised of a minimum of nine (9) individuals with at least 51% of the individuals who self-identify as consumers.

8.1.2.4. Have membership where less than 20% of the Board members are related by blood, marriage, or cohabitation to other Board members.

8.1.2.5. Establish and maintain the bylaws that include, but are not limited to:

8.1.2.5.1. Responsibilities and powers of the Board of Directors.

8.1.2.5.2. Term limits for the Board of Directors officers ensuring not more than 20% of the Board members serve for more than six (6) consecutive years.

8.1.2.5.3. A nominating process that actively recruits diverse individuals whose skills and life experiences serve the needs of the agency.

8.1.2.5.4. A procedure by which inactive PSA members are removed from the PSA Board.

8.2. The Contractor shall submit a corrective action plan to the Department within five (5) days when the Board of Directors membership falls below the required minimum of nine (9) members.

8.3. The Contractor shall submit an updated list of current Board of Directors members and a corrective action plan with timeframes to comply with the required number of members when membership falls below the minimum required number of five (5) members to the Department and NH Department of Justice, Division of Charitable Trusts.

8.4. The Contractor shall have a documented Orientation Process and Manual for the members and officers of the Board of Directors, which includes written descriptions outlining the duties of the members and officers of the Board of Directors.

8.5. The Contractor shall have annual trainings related to the members and officers of the Board of Directors roles and responsibilities, including fiduciary responsibilities.

8.6. The Contractor's Board of Directors shall have fiduciary responsibility for the agency including approval of agency financial policies and procedures that includes, but not be limited to, the following:

8.6.1. Cash Management including, but not limited to:

8.6.1.1. Cash receipts.

8.6.1.2. Cash disbursements.

8.6.1.3. Petty cash.

8.6.2. Accounts Payable/Receivable Procedures, payroll, and fixed assets.

8.6.3. Internal Control Procedures.

8.6.4. Expense Reimbursement and Advance Policy.

8.7. The Contractor shall have open attendance to PSA members during a portion of a Board meeting.

8.8. The Contractor shall publish the times and locations of Board of Directors meetings in an effort to encourage PSA member attendance.

8.9. The Contractor's Board of Directors shall maintain written records that are available to the Department upon request, which include, but are not limited to:

8.9.1. Board of Directors meeting minutes that include, but are not limited to:

8.9.1.1. Topics discussed.

8.9.1.2. Votes and actions taken.

8.9.1.3. A monthly review of the agency's financial status.

8.9.2. Current Board of Directors list that includes, but is not limited to:

8.9.2.1. Member name.

8.9.2.2. Member address.

8.9.2.3. Member phone number.

8.9.2.4. Member e-mail address.

8.9.2.5. Board office held.

8.9.2.6. Date joined the Board.

8.9.2.7. Member Board expiration date.

8.9.3. Documentation of the process and results of annual Board of Directors elections.

8.9.4. Policy manuals that include, but are not limited to policies for:

8.9.4.1. Human Resources.

8.9.4.2. Staff Development.

8.9.4.3. Financial Responsibilities.

8.9.4.4. Protection for member and participant rights.

8.10. The Contractor shall pursue other sources of revenue to support additional peer support services and/or supplement other related activities that the Department may not pay for under this Agreement.

9. Participation in Statewide/Regional Meetings

9.1. The Contractor shall support the recruitment and training of individuals for serving on local, regional and state mental health policy, planning and advisory initiatives.

9.2. The Contractor shall ensure the participation of individuals other than the Contractor's employees who provide leadership development meetings, workshops, and training events.

9.3. The Contractor shall ensure the Executive Director, or designee, attends the Department's monthly Peer Support Directors meeting for the purpose exchanging information as well as supporting and strengthening the statewide Peer Support system.

9.4. The Contractor shall meet, a minimum of two (2) times per year, with other regional community support organizations that serve the same populations, which may include, but are not limited to:

9.4.1. Mental health centers.

9.4.2. Area homeless shelters.

9.4.3. Community action programs.

9.4.4. Housing agencies.

9.5. The Contractor shall submit documentation to the Department that demonstrates attendance at the meetings in Section 9.

10. Grievance and Appeals

10.1. The Contractor shall submit a grievance and appeals process to the Department for approval. The Contractor shall ensure the grievance and appeals process includes, but is not limited to:

10.1.1. How to receive complaints orally, or in writing, ensuring information collected includes, but is not limited to:

10.1.1.1. Consumer name.

10.1.1.2. Date of written grievance.

10.1.1.3. Nature and subject of the grievance.

10.1.1.4. A method to submit an anonymous complaint.

10.1.2. A policy relative to assisting consumers with the grievance and appeal process including, but not limited to, how to file a complaint.

10.1.3. A method to track complaints.

10.1.4. Investigating allegations that a member's or participant's rights have been violated by agency staff, volunteers or consultants.

10.1.5. An immediate review of the complaint and investigation by the Contractor's director or his or her designee.

10.1.6. A process to attempt to resolve every grievance for which a formal investigation is requested.

10.1.7. An appeal process for members or participants to appeal any written decision rendered by the Board of Directors.

10.2. The Contractor shall ensure the Board of Directors issues a written decision to the member or participant filing a grievance upon completing an investigation and within twenty (20) business days setting forth the disposition of the grievance.

10.3. The Contractor shall submit a copy of the written decision in Subsection 10.2. of the complaint to the Department within ten (10) days from the written decision.

11. Reporting Requirements

11.1. The Contractor shall submit a report that lists the names of the trained individuals in accordance with Section 7. Staff Training and Development, utilizing reporting forms provided by the Department.

11.2. The Contractor shall provide the prior month's interim Balance Sheet, and Profit and Loss Statements to the Department no later than the 30th of the month, ensuring the report includes, but is not limited to:

11.2.1. The Current Ratio that measures the Contractor's total current assets available to cover the cost of current liabilities. The Contractor shall:

11.2.1.1. Utilize the following formula: Total current assets divided by total current liabilities.

11.2.1.2. Maintain a minimum current ratio of 1.1:1.0 with no variance allowed.

11.2.2. Accounts Payable that measure the Contractor's timeliness in paying invoices, ensuring no outstanding invoices greater than sixty (60) days.

11.2.3. Budget Management that compares budgets to actual revenues and expenses to determine the percentage of the Contractors budget executed year-to-date.

11.2.4. Ensure revenues are equal to or greater than the year-to-date calculation while ensuring expenses are equal to or less than the year-to-date calculation.

11.3. The Contractor shall prepare an Annual Report presentation for the benefit of the Mental Health Block Grant Advisory Council.

11.4. The Contractor shall submit a quarterly written report to the Department, on a form supplied by the Department, no later than the fifteenth (15th) day of the month following the end of each quarter that includes, but is not limited to:

11.4.1. Community outreach activities as outlined in Section 12. Deliverables.

11.4.2. Compilation of program evaluation and surveys submitted in the past quarter.

11.4.3. Peer support service deliverables as identified on templates provided by the Department.

11.4.4. Statistical data including, but not limited to:

11.4.4.1. The total number of unduplicated participants served on a daily basis.

11.4.4.2. The total number of current members, defined as only those members who have been served within the past year.

11.4.4.3. Program utilization totals by percentage.

11.4.4.4. Number of telephone peer support contacts.

Exhibit A - Amendment #4

11.4.4.5. Number and description of outreach activities.

11.4.4.6. Number and description of educational events provided:

11.4.4.6.1. On-site; and

11.4.4.6.2. In the community.

11.4.5. Board of Directors meeting minutes for the previous quarter that include, but are not be limited to:

11.4.5.1. Executive Director's report.

11.4.5.2. Board of Directors roster.

11.5. The Contractor shall provide a report for Department approval by July 31 of each State Fiscal Year, which outlines:

11.5.1. Specific steps the Contractor has taken to increase membership in the previous State Fiscal Year.

11.5.2. A plan for how the Contractor shall increase the unduplicated numbers served in the above activities by ten (10) percent of the total served in the previous year, for each subsequent State Fiscal Year.

11.5.3. Monthly in-house schedules and newsletters.

11.5.4. Quarterly revenue and expenses by cost, category and locations.

11.5.5. Quarterly Capital Expenditure Reports.

11.5.6. Quarterly Auditor's Reports: The prior three (3) months of monthly interim Balance Sheet and Profit and Loss Statements including separate statements for related parties that are certified by an officer of the reporting entity to measure the agency's fiscal integrity.

12. Deliverables

12.1. The Contractor shall provide a minimum of fifteen (15) hours of in-house services at each Center each week, of which five (5) hours may be conducted in the Center's community or region, as approved by the Department. The Contractor shall provide services that include, but are not limited to:

12.1.1. New topics introduced every month.

12.1.2. A minimum of five (5) separate discussion groups per week that address emotional wellbeing topics, which may include, but are not limited to:

12.1.2.1. IPS.

12.1.2.2. WRAP.

12.1.2.3. WHAM.

12.1.2.4. Setting boundaries.

12.1.2.5. Positive thinking.

12.1.2.6. Wellness.

12.1.2.7. Stress management.

12.1.2.8. Addressing trauma.

12.1.2.9. Reduction of negative or intrusive thoughts.

12.1.2.10. Management of emotional states including, but not limited to:

12.1.2.10.1. Anger.

12.1.2.10.2. Depression.

12.1.2.10.3. Anxiety.

12.1.2.10.4. Mania

12.1.3. A minimum of five (5) discussion or practice groups per week that address physical wellbeing topics which may include, but are not limited to:

12.1.3.1. Smoking cessation.

12.1.3.2. Weight loss.

12.1.3.3. Nutrition and Cooking.

12.1.3.4. Physical exercise.

12.1.3.5. Mindfulness activities including, but not limited to:

12.1.3.5.1. Yoga.

12.1.3.5.2. Meditation.

12.1.3.5.3. Journaling.

12.1.4. A minimum of four (4) activity groups per week that that provide positive skill-building activities which may include, but are not limited to:

12.1.4.1. Arts and crafts.

12.1.4.2. Music expression.

12.1.4.3. Creative writing.

12.1.4.4. Cooking.

12.1.4.5. Sewing.

12.1.4.6. Gardening.

12.1.4.7. Movies.

12.1.5. A minimum of one (1) group per week based on topics relevant to fostering independence which may include, but are not limited to:

12.1.5.1. Online blogs or articles that relate to mental health.

12.1.5.2. Obtaining employment.

12.1.5.3. Budgeting.

12.1.5.4. Decision-making.

12.1.5.5. Self-advocacy.

12.2. The Contractor shall provide community-based services including, but not limited to a minimum of one (1) trip into the community per month for activities that may include, but are not limited to:

12.2.1. Visiting a natural setting.

12.2.2. Volunteering opportunities.

12.2.3. Visiting a museum.

12.2.4. Visiting a local historical site.

12.2.5. Visiting local farms or gardens.

12.3. The Contractor shall provide community outreach that includes, but is not limited to:

12.3.1. Providing monthly community education presentations about mental illness and the peer support community to potential referral sources, funders, or families of individuals affected by mental illness, including, but not limited to:

12.3.1.1. Local psychiatric hospitals.

12.3.1.2. Local mental health clinics.

12.3.1.3. Local community events.

12.3.2. Providing monthly educational events and presentations to members, participants, or other individuals seeking support and information relating to the issues and concerns of consumers of mental health services which includes, but is not limited to educational topics to be covered over the course of the year, which may include, but are not limited to:

12.3.2.1. Rights protection.

12.3.2.2. Peer Advocacy.

12.3.2.3. Recovery.

12.3.2.4. Employment.

12.3.2.5. Wellness Management.

12.3.2.6. Community Resources.

13. Quality Improvement

13.1. The Contractor shall participate in quality program reviews and site visits on a schedule provided by the Department. All contract deliverables, programs, and activities shall be subject to review during this time. These reviews shall result in a report and potential corrective action.

13.2. The Contractor shall participate in quality assurance reviews as follows:

13.2.1. Ensure the Department has access sufficient for monitoring of contract compliance requirements as identified in OMB Circular A-133.

13.2.2. Ensure the Department is provided with access that shall include, but is not limited to:

13.2.2.1. Data.

13.2.2.2. Financial records.

13.2.2.3. Scheduled access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.4. Unannounced access to Contractor work sites, locations, and work spaces and associated facilities.

13.2.2.5. Scheduled phone access to Contractor principals and staff.

13.3. The Contractor shall perform monitoring and comprehensive quality and assurance activities including, but not limited to:

13.3.1. Participating in bi-annual quality improvement review as in Subsection 13.1.

13.3.2. Participating in ongoing monitoring and reporting based on the bi-annual review and corrective action plan submitted in conjunction with the Department and Contractor.

13.3.3. Conducting member satisfaction surveys provided by and as instructed the Department.

13.3.4. Reviewing personnel files for completeness.

13.3.5. Reviewing the complaint process.

13.4. The Contractor shall provide a corrective action plan to the Department within thirty (30) days of notification of noncompliance with contract activities.

13.5. The Contractor shall provide all requested audits to the Department no later than ten (10) days after receiving the request from the Department.

Method and Conditions Precedent to Payment

1. The State shall pay the Contractor an amount not to exceed the Price Limitation, Block 1.8, of the General Provisions of this Agreement, Form P-37, for the services provided by the Contractor pursuant to Exhibit A – Amendment #4, Scope of Services.
2. This Agreement is funded by:
   2.1. 100% General Funds.
3. The Contractor agrees to provide the services in Exhibit A – Amendment #4, Scope of Services in compliance with funding requirements in Section 2., above.
4. The Contractor shall submit one (1) invoice to the Department upon Governor and Council approval of this Agreement requesting an advance payment in an amount not to exceed $16,065.00 for peer support services as described in Exhibit A – Amendment #4, Scope of Services. The Contractor shall ensure:
   4.1. The invoice clearly states a request for the advance payment, to be provided at the start of each State Fiscal Year (SFY), in the amount of $16,065.00, referenced in Exhibit A – Amendment #4, Scope of Services,
   4.2. The invoice includes how funds will be utilized toward peer support services in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #3 and Exhibit B-6 Amendment #3.
   4.3. The Contractor shall submit monthly invoices for actual expenditures incurred in accordance with Exhibit A – Amendment #4, Scope of Services, Exhibit B-5 Amendment #3 and Exhibit B-6 Amendment #3 shall be submitted to the Department.
   4.4. The Department shall recoup the advance payment back by deducting 1/3rd of the advanced amount from the December 2020, January 2021, and February 2021 invoices, unless otherwise agreed upon by the Department.
5. Subsequent to the action in Section 4., the Department shall make monthly payments to the Contractor based upon cost reimbursement, as submitted by the Contractor to maintain services and as approved by the Department, of the Department approved budget amounts in Exhibit B-1 Budget Form through Exhibit B-6 Amendment #3 SFY 2022 Budget.
   5.1. In no event shall the total of the initial payment in Section 4. and monthly payments in Section 5. exceed the budget amounts set forth in Section 5.
   5.2. The Department will adjust monthly payments for expenditures set forth in Section 10., below and amounts paid to initiate services in Section 4., above.
6. Payment for services provided in Exhibit A – Amendment #4, Scope of Services shall be made as follows:
   6.1. The Contractor shall submit an invoice on Department supplied forms, by the tenth (10th) working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month.
   6.2. The State shall make payment to the Contractor on actual expenditures, within thirty (30) days of receipt of each Department-approved invoice for Contractor services provided pursuant to this Agreement.

6.3. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to dhhs.dbhinvoicesmhs@dhhs.nh.gov, or invoices may be mailed to:

Financial Manager
Bureau of Mental Health
Department of Health and Human Services
105 Pleasant Street, Main Building
Concord, NH 03301

7. The Contractor shall provide its Revenue and Expense Budget on Budget Form A supplied by the Department, within twenty (20) calendar days of the contract effective date and then twenty (20) days from the beginning of each fiscal year thereafter.
8. The Contractor shall provide quarterly Revenue and Expense Reports on Budget Form A, within thirty (30) calendar days after the end of each fiscal quarter, defined as July 1 to September 30, October 1 to December 31, January 1 to March 31, and April 1 to June 30.
9. The Contractor shall provide supporting documentation, when required by the Department, to support evidence of actual expenditures, in accordance with the Department approved budgets in Section 5.
10. Any expenditure that exceeds the approved budgets in Section 5. shall be solely the financial responsibility of the Contractor.
11. When the contract price limitation is reached the program shall continue to operate at full capacity at no charge to the Department for the duration of the contract period.
12. Funding may not be used to replace funding for a program already funded from another source.
13. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this Contract may be withheld, in whole or in part, in the event of noncompliance with any State or Federal law, rule or regulation applicable to the services provided, or if the said services have not been completed in accordance with the terms and conditions of this Agreement.
14. Notwithstanding Paragraph 18 of the General Provisions of this Agreement P-37, an amendment limited to the budget amounts identified in Section 5., to adjust amounts within the budgets, within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of Governor and Executive Council.
15. The Department reserves the right to recover any program funds not used, in whole or in part, for the purposes stated in this Agreement from the Contractor within one hundred and twenty (120) days of the Completion Date.
16. Contractor will have forty-five (45) days from the end of each State Fiscal Year to submit to the Department final invoices for payment. Any adjustments made to a prior invoice will need to be accompanied by supporting documentation.
17. Property Standards
    17.1. Insurance coverage.
        17.1.1. The Contractor shall, at a minimum, provide the equivalent insurance coverage for real property and equipment acquired or improved with State funds as provided to property owned by the Contractor.

17.2. Real property.

17.2.1. Subject to the obligations and conditions set forth in this section, title to real property acquired or improved in whole or in part with State funds will vest upon acquisition in the Contractor.

17.2.2. Except as otherwise provided by State statutes or in this Agreement, real property will be used for the originally authorized purpose as long as needed for that purpose, during which time the Contractor must not dispose of or encumber its title or other interests without State approval.

17.2.3. When real property is no longer needed for the originally authorized purpose, the Contractor must obtain disposition instructions from the State. The instructions must provide for one of the following alternatives:

17.2.3.1. Retain title after compensating the State. The amount paid to the State will be computed by applying the State's percentage of participation in the cost of the original purchase (and costs of any improvements) to the fair market value of the property. However, in those situations where the Contractor is disposing of real property acquired or improved with State funds and acquiring replacement real property prior to expiration of this Agreement and any amendment thereof, the net proceeds from the disposition may be used as an offset to the cost of the replacement property.

17.2.3.2. Sell the property and compensate the State. The amount due to the State will be calculated by applying the State's percentage of participation in the cost of the original purchase (and cost of any improvements) to the proceeds of the sale after deduction of any actual and reasonable selling and fixing-up expenses. If the State appropriation funding this Agreement or any amendment thereof has not been closed out, the net proceeds from sale may be offset against the original cost of the property. When the Contractor is directed to sell property, sales procedures must be followed that provide for competition to the extent practicable and result in the highest possible return.

17.2.3.3. Transfer title to a third party designated/approved by the State. The Contractor is entitled to be paid an amount calculated by applying the State's percentage of participation in the purchase of the real property (and cost of any improvements) to the current fair market value of the property.

17.3. Equipment.

17.3.1. Equipment means tangible personal property (including information technology systems) purchased in whole or in part with State funds and that has a useful life of more than one (1) year and a per-unit acquisition cost which equals or exceeds $5,000.

17.3.2. Subject to the obligations and conditions set forth in this section, title to equipment acquired with State funds will vest upon acquisition in the Contractor subject to the following conditions:

17.3.2.1. Use the equipment for the authorized purposes of the project during the period of performance, or until the property is no longer needed for the purposes of the project.

17.3.2.2. Not encumber the property without approval of the State.

17.3.2.3. Use and dispose of the property in accordance with Paragraph 18.2.2., Paragraph 18.2.1. and Paragraph 18.3.5.

17.3.3. Use.

17.3.3.1. Equipment must be used by the Contractor in the program or project for which it was acquired as long as needed, whether or not the project or program continues to be supported by State funds, and the Contractor must not encumber the property without prior approval of the State. When no longer needed for the original program or project, the equipment may be used in other activities funded by the State.

17.3.3.2. During the time that equipment is used on the project or program for which it was acquired, the Contractor must also make equipment available for use on other projects or programs currently or previously supported by the State, provided that such use will not interfere with the work on the projects or program for which it was originally acquired. First preference for other use must be given to other programs or projects supported by the State that financed the equipment. Use for non-State-funded programs or projects is also permissible with approval from the State.

17.3.3.3. When acquiring replacement equipment, the Contractor may use the equipment to be replaced as a trade-in or sell the property and use the proceeds to offset the cost of the replacement property.

17.3.4. Management requirements. Procedures for managing equipment (including replacement equipment), whether acquired in whole or in part with State funding, until disposition takes place will, as a minimum, meet the following requirements:

17.3.4.1. Property records must be maintained that include a description of the property, a serial number or other identification number, the source of funding for the property, who holds title, the acquisition date, and cost of the property, percentage of State participation in the project costs for the Agreement under which the property was acquired, the location, use and condition of the property, and any ultimate disposition data including the date of disposal and sale price of the property.

17.3.4.2. A physical inventory of the property must be taken and the results reconciled with the property records at least once every two (2) years.

17.3.4.3. A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft must be investigated.

17.3.4.4. Adequate maintenance procedures must be developed to keep the property in good condition.

17.3.4.5. If the Contractor is authorized or required to sell the property, proper sales procedures must be established to ensure the highest possible return.

17.3.5. Disposition. When original or replacement equipment acquired with State funds is no longer needed for the original project or program or for other activities currently or previously supported by the State, except as otherwise provided by State statutes or in this Agreement, the Contractor must request disposition instructions from the State. Disposition of the equipment will be made as follows:

17.3.5.1. Items of equipment with a current per unit fair market value of $5,000 or less may be retained, sold or otherwise disposed of with no further obligation to the State.

17.3.5.2. Items of equipment with a current per-unit fair-market value in excess of $5,000 may be retained by the Contractor or sold. The State is entitled to an amount calculated by multiplying the current market value or proceeds from sale by the State's percentage of participation in the cost of the original purchase. If the equipment is sold, the State may permit the Contractor to deduct and retain from the State's share $500 or ten (10) percent of the proceeds, whichever is less, for its selling and handling expenses.

17.3.5.3. The Contractor may transfer title to the property to an eligible third party provided that, in such cases, the Contractor must be entitled to compensation for its attributable percentage of the current fair market value of the property.

17.3.5.4. In cases where the Contractor fails to take appropriate disposition actions, the State may direct the Contractor to take disposition actions.

18. Property Trust Relationship and Liens

18.1. Real property, equipment, and intangible property, that are acquired or improved with State funds must be held in trust by the Contractor as trustee for the beneficiaries of the project or program under which the property was acquired or improved. The State may require the Contractor to record liens or other appropriate notices of record to indicate that personal or real property has been acquired or improved with State funds and that use and disposition conditions apply to the property.

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 TRI-CITY CONSUMERS' ACTION CO-OPERATIVE is a New Hampshire Consumer Cooperative registered to transact business in New Hampshire on December 30, 1994. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 222319
Certificate Number: 0004792567

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire,
this 30th day of January A.D. 2020.

William M. Gardner
Secretary of State

CERTIFICATE OF AUTHORITY

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

1. I am a duly elected Clerk/Secretary/Officer of Tri-City Consumers' Action Cooperative________________.
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on May 28, 2020, at which a quorum of the Directors/shareholders were present and voting.
(Date)

VOTED: That _Sharon Reynolds, President of the Board__________ (may list more than one person)
(Name and Title of Contract Signatory)

is duly authorized on behalf of Tri-City Consumers' Action Cooperative_ to enter into contracts or agreements with the State (Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30)** days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 10/8/2020

Diana Bastian
Signature of Elected Officer
Name:
Title:

DocuSign Envelope ID: A18EAE95-4311-4821-953B-1DA80FF4208B

TRI-CON-01 SNEGM

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/7/2020

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

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

PRODUCER
Bernier Insurance Inc.
32 Wakefield St
Rochester, NH 03867

CONTACT NAME:
PHONE (A/C, No, Ext): (603) 335-2345 FAX (A/C, No): (603) 994-4663
E-MAIL ADDRESS: Info@bernierins.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Philadelphia Insurance Company	
INSURER B: AmTrust	
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURED
Tri-City Consumers' Action Co-Operative
55 Summer Street
Rochester, NH 03867

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY; CLAIMS-MADE; X OCCUR; GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY; PRO-JECT; LOC; OTHER:			PHPK2164157	8/2/2020	8/2/2021	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 3,000,000
							PRODUCTS - COMP/OP AGG	$ 3,000,000
								$
A	AUTOMOBILE LIABILITY; X ANY AUTO; OWNED AUTOS ONLY; SCHEDULED AUTOS; HIRED AUTOS ONLY; NON-OWNED AUTOS ONLY			PHPK2164159	8/2/2020	8/2/2021	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							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? (Mandatory in NH) Y/N: N; If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WWC3477200	7/6/2020	7/6/2021	X PER STATUTE; OTH-ER	
							E.L. EACH ACCIDENT	$ 500,000
							E.L. DISEASE - EA EMPLOYEE	$ 500,000
							E.L. DISEASE - POLICY LIMIT	$ 500,000
A	Professional Liabili			PHSD1553902	8/2/2020	8/2/2021		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Non-Profit Organization - Human Services

CERTIFICATE HOLDER

State of New Hampshire
Department of Health & Human Services
129 Pleasant Street
Concord, NH 03301-3852

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
Laura R. Negm

TRI-CITY CONSUMERS' ACTION CO-OPERATIVE

Tri-City Consumers' Action Co-Operative
(Tri-City Co-Op)
55 Summer Street
Rochester NH 03867

Mission Statement

A Peer Support Agency dedicated to providing an alternative, non-medical approach to wellness and recovery. We offer a non-judgmental, non-critical, safe, supportive and educational environment for individuals struggling and recovering with a variety of mental health issues. Staff and members share leadership and decision making. This agency is a place where people practice relational skills, patience, respect and tolerance for diversity. Members learn to see themselves as citizens of the greater community.

as of 10/2011

TRI-CITY CONSUMERS' ACTION CO-OPERATIVE

FINANCIAL STATEMENTS

AND SUPPLEMENTARY INFORMATION

Years Ended June 30, 2019 and 2018

TABLE OF CONTENTS

ROWLEY & ASSOCIATES, P.C.

CERTIFIED PUBLIC ACCOUNTANTS

46 N. STATE STREET
CONCORD, NEW HAMPSHIRE 03301
MEMBER TELEPHONE (603) 228-5400
FAX # (603) 226-3532

MEMBER OF THE PRIVATE COMPANIES PRACTICE SECTION

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITORS' REPORT ON THE FINANCIAL STATEMENTS

To the Board of Directors
Tri-City Consumers' Action Co-Operative
Rochester, New Hampshire

We have audited the accompanying financial statements Tri-City Consumers' Action Co-operative (a New Hampshire nonprofit corporation), which comprises the statements of financial position as of June 30, 2019 and 2018 and the related statements of activities and changes in net assets and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. 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 involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Tri-City Consumers' Action Co-Operative as of June 30, 2019 and 2018 and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Emphasis-of-matter Regarding Going Concern

The accompanying financial statements have been prepared assuming that the Organization will continue as a going concern. As discussed in Note 10 to the financial statements, the Organization's current liabilities exceeded current assets. These conditions raise substantial doubt about its ability to continue as a going concern. Management's plans regarding those matters also are described in Note 10. The financial statements do not include any adjustments that might result from the outcome of this uncertainty. Our opinion is not modified with respect to that matter.

Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary information on page 12 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Rowley & Associates, PC

Rowley & Associates, P.C.
Concord, New Hampshire
August 16, 2019

TRI-CITY CONSUMERS' ACTION CO-OPERATIVE
STATEMENT OF FINANCIAL POSITION
JUNE 30, 2019 AND JUNE 30, 2018
See Independent Auditors' Report

ASSETS	2019	2018
CURRENT ASSETS		
Cash and cash equivalents		
Operating	$ -	$ 4,765
BMHS refundable	22,590	18,221
Total cash and cash equivalents	22,590	22,986
Prepaid expenses	2,212	2,507
Total Current Assets	24,802	25,493
PROPERTY AND EQUIPMENT, at cost		
Land	66,700	66,700
Building	257,710	223,300
Vehicles	53,946	42,500
Furniture and fixtures	11,829	18,116
Total property & equipment	390,185	350,616
Less accumulated depreciation	54,452	63,258
	335,733	287,358
Total Assets	360,535	312,851
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Accounts payable	5,192	2,319
Accrued expenses	10,290	8,410
Mortgage payable, current portion	6,134	5,836
Refundable BMH advance	24,212	18,221
Total Current Liabilities	45,828	34,786
LONG TERM LIABILITIES		
Mortgage payable, less current portion	213,646	219,726
Note payable - State of NH BMH	25,000	25,000
	238,646	244,726
NET ASSETS		
Without Donor Restriction	76,061	33,339
With Donor Restriction	-	-
Total Net Assets	76,061	33,339
Total Liabilities and Net Assets	$ 360,535	$ 312,851

Notes to Financial Statements

TRI-CITY CONSUMERS' ACTION CO-OPERATIVE
STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS
YEARS ENDED JUNE 30, 2019 AND 2018
See Independent Auditors' Report

	2019	2018
REVENUES, GAINS AND OTHER SUPPORT		
Grant income	$ 243,584	$ 184,466
Donations	5,988	2,918
Rent Income	2,200	-
Insurance claim	8,217	-
Loss on disposal of fixed assets	-	814
Interest income	9	-
Total support and revenue	259,998	188,198
PROGRAM EXPENSES		
Wages	$ 95,742	$ 87,779
Payroll taxes	7,305	6,811
Employee benefits	6,715	7,508
Retirement plan expense	1,700	1,700
Office supplies	3,351	2,094
Building supplies	6,083	2,700
Food and other consumable supplies	1,089	668
Telephone and internet	4,206	3,672
Utilities	25,056	20,227
Insurance	9,785	9,811
Repairs and maintenance	17,105	4,641
Audit fees	5,480	5,480
Transportation and travel	4,196	6,772
Member training	2,191	5,229
Depreciation	11,598	10,791
Postage	893	816
Equipment rental	2,400	2,610
Interest expense	11,162	11,554
Miscellaneous	1,219	1,435
Total program expenses	217,276	192,298
Increase (decrease) in net assets	42,722	(4,100)
Net assets, beginning of year	33,339	37,439
Net assets, end of year	$ 76,061	$ 33,339

Notes to Financial Statements

TRI-CITY CONSUMERS' ACTION CO-OPERATIVE
STATEMENTS OF CASH FLOWS
YEARS ENDED JUNE 30, 2019 AND 2018
See Independent Auditors' Report

	2019	2018
CASH FLOWS FROM OPERATING ACTIVITIES		
Increase (decrease) in net assets, current year	$ 42,722	$ (4,100)
Adjustments to reconcile excess of revenue and support over expenses to net assets provided by operating activities		
Depreciation	11,598	10,791
(Increase) decrease in operating assets:		
Accounts receivable	-	60
Prepaid expenses	295	2,406
Increase (decrease) in operating liabilities:		
Accounts payable	2,872	(486)
Accrued expenses	1,880	435
Refundable BMH advance	5,991	71
Net cash provided by operating activities	65,358	9,177
CASH FLOWS FROM INVESTING ACTIVITIES		
Cash paid for purchase of property and equipment	(59,972)	-
CASH FLOWS FROM FINANCING ACTIVITIES		
Net payments on mortgage payable	(5,782)	(5,389)
Net cash (used) by financing activities	(5,782)	(5,389)
Net increase (decrease) in cash and cash equivalents	(396)	3,788
Cash and cash equivalents, Beginning of Year	22,986	19,198
Cash and cash equivalents, End of Year	$ 22,590	$ 22,986

SUPPLEMENTAL SCHEDULE OF CASH FLOW INFORMATION		
Cash paid for interest	$ 11,807	$ 11,554

TRI-CITY CONSUMERS' ACTION CO-OPERATIVE
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 1 NATURE OF ORGANIZATION

Tri-City Consumers' Action Co-Operative (the Co-op) is a nonprofit organization incorporated under the laws of the State of New Hampshire on December 30, 1994. The Co-op's purpose is to provide a peer support center for its members. Members include persons with professional or self-diagnosed mental illness issues. The goals of the Co-op are to enhance a path to recovery, independence and personal wellness by reducing crises due to symptoms of mental wellness issues. The center's focus is on teaching members mental wellness management skills.

The Co-op provides daily workshops in wellness management, individual peer assistance, telephone support, transportation, monthly newsletter and educational events designed to help members increase their mental wellness.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES

The summary of significant accounting policies of the Co-op is presented to assist in understanding the organization's financial statements. The financial statements and notes are representations of the Co-op's management who is responsible for their integrity and objectivity. These accounting policies conform to generally accepted accounting principles and have been consistently applied in the preparation of the financial statements.

Basis of Accounting

The financial statements of Co-op have been prepared on the accrual basis of accounting whereby revenues are recorded when earned and expenses are recorded when the obligation is incurred. The organization reports information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions.

Net assets without Donor Restrictions - These net assets generally result from revenues generated by receiving contributions that have no donor restrictions, providing services, and receiving interest from operating investments, less expenses incurred in providing program-related services raising contributions, and performing administrative functions.

Net assets with Donor Restrictions - These net assets result from gifts of cash and other assets that are received with donor stipulations that limit the use of the donated assets, either temporarily or permanently, until the donor restriction expires, that is until the stipulated time restriction ends or the purpose of the restriction is accomplished, the net assets are restricted.

Support and revenue

The Co-op receives 94% of its income from the State of New Hampshire Department of Health and Human Services, Bureau of Behavioral Health in the form of grants. The remainder of its income is derived from donations, members and interest on saving accounts.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Property and Equipment

Property and equipment are recorded at cost of purchase or, if contributed, at fair market value at the date of donation. If donors stipulate how long the assets must be used, the contributions are recorded as restricted support. In the absence of such stipulation, contributions of property and equipment are recorded as unrestricted support. Depreciation is computed on the Modified Accelerated Cost Recovery System (MACRS) and on the straight-line basis over the useful lives of the assets as listed below. Depreciation expense was $11,598 and $10,791for the years ended June 30, 2019 and 2018, respectively. Expenditures for repairs and maintenance are expensed when incurred.

Buildings & Improvements	15-39 Years
Furniture & Fixtures	7 Years
Office Equipment	5-7 Years
Vehicles	5 Years

Functional allocation of items

The costs of providing various program, management and rental services have been summarized in the statement of activities. Accordingly, certain costs have been allocated among the programs.

Accounts Receivable

Accounts receivable are comprised of amounts due from customers for services provided. The Co-op considers accounts receivable to be fully collectible; accordingly, no allowance for doubtful accounts has been established. If accounts become uncollectible, they will be charged to operations when that determination is made. Collections on accounts previously written off are included in revenue as received.

Use of estimates

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

In-Kind Contributions

In-kind contributions are recorded at fair market value and recognized as revenue in the accounting period in which they are received. Volunteers, mainly board members, donate time to the Co-op's program services. These services are not included in donated materials and services because the value has not been determined.

TRI-CITY CONSUMERS' ACTION CO-OPERATIVE
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Donated Materials and Services

It is the intent of the Co-op to record the value of donated goods and services when there is an objective basis available to measure their value. For the years ended June 30, 2019 and 2018, there were no donated goods or services.

Income taxes

The Organization has been notified by the Internal Revenue Service that it is exempt from federal income tax under Section 501(c) (3) of the Internal Revenue Code. The Organization is further classified as an organization that is not a private foundation under Section 509(a)(3) of the Code. The most significant tax positions of the Organization are its assertion that it is exempt from income taxes and its determination of whether any amounts are subject to unrelated business tax (UBIT). The Organization follows guidance of Accounting Standards Codification (ASC) 740, Accounting for Income Taxes, related to uncertain income taxes, which prescribes a threshold of more likely than not for recognition of tax positions taken or expected to be taken in a tax return. All significant tax positions have been considered by management. It has been determined that it is more likely than not that all tax positions would be sustained upon examination by taxing authorities. Accordingly, no provision for income taxes has been recorded.

Financial Instruments

The carrying value of cash and cash equivalents, prepaid expenses, accounts payable and accrued expenses are stated at carrying cost at June 30, 2019 and 2018, which approximates fair value due to the relatively short maturity of these instruments.

Concentration of Risk

The Organization maintains cash balances in several accounts at local banks. These accounts are insured by the Federal Deposit Insurance Corporation up to $250,000. At various times throughout the year, the Organization may have cash balances at the financial institution that exceeds the insured amount. Management does not believe this concentration of cash results in a high level of risk for the Organization. At June 30, 2019 and 2018 the Organization had no uninsured cash balances.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

New Accounting Pronouncement

During the year ended June 30, 2019, the Organization adopted the requirements of the Financial Accounting Standards Board's Accounting Standards Update No. 2016- 14—Not-for-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities (ASU 2016- 14). This Update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return between not-for-profit entities. A key change required by ASU 2016-14 is the net asset classes used in these financial statements. Amounts previously reported as unrestricted net assets are now reported as net assets without donor restrictions and amounts previously reported as temporarily restricted net assets and permanently restricted net assets are now reported as net assets with donor restrictions.

The accompanying information from the 2018 financial statements has been restated to conform to the 2019 presentation and disclosure requirements of ASU 2016-14.

Reclassifications

Certain financial statement and note information from the prior year financial statements has been reclassified to conform with current year presentation format.

NOTE 3 VACATIONS AND SICK PAY PAYABLE

The Co-op has accrued a liability for future compensated vacation leave time that its employees have earned and which is vested with the employees. Accrued vacation time as of June 30, 2019 and 2018 was $2,355 and $1,111, respectively.

NOTE 4 EMPLOYEE TAX SHELTERED ANNUITY PLAN

The Co-op maintains a Section 403-b tax sheltered annuity plan for eligible employees. For the years ended June 30, 2019 and 2018 respectively, the Co-op contributed $1,700 and $1,700 to this defined contribution plan, respectively.

NOTE 5 REFUNDABLE BMH ADVANCE

Under the terms of the service agreement with the Bureau of Mental Health (BMH), a division of the State of New Hampshire's Department of Health and Human Services, The Co-op was required to segregate amounts received in excess of allowable expenses. Funds set aside in accordance with this requirement amounted to $24,212 and $18,221 for the years ended June 30, 2019 and 2018, respectively.

During the year ended June 30, 2019 BMH changed their policy regarding excess of allowable expenses. The new terms require BMH to adjust future grant distributions according to the net excess or deficit of funds per the organization's audited financial reports.

TRI-CITY CONSUMERS' ACTION CO-OPERATIVE
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 6 SUBSEQUENT EVENTS

Management has evaluated subsequent events through August 16, 2019, the date on which the financial statements were available to be issued, to determine if any are of such significance to require disclosure. It has been determined that no subsequent events matching this criterion occurred during this period.

NOTE 7 LONG TERM DEBT

Long-term debt consisted of the following as of June 30:	2019	2018
Mortgage payable to a bank in monthly installments of $1,412 including principal and interest beginning September 2015. Mortgage has a fixed interest rate of 4.99% for the first five years followed by an adjustable rate for the remainder of the loan. The note is secured by a mortgage on real estate and matures September 2035.	$219,780	$225, 562
Note payable, State of NH BMH with no monthly Installments and no interest accrued. The note is secured by a second mortgage on real estate. The maturity of the note is contingent upon the sale of the real estate.	25,000	25,000
Total	244,780	250, 562
Less current portion	6,134	5, 836
Long-term debt	$238,646	$244, 726

Future maturities of long-term debt at June 30 are as follows:

2020	$ 6,134
2021	6,447
2022	6,776
2023	7,122
2024	7,485
Thereafter	210,816
	$244,780

NOTE 8 BOARD DESIGNATED NET ASSETS

The Organization has no board designated net assets as of June 30, 2019.

TRI-CITY CONSUMERS' ACTION CO-OPERATIVE
NOTES TO FINANCIAL STATEMENTS
Years Ended June 30, 2019 and 2018

NOTE 9 LEASE AGREEMENT – RENTAL INCOME

The Organization has a space available to rent to the public. The Organization receives rent when the opportunity arises. They received $2,200 and $-0- during the years ended June 30, 2019 and 2018, respectively.

NOTE 10 LIQUIDITY & AVAILABILITY OF FINANCIAL ASSETS & CONTINGENCIES

The Organization has a policy to structure its financial assets to be available as its general expenditures, liabilities and other obligations come due. The Organization's primary source of support is grants. That support is held for the purpose of supporting the Organization's budget.

Going Concern

As of June 30, 2019, and 2018 the Organization's current liabilities exceeded current assets.

The deficit was as follows as of June 30:

	2019	2018
Total current assets	$ 24,802	$25,493
Accounts payable	5,192	2,319
Accrued expenses	10,290	8,410
Mortgage payable, current portion	6,134	5,836
Refundable BMHS advance	24,212	18,221
Total current liabilities	45,828	34,786
Total deficit	$ (21,026)	$ (9,293)

Because the cause of the deficiency is an ongoing condition mandated by the Organization's primary funding source there is a likelihood that the deficiency may grow in future years. This creates an uncertainty about the Organization's ability to continue as a going concern.

Management of the Organization has increased a separate funding source in the form of private donations and rental income to fund expenses that are not covered by the BMHS service agreement. The ability of the Organization to continue as a going concern is dependent upon the revenue earned from private donations.

The financial statements do not include any adjustments that might be necessary if the Organization is unable to continue as a going concern.

TRI-CITY CONSUMERS' ACTION CO-OPERATIVE
STATEMENTS OF ACTIVITIES
BY STATE APPROVED BMH FUNDS
YEAR ENDED JUNE 30, 2019
See Independent Auditors' Report

	State Approved BMH Funds	Non-BMH Funds	Total
REVENUES, GAINS AND OTHER SUPPORT			
Grant income, current year	$ 184,375	$ -	$ 184,375
Grant income, special funding	24,200	-	24,200
Grant income, released from reserve	35,009	-	35,009
Donations	-	5,988	5,988
Insurance claim	-	8,217	8,217
Rent income	-	2,200	2,200
Interest income	9	-	9
Total support and revenue	243,593	16,405	259,998
EXPENSES			
Wages	$ 95,742	$ -	$ 95,742
Payroll taxes	7,305	-	7,305
Employee benefits	6,715	-	6,715
Retirement plan expense	1,700	-	1,700
Office supplies	2,993	358	3,351
Building supplies	5,424	659	6,083
Food and other consumable supplies	1,089	-	1,089
Telephone and internet	4,206	-	4,206
Utilities	25,056	-	25,056
Insurance	9,785	-	9,785
Repairs and maintenance	7,548	9,557	17,105
Audit fees	5,480	-	5,480
Transportation and travel	4,176	20	4,196
Member training	2,191	-	2,191
Depreciation	-	11,598	11,598
Postage	893	-	893
Equipment rental	2,400	-	2,400
Interest expense	11,162		11,162
Miscellaneous	1,194	25	1,219
Total expenses	195,059	22,217	217,276
Increase (decrease) in net assets	48,534	(5,812)	42,722
BMH funds allowed for debt reduction	(5,781)	5,781	-
BMH funds allowed for capital purchases	(56,694)	56,694	-
Total BMH funds allowed	(62,475)	62,475	-
Net Assets, Beginning of Year	-	33,339	33,339
Net Assets (Deficit) End of Year	$ (13,941)	$ 90,002	$ 76,061

Notes to Financial Statements

TRI-CITY CONSUMERS' ACTION CO-OPERATIVE

TRI-CONSUMERS' ACTION CO-OPERATIVE
BOARD OF DIRECTORS
May 18, 2020

PRESIDENT
Sharon Reynolds
Joined on: 05-19-2009
Term #: 4
Term length: 3 years
Expiration: 03-07-2021

VICE-PRESIDENT
Kathy Downing
Joined on: 08-25-2008
Term #: 4
Term length: 3 years
Expiration: 04-09-2020

TREASURER
Diana Bastian
Joined on: 2-24-2016
Term #: 2
Term Length: 3 years
Expiration: 02-24-2022

SECRETARY
Barbara Holstein
Joined on 7-25-2018
Term #1
Term Length: 3 years
Expiration: 7-25-2021

Heather Bushby
Joined on 08-26-2015
Term #: 2
Term Length: 3 years
Expiration: 08-26-2021

Denise LaFrance
Joined: March 24, 2019
Term#: 1
Term Length: 3 years
Expiration: 3-24-2022

Elaine Weatherbee
Joined on: 03-07-2012
Term #: 3
Term length: 3 years
Expiration: 03-07-2021

EXECUTIVE DIRECTOR
Martha Jo Hewitt

MARTHA JO HEWITT

Management .... Operations & Planning .... Administration & Support

Professional capable of immediate impact on an organization's issues, with respect to the planning, coordination and implementation of programs and activities in support of organizations' mission, strategic and organizational planning, program/project management, staff development and training, operations and administration.

Summary of Qualifications

Advanced Degree in Business Administration with extensive professional domestic and international experience in administration and planning, performance analysis, program/project management, building partnerships and alliances, staff development and training, business operations and administration. Bottom line administrator with a solid track record for increasing operational efficiency, generating costs savings and improving administrative and operational procedures. Demonstrated ability to coordinate and manage multiple complex projects simultaneously. Designed and implemented policies and procedures with respect to strategic and organizational planning, administrative operations and support programs, program/project management and planning, productivity improvements, operations and administration. Proven ability to interface with all levels of an organization, to lead, to motivate and to get the job done.

Expertise and knowledge in areas such as:

- Management/Operations
- Program/Project Development
- Budget Development/Implementation
- Needs Assessment/Evaluation
- Strategic/Organizational Planning
- Planning & Scheduling
- Training & Education
- Performance Analysis
- Facilitator
- Community Relations
- Staff Development
- Policy Design
- Team Building
- Cost Controls
- Computer Proficient

Selected Accomplishments

Rebuilding a small state funded Peer Support Agency. Developing fundraising and grant opportunities, establishing and maintaining relationships with like agencies, creating new programs, maintaining a leased facility, working directly with the members; while working within the framework of a state contract. Collaborating with organizations to provide needed services for members of the agency. Working with a board to establish the vision and goals of the agency and then implementing those goals.

Created and Balanced an organizational budget of between $750,000.00 and $780,000.00. Researched, submitted and received grant moneys from individuals and corporations. Initiated and directly involved with successful fundraising events. I like to think outside the box.

Developed and ***Implemented*** a new training program from "scratch" for a team-based organization of over 50 employees, covering 17 different job classifications in 14 locations. Instituted the administrative function of the training effort.

Professional Experience

TRI-CITY CONSUMERS' ACTION CO-OPERATIVE, Rochester NH 2012 -

Executive Director

- Manage the business operations of a state funded non-profit organization. Responsible for the over-all direction of the administrative, human resource, financial, development and program activities.
- Providing confidential services for members in crisis, addressing problematic member behavior and determining the proper course of action that complies with policies and procedures.
- Responsible for 4 full/part time employees and interns.
- Overseas a yearly budget that complies with the NH Bureau of Behavioral Health federal block grant and other funding source guidelines.
- Attend monthly board meetings and implement the vision and goals established by the board.

COCHECO VALLEY HUMANE SOCIETY, Dover NH 2007 – 2011

Executive Director

- Manage the business operations of a private non-profit organization. Responsible for the over-all direction of the administrative, human resource, financial, development and program activities.
- Restructuring the organization in preparation for a capital campaign and a move to a new state of the art facility.
- Responsible for 30 full and part time employees and over 250 volunteers
- Work with the Board of Directors in defining the direction and vision of the organization.

AMERICAN RED CROSS – GREAT BAY CHAPTER, Newington, NH 2005-2006

Director of Health and Safety

- Supervised the operational and administrative efforts of over 250 volunteer Instructors.
- Responsible and accountable for those activities conducted within the chapter's jurisdiction in supporting 39 communities.
- Created innovated techniques to streamline daily operations. Responded to all health and safety queries in accordance with chapter and national policies and procedures.

THE CALUMET GROUP, Seoul, South Korea 2002-2004

Project Director (2003-2004)

- Managed a staff of 50 employees and a $1.5 million budget. Responsible for the management of an overseas Department of Defense Umbrella Contract for the Calumet Group.
- Established and maintained strong lines of communication with the President of the company, the home office in the United States, and 14 offices throughout the Korean Peninsula.
- Managed a highly successful effort to develop and align the capabilities of this Department of Defense contractor providing social service support to soldiers and their families and ensuing compliance with DOD guidelines and regulations.

Project Trainer (2002-2003)

- Developed, implemented and managed The Right Start Training Program. This was an internal training curriculum of The Calumet Group.

- Monitored the training needs and future goals of over 50 employees, covering 17 different job classifications in 14 locations.
- Processed all new employees on the policies and procedures of the company, as well as the job responsibilities, based on the government contract.

AMERICAN RED CROSS (ARC) 1994-2002

Service Center Coordinator – Central LA Chapter, Ft. Polk, LA (2000-2002)

- Managed a staff of 15 volunteers and was responsible for providing American Red Cross services to both military and civilian communities as an extension of the Central Louisiana Chapter.
- Organized and trained volunteers, to include youth, to be members of Disaster Action Teams, able to respond to single family fires and natural/manmade disasters.
- Promulgated the American Red Cross image by spearheading successful fund-raising activities yielding monies to maintain critical services throughout the community.

Previous positions with American Red Cross included Associate, Emergency Field Operations ARC Headquarters, Station Chairman, ARC Ft. Carson, CO, Director, Human Resources & Education and Director of Volunteer Services at the American Red Cross Alexandria VA Chapter.

Education & Training

Master of Science in Business Administration, Boston University
Bachelor of Science, Pre-Veterinarian Medicine, University of New Hampshire
Associate of Arts, Liberal Arts, Colby Sawyer College

Tri-City Consumers' Action Co-Operative: Intentional Peer Support, Wellness, Recovery Action Plan (WRAP), Defensive Driving, Sexual Harassment, Recovery Coach and Trainer, Crisis Prevention and Intervention Training, WarmLine Training, Co-Supervision, Chairperson of NH Peer Voice, PSA Executive Directors and NH mental Health Planning and Advisory Council.
Cocheco Valley Humane Society: Coaching Skills for Managers and Supervisors, Small Animal Handling training, Leadership Seacoast, Animal Sheltering Workshop and Drill
American Red Cross: Instructor Trainer – Health and Safety courses, Instructor – Disaster Services,
Personnel Practices for Supervisors, Armed Forces Emergency Services courses, Paid and Volunteer Staff Relationships, Health and Safety Administrator Training, previous DAT member, ERV qualified and NIMS training
The Calumet Group: Assertiveness Training, Customer Service, EEO/Prevention of Sexual Harassment, Problem Solving, Stress Management.

Additional Training:
CERT Trained
Notary Public

CONTRACTOR NAME

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Martha Jo Hewitt	Executive Director	$40,000.00	100%	$40,000.00

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION FOR BEHAVIORAL HEALTH

Lori A. Shibinette
Commissioner

Katja S. Fox
Director

129 PLEASANT STREET, CONCORD, NH 03301
603-271-9544 1-800-852-3345 Ext. 9544
Fax: 603-271-4332 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

June 9, 2020

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

REQUESTED ACTION

1) Authorize the Department of Health and Human Services, Division for Behavioral Health, to amend existing agreements with the vendors listed below to continue providing peer support services to adults with mental illness by exercising renewal options by increasing the total price limitation by $5,368,958 from $10,940,316 to $16,309,274 and by extending the completion dates from June 30, 2020 to June 30, 2022, effective upon Governor and Council approval. 55.1% Federal Funds, 44.9% General Funds.

2) Further authorize a total advance payment of $221,627, for the vendors listed below in accordance with the terms of the contracts, effective upon Governor and Council approval. 55.1% Federal Funds and 44.9% General Funds.

The agreements were approved by Governor and Council as Indicated in the table below.

Vendor Name	Vendor Number	Location	Contract Amount	Increase/ (Decrease)	Modified Contract Amount	G&C Approval
Connections Peer Support Center	#157070-B001	Portsmouth	$977,544	$492,406	$1,469,950	O:06/29/16 #23 A1: 06/20/18#33B A2: 06/19/19 #28
H.E.A.R.T.S Peer Support Center Region IV	#209287-B001	Nashua	$1,533,325	$780,432	$2,313,757	O:06/29/16 #23 A1: 06/20/18#33B A2: 06/19/19 #28
Lakes Region Consumer Advisory Board	#157060-B001	Laconia	$1,355,548	$681,072	$2,036,620	O:06/29/16 #23 A1: 06/20/18#33B A2: 06/19/19 #28
Monadnock Area Peer Support Agency	#157973-B001	Keene	$1,067,447	$556,460	$1,623,907	O:06/29/16 #23 A1: 06/20/18#33B A2: 06/19/19 #28

On the Road to Recovery, Inc.	#158839-B001	Manchester	$1,739,123	$827,348	$2,566,471	O:06/29/16 #23 A1: 06/20/18#33B A2: 06/19/19 #28
The Alternative Life Center	#168081-B001	Conway	$2,000,576	$862,946	$2,863,522	O:06/29/16 #23 A1: 06/21/17 #38 A2: 06/20/2018 #33B A3: 06/19/19 #28
The Stepping Stone Drop-In Center Association	#157697-B001	Claremont	$1,520,154	$776,488	$2,296,642	O:06/29/16 #23 A1: 06/20/18 #33B A2: 06/19/2018 #28
Tri-City Consumers' Action Co-operative	#157797-B001	Rochester	$746,599	$391,806	$1,138,405	O:06/29/16 #23 A1: 06/20/18#33B A2: 06/19/19 #28
		Totals	$10,940,316	$5,368,958	$16,309,274	

Funds are available in the following accounts for State Fiscal Year 2021 and anticipated to be available for State Fiscal Year 2022, upon the availability and continued appropriation of funds in the future operating budget, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office if needed and justified.

05-95-92-920010-7143 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, MENTAL HEALTH BLOCK GRANT
05-95-92-920010-7011 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, PEER SUPPORT SERVICES
05-95-92-922010-4118 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, PEER SUPPORT SERVICES
05-95-92-922010-4120 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, MENTAL HEALTH BLOCK GRANT
05-95-91-910010-5710 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: GLENCLIFF HOME FOR ELDER, GLENCLIFF HOME, PROFESSIONAL CARE

See Attached Fiscal Details

EXPLANATION

The purpose of this request is to continue providing peer support services for adults who are eighteen (18) years of age and older who self-identify as a recipient, a former recipient, or are at significant risk of becoming a recipient of mental health services.

Approximately 2,200 individuals will be served from July 1, 2020 through June 30, 2022.

The original agreement, included language in Exhibit C-1, Revisions to General Provision, Section 3 that allows the Department to renew the contract for up to four (4) years, subject to the continued availability of funding, satisfactory performance of service, parties' written authorization and approval from the Governor and Executive Council. The Department is in agreement with renewing services for two (2) of the remaining two (2) years at this time.

The contractors provide services that enhance personal wellness, independence, and recovery by increasing personal awareness, and symptom management of mental illness. Peer support services include supportive interactions and shared experiences using an Intentional Peer Support model that fosters recovery from mental illness and self-advocacy skills through personal connection and building relationships. The contractors provided peer services to 2,161 adults with mental illness in State Fiscal Year 2019 as evidenced by quarterly data reports. The Department conducted on-site reviews in State Fiscal Year 2019 of all contractors As evidenced in the reviews, programming was delivered using principles and practice of Intentional Peer Support and related peer disciplines.

All contractors met expectations as outlined in NH Administrative Rule He-M 402 and developed quality improvement plans with the Department to address areas needing improvement. The contractors have taken advantage of available technical assistance and trainings to maintain well-rounded, professional, and sustainable peer-run programs.

Peer support agencies provide individuals with a comprehensive array of in-house and community based discussion groups, practice groups, educational events, social outings, community outreach, and community support. Peer support agencies provide Intentional Peer Support services through face-to face meetings and telephone calls. Telephone-based peer support services, known as Warmline Services, are available statewide to assist individuals who may experience mental health crises outside of regular business hours.

Three (3) of the agencies, H.E.A.R.T.S. Peer Support Agency, Monadnock Area Peer Support, and The Stepping Stone Drop-In Center Association, also provide respite beds for individuals who have a mental illness, are experiencing or at risk of a mental health crisis, and need a therapeutic respite from their current living situation. Respite beds provide twenty-four (24) hour seven (7) days a week access to peer support services and are available for up to a maximum of seven (7) days. Peer Support Agencies and peer respite services are also in accordance with the recommendations 10 Year Mental Health Plan and Community Mental Health Agreement.

Each contractor's effectiveness to deliver services will be measured through programmatic audits, reviews, and ongoing financial audits relative to areas that include, but are not limited to:

- Monthly financial ratios, expenses, and status;
- Outreach activities;
- Educational events;
- Program evaluations and surveys;
- Service deliverable expectations;
- Numbers served on daily basis, number of current members, and program utilization totals;
- Ongoing steps to increase membership; and
- Number of services provided beyond the immediate crisis stabilization, including referrals.

Should the Governor and Council not authorize this request, individuals with mental health conditions, statewide, may not have access to the valuable support they rely on to manage the symptoms of their mental illness. Should these peer support services become unavailable, some individuals may require a higher level of service, including hospitalization, which is significantly more costly than peer support services.

Area served: Statewide

Source of Funds: 55.1% Federal Funds, CFDA #93.958 / FAIN SM010035-19 and 44.9% General Funds.

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

Respectfully submitted,

for

Lori A. Shibinette
Commissioner

05-95-92-920010-7143 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, MENTAL HEALTH BLOCK GRANT

100% Federal Funds

Activity Code: 92207143

The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 290,154.00	$ -	$ 290,154.00
2018	Contracts for Prog Svs	102-500731	$ 290,154.00	$ -	$ 290,154.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 580,308.00	$ -	$ 580,308.00

The Stepping Stone Drop-In Center Association					
Vendor # 157967					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 209,790.00	$ -	$ 209,790.00
2018	Contracts for Prog Svs	102-500731	$ 209,790.00	$ -	$ 209,790.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 419,580.00	$ -	$ 419,580.00

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 188,183.00	$ -	$ 188,183.00
2018	Contracts for Prog Svs	102-500731	$ 188,183.00	$ -	$ 188,183.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 376,366.00	$ -	$ 376,366.00

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 146,449.00	$ -	$ 146,449.00
2018	Contracts for Prog Svs	102-500731	$ 146,449.00	$ -	$ 146,449.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 292,898.00	$ -	$ 292,898.00

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 211,860.00	$ -	$ 211,860.00
2018	Contracts for Prog Svs	102-500731	$ 211,860.00	$ -	$ 211,860.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 423,720.00	$ -	$ 423,720.00

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 245,562.00	$ -	$ 245,562.00
2018	Contracts for Prog Svs	102-500731	$ 245,562.00	$ -	$ 245,562.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 491,124.00	$ -	$ 491,124.00

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 135,751.00	$ -	$ 135,751.00
2018	Contracts for Prog Svs	102-500731	$ 135,751.00	$ -	$ 135,751.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 271,502.00	$ -	$ 271,502.00

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 102,362.00	$ -	$ 102,362.00
2018	Contracts for Prog Svs	102-500731	$ 102,362.00	$ -	$ 102,362.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 204,724.00	$ -	$ 204,724.00

SUB TOTAL			$ 3,060,222.00	$ -	$ 3,060,222.00

05-95-92-920010-7011 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, PEER SUPPORT SERVICES					
100% General Funds					
Activity Code: 92207011					
The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 233,122.00	$ -	$ 233,122.00
2018	Contracts for Prog Svs	102-500731	$ 233,122.00	$ -	$ 233,122.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 466,244.00	$ -	$ 466,244.00

The Stepping Stone Drop-In Center Association					
Vendor # 157967					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 168,555.00	$ -	$ 168,555.00
2018	Contracts for Prog Svs	102-500731	$ 168,555.00	$ -	$ 168,555.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 337,110.00	$ -	$ 337,110.00

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 151,196.00	$ -	$ 151,196.00
2018	Contracts for Prog Svs	102-500731	$ 151,196.00	$ -	$ 151,196.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 302,392.00	$ -	$ 302,392.00

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 117,665.00	$ -	$ 117,665.00
2018	Contracts for Prog Svs	102-500731	$ 117,665.00	$ -	$ 117,665.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 235,330.00	$ -	$ 235,330.00

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 170,218.00	$ -	$ 170,218.00
2018	Contracts for Prog Svs	102-500731	$ 170,218.00	$ -	$ 170,218.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 340,436.00	$ -	$ 340,436.00

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 197,296.00	$ -	$ 197,296.00
2018	Contracts for Prog Svs	102-500731	$ 197,296.00	$ -	$ 197,296.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 394,592.00	$ -	$ 394,592.00

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 109,071.00	$ -	$ 109,071.00
2018	Contracts for Prog Svs	102-500731	$ 109,071.00	$ -	$ 109,071.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 218,142.00	$ -	$ 218,142.00

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 82,245.00	$ -	$ 82,245.00
2018	Contracts for Prog Svs	102-500731	$ 82,245.00	$ -	$ 82,245.00
2019	Contracts for Prog Svs.	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -

2021	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2022	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 164,490.00	$ -	$ 164,490.00

SUB TOTAL			$ 2,458,736.00	$ -	$ 2,458,736.00

05-95-92-922010-4118 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, PEER SUPPORT SERVICES

100% General Funds

Activity Code: 92204118

The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 233,122.00	$ -	$ 233,122.00
2020	Contracts for Prog Svs	102-500731	$ 190,832.00	$ 6,250.00	$ 197,082.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 190,832.00	$ 190,832.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 190,832.00	$ 190,832.00
Subtotal			$ 423,954.00	$ 387,914.00	$ 811,868.00

The Stepping Stone Drop-In Center Association					
Vendor # 157987					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 168,555.00	$ -	$ 168,555.00
2020	Contracts for Prog Svs	102-500731	$ 171,573.00	$ 6,250.00	$ 177,823.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 171,573.00	$ 171,573.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 171,573.00	$ 171,573.00
Subtotal			$ 340,128.00	$ 349,396.00	$ 689,524.00

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 151,196.00	$ -	$ 151,196.00
2020	Contracts for Prog Svs	102-500731	$ 150,319.00	$ 6,250.00	$ 156,569.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 150,319.00	$ 150,319.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 150,319.00	$ 150,319.00
Subtotal			$ 301,515.00	$ 306,888.00	$ 608,403.00

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 117,665.00	$ -	$ 117,665.00
2020	Contracts for Prog Svs	102-500731	$ 122,561.00	$ 6,250.00	$ 128,811.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 122,561.00	$ 122,561.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 122,561.00	$ 122,561.00
Subtotal			$ 240,226.00	$ 251,372.00	$ 491,598.00

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 170,218.00	$ -	$ 170,218.00
2020	Contracts for Prog Svs	102-500731	$ 194,727.00	$ 6,250.00	$ 200,977.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 194,727.00	$ 194,727.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 194,727.00	$ 194,727.00

Subtotal			$ 364,945.00	$ 395,704.00	$ 760,649.00

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 197,296.00	$ -	$ 197,296.00
2020	Contracts for Prog Svs	102-500731	$ 182,903.00	$ 6,250.00	$ 189,153.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 182,903.00	$ 182,903.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 182,903.00	$ 182,903.00
Subtotal			$ 380,199.00	$ 372,056.00	$ 752,255.00

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 109,071.00	$ -	$ 109,071.00
2020	Contracts for Prog Svs	102-500731	$ 108,294.00	$ 6,250.00	$ 114,544.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 108,294.00	$ 108,294.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 108,294.00	$ 108,294.00
Subtotal			$ 217,365.00	$ 222,838.00	$ 440,203.00

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 82,245.00	$ -	$ 82,245.00
2020	Contracts for Prog Svs	102-500731	$ 58,159.00	$ 6,250.00	$ 64,409.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 58,159.00	$ 58,159.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 58,159.00	$ 58,159.00
Subtotal			$ 140,404.00	$ 122,568.00	$ 262,972.00

SUB TOTAL			$ 2,408,736.00	$ 2,408,736.00	$ 4,817,472.00

05-95-92-922010-4120 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, MENTAL HEALTH BLOCK GRANT

100% Federal Funds

Activity Code: 92204120

The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 290,154.00	$ -	$ 290,154.00
2020	Contracts for Prog Svs	102-500731	$ 237,516.00	$ -	$ 237,516.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 237,516.00	$ 237,516.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 237,516.00	$ 237,516.00
Subtotal			$ 527,670.00	$ 475,032.00	$ 1,002,702.00

The Stepping Stone Drop-In Center Association					
Vendor # 157967					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 209,790.00	$ -	$ 209,790.00
2020	Contracts for Prog Svs	102-500731	$ 213,546.00	$ -	$ 213,546.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 213,546.00	$ 213,546.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 213,546.00	$ 213,546.00
Subtotal			$ 423,336.00	$ 427,092.00	$ 850,428.00

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 188,183.00	$ -	$ 188,183.00
2020	Contracts for Prog Svs	102-500731	$ 187,092.00	$ -	$ 187,092.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 187,092.00	$ 187,092.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 187,092.00	$ 187,092.00
Subtotal			$ 375,275.00	$ 374,184.00	$ 749,459.00

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 146,449.00	$ -	$ 146,449.00
2020	Contracts for Prog Svs	102-500731	$ 152,544.00	$ -	$ 152,544.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 152,544.00	$ 152,544.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 152,544.00	$ 152,544.00
Subtotal			$ 298,993.00	$ 305,088.00	$ 604,081.00

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 211,860.00	$ -	$ 211,860.00
2020	Contracts for Prog Svs	102-500731	$ 192,364.00	$ -	$ 192,364.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 192,364.00	$ 192,364.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 192,364.00	$ 192,364.00
Subtotal			$ 404,224.00	$ 384,728.00	$ 788,952.00

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 245,562.00	$ -	$ 245,562.00
2020	Contracts for Prog Svs	102-500731	$ 227,646.00	$ -	$ 227,646.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 227,646.00	$ 227,646.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 227,646.00	$ 227,646.00
Subtotal			$ 473,208.00	$ 455,292.00	$ 928,500.00

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 135,751.00	$ -	$ 135,751.00
2020	Contracts for Prog Svs	102-500731	$ 134,784.00	$ -	$ 134,784.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 134,784.00	$ 134,784.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 134,784.00	$ 134,784.00
Subtotal			$ 270,535.00	$ 269,568.00	$ 540,103.00

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 102,362.00	$ -	$ 102,362.00

2020	Contracts for Prog Svs	102-500731	$ 134,619.00	$ -	$ 134,619.00
2021	Contracts for Prog Svs	102-500731	$ -	$ 134,619.00	$ 134,619.00
2022	Contracts for Prog Svs	102-500731	$ -	$ 134,619.00	$ 134,619.00
Subtotal			$ 236,981.00	$ 269,238.00	$ 506,219.00
SUB TOTAL			$ 3,010,222.00	$ 2,960,222.00	$ 5,970,444.00

05-95-91-910010-5710 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: GLENCLIFF HOME FOR ELDER, GLENCLIFF HOME, PROFESSIONAL CARE

80% Other Funds/ 20% General Funds

Activity Code: 91000000

The Altenative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2018	Consultants	046-500464	$ 1,200.00	$ -	$ 1,200.00
2019	Consultants	046-500464	$ 1,200.00	$ -	$ 1,200.00
2020	Consultants	046-500464	$ -	$ -	$ -
Subtotal			$ 2,400.00	$ -	$ 2,400.00
SUB TOTAL			$ 2,400.00	$ -	$ 2,400.00
TOTAL			$ 10,940,316.00	$ 5,368,958.00	$ 16,309,274.00

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STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION FOR BEHAVIORAL HEALTH

Jeffrey A. Meyers
Commissioner

Katja S. Fox
Director

129 PLEASANT STREET, CONCORD, NH 03301
603-271-9544 1-800-852-3345 Ext. 9544
Fax: 603-271-4332 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

May 23, 2019

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

REQUESTED ACTION

1) Authorize the Department of Health and Human Services, Division for Behavioral Health, to exercise renewal options and amend existing agreements with the vendors listed below to continue providing peer support services to adults with mental illness by increasing the total price limitation by $2,659,479 from $8,280,837 to $10,940,316 and by extending the completion date from June 30, 2019 to June 30, 2020, effective July 1, 2019 or upon Governor and Executive Council approval whichever is later. 55.45% Federal Funds, 44.55% General Funds.

Vendor Name	Vendor Number	Location	Contract Amount	Increase/ (Decrease)	Modified Contract Amount	G&C Approval
Connections Peer Support Center	#157070-B001	Portsmouth	$734,466	$243,078	$977,544	O:06/29/16 #23 A1: 6/20/18#33B
H.E.A.R.T.S Peer Support Center	#209287-B001	Nashua	$1,146,234	$387,091	$1,533,325	O:06/29/16 #23 A1: 6/20/18#33B
Lakes Region Consumer Advisory Board	#157060-B001	Laconia	$1,018,137	$337,411	$1,355,548	O:06/29/16 #23 A1: 6/20/18#33B
Monadnock Area Peer Support Agency	#157973-B001	Keene	$792,342	$275,105	$1,067,447	O:06/29/16 #23 A1: 6/20/18#33B
On the Road to Recovery, Inc.	#158839-B001	Manchester	$1,328,574	$410,549	$1,739,123	O:06/29/16 #23 A1: 6/20/18#33B
The Stepping Stone Drop-In Center, Association	#157697-B001	Claremont	$1,135,035	$385,119	$1,520,154	O:06/29/16 #23 A1: 6/20/18#33B
The Alternative Life Center	#168081-B001	Conway	$1,572,228	$428,348	$2,000,576	O:06/29/16 #23 A1:06/21/17 #38 A2: 6/20/18#33B
Tri-City Consumers' Action Co-operative	#157797-B001	Rochester	$553,821	$192,778	$746,599	O:06/29/16 #23 A1: 6/20/18#33B
		Total	$8,280,837	$2,659,479	$10,940,316	

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 151,196.00	$ -	$ 151,196.00
2018	Contracts for Prog Svs	102-500731	$ 151,196.00	$ -	$ 151,196.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 302,392.00	$ -	$ 302,392.00

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 117,665.00	$ -	$ 117,665.00
2018	Contracts for Prog Svs	102-500731	$ 117,665.00	$ -	$ 117,665.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 235,330.00	$ -	$ 235,330.00

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 170,218.00	$ -	$ 170,218.00
2018	Contracts for Prog Svs	102-500731	$ 170,218.00	$ -	$ 170,218.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 340,436.00	$ -	$ 340,436.00

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 197,296.00	$ -	$ 197,296.00
2018	Contracts for Prog Svs	102-500731	$ 197,296.00	$ -	$ 197,296.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 394,592.00	$ -	$ 394,592.00

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 109,071.00	$ -	$ 109,071.00
2018	Contracts for Prog Svs	102-500731	$ 109,071.00	$ -	$ 109,071.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 218,142.00	$ -	$ 218,142.00

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ 82,245.00	$ -	$ 82,245.00
2018	Contracts for Prog Svs	102-500731	$ 82,245.00	$ -	$ 82,245.00
2019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2020	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 164,490.00	$ -	$ 164,490.00

SUB TOTAL			$ 2,458,736.00	$ -	$ 2,458,736.00

05-95-92-922010-4118 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, PEER SUPPORT SERVICES					
100% General Funds					
Activity Code: 92204118					
The Alternative Life Center					

Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 233,122.00	$ -	$ 233,122.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 190,832.00	$ 190,832.00
Subtotal			$ 233,122.00	$ 190,832.00	$ 423,954.00

The Stepping Stone Drop-in Center Association					
Vendor # 157967					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 168,555.00	$ -	$ 168,555.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 171,573.00	$ 171,573.00
Subtotal			$ 168,555.00	$ 171,573.00	$ 340,128.00

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 151,196.00	$ -	$ 151,196.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 150,319.00	$ 150,319.00
Subtotal			$ 151,196.00	$ 150,319.00	$ 301,515.00

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 117,665.00	$ -	$ 117,665.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 122,561.00	$ 122,561.00
Subtotal			$ 117,665.00	$ 122,561.00	$ 240,226.00

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 170,218.00	$ -	$ 170,218.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 194,727.00	$ 194,727.00
Subtotal			$ 170,218.00	$ 194,727.00	$ 364,945.00

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 197,296.00	$ -	$ 197,296.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 182,903.00	$ 182,903.00
Subtotal			$ 197,296.00	$ 182,903.00	$ 380,199.00

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 109,071.00	$ -	$ 109,071.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 108,294.00	$ 108,294.00
Subtotal			$ 109,071.00	$ 108,294.00	$ 217,365.00

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 82,245.00	$ -	$ 82,245.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 58,159.00	$ 58,159.00
Subtotal			$ 82,245.00	$ 58,159.00	$ 140,404.00

SUB TOTAL			$ 1,229,368.00	$ 1,179,368.00	$ 2,408,736.00

05-95-92-922010-4120 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, MENTAL HEALTH BLOCK GRANT

100% Federal Funds.

Activity Code: 92204120

The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 290,154.00	$ -	$ 290,154.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 237,516.00	$ 237,516.00
Subtotal			$ 290,154.00	$ 237,516.00	$ 527,670.00

The Stepping Stone Drop-In Center Association					
Vendor # 157967					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 209,790.00	$ -	$ 209,790.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 213,546.00	$ 213,546.00
Subtotal			$ 209,790.00	$ 213,546.00	$ 423,336.00

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 188,183.00	$ -	$ 188,183.00
2020	Contracts for Prog Svs	102-500731		$ 187,092.00	$ 187,092.00
Subtotal			$ 188,183.00	$ 187,092.00	$ 375,275.00

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 146,449.00	$ -	$ 146,449.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 152,544.00	$ 152,544.00
Subtotal			$ 146,449.00	$ 152,544.00	$ 298,993.00

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 211,860.00	$ -	$ 211,860.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 192,364.00	$ 192,364.00
Subtotal			$ 211,860.00	$ 192,364.00	$ 404,224.00

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 245,562.00	$ -	$ 245,562.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 227,646.00	$ 227,646.00
Subtotal			$ 245,562.00	$ 227,646.00	$ 473,208.00

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 135,751.00	$ -	$ 135,751.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 134,784.00	$ 134,784.00
Subtotal			$ 135,751.00	$ 134,784.00	$ 270,535.00

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2019	Contracts for Prog Svs	102-500731	$ 102,362.00	$ -	$ 102,362.00
2020	Contracts for Prog Svs	102-500731	$ -	$ 134,619.00	$ 134,619.00
Subtotal			$ 102,362.00	$ 134,619.00	$ 236,981.00

SUB TOTAL			$ 1,530,111.00	$ 1,480,111.00	$ 3,010,222.00

05-95-91-910010-5710 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: GLENCLIFF HOME FOR ELDER, GLENCLIFF HOME, PROFESSIONAL CARE					
80% Other Funds/ 20% General Funds					
Activity Code: 91000000					
The Altenative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2018	Consultants	046-500464	$ 1,200.00	$ -	$ 1,200.00
2019	Consultants	046-500464	$ 1,200.00	$ -	$ 1,200.00
2020	Consultants	046-500464	$ -	$ -	$ -
Subtotal			$ 2,400.00	$ -	$ 2,400.00

SUB TOTAL			$ 2,400.00	$ -	$ 2,400.00

TOTAL			$ 8,280,837.00	$ 2,659,479.00	$ 10,940,316.00

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF BEHAVIORAL HEALTH

Jeffrey A. Meyers
Commissioner

Katja S. Fox
Director

129 PLEASANT STREET, CONCORD, NH 03301
603-271-9422 1-800-852-3345 Ext. 9422
Fax: 603-271-8431 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

May 16, 2018

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

REQUESTED ACTION

1) Authorize the Department of Health and Human Services, Division of Behavioral Health, Bureau of Mental Health Services, to exercise renewal options to agreements with the vendors listed below to continue providing peer support services to adults with mental illness, by increasing the price limitation by $2,760,679 from $5,520,158 to $8,280,837, and by extending the contract completion dates from June 30, 2018 to June 30, 2019, effective upon approval by the Governor and Executive Council. Funding is 55.45%Federal, 44.55% General Funds

2) Upon approval of Request #1, authorize the Department to process advance payments of up to a maximum of one-twelfth (1/12th) of each contract price limitation for State Fiscal Year 2019.

The original contract was approved by the Governor and Executive Council on June 29, 2016 (Item #23), and amended on June 21, 2017 (Item #38).

Vendor	Location	Current Amount	Increase Amount	Revised Amount
Connection Peer Support Center	Portsmouth, NH	$489,644	$244,822	$734,466
H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI	Nashua, NH	$764,156	$382,078	$1,146,234
Lakes Region Consumer Advisory Board	Laconia, NH	$678,758	$339,379	$1,018,137
Monadnock Area Peer Support Agency	Keene, NH	$528,228	$264,114	$792,342
On the Road to Recovery, Inc.	Manchester, NH	$885,716	$442,858	$1,328,574
The Stepping Stone Drop-In Center Association	Claremont, NH	$756,690	$378,345	$1,135,035
The Alternative Life Center	Conway, NH	$1,047,752	$524,476	$1,572,228
Tri-City Consumers' Action Co-operative	Rochester, NH	$369,214	$184,607	$553,821
	Totals	$5,520,158	$2,760,679	$8,280,837

Funds are available in State Fiscal Year 2019 with authority to adjust encumbrances between State Fiscal Years through the Budget Office without further approval from the Governor and Executive Council, if needed and justified.

Please see attached financial detail.

EXPLANATION

The purpose of this request is for continuation of peer support services to adults with long-term and/or severe mental illness at Peer Support Agencies. The Contractors provide services that enhance personal wellness, independence, and recovery by reducing crises due to symptoms of mental illness. Peer support services include supportive interactions and shared experiences using an Intentional Peer Support model that fosters recovery from mental illness and self-advocacy skills.

Peer support services teach wellness self-management, and provide outreach through face-to-face meetings, or telephone calls, to provide continued support to individuals who may not be able to attend face-to-face peer support service meetings. Telephone peer support services are available statewide to assist individuals who may experience mental health crises during hours when the contractors' agencies are closed for business. These eight (8) Peer Support Agency contractors expect to serve a total of 3,990 individuals through these contract amendments.

Contractors produce a monthly newsletter to inform members, participants, community mental health centers, community organizations, and the public about services and ongoing activities at the agency. Activities include skills trainings and educational events for members to learn about topics such as symptom management and how to navigate services, local education and community outreach efforts around stigma, wellness, and recovery, and meetings with other human service providers to facilitate appropriate referrals. The newsletters and documentation of monthly trainings, educational meetings, and community outreach events are submitted on a monthly basis to the Department.

The DHHS conducts a review of all contracted Peer Support Agency policies and procedures to ensure they are all up to date, on file, and meet expectations of the contract. Ongoing tracking and oversight is maintained by the Department. Contractors produce quarterly statistical data reports that are submitted to the Department based on contract deliverables. Monthly reports are submitted that include a list of trained staff and trainings they have completed, service utilization data, program activity data, revenue and expense by cost and program category, a Capital Expenditure Report, an Interim Balance Sheet, a Profit and Loss statement, and all Board Meeting Minutes. If items are not being met a corrective action plan is required. The Contractor also prepares an annual report for presentation to the Department and Mental Health Planning and Advisory Council. Each contractor undergoes a bi-annual quality improvement review and participates in ongoing monitoring and reporting based on these reviews. Each contractor conducts member satisfaction surveys as requested by the department and at any time the contractor is found out of compliance, the agency has 30 days to submit a corrective action plan to ensure compliance is regained.

Approval of the advance payment for each of the eight (8) contractors will allow them to continue to cover operating expenses. If approved, the total advance payment amount will not exceed $331,281. The funds will be used to cover day to day costs that include payroll and occupancy. The Department considers advance payment to these vendors as a necessary method to ensure ongoing services for the clients that they serve. The Department is in close communication with these agencies and monitors their financial status on an ongoing basis.

Language in the eight (8) contracts reserves the Department's right to renew each contract for up to four (4) additional years, subject to the continued availability of funds, satisfactory performance of the contractors, and Governor and Executive Council approval.

Should the Governor and Executive Council not approve this request, 3,990 individuals may not have access the valuable support that they rely on to manage their symptoms of mental illness. Some individuals may require a higher level of service, including hospitalization, should these peer support services become unavailable.

Area served: Statewide.

Source of funds: 44.55% General Funds and 55.45% Federal Funds from United States Department of Health and Human Services, Block Grants for Community Mental Health Services, Catalog of Federal Domestic Award (CFDA) 93.958, and Federal Award Identification Number (FAIN) SM010035-18

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

Respectfully submitted,

Katja S. Fox
Director

Approved by:
Jeffrey A. Meyers
Commissioner

Financial Details for Peer Support Services

05-95-92-920010-7143 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, MENTAL HEALTH BLOCK GRANT

100% Federal Funds

Activity Code: 92207143

The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$290,154	$0	$290,154
2,018	Contracts for Prog Svs	102-500731	$290,154	$0	$290,154
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$580,308	$0	$580,308

The Stepping Stone Drop-In Center Association					
Vendor # 157987					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$209,790	$0	$209,790
2,018	Contracts for Prog Svs	102-500731	$209,790	$0	$209,790
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$419,580	$0	$419,580

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$188,183	$0	$188,183
2,018	Contracts for Prog Svs	102-500731	$188,183	$0	$188,183
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$376,366	$0	$376,366

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$146,449	$0	$146,449
2,018	Contracts for Prog Svs	102-500731	$146,449	$0	$146,449
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$292,898	$0	$292,898

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$211,860	$0	$211,860
2,018	Contracts for Prog Svs	102-500731	$211,860	$0	$211,860
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$423,720	$0	$423,720

Financial Details for Peer Support Services

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$245,562	$0	$245,562
2,018	Contracts for Prog Svs	102-500731	$245,562	$0	$245,562
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$491,124	$0	$491,124

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$135,751	$0	$135,751
2,018	Contracts for Prog Svs	102-500731	$135,751	$0	$135,751
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$271,502	$0	$271,502

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$102,362	$0	$102,362
2,018	Contracts for Prog Svs	102-500731	$102,362	$0	$102,362
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$204,724	$0	$204,724

SUB TOTAL			$3,060,222	$0	$3,060,222

05-95-92-920010-7011 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, PEER SUPPORT SERVICES					
100% General Funds					
Activity Code: 92207011					
The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$233,122	$0	$233,122
2,018	Contracts for Prog Svs	102-500731	$233,122	$0	$233,122
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$466,244	$0	$466,244

The Stepping Stone Drop-In Center Association					
Vendor # 157887					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$168,555	$0	$168,555
2,018	Contracts for Prog Svs	102-500731	$168,555	$0	$168,555
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$337,110	$0	$337,110

Financial Details for Peer Support Services

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$151,196	$0	$151,196
2,018	Contracts for Prog Svs	102-500731	$151,196	$0	$151,196
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$302,392	$0	$302,392

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$ 117,665	$ -	$ 117,665
2,018	Contracts for Prog Svs	102-500731	$ 117,665	$ -	$ 117,665
2,019	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
Subtotal			$ 235,330	$ -	$ 235,330

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$170,218	$0	$170,218
2,018	Contracts for Prog Svs	102-500731	$170,218	$0	$170,218
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$340,436	$0	$340,436

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$197,296	$0	$197,296
2,018	Contracts for Prog Svs	102-500731	$197,296	$0	$197,296
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$394,592	$0	$394,592

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$109,071	$0	$109,071
2,018	Contracts for Prog Svs	102-500731	$109,071	$0	$109,071
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$218,142	$0	$218,142

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$82,245	$0	$82,245
2,018	Contracts for Prog Svs	102-500731	$82,245	$0	$82,245
2,019	Contracts for Prog Svs	102-500731	$0	$0	$0
Subtotal			$164,490	$0	$164,490

SUB TOTAL			$2,458,736	$0	$2,458,736

05-95-92-922010-4118 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, PEER SUPPORT SERVICES					
100% General Funds					
Activity Code: 92204118					
The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$233,122	$233,122

Financial Details for Peer Support Services

Subtotal			$0	$233,122	$233,122

The Stepping Stone Drop-In Center Association					
Vendor # 157967					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$168,555	$168,555
Subtotal			$0	$168,555	$168,555

Lakes Region Consumer Advisory Board					
Vendor # 157060					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$151,196	$151,196
Subtotal			$0	$151,196	$151,196

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2,018	Contracts for Prog Svs	102-500731	$ -	$ -	$ -
2,019	Contracts for Prog Svs	102-500731	$ -	$ 117,665	$ 117,665
Subtotal			$ -	$ 117,665	$ 117,665

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$170,218	$170,218
Subtotal			$0	$170,218	$170,218

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$197,296	$197,296
Subtotal			$0	$197,296	$197,296

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$109,071	$109,071
Subtotal			$0	$109,071	$109,071

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$82,245	$82,245
Subtotal			$0	$82,245	$82,245

SUB TOTAL			$0	$1,229,368	$1,229,368

Financial Details for Peer Support Services

05-95-92-922010-4120 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, MENTAL HEALTH BLOCK GRANT

100% Federal Funds

Activity Code: 92204120

The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$290,154	$290,154
Subtotal			$0	$290,154	$290,154

The Stepping Stone Drop-In Center Association					
Vendor # 157967					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$209,790	$209,790
Subtotal			$0	$209,790	$209,790

Lakes Region Consumer Advisory Board					
Vendor # 157050					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$188,183	$188,183
Subtotal			$0	$188,183	$188,183

Monadnock Area Peer Support Agency					
Vendor # 157973					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$146,449	$146,449
Subtotal			$0	$146,449	$146,449

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI					
Vendor # 209287					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$211,860	$211,860
Subtotal			$0	$211,860	$211,860

On the Road to Recovery, Inc.					
Vendor # 158839					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$245,562	$245,562
Subtotal			$0	$245,562	$245,562

Connections Peer Support Center					
Vendor # 157070					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$135,751	$135,751
Subtotal			$0	$135,751	$135,751

Financial Details for Peer Support Services

Tri-City Consumers' Action Co-operative					
Vendor # 157797					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,017	Contracts for Prog Svs	102-500731	$0	$0	$0
2,018	Contracts for Prog Svs	102-500731	$0	$0	$0
2,019	Contracts for Prog Svs	102-500731	$0	$102,362	$102,362
Subtotal			$0	$102,362	$102,362
SUB TOTAL			$0	$1,530,111	$1,530,111

05-95-91-910010-5710 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: GLENCLIFF HOME FOR ELDER, GLENCLIFF HOME, PROFESSIONAL CARE

80% Other Funds/ 20% General Funds

Activity Code: 91000000

The Alternative Life Center					
Vendor # 068801					
State Fiscal Year	Class Title	Class Account	Current Budget	Amount Increase/ (Decrease)	Revised Budget Amount
2,018	Consultants	046-500464	$1,200	$0	$1,200
2,019	Consultants	046-500464	$0	$1,200	$1,200
Subtotal			$1,200	$1,200	$2,400
TOTAL			$6,520,158	$2,760,679	$8,280,837

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION FOR BEHAVIORAL HEALTH

Jeffrey A. Meyers
Commissioner

Katja S. Fox
Director

129 PLEASANT STREET, CONCORD, NH 03301
603-271-9422 1-800-852-3345 Ext. 9422
Fax: 603-271-8431 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

May 19, 2017

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division for Behavioral Health, Glencliff Home to amend an Agreement with The Alternative Life Center, 6 Main Street, Conway, NH, 03818 (Vendor #068801), to continue to provide peer support services to Glencliff Home residents, by increasing the price limitation by $1,200 from $1,046,552 to an amount not to exceed $1,047,752, effective July 1, 2017 or upon the date of Governor and Executive Council approval whichever comes later. There is no change to the completion date of June 30, 2018. The source of funds for this amendment is 19% General Funds and 81% Agency Funds.

Funds are anticipated to be available in State Fiscal Year 2018, upon the availability and continued appropriation of funds in the future operating budget, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office if needed and justified, without approval from Governor and Executive Council.

05-95-92-920010-7143 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, MENTAL HEALTH BLOCK GRANT

State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$290,154
2018	Contracts for Prog Svs	102-500731	$290,154
		Subtotal	**$580,308**

05-95-92-920010-7011 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, PEER SUPPORT SERVICES

State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$233,122
2018	Contracts for Prog Svs	102-500731	$233,122
		Subtotal	**$466,244**

05-95-91-910010-5710 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, PEER SUPPORT SERVICES

State Fiscal Year	Class Title	Class Account	Current Budget
2018	Consultants	046-500464	$1,200
Subtotal		**Subtotal**	**$1,200**
		Grand Total	**$1,047,752**

EXPLANATION

Approval of this Amendment will allow the Contractor to continue to provide peer support services to Glencliff Home residents who have severe mental illness. This Amendment increases the funding in the Agreement to add the provision of monthly group peer support services to Glencliff Home residents. Peer Support services enhance personal wellness, independence, and recovery by reducing crises due to symptoms of mental illness.

The original agreement was competitively bid.

Notwithstanding any other provision of the Contract to the contrary, no services shall continue after June 30, 2017, and the Department shall not be liable for any payments for services provided after June 30, 2017, unless and until an appropriation for these services has been received from the state legislature and funds encumbered for the SFY 2018-2019 biennium.

Should Governor and Council determine not to approve this request, residents at the Glencliff Home would lose a valuable support that is vital to managing their symptoms of mental illness.

Area served: Northern New Hampshire and Glencliff Home

Source of funds: 19% General Funds and 81% Agency Funds.

Respectfully submitted

Katja S. Fox
Director

Approved by:

Jeffrey A. Meyers
Commissioner

Jeffrey A. Meyers
Commissioner

Katja S. Fox
Director

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF BEHAVIORAL HEALTH

129 PLEASANT STREET, CONCORD, NH 03301
603-271-9422 1-800-852-3345 Ext. 9422
Fax: 603-271-8431 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

June 6, 2016

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

G&C Approved
Date 6/29/16
Item # 23

REQUESTED ACTION

1. Authorize the Department of Health and Human Services, Division of Behavioral Health, Bureau of Mental Health Services, to enter into Agreements with the vendors listed below, to provide peer support services in an amount not to exceed $5,518,958, effective July 1, 2016 through June 30, 2018, upon approval by Governor and Executive Council. 55.45%Federal, 44.55% General Funds

Summary of contract amounts by Vendor.

Vendor	Location	Budget Amount
Connection Peer Support Center	Portsmouth, NH	$489,644
H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI	Nashua, NH	$764,156
Lakes Region Consumer Advisory Board	Laconia, NH	$678,758
Monadnock Area Peer Support Agency	Keene, NH	$528,228
On the Road to Recovery, Inc.	Manchester, NH	$885,716
The Stepping Stone Drop-In Center Association	Claremont, NH	$756,690
The Alternative Life Center	Conway, NH	$1,046,552
Tri-City Consumers' Action Co-operative	Rochester, NH	$369,214
		$5,518,958

2. Contingent upon approval of Requested Action #1, authorize an advance payment up to a maximum of one-twelfth of the contract price limitation per each Vendor for each State Fiscal Year. If exercised this amount would be $459,913.17.

Funds are available in State Fiscal Year 2017 and anticipated to be available in State Fiscal Year 2018, upon the availability and continued appropriation of funds in the future operating budget, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office if needed and justified, without approval from Governor and Executive Council.

Please see attached financial detail.

EXPLANATION

The attached agreements represent eight (8) agreements with a combined price limitation of $5,518,958.

Approval of these eight (8) Agreements will allow the Contractors to provide peer support services to adults with long-term and/or severe mental illness. The Contractor will provide services that will enhance personal wellness, independence, and recovery by reducing crises due to symptoms of mental illness. Peer support services include supportive interactions and shared experiences using an Intentional Peer Support model that fosters recovery from mental illness and self-advocacy skills. Additionally, peer support services teach wellness self-management, and provide outreach by face-to face or telephone calls to provide continued support to consumers who may not be able to attend services. Also warmline line services will be available statewide by providing telephone peer support to assist individuals in addressing a current crisis related to their mental health during hours when an agency is closed for services. These eight peer support agency contractors expect to serve a total of 3,300 consumers during State Fiscal Year 2017. The Agreements require the Contractors increase the number of consumers served by 10% for each subsequent State Fiscal Year.

Approval of the advanced payment for each of the eight (8) Vendors, for each State Fiscal Year, will allow the Contractors to continue to cover operating expenses. These funds cover day to day costs including payroll and occupancy. These agencies face considerable challenges in their day to day operations. The Department considers advance payment to these vendors as a necessary method to ensure ongoing services for the clients that they serve. The Department is in close communications with these agencies and monitors their financial status on an ongoing basis.

The Department published a Request for Proposals for Substance Use Disorder Treatment and Recovery Support Services (RFP2017-BBH-02-PEERS) on the Department of Health and Human Services website March 24, 2016 through April 26, 2016. The Department received eight proposals. These proposals were reviewed and scored by a team of individuals with program specific knowledge. The Department selected all the Vendors to provide these services (See attached Summary Score Sheet).

Some of the Vendors' proposals scored lower than anticipated; however, it was determined that losing peer support services would be detrimental to the individuals, families, and communities of New Hampshire. In order to ensure effective delivery of services, the Department has strengthened language in the Vendors' contracts. Monthly Board minutes and attachments will be submitted for review as well as a Board member list whenever changes in membership occur. Quarterly review letters based upon review of monthly and quarterly submissions will be sent to the agencies requiring corrective action response when necessary. In addition, the Department monitors the peer support Contractors through quality assurance reviews, monthly meetings, monthly and quarterly financial reporting and quarterly statistical reporting.

The attached Contracts include language that reserves the right to renew each contract for up to four (4) additional years, subject to the continued availability of funds, satisfactory performance of contracted services and Governor and Executive Council approval.

Should Governor and Council determine not to approve this request, 3,300 persons could lose a valuable support they have come to rely on to manage their symptoms of mental illness. Some individuals likely will need a higher level of service including hospitalization.

Area served: Statewide.

Source of funds: ~~45.55%~~ 44.55 General Funds and 55.45% Federal Funds from United States Department of Health and Human Services, Block Grants for Community Mental Health Services, Catalog of Federal Domestic Award (CFDA) 93.958, and Federal Award Identification Number (FAIN) SM010035-16

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

Respectfully submitted

Katja S. Fox
Director

Approved by:

Jeffrey A. Meyers
Commissioner

05-95-92-920010-7143 HEALTH AND SOCIAL SERVICES, ~~HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV~~ OF, DIV OF BEHAVIORAL HEALTH, MENTAL HEALTH BLOCK GRANT

100% Federal Funds

Activity Code: 92207143

The Alternative Life Center			
Vendor # 088801			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 290,154.00
2018	Contracts for Prog Svs	102-500731	$ 290,154.00
Subtotal			$ 580,308.00

The Stepping Stone Drop-In Center Association			
Vendor # 157967			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 209,790.00
2018	Contracts for Prog Svs	102-500731	$ 209,790.00
Subtotal			$ 419,580.00

Lakes Region Consumer Advisory Board			
Vendor # 157060			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 188,183.00
2018	Contracts for Prog Svs	102-500731	$ 188,183.00
Subtotal			$ 376,366.00

Monadnock Area Peer Support Agency			
Vendor # 157973			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 146,449.00
2018	Contracts for Prog Svs	102-500731	$ 146,449.00
Subtotal			$ 292,898.00

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI			
Vendor # 209287			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 211,860.00
2018	Contracts for Prog Svs	102-500731	$ 211,860.00
Subtotal			$ 423,720.00

On the Road to Recovery, Inc.			
Vendor # 158839			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 245,562.00
2018	Contracts for Prog Svs	102-500731	$ 245,562.00
Subtotal			$ 491,124.00

Connections Peer Support Center			
Vendor # 157070			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 135,751.00
2018	Contracts for Prog Svs	102-500731	$ 135,751.00
Subtotal			$ 271,502.00

Tri-City Consumers' Action Co-operative			
Vendor # 157797			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 102,362.00
2018	Contracts for Prog Svs	102-500731	$ 102,362.00
Subtotal			$ 204,724.00
SUB TOTAL			$ 3,060,222.00

05-95-92-920010-7011 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, PEER SUPPORT SERVICES

100% General Funds

Activity Code: 92207011

The Alternative Life Center			
Vendor # 088801			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 233,122.00
2018	Contracts for Prog Svs	102-500731	$ 233,122.00
Subtotal			$ 466,244.00

The Stepping Stone Drop-In Center Association			
Vendor # 157967			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 168,555.00
2018	Contracts for Prog Svs	102-500731	$ 168,555.00
Subtotal			$ 337,110.00

Lakes Region Consumer Advisory Board			
Vendor # 157060			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 151,196.00
2018	Contracts for Prog Svs	102-500731	$ 151,196.00
Subtotal			$ 302,392.00

Monadnock Area Peer Support Agency			
Vendor # 157973			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 117,665.00
2018	Contracts for Prog Svs	102-500731	$ 117,665.00
Subtotal			$ 235,330.00

H.E.A.R.T.S. Peer Support Center of Greater Nashua Region VI			
Vendor # 209287			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 170,218.00
2018	Contracts for Prog Svs	102-500731	$ 170,218.00
Subtotal			$ 340,436.00

On the Road to Recovery, Inc.			
Vendor # 158839			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 197,296.00
2018	Contracts for Prog Svs	102-500731	$ 197,296.00
Subtotal			$ 394,592.00

Connections Peer Support Center			
Vendor # 157070			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 109,071.00
2018	Contracts for Prog Svs	102-500731	$ 109,071.00
Subtotal			$ 218,142.00

Tri-City Consumers' Action Co-operative			
Vendor # 157707			
State Fiscal Year	Class Title	Class Account	Current Budget
2017	Contracts for Prog Svs	102-500731	$ 82,245.00
2018	Contracts for Prog Svs	102-500731	$ 82,245.00
Subtotal			$ 164,490.00
SUB TOTAL			$ 2,456,738.00

TOTAL			$ 5,518,958.00

New Hampshire Department of Health and Human Services
Office of Business Operations
Contracts & Procurement Unit
Summary Scoring Sheet

Peer Support Services	RFP-2017-BBH-02-PEERS
RFP Name	RFP Number

Bidder Name	Maximum Points	Actual Points
1. Connection Peer Support Center	575	301
2. HEART Peer Support Center	575	271
3. Lakes Region Consumer Advisory Board	575	365
4. Monadnock Area Peer Support Agency	575	428
5. On the Road to Recovery	575	481
6. Stepping Stone Drop In Center	575	481
7. The Alternative Life Center	575	453
8. Tri-City Consumers' Action Cooperative	575	454

Reviewer Names

1. Peter Reid
2. Ann Driscoll
3. Stacey Dubia
4. Tom Grinley
5. Jamie Kelly
6. Elizabeth Fenner-Lukaitis
7.
8.
9.

Subject: Peer Support Services (SS-2017-BBH-02-PEERS-01)

Notice: This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

AGREEMENT

The State of New Hampshire and the Contractor hereby mutually agree as follows:

GENERAL PROVISIONS

1. IDENTIFICATION.

1.1 State Agency Name Department of Health and Human Services		1.2 State Agency Address 129 Pleasant Street Concord, NH 03301-3857	
1.3 Contractor Name Connections Peer Support Center		1.4 Contractor Address 544 Islington Street Portsmouth, NH 03801	
1.5 Contractor Phone Number 603-427-6966	1.6 Account Number 05-95-92-920010-7143-102-500731; 05-95-92-920010-7011-102-500731	1.7 Completion Date June 30, 2018	1.8 Price Limitation $489,644.
1.9 Contracting Officer for State Agency Eric B. Borrin, Director		1.10 State Agency Telephone Number 603-271-9558	
1.11 Contractor Signature Carol M Hollis		1.12 Name and Title of Contractor Signatory Carol Hollis, Vice President	
1.13 Acknowledgement: State of NH, County of Rockingham On 5/31/16, before the undersigned officer, personally appeared the person identified in block 1.12, or satisfactorily proven to be the person whose name is signed in block 1.11, and acknowledged that s/he executed this document in the capacity indicated in block 1.12.			
1.13.1 Signature of Notary Public ~~or Justice of the Peace~~ [Seal]		LAURA K. GRISWOLD, Notary Public My Commission Expires April 8, 2018	
1.13.2 Name and Title of Notary ~~or Justice of the Peace~~ Laura Griswold			
1.14 State Agency Signature Katja S Fox Date: 6/6/16		1.15 Name and Title of State Agency Signatory Katja S Fox, Director	
1.16 Approval by the N.H. Department of Administration, Division of Personnel *(if applicable)* By:		Director, On:	
1.17 Approval by the Attorney General (Form, Substance and Execution) *(if applicable)* By:		On: Megan A. Yapi - Attorney 6/12/16	
1.18 Approval by the Governor and Executive Council *(if applicable)* By:		On:	

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

3. EFFECTIVE DATE/COMPLETION OF SERVICES.
3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.18, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.14 ("Effective Date").
3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

4. CONDITIONAL NATURE OF AGREEMENT.
Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, 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 Contractor notice of such termination. The State shall not be required to transfer funds from any other account to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.
5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT B which is incorporated herein by reference.
5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.
5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.
5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.
6.1 In connection with the performance of the Services, the Contractor shall comply with all statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal opportunity laws. This may include the requirement to utilize auxiliary aids and services to ensure that persons with communication disabilities, including vision, hearing and speech, can communicate with, receive information from, and convey information to the Contractor. In addition, the Contractor shall comply with all applicable copyright laws.
6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.
6.3 If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all the provisions of Executive Order No. 11246 ("Equal Employment Opportunity"), as supplemented by the regulations of the United States Department of Labor (41 C.F.R. Part 60), and with any rules, regulations and guidelines as the State of New Hampshire or the United States issue to implement these regulations. The Contractor further agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

7. PERSONNEL.
7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws. .
7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this

Contractor Initials CH
Date 5/31/16

Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

8. EVENT OF DEFAULT/REMEDIES.

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

8.1.1 failure to perform the Services satisfactorily or on schedule;

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

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

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

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

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

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

8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

9. DATA/ACCESS/CONFIDENTIALITY/ PRESERVATION.

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

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

9.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

10. TERMINATION. In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT A.

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

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS. The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice and consent of the State. None of the Services shall be subcontracted by the Contractor without the prior written notice and consent of the State.

13. INDEMNIFICATION. The Contractor shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based or resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Contractor. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

14. INSURANCE.

14.1 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, the following insurance:

14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than $1,000,000per occurrence and $2,000,000 aggregate ; and

14.1.2 special cause of loss coverage form covering all property subject to subparagraph 9.2 herein, in an amount not less than 80% of the whole replacement value of the property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

Contractor Initials CH
Date 5|31|16

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than thirty (30) days prior to the expiration date of each of the insurance policies. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference. Each certificate(s) of insurance shall contain a clause requiring the insurer to provide the Contracting Officer identified in block 1.9, or his or her successor, no less than thirty (30) days prior written notice of cancellation or modification of the policy.

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

16. WAIVER OF BREACH. 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 of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default 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 Event of Default on the part of the Contractor.

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

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

19. CONSTRUCTION OF AGREEMENT AND TERMS. This Agreement shall be construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.

20. 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.

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

22. SPECIAL PROVISIONS. Additional provisions set forth in the attached EXHIBIT C are incorporated herein by reference.

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

24. 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.

Contractor Initials CH
Date 5/31/16

Scope of Services

1. Provisions Applicable to All Services

1.1. The Contractor will submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.

1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

1.3. The Contractor agrees to provide peer support services that will:

1.3.1. Increase quality of life for persons living with mental illness in NH.

1.3.2. Increase hope for and belief in the possibility of recovery for persons living with mental illness in NH.

1.3.3. Increase choice regarding the services and supports available to persons living with mental illness in NH.

1.3.4. Provide alternatives to and reduce the use of more restrictive and expensive services such as hospitalization.

1.3.5. Increase social connectedness for persons living with mental illness in NH.

1.3.6. Increase satisfaction with peer support services.

1.4. The Contractor agrees to provide mental health peer support services to persons 18 years of age or older who self identify as a recipient, as a former recipient, or as a significant risk of becoming a recipient mental health services, and may include persons who are homeless.

1.5. The Contractor agrees to give priority of peer support services to consumers who are age sixty (60) and over, who are most social isolated, and/or risk of placement in the public mental health service delivery system.

2. Definitions

2.1. Board of Directors means the governing body of a nongovernmental Peer Support Agency.

2.2. Consumers are any individual, 18 years of age or older, who self identifies as a recipient, as a former recipient, or as a significant risk of becoming a recipient of publically funded mental health services.

2.3. Culturally Competent means having attained the knowledge, skills, and attitudes necessary to provide effective supports, services, education and technical assistance to the populations in the region served by the Contractor.

2.4. Business Days are defined as Monday through Friday, excluding Saturday and Sunday.

Exhibit A

2.5. Guests are any persons who are invited to visit the Peer Support Agency by a member, participant, or the Peer Support Agency.

2.6. Homeless is (1) an individual or family who lacks a fixed, regular, and adequate nighttime residence; or (2) an individual or family who has a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels and congregate shelters), an institution other than a penal facility that provides temporary residence for individuals intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

2.7. Management staff means staff that is responsible for supervising other staff and volunteers affiliated with the program.

2.8. Members are any consumers, who have made an informed decision to join, and agree to support the goals and objectives of peer support services.

2.9. Mental illness is defined in RSA 135-C:2 X, namely, "a substantial impairment of emotional processes, or of the ability to exercise conscious control of one's actions, or of the ability to perceive reality or to reason, when the impairment is manifested by instances of extremely abnormal behavior or extremely faulty perceptions. It does not include impairment primarily caused by: (a) epilepsy; (b) mental retardation; (c) continuous or noncontinuous periods of intoxication caused by substances such as alcohol or drugs; or (d) dependence upon or addiction to any substance such as alcohol or drugs."

2.10. Participant means a consumer, who is not member, who participates in any aspect of peer support services.

2.11. Peer Support Agency (PSA) means an organization whose primary purpose is to provide culturally appropriate peer support to persons 18 year of age and older who have a mental illness.

2.12. Recovery means for a person with a mental illness, development of personal and social skills, beliefs and characters that support choice, increase quality of life, minimize or eliminate impairment, and decrease dependence on professional services.

2.13. Region is the geographic area of cities and towns in New Hampshire, as defined by the Department.

2.14. *Recovery means for a person with a mental illness, development of personal and* social skills, beliefs and characters that support choice, increase quality of life, minimize or eliminate impairment, and decrease dependence on professional services.

2.15. SMI is Serious Mental Illness that refers to individuals whom the state defines as having either Serious Mental Illness (SMI) or Serious and Persistent Mental Illness (SPMI) pursuant to N.H. Revised Statutes Annotated (RSA) 135-C:2, XV.

2.16. Quarter or Quarterly is defined as the periods of July 1 through September 30, October 1 through December 31, January 1 through March 31, and April 1 through June 30.

2.17. Week is defined as Monday through Sunday.

3. Scope of Services

3.1. Peer Support Services

3.1.1. The Contractor shall provide peer support services that are provided for consumers and by consumers as follows:

3.1.1.1. Provide peer support services that include supportive interactions shared experiences, acceptance, trust, respect, lived experience, and mutual support among members, participants, staff and volunteers.

3.1.1.2. Provide at least forty-four hours per week of peer support services, by face-to-face or by telephone to members of a peer support agency or others who contact the agency.

3.1.1.3. Provide peer support services at a minimum based on the Intentional Peer Support model that:

a. Fosters recovery from mental illness by helping individuals identify and achieve personal goals while building an evolving vision of their recovery.

b. Fosters self-advocacy skills, autonomy, and independence;

c. Emphasizes mutuality and reciprocity as demonstrated by shared decision-making, strong conflict resolution, non-medical approaches to help, and non-static roles, such as, staff who are members and members who are educators;

d. Offers alternative views on mental health, mental illness and the effects of trauma and abuse;

e. Encourages informed decision-making about all aspects of people's lives;

f. Supports people with mental illness in challenging perceived self-limitations, while encouraging the development of beliefs that enhance personal and relational growth;

g. Emphasizes a holistic approach to health that includes a vision of the "whole" person.

3.1.1.4. Provide opportunities to learn wellness strategies, by using at a minimum Wellness Recovery Action Planning (WRAP) and Whole Health Action Management (WHAM), to strengthen a member's and participant's ability to attain and maintain their health and recovery from mental illness

3.1.1.5. Provide outreach by face-to-face or by telephone contact with consumers by providing support to members who are unable to attend agency activities, visiting people who are psychiatrically hospitalized and reaching out to people who meet membership criteria and are homeless.

Exhibit A

3.1.1.6. *Provide monthly newsletters published by the peer support agency* that describes agency services and activities, other community services, social and recreational opportunities, member articles and contributions and other relevant topics that might be of interest to members and participants.

3.1.1.7. Distribute the Newsletters to the members and other interested parties, such as community mental health centers and other appropriate community organizations, at least five (5) business days prior to the upcoming month.

3.1.1.8. Provide Monthly Education Events and Presentations of Information germane to issues and concerns of consumers of mental health services which shall include, education topics to be covered over the course of the year, but not limited to:

a. Rights Protection,

b. Peer Advocacy,

c. Recovery,

d. Employment

e. Wellness Management, and

f. Community Resources.

3.1.1.9. Provide at least 5 days prior to the beginning of the month, to the Office of Consumer and Family Affairs within the Department's Bureau of Behavioral Health, both electronic and a paper copy of the monthly newsletters and education events in Section 3.2.1.16 and Section 3.2.1.18.

3.1.1.10. Provide Individual Peer Assistance by assisting adults to:

a. Locate, obtain, and maintain mental health services and supports through referral, consumer education, and self-empowerment,

b. Support individuals who are identifying problems by assisting them in addressing the issue and/or in resolving grievances; and

c. Promote self-advocacy.

3.1.1.11. Provide Employment Education by assisting members with:

a. Information on obtaining and maintaining competitive employment (any employment open to the general public and achieved during the quarter, even if employment is time limited),

b. Referrals to community mental health centers employment programs,

c. Employment related activities such as, but not limited to, resume writing, interviewing, or assistance with employment applications.

3.1.1.12. Inform the members and general public about the peer supports and wellness services available at a minimum as follows:

a. Provide monthly Community Education Presentations to potential referral sources, funders, or families of individuals affected by mental illness, about mental illness and the peer support community.

3.1.1.13. Inform local human service providers and the general public about the stigma of mental illness, wellness and recovery at a minimum as follows:

a. Collaborate with other local human service providers that serve consumers in order to facilitate referrals and share information about services and other local resources.

3.1.1.14. Provide training and technical assistance to help consumers on their own behalf regarding healthcare such as but not limited to, sharing techniques for being ready for a doctor's appointment, how to take notes, how to use the physician's desk reference book for medications and a review of patient rights.

3.1.1.15. Invite guests to participate in peer support activities.

3.1.1.16. Provide residential support services as needed by members and participants by providing support and assistance such as but not limited to help with staying in their home or apartment, or finding a place to live.

3.1.1.17. Maintain at least a monthly schedule of peer support and wellness services and activities, staff development and training, and other related events.

3.2. The Contractor shall provide transportation services to members, participants and guests as follows:

3.2.1. Use a Contractor owned or leased vehicle.

3.2.2. Transport members, participants, guests to and from their homes and/or the Contractor's peer support agency to participate in activities such as but not limited to:

3.2.2.1. Peer Support Services

3.2.2.2. Wellness and Recovery Activities

3.2.2.3. Annual Conferences

3.2.2.4. Regional Meetings

3.2.2.5. Council Meetings

3.2.3. Comply with all applicable Federal and State Department of Transportation and Department of Safety regulations such as but not limited to:

3.2.3.1. Vehicles must be registered pursuant to NH Administrative Rule Saf-C 500

3.2.3.2. Vehicles must be inspected in accordance with NH Administrative Rule Saf-C 3200, and

3.2.3.3. Drivers must be licensed in accordance with NH Administrative Rule Saf-C 1000, drivers licensing

3.2.4. Require that all employees, members, or volunteers who drive Contractor owned vehicles sign a State of New Hampshire Release of Individual Motor Vehicle Driver Records form that shows the driver has a safe driving record.

3.2.5. Require that all employees, members, or volunteers who drive Contractor owned vehicles complete a National Safety Council Defensive Driving course offered through a State of New Hampshire approved agency.

3.2.6. Agrees that funding from the Department to support transportation costs may not be used for other than peer support related activities defined in this Agreement and may not be used to pay for taxi or bus rides.

3.3. Warmline Services

3.3.1. The Contractor agrees to provide warmline services that offers on-call telephone peer support services to members, participants, and others that:

3.3.1.1. Are primarily provided to any individual who lives or works in Region(s) 8, 9, and 10, or anyone who lives or works elsewhere in the State of New Hampshire or out-of-state.

3.3.1.2. Are provided during the hours the peer support agency is closed.

3.3.1.3. Are mainly provided to individuals in the Contractor's region with the ability to receive calls from and make calls to individuals statewide.

3.3.1.4. Assist individuals in addressing a current crisis related to their mental health.

3.3.1.5. Refer clients to appropriate treatment and other resources in the consumer's service area.

3.3.1.6. Are provided by staff that are trained in providing crisis services.

3.3.1.7. May include outreach calls described in Section 3.2.1.5

4. Geographic Area and Physical Location of Services

4.1. The Contractor will provide services in this Agreement to individuals who live or work in Region 8, and other Regions specific to services identified in Section 3.3.

4.2. The Contractor shall provide peer support services separately from the confines of a local mental health center, unless pre-approved by the Department.

4.3. The Contractor agrees to provide a physical location/building to provide peer support services that are in accordance with Exhibit C Section 15 and with the Life Safety requirements that include but not limited to:

4.3.1. A Building in compliance with local health, building and fire safety codes, 4.3.2. A Building that is maintained in good repair and be free of hazard,

4.3.3. A building that includes:

4.3.3.1. At least one indoor bathroom which includes a sink and toilet,

4.3.3.2. At least one telephone for incoming and outgoing calls,

4.3.3.3. A functioning septic or other sewage disposal system, and

4.3.3.4. A source of potable water for drinking and food preparation as follows:

a. If drinking water is supplied by a non-public water system, the water shall be tested and found to be in accordance with New Hampshire Administrative Rules Env-Ws 315 and Env-Ws 316 initially and every five (5) years thereafter, and

b. If the water is not approved for drinking, an alternative method for providing safe drinking water shall be implemented

5. Enrolling Consumers for Services and/or as Members with a Peer Support Agency

5.1. The Contractor agrees to provide peer support services to individuals defined in Section 1.4 and 1.5 who have a desire to work on wellness issues, and who have a willing desire to participate in services.

5.2. The Contractor may encourage consumers to complete a membership application to join and support the activities and mission of the Peer Support Agency.

5.3. The Contractor agrees that at a minimum the membership application shall state that the consumer supports the mission of the Peer Support Agency.

5.4. The Contractor agrees to provide services in this Contract to any consumers who are non-members or members participating in services.

6. Staffing Requirements for a Peer Support Agency

6.1. The Contractors shall employ an executive director who:

6.1.1. Is appointed by the board of directors (as in Section 8);

6.1.2. Is employed by the Contractor and is supervised by the board of directors in accordance with the published job description and competitive application process;

6.1.3. Has at a minimum the following qualification:

6.1.3.1. One year of supervisory or management experience, and

a. An associate's degree or higher administration, business management, education, health, or human services; or

b. Each year of experience in the peer support field may be substituted for one year of academic experience: or

c. Each year of experience in the peer support field may be substituted for one year of academic experience.

6.1.4. Is evaluated annually by the board of directors to ensure that peer support and wellness services and activities are provided in accordance with:

6.1.4.1. The performance expectations approved by the board

6.1.4.2. The Department's policies and rules

6.1.4.3. The Contract terms and conditions

6.1.4.4. The Quality improvement reviews

6.2. The Contractor shall provide sufficient staff to perform all tasks specified in this Agreement.

6.3. The Contractor shall maintain a level of staffing necessary to perform and carry out all of the functions, requirements, roles, and duties in a timely fashion for the number of clients as identified in Section 11.

6.4. The Contractor shall select and employ staff utilizing practices and procedures as approved by the Department, that include at a minimum, assurance that offers of employment are made in writing and include salary, start date, hours to be worked, and job responsibilities, and that prior employment references shall be obtained and verified.

6.5. The Contractor shall screen each staff member for tuberculosis prior to employment.

6.6. The Contractor shall complete a Criminal Record Check, and submit the names of a prospective employee who may have client contact, for review against the State Adult Protective Service Registry, and against the Division of Children, Youth and Families Central Registry Check to assure that any person who is in regular contact with members and who becomes employed by the Contractor or its Subcontractor after the Effective Date of this Agreement is screened for criminal convictions in accordance with RSA 106-B:14 which allows any public or private agency to request and receive a copy of the criminal conviction record of another who has provided authorization in writing, duly notarized, explicitly allowing the requester to receive such information.

6.7. The Contractor shall not add, delete, defund, or transfer among programs staff positions without prior written permission from the Department.

6.8. The Contractor shall develop a Staffing Contingency Plan and shall submit their written Staffing Contingency Plan to the Department within thirty days of the effective date of the contract that includes but not be limited to:

6.8.1. The process for replacement of personnel in the event of loss of key personnel or other personnel during the period of this Agreement;

6.8.2. The description of how additional staff resources will be allocated to support this Agreement in the event of inability to meet any performance standard;

6.8.3. The description of time frames necessary for obtaining staff replacements;

6.8.4. An explanation of the Contractor's capabilities to provide, in a timely manner, staff replacements/additions with comparable experience.

7. Staff Training and Development

7.1. The Contractor shall verify and document that all staff and volunteers have appropriate training, education, experience, and orientation to fulfill the responsibilities of their respective positions, by keeping up-to-date personnel and training records and documentation of all individuals.

7.2. The Contractor shall provide orientation for all new staff providing peer support that includes, but not limited to:

7.2.1. The statewide peer support system,

7.2.2. All Department policies and rules applicable to the peer support,

7.2.3. Protection of member and participant rights.

7.2.4. Contractor policies and procedures

7.2.5. PSA grievance procedures,

7.2.6. Harassment, discrimination, and diversity,

7.2.7. Documentation such as incident reports, attendance records, and telephone logs, and

7.2.8. Confidentiality

7.3. The Contractor shall develop and implement written staff development policies applicable to all staff that specifically address the following:

7.3.1. Job Descriptions

7.3.2. Staffing pattern

7.3.3. Conditions of employment

7.3.4. Grievance procedures

7.3.5. Performance reviews

7.3.6. Individual staff development plans

7.3.7. Prior employment, each staff member shall demonstrate evidence of or willingness to verify:

7.3.7.1. Citizenship or authorization to work

7.3.7.2. Motor Vehicle Records check to ensure that potential employee has a valid driver's license, if such employee will be transporting members or participants

7.3.7.3. Criminal Records Check

7.3.7.4. Previous employment

7.3.7.5. References

7.4. The Contractor shall screen each staff member, prior to employment, for tuberculosis (TB) as follows:

7.4.1. All newly employed employees, including those with a history of bacille calmette guerin (BCG) vaccination, who will have direct contact with members and participants and the potential for occupational exposure to Mantoux TB through shared air space with persons with infectious TB shall have a TB symptom screen, consisting of a Mantoux tuberculin skin test or QuantiFERON-TB test, performed upon employment;

7.4.2. Baseline two-step testing, if performed in association with Mantoux testing, shall be conducted in accordance with the Guidelines for Environmental Infection Control in Health-Care Facilities (2003) published by the Centers for Disease Control and Prevention (CDC);

7.4.3. Employees with a documented history of TB, documented history of a positive Mantoux test, or documented completion of treatment for TB disease or latent TB infection may substitute that documentation for the baseline two-step test;

7.4.4. All positive TB test results shall be reported to the department's bureau of disease control, 271-4469, in accordance with RSA 141-C:7, He-P 301.02 and He-P 301.03;

7.4.5. All employees with a diagnosis of suspect active pulmonary or laryngeal TB shall be excluded from the PSA until a diagnosis of TB is excluded or until the employee is on TB treatment and a determination has been made that the employee is noninfectious;

7.4.6. All employees with a newly positive tuberculin skin test shall be excluded from the PSA until a diagnosis of TB disease is ruled out;

7.4.7. Repeat TB testing shall be conducted in accordance with the CDC's Guidelines for Environmental Infection Control in Health-Care Facilities (2003); and

7.4.8. Those employees with a history of previous positive results shall have a symptom screen and, if symptomatic for TB disease, be referred for a medical evaluation.

7.5. The Contractor shall complete an annual performance review based on the staff's job description and conducted by his or her supervisor.

7.6. The Contractor shall complete a staff development plan annually with each staff person by his or her supervisor that is based upon the staff's annual performance review, and that includes objectives and methods for improving the staff person's work-related skills and knowledge.

7.7. The Contractor shall conduct or refer staff to training activities that address objectives for improving staff competencies and according to the staff's development plan, along with ongoing training in protection of member and participant rights.

7.8. The Contractor agrees to maintain documentation in files of the staffs completed trainings and certifications.

7.9. The Contractor shall obtain Department approval 30 days prior to the training date, for all trainings provided by the Contractor or to attend trainings other than offered by the Contractor for staff at least on an annual basis such as but not limited to:

7.9.1. Peer Support;

7.9.2. Warmline;

7.9.3. Facilitating Peer Support Groups;

7.9.4. Sexual Harassment; and

7.9.5. Member Rights.

7.10. The Contractor shall provide Intentional Peer Support training and its required consultations to meet certification a minimum of every other year.

7.11. The Contractor agrees that if Intentional Peer Support is not being offered in a given year the Contractor shall provide Wellness, Recovery, and Planning training to staff.

7.12. The Contractor agrees that Administrative staff, including the Executive Director, shall participate in trainings on:

7.12.1. Staff Development;

7.12.2. Supervision;

7.12.3. Performance Appraisals;

7.12.4. Employment Practices

7.12.5. Harassment;

7.12.6. Program Development;

7.12.7. Complaints and the Complaint Process; and

7.12.8. Financial Management.

7.13. The Vendor shall ensure that annual Wellness Training is available to staff and members, and may be provided to other mental health consumers who do not identify themselves as members of a peer support agency in the region.

7.14. The Contractor shall obtain prior approval by the Department at least five (5) days prior to the training, to provide or refer staff to specific training proposed by either the Department or the Contractor.

7.15. The Contractor agrees to provide documentation to the Department within 30 days from the training in Section 7.14 that demonstrates the staff person(s) participation and completion of said training.

7.16. The Contractor agrees to collaborate with other Peer Support Agencies to offer combined trainings to facilitate more efficient use of training funds and to increase the scope of trainings offered.

7.17. The Contractor shall require that all employees, members, or volunteers who drive Contractor owned vehicles sign a State of New Hampshire Release of Individual Motor Vehicle Driver Records form. Those records must indicate a safe driving record, and that the driver has participated in a National Safety Council Defensive Driving course offered through a State of New Hampshire approved agency.

7.18. The Contractor shall purge all data in accordance with the instructions from the Department pertaining to members, participants, and guests who have not received peer support services within the prior two-year period.

8. Composition and Responsibilities of a Peer Support Agency

8.1. The Contractor shall establish and maintain a status as a Peer Support Agency by:

8.1.1. Being incorporated with the Secretary of State's Office as a non-for-profit agency

8.1.2. Having a plan for governance that requires:

8.1.2.1. A Board of Directors who:

a. Have the responsibility for the entire management and control of the property and affairs of the corporation;

b. Have the powers usually vested in the board of directors of a non-for-profit corporation

c. Is comprised of no fewer than 9 individuals with at least 51% of the individuals who self identify as consumers and no more than 20% of the board members shall be related by blood, marriage, or cohabitation to other board members.

d. Establish and maintain the bylaws

8.1.2.2. Bylaws that outline the:

a. Responsibilities and powers of the Board of Directors,

b. Term limits for the board of director officers that shall not allow more than 20% of the board members to serve for more than 6 consecutive years

c. Nominating process that actively recruits diverse individuals whose skills and life experiences will serve the needs of the agency

d. A procedure by which inactive peer support agency members are removed from the peer support agency board.

8.2. The Contractor will submit to the Department within 5 days, a corrective action plan with time frames when the Board of Directors membership falls below the required minimum of nine (9).

8.3. The Contractor will submit to the Department and NH Department of Justice, Division of Charitable Trusts and the Department, and updated list of current board members and a corrective action plan with timeframes when the Board of Directors membership falls below the State of New Hampshire minimum required number of five (5).

8.4. The Contractor shall have written descriptions outlining the duties of the members and officers of the board of directors.

8.5. The Contractor shall have a documented Orientation Process and Manual for the members and officers of the board of directors.

8.6. The Contractor shall have annual trainings related to the members and officers of the Board of Directors roles and responsibilities, including fiduciary responsibilities.

8.7. The Contractor's Board of Directors shall have fiduciary responsibility for the agency including approval of agency financial policies and procedures that includes, but not be limited to, the following:

8.7.1. Cash Management including cash receipts, cash disbursements, and petty cash;

8.7.2. Accounts Payable/Receivable Procedures, payroll, and fixed assets;

8.7.3. Internal Control Procedures; and

8.7.4. Expense Reimbursement and Advance Policy.

8.8. The Contractor shall have open attendance to peer support agency members during a portion of a board meeting.

8.9. The Contractor shall publish the times and locations of Board of Director meetings in an effort to encourage peer support agency member attendance.

8.10. The Contractor's Board of Directors shall:

8.10.1. Maintain written records (board minutes) of their meetings including but not limited to, topics discussed, votes and actions taken, and a monthly review of the agency's financial status and submit the minutes to the Department within 60 days of the meeting.

8.10.2. Maintain a current Board of Director list, including but not limited to, member name, board office held, address, phone number, e-mail address, date joined, and term expiration date.

8.10.3. Maintain documentation of the process and results of annual board elections.

8.10.4. Notify the Department immediately in writing of any change in board membership.

8.11. The Contractor shall maintain and make available to the Department upon request a policy manual that at a minimum includes policies for :

8.11.1. Human Resources

8.11.2. Staff Development

8.11.3. Financial Responsibilities

8.11.4. Protection for member and participant rights.

8.12. The Contractor agrees to pursue other sources of revenue to support additional peer support services and/or supplement other related activities that the Department may not pay for under this Agreement.

9. Participation in Statewide/Regional Meetings

9.1. The Contractor shall support the recruitment and training of individuals for serving on local, regional and state mental health policy, planning and advisory initiatives. Participation of individuals shall be from other than the Contractor's employees who provide leadership development meetings, workshops, and training events.

9.2. The Contractor's Executive Director, or designee, shall attend the Department's monthly Peer Support Directors' meeting that is held for the purpose of information exchange, support, and strengthening of the statewide Peer Support system.

9.3. The Contractor shall meet at least two (2) times per year, with other regional community support organizations that serve the same populations, e.g., mental health centers, area homeless shelters, community action programs, housing agencies, etc.,

9.4. The Contractor shall submit to the Department written documentation demonstrating attendance at the meetings, but not limited to, the meetings in Section 9.2 and 9.3.

10. Grievance and Appeals

10.1. The Contractor shall submit for Department approval within 30 days from the contract effective date a grievance and appeals process that includes, but not limited to:

10.1.1. Receiving complaints orally or in writing and anonymously that includes at a *minimum;*

10.1.1.1. consumer name,

10.1.1.2. date of written grievance,

10.1.1.3. nature/subject of the grievance.

10.1.2. Assisting consumers with the grievance and appeal process such as but not limited to filing a complaint

10.1.3. Tracking complaints

10.1.4. Investigating allegations that a member's or participant's rights have been violated by agency staff, volunteers or consultants;

10.1.5. An immediate review of the complaint and investigation by the Contractor's director or his or her designee

10.1.6. A process to attempt to resolve every grievance for which a formal investigation is requested.

10.1.7. Following completion of a formal investigation, the board of directors of the PSA shall issue a written decision to the member or participant within 20 business days setting forth the disposition of the grievance.

10.1.8. *Submitting a copy of the written decision in Section* 10.1.7 of the complaint to the Department within 10 days from the written decision.

10.1.9. An appeal process for members or participants to appeal the written decision made in Section 10.1.7

11. Deliverables

11.1. The Contractor shall submit for Department approval by July 31 of each State Fiscal Year, a Peer Support Agency Quarterly Statistical Data Form provided by the Department that provides each State Fiscal Years deliverables, such as but not limited to the number of members, participants, program utilization, phone contacts, outreach *activities, educational events.*

11.2. The Contractor shall increase the unduplicated numbers being served in Section 11.1 by ten (10) percent of the total served in the previous year, for each subsequent State Fiscal Year.

11.2.1. The Contractor shall provide a plan for Department approval by July 31 of each State Fiscal Year, describing how the Contractor will increase the deliverables described in Section 11.2.

12. Reporting

12.1. The Contractor agrees to report on forms provided by the Department a list of the trained individuals as in Section 7.

12.2. The Contractor shall report to the Department by the 30th of the month following the quarter, quarterly peer support service deliverables, as in Section 11 on forms supplied by the Department.

12.3. The Contractor shall report to the Department by the 30th of the month following the quarter, quarterly Revenue and Expenses by cost and/or program category and locations, on forms supplied by the Department.

12.4. The Contractor shall report to the Department by the 30th of the month following the quarter, a quarterly Capital Expenditure Report, on a form supplied by the Department.

12.5. The Contractor shall provide to the Department by the 30th of the month following the end of each month, the prior months, interim Balance Sheet, and Profit and Loss Statements for the Contractor including separate statements for related parties that are certified by an officer of the reporting entity to measure the agency's fiscal integrity as follows:

12.5.1. Current Ratio that measures the Contractor's total current assets available to cover the cost of current liabilities by using the following formula: Total current assets divided by total current liabilities. The Contractor shall maintain a minimum current ratio of 1.1:1.0 with no variance allowed.

12.5.2. Accounts Payable that measures the Contractor's timeliness in paying invoices. The Contractor shall not have outstanding invoices greater than sixty (60) days.

12.5.3. Budget Management that compares budget to actual revenues and expenses to determine on a year -to-date basis the percentage of the Contractors budget executed year-to-date.

12.5.3.1. Formula: (Revenues) Actual year-to-date revenues compared to budgeted revenues divided by twelve (12) months times the number of months in the reporting period. (Expenses) Actual year-to-date expenses compared to budgeted expenses divided by twelve (12) months times the number of months in the reporting period.

12.5.3.2. Performance Standard: Revenues shall be equal to or greater than the year-to-date calculation. Expenses shall be equal to or less than the year-to-date calculation.

12.6. The Contractor shall provide to the Department by the 30th of the month following the end of each month, the prior months Board of Director meeting minutes including all attachments such as but not limited to the Executive Directors report.

13. Quality Improvement

13.1. The Contractor agrees to quality assurance review as follows:

13.1.1. Ensure the Department has access sufficient for monitoring of contract compliance requirements as identified in OMB Circular A-133.

13.1.2. Ensure the Department is provided with access that includes but is not limited to:

13.1.2.1. Data

13.1.2.2. Financial records

13.1.2.3. Scheduled access to Contractor work sites/locations/work spaces and associated facilities.

13.1.2.4. Unannounced access to Contractor work sites/locations/work spaces and associated facilities.

13.1.2.5. Scheduled phone access to Contractor principals and staff

13.2. The Contractor shall perform monitoring and comprehensive quality and assurance activities including but not limited to:

13.2.1. Participate in quality improvement review as in Section 13.1

13.2.2. Conduct member satisfaction surveys provided by and as instructed the Department.

13.2.3. Review of personnel files for completeness; and

13.2.4. Review of complaint process.

13.3. The Contractor agrees to provide a corrective action plan to the Department within thirty (30) days from the date the Department notifies the Contractor is not in compliance with the contract.

Method and Conditions Precedent to Payment

1. The State shall pay the Contractor an amount not to exceed the Price Limitation, Block 1.8, of the General Provisions of this Agreement, Form P-37, for the services provided by the Contractor pursuant to Exhibit A, Scope of Services.

2. This Agreement is funded by:
   2.1. New Hampshire General Funds;
   2.2. Federal funds from the United States Department of Health and Human Services, the Substance Abuse and Mental Health Services Administration, Community Mental Health Services Block Grant (CFDA #93.958).

3. The Contractor agrees to provide the services in Exhibit A, Scope of Services in compliance with funding requirements in Section 2 above.

4. The Department may make an initial payment to the Contractor each July of an amount determined by the Department as necessary for the Contractor to initiate services each State Fiscal Year.

5. Subsequent to the action in Section 4, the Department shall make monthly payments to the Contractor of either 1/12 or based upon documented cash needs as submitted by the Contractor to maintain services and approved by the Department, of the Department approved budget amounts in Exhibit B-1 and B-2.

   5.1. In no event shall the total of the initial payment in Section 4 and monthly payments in Section 5 exceed the budget amounts in Exhibit B-1 and B-2.
   5.2. The Department will adjust monthly payments for expenditures set forth in Section 9 below and amounts paid to initiate services in Section 4 above.
   5.3. Expenditures shall be in accordance with the budgets identified as Exhibits B-1 through Exhibits B-2, as approved by the Department.
   5.4. Allowable costs and expenses shall be determined by the Department in accordance with applicable state and federal laws and regulations.

6. The Contractor agrees that when funding received by the Department exceeds the Contractor's actual expenditures, the Contractor may submit in writing for Department approval by June 1 of each State Fiscal Year a plan to expend the excess funds.
   6.1. The Contractor agrees that when funding received by the Department exceeds the Contractor's actual expenditures and does not submit a plan to the Department by June 1 of each State Fiscal Year, then Contractor agrees to return those unspent funds to the Department.

7. Notwithstanding paragraph 18 of the General Provisions of this Agreement P-37, an amendment limited to Exhibits B-1 through Exhibits B-2, to adjust amounts within the budgets, within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of Governor and Executive Council.

8. Payment for services provided in Exhibit A Scope of Services shall be made as follows:

   8.1. The Contractor shall submit an invoice on Department supplied forms, by the tenth (10th) working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The State shall make payment to the Contractor in accordance with Section 5, within thirty (30) days of receipt of each DHHS approved invoice for Contractor services provided pursuant to this Agreement.

   8.2. The invoice must be submitted to:

   Financial Manager
   Bureau of Behavioral Health
   Department of Health and Human Services
   105 Pleasant Street, Main Building
   Concord, NH 03301

9. Of the Budgeted amounts identified in Exhibits B-1 and B-2, for each State Fiscal Year the following activities will be reimbursed only on a cost reimbursement basis (except for 9.2 Capital Reserve Fund, See Section 11 below), only upon prior approval of the Department, and up to the amounts listed below as follows:
   9.1. Training and Development: $1,000.
   9.2. Capital Reserve Fund: $2,901.
   9.3. Capital Expenditure: $0.
   9.4. Crisis Respite: $0.
   9.5. Retirement: $2,424.

10. The Contractor shall submit an invoice on Department supplied forms for expenditures listed in Section 9 (except for 9.2 Capital Reserve Fund) above, by the tenth (10th) working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The State shall make payment to the Contractor on actual expenditures, within thirty (30) days of receipt of each DHHS approved invoice for Contractor services provided pursuant to this Agreement.

    10.1. The invoice must be submitted to:

    Financial Manager
    Bureau of Behavioral Health
    Department of Health and Human Services
    105 Pleasant Street, Main Building
    Concord, NH 03301

11. Capital Reserve Fund: The Contractor agrees that the amount budgeted for Capital Reserve Fund in Section 9 is the maximum amount of funding the Contractor estimates to use for a future expenditure (in subsequent State Fiscal Years of the contract period) of a capital expense.
    11.1. The Contractor agrees that a capital expense is for purchase of an item with a life of greater than one year.
    11.2. The Contractor shall provide the Department with three quotes and explanation for the capital item and shall obtain Department approval prior to purchasing the item.
    11.3. The Contractor agrees that real estate and major capital building improvements are not an allowable capital expenditure.
    11.4. The Contractor shall invoice the Department by May of each State Fiscal Year on a Department supplied form to receive funding for the Capital Reserve Fund.

11.5. The Contractor shall deposit funds identified as Capital Reserve Fund in Section 9 into a restricted account, in an amount not to exceed the equivalent of the depreciation of real and non-real property capital items, for replacement, repairs/maintenance of same.

11.6. The Contractor agrees to obtain prior approval from the Department to withdraw the funding from the restricted account and purchase the item in Section 11.2 above.

11.7. The Contractor agrees to return the unspent money in the Capital Reserve Fund should the Agreement be terminated or end without the purchase of the capital item.

12. Capital Expenditure: The Contractor agrees that the amount budgeted for Capital Expenditure in Section 9 is for a capital expense approved by the Department for an expense in the current State Fiscal Year.

12.1. The Contractor agrees that a capital expense is for purchase of an item with a life of greater than one year.

12.2. The Contractor shall provide the Department with three quotes and explanation for the capital item and shall obtain Department approval prior to purchasing the item.

12.3. The Contractor agrees that real estate and major capital building improvements are not an allowable capital expenditure.

13. Retirement: The Contractor shall deposit funds identified as Retirement in Section 9 into a restricted account. The Contractor agrees to obtain prior approval from the Department to withdraw the funding from the restricted account to pay for retirement benefits.

14. Any expenditure that exceeds the approved budgets in Section 5 shall be solely the financial responsibility of the Contractor.

15. The Contractor shall provide supporting documentation, when required by the Department, to support evidence of actual expenditures, in accordance with the Department approved budgets in Section 5.

16. When the contract price limitation is reached the program shall continue to operate at full capacity at no charge to the Department for the duration of the contract period.

17. Funding may not be used to replace funding for a program already funded from another source.

18. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this Contract may be withheld, in whole or in part, in the event of noncompliance with any State or Federal law, rule or regulation applicable to the services provided, or if the said services have not been completed in accordance with the terms and conditions of this Agreement.

19. The Department reserves the right to recover any program funds not used, in whole or in part, for the purposes stated in this Agreement from the Contractor within one hundred and twenty (120) days of the Completion Date.

20. Contractor will have forty-five (45) days from the end of each State Fiscal Year to submit to the Department final invoices for payment. Any adjustments made to a prior invoice will need to be accompanied by supporting documentation.

Exhibit B-1

BUDGET FORM

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

Bidder Name: Connections Peer Support Center

Budget Request for: Peer Support Services
(Name of RFP)

Budget Period: 7/1/16 through 6/30/17

Line Item Budget Reference Number	Line Item Budget Description	Total Amount
600	PERSONNEL COSTS	
601	Salary & Wages	133,344
602	Employee Benefit	33,061
603	Payroll taxes	10,201
	Subtotal	176,605
620	PROFESSIONAL FEES	
624	Accounting	6,600
625	Audit Fees	7,500
626	Legal Fees	0
627	Other Professional Fees and Consultants	2,400
	Subtotal	16,500
630	STAFF DEVELOPMENT AND TRAINING	
631	Publications and Journals	0
632	In-Service Training	1,000
633	Conferences and Conventions	0
634	Other Staff Development	0
	Subtotal	1,000
640	OCCUPANCY COSTS	
641	Rent	0
642	Mortgage Payments	11,260
643	Heating Costs	3,500
644	Other Utilities	4,200
645	Maintenance and Repairs	2,500
646	Taxes	0
647	Other Occupancy Costs	0
	Subtotal	21,460
650	CONSUMABLE SUPPLIES	
651	Office	500
652	Building/Household	700
653	Rehabilitation/Training	150
655	Food	1,500
657	Other Consumable Supplies	1,000
	Subtotal	3,850
	Other Expenses	
660	CAPITAL EXPENDITURES	0
665	DEPRECIATION	2,901
670	EQUIPMENT RENTAL	3,600
680	EQUIPMENT MAINTENANCE	1,576
700	ADVERTISING	250
710	PRINTING	1,200
720	TELEPHONE/COMMUNICATIONS	2,800
730	POSTAGE/SHIPPING	500
	Subtotal	12,827
740	TRANSPORTATION	
741	Board Members	700
742	Staff	2,500
743	Members and Participants	4,000
	Subtotal	7,200
750	**Assistance to Individuals**	
751	Client Services	0
752	Clothing	0
	Subtotal	0
760	INSURANCE	
762	Vehicles	1,000
763	Comprehensive Property & Liability	3,600
800	OTHER EXPENDITURES	780
801	INTEREST EXPENSE	0
	Subtotal	5,380
	TOTAL PROGRAM EXPENSES	**244,822**

Contractor Initials CH
Date: 5/31/16

Exhibit B-2

BUDGET FORM

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

Bidder Name: Connections Peer Support Center

Budget Request for: Peer Support Services
(Name of RFP)

Budget Period: 7/1/17 through 6/30/18

Line Item Budget Reference Number	Line Item Budget Description	Total Amount
600	PERSONNEL COSTS	
601	Salary & Wages	133,344
602	Employee Benefit	33,061
603	Payroll taxes	10,201
	Subtotal	176,605
620	PROFESSIONAL FEES	
624	Accounting	6,600
625	Audit Fees	7,500
626	Legal Fees	0
627	Other Professional Fees and Consultants	2,400
	Subtotal	16,500
630	STAFF DEVELOPMENT AND TRAINING	
631	Publications and Journals	0
632	In-Service Training	1,000
633	Conferences and Conventions	0
634	Other Staff Development	0
	Subtotal	1,000
640	OCCUPANCY COSTS	
641	Rent	0
642	Mortgage Payments	11,260
643	Heating Costs	3,500
644	Other Utilities	4,200
645	Maintenance and Repairs	2,500
646	Taxes	0
647	Other Occupancy Costs	0
	Subtotal	21,460
650	CONSUMABLE SUPPLIES	
651	Office	500
652	Building/Household	700
653	Rehabilitation/Training	150
655	Food	1,500
657	Other Consumable Supplies	1,000
	Subtotal	3,850
	Other Expenses	
660	CAPITAL EXPENDITURES	
665	DEPRECIATION	2,901
670	EQUIPMENT RENTAL	3,600
680	EQUIPMENT MAINTENANCE	1,576
700	ADVERTISING	250
710	PRINTING	1,200
720	TELEPHONE/COMMUNICATIONS	2,800
730	POSTAGE/SHIPPING	500
	Subtotal	12,827
740	TRANSPORTATION	
741	Board Members	700
742	Staff	2,500
743	Members and Participants	4,000
	Subtotal	7,200
750	Assistance to Individuals	
751	Client Services	0
752	Clothing	0
	Subtotal	0
760	INSURANCE	
762	Vehicles	1,000
763	Comprehensive Property & Liability	3,600
800	OTHER EXPENDITURES	780
801	INTEREST EXPENSE	0
	Subtotal	5,380
	TOTAL PROGRAM EXPENSES	244,822

Contractor Initials CH
Date: 5/31/16

SPECIAL PROVISIONS

Contractors Obligations: The Contractor covenants and agrees that all funds received by the Contractor under the Contract shall be used only as payment to the Contractor for services provided to eligible individuals and, in the furtherance of the aforesaid covenants, the Contractor hereby covenants and agrees as follows:

1. **Compliance with Federal and State Laws:** If the Contractor is permitted to determine the eligibility of individuals such eligibility determination shall be made in accordance with applicable federal and state laws, regulations, orders, guidelines, policies and procedures.

2. **Time and Manner of Determination:** Eligibility determinations shall be made on forms provided by the Department for that purpose and shall be made and remade at such times as are prescribed by the Department.

3. **Documentation:** In addition to the determination forms required by the Department, the Contractor shall maintain a data file on each recipient of services hereunder, which file shall include all information necessary to support an eligibility determination and such other information as the Department requests. The Contractor shall furnish the Department with all forms and documentation regarding eligibility determinations that the Department may request or require.

4. **Fair Hearings:** The Contractor understands that all applicants for services hereunder, as well as individuals declared ineligible have a right to a fair hearing regarding that determination. The Contractor hereby covenants and agrees that all applicants for services shall be permitted to fill out an application form and that each applicant or re-applicant shall be informed of his/her right to a fair hearing in accordance with Department regulations.

5. **Gratuities or Kickbacks:** The Contractor agrees that it is a breach of this Contract to accept or make a payment, gratuity or offer of employment on behalf of the Contractor, any Sub-Contractor or the State in order to influence the performance of the Scope of Work detailed in Exhibit A of this Contract. The State may terminate this Contract and any sub-contract or sub-agreement if it is determined that payments, gratuities or offers of employment of any kind were offered or received by any officials, officers, employees or agents of the Contractor or Sub-Contractor.

6. **Retroactive Payments:** Notwithstanding anything to the contrary contained in the Contract or in any other document, contract or understanding, it is expressly understood and agreed by the parties hereto, that no payments will be made hereunder to reimburse the Contractor for costs incurred for any purpose or for any services provided to any individual prior to the Effective Date of the Contract and no payments shall be made for expenses incurred by the Contractor for any services provided prior to the date on which the individual applies for services or (except as otherwise provided by the federal regulations) prior to a determination that the individual is eligible for such services.

7. **Conditions of Purchase:** Notwithstanding anything to the contrary contained in the Contract, nothing herein contained shall be deemed to obligate or require the Department to purchase services hereunder at a rate which reimburses the Contractor in excess of the Contractors costs, at a rate which exceeds the amounts reasonable and necessary to assure the quality of such service, or at a rate which exceeds the rate charged by the Contractor to ineligible individuals or other third party funders for such service. If at any time during the term of this Contract or after receipt of the Final Expenditure Report hereunder, the Department shall determine that the Contractor has used payments hereunder to reimburse items of expense other than such costs, or has received payment in excess of such costs or in excess of such rates charged by the Contractor to ineligible individuals or other third party funders, the Department may elect to:
   7.1. Renegotiate the rates for payment hereunder, in which event new rates shall be established;
   7.2. Deduct from any future payment to the Contractor the amount of any prior reimbursement in excess of costs;

7.3. Demand repayment of the excess payment by the Contractor in which event failure to make such repayment shall constitute an Event of Default hereunder. When the Contractor is permitted to determine the eligibility of individuals for services, the Contractor agrees to reimburse the Department for all funds paid by the Department to the Contractor for services provided to any individual who is found by the Department to be ineligible for such services at any time during the period of retention of records established herein.

RECORDS: MAINTENANCE, RETENTION, AUDIT, DISCLOSURE AND CONFIDENTIALITY:

8. **Maintenance of Records:** In addition to the eligibility records specified above, the Contractor covenants and agrees to maintain the following records during the Contract Period:
   8.1. Fiscal Records: books, records, documents and other data evidencing and reflecting all costs and other expenses incurred by the Contractor in the performance of the Contract, and all income received or collected by the Contractor during the Contract Period, said records to be maintained in accordance with accounting procedures and practices which sufficiently and properly reflect all such costs and expenses, and which are acceptable to the Department, and to include, without limitation, all ledgers, books, records, and original evidence of costs such as purchase requisitions and orders, vouchers, requisitions for materials, inventories, valuations of in-kind contributions, labor time cards, payrolls, and other records requested or required by the Department.
   8.2. Statistical Records: Statistical, enrollment, attendance or visit records for each recipient of services during the Contract Period, which records shall include all records of application and eligibility (including all forms required to determine eligibility for each such recipient), records regarding the provision of services and all invoices submitted to the Department to obtain payment for such services.
   8.3. Medical Records: Where appropriate and as prescribed by the Department regulations, the Contractor shall retain medical records on each patient/recipient of services.

9. **Audit:** Contractor shall submit an annual audit to the Department within 60 days after the close of the agency fiscal year. It is recommended that the report be prepared in accordance with the provision of Office of Management and Budget Circular A-133, "Audits of States, Local Governments, and Non Profit Organizations" and the provisions of Standards for Audit of Governmental Organizations, Programs, Activities and Functions, issued by the US General Accounting Office (GAO standards) as they pertain to financial compliance audits.
   9.1. Audit and Review: During the term of this Contract and the period for retention hereunder, the Department, the United States Department of Health and Human Services, and any of their designated representatives shall have access to all reports and records maintained pursuant to the Contract for purposes of audit, examination, excerpts and transcripts.
   9.2. Audit Liabilities: In addition to and not in any way in limitation of obligations of the Contract, it is understood and agreed by the Contractor that the Contractor shall be held liable for any state or federal audit exceptions and shall return to the Department, all payments made under the Contract to which exception has been taken or which have been disallowed because of such an exception.

10. **Confidentiality of Records:** All information, reports, and records maintained hereunder or collected in connection with the performance of the services and the Contract shall be confidential and shall not be disclosed by the Contractor, provided however, that pursuant to state laws and the regulations of the Department regarding the use and disclosure of such information, disclosure may be made to public officials requiring such information in connection with their official duties and for purposes directly connected to the administration of the services and the Contract; and provided further, that the use or disclosure by any party of any information concerning a recipient for any purpose not directly connected with the administration of the Department or the Contractor's responsibilities with respect to purchased services hereunder is prohibited except on written consent of the recipient, his attorney or guardian.

Notwithstanding anything to the contrary contained herein the covenants and conditions contained in the Paragraph shall survive the termination of the Contract for any reason whatsoever.

11. **Reports:** Fiscal and Statistical: The Contractor agrees to submit the following reports at the following times if requested by the Department.
    11.1. Interim Financial Reports: Written interim financial reports containing a detailed description of all costs and non-allowable expenses incurred by the Contractor to the date of the report and containing such other information as shall be deemed satisfactory by the Department to justify the rate of payment hereunder. Such Financial Reports shall be submitted on the form designated by the Department or deemed satisfactory by the Department.
    11.2. Final Report: A final report shall be submitted within thirty (30) days after the end of the term of this Contract. The Final Report shall be in a form satisfactory to the Department and shall contain a summary statement of progress toward goals and objectives stated in the Proposal and other information required by the Department.

12. **Completion of Services:** Disallowance of Costs: Upon the purchase by the Department of the maximum number of units provided for in the Contract and upon payment of the price limitation hereunder, the Contract and all the obligations of the parties hereunder (except such obligations as, by the terms of the Contract are to be performed after the end of the term of this Contract and/or survive the termination of the Contract) shall terminate, provided however, that if, upon review of the Final Expenditure Report the Department shall disallow any expenses claimed by the Contractor as costs hereunder the Department shall retain the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

13. **Credits:** All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Contract shall include the following statement:
    13.1. The preparation of this (report, document etc.) was financed under a Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services.

14. **Prior Approval and Copyright Ownership:** All materials (written, video, audio) produced or purchased under the contract shall have prior approval from DHHS before printing, production, distribution or use. The DHHS will retain copyright ownership for any and all original materials produced, including, but not limited to, brochures, resource directories, protocols or guidelines, posters, or reports. Contractor shall not reproduce any materials produced under the contract without prior written approval from DHHS.

15. **Operation of Facilities: Compliance with Laws and Regulations:** In the operation of any facilities for providing services, the Contractor shall comply with all laws, orders and regulations of federal, state, county and municipal authorities and with any direction of any Public Officer or officers pursuant to laws which shall impose an order or duty upon the contractor with respect to the operation of the facility or the provision of the services at such facility. If any governmental license or permit shall be required for the operation of the said facility or the performance of the said services, the Contractor will procure said license or permit, and will at all times comply with the terms and conditions of each such license or permit. In connection with the foregoing requirements, the Contractor hereby covenants and agrees that, during the term of this Contract the facilities shall comply with all rules, orders, regulations, and requirements of the State Office of the Fire Marshal and the local fire protection agency, and shall be in conformance with local building and zoning codes, by-laws and regulations.

16. **Equal Employment Opportunity Plan (EEOP):** The Contractor will provide an Equal Employment Opportunity Plan (EEOP) to the Office for Civil Rights, Office of Justice Programs (OCR), if it has received a single award of $500,000 or more. If the recipient receives $25,000 or more and has 50 or

more employees, it will maintain a current EEOP on file and submit an EEOP Certification Form to the OCR, certifying that its EEOP is on file. For recipients receiving less than $25,000, or public grantees with fewer than 50 employees, regardless of the amount of the award, the recipient will provide an EEOP Certification Form to the OCR certifying it is not required to submit or maintain an EEOP. Non-profit organizations, Indian Tribes, and medical and educational institutions are exempt from the EEOP requirement, but are required to submit a certification form to the OCR to claim the exemption. EEOP Certification Forms are available at: http://www.ojp.usdoj/about/ocr/pdfs/cert.pdf.

17. **Limited English Proficiency (LEP):** As clarified by Executive Order 13166, Improving Access to Services for persons with Limited English Proficiency, and resulting agency guidance, national origin discrimination includes discrimination on the basis of limited English proficiency (LEP). To ensure compliance with the Omnibus Crime Control and Safe Streets Act of 1968 and Title VI of the Civil Rights Act of 1964, Contractors must take reasonable steps to ensure that LEP persons have meaningful access to its programs.

18. **Pilot Program for Enhancement of Contractor Employee Whistleblower Protections:** The following shall apply to all contracts that exceed the Simplified Acquisition Threshold as defined in 48 CFR 2.101 (currently, $150,000)

CONTRACTOR EMPLOYEE WHISTLEBLOWER RIGHTS AND REQUIREMENT TO INFORM EMPLOYEES OF WHISTLEBLOWER RIGHTS (SEP 2013)

(a) This contract and employees working on this contract will be subject to the whistleblower rights and remedies in the pilot program on Contractor employee whistleblower protections established at 41 U.S.C. 4712 by section 828 of the National Defense Authorization Act for Fiscal Year 2013 (Pub. L. 112-239) and FAR 3.908.

(b) The Contractor shall inform its employees in writing, in the predominant language of the workforce, of employee whistleblower rights and protections under 41 U.S.C. 4712, as described in section 3.908 of the Federal Acquisition Regulation.

(c) The Contractor shall insert the substance of this clause, including this paragraph (c), in all subcontracts over the simplified acquisition threshold.

19. **Subcontractors:** DHHS recognizes that the Contractor may choose to use subcontractors with greater expertise to perform certain health care services or functions for efficiency or convenience, but the Contractor shall retain the responsibility and accountability for the function(s). Prior to subcontracting, the Contractor shall evaluate the subcontractor's ability to perform the delegated function(s). This is accomplished through a written agreement that specifies activities and reporting responsibilities of the subcontractor and provides for revoking the delegation or imposing sanctions if the subcontractor's performance is not adequate. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions.
When the Contractor delegates a function to a subcontractor, the Contractor shall do the following:
19.1. Evaluate the prospective subcontractor's ability to perform the activities, before delegating the function
19.2. Have a written agreement with the subcontractor that specifies activities and reporting responsibilities and how sanctions/revocation will be managed if the subcontractor's performance is not adequate
19.3. Monitor the subcontractor's performance on an ongoing basis

19.4. Provide to DHHS an annual schedule identifying all subcontractors, delegated functions and responsibilities, and when the subcontractor's performance will be reviewed

19.5. DHHS shall, at its discretion, review and approve all subcontracts.

If the Contractor identifies deficiencies or areas for improvement are identified, the Contractor shall take corrective action.

DEFINITIONS

As used in the Contract, the following terms shall have the following meanings:

COSTS: Shall mean those direct and indirect items of expense determined by the Department to be allowable and reimbursable in accordance with cost and accounting principles established in accordance with state and federal laws, regulations, rules and orders.

DEPARTMENT: NH Department of Health and Human Services.

FINANCIAL MANAGEMENT GUIDELINES: Shall mean that section of the Contractor Manual which is entitled "Financial Management Guidelines" and which contains the regulations governing the financial activities of contractor agencies which have contracted with the State of NH to receive funds.

PROPOSAL: If applicable, shall mean the document submitted by the Contractor on a form or forms required by the Department and containing a description of the Services to be provided to eligible individuals by the Contractor in accordance with the terms and conditions of the Contract and setting forth the total cost and sources of revenue for each service to be provided under the Contract.

UNIT: For each service that the Contractor is to provide to eligible individuals hereunder, shall mean that period of time or that specified activity determined by the Department and specified in Exhibit B of the Contract.

FEDERAL/STATE LAW: Wherever federal or state laws, regulations, rules, orders, and policies, etc. are referred to in the Contract, the said reference shall be deemed to mean all such laws, regulations, etc. as they may be amended or revised from the time to time.

CONTRACTOR MANUAL: Shall mean that document prepared by the NH Department of Administrative Services containing a compilation of all regulations promulgated pursuant to the New Hampshire Administrative Procedures Act. NH RSA Ch 541-A, for the purpose of implementing State of NH and federal regulations promulgated thereunder.

SUPPLANTING OTHER FEDERAL FUNDS: The Contractor guarantees that funds provided under this Contract will not supplant any existing federal funds available for these services.

REVISIONS TO GENERAL PROVISIONS

1. 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 of a reduction, termination or modification of appropriated or available funds, the State shall have the right to withhold payment until such funds become available, if ever. The State shall have the right to reduce, terminate or modify services under this Agreement immediately upon giving the Contractor notice of such reduction, termination or modification. The State shall not be required to transfer funds from any other source or account into the Account(s) identified in block 1.6 of the General Provisions, Account Number, or any other account, in the event funds are reduced or unavailable.

2. Subparagraph 10 of the General Provisions of this contract, Termination, is amended by adding the following language;

   10.1 The State may terminate the Agreement at any time for any reason, at the sole discretion of the State, 30 days after giving the Contractor written notice that the State is exercising its option to terminate the Agreement.

   10.2 In the event of early termination, the Contractor shall, within 15 days of notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement, including but not limited to, identifying the present and future needs of clients receiving services under the Agreement and establishes a process to meet those needs.

   10.3 The Contractor shall fully cooperate with the State and shall promptly provide detailed information to support the Transition Plan including, but not limited to, any information or data requested by the State related to the termination of the Agreement and Transition Plan and shall provide ongoing communication and revisions of the Transition Plan to the State as requested.

   10.4 In the event that services under the Agreement, including but not limited to clients receiving services under the Agreement are transitioned to having services delivered by another entity including contracted providers or the State, the Contractor shall provide a process for uninterrupted delivery of services in the Transition Plan.

   10.5 The Contractor shall establish a method of notifying clients and other affected individuals about the transition. The Contractor shall include the proposed communications in its Transition Plan submitted to the State as described above.

3. The Department reserves the right to renew the Contract for up to four additional years, subject to the continued availability of funds, satisfactory performance of services and approval by the Governor and Executive Council.

Contractor Initials CH

Date 5/31/16

CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

ALTERNATIVE I - FOR GRANTEES OTHER THAN INDIVIDUALS

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

This certification is required by the regulations implementing Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.). The January 31, 1989 regulations were amended and published as Part II of the May 25, 1990 Federal Register (pages 21681-21691), and require certification by grantees (and by inference, sub-grantees and sub-contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a grantee (and by inference, sub-grantees and sub-contractors) that is a State may elect to make one certification to the Department in each federal fiscal year in lieu of certificates for each grant during the federal fiscal year covered by the certification. The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment. Contractors using this form should send it to:

Commissioner
NH Department of Health and Human Services
129 Pleasant Street,
Concord, NH 03301-6505

1. The grantee certifies that it will or will continue to provide a drug-free workplace by:
   1.1. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
   1.2. Establishing an ongoing drug-free awareness program to inform employees about
      1.2.1. The dangers of drug abuse in the workplace;
      1.2.2. The grantee's policy of maintaining a drug-free workplace;
      1.2.3. Any available drug counseling, rehabilitation, and employee assistance programs; and
      1.2.4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
   1.3. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
   1.4. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will
      1.4.1. Abide by the terms of the statement; and
      1.4.2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
   1.5. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph 1.4.2 from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer on whose grant activity the convicted employee was working, unless the Federal agency

has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

1.6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 1.4.2, with respect to any employee who is so convicted
   1.6.1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
   1.6.2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

1.7. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1.1, 1.2, 1.3, 1.4, 1.5, and 1.6.

2. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant.

Place of Performance (street address, city, county, state, zip code) (list each location)

Check ☐ if there are workplaces on file that are not identified here.

Contractor Name: Connections Peer Support Center

5/31/16
Date

Carol Hollis
Name:
Title: Vice president

CERTIFICATION REGARDING LOBBYING

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

Programs (indicate applicable program covered):
*Temporary Assistance to Needy Families under Title IV-A
*Child Support Enforcement Program under Title IV-D
*Social Services Block Grant Program under Title XX
*Medicaid Program under Title XIX
*Community Services Block Grant under Title VI
*Child Care Development Block Grant under Title IV

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor).

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, attached and identified as Standard Exhibit E-I.)

3. The undersigned shall require that the language of this certification be included in the award document for sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Contractor Name: Connections Peer Support Center

5/31/16
Date

Carol Holls
Name:
Title:

CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Executive Office of the President, Executive Order 12549 and 45 CFR Part 76 regarding Debarment, Suspension, and Other Responsibility Matters, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal (contract), the prospective primary participant is providing the certification set out below.

2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. If necessary, the prospective participant shall submit an explanation of why it cannot provide the certification. The certification or explanation will be considered in connection with the NH Department of Health and Human Services' (DHHS) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

3. The certification in this clause is a material representation of fact upon which reliance was placed when DHHS determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, DHHS may terminate this transaction for cause or default.

4. The prospective primary participant shall provide immediate written notice to the DHHS agency to whom this proposal (contract) is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549: 45 CFR Part 76. See the attached definitions.

6. The prospective primary participant agrees by submitting this proposal (contract) that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by DHHS.

7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," provided by DHHS, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or involuntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List (of excluded parties).

9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and

information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal government, DHHS may terminate this transaction for cause or default.

PRIMARY COVERED TRANSACTIONS

11. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
    11.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
    11.2. have not within a three-year period preceding this proposal (contract) been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or a contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
    11.3. are not presently indicted for otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (l)(b) of this certification; and
    11.4. have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

12. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal (contract).

LOWER TIER COVERED TRANSACTIONS

13. By signing and submitting this lower tier proposal (contract), the prospective lower tier participant, as defined in 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:
    13.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
    13.2. where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal (contract).

14. The prospective lower tier participant further agrees by submitting this proposal (contract) that it will include this clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions," without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

Contractor Name: Connections Peer Support center

5/31/16
Date

Carol Holles
Name:
Title: Vice President

CERTIFICATION OF COMPLIANCE WITH REQUIREMENTS PERTAINING TO FEDERAL NONDISCRIMINATION, EQUAL TREATMENT OF FAITH-BASED ORGANIZATIONS AND WHISTLEBLOWER PROTECTIONS

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

Contractor will comply, and will require any subgrantees or subcontractors to comply, with any applicable federal nondiscrimination requirements, which may include:

- the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. Section 3789d) which prohibits recipients of federal funding under this statute from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act requires certain recipients to produce an Equal Employment Opportunity Plan;

- the Juvenile Justice Delinquency Prevention Act of 2002 (42 U.S.C. Section 5672(b)) which adopts by reference, the civil rights obligations of the Safe Streets Act. Recipients of federal funding under this statute are prohibited from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act includes Equal Employment Opportunity Plan requirements;

- the Civil Rights Act of 1964 (42 U.S.C. Section 2000d, which prohibits recipients of federal financial assistance from discriminating on the basis of race, color, or national origin in any program or activity);

- the Rehabilitation Act of 1973 (29 U.S.C. Section 794), which prohibits recipients of Federal financial assistance from discriminating on the basis of disability, in regard to employment and the delivery of services or benefits, in any program or activity;

- the Americans with Disabilities Act of 1990 (42 U.S.C. Sections 12131-34), which prohibits discrimination and ensures equal opportunity for persons with disabilities in employment, State and local government services, public accommodations, commercial facilities, and transportation;

- the Education Amendments of 1972 (20 U.S.C. Sections 1681, 1683, 1685-86), which prohibits discrimination on the basis of sex in federally assisted education programs;

- the Age Discrimination Act of 1975 (42 U.S.C. Sections 6106-07), which prohibits discrimination on the basis of age in programs or activities receiving Federal financial assistance. It does not include employment discrimination;

- 28 C.F.R. pt. 31 (U.S. Department of Justice Regulations – OJJDP Grant Programs); 28 C.F.R. pt. 42 (U.S. Department of Justice Regulations – Nondiscrimination; Equal Employment Opportunity; Policies and Procedures); Executive Order No. 13279 (equal protection of the laws for faith-based and community organizations); Executive Order No. 13559, which provide fundamental principles and policy-making criteria for partnerships with faith-based and neighborhood organizations;

- 28 C.F.R. pt. 38 (U.S. Department of Justice Regulations – Equal Treatment for Faith-Based Organizations); and Whistleblower protections 41 U.S.C. §4712 and The National Defense Authorization Act (NDAA) for Fiscal Year 2013 (Pub. L. 112-239, enacted January 2, 2013) the Pilot Program for Enhancement of Contract Employee Whistleblower Protections, which protects employees against reprisal for certain whistle blowing activities in connection with federal grants and contracts.

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

In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, or sex against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, to the applicable contracting agency or division within the Department of Health and Human Services, and to the Department of Health and Human Services Office of the Ombudsman.

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this proposal (contract) the Contractor agrees to comply with the provisions indicated above.

Contractor Name: Connections Peer Support Center

5/31/16
Date

Carol Hollis
Name:
Title: Vice President

CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to $1000 per day and/or the imposition of an administrative compliance order on the responsible entity.

The Contractor identified in Section 1.3 of the General Provisions agrees, by signature of the Contractor's representative as identified in Section 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this contract, the Contractor agrees to make reasonable efforts to comply with all applicable provisions of Public Law 103-227, Part C, known as the Pro-Children Act of 1994.

Contractor Name: Connections Peer Support Center

5/31/16
Date

Carol Holl
Name:
Title: Vice President

HEALTH INSURANCE PORTABLITY ACT
BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement agrees to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191 and with the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160 and 164 applicable to business associates. As defined herein, "Business Associate" shall mean the Contractor and subcontractors and agents of the Contractor that receive, use or have access to protected health information under this Agreement and "Covered Entity" shall mean the State of New Hampshire, Department of Health and Human Services.

(1) Definitions.

a. "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.

b. "Business Associate" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.

c. "Covered Entity" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.

d. "Designated Record Set" shall have the same meaning as the term "designated record set" in 45 CFR Section 164.501.

e. "Data Aggregation" shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.

f. "Health Care Operations" shall have the same meaning as the term "health care operations" in 45 CFR Section 164.501.

g. "HITECH Act" means the Health Information Technology for Economic and Clinical Health Act, TitleXIII, Subtitle D, Part 1 & 2 of the American Recovery and Reinvestment Act of 2009.

h. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164 and amendments thereto.

i. "Individual" shall have the same meaning as the term "individual" in 45 CFR Section 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR Section 164.501(g).

j. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.

k. "Protected Health Information" shall have the same meaning as the term "protected health information" in 45 CFR Section 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

Contractor Initials CH

Date 5/31/16

l. "Required by Law" shall have the same meaning as the term "required by law" in 45 CFR Section 164.103.

m. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his/her designee.

n. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 CFR Part 164, Subpart C, and amendments thereto.

o. "Unsecured Protected Health Information" means protected health information that is not secured by a technology standard that renders protected health information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.

p. Other Definitions - All terms not otherwise defined herein shall have the meaning established under 45 C.F.R. Parts 160, 162 and 164, as amended from time to time, and the HITECH Act.

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

a. Business Associate shall not use, disclose, maintain or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under Exhibit A of the Agreement. Further, Business Associate, including but not limited to all its directors, officers, employees and agents, shall not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.

b. Business Associate may use or disclose PHI:
   I. For the proper management and administration of the Business Associate;
   II. As required by law, pursuant to the terms set forth in paragraph d. below; or
   III. For data aggregation purposes for the health care operations of Covered Entity.

c. To the extent Business Associate is permitted under the Agreement to disclose PHI to a third party, Business Associate must obtain, prior to making any such disclosure, (i) reasonable assurances from the third party that such PHI will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the third party; and (ii) an agreement from such third party to notify Business Associate, in accordance with the HIPAA Privacy, Security, and Breach Notification Rules of any breaches of the confidentiality of the PHI, to the extent it has obtained knowledge of such breach.

d. The Business Associate shall not, unless such disclosure is reasonably necessary to provide services under Exhibit A of the Agreement, disclose any PHI in response to a request for disclosure on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity has an opportunity to object to the disclosure and to seek appropriate relief. If Covered Entity objects to such disclosure, the Business

Contractor Initials CH

Date 5/31/16

Associate shall refrain from disclosing the PHI until Covered Entity has exhausted all remedies.

e. If the Covered Entity notifies the Business Associate that Covered Entity has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Business Associate shall be bound by such additional restrictions and shall not disclose PHI in violation of such additional restrictions and shall abide by any additional security safeguards.

(3) <u>Obligations and Activities of Business Associate</u>.

a. The Business Associate shall notify the Covered Entity's Privacy Officer immediately after the Business Associate becomes aware of any use or disclosure of protected health information not provided for by the Agreement including breaches of unsecured protected health information and/or any security incident that may have an impact on the protected health information of the Covered Entity.

b. The Business Associate shall immediately perform a risk assessment when it becomes aware of any of the above situations. The risk assessment shall include, but not be limited to:

- The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;
- The unauthorized person used the protected health information or to whom the disclosure was made;
- Whether the protected health information was actually acquired or viewed
- The extent to which the risk to the protected health information has been mitigated.

The Business Associate shall complete the risk assessment within 48 hours of the breach and immediately report the findings of the risk assessment in writing to the Covered Entity.

c. The Business Associate shall comply with all sections of the Privacy, Security, and Breach Notification Rule.

d. Business Associate shall make available all of its internal policies and procedures, books and records relating to the use and disclosure of PHI received from, or created or received by the Business Associate on behalf of Covered Entity to the Secretary for purposes of determining Covered Entity's compliance with HIPAA and the Privacy and Security Rule.

e. Business Associate shall require all of its business associates that receive, use or have access to PHI under the Agreement, to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein, including the duty to return or destroy the PHI as provided under Section 3 (l). The Covered Entity shall be considered a direct third party beneficiary of the Contractor's business associate agreements with Contractor's intended business associates, who will be receiving PHI

Contractor Initials CH

Date 5/31/16

pursuant to this Agreement, with rights of enforcement and indemnification from such business associates who shall be governed by standard Paragraph #13 of the standard contract provisions (P-37) of this Agreement for the purpose of use and disclosure of protected health information.

f. Within five (5) business days of receipt of a written request from Covered Entity, Business Associate shall make available during normal business hours at its offices all records, books, agreements, policies and procedures relating to the use and disclosure of PHI to the Covered Entity, for purposes of enabling Covered Entity to determine Business Associate's compliance with the terms of the Agreement.

g. Within ten (10) business days of receiving a written request from Covered Entity, Business Associate shall provide access to PHI in a Designated Record Set to the Covered Entity, or as directed by Covered Entity, to an individual in order to meet the requirements under 45 CFR Section 164.524.

h. Within ten (10) business days of receiving a written request from Covered Entity for an amendment of PHI or a record about an individual contained in a Designated Record Set, the Business Associate shall make such PHI available to Covered Entity for amendment and incorporate any such amendment to enable Covered Entity to fulfill its obligations under 45 CFR Section 164.526.

i. Business Associate shall document such disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR Section 164.528.

j. Within ten (10) business days of receiving a written request from Covered Entity for a request for an accounting of disclosures of PHI, Business Associate shall make available to Covered Entity such information as Covered Entity may require to fulfill its obligations to provide an accounting of disclosures with respect to PHI in accordance with 45 CFR Section 164.528.

k. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within two (2) business days forward such request to Covered Entity. Covered Entity shall have the responsibility of responding to forwarded requests. However, if forwarding the individual's request to Covered Entity would cause Covered Entity or the Business Associate to violate HIPAA and the Privacy and Security Rule, the Business Associate shall instead respond to the individual's request as required by such law and notify Covered Entity of such response as soon as practicable.

l. Within ten (10) business days of termination of the Agreement, for any reason, the Business Associate shall return or destroy, as specified by Covered Entity, all PHI received from, or created or received by the Business Associate in connection with the Agreement, and shall not retain any copies or back-up tapes of such PHI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, Business Associate shall continue to extend the protections of the Agreement, to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business

Associate maintains such PHI. If Covered Entity, in its sole discretion, requires that the Business Associate destroy any or all PHI, the Business Associate shall certify to Covered Entity that the PHI has been destroyed.

(4) **Obligations of Covered Entity**

a. Covered Entity shall notify Business Associate of any changes or limitation(s) in its Notice of Privacy Practices provided to individuals in accordance with 45 CFR Section 164.520, to the extent that such change or limitation may affect Business Associate's use or disclosure of PHI.

b. Covered Entity shall promptly notify Business Associate of any changes in, or revocation of permission provided to Covered Entity by individuals whose PHI may be used or disclosed by Business Associate under this Agreement, pursuant to 45 CFR Section 164.506 or 45 CFR Section 164.508.

c. Covered entity shall promptly notify Business Associate of any restrictions on the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 CFR 164.522, to the extent that such restriction may affect Business Associate's use or disclosure of PHI.

(5) **Termination for Cause**

In addition to Paragraph 10 of the standard terms and conditions (P-37) of this Agreement the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a breach by Business Associate of the Business Associate Agreement set forth herein as Exhibit I. The Covered Entity may either immediately terminate the Agreement or provide an opportunity for Business Associate to cure the alleged breach within a timeframe specified by Covered Entity. If Covered Entity determines that neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.

(6) **Miscellaneous**

a. Definitions and Regulatory References. All terms used, but not otherwise defined herein, shall have the same meaning as those terms in the Privacy and Security Rule, amended from time to time. A reference in the Agreement, as amended to include this Exhibit I, to a Section in the Privacy and Security Rule means the Section as in effect or as amended.

b. Amendment. Covered Entity and Business Associate agree to take such action as is necessary to amend the Agreement, from time to time as is necessary for Covered Entity to comply with the changes in the requirements of HIPAA, the Privacy and Security Rule, and applicable federal and state law.

c. Data Ownership. The Business Associate acknowledges that it has no ownership rights with respect to the PHI provided by or created on behalf of Covered Entity.

d. Interpretation. The parties agree that any ambiguity in the Agreement shall be resolved to permit Covered Entity to comply with HIPAA, the Privacy and Security Rule.

e. Segregation. If any term or condition of this Exhibit I or the application thereof to any person(s) or circumstance is held invalid, such invalidity shall not affect other terms or conditions which can be given effect without the invalid term or condition; to this end the terms and conditions of this Exhibit I are declared severable.

f. Survival. Provisions in this Exhibit I regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the Agreement in section (3) I, the defense and indemnification provisions of section (3) e and Paragraph 13 of the standard terms and conditions (P-37), shall survive the termination of the Agreement.

IN WITNESS WHEREOF, the parties hereto have duly executed this Exhibit I.

Department of Health & Human Services	Connections Peer Support Center
The State	Name of the Contractor
Katja S Fox	Carol Hollis
Signature of Authorized Representative	Signature of Authorized Representative
Katja S Fox	Carol Hollis
Name of Authorized Representative	Name of Authorized Representative
Director	
Title of Authorized Representative	Title of Authorized Representative
6/6/16	
Date	Date

CERTIFICATION REGARDING THE FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA) COMPLIANCE

The Federal Funding Accountability and Transparency Act (FFATA) requires prime awardees of individual Federal grants equal to or greater than $25,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of $25,000 or more. If the initial award is below $25,000 but subsequent grant modifications result in a total award equal to or over $25,000, the award is subject to the FFATA reporting requirements, as of the date of the award.
In accordance with 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), the Department of Health and Human Services (DHHS) must report the following information for any subaward or contract award subject to the FFATA reporting requirements:

1. Name of entity
2. Amount of award
3. Funding agency
4. NAICS code for contracts / CFDA program number for grants
5. Program source
6. Award title descriptive of the purpose of the funding action
7. Location of the entity
8. Principle place of performance
9. Unique identifier of the entity (DUNS #)
10. Total compensation and names of the top five executives if:
    - 10.1. More than 80% of annual gross revenues are from the Federal government, and those revenues are greater than $25M annually and
    - 10.2. Compensation information is not already available through reporting to the SEC.

Prime grant recipients must submit FFATA required data by the end of the month, plus 30 days, in which the award or award amendment is made.
The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of The Federal Funding Accountability and Transparency Act, Public Law 109-282 and Public Law 110-252, and 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:
The below named Contractor agrees to provide needed information as outlined above to the NH Department of Health and Human Services and to comply with all applicable provisions of the Federal Financial Accountability and Transparency Act.

Contractor Name: Connections Peer Support Center

5/31/16
Date

Carol Hollis
Name:
Title:

FORM A

As the Contractor identified in Section 1.3 of the General Provisions, I certify that the responses to the below listed questions are true and accurate.

1. The DUNS number for your entity is: 962070934

2. In your business or organization's preceding completed fiscal year, did your business or organization receive (1) 80 percent or more of your annual gross revenue in U.S. federal contracts, subcontracts, loans, grants, sub-grants, and/or cooperative agreements; and (2) $25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

   ✓ NO ________ YES

   If the answer to #2 above is NO, stop here

   If the answer to #2 above is YES, please answer the following:

3. Does the public have access to information about the compensation of the executives in your business or organization through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C.78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

   ________ NO ________ YES

   If the answer to #3 above is YES, stop here

   If the answer to #3 above is NO, please answer the following:

4. The names and compensation of the five most highly compensated officers in your business or organization are as follows:

   Name: ____________________ Amount: __________

   Name: ____________________ Amount: __________

   Name: ____________________ Amount: __________

   Name: ____________________ Amount: __________

   Name: ____________________ Amount: __________