



Office of Statewide Health
Planning and Development

**REQUEST FOR APPLICATION (RFA) - Single Award
Comprehensive Assessment of Consumer, Family Member,
and Parent/Caregiver Workforce
RFA # 14-5540
Notice to Prospective Applicants**

February 17, 2015

You are invited to review and respond to this Request for Application (RFA), entitled Comprehensive Assessment of Consumer, Family Member, and Parent/Caregiver Workforce. In submitting your application, you must comply with these instructions. Failure to comply with any of the requirements may result in rejection of your application. By submitting a bid, your firm agrees to the terms and conditions stated in this RFA and your proposed Grant Agreement.

This solicitation is published online in the California State Contracts Register at <http://www.eprocure.dgs.ca.gov/CSCRAAds.htm>. To ensure receipt of any addenda that may be issued, and answers to questions posed, interested parties must register online at <http://www.bidsync.com/>.

The Office of Statewide Health Planning and Development (OSHPD) deadline for receipt of application submission is **March 16, 2015, no later than 3:30 p.m. All late, faxed, and/or emailed bids will be rejected** and returned to the bidder. Applications must be received on or before the date and time specified herein (See Section E "Application Requirements and Information").

In the opinion of OSHPD, this RFA is complete and without need of explanation. However, if you have questions, notice any discrepancies or inconsistencies, or need any clarifying information, you must submit your questions via e-mail at OSHPD.MHSAWET@oshpd.ca.gov or can be submitted directly to the BidSync website, no later than the date stated in Section E "Key Action Dates". Please note that no verbal information given will be binding upon the State unless such information is issued in writing as an official addendum, or as answers to questions at the BidSync site.

Agreements entered into with non-State of California entities will be completed as Grant Agreements.

Agreements entered into with State of California agencies will be completed as interagency agreements and shall be governed by Terms and Conditions, Appendix 1, but otherwise subject to the Terms and Conditions of a Grant Agreement herein.

Negotiation of either version of the State of California Terms and Conditions will not be allowed.

This solicitation will result in a single award and one Grant Agreement. See Section E "Evaluation Process" for the evaluation criteria.

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A. Background

In November 2004, California voters approved Proposition 63, the Mental Health Services Act (MHSA). Sections 2 and 3 of the MHSA provide increased funding, personnel and other resources to support public mental health programs and monitor progress toward statewide goals for children, transition age youth, adults, older adults and families. The Workforce, Education and Training (WET) program is one of the components of MHSA and is administered by the Office of Statewide Health Planning and Development (OSHPD).

The WET program is funded through appropriations in the State Budget and promotes among other things: (i) the employment of mental health consumers and family members in the Public Mental Health System (PMHS), and (ii) the inclusion of mental health consumers and incorporation of their viewpoints and experiences in training and education programs. This RFA will result in an agreement with a public, private, or non-profit organization to fund a comprehensive quantitative and qualitative data-driven assessment that gathers and analyzes information on consumer, family member, and parent/caregiver (CFP/C) workforce, positions, education/training, and needs in the PMHS across counties and community based organizations (CBO).

B. Purpose and Description of Services

The WET Five-Year Plan 2014-2019 appropriated \$10,000,000.00 for activities that aim to increase and support consumer and family member employment in the PMHS. OSHPD is issuing this RFA with total funding available of \$400,000 to fund an organization that will develop, collect, aggregate, and analyze data on the consumer, family member, and parent/caregiver workforce in the PMHS. The goal of this RFA is to enter into a Grant Agreement that will engage the Grantee in activities to develop and conduct a comprehensive quantitative and qualitative assessment that gathers information on the following elements:

- a. Number and demographics of CFP/Cs employed within the PMHS across counties including both county and CBO employers.
- b. Different types of positions and the environments that the CFP/C workforce are employed in and the different types of functions they serve in those positions across counties and the nation, and needs across counties and CBOs.
- c. Quantity and type of assistance PMHS employers provide to CFP/C workforce including but not limited to: reasonable accommodations, benefits planning, employer-paid benefits, and/or career advancement/professional development opportunities.
- d. Number of PMHS employers that receive reimbursement and analysis of the type of funding they receive for services provided by their CFP/C workforce.
- e. Current career tracks/ladders for CFP/C workforce across counties and the nation.
- f. Minimum qualifications for CFP/C workforce across counties and the nation.
- g. Minimum qualifications for CFP/C workforce educators/trainers across the state and the nation.
- h. Minimum qualifications for individuals supervising CFP/C workforce across counties and the nation.
- i. Core competencies used for CFP/C workforce across counties and the nation.
- j. Curricula for training CFP/C workforce across the state and nation.
- k. Competency exams, if any, used for CFP/C positions across counties and the nation.

To develop and complete the assessment, the contractor shall work with OSHPD staff to actively engage all 58 of California's county behavioral/mental health programs, CBO's

throughout California, CFPC training organizations, and PMHS workforce in order to complete all of the activities/services within each deliverable:

1. Development of Standardized Survey Templates:

The Contractor shall develop standardized templates that all Counties, CBOs, CFPC training organizations, and PMHS workforce will use to fill out and submit information requested. To develop and implement templates, the contractor shall:

- a. Research templates used by other entities to collect all required information
- b. Draft templates based on research and discussions with OSHPD
 - i. One for the PMHS workforce
 - ii. One (minimum) for key County and CBO personnel
 - iii. One for training organizations
- c. Engage in key informant interviews and hold web-based/telephone focus group(s) with Counties, CBOs, CFPC training organizations, consumer and family member organizations and stakeholders to receive feedback on draft templates proposed
- d. Amend draft templates based on feedback received by stakeholders and submit to OSHPD for final review and approval
- e. Develop web-based surveys based on approved templates
- f. Develop documents that provide Counties, CBOs, CFPC training organizations, and PMHS workforce information on survey templates including:
 - i. Purpose, value of, and incentives for submitting survey
 - ii. Survey key terms and definition for uniformity in response
 - iii. Survey frequently asked questions and contact information for technical assistance on completing survey
 - iv. Complete survey samples which show Counties, CBOs, CFPC training organizations, and PMHS workforce what type of information should be included in the survey template
- g. Grantee shall have up to three (3) months to complete Deliverable 1, Development of Standardized Survey Templates, pg 19.

2. Implementation of Data Gathering Strategies:

To facilitate and increase County, CBO, CFPC training organization, and PMHS workforce participation in surveys, the contractor shall:

- a. Obtain contact information for key personnel and leadership across all Counties and CBOs, and all CFPC training organizations in California
- b. Develop a web-based portal that includes pertinent information regarding surveys and overall needs assessment including:
 - i. Purpose, value of, and incentives for submitting survey
 - ii. Survey key terms and definitions for uniformity in response
 - iii. Survey frequently asked questions and contact information for technical assistance on completing survey
 - iv. Completed survey sample
 - v. Links to the surveys that can serve as a database so surveys can be conducted electronically and not manually
- c. Administer surveys completed as part of Deliverable 1 to all counties, CBOs, CFPC training organizations, and PMHS workforce across California
- d. Provide live survey completion technical assistance via phone and email to all Counties, CBOs, CFPC training organizations and PMHS workforce
- e. Engage in several webinars that provide information and answers questions to all Counties, CBOs, CFPC training organizations and PMHS workforce regarding the surveys purpose, value, incentive, and completion process
- f. Engage in outreach to all Counties, CBOs, CFPC training organizations and PMHS workforce and provide information on survey purpose, value, incentive and completion process via:

- i. Contacting key County, CBO, CFPC training organization and consumer and family member workforce stakeholder organizations and personnel
 - ii. Use of social media
 - iii. Mass emails
 - iv. Presenting at County Mental Health Directors Association meetings, California Mental Health Planning Council meetings, California Mental Health Services Oversight and Accountability Commission meetings, and other meetings that include key County, CBO, CFPC training organization, and consumer and family member workforce leaders to promote and encourage their engagement and leadership in the completion of the survey
 - g. In all outreach activities, include information regarding an incentive to Counties and CBOs that encourages them to participate in the assessment in exchange for receiving additional points in future OSHPD Consumer and Family Member related Employment Requests for Applications (RFA)
 - h. Conduct research on CFPC workforce data that does not require surveys, which may include, but not be limited to academic articles, government reports and any other sources of information
 - i. Grantee shall have up to four (4) months after completion of Deliverable 1 to complete Deliverable 2, Implementation of Data Gathering Strategies, pg 20.
3. Aggregate and Analyze Data, and Develop Reports:

The contractor shall aggregate and analyze information gathered via deliverables one and two and with OSHPD approval develop six (6) reports identified below. Reports one (1) thru five (5) should include a literature review on existing data on the identified topics across the nation and in California and a summary of data collection efforts including methodology for analyzing the data. The information to be included in each respective report shall be as follows:

 - a. Report One
 - i. Number and demographics of CFP/Cs employed within the PMHS across counties including both county and CBOs.
 - b. Report Two
 - i. Different types of positions and the environments that the CFP/C workforce are employed in and the different types of functions they serve in those positions across counties and the nation.
 - ii. Current career tracks/ladders for CFP/C workforce across counties and the nation and needs across counties and CBOs.
 - iii. Minimum qualifications for CFP/C workforce across counties and the nation.
 - iv. Minimum qualifications for individuals supervising CFP/C workforce across counties and the nation.
 - c. Report Three
 - i. Minimum qualifications for CFP/C workforce educators/trainers across the state and the nation.
 - ii. Curricula for training CFP/C workforce across the state and nation.
 - d. Report Four
 - i. Quantity and type of assistance PMHS employers provide to CFP/C workforce including but not limited to: reasonable accommodations, benefits planning, employer-paid benefits, and/or career advancement/professional development opportunities.

- ii. Number of PMHS employers that receive reimbursement and analyzing the type of funding they receive for services provided by their CFP/C workforce.
- e. Report Five
 - i. Core competencies used for CFP/C workforce across counties and the nation.
 - ii. Competency exams, if any, used for CFP/C positions across counties and the nation.
- f. Report Six
 - i. Analysis of data gathering efforts including response rates, successful strategies, and lessons learned.
 - ii. Grantee shall have up to five (5) months after completion of Deliverable 2 to complete Deliverable 3, Aggregate and Analyze Data, and Develop six (6) Reports, pg 21.

Subject to the availability of funds, the period of this Grant Agreement will be from **April 15, 2015** through **April 15, 2016**.

Carefully review and consider the Scope of Work located in Attachment 7, Sample Grant Agreement, in order to complete your application.

C. Minimum Qualifications for Applicants

Applications are requested from any public (including County), private, and/or non-profit organizations that are: (i) able to identify and work with all 58 counties in California, community-based organizations, and CFPC training organizations, and (ii) able to complete all of the activities as described in Section B "Purpose and Description of Services".

D. Developing an Application

In order to develop a successful application, applicants will be required to be responsive to this RFA in its entirety, however, emphasis should be placed on providing the following:

1. Executive Summary: Provide an overview of your ability to provide the services detailed in Section B "Purpose and Description of Services" above.
2. Detailed Work Plan: As a part of Attachment 4, the detailed work plan and a schedule for task completion should include a description of how all the elements in Section B "Purpose and Description of Services" will be addressed. Specifically the work plan should include the following in the order as follows:
 - a. A detailed work plan and schedule identifying how the applicant proposes to complete all the activities under Deliverable 1.
 - i. Deliverable 1 shall be completed in three (3) months or less.
 - b. A detailed work plan and schedule identifying how the applicant proposes to complete all the activities under Deliverable 2.
 - i. Deliverable 2 shall be completed in four (4) months or less.
 - c. A detailed work plan and timeline identifying how the applicant proposes to complete all the reports under Deliverable 3- Aggregate and Analyze Data, and Develop Reports.
 - i. Deliverable 3 shall be completed in five (5) months or less.

3. Project Personnel: The prospective Grantee will submit the titles, job descriptions, and roles of all personnel proposed to work on this project and:
 - a. Identify any sub-contractors that are planned to assist in accomplishing the Scope of Work, including their roles, abilities to provide services, and applicable qualifications. The Grantee will clearly state the projected number of hours the sub-contractors will spend on the project.
 - b. Provide evidence of personnel and organization's demonstrated experience with conducting research and analysis that will be engaged to successfully complete the development of survey templates, implementing data gathering strategies, developing reports and the other associated tasks identified in Section B "Purpose and Description of Services".

4. Professional References: Any application must be accompanied by:
Two professional references as provided in Attachment 3 (Proposer References) that describe the applicant's ability to engage in activities outlined in Section B "Purpose and Description of Services".

5. Cost Detail Format and Requirements:
 - a. The total cost of all tasks through the duration of the Grant Agreement shall not exceed \$400,000. A prospective Grantee may, consistent with the rate proposal worksheet limitations, request the distribution of grant funding under this RFA, but in no event shall total funding for a Grantee under this RFA exceed \$400,000.
 - b. Applicants **shall use** Attachment 5 (Sample Rate Proposal Worksheet) to prepare the cost detail for submission. The Rate Proposal Worksheet shall be consistent with the rate structure limitations in Attachment 5.
 - c. The major budget deliverables and budget parameters under this RFA shall be:
 - i. Deliverable 1- Development of Standardized Survey Templates shall not exceed \$50,000. If awarded, payment shall be paid upon the completion and approval of the developed standardized templates and documents that provide survey information as stated in Section B "Purpose and Description of Services".
 - ii. Deliverable 2- Implementation of Data Gathering Strategies shall not exceed \$225,000. The applicant shall outline an itemized budget in the Sample Rate Proposal Worksheet reflecting the costs for Deliverable 2 using the following line items which are defined below:
 - Personnel Costs: means the total costs of personnel to complete all activities outlined in the application for Deliverable 2.
 - Materials/Supplies Costs: means the total costs of the materials and/or supplies needed in order to complete all activities outlined in the application for Deliverable 2.
 - Travel: means the total costs of travel expenses in order to complete all activities outlined in the application for Deliverable 2.
 - Administrative Costs: is defined as costs that are indirectly attributed to the completion of the program services for Deliverable 2 which can include but not be limited to utilities, rent and other operating expenses.
 - Other (must be specified by applicant):

If awarded, payment shall be made for the costs incurred and verification of successful progress made on completing the required activities as described in Section B "Purpose and Description of Services". The applicant shall submit, in no more than a monthly basis, the Progress Report Template found in Appendix 2 and an invoice documenting the incurred costs by itemized budget to receive payment.

- iii. Deliverable 3- Aggregate and Analyze Data, and Develop reports shall not exceed \$125,000. The applicant shall outline cost per report within the total budget allotted for that individual report. If awarded, payment shall be made upon completion and approval of each individual report identified in Section B "Purpose and Description of Services" per the rate established in the Sample Rate Proposal Worksheet.

E. Application Requirements and Information

1. Key Action Dates:

Event	Date	Time
RFA available to prospective Applicants	February 17, 2015	5:00 PM
Written Question Submittal Deadline	February 20, 2015	4:00 PM
Written responses, if any, to be posted	February 24, 2015	5:00 PM
Mandatory Pre-Application Conference Date	February 27, 2015	3:00 PM
Questions & Answers from Mandatory Pre-Application Conference Posted	March 4, 2015	4:00 PM
Final Date for Application Submission	March 16, 2015	3:30 PM
Notice of Intent to Award	March 26, 2015	4:00 PM
Proposed Grant Agreement Start Date	April 15, 2015	NA

2. Mandatory Pre-Application Conference:

- a. A mandatory pre-application conference is scheduled on **February 27, 2015** 3:00 PM, PDT for the purpose of clarifying the content of this RFA. The mandatory pre-application conference will be available through conference call: (888) 278-0296, Code 233068 or in the OSHPD Sacramento, California office:

OSHPD Offices
400 R Street, Suite, 330
Sacramento, California 95811

- b. Only one authorized representative from each potential applicant is required to attend the mandatory pre-application conference. In the event a potential applicant is unable to attend the mandatory pre-application conference, an authorized representative may attend on their behalf. Subcontractors may not represent a potential applicant at a mandatory pre-application conference. No application will be accepted unless the applicant or his/her authorized representative is in attendance. The representative may only sign in for one potential applicant.
- c. Assistance for applicants requiring reasonable accommodation due to a physical, mental or emotional impairment for the mandatory pre-application conference will be provided by OSHPD upon request. The applicant(s) must call OSHPD at (916) 326-3635 no later than the fifth working day prior to the scheduled date and time of the mandatory pre-application conference to arrange for reasonable accommodation.

3. Submission of Application:

- a. Applications should provide straightforward and concise descriptions of the applicant's ability to satisfy the requirements of this RFA. The application must be complete and accurate. Omissions, inaccuracies or misstatements may be cause for rejection of an application.
- b. All applications must be submitted under **sealed** cover and received by OSHPD by the date and time shown in Section E "Application Requirements and Information", item 1 "Key Action Dates". Applications received after this date and time will not be considered.
- c. A minimum of one (1) original copy of the application must be submitted. The original proposal must be marked "ORIGINAL COPY". All documents contained in the original application package must have original signatures and must be signed by a person who is authorized to bind the applying entity. In addition, applicant **MUST** submit an electronic copy of the application either by e-mail to Brent.Houser@oshpd.ca.gov or include a CD of the application with the submission materials.
- d. Due to limited storage space, the application package should be prepared in the least expensive method (i.e., cover page with staple in upper left-hand corner, no fancy bindings: spiral binding, 3-hole punch, etc.).
- e. The application envelopes **must** be plainly marked with the RFA number and title, your firm name and address, and must be marked with "DO NOT OPEN", as shown in the following example:

Office of Statewide Health Planning and Development
Attn: Brent Houser, Healthcare Workforce Development
Division 400 R Street, Suite 330
Sacramento, CA 95811
RFA #14-5540
Comprehensive Assessment of Consumer, Family
Member, and Parent/Caregiver Workforce
DO NOT OPEN

- f. You are advised that you are responsible for ensuring that your application is received by the above listed contact person by the time and date required. Any application reaching the contact person after the deadline date and time will be returned unopened.
- g. If the application is made under a fictitious name or business title, the actual legal name of applicant must be provided.
- h. Applications not submitted under sealed cover and marked as indicated may be rejected.
- i. All applications shall include the documents identified in Attachment 1, Required Attachment Checklist. Applications not including the proper required attachments shall be deemed non-responsive. A non-responsive application is one that does not meet the basic application requirements.
- j. Applications must be submitted for the performance of all the services described herein. Any deviation from the work specifications will not be considered and may cause an application to be rejected.
- k. An application may be rejected if it is conditional or incomplete, or if it contains any alterations of form or other irregularities of any kind. The State may reject any or all applications and may waive an immaterial deviation in an application. The State's waiver of an immaterial deviation shall in no way modify the RFA document or excuse the applicant from full compliance with all requirements if awarded the Grant Agreement.
- l. Costs incurred for developing applications and in anticipation of award of the Grant

- Agreement are entirely the responsibility of the applicant and shall not be charged to the State of California.
- m. An individual who is authorized to bind the applying firm contractually shall sign the Application/Applicant Certification Sheet, Attachment 2. The signature must indicate the title or position that the individual holds in the firm. An unsigned application may be rejected.
 - n. An applicant may modify an application after its submission by withdrawing its original application and resubmitting a new application prior to the final date for application submission as set forth in the Key Action Dates. Application modifications offered in any other manner, oral or written, will not be considered.
 - o. An applicant may withdraw its application by submitting a written withdrawal request to the State, signed by the applicant or an authorized agent in accordance with (c) above. An applicant may thereafter submit a new application prior to the application submission deadline. Applications may not be withdrawn without cause subsequent to application submission deadline.
 - p. OSHPD may modify the RFA prior to the date fixed for submission of application by the issuance of an addendum to all parties who received an application package.
 - q. OSHPD reserves the right to reject all applications. OSHPD is not required to award a Grant Agreement and will not award a Grant Agreement if budget authority is not granted.
 - r. Before submitting a response to this solicitation, bidders should review, correct all errors and comply with the RFA requirements.
 - s. Where applicable, the applicant should carefully examine work sites and specifications. No additions or increases to the Grant Agreement amount will be made due to a lack of careful examination of work sites and specifications.
 - t. The State does not accept alternate Grant Agreement language from a prospective Grantee. An application with such language will be considered a counter offer and will be rejected. The Terms and Conditions outlined in Attachment 7, Sample Grant Agreement are not negotiable.
 - u. No oral understanding or agreement shall be binding on either party.

4. Evaluation Process:

Up to one (1) contract may be awarded under this RFA. Final award by OSHPD will include consideration of the following elements:

- a. At the time of application opening, each application will be checked for the presence or absence of required information in conformance with the submission requirements of this RFA.
- b. Applications that contain false or misleading statements, or which provide references which do not support an attribute or condition claimed by the applicant may be rejected.
- c. The final awards will be to the highest scored applications. The following evaluation tool will be used to score applications:

Evaluation Tool	Maximum Points
Technical Merit Scoring Criterion	
<p>Detailed Work Plan and Schedules Identify how the Work Plan (tasks the applicant would be implementing) is consistent with activities as described in Section B “Purpose and Description of Services” of this RFA and the schedule (time frame) for task completion is sufficient to effectively accomplish the tasks.</p>	40
<p>Experience with Data Gathering and Analysis Identify how the applicant’s demonstrate experience with conducting research and analysis that will be engaged to successfully complete the development of survey templates, implementing data gathering strategies, developing reports and the other associated tasks identified in Section B “Purpose and Description of Services” is sufficient to effectively accomplish the tasks.</p>	25
<p>Project Personnel Identify the titles, job descriptions, and roles, of each of individual/contractor/sub-contractor proposed to be working on the project.</p>	15
<p>Budget Proposal Lowest offer receives maximum points. Points for other responses will be decreased based on the percentage difference in total cost. Example: Lowest offer is \$300,000.00. Next lowest offer is \$330,000.00. Percentage difference = 10%. Score is 13.5.</p>	15
<p>References References will verify the applicant’s capacity to provide the services described in Section B “Purpose and Description of Services”.</p>	5
Total Possible Points	100

Final selections will be made by OSHPD on the basis of which applications best fit the criteria above.

5. Award and Protest:

- a. A total of \$400,000 shall be available for the Comprehensive Assessment of Consumer, Family Member, and Parent/Caregiver Workforce RFA for FYs 2014-15 and 2015-16.
- b. The total costs of all tasks and milestones cannot exceed \$400,000 per Grant Agreement.
- c. OSHPD reserves the right to determine the number of Grant Agreement(s) to be awarded.
- d. In accordance with Government Code section 11256, OSHPD reserves the right to enter into an Interagency Agreement with a Grantee if the Grantee is a State agency.
- e. Notice of the proposed award shall be posted in a public place in the offices of OSHPD, 400 R Street, Room 359, for five (5) working days prior to awarding the Grant Agreement.
- f. Protest Procedures:

- i. A Letter of Protest must be received at the following address not later than five (5) working days (excluding the first day and including the last day) from the date of the posting of the Notice of Intent to Award:

RFA # 14-5540

Comprehensive Assessment of Consumer, Family Member,
and Parent/Caregiver Workforce

Letter of Protest

Office of Statewide Health Planning and
Development 400 R Street, Suite 330
Sacramento, CA 95811

- ii. The only acceptable delivery method for the Letter of Protest is by a postal service (United States Post Office, Federal Express, etc.). The Letter of Protest cannot be hand delivered by the applicant, faxed, or sent by electronic mail. Any letter received without an original signature and/or by a delivery method other than a postal service will not be considered.
- iii. The Letter of Protest must describe the factors which caused the applicant to conclude that the Evaluation Committee did not follow the prescribed rating standards, explain why the score is in conflict with the rating standards or the Grant Agreement award process described in the RFA, and identify specific information in the application that the applicant believes was overlooked or misinterpreted. The Letter of Protest may not provide any additional information that should have been included in the original application.
- iv. If any applicant files a Letter of Protest, the Grant Agreement shall not be awarded until OSHPD has reviewed the protest.
- v. OSHPD's decision will be rendered within five (5) working days of the receipt of the Letter of Protest and will be considered final.

6. Disposition of Applications:

Upon application opening, all documents submitted in response to this RFA will become the property of the State of California, and will be regarded as public records under the California Public Records Act (Government Code Section 6250 et seq.) and subject to review by the public.

7. Agreement Execution and Performance:

- a. It is anticipated that the Grant Agreement will begin on **April 15, 2015**. No work shall begin until all approvals have been obtained.
- b. Should the Grantee fail to commence work at the agreed upon time, OSHPD, upon five (5) days written notice to the Grantee, reserves the right to terminate the Grant Agreement.
- c. All performance under the Grant Agreement shall be completed on or before the termination date of the Grant Agreement.
- d. OSHPD will evaluate the Grantee(s)' performance to determine whether and to what extent they are meeting the deliverables.
- e. OSHPD reserves the right to cancel the Grant Agreement should the deliverables not meet OSHPD's expectations.

F. REQUIRED ATTACHMENTS

The following pages contain additional Attachments that are a part of this RFA.

- Attachment 1 Required Attachment Check List
- Attachment 2 Application/Applicant Certification Sheet
- Attachment 3 Applicant References
- Attachment 4 Executive Summary, Work Plan and Schedule for Task Completion
- Attachment 5 Sample Rate Proposal Worksheet
- Attachment 6 Payee Data Record (STD 204)
- Attachment 7 Sample Grant Agreement has been included for your reference only. Grant Agreements, if any, may be entered with the successful applicant after the award determination is made. Entry into, and the terms of, any Grant Agreement(s) shall be at the sole discretion of OSHPD.

ATTACHMENT 1
REQUIRED ATTACHMENT CHECK LIST

Applicant Name: _____

A complete application or application package will include the items identified below. Complete this checklist to confirm the items in your application. Place a check mark or “✓” next to each item that you are submitting to the State. For your application to be responsive, all required attachments must be returned. This checklist must be returned with your application package also.

<u>✓</u>	<u>Attachment</u>	<u>Attachment Name/Description</u>
_____	Attachment 1	Required Attachment Check List
_____	Attachment 2	Application/Applicant Certification Sheet
_____	Attachment 3	Applicant References
_____	Attachment 4	Executive Summary, Work Plan and Schedule for Task Completion
_____	Attachment 5	Sample Rate Proposal Worksheet
_____	Attachment 6	Payee Data Record (STD 204)

ATTACHMENT 2
APPLICATION/APPLICANT CERTIFICATION SHEET

This Application/Applicant Certification Sheet must be signed and returned in duplicate with original signatures.

Do not return Section E "Application Requirements and Information" or the "Sample Grant Agreement" at the end of this RFA.

The signature affixed hereon and dated certifies compliance with all the requirements of this application document. The signature below authorizes the verification of this certification.

An Unsigned Application/Applicant Certification Sheet May Be Cause for Rejection

Company Name	Telephone Number
Address	Fax Number
Name	Title
Signature	Date

ATTACHMENT 3
APPLICANT REFERENCES

Submission of this Attachment is mandatory. Failure to complete and return this Attachment with your application will cause your application to be rejected and deemed nonresponsive.

List below two (2) references of similar types of services performed for other entities within the last four (4) years. If two references cannot be provided, please explain why on an attached sheet of paper.

REFERENCE 1			
Name of Firm			
Street Address	City	State	Zip Code
Contact Person	Telephone Number		
Email Address			
Dates of Service	Value or Cost of Service		
Narrative of Service Provided (include timeline and outcomes)			
What is the role of the reference/firm?			

REFERENCE 2			
Name of Firm			
Street Address	City	State	Zip Code
Contact Person	Telephone Number		
Email Address			
Dates of Service	Value or Cost of Service		
Narrative of Service Provided (include timeline and outcomes)			
What is the role of the reference/firm?			

ATTACHMENT 4

Required Application Components as defined in Section D “Developing an Application”

(Attachment 4 should include the Executive Summary, Detailed Work Plan and a Schedule for Task Completion)

ATTACHMENT 5
SAMPLE RATE PROPOSAL WORKSHEET

Applicant Name: _____

Applicant hereby proposes to furnish all services and to perform all work required in accordance with the conditions and scope of services as set forth in the Purpose and Description of Services section and Scope of Work in the Sample Grant Agreement. If awarded, the rates and budget line items outlined in this rate proposal worksheet shall be contractually binding and used when invoicing OSHPD for services provided under the Agreement.

Total Proposal Budget: \$ _____

Costs Detail per Deliverable:

For each major deliverable outlined in the Cost Detail and Format Section, you are required to provide a cost within the identified budget limitations below. For the purposes of completing the detailed budget below, the following shall apply:

1. Deliverable 1- Development of Standardized Survey Templates shall not exceed \$50,000.
 - a. Grantee shall have up to three (3) months to complete Deliverable 1.
 - b. If awarded, payment shall be paid upon the completion and approval of the developed standardized templates, and documents that provide survey information as stated in Section B "Purpose and Description of Services".

2. Deliverable 2- Implementation of Data Gathering Strategies shall not exceed \$225,000. The applicant shall outline an itemized budget in the Sample Rate Proposal Worksheet reflecting the costs for Deliverable 2 using the following line items which are defined below:
 - a. Personnel Costs: means the total costs of personnel to complete all activities outlined in the application for Deliverable 2.
 - b. Materials/Supplies Costs: means the total costs of the materials and/or supplies needed in order to complete all activities outlined in the application for Deliverable 2.
 - c. Travel: means the total costs of travel expenses in order to complete all activities outlined in the application for Deliverable 2.
 - d. Administrative Costs: is defined as costs that are indirectly attributed to the completion of the program services for Deliverable 2 which can include but not be limited to utilities, rent and other operating expenses.
 - e. Other (must be specified by applicant).
 - f. Grantee shall have up to four (4) months after completion of Deliverable 1 to complete Deliverable 2.
 - g. If awarded, payment shall be made for the costs incurred and verification of successful progress made on completing the required activities as described in Section B "Purpose and Description of Services". The applicant shall submit, in no more than a monthly basis, the Progress Report Template found in Appendix 2 and an invoice documenting the incurred costs by itemized budget to receive payment.

3. Deliverable 3-Aggregate and Analyze Data, and Develop reports shall not exceed \$125,000.
 - a. For Deliverable 3, the applicant shall outline cost per report within the total budget allotted for that deliverable.
 - b. Grantee shall have up to five (5) months to complete Deliverable 3.
 - c. If awarded, payment shall be made upon completion and approval of each individual report identified in Section B "Purpose and Description of Services" per the rate established below.

Deliverable	Description of Required Activities	Due Date	Amount
<p>1. Development of Standardized Survey Templates</p>	<p>The Contractor shall develop standardized templates that all Counties, CBOs, CFPC training organizations, and PMHS workforce will use to fill out and submit information requested. To develop and implement templates, the contractor shall:</p> <ul style="list-style-type: none"> a. Research templates used by other entities to collect all required information. b. Draft templates based on research and discussions with OSHPD. <ul style="list-style-type: none"> i. One for the PMHS workforce. ii. One (minimum) for key County and CBO personnel. iii. One for training organizations. c. Engage in key informant interviews and hold web-based/telephone focus group(s) with Counties, CBOs, CFPC training organizations, consumer and family member organizations and stakeholders to receive feedback on draft templates proposed. d. Amend draft templates based on feedback received by stakeholders and submit to OSHPD for final review and approval. e. Develop web-based surveys based on approved templates. f. Develop documents that provide Counties, CBOs, CFPC training organizations, and PMHS workforce information on survey templates including: <ul style="list-style-type: none"> i. Purpose, value of, and incentives for submitting survey. ii. Survey key terms and definition for uniformity in response. iii. Survey frequently asked questions and contact information for technical assistance on completing survey. iv. Complete survey samples which show Counties, CBOs, CFPC training organizations, and PMHS workforce what type of information should be included in the survey template g. Grantee shall have up to three (3) months to complete Deliverable 1. 		\$
<p>Grantee shall have up to three (3) months to complete Deliverable 1. Payment shall be paid upon the completion and approval of the developed standardized templates, and documents that provide survey information as stated in the description of required activities above.</p>			

Deliverable	Description of Required Activities	Due Date	Amount
2. Implementation of Data Gathering Strategies	<p>To facilitate and increase County, CBO, CFPC training organization, and PMHS workforce participation in surveys, the contractor shall:</p> <ul style="list-style-type: none"> a. Obtain contact information for key personnel and leadership across all Counties and CBOs, and all CFPC training organizations in California. b. Develop a web-based portal that includes pertinent information regarding surveys and overall needs assessment including: <ul style="list-style-type: none"> i. Purpose, value of, and incentives for submitting survey. ii. Survey key terms and definitions for uniformity in response. iii. Survey frequently asked questions and contact information for technical assistance on completing survey. iv. Completed survey sample. v. Links to the surveys that can serve as a database so surveys can be conducted electronically and not manually. c. Administer surveys completed as part of Deliverable 1 to all counties, CBOs, CFPC training organizations, and PMHS workforce across California. d. Provide live survey completion technical assistance via phone and email to all Counties, CBOs, CFPC training organizations and PMHS workforce. e. Engage in several webinars that provide information and answers questions to all Counties, CBOs, CFPC training organizations and PMHS workforce regarding the surveys purpose, value, incentive, and completion process. f. Engage in outreach to all Counties, CBOs, CFPC training organizations and PMHS workforce and provide information on survey purpose, value, incentive and completion process via: <ul style="list-style-type: none"> i. Contacting key County, CBO, CFPC training organization and consumer and family member workforce stakeholder organizations and personnel. ii. Use of social media. iii. Mass emails. iv. Presenting at County Mental Health Directors Association meetings, California Mental Health Planning Council meetings, California Mental Health Services Oversight and Accountability Commission meetings, and other meetings that include key County, CBO, training organization, and consumer and family member workforce leaders to promote and encourage their engagement and leadership in the completion of the survey. g. In all outreach activities, include information regarding an incentive to Counties and CBOs that encourages them to participate in the assessment in exchange for receiving additional points in future OSHPD Consumer and Family Member Employment related Requests for Applications (RFA). h. Conduct research on CFPC workforce data that does not require surveys, which may include, but not be limited academic articles, government reports and any other sources of information i. Grantee shall have up to four (4) months to complete deliverable 2. 		Total Costs \$:
			Personnel Costs \$:
			Materials/Supplies Costs \$:
			Travel Costs \$:
			Administrative Costs \$:
			Other, specify \$:

Grantee shall have up to four (4) months after completion of Deliverable 1 to complete Deliverable 2. If awarded, payment shall be made for the costs incurred and verification of successful progress made on completing the required activities as described in Section B "Purpose and Description of Services". The applicant shall submit, in no more than a monthly basis, the Progress Report Template found in Appendix 2 and an invoice documenting the incurred costs by itemized budget to receive payment.

Deliverable	Description of Required Activities	Due Date	Amount
3. Aggregate and Analyze Data, and Develop six (6) Reports	<p>The contractor shall aggregate and analyze information gathered via deliverables one and two and with OSHPD approval, develop six (6) reports identified below. Reports one (1) thru five (5) should include a literature review on existing data on the identified topics across the nation and in California and a summary of data collection efforts including methodology for analyzing the data. The information to be included in each respective report shall be as follows:</p> <ul style="list-style-type: none"> a. Report One <ul style="list-style-type: none"> i. Number and demographics of CFP/Cs employed within the PMHS across counties including both county and CBOs. b. Report Two <ul style="list-style-type: none"> i. Different types of positions and the environments that the CFP/C workforce are employed in and the different types of functions they serve in those positions across counties and the nation. ii. Current career tracks/ladders for CFP/C workforce across counties and the nation and needs across counties and CBOs. iii. Minimum qualifications for CFP/C workforce across counties and the nation. iv. Minimum qualifications for individuals supervising CFP/C workforce across counties and the nation. c. Report Three <ul style="list-style-type: none"> i. Minimum qualifications for CFP/C workforce educators/trainers across the state and the nation. ii. Curricula for training CFP/C workforce across the state and nation. d. Report Four <ul style="list-style-type: none"> i. Quantity and type of assistance PMHS employers provide to CFP/C workforce including but not limited to: reasonable accommodations, benefits planning, employer-paid benefits, and/or career advancement/professional development opportunities. ii. Number of PMHS employers that receive reimbursement and analyzing the type of funding they receive for services provided by their CFP/C workforce. e. Report Five <ul style="list-style-type: none"> i. Core competencies used for CFP/C workforce across counties and the nation. ii. Competency exams, if any, used for CFP/C positions across counties and the nation. f. Report Six <ul style="list-style-type: none"> i. Analysis of data gathering efforts including response rates, successful strategies, and lessons learned. 		Total \$:
			Report 1 \$
			Report 2 \$
			Report 3 \$
			Report 4 \$
			Report 5 \$
			Report 6 \$

Grantee shall have up to five (5) months after completion of Deliverable 2 to complete Deliverable 3. Payment shall be made upon completion and approval of each individual report identified above per the rate indicated for each report.

STATE OF CALIFORNIA-DEPARTMENT OF FINANCE

PAYEE DATA RECORD

STD. 204 (Rev. 6-2003)(REVERSE)(CA ST PKS, EXCEL 9/22/2004)

1	<p><u>Requirement to Complete Payee Data Record, STD. 204</u></p> <p>A completed Payee Data Record, STD. 204, is required for payments to all non-governmental entities and will be kept on file at each State agency. Since each State agency with which you do business must have a separate STD. 204 on file, it is possible for a payee to receive this form from various State agencies.</p> <p>Payees who do not wish to complete the STD. 204 may elect to not do business with the State. If the payee does not complete the STD. 204 and the required payee data is not otherwise provided, payment may be reduced for federal backup withholding and nonresident State income tax withholding. Amounts reported on Information Returns (1099) are in accordance with the Internal Revenue Code and the California Revenue and Taxation Code</p>
2	<p>Enter the payee's legal business name. Sole proprietorships must also include the owner's full name. An individual must list his/her full name. The mailing address should be the address at which the payee chooses to receive correspondence. Do not enter payment address or lock box information here.</p>
3	<p>Check the box that corresponds to the payee business type. Check only one box. Corporations must check the box that identifies the type of corporation. The State of California requires that all parties entering into business transactions that may lead to payment(s) from the State provide their Taxpayer Identification Number (TIN). The TIN is required by the California Revenue and Taxation Code Section 18646 to facilitate tax compliance enforcement activities and the preparation of Form 1099 and other information returns as required by the Internal Revenue Code Section 6109(a).</p> <p>The TIN for individuals and sole proprietorships is the Social Security Number (SSN). Only partnerships, estates, trusts, and corporations will enter their Federal Employer Identification Number (FEIN).</p>
4	<p><u>Are you a California resident or nonresident?</u></p> <p>A corporation will be defined as a "resident" if it has a permanent place of business in California or is qualified through the Secretary of State to do business in California.</p> <p>A partnership is considered a resident partnership if it has a permanent place of business in California. An estate is a resident if the decedent was a California resident at time of death. A trust is a resident if at least one trustee is a California resident.</p> <p>For individuals and sole proprietors, the term "resident" includes every individual who is in California for other than a temporary or transitory purpose and any individual domiciled in California who is absent for a temporary or transitory purpose. Generally, an individual who comes to California for a purpose that will extend over a long or indefinite period will be considered a resident. However, an individual who comes to perform a particular contract of short duration will be considered a nonresident.</p> <p>Payments to all nonresidents may be subject to withholding. Nonresident payees performing services in California or receiving rent, lease, or royalty payments from property (real or personal) located in California will have 7% of their total payments withheld for State income taxes. However, no withholding is required if total payments to the payee are \$1,500 or less for the calendar year.</p> <p>For information on Nonresident Withholding, contact the Franchise Tax Board at the numbers listed below: Withholding Services and Compliance Section: 1-888-792-4900 E-mail address: wscs.gen@ftb.ca.gov For hearing impaired with TDD, call: 1-800-822-6268 Website: www.ftb.ca.gov</p>
5	<p>Provide the name, title, signature, and telephone number of the individual completing this form. Provide the date the form was completed.</p>
6	<p>This section must be completed by the State agency requesting the STD. 204.</p>
	<p><u>Privacy Statement</u></p> <p>Section 7(b) of the Privacy Act of 1974 (Public Law 93-579) requires that any federal, State, or local governmental agency, which requests an individual to disclose their social security account number, shall inform that individual whether that disclosure is mandatory or voluntary, by which statutory or other authority such number is solicited, and what uses will be made of it.</p> <p>It is mandatory to furnish the information requested. Federal law requires that payment for which the requested information is not provided is subject to federal backup withholding and State law imposes noncompliance penalties of up to \$20,000.</p> <p>You have the right to access records containing your personal information, such as your SSN. To exercise that right, please contact the business services unit or the accounts payable unit of the State agency(ies) with which you transact that business.</p> <p>All questions should be referred to the requesting State agency listed on the bottom front of this form.</p>

ATTACHMENT 7
SAMPLE GRANT AGREEMENT

GRANT AGREEMENT BETWEEN THE
OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT AND
«Grantee_Name»

For The
COMPREHENSIVE ASSESSMENT OF CONSUMER, FAMILY MEMBER,
AND PARENT/CAREGIVER WORKFORCE
GRANT AGREEMENT NUMBER «Grant_Number»

THIS GRANT AGREEMENT (“Agreement”) is entered into on «TermStart» (“Effective Date”) by and between the State of California, Office of Statewide Health Planning and Development (hereinafter “OSHPD”) and «Grantee_Name», (the “Grantee”).

WHEREAS, Welfare and Institutions Code Section 5822(g) statutorily authorizes OSHPD to engage in activities that promote the employment of mental health consumers and family members in the mental health system.

WHEREAS, the Healthcare Workforce Development Division (“HWDD”) supports healthcare accessibility through the promotion of a diverse and competent workforce while providing analysis of California's healthcare infrastructure and coordinating healthcare workforce issues.

WHEREAS, counties and community stakeholders have identified the need to provide support the development of individuals with lived experience as consumer, family members, and parents/caregivers who are currently employed or are volunteering in the Public Mental Health System.

WHEREAS, supporting consumer and family member employment is included as a priority strategy under the Mental Health Services Act (MHSA) Workforce Education and Training (WET) Five-Year Plan 2014-2019 which was approved by the California Mental Health Planning Council.

WHEREAS, the Grantee applied to participate in the Comprehensive Assessment of Consumer, Family Member, and Parent/Caregiver Workforce, by submitting an application in response to the Comprehensive Assessment of Consumer, Family Member, and Parent/Caregiver Workforce Request for Application.

WHEREAS, the Comprehensive Assessment of Consumer, Family Member, and Parent/Caregiver Workforce will develop, collect, aggregate, and analyze data on the consumer, family member, and parent/caregiver workforce in the Public Mental Health System.

WHEREAS, the Grantee was selected by OSHPD to receive grant funds through procedures duly adopted by OSHPD for the purpose of administering such grants.

NOW THEREFORE, OSHPD and the Grantee, for the consideration and under the conditions hereinafter set forth, agree as follows:

A. Definitions:

1. "Administrative Costs" means the costs that are indirectly attributed to the completion of the program services for Deliverable 2 which can include but not be limited to utilities, rent and other operating expenses.
2. "Application" means the grant application/proposal submitted by Grantee.
3. "Caregiver" means adoptive parents and their partners, foster parents and their partners, grandparents and their partners who are now or have in the past been the primary caregiver for a child, youth, or adolescent with a mental health challenge who accessed mental health services.
4. "Consumer" means as referred to as Client in *Title 9, CCR, Section 3200.040*, is an individual of any age who is receiving or has received mental health services. The term "client" includes those who refer to themselves as clients, consumers, survivors, patients or ex-patients.
5. "Director" means the Director of the Office of Statewide Health Planning and Development or his designee.
6. "Family Member" means siblings, and their partners, kinship caregivers, friends, and others as defined by the family who is now or was in the past the primary caregiver for a child, youth, adolescent, or adult with a mental health challenge who accessed mental health services.
7. "Grant Agreement/Grant Number" means Grant Number «GrantNumber» awarded to Grantee.
8. "Grantee" means the fiscally responsible entity in charge of administering the Grant Funds and includes the program identified on the grant application.
9. "Grant Funds" means the money provided by OSHPD for the project described by Grantee in its application and Scope of Work.
10. "Lived Experience" can be defined as being either a consumer, family member, parent or caregiver each defined herein.
11. "Other Sources of Funds" means all cash, donations, or in-kind contributions that are required or used to complete the Project beyond in addition to the grant funds provided by this Agreement.
12. "Materials/Supplies Costs" means the total costs of the materials and/or supplies needed in order to complete all activities outlined in the application for Deliverable 2.
13. "Parents" means biological parents and their partners, who are now or have in the past been the primary caregiver for a child, youth, or adolescent with a mental health challenge who accessed mental health services.
14. "Personnel Costs" means the total costs of personnel to complete all activities outlined in the application for Deliverable 2.
15. "Public Mental Health System (PMHS)" means publicly-funded mental health programs/services and entities that are administered, in whole or in part, by the State Departments or county. It does not include programs and/or services administered, in whole or in part by federal, state, county or private correctional entities. *Title 9, CCR, 3200.253*

16. "Public Mental Health System Workforce" means current and prospective department and/or county personnel, county contractors, volunteers, and staff in community-based organizations, who work or will work in the Public Mental Health System. *Title 9, CCR, 3200.254*
14. "Program" means the Grantee's training program(s) listed on the application.
15. "Program Representative" means the representative of the Grantee for which Agreement funds are being awarded.
16. "Project" means the activity described in the Grantee's application and Scope of Work to be accomplished with the grant funds.
17. "State" means the State of California and includes all its Departments, Agencies, Committees and Commissions.
18. "Travel" means the total costs of travel expenses in order to complete all activities outlined in the application for Deliverable 2.

B. Term of the Agreement: This Agreement shall take effect on the <Effective Date> and shall terminate on «TermEnd».

C. Scope of Work:

Grantee will provide to OSHPD a comprehensive quantitative and qualitative data-driven assessment that gathers and analyzes information on Consumer, Family Member, and Parent/Caregiver (CFP/C) workforce positions, education/training, and needs in the Public Mental Health System (PMHS) across counties and community based organizations (CBO). Grantee shall engage in activities to develop and conduct a comprehensive quantitative and qualitative assessment that gathers information on the following elements:

- a. Number and demographics of CFP/Cs employed within the PMHS across counties including both county and CBO employers
- b. Different types of positions and the environments that the CFP/C workforce are employed in and the different types of functions they serve in those positions across counties and the nation and needs across counties and CBOs.
- c. Quantity and type of assistance PMHS employers provide to CFP/C workforce including but not limited to: reasonable accommodations, benefits planning, employer-paid benefits, and/or career advancement/professional development opportunities.
- d. Number of PMHS employers that receive reimbursement and analysis of the type of funding they receive for services provided by their CFP/C workforce.
- e. Current career tracks/ladders for CFP/C workforce across counties and the nation.
- f. Minimum qualifications for CFP/C workforce across counties and the nation.
- g. Minimum qualifications for CFP/C workforce educators/trainers across the state and the nation.
- h. Minimum qualifications for individuals supervising CFP/C workforce across counties and the nation.
- i. Core competencies used for CFP/C workforce across counties and the nation.
- j. Curricula for training CFP/C workforce across the state and nation.
- k. Competency exams, if any, used for CFP/C positions across counties and the nation.

To develop and complete the assessment, the contractor shall work with OSHPD staff to actively engage all 58 of California's county behavioral/mental health programs, CBO's throughout California, CFPC training organizations, and PMHS workforce in order to complete all of the activities/services within each deliverable:

1. Development of Standardized Survey Templates:

The Contractor shall develop standardized templates that all Counties, CBOs, CFPC training organizations, and PMHS workforce will use to fill out and submit information requested. To develop and implement templates, the contractor shall:

- a. Research templates used by other entities to collect all required information.
- b. Draft templates based on research and discussions with OSHPD.
 - i. One for the PMHS workforce.
 - ii. One (minimum) for key County and CBO personnel.
 - iii. One for training organizations.
- c. Engage in key informant interviews and hold web-based/telephone focus group(s) with Counties, CBOs, CFPC training organizations, consumer and family member organizations and stakeholders to receive feedback on draft templates proposed.
- d. Amend draft templates based on feedback received by stakeholders and submit to OSHPD for final review and approval.
- e. Develop web-based surveys based on approved templates.
- f. Develop documents that provide Counties, CBOs, CFPC training organizations, and PMHS workforce information on survey templates including:
 - i. Purpose, value of, and incentives for submitting survey.
 - ii. Survey key terms and definition for uniformity in response.
 - iii. Survey frequently asked questions and contact information for technical assistance on completing survey.
 - iv. Complete survey samples which show Counties, CBOs, CFPC training organizations, and PMHS workforce what type of information should be included in the survey template.

Grantee shall have up to three (3) months to complete Deliverable 1.

2. Implementation of Data Gathering Strategies:

To facilitate and increase County, CBO, CFPC training organization, and PMHS workforce participation in surveys, the contractor shall:

- a. Obtain contact information for key personnel and leadership across all Counties and CBOs, and all CFPC training organizations in California.
- b. Develop a web-based portal that includes pertinent information regarding surveys and overall needs assessment including:
 - i. Purpose, value of, and incentives for submitting survey.
 - ii. Survey key terms and definitions for uniformity in response.
 - iii. Survey frequently asked questions and contact information for technical assistance on completing survey.
 - iv. Completed survey sample.
 - v. Links to the surveys that can serve as a database so surveys can be conducted electronically and not manually.
- c. Administer surveys completed as part of Deliverable 1 to all counties, CBOs, CFPC training organizations, and PMHS workforce across California.
- d. Provide live survey completion technical assistance via phone and email to all Counties, CBOs, CFPC training organizations and PMHS workforce.
- e. Engage in several webinars that provide information and answers questions to all Counties, CBOs, CFPC training organizations and PMHS workforce regarding the surveys purpose, value, incentive, and completion process.
- f. Engage in outreach to all Counties, CBOs, CFPC training organizations and PMHS workforce and provide information on survey purpose, value, incentive and completion process via:
 - i. Contacting key County, CBO, CFPC training organization and consumer and family member workforce stakeholder organizations and personnel.
 - ii. Use of social media.
 - iii. Mass emails.

- iv. Presenting at County Mental Health Directors Association meetings, California Mental Health Planning Council meetings, California Mental Health Services Oversight and Accountability Commission meetings, and other meetings that include key County, CBO, CFPC training organization, and consumer and family member workforce leaders to promote and encourage their engagement and leadership in the completion of the survey.
 - g. In all outreach activities, include information regarding an incentive to Counties and CBOs that encourages them to participate in the assessment in exchange for receiving additional points in future OSHPD Consumer and Family Member related Employment Requests for Applications (RFA)
 - h. Conduct research on CFPC workforce data that does not require surveys, which may include, but not be limited to academic articles, government reports and any other sources of information
- Grantee shall have up to four (4) months after completion of Deliverable 1 to complete Deliverable 2.

3. Aggregate and Analyze Data, and Develop Reports:

The contractor shall aggregate and analyze information gathered via deliverables one and two and with OSHPD approval develop six (6) reports identified below. Reports one (1) thru five (5) should include a literature review on existing data on the identified topics across the nation and in California and a summary of data collection efforts including methodology for analyzing the data. The information to be included in each respective report shall be as follows:

a. Report One

- i. Number and demographics of CFP/Cs employed within the PMHS across counties including both county and CBOs.

b. Report Two

- i. Different types of positions and the environments that the CFP/C workforce are employed in and the different types of functions they serve in those positions across counties and the nation.
- ii. Current career tracks/ladders for CFP/C workforce across counties and the nation and needs across counties and CBOs.
- iii. Minimum qualifications for CFP/C workforce across counties and the nation.
- iv. Minimum qualifications for individuals supervising CFP/C workforce across counties and the nation.

c. Report Three

- i. Minimum qualifications for CFP/C workforce educators/trainers across the state and nation.
- ii. Curricula for training CFP/C workforce across the state and the nation.

d. Report Four

- i. Quantity and type of assistance PMHS employers provide to CFP/C workforce including but not limited to: reasonable accommodations, benefits planning, employer-paid benefits, and/or career advancement/professional development opportunities.
- ii. Number of PMHS employers that receive reimbursement and analyzing the type of funding they receive for services provided by their CFP/C workforce.

e. Report Five

- i. Core competencies used for CFP/C workforce across counties and the nation.
- ii. Competency exams, if any, used for CFP/C positions across counties and the nation.

f. Report Six

- i. Analysis of data gathering efforts including response rates, successful strategies, and lessons learned.

Grantee shall have up to five (5) months after completion of Deliverable 2 to complete Deliverable 3.

D. Program Reports

- a. Grantee shall meet with OSHPD, as requested by OSHPD, to provide a status update on progress made towards completing deliverables as outlined in the Scope of Work.
- b. Grantee shall submit, in no more than a monthly basis, the Progress Report Template found in

Appendix 2 to demonstrate that successful progress has been made on completed the required activities described in the Scope of Work for Deliverable 2.

- c. OSHPD reserves the right to cancel this Agreement in accordance with Section I, Terms and Conditions, if, in any fiscal year, the deliverables do not meet OSHPD's expectations.

E. Invoicing

- a. For services satisfactorily rendered in accordance with the Scope of Work, and upon receipt and approval of the invoices, OSHPD agrees to compensate the Grantee in accordance with the rates specified in Section F "Budget Detail".
- b. The Grantee shall not invoice OSHPD for work performed under this Agreement until the Grantee receives confirmation from OSHPD that the deliverables reflected in the invoice have been completed to OSHPD's satisfaction.
- c. Invoices shall be submitted upon completion of each deliverable in accordance with Section F "Budget Detail".
- d. Invoices will not be paid until the deliverables have been reviewed and approved.
- e. The total amount payable to the Grantee under this Agreement shall not exceed «Amount» («Amt_Spelled»).
- f. The following items are required on all invoices:
 - i. Invoice should be on Grantees printed letterhead with Grantee name and address;
 - ii. Costs incurred shall be itemized in accordance with Section F "Budget Detail";
 - iii. Date(s) of services for Progress Reports provided;
 - iv. OSHPD Agreement number 14-XXXX;
 - v. Invoice date;
 - vi. Invoice total; and
 - vii. Authorizing signature.
- g. To expedite the processing of invoices submitted to OSHPD for payment, all invoices shall be submitted in triplicate to OSHPD Accounting at the following address:

Office of Statewide Health Planning and Development (OSHPD)

Attn: Accounting 400 R Street, Suite 359

Sacramento, CA 95811

- h. Payment will be made in accordance with, and within the time specified in, Government Code Chapter 4.5, commencing with Section 927.

F. Budget Detail:

- a. OSHPD shall reimburse the Grantee for the expenses incurred in performing the Scope of Work, consistent with the rates as identified in the table below. Grantee will complete the deliverables in accordance with the budget and timeline set forth below:

Deliverable	Description of Required Activities	Due Date	Amount
<p>1. Development of Standardized Survey Templates</p>	<p>The Contractor shall develop standardized templates that all Counties, CBOs, CFPC training organizations, and PMHS workforce will use to fill out and submit information requested. To develop and implement templates, the contractor shall:</p> <ul style="list-style-type: none"> a. Research templates used by other entities to collect all required information. b. Draft templates based on research and discussions with OSHPD. <ul style="list-style-type: none"> i. One for the PMHS workforce. ii. One (minimum) for key County and CBO personnel. iii. One for training organizations. c. Engage in key informant interviews and hold web-based/telephone focus group(s) with Counties, CBOs, CFPC training organizations, and consumer and family member organizations and stakeholders to receive feedback on draft templates proposed. d. Amend draft templates based on feedback received by stakeholders and submit to OSHPD for final review and approval. e. Develop web-based surveys based on approved templates. f. Develop documents that provide Counties, CBOs, CFPC training organizations, and PMHS workforce information on survey templates including: <ul style="list-style-type: none"> i. Purpose, value of, and incentives for submitting survey. ii. Survey key terms and definition for uniformity in response. iii. Survey frequently asked questions and contact information for technical assistance on completing survey. iv. Complete survey samples which show Counties, CBOs, CFPC training organizations, and PMHS workforce what type of information should be included in the survey template. g. Grantee shall have up to three (3) months to complete Deliverable 1. 		\$
<p>Grantee shall have up to three (3) months to complete Deliverable 1. Payment shall be paid upon the completion and approval of the developed standardized templates, and documents that provide survey information as stated in the description of required activities above.</p>			

Deliverable	Description of Required Activities	Due Date	Amount
2. Implementation of Data Gathering Strategies	<p>To facilitate and increase County, CBO, CFPC training organization, and PMHS workforce participation in surveys, the contractor shall:</p> <ul style="list-style-type: none"> a. Obtain contact information for key personnel and leadership across all Counties and CBOs, and all CFPC training organizations in California. b. Develop a web-based portal that includes pertinent information regarding surveys and overall needs assessment including: <ul style="list-style-type: none"> i. Purpose, value of, and incentives for submitting survey. ii. Survey key terms and definitions for uniformity in response. iii. Survey frequently asked questions and contact information for technical assistance on completing survey. iv. Completed survey sample. v. Links to the surveys that can serve as a database so surveys can be conducted electronically and not manually. c. Administer surveys completed as part of Deliverable 1 to all counties, CBOs, CFPC training organizations and PMHS workforce across California. d. Provide live survey completion technical assistance via phone and email to all Counties, CBOs, CFPC training organizations and PMHS workforce. e. Engage in several webinars that provide information and answers questions to all Counties, CBOs, CFPC training organizations and PMHS workforce regarding the surveys purpose, value, incentive, and completion process. f. Engage in outreach to all Counties, CBOs, CFPC training organizations and PMHS workforce and provide information on survey purpose, value, incentive and completion process via: <ul style="list-style-type: none"> i. Contacting key County, CBO, CFPC training organization and consumer and family member workforce stakeholder organizations and personnel. ii. Use of social media. iii. Mass emails. iv. Presenting at County Mental Health Directors Association meetings, California Mental Health Planning Council meetings, California Mental Health Services Oversight and Accountability Commission meetings, and other meetings that include key County, CBO, CFPC training organizations, and consumer and family member workforce leaders to promote and encourage their engagement and leadership in the completion of the survey. g. In all outreach activities, include information regarding an incentive to Counties and CBOs that encourages them to participate in the assessment in exchange for receiving additional points in future OSHPD Consumer and Family Member related Employment Requests for Applications (RFA). h. Conduct research on CFPC workforce data that does not require surveys, which may include, but not be limited to academic articles, government reports and any other sources of information. i. Grantee shall have up to four (4) months to complete Deliverable 2. 		Total Costs \$:
			Personnel Costs \$:
			Materials/Supplies Costs \$:
			Travel Costs \$:
			Administrative Costs \$:
			Other, specify \$:

Grantee shall have up to four (4) months after completion of Deliverable 1 to complete Deliverable 2. If awarded, payment shall be made for the costs incurred and verification of successful progress made on completing the required activities as described in Section B "Purpose and Description of Services". The applicant shall submit, in no more than a monthly basis, the Progress Report Template found in Appendix 2 and an invoice documenting the incurred costs by itemized budget to receive payment.

Deliverable	Description of Required Activities	Due Date	Amount
3. Aggregate and Analyze Data, and Develop six (6) Reports	<p>The contractor shall aggregate and analyze information gathered via deliverables one and two and with OSHPD approval, develop six (6) reports identified below. Reports one (1) thru five (5) should include a literature review on existing data on the identified topics across the nation and in California and a summary of data collection efforts including methodology for analyzing the data. The information to be included in each respective report shall be as follows:</p> <ul style="list-style-type: none"> a. Report One <ul style="list-style-type: none"> i. Number and demographics of CFP/Cs employed within the PMHS across counties including both county and CBOs. b. Report Two <ul style="list-style-type: none"> i. Different types of positions and the environments that the CFP/C workforce are employed in and the different types of functions they serve in those positions across counties and the nation. ii. Current career tracks/ladders for CFP/C workforce across counties and the nation and needs across counties and CBOs. iii. Minimum qualifications for CFP/C workforce across counties and the nation. iv. Minimum qualifications for individuals supervising CFP/C workforce across counties and the nation. c. Report Three <ul style="list-style-type: none"> i. Minimum qualifications for CFP/C workforce educators/trainers across the state and nation. ii. Curricula for training CFP/C workforce across the state and the nation. d. Report Four <ul style="list-style-type: none"> i. Quantity and type of assistance PMHS employers provide to CFP/C workforce including but not limited to: reasonable accommodations, benefits planning, employer-paid benefits, and/or career advancement/professional development opportunities. ii. Number of PMHS employers that receive reimbursement and analyzing the type of funding they receive for services provided by their CFP/C workforce. e. Report Five <ul style="list-style-type: none"> i. Core competencies used for CFP/C workforce across counties and the nation ii. Competency exams, if any, used for CFP/C positions across counties and the nation. f. Report Six <ul style="list-style-type: none"> i. Analysis of data gathering efforts including response rates, successful strategies, and lessons learned. g. Grantee shall have up to five (5) months to complete Deliverable 3. 		Total \$:
			Report 1 \$
			Report 2 \$
			Report 3 \$
			Report 4 \$
			Report 5 \$
			Report 6 \$

Grantee shall have up to five (5) months after completion of Deliverable 2 to complete Deliverable 3 and the description of the required activities. Payment shall be made upon completion and approval of each individual report identified above per the rate indicated for each report.

G. Budget Contingency Clause:

- a. It is mutually agreed that if the Budget Act of the current year and/or any subsequent years covered under this Agreement does not appropriate sufficient funds for the program, this Agreement shall be of no further force and effect. In this event, OSHPD shall have no liability to pay any funds whatsoever to Grantee or to furnish any other considerations under this Agreement and Grantee shall not be obligated to perform any provisions of this Agreement.
- b. If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this program, OSHPD shall have the option to either cancel this Agreement with no liability occurring to OSHPD, or offer an Agreement amendment to Grantee to reflect the reduced amount.

H. Budget Adjustments:

- a. All requests to change the budget shall be submitted in writing for OSHPD approval and shall include an explanation for the reallocation of funds by the Grantee. An accounting of how the funds were expended will also be submitted with the final report.
- b. All requests for extending the grant period shall be submitted in writing to OSHPD for approval. Requests for a time extension must be made to OSHPD no later than one-hundred twenty (120) calendar days prior to the expiration of the Agreement. There shall be no activity on an Agreement after its expiration.

I. Terms and Conditions:

Except as provided in Appendix 1, Terms and Conditions for Interagency Agreements, the following terms and conditions shall apply to all Grantees. Agreements with the State, the Regents of the University of California and the California State University system shall be treated as Interagency Agreements and the language in Appendix 1 shall replace the language in this Section. The Terms and Conditions in this Section shall apply to all Grantees except the State of California, University of California and California State University. In the event the State of California, University of California and California State University is awarded a grant, the language in Appendix 1 shall replace the Terms and Conditions found in this Section.

- a. Time: Time is of the essence in this Agreement. Grantee will submit the required deliverables as specified and adhere to the deadlines as specified in this Agreement. Anticipating potential overlaps, conflicts, and scheduling issues, to adhere to the terms of the Agreement, is the sole responsibility of the Grantee.
- b. Final Agreement: This Agreement, along with the Grantee's Application, exhibits and forms constitutes the entire and final Agreement between the parties and supersedes any and all prior oral or written agreements or discussions.
- c. Ownership and Public Records Act: All reports and the supporting documentation and data collected during the funding period which are embodied in those reports, shall become the property of the State and subject to disclosure under the Public Records Act.
- d. Additional Audits: Grantee agrees that the awarding department, the Department of General Services, the Bureau of State Audits, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to the performance of this Agreement. Grantee agrees to maintain such records for possible audit for a minimum of three (3) years after final payment, unless a longer period of records retention is stipulated. Grantee agrees to allow the auditor(s) access to such records during normal business hours and to allow interviews of any employees who might reasonably have information related to such records. Further, Grantee agrees to include a similar right of the State to audit records and interview staff in any subcontract related to performance of this Agreement. (Gov. Code §8546.7, Pub. Contract Code §10115 et seq., Cal. Code Regs. tit. 2, §1896).

e. Provisions Relating to Data

- i. "Data" as used in this Agreement means recorded information, regardless of form or characteristics, of a scientific or technical nature. It may, for example, document research, experimental, developmental or engineering work; or be usable or be used to define a design or process; or support a premise or conclusion asserted in any deliverable document called for by this Agreement. The data may be graphic or pictorial delineations in media, such as drawings or photographs, charts, tables, mathematical modes, collections or extrapolations of data or information, etc. It may be in machine form, as punched cards, magnetic tape, computer printouts, or may be retained in computer memory.
 - ii. "Generated data" is that data, which a Grantee has collected, collated, recorded, deduced, read out or postulated for utilization in the performance of this Agreement. Any electronic data processing program, model or software system developed or substantially modified by the Grantee in the performance of this Agreement at State expense, together with complete documentation thereof, shall be treated in the same manner as generated data.
 - iii. "Deliverable data" are that data which, under terms of this Agreement, are required to be delivered to the State. Such data shall be property of the State.
 - iv. Prior to the expiration of any legally required retention period and before destroying any data, Grantee shall notify the State of any such contemplated action; and State may within thirty (30) days of said notification determine whether or not the data shall be further preserved. The State shall pay the expense of further preserving the data. State shall have unrestricted reasonable access to the data that are preserved in accordance with this Agreement.
 - v. Grantee shall use best efforts to furnish competent witnesses and to identify such competent witnesses to testify in any court of law regarding data used in or generated under the performance of this Agreement.
- f. Independent Grantee: Grantee and the agents and employees of Grantee, in the performance of this Agreement, shall act in an independent capacity and not as officers or employees or agents of the State.
- g. Non-Discrimination Clause: During the performance of this Agreement, Grantee and its subcontractors shall not unlawfully discriminate, harass, or allow harassment against any employee or applicant for employment because of sex, race, color, ancestry, religious creed, national origin, physical disability (including HIV and AIDS), mental disability, medical condition (e.g., cancer), age (over 40), marital status, and denial of family care leave. Grantee and its subcontractors shall insure that the evaluation and treatment of their employees and applicants for employment are free from such discrimination and harassment. Grantee and its subcontractors shall comply with the provisions of the Fair Employment and Housing Act (Gov. Code §12990 (a-f) et seq.) and the applicable regulations promulgated thereunder (California Code of Regulations, Title 2, Section 7285 et seq.). The applicable regulations of the Fair Employment and Housing Commission implementing Government Code Section 12990 (a-f), set forth in Chapter 5 of Division 4 of Title 2 of the California Code of Regulations, are incorporated into this Agreement by reference and made a part hereof as if set forth in full. Grantee and its subcontractors shall give written notice of their obligations under this clause to labor organizations with which they have a collective bargaining or other Agreement.
- h. Waiver: The waiver by OSHPD of a breach of any provision of this Agreement by will not operate or be construed as a waiver of any other subsequent breach by OSHPD expressly reserves the right to disqualify Grantee from any future grant awards for failure to comply with the terms of this Agreement.
- i. Approval: This Agreement is of no force or effect until signed by both parties. Grantee may not commence performance until such approval has been obtained.

- j. Amendment: No amendment or variation of the terms of this Agreement shall be valid unless made in writing, signed by the parties and approved as required. No oral understanding or agreement not incorporated in the Agreement is binding on any of the parties.
- k. Assignment: This Agreement is not assignable by the Grantee, either in whole or in part, without the consent of the State in the form of a formal written amendment.
- l. Indemnification: Grantee agrees to indemnify, defend and save harmless the State, its officers, agents and employees from any and all claims and losses accruing or resulting to any and all Grantee's, subcontractors, suppliers, laborers, and any other person, firm or corporation furnishing or supplying work services, materials, or supplies in connection with the performance of this Agreement, and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged by Grantee in the performance of this Agreement.
- m. Disputes: Grantee shall continue with the responsibilities under this Agreement during any dispute. Any dispute arising under this Agreement, shall be resolved as follows:
 - i. The Grantee will discuss the problem informally with the Program Manager. If unresolved, the problem shall be presented, in writing, as a grievance to the Deputy Director, Healthcare Workforce Development Division stating the issues in dispute, the legal authority or other basis for the Grantee's position and the remedy sought.
 - ii. The Deputy Director shall make a determination within ten (10) working days after receipt of the written grievance from the Grantee and shall respond in writing to the Grantee indicating the decision and reasons for it.
 - iii. Grantee may appeal the decision of the Deputy Director by submitting written notice to the Director of its intent to appeal, within ten (10) working days of receipt of the Deputy Director's decision. The Director or designee shall meet with the Grantee within twenty (20) working days of receipt of the Grantee's letter. The Director's decision will be final.
- n. Termination for Cause: OSHPD may terminate this Agreement and be relieved of any payments should the Grantee fail to perform the requirements of this Agreement at the time and in the manner herein provided.
- o. Potential Subcontractors: Nothing contained in this Agreement shall create any contractual relation between the State and any subcontractor of the Grantee, and no subcontract shall relieve the Grantee of its responsibilities and obligations hereunder. The Grantee agrees to be as fully responsible to the State for any and all acts and omissions of its subcontractors and of persons either directly or indirectly employed by the Grantee. The Grantee's obligation to pay its subcontractors is an independent obligation from OSHPD's obligation to disburse funds to the Grantee. As a result, the State shall have no obligation to pay or to enforce the payment of any money to any subcontractor.
- p. Governing Law: This Agreement is governed by and shall be interpreted in accordance with the laws of the State of California.
- q. Unenforceable Provision: In the event that any provision of this Agreement is unenforceable or held to be unenforceable, then the parties agree that all other provisions of this Agreement have force and effect and shall not be affected thereby.

J. Project Representatives: The project representatives during the term of this Agreement are listed below.

Direct all Agreement inquiries to:

State Agency: Office of Statewide Health Planning and Development	Grantee: «Grantee_Name»
Section/Unit: Healthcare Workforce Development Division/ Workforce Education and Training	
Name: Brent Houser, Program Manager	Name (Main Contact): «CO_First_Name» «CO_Last_Name» «Grantee_Officer_Title»
Address: 400 R Street, Suite 330 Sacramento, CA 95811-6213	Address: «Grantee_Street_Address», «Grantee_Ste» «Grantee_City», «State» «Zip»
Phone: (916) 326-3702	Phone: «Grantee_Phone»
Email: brent.houser@oshpd.ca.gov	Email: «Grantee_Email_»

The project representatives during the term of this Agreement will be:

State Agency: Office of Statewide Health Planning and Development	Program Representative:
Section/Unit: Healthcare Workforce Development Division/ Workforce Education and Training	
Name: Brent Houser, Program Manager	Name of Representative: «IblProgramDirector»,
Address: 400 R Street, Suite 330 Sacramento, CA 95811-6213	Address: «Address» «City», «State1» «Zip»
Phone: (916) 326-3702	Phone: «PR_Phone»
Email: brent.houser@oshpd.ca.gov	Email: «PR_Email»

IN WITNESS WHEREOF, the parties hereto have executed or have caused their duly authorized officers to execute this Agreement as of the date first written above.

OFFICE OF STATEWIDE HEALTH
PLANNING AND DEVELOPMENT

GRANTEE: «Grantee_Name»

Signature:

Signature:

Name: _____

Name: _____

Title: _____

Title: _____

Appendix 1
TERMS AND CONDITIONS FOR INTERAGENCY AGREEMENTS

- a. Time: Time is of the essence in this Agreement. Grantee will submit the required deliverables as specified and adhere to the deadlines as specified in this Agreement. Anticipating potential overlaps, conflicts, and scheduling issues, to adhere to the terms of the Agreement, is the sole responsibility of the Grantee.
- b. Final Agreement: This Agreement, along with the Grantee's Application, exhibits and forms constitutes the entire and final Agreement between the parties and supersedes any and all prior oral or written agreements or discussions.
- c. Additional Audits: Grantee agrees that the awarding department, the Department of General Services, the Bureau of State Audits, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to the performance of this Agreement. Grantee agrees to maintain such records for possible audit for a minimum of three (3) years after final payment, unless a longer period of records retention is stipulated. Grantee agrees to allow the auditor(s) access to such records during normal business hours and to allow interviews of any employees who might reasonably have information related to such records. Further, Grantee agrees to include a similar right of the State to audit records and interview staff in any subcontract related to performance of this Agreement. (Gov. Code §8546.7, Pub. Contract Code §10115 et seq., Cal. Code Regs. Tit. 2, §1896).
- d. Provisions Relating to Data
 - i. "Data" as used in this Agreement means recorded information, regardless of form or characteristics, of a scientific or technical nature. It may, for example, document research, experimental, developmental or engineering work; or be usable or be used to define a design or process; or support a premise or conclusion asserted in any deliverable document called for by this Agreement. The data may be graphic or pictorial delineations in media, such as drawings or photographs, charts, tables, mathematical modes, collections or extrapolations of data or information, etc. It may be in machine form, as punched cards, magnetic tape, computer printouts, or may be retained in computer memory.
 - ii. "Generated data" is that data, which a Grantee has collected, collated, recorded, deduced, read out or postulated for utilization in the performance of this Agreement. Any electronic data processing program, model or software system developed or substantially modified by the Grantee in the performance of this Agreement at State expense, together with complete documentation thereof, shall be treated in the same manner as generated data.
 - iii. "Deliverable data" are that data which, under terms of this Agreement, are required to be delivered to the State. Such data shall be property of the State.
 - iv. Prior to the expiration of any legally required retention period and before destroying any data, Grantee shall notify the State of any such contemplated action; and State may within thirty (30) days of said notification determine whether or not the data shall be further preserved. The State shall pay the expense of further preserving the data. State shall have unrestricted reasonable access to the data that are preserved in accordance with this Agreement.
 - v. Grantee shall use best efforts to furnish competent witnesses and to identify such competent witnesses to testify in any court of law regarding data used in or generated under the performance of this Agreement.
- e. Waiver: The waiver by OSHPD of a breach of any provision of this Agreement by will not operate or be construed as a waiver of any other subsequent breach by OSHPD expressly reserves the right to disqualify Grantee from any future grant awards for failure to comply with the terms of this Agreement.

- f. Approval: This Agreement is of no force or effect until signed by both parties. Grantee may not commence performance until such approval has been obtained.
- g. Amendment: No amendment or variation of the terms of this Agreement shall be valid unless made in writing, signed by the parties and approved as required. No oral understanding or agreement not incorporated in the Agreement is binding on any of the parties.
- h. Disputes: Grantee shall continue with the responsibilities under this Agreement during any dispute. Any dispute arising under this Agreement, shall be resolved as follows:
 - i. The Grantee will discuss the problem informally with the Program Manager. If unresolved, the problem shall be presented, in writing, as a grievance to the Deputy Director, Healthcare Workforce Development Division stating the issues in dispute, the legal authority or other basis for the Grantee's position and the remedy sought.
 - ii. The Deputy Director shall make a determination within ten (10) working days after receipt of the written grievance from the Grantee and shall respond in writing to the Grantee indicating the decision and the reasons for it.
 - iii. Grantee may appeal the decision of the Deputy Director by submitting written notice to the Director of its intent to appeal, within ten (10) working days of receipt of the Deputy Director's decision. The Director or designee shall meet with the Grantee within twenty (20) working days of receipt of the Grantee's letter. The Director's decision will be final.
- i. Termination for Cause: OSHPD may terminate this Agreement and be relieved of any payments should the Grantee fail to perform the requirements of this Agreement at the time and in the manner herein provided.

Appendix 2
Progress Report for Deliverable 2- Implementation of Data Gathering Strategies

Purpose: This Progress Report describes the activities completed for Deliverable 2, which the Grantee is invoicing for.

Date:
Agreement # and executed date:
Progress Report #:

I. Contact Information

Name	Position/Title	Phone	E-mail

II. Contact Information from Public Mental Health System (PMHS), Community Based Organization and Consumer, Family Member and Parent/Caregiver (CFPC) Training Organizations.

Number of organizations that you were successfully able to identify key contacts from (only add organizations that have not been previously reported). The list *must be* in the following format.

Organization Types	Number of Key Contacts Identified for different Organizations
Counties	
Community Based Organizations	
CFPC Training Organizations	

III. Provide an update on your success in administering the surveys completed as part of Deliverable 1.

IV. Describe any challenges to obtaining contact information for Counties, CBOs, and/or CFPC Training Organizations.

- V. Describe your progress and challenges, if any, toward developing and maintaining a web-based portal that includes pertinent information regarding surveys and overall assessment as identified in the Scope of Work.

- VI. Provide a description of the types of survey completion support and technical assistance provided to Counties, CBOs, and/or CFPC Training Organizations including approximate number of times and hours assistance was provided, and a summary of types of individuals that received assistance.

- VII. Provide a description of webinars facilitated including, number of webinars, information covered, and total/type of participants engaged.

- VIII. Provide a description of all other types of outreach activities engaged, which may include, but not be limited to personal outreach to counties, CBOs, and Training Organizations, presentations to key groups, use of social media, mass emails, etc.

- IX. Provide an update on other research conducted not based on the data gathered from the survey.

- X. **Budget Information**

Budget Line Items	Beginning Balance for Deliverable 2	Invoiced Amount for this Progress Report	Balance Remaining for Deliverable 2
Personnel Costs			
Materials/Supplies Costs			
Travel Costs			
Administrative Costs			
Other, specify			
Total Costs			

- XI. Please provide link(s) to web-based portal, survey, and/or any additional documents associated with Deliverable 2.