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Meeting Agenda

August 5, 2025 3:00PM Kings County Board of Supervisors Chambers 1400 W. Lacey Blvd. Hanford, CA 93230

- I. Call to Order & Welcome
- II. Commissioners Roll Call
- III. Review and Modification to Agenda

IV. Opportunity for Public Comment

This portion of the meeting is reserved for persons to address the Commission on any matter not on this agenda but under the jurisdiction of the Commission. Commissioners may respond to statements made or questions posed. They may ask a question for clarification; make a referral to staff for factual information or request staff to report back to the Commission at a later meeting. Also, the Commission may take action to direct staff to place a matter of business on a future agenda.

Speakers are limited to two minutes. Please state your name before making your presentation.

V. Consent Calendar

All items listed under the consent calendar are considered to be routine and will be enacted by one motion if no member of the Commission or audience wishes to comment or ask questions. If comment or discussion is desired by anyone, the item will be removed from the consent agenda and will be considered in the listed sequence with an opportunity for any member of the public to address the Commission concerning the item before action is taken.

2025-08-186 Consent Calendar

- a. June 24, 2025 Commission Meeting Minutes
- b. June 2025 Fiscal Report
- c. Final Fiscal Year 2024-2025 Report

VI. Action Items

a. 2025-08-187 Professional Services Agreement between the Commission and the County of Kings: Commission to review, discuss and consider approving the Professional Services Agreement between the Commission and the County of Kings

- b. 2025-08-188 Memorandum of Understanding between First 5 Kings County Children and Families Commission and the Medi-Cal Managed Care Plans serving Kings County: Commission to review, discuss and consider approving the Memorandum of Understanding and authorizing the Executive Director to sign on behalf of the Commission.
- c. **2025-08-189 Commission Policy Manual Update Salaries and Benefits** Commission to review, discuss and approve updates to the Commission's Policy Manual.

VII. <u>Informational Agenda Items</u>

- a. **Final Grantee Achievement Report:** Commission to review and discuss the progress of funded projects for FY 24/25.
- b. **Spotlight on Service:** Staff from Recreation Association of Corcoran will present an overview of the funded project, Corcoran Family Resource Center
- c. Executive Director/Program Manager Report: June-July 2025

VIII. Future Agenda Items

October 7, 2025

- Minutes from August 5, 2025 Commission Meeting
- August 2025 Fiscal Report
- Annual Audit Report
- Annual Report
- Annual Evaluation Report
- Children and Youth Behavioral Health Initiative Round 3 Grant subcontract Home Visitation program
- Spotlight on Service: Kings Community Action Organization's Kettleman City Home Visitation & Early Childhood Education program
- Executive Director/Program Manager Report: August-September 2025

IX. Commissioner Comments

X. Review Next Meeting Date & Adjournment

• October 7, 2025 at 3:00 PM

Public Comment is Taken on Each Agenda Item

Please note that the order in which the agenda items are considered may be subject to change.

Agenda backup information and any public records provided to the Commission after the posting of the agenda for this meeting will be available for public review at the First 5 office: **460 Kings County Drive, Ste. 101, Hanford, CA 93230**. Upon a timely request, reasonable efforts will be made to provide such information or records in alternative formats.



Date of Meeting: August 5, 2025

2025-08-186

Consent Calendar

- June 24, 2025 Commission Meeting Minutes
- June 2025 Fiscal Report
- Final Fiscal Year 2024-2025 Report



Meeting Minutes

June 24, 2025 3:00 PM Kings County Board of Supervisors Chambers 1400 W. Lacey Blvd. Hanford, CA 93230

<u>Call to Order & Welcome</u> Meeting called to order at 3:00 pm. by Chair-elect Dr. Milton Teske.

<u>Commissioners Roll Call</u> 4 out of 5 commissioners present. Two Commissioners had proxies present on their behalf for this meeting.

Commissioner	Present	Absent	Joined Meeting After Roll Call
Monica Connor for Wendy Osikafo	X		
Dr. Milton Teske	X		
Joe Neves	X		
Todd Barlow		X	
Christi Lupkes for Lisa Lewis			X

Review and Modification to Agenda

The 3rd Quarter Grantee Achievement Report and the Memorandum of Understanding between the Commission and the Managed Care Plans will be tabled to the August Meeting.

Discussion: None noted.

Opportunity for Public Comment None noted.

P. 004 2025-06-175 Consent Calendar
April 1, 2025, Commission Meeting Minutes
April 2025 Fiscal Report

Discussion: No Comments noted.

2025-06-175 Consent Calendar				
Motion Made by:	Commissioner Neves			
2 nd Motion by:	Monica (Monica Connor for Wendy Osikafo		
Motion (Pass/Fail)	PASS			
Commissioner	Aye	Nay	Abstain	Absent
Monica Connor for Wendy Osikafo	X			
Dr. Milton Teske	X			
Joe Neves	X			
Todd Barlow				X
Christi Lupkes for Lisa Lewis	X			

Action Items

- P. 012 **2025-06-176 Proposed Budget Modification for FY 24/25:** Commission to review, discuss and consider approving the Budget Modification for FY 2024-2025.
- STAFF REPORT: Commission staff are recommending to shift funding from Special Departmental and Travel to accommodate an increase in the Legal Services line item budget. The CYBHI contract and subcontracts, as well as the Memorandum of Understanding between the Commission and the Medi-Cal managed care plans were additional items that weren't accounted for when the budget was first created.

Discussion: None noted.

2025-06-176 Proposed Budget Modification for FY 24/25					
Motion Made by:	Commis	Commissioner Neves			
2 nd Motion by:	Christi L	Christi Lupkes for Lisa Lewis			
Motion (Pass/Fail)	PASS				
Commissioner	Aye	Nay	Abstain	Absent	
Monica Connor for Wendy Osikafo	X				
Dr. Milton Teske	X				
Joe Neves	X				
Todd Barlow		_	_	X	
Christi Lupkes for Lisa Lewis	X	_	·		

- P. 015 **2025-06-177 Change in Audit Services Vendor:** Commission to review, discuss and approve the change in Commission's Annual Audit costs due to procurement of a new external auditor.
- **STAFF REPORT:** Program Manager Clarissa Ravelo reported that the County of Kings has secured another audit services vendor, Price, Paige & Company. The new agreement includes an increase in the audit costs for the Commission from \$10,600 to \$16,000. PM Ravelo indicated that the increase in Audit costs has been added to the proposed FY 2025-2026 budget.

Discussion: None noted.

2025-06-177 Change in Audit Services Vendor					
Motion Made by:	Commissioner Neves				
2 nd Motion by:	Monica (Monica Connor for Wendy Osikafo			
Motion (Pass/Fail)	PASS				
Commissioner	Aye	Nay	Abstain	Absent	
Monica Connor for Wendy Osikafo	X				
Dr. Milton Teske	X				
Joe Neves	X				
Todd Barlow				X	
Christi Lupkes for Lisa Lewis	X				

- P. 034 **2025-06-178 First 5 Association Annual Dues:** Commission to review, discuss and approve the updated First 5 Association annual dues.
- STAFF REPORT: PM Ravelo presented information in a Powerpoint slide deck on the new First 5
 Association Membership dues structure and the benefits of being a part of the Network to the
 Commission and Commission staff. First 5 Association staff member Kristine Dobson was also present
 and answered some of the Commission's questions.
- Discussion: Discussion ensued regarding the rate increase, and the use of live birth rates to calculate part of the increase in dues. Commissioner Neves related that not all babies born in Kings County are from Kings County, he doesn't think that it is relevant data to be used to calculate the membership dues. First 5 Association staff member Kristine Dobson was also present and answered some of the Commission's questions. PM Ravelo was asked how this would impact the Commission's finances. PM Ravelo indicated that program support would not be decreased to accommodate the increased rate, but there's usually savings in the budget that can offset the increase. Ms. Lupkes made a motion to accept the increased membership rate of \$6,000, without the variable cost of \$2.60/child.

2025-06-178 First 5 Association Annual Dues					
Modified Motion Made by:	Christi Lupkes for Lisa Lewis				
2 nd Motion by:	Commiss	Commissioner Neves			
Motion (Pass/Fail)	Modification – Flat Rate only - PASS				
Commissioner	Aye	Nay	Abstain	Absent	
Monica Connor for Wendy Osikafo	X				
Dr. Milton Teske	X				
Joe Neves	X				
Todd Barlow				X	
Christi Lupkes for Lisa Lewis	X				

- P. 051 **2025-06-179 Proposed Budget for FY 2025-2026:** Commission to review, discuss and consider approving the 2025-2026 Budget.
- STAFF REPORT: PM Ravelo presented the proposed budget for FY 2025-2026. The largest increase in the budget was due to the new CYBHI grant. PM Ravelo accounted for the increase in audit costs, and will adjust the Memberships line item to reflect the Commission's decision to approve dues at \$6,000. Other notable increases compared to FY 2024-2025 were Legal Services (increased from \$1,000 to \$3000) and IT Managed Contracts (increased from \$3,123 to \$14,046). PM Ravelo stated that the increase for Legal Services was due to anticipated new round of contracts for the upcoming funding cycle, and the software that the funded projects use, the old platform was being sunsetted, so the upgrade to Accudemia was chosen. Accudemia costs \$13,280 annually, compared to other platforms that start at \$40,000 annually. Funded projects were budgeted at the same amount as FY 2024-2025 as approved by the Commission at the February 2025 Commission meeting.

Discussion: No discussion ensued, except to remind staff that Membership dues for the First 5 Association were only approved at \$6,000.

2025-06-179 Proposed Budget for FY 2025-2026					
Motion Made by:	Commissioner Neves				
2 nd Motion by:	Christi L	Christi Lupkes for Lisa Lewis			
Motion (Pass/Fail)	PASS				
Commissioner	Aye	Nay	Abstain	Absent	
Monica Connor for Wendy Osikafo	X				
Dr. Milton Teske	X				
Joe Neves	X				
Todd Barlow				X	
Christi Lupkes for Lisa Lewis	X				

- P. 055 **2025-06-180 Administrative Cost Limit for FY 2025-2026:** Commission to review, discuss and consider approving the administrative cost limit for FY 2025-2026.
- **STAFF REPORT:** PM Ravelo reported that policy indicates that the Commission must establish an upper limit for administrative costs as a percentage of the total operating budget. She went on to relate that the current budget anticipates a 4% administrative cost; however, the recommendation is to set the Administrative Cost Limit not to exceed 10%.
- Discussion: Dr. Teske stated that there had been no change in the administrative costs percentage, the amount was the same as the previous years. Commissioner Neves asked KCAO's Executive Director, Jeff Garner, who was sitting in the audience, about the potential impact on their project in Kettleman City, now that they are no longer going to be located in the Family Resource Center building. Commissioner Neves was also curious about the impact of Transitional Kindergarten on FRC programs. Executive Director, Rose Mary Rahn, stated that discussion has ensued about providing an analysis of the current early childhood care and education landscape.

2025-06-180 Administrative Cost Limit for FY 2025-2026					
Motion Made by:	Commiss	Commissioner Neves			
2 nd Motion by:	Monica Connor for Wendy Osikafo				
Motion (Pass/Fail)) PASS				
Commissioner	Aye	Nay	Abstain	Absent	
Monica Connor for Wendy Osikafo	X				
Dr. Milton Teske	X				
Joe Neves	X				
Todd Barlow				X	
Christi Lupkes for Lisa Lewis	X				

- P. 059 **2025-06-181 Approval of Grantee Contract Extensions for FY 2025-2026:** Commission to review, discuss, consider approving contract extensions for the following projects, and authorize First 5 Kings County's Executive Director to sign the agreements as an authorized representative of the Commission:
 - Recreation Association of Corcoran Corcoran Family Resource Center
 - United Cerebral Palsy Parent & Me
 - United Cerebral Palsy Special Needs Project
 - Kings Community Action Organization Kettleman City Family Resource Center/Early Childhood
 - Kings United Way Get Connected!
 - Evaluation, Management and Training (EMT) Associates, Inc.

STAFF REPORT: PM Ravelo stated that this agenda item is regarding approval of contract extensions for FY 2025-2026. She indicated that the Commission voted to extend the current year contracts for one year, at the same funded amount. All grantees provided an updated scope of work and budget, and all draft contracts have been reviewed or submitted for review to County Counsel. Staff are recommending that the Commission approve the contract extensions as presented and authorize ED Rahn to sign the agreements as an authorized representative of the Commission.

Discussion: KCAO will not be operating out of the Kettleman City Family Resource Center building. It will be based in Hanford. No other discussion ensued.

2025-06-181 Approval of Grantee Contract Extensions for FY 2025-2026				
Motion Made by:	Commissioner Neves			
2 nd Motion by:	Monica Connor for Wendy Osikafo			
Motion (Pass/Fail)	PASS			
Commissioner	Aye	Nay	Abstain	Absent
Monica Connor for Wendy Osikafo	X			
Dr. Milton Teske	X			
Joe Neves	X			
Todd Barlow				X
Christi Lupkes for Lisa Lewis	X			

- P. 115 **2025-06-182 Approval of Grantee Contract Extensions for FY 2025-2026:** Commission to review, discuss, consider approving contract extensions for the following projects, and authorize First 5 Kings County's Executive Director to sign the agreements as an authorized representative of the Commission:
 - Kings County Office of Education Kings County CARES About Quality
 - Kings County Office of Education Hanford Family Connection and Lemoore Family Connection

STAFF REPORT: PM Ravelo presented the matter for discussion. She indicated that KCOE's contracts are heard as a separate matter, due to the conflict of interest presented by Commissioner Barlow being KCOE's Superintendent.

Discussion: No discussion ensued.

2025-06-182 Approval of Grantee Contract Extensions for FY 2025-2026 (KCOE)					
Motion Made by:	Commissioner Neves				
2 nd Motion by:	Monica C	Monica Connor for Wendy Osikafo			
Motion (Pass/Fail)	PASS				
Commissioner	Aye	Nay	Abstain	Absent	
Monica Connor for Wendy Osikafo	X				
Dr. Milton Teske	X				
Joe Neves	X				
Todd Barlow				X	
Christi Lupkes for Lisa Lewis	X				

P. 151 2025-06-183 Children and Youth Behavioral Health Initiative – Round 3 Grant subcontracts:

Commission to review, discuss and consider approving and authorize First 5 Kings County's Executive Director to sign the agreements as an authorized representative of the Commission.

- Evaluation, Management and Training (EMT) Associates, Inc. CYBHI Project Evaluation
- Kings United Way CYBHI Smart Referral Network Planning
- Kings United Way CYBHI Smart Referral Network Implementation

STAFF REPORT: PM Ravelo advised the Commission that this matter is regarding subcontracts resulting from the CYBHI grant. All submitted Scopes of Work were approved by the County's Purchasing Manager through the sole source justification process. EMT Associates, Inc. will be providing project evaluation and data analysis services, and Kings United Way will be providing Planning and Implementation services related to the Smart Referral Network, a closed loop referral system. Staff are recommending that the Commission approve the subcontracts and authorize ED Rahn to sign the agreements on behalf of the Commission.

Discussion: No discussion ensued.

2025-06-183 Children and Youth Behavioral Health Initiative – Round 3 Grant					
subcontracts					
Motion Made by:	Christi Lupkes for Lisa Lewis				
2 nd Motion by:	Monica (Connor for We	endy Osikafo		
Motion (Pass/Fail)	PASS				
Commissioner	Aye	Nay	Abstain	Absent	
Monica Connor for Wendy Osikafo	X				
Dr. Milton Teske	X				
Joe Neves	X				
Todd Barlow				X	
Christi Lupkes for Lisa Lewis	X				

- P. 001 **2025-06-184 2020-2025 Strategic Plan Update:** Commission to review, discuss and approve the 2020-2026 First 5 Kings County Strategic Plan update, for submission to First 5 California.
- STAFF REPORT: PM Ravelo stated that statute requires the Commission to adopt a Strategic Plan, and that it must be reviewed or updated annually. PM Ravelo indicated that the Commission's focus areas, goals and objectives remain the same, with the main change being that the Plan will be extended through FY 2025-2026, while a new Strategic Plan is being formulated. Commission staff added the 1-year contract extensions to the financial plan.

Discussion: No discussion ensued; however, Commissioner Neves requested that a copy of the First 5 Kings County Strategic Plan be forwarded to the State/County lobbyist.

2025-06-184 2020-2025 Strategic Plan Update					
Motion Made by:	Commissioner Neves				
2 nd Motion by:	Christi L	Christi Lupkes for Lisa Lewis			
Motion (Pass/Fail)	PASS				
Commissioner	Aye	Nay	Abstain	Absent	
Monica Connor for Wendy Osikafo	X				
Dr. Milton Teske	X				
Joe Neves	X				
Todd Barlow	X				
Christi Lupkes for Lisa Lewis	X				

- P. 050 **2025-06-185 Commission Meeting Schedule for FY 2025/2026:** Commission to review, discuss and consider approving the FY 25/26 schedule and location.
- STAFF REPORT: PM Ravelo stated that Commission bylaws call for the Commission to adopt the annual calendar of its meetings. Commission staff recommend continuing to hold the First 5 Commission Meetings on the first Tuesday of even-numbered months at 3pm in the Board of Supervisors Chambers, unless otherwise posted. Included in the packet was a one-page document listing the recommended Commission Meeting schedule for FY 25-26.

Discussion: None noted.

2025-06-185 Commission Meeting Schedule for FY 2025/2026				
Motion Made by:	Commissioner Neves			
2 nd Motion by:	Christi Lupkes for Lisa Lewis			
Motion (Pass/Fail)	PASS			
Commissioner	Aye	Nay	Abstain	Absent
Monica Connor for Wendy Osikafo	X			
Dr. Milton Teske	X			
Joe Neves	X			
Todd Barlow				X
Christi Lupkes for Lisa Lewis	X			

Informational Agenda Items

- P. 053 County Certification of Compliance: Commission to review and discuss ASD-035 County Certification of Compliance Fiscal Year 2025-2026 Funding
- STAFF REPORT: PM Ravelo informed the Commission that the matter was an informational agenda item only. She stated that county commissions must demonstrate compliance with statutes to remain eligible to receive Proposition 10 Tobacco Tax Revenue. PM Ravelo relayed that form ASD-035 County Certification of Compliance was the mechanism to show that the Commission has complied with the requirements to conduct a public hearing of the review of the local Commission's Strategic Plan, Annual Audit and Annual Report and the State Commission's Annual Report. The documentation will be submitted to the State Commission by July 1, 2025.

Discussion: None noted.

P. 057 **Spotlight on Service:** Staff from Kings United Way will present an overview of the funded project, Get Connected! and Smart Referral Network

Kings United Way Staff members presented on their First 5-funded projects.

Get Connected – 211 Coordinator Yvette Moreno

Ms. Moreno presented data related to the Get Connected! program - 211 Callers screened 2289 calls; they had 285 follow ups for households with children 0-5 years. They also received 461 referrals to meet basic needs, promote wellness and 1240 referrals specifically for children 0-5 years of age. A graph was presented showing the client's top referral needs, which is Food with Housing being second, Utility Assistance third and Diapers fourth.

Smart Referral Network – Executive Director Nanette Villareal & SRN Coordinator Daray Jones
The Smart Referral Network is an intelligent, Web-based system that connects professionals, such as
Healthcare providers, case managers, or CBOs, to efficiently refer clients or patients to the most
appropriate services or specialists. Referrals are built on personal recommendations, making them one
of the most trusted sources for new clients or patients. Referral leads, in general, convert at a rate 30%
higher than leads from other sources (Finances online). There is no cost for users to utilize the SRN
platform.

Discussion: No comments noted

Executive Director/Program Manager Report: April-May 2025

STAFF REPORT: PM Ravelo indicated that there isn't a formal staff report included in the agenda packet, and all pertinent updates were provided to the Commission in the agenda items. She stated that there are over 2000 children enrolled in the Dolly Parton Imagination Library. The WIC program has contributed to sending text messages to their clients for enrollment. PM Ravelo thanked the Commission for investing in the program.

Discussion: No Comments noted.

<u>Future Agenda Items</u> -Chair-elect Teske mentioned the future agenda items as listed on the agenda.

August 5, 2025

- Minutes from June 24, 2025, Commission Meeting
- June 2025 Fiscal Report
- Final Grantee Achievement Report
- Spotlight on Service: Recreation Association of Corcoran's Corcoran Family Resource Center
- Executive Director/Program Manager Report: June-July 2025

Commissioner Comments No Comments noted.

Review Next Meeting Date & Adjournment

Chair-elect Teske stated that the next Commission meeting will be held on August 5, 2025, at 3:00 PM. The meeting was adjourned at 4:43 pm.

FY 24/25 June 2025 Fiscal Report First 5 Operations

SALARY SUMMARY		\$ 196,843	\$ 157,500	\$ 39,343	80.01%
SERVICES & SUPPLIES		BUDGET	YTD	BALANCE	%
Communications	92006	\$ 2,718	\$ 2,093	\$ 625	77.01%
Office Equipment	92018	\$ 1,950	\$ 862	\$ 1,088	44.20%
Maintenance SIG	92021	\$ 3,658	\$ 967	\$ 2,691	26.44%
Memberships	92027	\$ 4,000	\$ 4,000	\$ -	100.00%
Postage & Freight	92033	\$ 201	\$ 21	\$ 180	10.34%
Offset Printing	92035	\$ 500	\$ -	\$ 500	0.00%
Legal Services	92038	\$ 5,000	\$ 4,538	\$ 462	90.76%
Community Outreach	92045	\$ 1,500	\$ -	\$ 1,500	0.00%
Auditing & Accounting	92046	\$ 10,600	\$ 8,700	\$ 1,900	82.08%
Contractual Services	92047	\$ 25,000	\$ 25,000	\$ -	100.00%
Publications & Legal Notices	92056	\$ 250	\$ -	\$ 250	0.00%
Special Dept Expense	92063	\$ 38,107	\$ 21,787	\$ 16,320	57.17%
Purchasing Charges	92068	\$ 692	\$ 401	\$ 291	57.90%
Brd. & Comm. Meeting Expense	92069	\$ 500	\$ 57	\$ 443	11.49%
Public Education Material	92075	\$ 1,500	\$ -	\$ 1,500	0.00%
Motor Pool	92089	\$ 3,000	\$ 1,108	\$ 1,892	36.95%
Travel Expenses	92090	\$ 10,000	\$ 5,136	\$ 4,864	51.36%
Utilities	92094	\$ 2,917	\$ 1,419	\$ 1,498	48.64%
Liability Claim	93041	\$ 1,562	\$ 1,562	\$ -	100.00%
Information & Technology	93048	\$ 6,727	\$ 4,410	\$ 2,317	65.56%
IT Managed Contracts	93051	\$ 3,123	\$ 253	\$ 2,870	8.11%
Admin Allocation	93057	\$ 28,233	\$ 23,590	\$ 4,643	83.56%
TOTAL SERVICES & SUPPLIES		\$ 151,738	\$ 105,905	\$ 45,833	69.79%
TOTAL OPERATIONS COSTS		\$ 348,581	\$ 263,405	\$ 85,176	75.56%

First F Contracted Drograms		BUDGET		VTD		DALANCE	%
First 5 Contracted Programs	<u> </u>	BUDGET	<u> </u>	YTD	<u> </u>	BALANCE	90
FRC Initiative 93033	\$	648,911	\$	567,911	\$	81,000	87.52%
Avenal Family Connection	\$	81,000	\$	-	\$	81,000	
Corcoran Family Resource Center	\$	104,400	\$	104,400	\$	-	
Kettleman City Family Resource Center	\$	81,000	\$	81,000	\$	-	
KCOE: Hanford & Lemoore Family Connection	\$	382,511	\$	382,511	\$	-	
E3 Initiative 93034	\$	81,317	\$	81,317	\$	0	100.00%
Kings County Office of Education CARES	\$	81,317	\$	81,317	\$	0	
School Readiness 93035	\$	395,820	\$	359,109	\$	36,711	90.73%
UCP Parent & Me Program	\$	314,820	\$	314,820	\$	-	
Special Needs Project	\$	81,000	\$	44,289	\$	36,711	
New Project 93053	\$	36,000	\$	36,000	\$	-	100.00%
Kings United Way	\$	36,000	\$	36,000	\$	-	
TOTAL CONTRACT COSTS	\$	1,162,048	\$	1,044,337	\$	117,711	89.87%
TOTAL EXPENDITURES	\$	1,510,629	\$	1,307,742	\$	202,887	86.57%
RESERVE FUNDS (25% of Operations and Contracts)	\$	377,658		Trust Balance	\$	1,349,646	

FY 24/25 June 2025 Fiscal Report Revenue

Month	Estimated Prop 10	Actual Prop 10 Revenue	Prop 56 Backfill	Prop 10/ E- cigarette tax	Regional Home Visitation Grant	Misc (CASPHI, Interest)	Total	Revenue Received (% of Prop 10 Estimate)
uly 2024	\$ 93,065	\$ 74,178					\$ 74,178	80%
August 2024	\$ 93,064	\$ 79,628					\$ 79,628	86%
Sepetember 2024	\$ 93,064	\$ 61,876					\$ 61,876	66%
October 2024	\$ 93,065	\$ 73,742		\$ 4,956	\$ 949	\$ 9,156	\$ 88,804	85%
November 2024	\$ 93,064	\$ 67,974					\$ 67,974	73%
December 2024	\$ 93,064	\$ 61,926					\$ 61,926	67%
anuary 2025	\$ 93,065	\$ 59,400				\$ 9,312	\$ 68,712	64%
February 2025	\$ 93,064	\$ 53,543				\$ 10,427	\$ 63,970	58%
March 2025	\$ 93,064	\$ 15,815		\$ 4,233	\$ 1,383		\$ 21,432	22%
April 2025	\$ 93,065	\$ 70,087	\$ 323,015			\$ 16,790	\$ 409,891	422%
May 2025	\$ 93,064	\$ 57,746		\$ 4,139			\$ 61,885	66%
une 2025	\$ 93,064	\$ 65,000		\$ 4,400	\$ 24,270	\$ 12,187	\$ 105,857	75%



FY 24/25 June 2025 Fiscal Report First 5 Breakdown

SALARY SUMMARY		\$	50,568	\$	79,466	\$	-	\$	2,615	\$	8,442	\$	16,409	\$ 157,500	\$ 39,343		80.01%
one of the second secon		1	50,500		7 7 100			<u> </u>	2,010		0,1.12		10,107	 157,500	 03,010		00:0170
							800103			800	0106 (Regional						
SERVICES & SUPPLIES		80	0101 (Admin)	800102	(Project)		(Evaluation)	8001	105 (CYBHI)		HVC)	401	400 (CASPHI)	YTD	BALANCE		%
Communications	92006	1	1,562	•	447	4		•	12	•	73			\$ 2,093	\$ 625		77.01%
Office Equipment	92018	\$	164	\$	698	\$		\$		\$	- 70	-		\$ 862	\$ 1,088	_	44.20%
Maintenance SIG	92021	\$	170	\$	739	\$	-	\$		\$	58			\$ 967	\$ 2,691	_	26.44%
Memberships	92027	\$	4,000	\$	- 107	\$	-	\$		\$				\$ 4,000	\$ -,	_	100.00%
Postage & Freight	92033	\$	-	\$	21	\$	-	\$	-	\$	-			\$ 21	\$ 180		10.34%
Offset Printing	92035	\$	-	\$	-	\$	-	\$	-	\$	-			\$ -	\$ 500		0.00%
Legal Services	92038	\$	4,538	\$	-	\$	-	\$	-	\$	-			\$ 4,538	\$ 462		90.76%
Community Outreach	92045	\$	-	\$	-	\$	-	\$	-	\$	-			\$ -	\$ 1,500		0.00%
Auditing & Accounting	92046	\$	8,700	\$	-	\$	-	\$	-	\$	-			\$ 8,700	\$ 1,900		82.08%
Contractual Services	92047	\$	-	\$	-	\$	25,000	\$	-	\$	-			\$ 25,000	\$ -		100.00%
Publications & Legal Notices	92056	\$	-	\$	-	\$	-	\$	-	\$	-			\$ -	\$ 250		0.00%
Special Dept Expense	92063	\$	-	\$	4,920	\$	-	\$	-	\$	16,866			\$ 21,787	\$ 16,320		57.17%
Purchasing Charges	92068	\$	121	\$	239	\$	-	\$	-	\$	40			\$ 401	\$ 291		57.90%
Brd. & Comm. Meeting Expense	92069	\$	-	\$	57	\$	-	\$	-	\$	-			\$ 57	\$ 443		11.49%
Public Education Material	92075	\$	-	\$	-	\$	-	\$	-	\$	-			\$ -	\$ 1,500		0.00%
Motor Pool	92089	\$	(0)	\$	875	\$	-	\$	-	\$	234			\$ 1,108	\$ 1,892		36.95%
Travel Expenses	92090	\$	2,431	\$	2,706	\$	-	\$	-	\$	-			\$ 5,136	\$ 4,864		51.36%
Utilities	92094	\$	426	\$	851	\$	-	\$	-	\$	142			\$ 1,419	\$ 1,498		48.64%
Liability Claim	93041	\$	474	\$	933	\$	-	\$	-	\$	155			\$ 1,562	\$ -		100.00%
Information & Technology	93048	\$	1,337	\$	2,634	\$	-	\$	-	\$	439			\$ 4,410	\$ 2,317		65.56%
IT Managed Contracts	93051	\$	253	\$	-	\$	-	\$	-	\$	-			\$ 253	\$ 2,870		8.11%
Admin Allocation	93057	\$	8,467	\$	13,280	\$	-	\$	441	\$	1,403			\$ 23,590	\$ 4,643		83.56%
TOTAL SERVICES & SUPPLIES		\$	32,643	\$	28,399	\$	25,000	\$	453	\$	19,410	\$	-	\$ 105,905	\$ 45,833		69.79%
TOTAL OPERATIONS COSTS		\$	83,211	\$	107,866	\$	25,000	\$	3,068	\$	27,852	\$	16,409	\$ 263,405	\$ 85,176		75.56%
			6.36%		88.11%		1.91%		0.23%		2.13%		1.25%				

First 5 Contracted Programs	I 🗀	BUDGET		YTD	BALANCE	%
FRC Initiative 93033	\$	648,911	\$	567,911	\$ 81,000	87.52%
Avenal Family Connection	\$	81,000	\$	-	\$ 81,000	
Corcoran Family Resource Center	\$	104,400	\$	104,400	\$ -	
Kettleman City Family Resource Center	\$	81,000	\$	81,000	\$ -	
KCOE: Hanford & Lemoore Family Connection	\$	382,511	\$	382,511	\$ -	
E3 Initiative 93034	\$	81,317	\$	81,317	\$ 0	100.00%
Kings County Office of Education CARES	\$	81,317	\$	81,317	\$ 0	
School Readiness 93035	\$	395,820	\$	359,109	\$ 36,711	90.73%
UCP Parent & Me Program	\$	314,820	\$	314,820	\$ -	
Special Needs Project	\$	81,000	\$	44,289	\$ 36,711	
New Project 93053	\$	36,000	\$	36,000	\$ -	100.00%
Kings United Way	\$	36,000	\$	36,000	\$ -	
TOTAL CONTRACT COSTS	\$	1,162,048	\$	1,044,337	\$ 117,711	89.87%
TOTAL EXPENDITURES	\$	1,510,629	\$	1,307,742	\$ 202,887	86.57%
RESERVE FUNDS (25% of Operations and Contracts)	\$	311,315		Trust Balance	\$ 1,358,255	

SALARY SUMMARY	\$	196,843	\$	50,568	\$	79,466	\$	-	\$	27,465	\$	157,500
SERVICES & SUPPLIES		Budget		Admin		Program	Eva	aluation	P	on-First 5 rograms (BHI, HVC)		YTD
Communications 92006	\$	2,718	\$	1,562	\$	447	\$	-	\$	85	\$	2,093
Office Equipment 92018	\$	1,950	\$	164	\$	698	\$	-	\$	-	\$	862
Maintenance SIG 92021	\$	3,658	\$	170	\$	739	\$	-	\$	58	\$	967
Memberships 92027	\$	4,000	\$	4,000	\$	-	\$	-	\$	-	\$	4,000
Postage & Freight 92033	\$	201	\$	-	\$	21	\$	-	\$	-	\$	21
Offset Printing 92035	\$	500	\$	-	\$	-	\$	-	\$	-	\$	-
Legal Services 92038	\$	5,000	\$	4,538	\$	-	\$	-	\$	-	\$	4,538
Community Outreach 92045	\$	1,500	\$	-	\$	-	\$	-	\$	-	\$	-
Auditing & Accounting 92046	\$	10,600	\$	8,700	\$	-	\$	-	\$	-	\$	8,700
Contractual Services 92047	\$	25,000	\$	-	\$	-	\$	25,000	\$	-	\$	25,000
Publications & Legal Notices 92056	\$	250	\$	-	\$	-	\$	-	\$	-	\$	-
Special Dept Expense 92063	\$	38,107	\$	-	\$	4,920	\$	-	\$	16,866	\$	21,787
Purchasing Charges 92068	\$	692	\$	121	\$	239	\$	-	\$	40	\$	401
Brd. & Comm. Meeting Expens(92069	\$	500	\$	-	\$	57	\$	-	\$	-	\$	57
Public Education Material 92075	\$	1,500	\$	-	\$	-	\$	-	\$	-	\$	-
Motor Pool 92089	\$	3,000	\$	(0)	\$	875	\$	-	\$	234	\$	1,108
Travel Expenses 92090	\$	10,000	\$	2,431	\$	2,706	\$	-	\$	-	\$	5,136
Utilities 92094	\$	2,917	\$	426	\$	851	\$	-	\$	142	\$	1,419
Electronic Hardware 92103	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Liability Claim 93041	\$	1,562	\$	474	\$	933	\$	-	\$	155	\$	1,562
Information & Technology 93048	\$	6,727	\$	1,337	\$	2,634	\$	-	\$	439	\$	4,410
IT Managed Contracts 93051	\$	3,123	\$	253	\$	-	\$	-	\$	-	\$	253
Admin Allocation 93057	\$	28,233	\$	8,467	\$	13,280	\$	-	\$	1,844	\$	23,590
TOTAL SERVICES & SUPPLIES	\$	151,738	\$	32,643	\$	28,399	\$	25,000	\$	19,863	\$	105,905
TOTAL OPERATIONS COSTS	1 s	348,581	\$	83,211	\$	107,866	\$	25,000	\$	47,328	\$	263,405
TOTAL OF ENERTHONIS COSTS		010,001	Ψ_	00,211	Ψ	107,000	Ψ	20,000	<u> </u>	17,020	Ψ	203,103
Other Charges		Budget		Admin		Program	Eva	aluation		Misc		YTD
PDC Latticking	1 6	640.014	φ.		φ.	E (E () 1 1	ф		Φ.		—	565.044
FRC Initiative	\$	648,911	\$	-	\$	567,911	\$	-	\$	-	\$	567,911
E3 Initiative School Readiness Initiative	\$	81,317 395,820	\$	-	\$	81,317 359,109	\$	-	\$	-	\$	81,317
	\$			-				-	\$	-	\$	359,109
New Project Initiative	\$	36,000	\$	-	\$	36,000	\$	-	\$	-		36,000
TOTAL CONTRACT COSTS	\$	1,162,048	\$	-	\$	1,044,337	\$	-	\$	-	\$	1,044,337
TOTAL	\$	1,510,629	\$	83,211	\$	1,152,202	\$	25,000	\$	47,328	\$	1,307,742

FY 24/25 Final Fiscal Report Revenue

	Revenue FY 2024/2025									
Month	Estimated Prop 10	Actual Prop 10 Revenue	Prop 56 Backfill	Prop 10/E- cigarette tax & SMIF	Interest	Regional Home Visitation Grant	Misc (Public Health PM)	Total	Revenue Received (% of Prop 10 Estimate)	
July 2024	\$ 93,065	\$ 74,178						\$ 74,178	80%	
August 2024	\$ 93,064	\$ 79,628						\$ 79,628	86%	
Sepetember 2024	\$ 93,064	\$ 61,876						\$ 61,876	66%	
October 2024	\$ 93,065	\$ 73,742		\$ 4,956	\$ 9,156	\$ 949		\$ 88,803	85%	
November 2024	\$ 93,064	\$ 67,974						\$ 67,974	73%	
December 2024	\$ 93,064	\$ 61,926						\$ 61,926	67%	
January 2025	\$ 93,065	\$ 59,400			\$ 9,312			\$ 68,712	64%	
February 2025	\$ 93,064	\$ 53,543					\$ 10,427	\$ 63,970	58%	
March 2025	\$ 93,064	\$ 15,815		\$ 4,233		\$ 1,383		\$ 21,431	22%	
April 2025	\$ 93,065	\$ 70,087	\$ 323,015		\$ 10,808		\$ 5,982	\$ 409,892	422%	
May 2025	\$ 93,064	\$ 57,746		\$ 4,139				\$ 61,885	66%	
June 2025	\$ 93,064	\$ 65,000		\$ 4,400	\$ 12,187	\$ 24,270		\$ 105,857	75%	
TOTAL REVENUE	\$ 1,116,772	\$ 740,915	\$ 323,015	\$ 17,728	\$ 41,463	\$ 26,602	\$ 16,409	\$ 1,166,131	96.86%	



Date of Meeting: August 5, 2025

2025-08-187

Professional Service Agreement between First 5 Commission and County of Kings



Date of Meeting:
Agenda Item:
Discussion/Action Item:

August 5, 2025 2025-08-187 Action Item

AGENDA ITEM:

Professional Services Agreement between First 5 Kings County and

County of Kings

A. Background/History:

The Kings County Children and Families Commission (First 5 Kings) was established in 1998 when California voters passed Proposition 10, codified under Health and Safety Code § 130100-130155.

The Commission entered into a Professional Services Agreement with County of Kings on July 20, 2021 as the Commission required legal, fiscal, and administrative services, including staffing. The Agreement recently expired on June 30, 2025.

The Commission continues to need professional services, including staffing. A draft agreement effective July 1, 2025 through June 30, 2030 is before the Commission for review and approval. County Counsel has reviewed the draft agreement and provided comments and slight revisions. The agreement is pending County Risk Management review.

B. Summary of Request, Description of Project and/or Primary Goals of Agenda Item:

Commission staff recommend that the Commission review and approve the Professional Services Agreement between the Commission and County of Kings, pending final County Counsel and Risk Management approval, and direct staff to take actions as necessary, including placing the matter on the Kings County Board of Supervisors meeting agenda for review and approval.

C. Timeframe:

The agreement will cover the term from July 1, 2025 through June 30, 2030.

D. Costs:

There are no additional costs to the current Fiscal Year 2025-2026 budget. All services including staffing are incorporated in the Commission's budget and submitted to County Administrative Office for inclusion in the County budgeting process.

E. Staff Recommendation:

Commission staff recommend that the Commission review and approve the draft Professional Services Agreement, pending full review and approval of County Counsel and Risk Management, and direct staff to take actions as necessary to fully execute the agreement.

F. Attachments:

Draft Agreement between the Commission and the County for administrative services

AGREEMENT FOR THE PROVISION OF STAFFING AND SERVICES BETWEEN THE COUNTY OF KINGS AND THE FIRST 5 KINGS COUNTY CHILDREN AND FAMILIES COMMISSION

THIS AGREEMENT is made and entered into as of the _____ day of ______, 2025, by and between the County of Kings, a political subdivision of the State of California (hereinafter "County") and the First 5 Kings County Children and Families Commission, an independent local public agency established in accordance with the California Children and Families Act of 1998 (hereinafter "Commission").

RECITALS

WHEREAS, the voters of the State of California enacted the California Children and Families Act of 1998 (hereinafter "the Act"), as codified in Health and Safety Code § 130100 *et seq.*, also known as Proposition 10;

WHEREAS, the Board of Supervisors of Kings County ("the Board") established, pursuant to the Act and Kings County Ordinance No. 609.4, codified as Section 2-40 of the same, the Commission as an independent legal entity;

WHEREAS, pursuant to Section 2-48 of the Kings County Ordinances, the Commission may enter into a memorandum of understanding with the County to provide staffing and services; and

WHEREAS, the Commission requires legal, fiscal, and administrative services and desires to obtain such services from County.

NOW, THEREFORE, the parties mutually agree as follows:

1. SCOPE OF SERVICES

The County shall provide the following staffing and services to the Commission:

- 1. <u>Auditor-Controller-County Clerk.</u> The Auditor-Controller-County Clerk shall: (1) maintain trust accounts in Commission's name and process Commission's deposits and withdrawals and journal vouchers using standard County forms and systems; (2) process vouchers approved by Commission as received, consistent with County policy toward non-County entities; (3) when requested in writing, cancel and reissue warrants; and (4) maintain and produce financial reports in the same manner and format as for County departments.
- 2. <u>Treasurer-Tax Collector</u>. The Treasurer-Tax Collector shall invest any surplus Commission fundson its behalf in accordance with the County's policies.
- 3. <u>Information Technology Services</u>. The Information Technology Services Division shall provide Commission electronic access to its financial reports in the same manner and format as provided to County departments.
 - 4. Legal Services. The Office of County Counsel shall provide legal advice on

contractual, statutory, regulatory, and other legal matters. In addition, an attorney of the office will attend Commission meetings and closed sessions as legal advisor to the Commission. The office will bill the Commission for these legal services monthly at the rate set for all County departments and agencies under the Countywide Cost Allocation Plan as amended from fiscal year to fiscal year. As for legal actions and proceedings, at the request of Commission, County Counsel will initiate, in the name of Commission, such legal actions or proceedings as are necessary and advisable. Commission shall bear the costs and legal fees of legal actions it initiates, and the costs and legal fees of defending itself in legal proceedings, including administrative proceedings, mediations, or arbitrations. If legal proceedings are brought jointly against County and Commission, legal defense costs and attorney fees will be jointly borne, unless the County or the Commission is represented by different counsel. With respect to any legal action between County and Commission arising out of this Agreement, each party shall pay its own legal expenses and costs. Commission may, at its discretion, use an attorney of its choosing if a conflict of interest is identified by the Commission or the Office of the County Counsel or for any other reason Commission deems appropriate. In the event of a conflict of interest or for any reason the Counsel deems appropriate, the County Counsel reserves the right to discontinue some or all of the legal services provided to and for the Commission after notice to, and consultation with, the Commission. At the Commission's election, it may participate in the County's self-insurance pool and excess coverage for general liability and worker's compensation insurance coverage. Commission shall pay the rates established by County for participation in such insurance coverage.

- 5. <u>First 5 staff positions</u>. All individuals in positions in budget unit 432300 will continue as employees of the County. The County will continue to provide staffing for the Executive Director (in-kind), Program Manager and clerical support to maintain the work required to carry out the Commission's Strategic Plan and Budget.
- 6. <u>Fiscal support.</u> The Department of Public Health's Fiscal division will continue to assist staff with fiscal-related matters, including payroll, purchasing and budgeting.
- 7. <u>Administrative Support Services.</u> The County Administrative Office shall administer this agreement on behalf of the County, facilitating and coordinating, as necessary and appropriate, the services provided by the County under this Agreement.

2. COMPENSATION

County shall be compensated for the services set forth, above, <u>and</u> as set forth in the Commission's adopted annual budget. The Commission will provide the County with an updated Annual Budget each Fiscal year. The parties agree to meet and confer before the adoption of the budget to ensure sufficient funds are available to reimburse the County for the services and staffing provided. In the event the Commission's resources are insufficient to cover the services provided, the County shall work with the Commission to determine whether to decrease the level of staffing or services, outsource a service, or otherwise amend this Agreement as appropriate

The Commission shall pay the County the amounts agreed upon in quarterly installments throughout the Ffiscal Yyear (July 1 through June 30) on the dates mutually agreed to by the parties during the budget negotiation process.

3. TERM

This Agreement shall remain in full force and effect from July 1, 2025, through June 30, 2030, unless otherwise amended or terminated pursuant to its provisions.

4. RECORDS AND INSPECTIONS.

The County shall maintain full, complete, and accurate records with respect to all matters covered under this Agreement. All such records shall be prepared in accordance with generally accepted accounting procedures, shall be clearly identified, and shall be kept readily accessible. The Commission shall have free access during normal work hours to such records and the right to examine, inspect, copy, or audit them, at no cost to the Commission. Records shall be maintained for seven (7) years after the termination of this Agreement or any extension thereof.

5. AMENDMENTS

This Agreement may be modified by a written amendment signed by the Commission and the County's Board of Supervisors ("Board") or other representative as authorized by the Board the authorized representatives of the parties.

6. TERMINATION

The right to terminate this Agreement may be exercised without prejudice to any other right or remedy to which the terminating party may be entitled at law or under this Agreement.

- A. <u>Without Cause</u>. Either party may terminate this Agreement without cause by giving the other party thirty (30) calendar days' written notice of its intention to terminate pursuant to this provision, specifying the date of termination. If the termination is for non-appropriation of funds, the County may terminate this Agreement effective immediately.
- B. <u>With Cause</u>. This Agreement may be terminated by either party should the other party materially breach its duties or responsibilities hereunder. Upon determining a material breach has occurred, the non-breaching party shall provide written notice to the breaching party of its intention to terminate the Agreement and inform the breaching party whether the breach is able to be cured.
- 1) <u>Breach Subject to Cure</u>. Unless otherwise specifically noted in the Notice of Breach, all Notices of Breach shall be deemed subject to this provision. If the non-breaching party deems the breach of a nature subject to cure, said party shall allow the breaching party a period of at least ten (10) calendar days to cure the breach. If the breach is not remedied within the period specified in the Notice of Breach, the non-breaching party may terminate the Agreement upon further written notice specifying the date of termination.
- a. In the event the nature of the breach requires more time than allowed in the Notice of Breach to cure, the breaching party may submit a written proposal to the non-breaching party within that period, in which said party sets forth a specific plan to remedy the breach and a date certain for completion. If the non-breaching party agrees to the proposed plan in writing, the breaching party shall immediately commence curing the breach. If the breaching party fails to cure the breach within the time agreed upon by the parties, the non-breaching party may terminate the Agreement either immediately, on a date provided in the Notice of Breach, or provide the breaching party additional time to cure the breach.

- b. Alternatively, the County may elect to cure the breach and charge any and all expenses incurred as a result thereof to the Contractor.
- 2) <u>Breach Not Subject to Cure</u>. If the non-breaching party deems the breach is of such a nature as it is not subject to or is incapable of being cured, it shall provide a Notice of Breach to the breaching party of its intent to terminate the Agreement for cause, in which it shall include a date upon which the Agreement terminates.
- C. <u>Effects of Termination</u>. Termination of this Agreement shall not terminate Contractor's obligations or liability to the County for damages sustained by the County because of the Contractor's breach, nor the Contractor's duty to indemnify, maintain and make available any records pertaining to this Agreement, cooperate with any audit, be subject to offset, or make any reports of pretermination contract activities.
- D. <u>Forbearance Not to be Construed as Waiver of Breach or Default.</u> In no event shall any act of forbearance by either party of previous acts by the other party that constitute a breach or default of the party's obligations under this Agreement serve as a waiver of the parties' right to assert that a breach or default of this Agreement has occurred, nor shall such act impair or prejudice any remedy available to the non-breaching party with respect to any breach or default.

7. INSURANCE

Without in any way affecting the indemnity herein provided and in addition thereto, the Authority shall secure and maintain throughout the term of this Agreement the following types of insurance with limits as shown:

- A. Workers' Compensation: A program of workers' compensation insurance in an amount and form necessary to meet all applicable requirements of the Labor Code of the State of California, including Employer's Liability with \$250,000 limits.
- B. Comprehensive General and Automobile Liability Insurance: This coverage will include contractual coverage and automobile liability coverage for owned, hired, and non-owned vehicles. The policy shall have combined single limits for bodily injury and property damage of not less than \$2,000,000 per occurrence.
- C. Errors and Omission Liability Insurance: Coverage shall have combined single limits of \$2,000,000 per claim or occurrence.
- D. The Authority shall provide the County with evidence of such insurance and each insurance policy shall be endorsed to include the County as an Additional Insured.

8. INDEMNIFICATION

The parties agree to indemnify, defend, protect, and hold each other, their officials, officers, employees, and agents harmless from and against any and all liability, losses, claims, damages, expenses, demands, and costs including, but not limited to, attorney, expert witness, consultant, and litigation costs, arising out of the other party's performance of services under this Agreement, but only to the extent the offending party is responsible for such damages, liabilities, and costs on a comparative basis of fault between the parties in the performance of services under this Agreement.

Commented [CP1]: Has the insurance been approved by Risk? These limits differ from the County's standard limits.

9. INDEPENDENT CONTRACTOR

The Commission and the County are independent entities entering into this Agreement as independent contractors and not as agents, officers, or employees of the other party. The parties therefore mutually understand and agree that this Agreement is by and between two independent contractors and is not intended to, and shall not be construed to create, the relationship of agent, servant, employee, partnership, joint venture or association.

10. COMPLIANCE WITH LAW

The parties shall comply with all federal, state, and local laws and regulations applicable to its performance including, but limited to, Government Code section 8350 *et seq.* regarding a drug free workplace and all health and safety standards set forth by the State of California and Commission.

11. CONFIDENTIALITY

The parties shall not use each other's confidential information for any purpose other than carrying out their obligations under this Agreement. Each party shall prevent unauthorized disclosure of the other party's confidential information. Each party shall promptly transmit to the other party all requests for disclosure of the other party's confidential information.

12. CONFLICT OF INTEREST

The County warrants that its employees or their immediate families or Board of Supervisors or officers have no financial interest, including, but not limited to, other projects or independent contracts, and shall not acquire any financial interest, direct or indirect, which conflicts with the rendering of services under this Agreement. The County shall employ or retain no such person while rendering services under this Agreement. Services rendered by County's associates or employees shall not relieve the County from personal responsibility under this clause. The County has an affirmative duty to disclose to the Commission in writing the name(s) of any person(s) who have an actual, potential, or apparent conflict of interest.

13. NONDISCRIMINATION

In rendering services under this Agreement, the County shall comply with all applicable federal, state and local laws, rules and regulations and shall not discriminate based on age, ancestry, color, gender, marital status, medical condition, national origin, physical or mental disability, race, religion, gender identity, gender expression, or sexual orientation.

Further, the County shall not discriminate against its employees, which includes, but is not limited to, employment upgrading, demotion or transfer, recruitment or recruitment advertising, layoff or termination, rates of pay or other forms of compensation and selection for training, including apprenticeship.

14. SUBCONTRACTORS

Services under this Agreement are deemed to be personal services. County warrants that it has not and it shall not subcontract any work under this Agreement without the prior written consent of the

Commission subject to any required state or federal approval.

15. ASSIGNMENT

County shall not assign this Agreement without the prior written consent of the Commission subject to any required state or federal approval. Assignment by County of any monies due shall not constitute an assignment of the Agreement.

16. UNFORESEEN CIRCUMSTANCES

Neither party shall be responsible for any delay caused by natural disaster, war, civil disturbance, labor dispute or other cause beyond a party's reasonable control, provided written notice is provided to the other party of the cause of the delay within ten (10) days of the start of the delay. Thereafter, the parties shall meet and confer as to whether to amend, suspend, or terminate this Agreement.

17. OWNERSHIP OF DOCUMENTS

The Commission shall be the owner of and shall be entitled to possession of any computations, plans, correspondence, or other pertinent data and information gathered by or computed by the County relating to this Agreement prior to its termination or upon completion of the County's work.

18. NOTICE

Any notice necessary to the performance of this Agreement shall be given in writing by personal delivery, fax, overnight carrier, e-mail or by prepaid first-class mail addressed as follows:

County: Commission:

County of Kings First 5 Kings County 1400 W. Lacey Blvd. Bldg. 6 460 Kings County Drive, Ste. 101

Hanford, CA 93230 Hanford, CA 93230

If notice is given by: a) personal delivery, it is effective as of the date of personal delivery; b) fax, it is effective as of the date of the fax; c) overnight carrier, it is effective as of the date of delivery; d) email, it is effective as of the date it was sent; e) mail, it is effective as of five (5) days following the date of mailing or the date of delivery reflected upon a return receipt, whichever occurs first.

19. CHOICE OF LAW

The parties have executed and delivered this Agreement in the County of Kings, State of California. The parties agree that the laws of the State of California shall govern the validity, enforceability or interpretation of this Agreement and Kings County shall be the venue for any action or proceeding, in law or equity that may be brought in connection with this Agreement. County hereby waives any rights it may possess under Section 394 of the Code of Civil Procedure to transfer to a neutral county or other venue any action arising out of this Agreement.

20. SEVERABILITY

If any of the provisions of this Agreement is found to be unenforceable, the remainder shall be enforced as fully as possible and the unenforceable provision shall be deemed modified to the limited

extent required to permit enforcement of the Agreement as a whole.

21. SURVIVAL

The following sections shall survive the termination of this Agreement: Section 5 Records and Inspections, Section 8 Insurance, Section 9 Indemnification, and Section 12 Confidentiality.

22. NO THIRD PARTY BENEFICIARIES.

The Commission and the County are the only parties to this Agreement and are the only parties entitled to enforce its terms. Nothing in this Agreement gives, is intended to give, or shall be construed to give or provide, any right or benefit, whether directly or indirectly or otherwise, to a third party.

23. ENTIRE AGREEMENT; COUNTERPARTS; CONTRIBUTIONS OF BOTH PARTIES; IMAGED AGREEMENT

This Agreement, including its Recitals and Exhibits, which are fully incorporated into and are integral parts of this Agreement, constitutes the entire agreement between the parties and there are no inducements, promises, terms, conditions, or obligations made or entered into by the parties other than those contained herein.

This Agreement may be executed simultaneously and in several counterparts, each of which shall be deemed an original, but which together shall constitute one and the same instrument.

The parties agree that each party had an opportunity to review this Agreement, consult with legal counsel, and negotiate terms, and it is expressly agreed and understood the rule stated in Civil Code section 1654, that ambiguities in a contract should be construed against the drafter, shall have no application to the construction of the Agreement.

An original, executed, Agreement may be imaged and electronically stored. Such imaged Agreement may be used in the same manner and for the same purposes as the original. Neither party may object to the admissibility of the imaged Agreement on the basis that it was not originated or maintained in documentary form.

24. AUTHORITY

Each signatory to this Agreement represents that it is authorized to enter into this Agreement and to bind the party to which its signature represents.

[SIGNATURES ON FOLLOWING PAGE]

IN WITNESS WHEREOF the parties have executed this Agreement the day and year first written above. COUNTY OF KINGS COMMISSION By: By: Milton Teske, M.D., Chairperson Doug Verboon, Chairman Kings County Board of Supervisors First 5 Kings County Children & Families Commission REVIEWED AND RECOMMENDED FOR APPROVAL: Rose Mary Rahn, Kings County Public Health Director and First 5 Executive Director ATTEST: By: Catherine Venturella, Clerk to the Board APPROVED AS TO FORM: NAMELaurie Avedisian-Favini, County Counsel By: NAMECrystal M. Pizano, TITLEDeputy County Counsel APPROVED: By: Sarah Poots, Risk Manager Exhibits/Attachments: Exhibit A: Fiscal Year 2025-2026 Budget



Date of Meeting: August 5, 2025

2025-08-188

Memorandum of
Understanding between First
5 Kings and the Medi-Cal
Managed Care Plans serving
Kings County



460 Kings County Drive • Hanford • CA • 93230 • (559) 585-0814

Date of Meeting: Agenda Item: Discussion/Action Item: August 5, 2025 2025-08-188 Action Item

AGENDA ITEM:

Memorandum of Understanding between Medi-Cal Managed Care Plans serving Kings County and Kings County Children and Families Commission

A. Background/History:

California Department of Health Care Services (DHCS) released All Plan Letter (APL) 23-029 in October 2023. APL 23-029 describes the requirement of Medi-Cal Managed Care Plans (MCPs) to build partnerships with various Third-Party Entities to ensure Medi-Cal Member care is coordinated and Members have access to community-based resources in order to support whole-person care. The MCPs were provided with Memorandum of Understanding (MOU) templates for the different entities, including local health departments; local educational and governmental agencies, such as county behavioral health departments for specialty mental health care and Substance Use Disorder (SUD) services; other local programs and services, including social services; child welfare departments; Continuum of Care programs; First 5 programs and providers; Regional Centers; Area Agencies on Aging; Caregiver Resource Centers; Women, Infants and Children Supplemental Nutrition Programs (WIC); Home and Community-Based Services (HCBS) waiver agencies and providers; and justice departments.

The MOUs are intended to be effective vehicles to clarify roles and responsibilities among parties, support local engagement, and facilitate care coordination and the exchange of information necessary to enable care coordination and improve the referral processes between the parties. The MOUs are also intended to improve transparency and accountability by setting forth certain existing requirements for each party as it relates to service or care delivery and coordination so that the parties are aware of each other's obligations.

In November 2024, DHCS released the final First 5 MOU Template. Shortly after the MOU's release, Program Manager Clarissa Ravelo, along with Kings County Department of Public Health's Contracts Manager, David Long, and First 5 Association's Senior Policy Research Associate, Jaren Gaither met with representatives from the MCPs that serve Kings County: Kaiser Foundation Health Plan, Inc., Blue Cross of California Partnership Plan, Inc., The Fresno-Kings-Madera Regional Health Authority, dba CalViva Health, and its subcontractor, Health Net Community Solutions, Inc. to discuss the MOU template. The group agreed that a joint MOU would be the best approach for Kings County.

B. Summary of Request, Description of Project and/or Primary Goals of Agenda Item:

Commission staff recommend that the Commission review, discuss and approve the MOU between the Commission and the Medi-Cal Managed Care Plans. The MOU has been reviewed and approved as to form by County Counsel. Commission staff also request that the Commission authorize the Executive Director to sign the MOU on behalf of the Commission.

C. Timeframe:

The Agreement will be effective as of the date of the final signature, and shall renew annually, unless written notice of non-renewal is given by any of the parties, or as amended in accordance with Section 14.f of the MOU.

D. Costs:

There are no additional costs to the FY 25/26 First 5 budget. Commission staff time spent on the MOU activities is minimal and is in line with the Commission's Strategic Plan.

E. Staff Recommendation:

Staff recommend that the Commission review, discuss and approve the MOU with the Medi-Cal Managed Care Plans. Staff also recommend that the Commission authorize the Executive Director to act as the authorized signatory on behalf of the Commission.

F. Attachments:

- All Plan Letter 23-029 (APL 23-029) Memorandum of Understanding Requirements for Medi-Cal Managed Cared Plans and Third-Party Entities
- First 5 MOU Template FINAL
- APL 23-029 Revised January 2025
- Memorandum of Understanding between First 5 Kings and the Medi-Cal Managed Care Plans serving Kings County

DATE: October 11, 2023

ALL PLAN LETTER 23-029

TO: ALL MEDI-CAL MANAGED CARE PLANS

SUBJECT: MEMORANDUM OF UNDERSTANDING REQUIREMENTS FOR MEDI-

CAL MANAGED CARE PLANS AND THIRD-PARTY ENTITIES

PURPOSE:

The purpose of this All Plan Letter (APL) is to clarify the intent of the Memorandum of Understanding (MOU) required to be entered into by the Medi-Cal managed care plans (MCPs) and Third Party Entities (defined below) under the Medi-Cal Managed Care Contract (MCP Contract) with the Department of Health Care Services (DHCS), and to specify the responsibilities of MCPs under those MOUs. In addition, this APL contains an MOU template with general provisions required to be included in all MOUs (Base Template) that the MCPs must execute pursuant to the MCP Contract and MOU templates tailored for certain programs, which contain the required general MOU provisions and program-specific provisions (Bespoke Templates).

Further, this APL addresses DHCS' expectations and oversight of MCP obligations under this APL and the MOUs, including MCP reporting requirements.

BACKGROUND AND INTENT:

The MCP Contract requires MCPs to build partnerships with the following Third Party Entities: local health departments; local educational and governmental agencies, such as county behavioral health departments for specialty mental health care and Substance Use Disorder (SUD) services; other local programs and services, including social services; child welfare departments; Continuum of Care programs; First 5 programs and providers; Regional Centers; Area Agencies on Aging; Caregiver Resource Centers; Women, Infants and Children Supplemental Nutrition Programs (WIC); Home and Community-Based Services (HCBS) waiver agencies and providers; and justice departments to ensure Member care is coordinated and Members have access to community-based resources in order to support whole-person care. This requirement can be found in the MCP Contract, Exhibit A, Attachment III, Section 5.6 (MOUs with Third Parties).

The MOUs are intended to be effective vehicles to clarify roles and responsibilities among parties, support local engagement, and facilitate care coordination and the exchange of information necessary to enable care coordination and improve the referral

processes between the parties. The MOUs are also intended to improve transparency and accountability by setting forth certain existing requirements for each party as it relates to service or care delivery and coordination so that the parties are aware of each other's obligations.

Each MOU is a binding, contractual agreement between the MCP and a Third-Party Entity (referred to in this APL as the "Other Party") and outlines the responsibilities and obligations of the MCP to coordinate and facilitate the provision of services to Members where Members are served by multiple parties. The purpose of the MOU is to:

- List the minimum MOU components required by the MCP Contract;
- Clarify roles and responsibilities for coordination of the delivery of care and services of all Members, particularly across MCP carved-out services, which may be provided by the Other Party;
- Establish negotiated and agreed upon processes for how the MCP and the Other Party will collaborate and coordinate on population health and/or other programs and initiatives;
- Memorialize what data will be shared between the MCP and the Other Party and how the data will be shared to support care coordination and enable monitoring;
- Provide public transparency into relationships and roles/responsibilities between the MCP and the Other Party; and
- Provide mechanisms for the parties to resolve disputes and ensure overall oversight and accountability under the MOU.

The MOU does not impose new requirements on the Other Party, but rather restates or cross-references existing requirements imposed on the Other Party by their respective oversight body, if any, in order to clarify the Other Party's roles and responsibilities under existing laws, regulations, and guidance ("existing requirements").

POLICY:

MCPs must make a good faith effort to execute MOUs with Other Parties by either January 1, 2024, July 1, 2024, or January 1, 2025, as outlined below:

MOUs Effective January 1, 2024						
Department	Program/Services					
County Behavioral Health Departments	Specialty Mental Health Services					

MOUs Effective January 1,	2024
Department	Program/Services
County Behavioral Health Departments	SUD Services
County Behavioral Health Departments	SUD Services in Drug Medi-Cal (DMC) State Plan Counties
Local Health Departments	Including, without limitation, California Children's Services (CCS),¹ Maternal, Child, and Adolescent Health (MCAH), and Tuberculosis Direct Observed Therapy
WIC Local Agencies or Non-Profit Entities	WIC
Regional Centers	Intermediate Care Facility – Developmentally Disabled Services
Local Government Agencies (LGA)	In-Home Supportive Services (IHSS)
LGA/County Social Services Departments	County Social Services programs and Child Welfare

MOUs Effective July 1, 2024							
Department	Program						
LGA	County-Based Targeted Case Management (TCM) ¹						

¹ The County TCM MOU will be effective July 1, 2024, to align with the program changes set forth in the Enhanced Care Management Policy Guide dated July of 2023, available at: https://www.dhcs.ca.gov/Documents/MCQMD/ECM-Policy-Guide.pdf

MOUs Effective January 1, 2025

HCBS Waiver Agencies and Programs

LGA/California Department of Corrections and Rehabilitation, county jails, and youth correctional facilities

Continuum of Care

First 5 Programs

Area Agencies on Aging

California Caregiver Resource Centers

Local Education Agencies (LEAs)

Indian Health Services/Tribal Entities

PROVISIONS REQUIRED TO BE INCLUDED IN MOUS

MCPs are responsible for providing Medically Necessary Covered Services to Members and coordinating Member care, particularly for services carved out of the MCP Contract. The MOU between the MCP and the Other Party is intended to serve as the primary vehicle for documenting and developing processes and procedures to ensure the MCP and the Other Party coordinate services, including health related social service needs, when Members are accessing services from both systems. For example, for the CCS program, the MOU will outline the roles and responsibilities of the MCP as well as the local agency county health departments for coordinating care, exchanging information, and conducting administrative activities related to CCS-enrolled Members accessing and receiving care.

Each MOU with all Other Parties must include, at a minimum, all of the provisions required in **Attachment A, Base MOU Template** and as required in the MCP Contract, including the following:

- <u>Services Covered by This MOU:</u> Describes the services that the MCP and the
 Other Party must coordinate for Members who reside in the Other Party's
 jurisdiction or who receive the Other Party's services.
- Party Obligations: Describes each party's provision of services and oversight responsibilities (e.g., the parties must designate liaisons to coordinate with each other and ensure compliance with the MOU requirements, including the MCP ensuring compliance by its Subcontractors, Downstream Subcontractors, and Network Providers). The intent of this provision is to ensure each party is aware of what services the other is required to provide or arrange under existing

- requirements. This provision is also intended to ensure that the parties know how and who to contact for each party to support the MOU implementation. This provision also requires the MCP to impose certain MOU requirements on its Subcontractors, Downstream Subcontractors, and Network Providers.
- Training and Education: Requires the MCP to provide education to Members and Network Providers about accessing Covered Services and the Other Party's services. Requires the MCP to train its employees who carry out responsibilities under the MOU and, as applicable, train Network Providers, Subcontractors and Downstream Subcontractors on the MOU requirements and services provided by the Other Party. This provision is intended to ensure the MCP provides its Subcontractors, Downstream Subcontractors, and Network Providers with information necessary for them to coordinate care with, and make referrals to, or receive referrals from, the Other Party.
- Referrals: Describes the requirement that the parties refer to each other as
 appropriate and describes each party's referral pathways to ensure both parties
 understand and are able to refer to or assist Members with obtaining services
 from each other. The intent of this provision is to encourage the parties to
 develop and document how parties can refer Members to one another and what
 information may need to accompany each referral.
- <u>Care Coordination</u>: Describes the policies and procedures for coordinating care between the parties, addressing barriers to care coordination, and ensuring the ongoing monitoring and improving of such care coordination. This provision is intended to encourage the parties to develop and document how the parties will coordinate care, monitor whether those processes are working, and improve the processes, as necessary.
- Quarterly Meetings: Requires the parties to meet at least quarterly to address care coordination, Quality Improvement (QI) activities, QI outcomes, systemic and case-specific concerns, and communicating with others within their organizations about such activities. Within 30 Working Days after each quarterly meeting, the MCP must post on its website the date and time the quarterly meeting occurred in order to demonstrate transparency that the meetings are taking place. The intent of this provision is to ensure that the parties have a set time to meet to assess whether the MOU is effective in supporting care coordination and whole-person care, as well as to address specific issues that may have arisen in the prior quarter. These meetings are not intended to be open to the public. These meetings may be conducted virtually.
- Quality Improvement: Requires that the parties have in place MOU-specific QI
 policies to ensure each party's ongoing oversight and improvement of the MOU
 requirements. These QI policies and activities are separate and apart from an
 MCP's other QI requirements. The intent of this provision is to encourage the
 parties to develop and document how they will assess whether the MOU is

- improving care coordination and whole-person care and to develop metrics to evaluate whether the MOU is effective in achieving its goals.
- <u>Data Sharing and Confidentiality</u>: Describes the minimum data and information that the MCP must share with the Other Party to ensure the MOU requirements are met and describes the data and information the Other Party may share with the MCP to improve care coordination and referral processes. This provision is intended to encourage the parties to determine and document the minimum necessary information that must be shared to facilitate referrals and coordinate care, how to share that information, and whether Member consent is required. The data sharing requirements set forth in the MOUs are not intended to supersede any federal or state laws or regulations governing the ability of the MCP or Other Party to exchange information.
- <u>Dispute Resolution</u>: Describes the policies and procedures for resolving disputes between the parties and the process for bringing the disputes to DHCS (and other departments as appropriate) when the parties are unable to resolve disputes between themselves. The intent of this provision is to encourage the parties to develop and document a dispute resolution process to resolve conflicts with regard to each parties' responsibilities under the MOU.
- General: Describes additional general Contract requirements, such as the requirements that the MCP must publicly post the executed MOU, the MCP must annually review the MOU, and the MOU cannot be delegated, except as permitted under the MCP Contract.

Program-Specific MOU Requirements (Bespoke Templates)

MOUs are intended to acknowledge the unique relationships and specific needs that exist at the local level, as outlined in the MCP Contract. As such, the **Attachment B, Bespoke Templates** build on the Base Template requirements by including tailored provisions for the following programs:

- 1. Specialty Mental Health Services;
- 2. SUD Services:
- 3. SUD Services in DMC State Plan Counties;
- 4. Local Health Departments, including program-specific exhibits for CCS, MCAH, Tuberculosis Direct Observed Therapy, and Non-Contracted Services:
- 5. WIC:
- 6. Regional Centers;
- 7. IHSS:
- 8. County Social Services programs and Child Welfare; and
- 9. TCM.

MCPs cannot remove or alter the minimum requirements in the Base Template or Bespoke Templates. However, the MCP and the Other Party may agree to include additional provisions, including, without limitation, the optional provisions included in the templates, provided any additional provision does not conflict with the required minimum provisions. The templates include language that the parties may want to add to their MOUs to increase collaboration and communications. The proposed language is not exhaustive.

MOU COMPLIANCE AND OVERSIGHT REQUIREMENTS

The MCP Contract outlines specific processes that MCPs must have in place in order to maintain collaboration with the Other Party and have appropriate oversight of the MOU requirements.

Ultimately, the MCP compliance officer is responsible for MOU compliance, and ensuring compliance with the MOU must be part of the MCP's compliance program. The MCP compliance officer must ensure that deficiencies in MOU compliance are addressed in accordance with MCP's compliance program policies.

MCP Responsible Person and MCP-Other Party Liaison

The MCP must designate a responsible person(s) for overseeing the MCP's compliance with the relevant MOU(s) and the relevant provisions (MCP Responsible Person). This MCP Responsible Person must provide reports to the MCP compliance officer. For example, the MCP may consider designating staff within their contract management, provider relations, or community relations functional areas. The MCP must ensure the responsible person(s) is well-versed with the MOU(s) provisions, has developed relationships with the relevant Other Party, and is empowered to meet compliance with the MOU(s). MCPs must notify DHCS of a change in the responsible person/liaison as soon as practicable, but no later than five Working Days of the change.

As outlined in the Base Template, and incorporated in the Bespoke Templates, under "MCP Obligations: Oversight Responsibility," the MCP Responsible Person must:

- Conduct regular meetings, on at least a quarterly basis, to address policy and practical concerns that may arise between MOU parties (See the Quarterly Meetings Section of the Base Template for an example of the required language);
- Ensure an appropriate level of leadership (i.e., persons with decision-making authority) are involved in implementation and oversight of the MOU engagements and ensure the appropriate levels of leadership from the Other Party are invited to participate in the MOU engagements, as appropriate;

- 3. Report on the MCP's compliance with the MOU to the MCP's compliance officer no less frequently than quarterly;
- 4. Ensure there is sufficient staff at the MCP to support compliance with, and management of, the relevant MOU(s) and its provisions;
- 5. Ensure training and education regarding MOU provisions are conducted annually for the MCP's employees responsible for carrying out activities under the MOU, and as applicable, for Network Providers, Subcontractors, and Downstream Subcontractors:
- 6. Ensure that the MCP's Subcontractors, Downstream Subcontractors, and Network Providers, as applicable, comply with all applicable provisions of the MOUs (see the "Subcontractor and Network Providers" section below and the MOU templates for further details); and
- 7. Serve as, or designate a person at the MCP to serve as, the point of contact and liaison with the Other Party or Other Party programs (MCP-Other Party Liaison). This liaison is to serve as the subject matter expert for the Other Party to address day-to-day concerns for administering the MOU. For example, the MCP-CCS Liaison would serve as the contact for the CCS County administrator to address immediate concerns related to specialty care services for CCS Members in a particular county. The MCP must notify the Other Party of any changes to the MCP-Other Party Liaison in writing as soon as reasonably practical but no later than the date of change and must notify DHCS within five Working Days of the change.

Data Sharing and Confidentiality

MCPs must share the minimum necessary data and information to facilitate referrals and coordinate care under the MOU. MCPs must have policies and procedures for supporting the timely and frequent exchange of Member information and data, which may include behavioral health and physical health data; for ensuring the confidentiality of exchanged information and data; and, if necessary, for obtaining Member consent. MCPs must share information in compliance with applicable law, which may include the Health Insurance Portability and Accountability Act and its implementing regulations, as amended, Title 42 Code of Federal Regulations (CFR) Part 2, as well as other state and federal privacy laws.² As applicable and for the purposes of care management and coordination, MCPs should share information in compliance with the California Health and Human Services Agency Data Exchange Framework as referenced in APL 23-013

² The CFR is searchable at: https://www.ecfr.gov/

and any subsequent iterations on this topic, as well as DHCS' California Advancing and Innovating Medi-Cal Data Sharing Authorization Guidance.³

Dispute Resolution

MCPs must work collaboratively with the Other Party to establish dispute resolution processes and timeframes within the MOU. This includes how the MCP will work with the Other Party to resolve issues related to coverage or payment of services under conflicts regarding respective roles for care management for specific Members, or other concerns related to the administered services to Members. See the Base Template "Dispute Resolution" section for an example of the required language.

After a failure to resolve the dispute pursuant to the process and timeframe established in the MOU, the MCP must submit a written "Request for Resolution" to DHCS and the Other Party may submit the dispute to the relevant department with oversight of the Other Party (e.g., California Department of Social Services, California Department of Public Health, or California Department of Developmental Services). If the MCP submits the Request for Resolution, it must be signed by the MCP's Chief Executive Officer (CEO) or the CEO's designee. If the Request for Resolution is submitted by the Other Party, it should be signed by an authorized representative of the Other Party.

MCP's Request for Resolution to DHCS must include:

- 1. A summary of the disputed issue(s) and a statement of the desired remedies, including any disputed services that have been or are expected to be delivered to a Member;
- 2. A history of the attempts to resolve the issue(s) with the Other Party;
- 3. Justification for the desired remedy; and
- 4. Any additional documentation relevant to resolve the disputed issue(s), if applicable.

MCPs must submit the Request for Resolution to DHCS via secure email to MCPMOUS@dhcs.ca.gov.

DHCS, in collaboration with the sister department as appropriate, will communicate the final decision to the MCP and the Other Party, including any actions the MCP must take to implement the decision.

³ APLs are searchable at: https://www.dhcs.ca.gov/formsandpubs/Pages/AllPlanLetters.aspx

Subcontractors and Network Providers

MCPs must ensure that their Subcontractors, Downstream Subcontractors, and Network Providers, as applicable, comply with all applicable provisions of the MOUs.

If an MCP has a Subcontractor or Downstream Subcontractor arrangement delegating part or all of the responsibilities relating to effectuating the MOUs to a Knox-Keene licensed health care service plan(s), this Subcontractor or Downstream Subcontractor must be added as an express party to the MOU and named in the MOU as having the responsibilities set forth as applicable to this Subcontractor or Downstream Subcontractor. For example, if an MCP delegates risk for an assigned portion of its membership to a Subcontractor or Downstream Subcontractor, the signatories of the MOU must include the MCP, the Subcontractor or Downstream Subcontractor, and the Other Party.

Training

MCPs must provide training and orientation on the MOU requirements to their employees who carry out responsibilities under the MOU and, as applicable, to their Subcontractors, Downstream Subcontractors, and Network Providers. The training must include information on MOU requirements and the services that are provided or arranged for by each party and how those services can be accessed or coordinated for the Member. MCPs must provide this training within a specified time after the MOU is effective and at least annually thereafter.

Local Engagement

As noted, the MOU is intended to be a vehicle to support engagement with local partners. To that end, the MCP must ensure an appropriate local presence at its quarterly meetings by inviting the appropriate responsible person(s) and program executives from the Other Party. At each quarterly meeting, the MCP must ensure there is the opportunity to discuss and address care coordination and MOU-related issues with county executives.

Signatories

As noted above, if an MCP has a Subcontractor or Downstream Subcontractor arrangement delegating part or all of the responsibilities related to effectuating the MOU to a Knox-Keene licensed health care service plan(s), the signatories of the MOU must include the MCP, the Subcontractor or Downstream Subcontractor, and the Other Party. In addition, to minimize administrative burden on counties and Other Parties, DHCS encourages multi-party MOUs, which may include more than one MCP and/or Other Party signing an MOU. In addition, MCPs may work with the Other Party to consolidate signature pages for multiple types of MOUs, for example, if an MCP is

entering into an agreement for multiple county administered programs.

MONITORING AND REPORTING

Starting January 1, 2025, MCPs must submit to their DHCS Managed Care Operations Division (MCOD) Contract Manager an annual report that includes updates from the quarterly meetings with the Other Party and the results of their annual MOU review. The quarterly meetings are to discuss care coordination activities and the specific MOU-related issues. The report must include the following elements:

- A list of all attendees, including MCP Responsible Person(s), leadership, and county executives;
- All care coordination and referral concerns discussed;
- Strengths, barriers, and plans to improve effective collaboration between the MCP and the Other Party;
- All disputes and resulting outcomes;
- · Strategies to address duplication of services; and
- Member engagement challenges and successes

To continuously evaluate the effectiveness of the MOU processes, MCPs must review their MOUs annually to determine if any amendments are needed, including incorporating any applicable contractual requirements and policy guidance to their MOUs. The annual report submission must include evidence of the annual review as well as copies of any MOUs amended or renewed as a result. The evidence of the annual review described in the annual report must include a summary of the review process and outcomes, and any resulting amendments to the MOU or policies and procedures.

If DHCS requests a review of any MOU and/or any requested policies and procedures related to the MOU, the MCP must submit the requested MOU documents to DHCS within ten Working Days of receipt of the request.

Quarterly Reporting

MCPs must demonstrate a good faith effort to meet the requirements of this APL. MCPs that are unable to execute their MOUs by the required execution date for MOUs for which DHCS has issued templates, must submit quarterly progress reports and documentation to DHCS demonstrating evidence of their good faith effort to execute the MOU.

DHCS Submissions and Reports

MCPs must submit all fully executed MOUs to their MCOD Contract Manager for file and use. In their submissions, MCPs must attest that they did not modify any of the

provisions of the Base Template or Bespoke Templates except to add provisions that do not conflict with or reduce either party's obligations under the Base Template or Bespoke Templates. If the MCP modifies any of the provisions of the Base Template or Bespoke Templates, the MCP must submit a redlined version of the MOU to DHCS for review and approval, prior to execution.

MCP Website Posting

MCPs must publish the MOU(s) and the annual report on their websites within 30 calendar days of MOU execution and report due date, respectively.

Subcontractor Compliance

MCPs are further responsible for ensuring that their Subcontractors, Downstream Subcontractors, and Network Providers comply with all applicable state and federal laws and regulations, Contract requirements, and other DHCS guidance, including APLs and Policy Letters. These requirements must be communicated by each MCP to all Subcontractors, Downstream Subcontractors, and Network Providers. DHCS may impose Corrective Action Plans (CAP), as well as administrative and/or monetary sanctions for non-compliance. For additional information regarding administrative and monetary sanctions, see APL 23-012, and any subsequent iterations on this topic. Any failure to meet the requirements of this APL may result in a CAP and subsequent sanctions.

If you have any questions regarding this APL, please contact your MCOD Contract Manager.

Sincerely,

Original Signed by Dana Durham

Dana Durham, Chief Managed Care Quality and Monitoring Division

⁴ For more information on Subcontractors and Network Providers, including the definition and applicable requirements, see APL 19-001, and any subsequent APLs on this topic.

ATTACHMENT J:

FIRST 5 MEMORANDUM OF UNDERSTANDING TEMPLATE

COVER PAGE

Memorandum of Understanding

between [Medi-Cal Managed Care Plan] and [name of First 5]

This Memorandum of Understanding ("MOU") is entered into by [name of Managed Care Plan] ("MCP") and [name of First 5 County Commission] ("First 5"), effective as of [date] ("Effective Date"). [Where MCP has a Subcontractor or Downstream Subcontractor arrangement delegating part or all of the responsibilities related to effectuating this MOU to a Knox-Keene licensed health care service plan(s), this Subcontractor or Downstream Subcontractor must be added as an express party to this MOU and named in this MOU as having the responsibilities set forth herein that are applicable to this Subcontractor or Downstream Subcontractor.] First 5, MCP, and MCP's relevant Subcontractors and/or Downstream Subcontractors are referred to herein as a "Party" and collectively as "Parties."

WHEREAS, MCP is required under the Medi-Cal Managed Care Contract, Exhibit A, Attachment III, to enter into this MOU, a binding and enforceable contractual agreement, to enable Medi-Cal beneficiaries enrolled, or eligible to enroll, in MCP ("Members") are able to access services and connect to a broader array of supports in a coordinated manner from MCP and First 5;

WHEREAS, First 5s were designed to "emphasize local decision making, to provide for greater local flexibility in designing delivery systems" to support children prenatal to age five (5) and their families, and First 5s have broad authority to determine allocation of resources in response to local conditions and as prioritized in their respective strategic plan; and

WHEREAS, the Parties desire to ensure that Members receive services available and benefit from the prenatal to five (5) expertise and family-serving system knowledge and experience of First 5 through coordinating with MCP and to provide a process to continuously evaluate and improve the quality of care coordination provided.

[Notation: This MOU template includes language, notated in italics and bracketed, that the Parties may want to add to this MOU to increase collaboration and communication. MCP and First 5 may also agree to additional provisions, provided that they do not conflict with the requirements of this MOU.]

¹ Cal. Health & Safety Code sections 130100, et seq.

In consideration of the mutual agreements and promises hereinafter, the Parties agree as follows:

- **1. Definitions.** Capitalized terms have the meaning ascribed by MCP's Medi-Cal Managed Care Contract with the California Department of Health Care Services ("DHCS"), unless otherwise defined herein. The Medi-Cal Managed Care Contract is available on the DHCS webpage at www.dhcs.ca.gov.
- a. "MCP Responsible Person" means the person designated by MCP to oversee MCP coordination and communication with First 5 and ensure MCP's compliance with this MOU as described in Section 4 of this MOU. It is recommended that this person be in a leadership position with decision-making authority and authority to effectuate improvements in MCP practices.
- b. "MCP-First 5 Liaison" means MCP's designated point of contact responsible for acting as the liaison between MCP and First 5 as described in Section 4 of this MOU. The MCP-First 5 Liaison must ensure the appropriate communication and care coordination are ongoing between the Parties, facilitate quarterly meetings in accordance with Section 9 of this MOU, and provide updates to the MCP Responsible Person and/or MCP compliance officer as appropriate.
- c. "First 5 Responsible Person" means the person designated by First 5 to oversee coordination and communication with MCP and ensure First 5's compliance with this MOU as described in Section 5 of this MOU. It is recommended that this person be in a leadership position with decision-making authority and authority to effectuate improvements in First 5 practices.
- d. "First 5 Liaison" means First 5's designated point of contact responsible for acting as the liaison between MCP and First 5 as described in Section 5 of this MOU. The First 5 Liaison should ensure the appropriate communication and care coordination are ongoing between the Parties, facilitate quarterly meetings in accordance with Section 9 of this MOU, and provide updates to the First 5 Responsible Person as appropriate.
- e. "First 5 Services" means the services, supports, and efforts made by First 5 to facilitate the creation and implementation of an integrated, comprehensive, and coordinated system to enhance optimal early childhood development. First 5 Services may include, as determined solely by First 5, care navigation, developmental screenings, and pregnancy and postpartum supports, as well as system investments and partnerships to improve access to quality services, reduce barriers to care, and evaluate and analyze related data to inform strategies to improve quality care and, therefore, the conditions of children prenatal to five (5) years old within their jurisdiction. [This definition may include other services as appropriate.]

- f. "First 5 Providers" means organizations and individuals contracted with or receiving funding from First 5 to provide First 5 Services.
- **2. Term.** This MOU is in effect as of the Effective Date and continues for a term of *[The Parties may agree to a term of one year or a longer term.]* or as amended in accordance with Section 14.f of this MOU.
- **3. Services Covered by This MOU.** This MOU governs the coordination between First 5 and MCP for the delivery of services for Members who reside in First 5's jurisdiction and who may be eligible for First 5 Services and supports, as First 5 resources allow.

4. MCP Obligations.

- a. **Provision of Covered Services.** MCP is responsible for authorizing Medically Necessary Covered Services and coordinating care for Members provided by MCP's Network Providers and other providers of carve-out programs, services, and benefits. MCP must support Members and/or their caregivers or legal guardian(s) in accessing medically necessary physical, behavioral, developmental, and dental health services for families and children, including those available under the Early and Periodic Screening, Diagnostic and Treatment benefit, such as periodic developmental and behavioral screening.
- b. **Oversight Responsibility.** The [*insert title*], the designated MCP Responsible Person listed in <u>Exhibit A</u> of this MOU, is responsible for overseeing MCP's compliance with this MOU. The MCP Responsible Person must:
- i. Meet at least quarterly with First 5, as required by Section 9 of this MOU;
- ii. Report on MCP's compliance with the MOU to MCP's compliance officer no less frequently than quarterly. MCP's compliance officer is responsible for MOU compliance oversight reports as part of MCP's compliance program and must address any compliance deficiencies in accordance with MCP's compliance program policies;
- iii. Ensure there is sufficient staff at MCP to support compliance with and management of this MOU;
- iv. Ensure the appropriate levels of MCP leadership (i.e., persons with decision-making authority) are involved in implementation and oversight of the MOU engagements and ensure the appropriate levels of leadership from First 5 are invited to participate in the MOU engagements, as appropriate;

- v. Ensure training and education regarding MOU provisions are conducted annually, and as otherwise described in Section 6 of this MOU, for MCP's employees responsible for carrying out activities under this MOU and, as applicable, for Subcontractors, Downstream Subcontractors, and Network Providers; and
- vi. Serve, or may designate a person at MCP to serve, as the MCP-First 5 Liaison, the point of contact and liaison with First 5. The MCP-First 5 Liaison is listed in Exhibit A of this MOU. MCP must notify First 5 of any changes to the MCP-First 5 Liaison in writing as soon as reasonably practical but no later than the date of change and must notify DHCS within five (5) Working Days of the change.
- c. **Compliance by Subcontractors, Downstream Subcontractors, and Network Providers.** MCP must require and ensure that its Subcontractors, Downstream Subcontractors, and Network Providers, as applicable, comply with all applicable provisions of this MOU.

5. First 5 Obligations.

- a. **Provision of Services.** First 5 is responsible for First 5 Services and supports as appropriate and as resources allow.
- b. **Oversight Responsibility.** The [*insert title*], the designated First 5 Responsible Person, listed in <u>Exhibit B</u> of this MOU, is responsible for overseeing First 5's compliance with this MOU. The First 5 Responsible Person serves, or may designate a person to serve, as the designated First 5 Liaison, the point of contact and liaison with MCP. The First 5 Liaison is listed in <u>Exhibit B</u> of this MOU. The First 5 Liaison may be the same person as the Responsible Person. First 5 may designate a liaison by program or service line. First 5 must notify MCP of changes to the First 5 Liaison as soon as reasonably practical but no later than the date of change, except when such prior notification is not possible, in which case, notice should be provided within five (5) Working Days of the change.

[The Parties may agree to additional requirements, such as:

- The First 5 Responsible Person must ensure there is sufficient staff at First 5 who support compliance with and management of this MOU.
- First 5 must develop and implement MOU compliance policies and procedures for First 5 programs, including oversight reports and mechanisms to address barriers to care coordination.
- The First 5 Responsible Person must ensure training and education regarding MOU provisions are conducted annually for First 5, First 5 Providers, and First 5's

- employees, as applicable and as necessary to deliver the services and supports discussed this MOU.
- The First 5 Liaison must meet MOU compliance requirements, as determined by policies and procedures established by First 5, and must report to the First 5 Responsible Person.]

6. Training and Education.

- a. To ensure compliance with this MOU, MCP must provide training and orientation for its employees who carry out responsibilities under this MOU and, as applicable, for MCP's Network Providers, Subcontractors, and Downstream Subcontractors who assist MCP with carrying out MCP's responsibilities under this MOU. The training must include information on MOU requirements, what services are provided or arranged for by each Party, and the policies and procedures outlined in this MOU. For persons or entities performing these responsibilities as of the Effective Date, MCP must provide this training within [The Parties may agree to 30, 45, or 60 Working Days.] of the Effective Date. Thereafter, MCP must provide this training prior to any such person or entity performing responsibilities under this MOU and to all such persons or entities at least annually thereafter. MCP must require its Subcontractors and Downstream Subcontractors to provide training on relevant MOU requirements and First 5 programs and services to its Network Providers. [The Parties may agree to make this requirement mutual.]
- b. In accordance with health education standards required by the Medi-Cal Managed Care Contract, MCP must provide its Members and Network Providers with educational materials related to accessing Covered Services, including for services provided by First 5. In addition, MCP must provide its Network Providers with training on Medi-Cal for Kids and Teens services, utilizing the newly developed DHCS Medi-Cal for Kids and Teens Outreach and Education Toolkit as required by APL 23-005 or any subsequent version of the APL.
- c. MCP must provide First 5, Members, and Network Providers with training and/or educational materials on how MCP's Covered Services and any carved-out services may be accessed, including during nonbusiness hours. For example, MCP and Network Providers should inform Members about First 5 programs and events. In turn, First 5 should share information about MCP open enrollment and services, such as through Medi-Cal for Kids and Teens.

[The Parties may agree to additional requirements, such as:

- MCP must provide Members and Network Providers with relevant information on First 5 Services and events hosted by First 5 and First 5 Providers for Members.
- First 5 must share information and educational materials with First 5 Providers on Medi-Cal programs and services for children and families, including DHCS Medi-Cal for Kids and Teens.
- The Parties must together develop training and educational materials covering the services provided or arranged for by the Parties. The Parties must share their training and educational materials with each other to ensure the information in their respective training and educational materials includes an accurate set of services provided or arranged for by each Party and is consistent with MCP and First 5 policies and procedures, and with clinical practice standards.
- The Parties must collaborate to educate community-based services and organizations as identified by First 5 and/or First 5 Providers who serve the prenatal to five (5) population about First 5 Services and MCP Covered Services.
- The Parties must develop and share outreach communication materials and develop initiatives to share resources about MCP and First 5 with individuals who may be eligible for MCP's Covered Services and/or First 5 Services.
- First 5 must provide the First 5 Liaison and First 5 Providers with training and educational materials on MCP's Covered Services to support First 5 in assisting Members with accessing MCP's Covered Services.]

7. Referrals.

- a. **Referral Process.** The Parties must work collaboratively to develop policies and procedures that ensure Members who may be eligible for First 5 Services are referred to First 5 and First 5 Providers, as applicable.
- b. First 5 should facilitate referrals from MCP to First 5 Providers if First 5 services are appropriate and assist MCP with identifying the appropriate First 5 Providers for such referrals as needed. [First 5 may facilitate referrals from MCP to other community-based services and organizations as identified by First 5 that may be able to serve the Member. If First 5 or First 5 Providers make referrals to other community-based services or organizations, First 5 or First 5 Providers must notify the MCP that the referral was made.]
- c. The Parties should establish policies and procedures for how First 5 will notify MCP if First 5 and/or First 5 Providers are at capacity and are unable to accept Member referrals for First 5 Services. The policies and procedures should include notification to referred Members that First 5 Services are not currently available.

- d. MCP must refer Members using a patient-centered, shared decision-making process.
- e. First 5 should recommend best practices for successful engagement of eligible Members to MCP for MCP's Covered Services and Community Supports services or care management programs for which Members may qualify, including Enhanced Care Management ("ECM") or Complex Care Management ("CCM"). However, if First 5 is also an ECM Provider, provides Community Supports, or provides other services pursuant to a separate agreement between MCP and First 5, this MOU does not govern First 5's provision of ECM, Community Supports, or other services.
- f. MCP must require that its CCM care managers, its Transitional Care Services care managers, and contracted ECM Providers refer Members to First 5 as appropriate.

[The Parties may agree to additional requirements, such as:

- The Parties must work to identify and address barriers to eligible Members' use of Medi-Cal benefits for the prenatal to five (5) individuals and their families based on information provided and best practices recommended by First 5s.
- The Parties must work to identify and refer Members to MCP who are receiving First 5 Services and who may be eligible for ECM, including, but not limited to, Members who may meet the criteria for the Birth Equity Population of Focus.
- Where a First 5 Provider is aware that a Member is at risk for a developmental disorder or has not received all age-appropriate developmental screenings, the First 5 Provider should, assuming consent from the Member's family, submit a referral for developmental screenings and/or services to the MCP or Member's primary care provider.

Closed Loop Referrals. By July 1, 2025, the MCP must develop a process to implement DHCS guidance regarding closed loop referrals to applicable Community Supports, ECM benefits, and/or community-based resources, as referenced in the CalAIM Population Health Management Policy Guide, DHCS All Plan Letter ("APL") 22-024, or any subsequent version of the APL, and as set forth by DHCS through an APL or other, similar guidance. The Parties must work collaboratively to develop and implement a process to ensure that MCP complies with the applicable provisions of closed loop referrals guidance within 90 Working Days of issuance of this quidance. The Parties must establish a system

² CalAIM Population Health Management Policy Guide, available at: https://www.dhcs.ca.gov/CalAIM/Documents/PHM-Policy-Guide.pdf.

that tracks cross-system referrals and meets all requirements as set forth by DHCS through an APL or other, similar guidance.]

8. Care Coordination and Collaboration.

- a. The Parties must adopt policies and procedures for coordinating Members' access to care and services that incorporate all the requirements set forth in this MOU.
- b. The Parties must discuss and address systematic and, to the extent possible, individual care coordination issues or barriers to care coordination efforts at least quarterly.
- c. MCP must have policies and procedures in place to maintain collaboration with First 5 and to identify strategies to monitor and assess the effectiveness of this MOU. [For example, MCP and First 5 should collaborate to leverage First 5's expertise at connecting and integrating systems of care to ensure Members are being linked to the appropriate services, such as connecting Members and their families to their medical home, social services, and other supports for the prenatal to five (5) population.]
- d. When a Member enrolled in ECM also receives First 5 Services, the ECM Provider shall coordinate services with First 5 (as appropriate) or First 5 Providers to ensure the Member's needs are addressed. To support the ECM Provider, MCP must ensure that the Member's ECM Providers are aware of First 5 agencies and contacts and consult with, keep informed (as appropriate), and share data with (as appropriate) First 5 or the First 5 Provider that provides First 5 Services to the Member.

[The Parties may agree to additional requirements such as:

- MCP must provide information to First 5 about opportunities for First 5 and First 5
 Providers to contract with MCP as Network Providers and provide support to First 5
 and First 5 Providers in addressing any barriers in doing so.
- MCP must work with First 5 to identify how MCP's ECM Providers can more effectively coordinate to improve outcomes for the prenatal to five (5) population working with First 5 and First 5 Providers.]

9. Quarterly Meetings.

a. The Parties must meet as frequently as necessary to ensure proper oversight of this MOU, but not less frequently than quarterly, to discuss community needs and how to partner to meet them and address care coordination, Quality Improvement ("QI") activities, QI outcomes, systemic and case-specific concerns, and

communication with others within their organizations about such activities. [Parties may agree to meet more frequently.] These meetings may be conducted virtually.

- b. Within 30 Working Days after each quarterly meeting, MCP must post on its website the date and time the quarterly meeting occurred and, as applicable, distribute to meeting participants a summary of any follow-up action items or changes to processes that are necessary to fulfill MCP's obligations under the Medi-Cal Managed Care Contract and this MOU.
- c. MCP must invite the First 5 Responsible Person and appropriate First 5 program executives to participate in MCP quarterly meetings to ensure appropriate committee representation, including a local presence, and to discuss and address care coordination and MOU-related issues. Subcontractors and Downstream Subcontractors should be permitted to participate in these meetings, as appropriate.
- d. MCP must report to DHCS updates from quarterly meetings in a manner and at a frequency specified by DHCS.
- e. **Local Representation.** MCP must participate, as appropriate, in meetings or engagements to which MCP is invited by First 5, such as local county meetings, local community forums, and First 5 engagements, to collaborate with First 5 in equity strategy and wellness and prevention activities. First 5 and First 5 Providers, as appropriate, are encouraged to participate in meetings, engagements, or committees to which they are invited by MCP.

[The Parties may agree to additional requirements such as:

- MCP must engage First 5, as appropriate, when partnering with local communitybased organizations and Network Providers serving families with young children.]
- **10.Quality Improvement.** The Parties must develop QI activities specifically for the oversight of the requirements of this MOU, including, without limitation, any applicable performance measures and QI initiatives, including those to prevent duplication of services and reports that track referrals, Member engagement, and service utilization. [For example, MCP and First 5 routinely evaluate whether MCP is effectively referring Members for First 5 Services and, if necessary, identify ways to improve this process.] MCP must document these QI activities in its policies and procedures. Where appropriate, MCP should include First 5 as a resource and partner in QI initiatives.

[The Parties may agree to additional requirements, such as a requirement that the Parties must adopt joint policies and procedures establishing and addressing QI activities for coordinating the care and delivery of services for Members.]

- 11.Data Sharing and Confidentiality. As applicable, appropriate, and feasible, the Parties must implement policies and procedures to ensure that the minimum necessary Member information and data for accomplishing the goals of this MOU are exchanged timely and maintained securely and confidentially, and in compliance with the requirements set forth below. The Parties must share information in compliance with applicable law, which may include the Health Insurance Portability and Accountability Act and its implementing regulations, as amended ("HIPAA"), 42 Code of Federal Regulations Part 2, and other State and federal privacy laws.
- a. **Data Exchange.** MCP must, and First 5 is encouraged to, share the minimum necessary data and information to facilitate referrals and coordinate care under this MOU. The Parties must have policies and procedures for supporting the timely and frequent exchange of Member information and data, which may include behavioral health and physical health data, including receipt of services from and engagement with First 5 Providers; for ensuring the confidentiality of exchanged information and data; and, if necessary, for obtaining Member consent. The minimum necessary information and data elements to be shared as agreed upon by the Parties are set forth in Exhibit C of this MOU. The Parties must annually review and, if appropriate, update Exhibit C of this MOU to facilitate sharing of information and data.
- b. **Use of Data by MCP.** MCP must carefully consider data and information, including community and Member feedback, made available by First 5 to address Member needs, provide a broader understanding of the health needs and preferences of Members, and support more meaningful Member engagement.³

[The Parties may agree to additional requirements such as:

- MCP must use data provided by First 5 and First 5 Providers to identify Members who may be eligible for ECM.
- MCP and First 5 must enter into the State's Data Exchange Framework Data Sharing Agreement for the safe sharing of information.
- To the extent the Parties deem it necessary and/or appropriate, they can reference a business associate agreement ("BAA") to be integrated into the Agreement by a reference in this subsection to a BAA as Exhibit D.]

³ Per the CalAIM Population Health Management Policy Guide, "Risk Stratification and Segmentation (RSS) means the process of differentiating all Members into separate risk groups and/or meaningful subsets. RSS results in the categorization of all Members according to their care and risk needs at all levels and intensities."

c. **Interoperability.** MCP must make available to Members their electronic health information held by MCP pursuant to 42 Code of Federal Regulations section 438.10 and in accordance with APL 22-026 or any subsequent version of the APL. MCP must make available an application programming interface that makes complete and accurate Network Provider directory information available through a public-facing digital endpoint on MCP's website pursuant to 42 Code of Federal Regulations sections 438.242(b) and 438.10(h).

[The Parties may agree to additional requirements such as:

Disaster and Emergency Preparedness. The Parties must develop policies and procedures to mitigate the effects of natural, man-made, or war-caused disasters involving emergency situations and/or broad health care surge events greatly impacting the Parties' health care delivery system to ensure the continued coordination and delivery of First 5 Services and MCP's Covered Services for impacted Members.]

12. Dispute Resolution.

- a. The Parties must agree to dispute resolution procedures such that, in the event of any dispute or difference of opinion regarding the Party responsible for service coverage arising out of or relating to this MOU, the Parties must attempt, in good faith, to promptly resolve the dispute mutually between themselves. MCP must, and First 5 should, document the agreed-upon dispute resolution procedures in policies and procedures. Pending resolution of any such dispute, the Parties must continue without delay to carry out all their responsibilities under this MOU, including providing Members with access to services under this MOU, unless this MOU is terminated. If the dispute cannot be resolved within [suggested: 15 Working Days] of initiating such dispute or such other period as may be mutually agreed to by the Parties in writing, either Party may pursue its available legal and equitable remedies under California law.
- b. Disputes between MCP and First 5 that cannot be resolved in a good faith attempt between the Parties must be forwarded by MCP and may be forwarded by First 5 to DHCS. Until the dispute is resolved, the Parties may agree to an arrangement satisfactory to both Parties regarding how the services under dispute will be provided.
- c. Nothing in this MOU or provision constitutes a waiver of any of the government claim filing requirements set forth in Title I, Division 3.6, of the California Government Code or as otherwise set forth in local, State, or federal law.

13. Equal Treatment.

- a. Nothing in this MOU is intended to benefit or prioritize Members over persons served by First 5 who are not Members. Pursuant to Title VI, 42 United States Code section 2000d, et seq., First 5 cannot provide any service, financial aid, or other benefit to an individual that is different, or is provided in a different manner, from that provided to others by First 5.
- b. First 5 is prohibited from directing or recommending that an individual choose or refrain from choosing a specific MCP, and MCP is prohibited from directing or recommending that an individual choose or refrain from choosing a specific First 5.
- c. First 5 is prohibited from making decisions intended to benefit or disadvantage a specific MCP, and MCP is prohibited from making decisions intended to benefit or disadvantage a specific First 5.

14. General.

- a. **MOU Posting.** MCP must post this executed MOU on its website.
- b. **Documentation Requirements.** MCP must retain all documents demonstrating compliance with this MOU for at least ten (10) years as required by the Medi-Cal Managed Care Contract. If DHCS requests a review of any existing MOU, MCP must submit the requested MOU to DHCS within ten (10) Working Days of receipt of the request.
- c. **Notice.** Any notice required or desired to be given pursuant to or in connection with this MOU must be given in writing, addressed to the noticed Party at the Notice Address set forth below the signature lines of this MOU. Notices must be (i) delivered in person to the Notice Address; (ii) delivered by messenger or overnight delivery service to the Notice Address; (iii) sent by regular United States mail, certified, return receipt requested, postage prepaid, to the Notice Address; or (iv) sent by email, with a copy sent by regular United States mail to the Notice Address. Notices given by in-person delivery, messenger, or overnight delivery service are deemed given upon actual delivery at the Notice Address. Notices given by email are deemed given the day following the day the email was sent. Notices given by regular United States mail, certified, return receipt requested, postage prepaid, are deemed given on the date of delivery indicated on the return receipt. The Parties may change their addresses for purposes of receiving notice hereunder by giving notice of such change to each other in the manner provided for herein.
- d. **Delegation.** MCP may delegate its obligations under this MOU to a Fully Delegated Subcontractor or Partially Delegated Subcontractor as permitted under the

Medi-Cal Managed Care Contract, provided that such Fully Delegated Subcontractor or Partially Delegated Subcontractor is made a Party to this MOU. Further, MCP may enter into Subcontractor Agreements or Downstream Subcontractor Agreements that relate directly or indirectly to the performance of MCP's obligations under this MOU. Other than in these circumstances, MCP cannot delegate the obligations and duties contained in this MOU.

- e. **Annual Review.** MCP must conduct an annual review of this MOU to determine whether any modifications, amendments, updates, or renewals of responsibilities and obligations outlined within are required. MCP must provide DHCS evidence of the annual review of this MOU and copies of any MOU modified or renewed as a result.
- f. **Amendment.** This MOU may only be amended or modified by the Parties through a writing executed by the Parties. However, this MOU is deemed automatically amended or modified to incorporate any provisions amended or modified in the Medi-Cal Managed Care Contract, or as required by applicable law or any applicable guidance issued by a State or federal oversight entity.
- g. **Governance.** This MOU is governed by and construed in accordance with the laws of the State of California.
- h. **Independent Contractors.** No provision of this MOU is intended to create, nor is any provision deemed or construed to create, any relationship between First 5 and MCP other than that of independent entities contracting with each other hereunder solely for the purpose of effecting the provisions of this MOU. Neither First 5 nor MCP, nor any of their respective contractors, employees, agents, or representatives, is construed to be the contractor, employee, agent, or representative of the other.
- i. **Counterpart Execution.** This MOU may be executed in counterparts, signed electronically and sent via PDF, each of which is deemed an original, but all of which, when taken together, constitute one and the same instrument.
- j. **Superseding MOU.** This MOU constitutes the final and entire agreement between the Parties and supersedes any and all prior oral or written agreements, negotiations, or understandings between the Parties that conflict with the provisions set forth in this MOU. It is expressly understood and agreed that any prior written or oral agreement between the Parties pertaining to the subject matter herein is hereby terminated by mutual agreement of the Parties.

(Remainder of this page intentionally left blank)

The Parties represent that they have authority to enter into this MOU on behalf of their respective entities and have executed this MOU as of the Effective Date.

MCP CEO or Responsible Person	First 5 Director or Responsible Person
Signature: Name: Title:	Signature: Name: Title:
Notice Address:	Notice Address:
[Subcontractor or Downstream	
Subcontractor]	
Signature: Name:	
Title:	
Notice Address:	
[MCP, if multiple MCPs in County]	
[MCF, if multiple MCFs in County]	
Signature: Name:	
Title:	
Notice Address:	

Exhibits A and B

[Placeholder for Exhibits to Contain MCP Responsible Person, MCP-First 5 Liaison,
First 5 Responsible Person, and First 5 Liaison as Referenced in Sections 4.b and
5.b of this MOU]

Exhibit C

Data Elements

Examples of data elements to include in this Exhibit are:

- i. Member demographic information; and
- ii. Known changes in condition that may adversely impact the Member's health and/or welfare and that are relevant to the services.



DATE: January 08, 2025

ALL PLAN LETTER 23-029 (REVISED)

TO: ALL MEDI-CAL MANAGED CARE PLANS

SUBJECT: MEMORANDUM OF UNDERSTANDING REQUIREMENTS FOR MEDI-

CAL MANAGED CARE PLANS AND THIRD-PARTY ENTITIES

PURPOSE:

The purpose of this All Plan Letter (APL) is to clarify the intent of the Memorandum of Understanding (MOU) required to be entered into by the Medi-Cal managed care plans (MCPs) and Third-Party Entities (defined below) under the Medi-Cal Managed Care Contract (MCP Contract) with the Department of Health Care Services (DHCS), and to specify the responsibilities of MCPs under those MOUs. In addition, this APL contains an MOU template with general provisions required to be included in all MOUs (Base Template) that the MCPs must execute pursuant to the MCP Contract and MOU templates tailored for certain programs, which contain the required general MOU provisions and program-specific provisions (Bespoke Templates). *Revised text is found in italics*.

Further, this APL addresses DHCS' expectations and oversight of MCP obligations under this APL and the MOUs, including MCP reporting requirements.

BACKGROUND AND INTENT:

The MCP Contract requires MCPs to build partnerships with the following Third-Party Entities: local health departments; local educational and governmental agencies, such as county behavioral health departments for specialty mental health care and Substance Use Disorder (SUD) services; other local programs and services, including social services; child welfare departments; First 5 *County Commissions*; Regional Centers; Women, Infants and Children Supplemental Nutrition Programs (WIC); and *California Department of Corrections and Rehabilitations, County Jails, and Youth Correctional Facilities* to ensure Member care is coordinated and Members have access to community-based resources in order to support whole-person care. This requirement can be found in the MCP Contract, Exhibit A, Attachment III, Section 5.6 (MOUs with Third Parties).

The MOUs are intended to be effective vehicles to clarify roles and responsibilities among parties, support local engagement, and facilitate care coordination and the exchange of information necessary to enable care coordination and improve the referral



processes between the parties. The MOUs are also intended to improve transparency and accountability by setting forth certain existing requirements for each party as it relates to service or care delivery and coordination so that the parties are aware of each other's obligations.

Each MOU is a binding, contractual agreement between the MCP and a Third-Party Entity (referred to in this APL as the "Other Party") and outlines the responsibilities and obligations of the MCP to coordinate and facilitate the provision of services to Members where Members are served by multiple parties. The purpose of the MOU is to:

- List the minimum MOU components required by the MCP Contract;
- Clarify roles and responsibilities for coordination of the delivery of care and services of all Members, particularly across MCP carved-out services, which may be provided by the Other Party;
- Establish negotiated and agreed upon processes for how the MCP and the Other Party will collaborate and coordinate on population health and/or other programs and initiatives;
- Memorialize what data will be shared between the MCP and the Other Party and how the data will be shared to support care coordination and enable monitoring;
- Provide public transparency into relationships and roles/responsibilities between the MCP and the Other Party; and
- Provide mechanisms for the parties to resolve disputes and ensure overall oversight and accountability under the MOU.

The MOU does not impose new requirements on the Other Party, but rather restates or cross-references existing requirements imposed on the Other Party by their respective oversight body, if any, in order to clarify the Other Party's roles and responsibilities under existing laws, regulations, and guidance ("existing requirements").

POLICY:

MCPs must make a good faith effort to execute MOUs with Other Parties by either January 1, 2024, July 1, 2024, January 1, 2025, or January 1, 2026 as outlined below:

MOUs Effective January 1, 2024		
Department	Program/Services	
County Behavioral Health Departments	Specialty Mental Health Services in Medi-Cal Mental Health Plans	

MOUs Effective January 1, 2024	
Department	Program/Services
County Behavioral Health Departments	SUD Services in Drug Medi-Cal Organized Delivery System (ODS) Counties
Local Health Departments	Including, without limitation, California Children's Services (CCS),¹ Maternal, Child, and Adolescent Health (MCAH), and Tuberculosis Direct Observed Therapy
WIC Local Agencies or Non-Profit Entities	WIC
Regional Centers	Intermediate Care Facility – Developmentally Disabled Services
Local Government Agencies (LGA)	In-Home Supportive Services (IHSS)
LGA/County Social Services Departments	County Social Services programs and Child Welfare

MOUs Effective July 1, 2024		
Department	Program	
LGA	County-Based Targeted Case Management (TCM) ¹	
County Behavioral Health Departments	Substance Use Disorder Treatment Services in Drug Medi-Cal State Plan Counties	

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¹ The County TCM MOU will be effective July 1, 2024, to align with the program changes set forth in the Enhanced Care Management Policy Guide dated July of 2023, available at: https://www.dhcs.ca.gov/Documents/MCQMD/ECM-Policy-Guide.pdf

MOUs Effective January 1, 2025

First 5 County Commissions

MOUs Effective on January 1, 2026

Local Education Agencies (LEAs)

LGA/California Department of Corrections and Rehabilitation, County Jails, and Youth Correctional Facilities

PROVISIONS REQUIRED TO BE INCLUDED IN MOUS

MCPs are responsible for providing Medically Necessary Covered Services to Members and coordinating Member care, particularly for services carved out of the MCP Contract. The MOU between the MCP and the Other Party is intended to serve as the primary vehicle for documenting and developing processes and procedures to ensure the MCP and the Other Party coordinate services, including health related social service needs, when Members are accessing services from both systems. For example, for the CCS program, the MOU will outline the roles and responsibilities of the MCP as well as the local agency county health departments for coordinating care, exchanging information, and conducting administrative activities related to CCS-enrolled Members accessing and receiving care.

Each MOU with all Other Parties must include, at a minimum, all of the provisions required in **Attachment A, Base MOU Template** and as required in the MCP Contract, including the following:

- <u>Services Covered by This MOU:</u> Describes the services that the MCP and the
 Other Party must coordinate for Members who reside in the Other Party's
 jurisdiction or who receive the Other Party's services.
- Party Obligations: Describes each party's provision of services and oversight responsibilities (e.g., the parties must designate liaisons to coordinate with each other and ensure compliance with the MOU requirements, including the MCP ensuring compliance by its Subcontractors, Downstream Subcontractors, and Network Providers). The intent of this provision is to ensure each party is aware of what services the other is required to provide or arrange under existing requirements. This provision is also intended to ensure that the parties know how and who to contact for each party to support the MOU implementation. This provision also requires the MCP to impose certain MOU requirements on its Subcontractors, Downstream Subcontractors, and Network Providers.

- Training and Education: Requires the MCP to provide education to Members and Network Providers about accessing Covered Services and the Other Party's services. Requires the MCP to train its employees who carry out responsibilities under the MOU and, as applicable, train Network Providers, Subcontractors and Downstream Subcontractors on the MOU requirements and services provided by the Other Party. This provision is intended to ensure the MCP provides its Subcontractors, Downstream Subcontractors, and Network Providers with information necessary for them to coordinate care with, and make referrals to, or receive referrals from, the Other Party.
- Referrals: Describes the requirement that the parties refer to each other as
 appropriate and describes each party's referral pathways to ensure both parties
 understand and are able to refer to or assist Members with obtaining services
 from each other. The intent of this provision is to encourage the parties to
 develop and document how parties can refer Members to one another and what
 information may need to accompany each referral.
- <u>Care Coordination</u>: Describes the policies and procedures for coordinating care between the parties, addressing barriers to care coordination, and ensuring the ongoing monitoring and improving of such care coordination. This provision is intended to encourage the parties to develop and document how the parties will coordinate care, monitor whether those processes are working, and improve the processes, as necessary.
- Quarterly Meetings: Requires the parties to meet at least quarterly to address care coordination, Quality Improvement (QI) activities, QI outcomes, systemic and case-specific concerns, and communicating with others within their organizations about such activities. Within 30 Working Days after each quarterly meeting, the MCP must post on its website the date and time the quarterly meeting occurred in order to demonstrate transparency that the meetings are taking place. The intent of this provision is to ensure that the parties have a set time to meet to assess whether the MOU is effective in supporting care coordination and whole-person care, as well as to address specific issues that may have arisen in the prior quarter. These meetings are not intended to be open to the public. These meetings may be conducted virtually.
- Quality Improvement: Requires that the parties have in place MOU-specific QI policies to ensure each party's ongoing oversight and improvement of the MOU requirements. These QI policies and activities are separate and apart from an MCP's other QI requirements. The intent of this provision is to encourage the parties to develop and document how they will assess whether the MOU is improving care coordination and whole-person care and to develop metrics to evaluate whether the MOU is effective in achieving its goals.

- Data Sharing and Confidentiality: Describes the minimum data and information that the MCP must share with the Other Party to ensure the MOU requirements are met and describes the data and information the Other Party may share with the MCP to improve care coordination and referral processes. This provision is intended to encourage the parties to determine and document the minimum necessary information that must be shared to facilitate referrals and coordinate care, how to share that information, and whether Member consent is required. The data sharing requirements set forth in the MOUs are not intended to supersede any federal or state laws or regulations governing the ability of the MCP or Other Party to exchange information.
- <u>Dispute Resolution</u>: Describes the policies and procedures for resolving disputes between the parties and the process for bringing the disputes to DHCS (and other departments as appropriate) when the parties are unable to resolve disputes between themselves. The intent of this provision is to encourage the parties to develop and document a dispute resolution process to resolve conflicts with regard to each parties' responsibilities under the MOU.
- <u>General</u>: Describes additional general Contract requirements, such as the requirements that the MCP must publicly post the executed MOU, the MCP must annually review the MOU, and the MOU cannot be delegated, except as permitted under the MCP Contract.

Program-Specific MOU Requirements (Bespoke Templates)

MOUs are intended to acknowledge the unique relationships and specific needs that exist at the local level, as outlined in the MCP Contract. As such, the **Attachment B**,

Bespoke Templates build on the Base Template requirements by including tailored provisions for the following programs:

- 1. Specialty Mental Health Services in Medi-Cal Mental Health Plans;
- 2. SUD Services in Drug Medi-Cal Organized Delivery System (ODS) Counties
- 3. SUD Services in Drug Medi-Cal State Plan Counties;
- Local Health Departments, including program-specific exhibits for CCS, MCAH, Tuberculosis Direct Observed Therapy, and Non-Contracted Services;
- 5. WIC;
- 6. Regional Centers;
- 7. IHSS;
- 8. County Social Services programs and Child Welfare; and
- 9. TCM.

MCPs cannot remove or alter the minimum requirements in the Base Template or Bespoke Templates. However, the MCP and the Other Party may agree to include

additional provisions, including, without limitation, the optional provisions included in the templates, provided any additional provision does not conflict with the required minimum provisions. The templates include language that the parties may want to add to their MOUs to increase collaboration and communications. The proposed language is not exhaustive.

MOU COMPLIANCE AND OVERSIGHT REQUIREMENTS

The MCP Contract outlines specific processes that MCPs must have in place in order to maintain collaboration with the Other Party and have appropriate oversight of the MOU requirements.

Ultimately, the MCP compliance officer is responsible for MOU compliance, and ensuring compliance with the MOU must be part of the MCP's compliance program. The MCP compliance officer must ensure that deficiencies in MOU compliance are addressed in accordance with MCP's compliance program policies.

MCP Responsible Person and MCP-Other Party Liaison

The MCP must designate a responsible person(s) for overseeing the MCP's compliance with the relevant MOU(s) and the relevant provisions (MCP Responsible Person). This MCP Responsible Person must provide reports to DHCS via the MCOD-MCP Submission Portal. For example, the MCP may consider designating staff within their contract management, provider relations, or community relations functional areas. The MCP must ensure the responsible person(s) is well-versed with the MOU(s) provisions, has developed relationships with the relevant Other Party, and is empowered to meet compliance with the MOU(s). MCPs must notify DHCS of a change in the responsible person/liaison as soon as practicable, but no later than five Working Days of the change.

As outlined in the Base Template, and incorporated in the Bespoke Templates, under "MCP Obligations: Oversight Responsibility," the MCP Responsible Person must:

- Conduct regular meetings, on at least a quarterly basis, to address policy and practical concerns that may arise between MOU parties (See the Quarterly Meetings Section of the Base Template for an example of the required language);
- 2. Ensure an appropriate level of leadership (i.e., persons with decision-making authority) are involved in implementation and oversight of the MOU engagements and ensure the appropriate levels of leadership from the Other Party are invited to participate in the MOU engagements, as appropriate;
- 3. Report on the MCP's compliance with the MOU to DHCS via the MCOD-

- MCP Submission Portal², no less frequently than quarterly;
- 4. Ensure there is sufficient staff at the MCP to support compliance with, and management of, the relevant MOU(s) and its provisions;
- 5. Ensure training and education regarding MOU provisions are conducted annually for the MCP's employees responsible for carrying out activities under the MOU, and as applicable, for Network Providers, Subcontractors, and Downstream Subcontractors;
- 6. Ensure that the MCP's Subcontractors, Downstream Subcontractors, and Network Providers, as applicable, comply with all applicable provisions of the MOUs (see the "Subcontractor and Network Providers" section below and the MOU templates for further details); and
- 7. Serve as, or designate a person at the MCP to serve as, the point of contact and liaison with the Other Party or Other Party programs (MCP-Other Party Liaison). This liaison is to serve as the subject matter expert for the Other Party to address day-to-day concerns for administering the MOU. For example, the MCP-CCS Liaison would serve as the contact for the CCS County administrator to address immediate concerns related to specialty care services for CCS Members in a particular county. The MCP must notify the Other Party of any changes to the MCP-Other Party Liaison in writing as soon as reasonably practical but no later than the date of change and must notify DHCS within five Working Days of the change.

Data Sharing and Confidentiality

MCPs must share the minimum necessary data and information to facilitate referrals and coordinate care under the MOU. MCPs must have policies and procedures for supporting the timely and frequent exchange of Member information and data, which may include behavioral health and physical health data; for ensuring the confidentiality of exchanged information and data; and, if necessary, for obtaining Member consent. MCPs must share information in compliance with applicable law, which may include the Health Insurance Portability and Accountability Act and its implementing regulations, as amended, Title 42 Code of Federal Regulations (CFR) Part 2, as well as other state and federal privacy laws.³ As applicable and for the purposes of care management and coordination, MCPs should share information in compliance with the California Health and Human Services Agency Data Exchange Framework as referenced in APL 23-013

³ The CFR is searchable at: https://www.ecfr.gov/

² The MCOD-MCP Submission Portal is available at: https://cadhcs.sharepoint.com/sites/MCOD-MCPSubmissionPortal/SitePages/Home.aspx.

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and any subsequent iterations on this topic, as well as DHCS' California Advancing and Innovating Medi-Cal Data Sharing Authorization Guidance.⁴

Dispute Resolution

MCPs must work collaboratively with the Other Party to establish dispute resolution processes and timeframes within the MOU. This includes how the MCP will work with the Other Party to resolve issues related to coverage or payment of services under conflicts regarding respective roles for care management for specific Members, or other concerns related to the administered services to Members. See the Base Template "Dispute Resolution" section for an example of the required language.

After a failure to resolve the dispute pursuant to the process and timeframe established in the MOU, the MCP must submit a written "Request for Resolution" to DHCS and the Other Party may submit the dispute to the relevant department with oversight of the Other Party (e.g., California Department of Social Services, California Department of Public Health, or California Department of Developmental Services). If the MCP submits the Request for Resolution, it must be signed by the MCP's Chief Executive Officer (CEO) or the CEO's designee. If the Request for Resolution is submitted by the Other Party, it should be signed by an authorized representative of the Other Party.

MCP's Request for Resolution to DHCS must include:

- 1. A summary of the disputed issue(s) and a statement of the desired remedies, including any disputed services that have been or are expected to be delivered to a Member;
- 2. A history of the attempts to resolve the issue(s) with the Other Party;
- 3. Justification for the desired remedy; and
- 4. Any additional documentation relevant to resolve the disputed issue(s), if applicable.

MCPs must submit the Request for Resolution to DHCS via secure email to MCPMOUS@dhcs.ca.gov.

DHCS, in collaboration with the sister department as appropriate, will communicate the final decision to the MCP and the Other Party, including any actions the MCP must take to implement the decision.

⁴ APLs are searchable at: https://www.dhcs.ca.gov/formsandpubs/Pages/AllPlanLetters.aspx

Subcontractors and Network Providers

MCPs must ensure that their Subcontractors, Downstream Subcontractors, and Network Providers, as applicable, comply with all applicable provisions of the MOUs.

If an MCP has a Subcontractor or Downstream Subcontractor arrangement delegating part or all of the responsibilities relating to effectuating the MOUs to a Knox-Keene licensed health care service plan(s), this Subcontractor or Downstream Subcontractor must be added as an express party to the MOU and named in the MOU as having the responsibilities set forth as applicable to this Subcontractor or Downstream Subcontractor. For example, if an MCP delegates risk for an assigned portion of its membership to a Subcontractor or Downstream Subcontractor, the signatories of the MOU must include the MCP, the Subcontractor or Downstream Subcontractor, and the Other Party.

Training

MCPs must provide training and orientation on the MOU requirements to their employees who carry out responsibilities under the MOU and, as applicable, to their Subcontractors, Downstream Subcontractors, and Network Providers. The training must include information on MOU requirements and the services that are provided or arranged for by each party and how those services can be accessed or coordinated for the Member. MCPs must provide this training within a specified time after the MOU is effective and at least annually thereafter.

Local Engagement

As noted, the MOU is intended to be a vehicle to support engagement with local partners. To that end, the MCP must ensure an appropriate local presence at its quarterly meetings by inviting the appropriate responsible person(s) and program executives from the Other Party. At each quarterly meeting, the MCP must ensure there is the opportunity to discuss and address care coordination and MOU-related issues with county executives.

Signatories

As noted above, if an MCP has a Subcontractor or Downstream Subcontractor arrangement delegating part or all of the responsibilities related to effectuating the MOU to a Knox-Keene licensed health care service plan(s), the signatories of the MOU must include the MCP, the Subcontractor or Downstream Subcontractor, and the Other Party. In addition, to minimize administrative burden on counties and Other Parties, DHCS encourages multi-party MOUs, which may include more than one MCP and/or Other Party signing an MOU. In addition, MCPs may work with the Other Party to consolidate signature pages for multiple types of MOUs, for example, if an MCP is

entering into an agreement for multiple county administered programs.

MONITORING AND REPORTING

Starting January 1, 2025, MCPs must submit to *DHCS via the MCOD-MCP Submission Portal MCOD-MCP Submission Portal* an annual report that includes updates from the quarterly meetings with the Other Party and the results of their annual MOU review. The quarterly meetings are to discuss care coordination activities and the specific MOU-related issues. *This report will be due each year on the last business day of January.* The report must include the following elements:

- A list of all attendees, including MCP Responsible Person(s), leadership, and county executives;
- All care coordination and referral concerns discussed;
- Strengths, barriers, and plans to improve effective collaboration between the MCP and the Other Party;
- All disputes and resulting outcomes;
- · Strategies to address duplication of services; and
- Member engagement challenges and successes

To continuously evaluate the effectiveness of the MOU processes, MCPs must review their MOUs annually to determine if any amendments are needed, including incorporating any applicable contractual requirements and policy guidance to their MOUs. The annual report submission must include evidence of the annual review as well as copies of any MOUs amended or renewed as a result. The evidence of the annual review described in the annual report must include a summary of the review process and outcomes, and any resulting amendments to the MOU or policies and procedures.

If DHCS requests a review of any MOU and/or any requested policies and procedures related to the MOU, the MCP must submit the requested MOU documents to DHCS within ten Working Days of receipt of the request.

Quarterly Reporting

MCPs must demonstrate a good faith effort to meet the requirements of this APL. MCPs that are unable to execute their MOUs by the required execution date for MOUs for which DHCS has issued templates, must submit quarterly progress reports and documentation to DHCS demonstrating evidence of their good faith effort to execute the MOU.

DHCS Submissions and Reports

MCPs must submit all fully executed MOUs to DHCS via the MCOD-MCP Submission Portal for file and use. In their submissions, MCPs must attest that they did not modify any of the provisions of the Base Template or Bespoke Templates except to add provisions that do not conflict with or reduce either party's obligations under the Base Template or Bespoke Templates. If the MCP modifies any of the provisions of the Base Template or Bespoke Templates, the MCP must submit a redlined version of the MOU to DHCS for review and approval, prior to execution.

MCP Website Posting

MCPs must publish the MOU(s) and the annual report on their websites within 30 calendar days of MOU execution and report due date, respectively. The Executed MOU Public Posting with the website link to the posting must be submitted to DHCS via the MCOD-MCP Submission Portal.

Subcontractor Compliance

MCPs are further responsible for ensuring that their Subcontractors, Downstream Subcontractors, and Network Providers comply with all applicable state and federal laws and regulations, Contract requirements, and other DHCS guidance, including APLs and Policy Letters. These requirements must be communicated by each MCP to all Subcontractors, Downstream Subcontractors, and Network Providers. DHCS may impose Corrective Action Plans (CAP), as well as administrative and/or monetary sanctions for non-compliance. For additional information regarding administrative and monetary sanctions, see APL 23-012, and any subsequent iterations on this topic. Any failure to meet the requirements of this APL may result in a CAP and subsequent sanctions.

If you have any questions regarding this APL, please contact your MCOD Contract Manager.

Sincerely,

Original Signed by Bambi Cisneros

Bambi Cisneros Acting Chief, Managed Care Quality and Monitoring Division Assistant Deputy Director, Health Care Delivery Systems

ATTACHMENT J:

FIRST 5 MEMORANDUM OF UNDERSTANDING

COVER PAGE

Memorandum of Understanding

between Kaiser Foundation Health Plan, Inc., Blue Cross of California Partnership Plan, Inc., The Fresno-Kings-Madera Regional Health Authority, dba CalViva Health, Health Net Community Solutions, Inc., and First 5 Kings County Children and Families Commission

This Memorandum of Understanding ("MOU") is entered into by Kaiser Foundation Health Plan, Inc., Blue Cross of California Partnership Plan, Inc., The Fresno-Kings-Madera Regional Health Authority, dba CalViva Health, its Subcontractor, Health Net Community Solutions, Inc. (singularly an "MCP," collectively the "MCPs") and First 5 Kings County Children and Families Commission ("First 5"), on the Date of Execution ("Effective Date"). First 5, MCP, and MCP's relevant Subcontractors and/or Downstream Subcontractors are referred to herein singularly as a "Party" and collectively as "Parties."

WHEREAS, MCP is required under the Medi-Cal Managed Care Contract, Exhibit A, Attachment III, to enter into this MOU, a binding and enforceable contractual agreement, to enable Medi-Cal beneficiaries enrolled, or eligible to enroll in MCP ("Members"), to access services and connect to a broader array of supports in a coordinated manner from MCP and First 5;

WHEREAS, First 5s were designed to "emphasize local decision making, to provide for greater local flexibility in designing delivery systems" to support children, prenatal to age five (5), and their families, and First 5s have broad authority to determine allocation of resources in response to local conditions and as prioritized in their respective strategic plan; and

WHEREAS, the Parties desire to ensure that Members receive services available and benefit from the prenatal to five (5) expertise and family-serving system knowledge and experience of First 5 through coordinating with MCP and to provide a process to continuously evaluate and improve the quality of care coordination provided.

¹ Cal. Health & Safety Code sections 130100, et seq.

In consideration of the mutual agreements and promises hereinafter, the Parties agree as follows:

1. Definitions.

Capitalized terms have the meaning ascribed by MCP's Medi-Cal Managed Care Contract with the California Department of Health Care Services ("DHCS"), unless otherwise defined herein. The Medi-Cal Managed Care Contract is available on the DHCS webpage at www.dhcs.ca.gov.

- a. "MCP Responsible Person" means the person designated by MCP to oversee MCP coordination and communication with First 5 and ensure MCP's compliance with this MOU as described in Section 4 of this MOU. It is recommended that this person be in a leadership position with decision-making authority and authority to effectuate improvements in MCP practices.
- b. "MCP-First 5 Liaison" means MCP's designated point of contact responsible for acting as the liaison between MCP and First 5 as described in Section 4 of this MOU. The MCP-First 5 Liaison must ensure the appropriate communication and care coordination are ongoing between the Parties, facilitate quarterly meetings in accordance with Section 9 of this MOU, and provide updates to the MCP Responsible Person and/or MCP compliance officer as appropriate.
- c. "First 5 Responsible Person" means the person designated by First 5 to oversee coordination and communication with MCP and ensure First 5's compliance with this MOU as described in Section 5 of this MOU. It is recommended that this person be in a leadership position with decision-making authority and authority to effectuate improvements in First 5 practices.
- d. "First 5 Liaison" means First 5's designated point of contact responsible for acting as the liaison between MCP and First 5 as described in Section 5 of this MOU. The First 5 Liaison should ensure the appropriate communication and care coordination are ongoing between the Parties, facilitate quarterly meetings in accordance with Section 9 of this MOU, and provide updates to the First 5 Responsible Person as appropriate.
- e. "First 5 Services" means the services, supports, and efforts made by First 5 to facilitate the creation and implementation of an integrated, comprehensive, and coordinated system to enhance optimal early childhood development. First 5 Services may include, as determined solely by First 5, care navigation, developmental screenings, and pregnancy and postpartum supports, as well as system investments and partnerships to improve access to quality services, reduce barriers to care, and evaluate and analyze related data to inform strategies to improve quality care and, therefore, the conditions of children prenatal to five (5) years old within their jurisdiction.
 - f. "First 5 Providers" means organizations and individuals contracted with or

receiving funding from First 5 to provide First 5 Services.

2. Term.

This MOU is in effect as of the Effective Date and shall renew annually, unless written notice of non-renewal is given, or as amended in accordance with Section 14.f of this MOU.

3. Services Covered by This MOU.

This MOU governs the coordination between First 5 and MCP for the delivery of services for Members who reside in First 5's jurisdiction and who may be eligible for First 5 Services and supports, as First 5 resources allow.

4. MCP Obligations.

- a. Provision of Covered Services. MCP is responsible for authorizing Medically Necessary Covered Services and coordinating care for Members provided by MCP's Network Providers and other providers of carve-out programs, services, and benefits. MCP must support Members and/or their caregivers or legal guardian(s) in accessing medically necessary physical, behavioral, developmental, and dental health services for families and children, including those available under the Early and Periodic Screening, Diagnostic and Treatment benefit, such as periodic developmental and behavioral screening.
- b. Oversight Responsibility. The designated MCP Responsible Persons for each MCP, listed in Exhibit A of this MOU, is responsible for overseeing MCP's compliance with this MOU. The MCP Responsible Person must:
- i. Meet at least quarterly with First 5, as required by Section 9 of this MOU;
- ii. Report on MCP's compliance with the MOU to MCP's compliance officer no less frequently than quarterly. MCP's compliance officer is responsible for MOU compliance oversight reports as part of MCP's compliance program and must address any compliance deficiencies in accordance with MCP's compliance program policies;
- iii. Ensure there is sufficient staff at MCP to support compliance with and management of this MOU;
- iv. Ensure the appropriate levels of MCP leadership (i.e., persons with decision-making authority) are involved in implementation and oversight of the MOU engagements and ensure the appropriate levels of leadership from First 5 are invited to participate in the MOU engagements, as appropriate;
 - v. Ensure training and education regarding MOU provisions are

conducted annually, and as otherwise described in Section 6 of this MOU, for MCP's employees responsible for carrying out activities under this MOU and, as applicable, for Subcontractors, Downstream Subcontractors, and Network Providers; and

- vi. Serve, or may designate a person at MCP to serve, as the MCP-First 5 Liaison the point of contact and liaison with First 5. The MCP-First 5 Liaison is listed in Exhibit A of this MOU. MCP must notify First 5 of any changes to the MCP-First 5 Liaison in writing as soon as reasonably practical but no later than the date of change and must notify DHCS within five (5) Working Days of the change.
- c. Compliance by Subcontractors, Downstream Subcontractors, and Network Providers. MCP must require and ensure that its Subcontractors, Downstream Subcontractors, and Network Providers, as applicable, comply with all applicable provisions of this MOU.

5. First 5 Obligations.

- a. **Provision of Services.** First 5 is responsible for First 5 Services and supports as appropriate and as resources allow.
- b. **Oversight Responsibility.** The Executive Director, designated First 5 Responsible Person, listed in Exhibit B of this MOU, is responsible for overseeing First 5's compliance with this MOU. The First 5 Responsible Person serves, or may designate a person to serve, as the designated First 5 Liaison, the point of contact and liaison with MCP. The First 5 Liaison is listed in Exhibit B of this MOU. The First 5 Liaison may be the same person as the Responsible Person. First 5 may designate a liaison by program or service line. First 5 must notify MCP of changes to the First 5 Liaison as soon as reasonably practical but no later than the date of change, except when such prior notification is not possible, in which case, notice should be provided within five (5) Working Days of the change.

6. Training and Education.

a. To ensure compliance with this MOU, MCP must provide training and orientation for its employees who carry out responsibilities under this MOU and, as applicable, for MCP's Network Providers, Subcontractors, and Downstream Subcontractors who assist MCP with carrying out MCP's responsibilities under this MOU. The training must include information on MOU requirements, what services are provided or arranged for by each Party, and the policies and procedures outlined in this MOU. For persons or entities performing these responsibilities as of the Effective Date, MCP must provide this training within 60 Working Days. of the Effective Date. Thereafter, MCP must provide this training prior to any such person or entity performing responsibilities under this MOU and to all such persons or entities at least annually thereafter. MCP must require its Subcontractors

and Downstream Subcontractors to provide training on relevant MOU requirements and First 5 programs and services to its Network Providers.

- b. In accordance with health education standards required by the Medi-Cal Managed Care Contract, MCP must provide its Members and Network Providers with educational materials related to accessing Covered Services, including for services provided by First 5. In addition, MCP must provide its Network Providers with training on Medi-Cal for Kids and Teens services, utilizing the newly developed DHCS Medi-Cal for Kids and Teens Outreach and Education Toolkit as required by APL 23-005 or any subsequent version of the APL.
- c. MCP must provide First 5, Members, and Network Providers with training and/or educational materials on how MCP's Covered Services and any carved-out services may be accessed, including during nonbusiness hours. For example, MCP and Network Providers should inform Members about First 5 programs and events. In turn, First 5 should share information about MCP open enrollment and services, such as through Medi-Cal for Kids and Teens.

7. Referrals.

- a. **Referral Process.** The Parties must work collaboratively to develop policies and procedures that ensure Members who may be eligible for First 5 Services are referred to First 5 and First 5 Providers, as applicable.
- b. First 5 should facilitate referrals from MCP to First 5 Providers if First 5 services are appropriate and assist MCP with identifying the appropriate First 5 Providers for such referrals as needed.
- c. The Parties should establish policies and procedures for how First 5 will notify MCP if First 5 and/or First 5 Providers are at capacity and are unable to accept Member referrals for First 5 Services. The policies and procedures should include notification to referred Members that First 5 Services are not currently available.
- d. MCP must refer Members using a patient-centered, shared decision-making process.
- e. First 5 should recommend best practices for successful engagement of eligible Members to MCP for MCP's Covered Services and Community Supports services or care management programs for which Members may qualify, including Enhanced Care Management ("ECM") or Complex Care Management ("CCM"). However, if First 5 is also an ECM Provider, provides Community Supports, or provides other services pursuant to a separate agreement between MCP and First 5, this MOU does not govern First 5's provision of ECM, Community Supports, or other services.
 - f. MCP must require that its CCM care managers, its Transitional Care Services care

managers, and contracted ECM Providers refer Members to First 5 as appropriate.

g. Closed-Loop Referrals (CLR).

i. Effective July 1, 2025, MCP must comply with DHCS Closed- Loop Referral Implementation Guidance. For all referrals made to Enhanced Care Management (ECM), Community Supports, and future CLR-applicable services, MCP must implement procedures to track, support, and monitor referrals submitted by First 5 through referral closure. MCP must also adhere to requirements for notifying the First 5 of the authorization status, referral loop closure reason and closure date within timeframes outlined in the guidance to support First 5 in their awareness of referral status and outcomes for Members referred to CLR services. The Parties will work together collaboratively to establish the means and methods for MCP notifications for CLRs. DHCS requires MCPs to use electronic methods to notify referring entities of a referral's status, not paper-based methods.

8. Care Coordination and Collaboration.

- a. The Parties must adopt policies and procedures for coordinating Members' access to care and services that incorporate all the requirements set forth in this MOU.
- b. The Parties must discuss and address systematic and, to the extent possible, individual care coordination issues or barriers to care coordination efforts at least quarterly.
- c. MCP must have policies and procedures in place to maintain collaboration with First 5 and to identify strategies to monitor and assess the effectiveness of this MOU.
- d. When a Member enrolled in ECM also receives First 5 Services, the ECM Provider shall coordinate services with First 5 (as appropriate) or First 5 Providers to ensure the Member's needs are addressed. To support the ECM Provider, MCP must ensure that the Member's ECM Providers are aware of First 5 agencies and contacts and consult with, keep informed (as appropriate), and share data with (as appropriate) First 5 or the First 5 Provider that provides First 5 Services to the Member.

9. Quarterly Meetings.

- a. The Parties must meet as frequently as necessary to ensure proper oversight of this MOU, but not less frequently than quarterly, to discuss community needs and how to partner to meet them and address care coordination, Quality Improvement ("QI") activities, QI outcomes, systemic and case-specific concerns, and communication with others within their organizations about such activities. These meetings may be conducted virtually.
 - b. Within 30 Working Days after each quarterly meeting, MCP must post on its

website the date and time the quarterly meeting occurred and, as applicable, distribute to meeting participants a summary of any follow-up action items or changes to processes that are necessary to fulfill MCP's obligations under the Medi-Cal Managed Care Contract and this MOU.

- c. MCP must invite the First 5 Responsible Person and appropriate First 5 program executives to participate in MCP quarterly meetings to ensure appropriate committee representation, including a local presence, and to discuss and address care coordination and MOU-related issues. Subcontractors and Downstream Subcontractors should be permitted to participate in these meetings, as appropriate.
- d. MCP must report to DHCS updates from quarterly meetings in a manner and at a frequency specified by DHCS.
- e. **Local Representation.** MCP must participate, as appropriate, in meetings or engagements to which MCP is invited by First 5, such as local county meetings, local community forums, and First 5 engagements, to collaborate with First 5 in equity strategy and wellness and prevention activities. First 5 and First 5 Providers, as appropriate, are encouraged to participate in meetings, engagements, or committees to which they are invited by MCP.

10. Quality Improvement.

The Parties must develop QI activities specifically for the oversight of the requirements of this MOU, including, without limitation, any applicable performance measures and QI initiatives, including those to prevent duplication of services and reports that track referrals, Member engagement, and service utilization. MCP must document these QI activities in its policies and procedures. Where appropriate, MCP should include First 5 as a resource and partner in QI initiatives.

11. Data Sharing and Confidentiality.

As applicable, appropriate, and feasible, the Parties must implement policies and procedures to ensure that the minimum necessary Member information and data for accomplishing the goals of this MOU are exchanged timely and maintained securely and confidentially, and in compliance with the requirements set forth below. The Parties must share information in compliance with applicable law, which may include the Health Insurance Portability and Accountability Act and its implementing regulations, as amended ("HIPAA"), 42 Code of Federal Regulations Part 2, and other State and federal privacy laws.

a. **Data Exchange.** MCP must, and First 5 is encouraged to, share the minimum necessary data and information to facilitate referrals and coordinate care under this MOU. The Parties must have policies and procedures for supporting the timely and frequent

exchange of Member information and data, which may include behavioral health and physical health data, including receipt of services from and engagement with First 5 Providers; for ensuring the confidentiality of exchanged information and data; and, if necessary, for obtaining Member consent. The minimum necessary information and data elements to be shared as agreed upon by the Parties are set forth in Exhibit C of this MOU. The Parties must annually review and, if appropriate, update Exhibit C of this MOU to facilitate sharing of information and data.

- b. **Use of Data by MCP.** MCP must carefully consider data and information, including community and Member feedback, made available by First 5 to address Member needs, provide a broader understanding of the health needs and preferences of Members, and support more meaningful Member engagement.²
- c. **Interoperability.** MCP must make available to Members their electronic health information held by MCP pursuant to 42 Code of Federal Regulations section 438.10 and in accordance with APL 22-026 or any subsequent version of the APL. MCP must make available an application programming interface that makes complete and accurate Network Provider directory information available through a public-facing digital endpoint on MCP's website pursuant to 42 Code of Federal Regulations sections 438.242(b) and 438.10(h).

12. Dispute Resolution.

a. The Parties must agree to dispute resolution procedures such that, in the event of any dispute or difference of opinion regarding the Party responsible for service coverage arising out of or relating to this MOU, the Parties must attempt, in good faith, to promptly resolve the dispute mutually between themselves. MCP must, and First 5 should, document the agreed-upon dispute resolution procedures in policies and procedures. Pending resolution of any such dispute, the Parties must continue without delay to carry out all their responsibilities under this MOU, including providing Members with access to services under this MOU, unless this MOU is terminated. If the dispute cannot be resolved within 15 Working Days of initiating such dispute or such other period as may be mutually agreed to by the Parties in writing, either Party may pursue its available legal and equitable remedies under California law

² Per the CalAIM Population Health Management Policy Guide, "Risk Stratification and Segmentation (RSS) means the process of differentiating all Members into separate risk groups and/or meaningful subsets. RSS results in the categorization of all Members according to their care and risk needs at all levels and intensities.

- b. Disputes between MCP and First 5 that cannot be resolved in a good faith attempt between the Parties must be forwarded by MCP and may be forwarded by First 5 to DHCS. Until the dispute is resolved, the Parties may agree to an arrangement satisfactory to both Parties regarding how the services under dispute will be provided.
- c. Nothing in this MOU or provision constitutes a waiver of any of the government claim filing requirements set forth in Title I, Division 3.6, of the California Government Code or as otherwise set forth in local, State, or federal law.

13. Equal Treatment.

- a. Nothing in this MOU is intended to benefit or prioritize Members over persons served by First 5 who are not Members. Pursuant to Title VI, 42 United States Code section 2000d, et seq., First 5 cannot provide any service, financial aid, or other benefit to an individual that is different, or is provided in a different manner, from that provided to others by First 5.
- b. First 5 is prohibited from directing or recommending that an individual choose or refrain from choosing a specific MCP, and MCP is prohibited from directing or recommending that an individual choose or refrain from choosing a specific First 5.
- c. First 5 is prohibited from making decisions intended to benefit or disadvantage a specific MCP, and MCP is prohibited from making decisions intended to benefit or disadvantage a specific First 5.

14. General.

- a. **MOU Posting.** MCP must post this executed MOU on its website.
- b. **Documentation Requirements.** MCP must retain all documents demonstrating compliance with this MOU for at least ten (10) years as required by the Medi-Cal Managed Care Contract. If DHCS requests a review of any existing MOU, MCP must submit the requested MOU to DHCS within ten (10) Working Days of receipt of the request.
- c. **Notice.** Any notice required or desired to be given pursuant to or in connection with this MOU must be given in writing, addressed to the noticed Party at the Notice Address set forth below the signature lines of this MOU. Notices must be (i) delivered in person to the Notice Address; (ii) delivered by messenger or overnight delivery service to the Notice Address; (iii) sent by regular United States mail, certified, return receipt requested, postage prepaid, to the Notice Address; or (iv) sent by email, with a copy sent by regular United States mail to the Notice Address. Notices given by in-person delivery, messenger, or overnight delivery service are deemed given upon actual delivery at the Notice Address. Notices given by email are deemed given the day following the day the

email was sent. Notices given by regular United States mail, certified, return receipt requested, postage prepaid, are deemed given on the date of delivery indicated on the return receipt. The Parties may change their addresses for purposes of receiving notice hereunder by giving notice of such change to each other in the manner provided for herein.

- d. **Delegation.** MCP may delegate its obligations under this MOU to a Fully Delegated Subcontractor or Partially Delegated Subcontractor as permitted under the Medi-Cal Managed Care Contract, provided that such Fully Delegated Subcontractor or Partially Delegated Subcontractor is made a Party to this MOU. Further, MCP may enter into Subcontractor Agreements or Downstream Subcontractor Agreements that relate directly or indirectly to the performance of MCP's obligations under this MOU. Other than in these circumstances, MCP cannot delegate the obligations and duties contained in this MOU.
- e. **Annual Review.** MCP must conduct an annual review of this MOU to determine whether any modifications, amendments, updates, or renewals of responsibilities and obligations outlined within are required. MCP must provide DHCS evidence of the annual review of this MOU and copies of any MOU modified or renewed as a result.
- f. **Amendment.** This MOU may only be amended or modified by the Parties through a writing executed by the Parties. However, this MOU is deemed automatically amended or modified to incorporate any provisions amended or modified in the Medi-Cal Managed Care Contract, or as required by applicable law or any applicable guidance issued by a State or federal oversight entity.
- g. **Governance.** This MOU is governed by and construed in accordance with the laws of the State of California.
- h. **Independent Contractors.** No provision of this MOU is intended to create, nor is any provision deemed or construed to create, any relationship between First 5 and MCP other than that of independent entities contracting with each other hereunder solely for the purpose of effecting the provisions of this MOU. Neither First 5 nor MCP, nor any of their respective contractors, employees, agents, or representatives, is construed to be the contractor, employee, agent, or representative of the other.
- i. **Counterpart Execution.** This MOU may be executed in counterparts, signed electronically and sent via PDF, each of which is deemed an original, but all of which, when taken together, constitute one and the same instrument.
- j. **Superseding MOU.** This MOU constitutes the final and entire agreement between the Parties and supersedes any and all prior oral or written agreements, negotiations, or understandings between the Parties that conflict with the provisions set forth in this MOU. It is expressly understood and agreed that any prior written or oral agreement between the Parties pertaining to the subject matter herein is hereby terminated by

mutual agreement of the Parties.

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The Parties represent that they have authority to enter into this MOU on behalf of their respective entities and have executed this MOU as of the Effective Date.

15. Signatures.

Kaiser Foundation Health Plan, Inc.

Signature:

Date: 6/28/2025 | 4:17 PM PDT

Name: Celia Williams

Title: Executive Director, Medicaid Care Delivery and Operations

Notice Address: 393 E. Walnut St. Pasadena, CA 91188

Electronic Delivery: KPMOU@kp.org

Blue Cross of California Partnership Plan, Inc.

Signature:

Date: 7/1/2025 | 9:40 AM PDT

Name: Les Ybarra Title: President **Notice Address:**

21215 Burbank Blvd., Suite 100 Woodland Hills, CA 91367

The Fresno-Kings-Madera Regional Health Authority, dba CalViva Health

Signature: Jeffe NRom

Date: 7/8/2025

Name: Jeffrey Nkansah

Title: Chief Executive Officer (CEO)

Notice Address:

7625 North Palm Avenue, Suite 109

Fresno, CA 93711

CalViva Health Subcontractor: Health Net Community Solutions, Inc.

Signature:

Date:

07/09/2025

Name: Dorothy Seleski Title: Medi-Cal President

Notice Address:

21281 Burbank Blvd. Woodland Hills, CA 91367

Kings County Children and Families Commission

Signature:

Date:

Name: Rose Mary Rahn Title: Executive Director

Notice Address:

460 Kings County Drive, Hanford CA 93230

Exhibits A and B

MCP Responsible Person, MCP-First 5 Liaison, First 5 Responsible Person, and First 5 Liaison as Referenced in Sections 4.b and 5.b of this MOU

Exhibit A

Kaiser Foundation Health Plan. Inc.

Liaisons	Title
MCP Responsible Person	Regional Director, MOU Implementation
MCP-First 5 Liaison	MOU Coordinator

Blue Cross of California Partnership Plan, Inc.

Liaisons	Title
MCP Responsible Person	Director Program Management
MCP-First 5 Liaison	Program Manager

The Fresno-Kings-Madera Regional Health Authority, dba CalViva Health

Liaisons	Title
MCP Responsible Person	Program Manager
MCP-First 5 Liaison	Service Coordination Liaison

CalViva Health Subcontractor: Health Net Community Solutions, Inc.

Liaisons	Title
MCP Responsible Person	Program Manager
MCP-First 5 Liaison	Service Coordination Liaison

Exhibit B

First 5 Liaisons

Liaisons	Title	
First 5 Responsible Person	Executive Director	
First 5 Liaison	First 5 Program Manager	

Exhibit C

Data Elements

MCPs and First 5 shall share the following data elements:

- i. Member demographic information; and
- ii. Known changes in condition that may adversely impact the Member's health and/or welfare and that are relevant to the services.



Date of Meeting: August 5, 2025

2025-08-189

Commission Policy Manual Update

- Policy Manual Table of Contents
- Salaries & Benefits Policy



Date of Meeting: Agenda Item: Item Type: August 5, 2025 2025-08-189 Action Item

AGENDA ITEM: Commission Policy Manual Update

A. Background/History:

At the October 1, 2024 Commission meeting, the Commission approved several policies that had not been updated or reviewed since October 2018. The Salaries & Benefits Policy was not updated at the time, as the County of Kings was still negotiating the recommendations of an external Classification & Compensation Study. Commission staff advised that a revised policy will be brought before the Commission for review at a later date.

The Commission follows the County of Kings' processes to set compensation for its employees, in accordance with the agreement between the Commission and the County of Kings. The County of Kings periodically reviews its salaries and benefits. Several Salary Resolutions have been approved by the Kings County Board of Supervisors (BOS) since then, with the most recent Salary Resolution adopted on June 10, 2025. The Kings County BOS voted to adopt the Salary Resolution effective June 9, 2025 (RESO 25-038), incorporating recommendations from the Classification & Compensation Study.

B. Summary of Request, Description of Project and/or Primary Goals of Agenda Item:

Staff have reviewed the Salaries and Benefits Policy of the Commission's Policy Manual and are recommending slight changes to the policy. The Purpose and Applicability section was tidied up to reflect statutory references and compliance review frequence. Staff have also updated the policy to reflect the most recent County of Kings Salary Resolution (25-038).

Staff requests that the commission review, discuss, and consider approving the Commission Policy Manual updates as marked in the attached documents.

C. Timeframe:

If approved the revised Policy Manual updates will go into effect immediately.

D. Costs:

No costs associated with this item.

E. Staff Recommendation:

Staff recommend the commission review, discuss and consider approving the revised Commission Policy Manual updates.

F. Attachments:

- Policy Manual Table of Contents draft revision August 2025
- Salaries & Benefits Policy draft revision August 2025
- County of Kings Salary Resolution 25-038

First 5 Kings County Children & Families Commission

Policy Manual Table of Contents

Policie	S S	
	Operational Guidelines Policy (Revised 10/01/2024)	
	Grants & Contracts Administration Policy (Revised 10/01/2024)	15
	Grant Funding Policy (Initial Adoption 12/05/2023)	28
	Conflict of Interest Policy (Revised 08/06/2024)	29
	Administration, Evaluation, and Program Costs Policy (Revised 10/01/2024)	32
	Contracting & Procurement Policy (Revised 10/01/2024)	
	Supplantation Policy (Revised 10/01/2024)	39
	Salaries & Benefits Policy (Revised 08/01/2025)	42
	Tobacco Free Policy (Revised 10/01/2024)	44
Appen	dix	
A-	Proposition 10 Legislation	46
B-	Establishing Ordinance	62
C-	Bylaws	63
D-	Strategic Plan (updated June 2025)	66

<u>First 5 Kings County</u>
Children & Families Commission

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Salaries & Benefits Policy

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I. Purpose and Applicability

Assembly Bill 109 (Chan) and Senate Bill 35 (Florez) were adopted by the Legislature, signed by the Governor and enacted into law, effective January 1, 2006. The new law is found at Chapters 243 and 284, Statutes of 2005, now codified in the California Health and Safety Code Section 130140 et seq. We have been informed by First 5 California (the State Commission) that county commissions must comply with these new laws in order to receive tax revenue, and that First 5 California will begin withholding funds on July 1, 2006, if the requirements are not met.

As a result of the passage of AB 109 (Chan), and the subsequent changes to the Health & Safety Code as evidenced in Section 130140, Paragraph (6) subdivision (d), each The county commission must adopt in a public hearing, policies and processes establishing the salaries and benefits of employees of the county commission. Salaries and benefits shall conform to established county commission or county government policies, in accordance with Health and Safety Code Sections 130151[b][8] and 130140[d][6]. Compliance with statute is reviewed during the Commission's annual audit and included in the Findings and Recommendations section of the audit report.

II. Statement of Policy

It is the policy of First 5 Kings County Children and Families Commission, as a county entity, to affirm the use of Kings County policies and processes establishing the salaries and benefits of commission employees. Any updates to the Kings County policies and processes establishing a salaries and benefits schedule for county employees will be strictly adhered to by the First 5 Kings County Commission. The First 5 Program OfficerCommission staff-will notify the First 5 Kings County Children and Families Commission of such updates at the next regularly scheduled meeting following the update.

III. County Policy

The following is an excerpt from the Salary Resolution section of the Kings County Employee Handbook, published May 2010: Formatted: Font: Italic

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The Salary Resolution, adopted by the Board of Supervisors and updated periodically, consists of a listing of all the County's job classifications with the assigned salary range for each classification. In determining salaries, consideration is given to a number of factors, including prevailing rates for comparable work in other public and private employment, current costs of living, and the County's financial condition and policies. Salaries and benefits are reviewed regularly with employee representatives in the meet and confer process.

The basic salary schedule consists of numbered salary ranges, each having five steps of approximately 5 percent each. These steps provide the basis for merit salary increases. Most new employees start at the first step and after six months of actual and continuous satisfactory service are eligible to advance to the second step. However, it is important to remember that step increases are not granted automatically. Your department head must certify that your overall performance—which includes attendance and work habits—has been satisfactory or better. Annually thereafter, employees may advance one step until reaching the fifth step, provided their performance meets department standards. A change in job classification due to promotion could provide additional opportunities for salary increases.

The current salary resolution, <u>adopted on June 10, 2025</u>, can be located at: https://www.countyofkingsca.gov/home/showdocument?id=13231&t=637963399796032 https://www.countyofkings.com/home/showdocument?id=98

Commission Review/Approval History:

Commission Meeting Date	Agenda Item #	Action Taken
August 5, 2025	2025-08-189	Revision approved
October 9, 2018	2018-10-024	Approved

KINGS COUNTY

RESOLUTION NUMBER 25-038

A RESOLUTION FIXING THE COMPENSATION OF OFFICERS AND EMPLOYEES OF KINGS COUNTY

APPROVED BY THE BOARD OF SUPERVISORS ON 6/10/2025 FOR PAY PERIOD 13-2025 6/9/2025

WHEREAS, Section 18-4 of the Code of Ordinances of Kings County authorizes that, except as otherwise provided by state law, the compensation of officers and employees shall be established by resolution of the Board of Supervisors;

NOW, THEREFORE, BE IT RESOLVED that this resolution shall be known as "THE SALARY RESOLUTION" and hereby establishes a basic salary plan for payment of all Kings County officers and employees, elective and appointive; that said salary plan provides for a bi-weekly pay period; that the basic pay plan and compensation provisions are applied herein to the several classes or positions as shown in the following sections:

MOU/SR

BASIC SALARY SCHEDULE

SECTION I

The following basic monthly salary schedule of five step salary ranges shall apply to all full or part-time employment in the County Service for those positions assigned to salary range:

Salary						Salary	Approximate
Range	Step	Step	Step	Step	Step	Range	Monthly
Number	1	2	3	4	5	Number	Equivalent
154.0	16.05	16.87	17.73	18.63	19.58	154.0	2782-3394
154.5	16.13	16.95	17.82	18.72	19.68	154.5	2796-3411
155.0	16.21	17.04	17.91	18.82	19.78	155.0	2810-3429
155.5	16.29	17.13	18.00	18.91	19.88	155.5	2824-3446
156.0	16.37	17.21	18.09	19.01	19.98	156.0	2837-3463
156.5	16.45	17.30	18.18	19.11	20.08	156.5	2851-3481
157.0	16.53	17.38	18.27	19.20	20.18	157.0	2865-3498
157.5	16.61	17.47	18.36	19.30	20.28	157.5	2879-3515
158.0	16.70	17.55	18.45	19.39	20.38	158.0	2895-3533
158.5	16.78	17.64	18.54	19.49	20.48	158.5	2909-3550
159.0	16.87	17.73	18.63	19.58	20.58	159.0	2924-3567
159.5	16.95	17.82	18.72	19.68	20.68	159.5	2938-3585
160.0	17.04	17.91	18.82	19.78	20.79	160.0	2954-3604
160.5	17.13	18.00	18.91	19.88	20.89	160.5	2969-3621
161.0	17.21	18.09	19.01	19.98	21.00	161.0	2983-3640
161.5	17.30	18.18	19.11	20.08	21.11	161.5	2999-3659
162.0	17.38	18.27	19.20	20.18	21.21	162.0	3013-3676
162.5	17.47	18.36	19.30	20.28	21.32	162.5	3028-3695
163.0	17.55	18.45	19.39	20.38	21.42	163.0	3042-3713
163.5	17.64	18.54	19.49	20.48	21.53	163.5	3058-3732
164.0	17.73	18.63	19.58	20.58	21.63	164.0	3073-3749
164.5	17.82	18.72	19.68	20.68	21.74	164.5	3089-3768
165.0	17.91	18.82	19.78	20.79	21.85	165.0	3104-3787
165.5	18.00	18.91	19.88	20.89	21.96	165.5	3120-3806
166.0	18.09	19.01	19.98	21.00	22.07	166.0	3136-3825
166.5	18.18	19.11	20.08	21.11	22.18	166.5	3151-3845
167.0	18.27	19.20	20.18	21.21	22.29	167.0	3167-3864
167.5	18.36	19.30	20.28	21.32	22.40	167.5	3182-3883
168.0	18.45	19.39	20.38	21.42	22.51	168.0	3198-3902
168.5	18.54	19.49	20.48	21.53	22.62	168.5	3214-3921
169.0	18.63	19.58	20.58	21.63	22.74	169.0	3229-3942
169.5	18.72	19.68	20.68	21.74	22.85	169.5	3245-3961
170.0	18.82	19.78	20.79	21.85	22.97	170.0	3262-3981
170.5	18.91	19.88	20.89	21.96	23.08	170.5	3278-4001
171.0	19.01	19.98	21.00	22.07	23.20	171.0	3295-4021
171.5	19.11	20.08	21.11	22.18	23.32	171.5	3312-4042

Salary						Salary	Approximate
Range	Step	Step	Step	Step	Step	Range	Monthly
Number	1	2	3	4	5	Number	Equivalent
172.0	19.20	20.18	21.21	22.29	23.43	172.0	3328-4061
172.5	19.30	20.28	21.32	22.40	23.55	172.5	3345-4082
173.0	19.39	20.38	21.42	22.51	23.66	173.0	3361-4101
173.5	19.49	20.48	21.53	22.62	23.78	173.5	3378-4122
174.0	19.58	20.58	21.63	22.74	23.90	174.0	3394-4143
174.5	19.68	20.68	21.74	22.85	24.02	174.5	3411-4163
175.0	19.78	20.79	21.85	22.97	24.14	175.0	3429-4184
175.5	19.88	20.89	21.96	23.08	24.26	175.5	3446-4205
176.0	19.98	21.00	22.07	23.20	24.38	176.0	3463-4226
176.5	20.08	21.11	22.18	23.32	24.50	176.5	3481-4247
177.0	20.18	21.21	22.29	23.43	24.62	177.0	3498-4267
177.5	20.28	21.32	22.40	23.55	24.74	177.5	3515-4288
178.0	20.38	21.42	22.51	23.66	24.87	178.0	3533-4311
178.5	20.48	21.53	22.62	23.78	24.99	178.5	3550-4332
179.0	20.58	21.63	22.74	23.90	25.12	179.0	3567-4354
179.5	20.68	21.74	22.85	24.02	25.25	179.5	3585-4377
180.0	20.79	21.85	22.97	24.14	25.37	180.0	3604-4397
180.5	20.89	21.96	23.08	24.26	25.50	180.5	3621-4420
181.0	21.00	22.07	23.20	24.38	25.62	181.0	3640-4441
181.5	21.11	22.18	23.32	24.50	25.75	181.5	3659-4463
182.0	21.21	22.29	23.43	24.62	25.88	182.0	3676-4486
182.5	21.32	22.40	23.55	24.74	26.01	182.5	3695-4508
183.0	21.42	22.51	23.66	24.87	26.14	183.0	3713-4531
183.5	21.53	22.62	23.78	24.99	26.27	183.5	3732-4553
184.0	21.63	22.74	23.90	25.12	26.40	184.0	3749-4576
184.5	21.74	22.85	24.02	25.25	26.53	184.5	3768-4599
185.0	21.85	22.97	24.14	25.37	26.66	185.0	3787-4621
185.5	21.96	23.08	24.26	25.50	26.79	185.5	3806-4644
186.0	22.07	23.20	24.38	25.62	26.93	186.0	3825-4668
186.5	22.18	23.32	24.50	25.75	27.06	186.5	3845-4690
187.0	22.29	23.43	24.62	25.88	27.20	187.0	3864-4715
187.5	22.40	23.55	24.74	26.01	27.34	187.5	3883-4739
188.0	22.51	23.66	24.87	26.14	27.47	188.0	3902-4761
188.5	22.62	23.78	24.99	26.27	27.61	188.5	3921-4786
189.0	22.74	23.90	25.12	26.40	27.74	189.0	3942-4808
189.5	22.85	24.02	25.25	26.53	27.88	189.5	3961-4833
190.0	22.97	24.14	25.37	26.66	28.02	190.0	3981-4857
190.5	23.08	24.26	25.50	26.79	28.16	190.5	4001-4881
191.0	23.20	24.38	25.62	26.93	28.30	191.0	4021-4905
191.5	23.32	24.50	25.75	27.06	28.44	191.5	4042-4930

Salary						Salary	Approximate
Range	Step	Step	Step	Step	Step	Range	Monthly
Number	1	2	3	4	5	Number	Equivalent
192.0	23.43	24.62	25.88	27.20	28.58	192.0	4061-4954
192.5	23.55	24.74	26.01	27.34	28.72	192.5	4082-4978
193.0	23.66	24.87	26.14	27.47	28.87	193.0	4101-5004
193.5	23.78	24.99	26.27	27.61	29.01	193.5	4122-5028
194.0	23.90	25.12	26.40	27.74	29.16	194.0	4143-5054
194.5	24.02	25.25	26.53	27.88	29.31	194.5	4163-5080
195.0	24.14	25.37	26.66	28.02	29.45	195.0	4184-5105
195.5	24.26	25.50	26.79	28.16	29.60	195.5	4205-5131
196.0	24.38	25.62	26.93	28.30	29.74	196.0	4226-5155
196.5	24.50	25.75	27.06	28.44	29.89	196.5	4247-5181
197.0	24.62	25.88	27.20	28.58	30.04	197.0	4267-5207
197.5	24.74	26.01	27.34	28.72	30.19	197.5	4288-5233
198.0	24.87	26.14	27.47	28.87	30.34	198.0	4311-5259
198.5	24.99	26.27	27.61	29.01	30.49	198.5	4332-5285
199.0	25.12	26.40	27.74	29.16	30.64	199.0	4354-5311
199.5	25.25	26.53	27.88	29.31	30.79	199.5	4377-5337
200.0	25.37	26.66	28.02	29.45	30.95	200.0	4397-5365
200.5	25.50	26.79	28.16	29.60	31.10	200.5	4420-5391
201.0	25.62	26.93	28.30	29.74	31.26	201.0	4441-5418
201.5	25.75	27.06	28.44	29.89	31.42	201.5	4463-5446
202.0	25.88	27.20	28.58	30.04	31.57	202.0	4486-5472
202.5	26.01	27.34	28.72	30.19	31.73	202.5	4508-5500
203.0	26.14	27.47	28.87	30.34	31.89	203.0	4531-5528
203.5	26.27	27.61	29.01	30.49	32.05	203.5	4553-5555
204.0	26.40	27.74	29.16	30.64	32.21	204.0	4576-5583
204.5	26.53	27.88	29.31	30.79	32.37	204.5	4599-5611
205.0	26.66	28.02	29.45	30.95	32.53	205.0	4621-5639
205.5	26.79	28.16	29.60	31.10	32.69	205.5	4644-5666
206.0	26.93	28.30	29.74	31.26	32.86	206.0	4668-5696
206.5	27.06	28.44	29.89	31.42	33.02	206.5	4690-5723
207.0	27.20	28.58	30.04	31.57	33.19	207.0	4715-5753
207.5	27.34	28.72	30.19	31.73	33.36	207.5	4739-5782
208.0	27.47	28.87	30.34	31.89	33.52	208.0	4761-5810
208.5	27.61	29.01	30.49	32.05	33.69	208.5	4786-5840
209.0	27.74	29.16	30.64	32.21	33.86	209.0	4808-5869
209.5	27.88	29.31	30.79	32.37	34.03	209.5	4833-5899
210.0 210.5	28.02	29.45	30.95	32.53	34.20	210.0	4857-5928
210.5	28.16	29.60	31.10	32.69	34.37	210.5 211.0	4881-5957 4905-5987
211.5	28.30 28.44	29.74 29.89	31.26 31.42	32.86 33.02	34.54 34.71	211.5	4930-6016
211.3	20.44	29.09	31.42	33.02	34.7 I	211.5	4930-0010

Salary						Salary	Approximate
Range	Step	Step	Step	Step	Step	Range	Monthly
Number	1	2	3	4	5	Number	Equivalent
212.0	28.58	30.04	31.57	33.19	34.89	212.0	4954-6048
212.5	28.72	30.19	31.73	33.36	35.06	212.5	4978-6077
213.0	28.87	30.34	31.89	33.52	35.24	213.0	5004-6108
213.5	29.01	30.49	32.05	33.69	35.42	213.5	5028-6139
214.0	29.16	30.64	32.21	33.86	35.59	214.0	5054-6169
214.5	29.31	30.79	32.37	34.03	35.77	214.5	5080-6200
215.0	29.45	30.95	32.53	34.20	35.95	215.0	5105-6231
215.5	29.60	31.10	32.69	34.37	36.13	215.5	5131-6263
216.0	29.74	31.26	32.86	34.54	36.31	216.0	5155-6294
216.5	29.89	31.42	33.02	34.71	36.49	216.5	5181-6325
217.0	30.04	31.57	33.19	34.89	36.67	217.0	5207-6356
217.5	30.19	31.73	33.36	35.06	36.85	217.5	5233-6387
218.0	30.34	31.89	33.52	35.24	37.04	218.0	5259-6420
218.5	30.49	32.05	33.69	35.42	37.23	218.5	5285-6453
219.0	30.64	32.21	33.86	35.59	37.41	219.0	5311-6484
219.5	30.79	32.37	34.03	35.77	37.60	219.5	5337-6517
220.0	30.95	32.53	34.20	35.95	37.78	220.0	5365-6549
220.5	31.10	32.69	34.37	36.13	37.97	220.5	5391-6581
221.0	31.26	32.86	34.54	36.31	38.16	221.0	5418-6614
221.5	31.42	33.02	34.71	36.49	38.35	221.5	5446-6647
222.0	31.57	33.19	34.89	36.67	38.54	222.0	5472-6680
222.5	31.73	33.36	35.06	36.85	38.73	222.5	5500-6713
223.0	31.89	33.52	35.24	37.04	38.93	223.0	5528-6748
223.5	32.05	33.69	35.42	37.23	39.12	223.5	5555-6781
224.0	32.21	33.86	35.59	37.41	39.32	224.0	5583-6815
224.5	32.37	34.03	35.77	37.60	39.52	224.5	5611-6850
225.0	32.53	34.20	35.95	37.78	39.71	225.0	5639-6883
225.5	32.69	34.37	36.13	37.97	39.91	225.5	5666-6918
226.0	32.86	34.54	36.31	38.16	40.11	226.0	5696-6952
226.5	33.02	34.71	36.49	38.35	40.31	226.5	5723-6987
227.0	33.19	34.89	36.67	38.54	40.51	227.0	5753-7022
227.5	33.36	35.06	36.85	38.73	40.71	227.5	5782-7056
228.0	33.52	35.24	37.04	38.93	40.92	228.0	5810-7093
228.5	33.69	35.42	37.23	39.12	41.12	228.5	5840-7127
229.0	33.86	35.59	37.41	39.32	41.33	229.0	5869-7164
229.5	34.03	35.77	37.60	39.52	41.54	229.5	5899-7200
230.0	34.20	35.95	37.78	39.71	41.74	230.0	5928-7235
230.5	34.37	36.13	37.97	39.91	41.95	230.5	5957-7271
231.0	34.54	36.31	38.16	40.11	42.16	231.0	5987-7308
231.5	34.71	36.49	38.35	40.31	42.37	231.5	6016-7344

Salary						Salary	Approximate
Range	Step	Step	Step	Step	Step	Range	Monthly
Number	1	2	3	4	5	Number	Equivalent
232.0	34.89	36.67	38.54	40.51	42.58	232.0	6048-7381
232.5	35.06	36.85	38.73	40.71	42.79	232.5	6077-7417
233.0	35.24	37.04	38.93	40.92	43.01	233.0	6108-7455
233.5	35.42	37.23	39.12	41.12	43.23	233.5	6139-7493
234.0	35.59	37.41	39.32	41.33	43.44	234.0	6169-7530
234.5	35.77	37.60	39.52	41.54	43.66	234.5	6200-7568
235.0	35.95	37.78	39.71	41.74	43.87	235.0	6231-7604
235.5	36.13	37.97	39.91	41.95	44.09	235.5	6263-7642
236.0	36.31	38.16	40.11	42.16	44.31	236.0	6294-7680
236.5	36.49	38.35	40.31	42.37	44.53	236.5	6325-7719
237.0	36.67	38.54	40.51	42.58	44.75	237.0	6356-7757
237.5	36.85	38.73	40.71	42.79	44.97	237.5	6387-7795
238.0	37.04	38.93	40.92	43.01	45.20	238.0	6420-7835
238.5	37.23	39.12	41.12	43.23	45.43	238.5	6453-7875
239.0	37.41	39.32	41.33	43.44	45.65	239.0	6484-7913
239.5	37.60	39.52	41.54	43.66	45.88	239.5	6517-7953
240.0	37.78	39.71	41.74	43.87	46.11	240.0	6549-7992
240.5	37.97	39.91	41.95	44.09	46.34	240.5	6581-8032
241.0	38.16	40.11	42.16	44.31	46.57	241.0	6614-8072
241.5	38.35	40.31	42.37	44.53	46.80	241.5	6647-8112
242.0	38.54	40.51	42.58	44.75	47.04	242.0	6680-8154
242.5	38.73	40.71	42.79	44.97	47.28	242.5	6713-8195
243.0	38.93	40.92	43.01	45.20	47.51	243.0	6748-8235
243.5	39.12	41.12	43.23	45.43	47.75	243.5	6781-8277
244.0	39.32	41.33	43.44	45.65	47.99	244.0	6815-8318
244.5	39.52	41.54	43.66	45.88	48.23	244.5	6850-8360
245.0	39.71	41.74	43.87	46.11	48.47	245.0	6883-8401
245.5	39.91	41.95	44.09	46.34	48.71	245.5	6918-8443
246.0	40.11	42.16	44.31	46.57	48.95	246.0	6952-8485
246.5	40.31	42.37	44.53	46.80	49.19	246.5	6987-8526
247.0	40.51	42.58	44.75	47.04	49.44	247.0	7022-8570
247.5	40.71	42.79	44.97	47.28	49.69	247.5	7056-8613
248.0	40.92	43.01	45.20	47.51	49.93	248.0	7093-8655
248.5	41.12	43.23	45.43	47.75	50.18	248.5	7127-8698
249.0	41.33	43.44	45.65	47.99	50.43	249.0	7164-8741
249.5	41.54	43.66	45.88	48.23	50.68	249.5	7200-8785
250.0	41.74	43.87	46.11	48.47	50.93	250.0	7235-8828
250.5	41.95	44.09	46.34	48.71	51.18	250.5	7271-8871
251.0	42.16	44.31	46.57	48.95	51.44	251.0	7308-8916
251.5	42.37	44.53	46.80	49.19	51.70	251.5	7344-8961

Salary						Salary	Approximate
Range	Step	Step	Step	Step	Step	Range	Monthly
Number	1	2	3	4	5	Number	Equivalent
252.0	42.58	44.75	47.04	49.44	51.95	252.0	7381-9005
252.5	42.79	44.97	47.28	49.69	52.21	252.5	7417-9050
253.0	43.01	45.20	47.51	49.93	52.47	253.0	7455-9095
253.5	43.23	45.43	47.75	50.18	52.73	253.5	7493-9140
254.0	43.44	45.65	47.99	50.43	52.99	254.0	7530-9185
254.5	43.66	45.88	48.23	50.68	53.25	254.5	7568-9230
255.0	43.87	46.11	48.47	50.93	53.52	255.0	7604-9277
255.5	44.09	46.34	48.71	51.18	53.79	255.5	7642-9324
256.0	44.31	46.57	48.95	51.44	54.06	256.0	7680-9370
256.5	44.53	46.80	49.19	51.70	54.33	256.5	7719-9417
257.0	44.75	47.04	49.44	51.95	54.60	257.0	7757-9464
257.5	44.97	47.28	49.69	52.21	54.87	257.5	7795-9511
258.0	45.20	47.51	49.93	52.47	55.15	258.0	7835-9559
258.5	45.43	47.75	50.18	52.73	55.43	258.5	7875-9608
259.0	45.65	47.99	50.43	52.99	55.70	259.0	7913-9655
259.5	45.88	48.23	50.68	53.25	55.98	259.5	7953-9703
260.0	46.11	48.47	50.93	53.52	56.26	260.0	7992-9752
260.5	46.34	48.71	51.18	53.79	56.54	260.5	8032-9800
261.0	46.57	48.95	51.44	54.06	56.82	261.0	8072-9849
261.5	46.80	49.19	51.70	54.33	57.10	261.5	8112-9897
262.0	47.04	49.44	51.95	54.60	57.39	262.0	8154-9948
262.5	47.28	49.69	52.21	54.87	57.68	262.5	8195-9998
263.0	47.51	49.93	52.47	55.15	57.96	263.0	8235-10046
263.5	47.75	50.18	52.73	55.43	58.25	263.5	8277-10097
264.0	47.99	50.43	52.99	55.70	58.54	264.0	8318-10147
264.5	48.23	50.68	53.25	55.98	58.83	264.5	8360-10197
265.0	48.47	50.93	53.52	56.26	59.13	265.0	8401-10249
265.5	48.71	51.18	53.79	56.54	59.43	265.5	8443-10301
266.0	48.95	51.44	54.06	56.82	59.72	266.0	8485-10351
266.5	49.19	51.70	54.33	57.10	60.02	266.5	8526-10403
267.0	49.44	51.95	54.60	57.39	60.32	267.0	8570-10455
267.5	49.69	52.21	54.87	57.68	60.62	267.5	8613-10507
268.0	49.93	52.47	55.15	57.96	60.92	268.0	8655-10559
268.5	50.18	52.73	55.43	58.25	61.22	268.5	8698-10611
269.0	50.43	52.99	55.70	58.54	61.53	269.0 269.5	8741-10665
269.5 270.0	50.68 50.93	53.25 53.52	55.98 56.26	58.83 59.13	61.84 62.15	269.5 270.0	8785-10719 8828-10773
270.5	51.18	53.79	56.54	59.13	62.15	270.5	8871-10826
270.5	51.16	54.06	56.82	59.43	62.77	270.5	8916-10880
271.5	51.44	54.33	57.10	60.02	63.08	271.5	8961-10934
211.5	31.70	07 .00	37.10	00.02	00.00	211.5	0301-10304

Salary						Salary	Approximate
Range	Step	Step	Step	Step	Step	Range	Monthly
Number	1	2	3	4	5	Number	Equivalent
272.0	51.95	54.60	57.39	60.32	63.40	272.0	9005-10989
272.5	52.21	54.87	57.68	60.62	63.72	272.5	9050-11045
273.0	52.47	55.15	57.96	60.92	64.03	273.0	9095-11099
273.5	52.73	55.43	58.25	61.22	64.35	273.5	9140-11154
274.0	52.99	55.70	58.54	61.53	64.67	274.0	9185-11209
274.5	53.25	55.98	58.83	61.84	64.99	274.5	9230-11265
275.0	53.52	56.26	59.13	62.15	65.32	275.0	9277-11322
275.5	53.79	56.54	59.43	62.46	65.65	275.5	9324-11379
276.0	54.06	56.82	59.72	62.77	65.97	276.0	9370-11435
276.5	54.33	57.10	60.02	63.08	66.30	276.5	9417-11492
277.0	54.60	57.39	60.32	63.40	66.63	277.0	9464-11549
277.5	54.87	57.68	60.62	63.72	66.96	277.5	9511-11606
278.0	55.15	57.96	60.92	64.03	67.30	278.0	9559-11665
278.5	55.43	58.25	61.22	64.35	67.64	278.5	9608-11724
279.0	55.70	58.54	61.53	64.67	67.97	279.0	9655-11781
279.5	55.98	58.83	61.84	64.99	68.31	279.5	9703-11840
280.0	56.26	59.13	62.15	65.32	68.65	280.0	9752-11899
280.5	56.54	59.43	62.46	65.65	68.99	280.5	9800-11958
281.0	56.82	59.72	62.77	65.97	69.34	281.0	9849-12019
281.5	57.10	60.02	63.08	66.30	69.69	281.5	9897-12080
282.0	57.39	60.32	63.40	66.63	70.03	282.0	9948-12139
282.5	57.68	60.62	63.72	66.96	70.38	282.5	9998-12199
283.0	57.96	60.92	64.03	67.30	70.73	283.0	10046-12260
283.5	58.25	61.22	64.35	67.64	71.08	283.5 284.0	10097-12321
284.0	58.54	61.53	64.67 64.99	67.97 68.31	71.44 71.80	284.5	10147-12383 10197-12445
284.5 285.0	58.83 59.13	61.84 62.15	65.32	68.65	71.00	285.0	10197-12445
285.5	59.43	62.46	65.65	68.99	72.13	285.5	10301-12568
286.0	59.72	62.77	65.97	69.34	72.87	286.0	10351-12631
286.5	60.02	63.08	66.30	69.69	73.23	286.5	10403-12693
287.0	60.32	63.40	66.63	70.03	73.60	287.0	10455-12757
287.5	60.62	63.72	66.96	70.38	73.97	287.5	10507-12821
288.0	60.92	64.03	67.30	70.73	74.34	288.0	10559-12886
288.5	61.22	64.35	67.64	71.08	74.71	288.5	10611-12950
289.0	61.53	64.67	67.97	71.44	75.08	289.0	10665-13014
289.5	61.84	64.99	68.31	71.80	75.46	289.5	10719-13080
290.0	62.15	65.32	68.65	72.15	75.83	290.0	10773-13144
290.5	62.46	65.65	68.99	72.51	76.21	290.5	10826-13210
291.0	62.77	65.97	69.34	72.87	76.59	291.0	10880-13276
291.5	63.08	66.30	69.69	73.23	76.97	291.5	10934-13341

Salary						Salary	Approximate
Range	Step	Step	Step	Step	Step	Range	Monthly
Number	1	2	3	4	5	Number	Equivalent
292.0	63.40	66.63	70.03	73.60	77.36	292.0	10989-13409
292.5	63.72	66.96	70.38	73.97	77.75	292.5	11045-13477
293.0	64.03	67.30	70.73	74.34	78.13	293.0	11099-13543
293.5	64.35	67.64	71.08	74.71	78.52	293.5	11154-13610
294.0	64.67	67.97	71.44	75.08	78.91	294.0	11209-13678
294.5	64.99	68.31	71.80	75.46	79.30	294.5	11265-13745
295.0	65.32	68.65	72.15	75.83	79.70	295.0	11322-13815
295.5	65.65	68.99	72.51	76.21	80.10	295.5	11379-13884
296.0	65.97	69.34	72.87	76.59	80.50	296.0	11435-13953
296.5	66.30	69.69	73.23	76.97	80.90	296.5	11492-14023
297.0	66.63	70.03	73.60	77.36	81.31	297.0	11549-14094
297.5	66.96	70.38	73.97	77.75	81.72	297.5	11606-14165
298.0	67.30	70.73	74.34	78.13	82.12	298.0	11665-14234
298.5	67.64	71.08	74.71	78.52	82.53	298.5	11724-14305
299.0	67.97	71.44	75.08	78.91	82.94	299.0	11781-14376
299.5	68.31	71.80	75.46	79.30	83.35	299.5	11840-14447
300.0	68.65	72.15	75.83	79.70	83.77	300.0	11899-14520
300.5	68.99	72.51	76.21	80.10	84.19	300.5	11958-14593
301.0	69.34	72.87	76.59	80.50	84.61	301.0	12019-14666
301.5	69.69	73.23	76.97	80.90	85.03	301.5	12080-14739
302.0	70.03	73.60	77.36	81.31	85.46	302.0	12139-14813
302.5	70.38	73.97	77.75	81.72	85.89	302.5	12199-14888
303.0	70.73	74.34	78.13	82.12	86.31	303.0	12260-14960
303.5	71.08	74.71	78.52	82.53	86.74	303.5	12321-15035
304.0	71.44	75.08	78.91	82.94	87.17	304.0	12383-15109
304.5	71.80	75.46	79.30	83.35	87.61	304.5	12445-15186
305.0	72.15	75.83 76.21	79.70	83.77	88.04	305.0	12506-15260
305.5 306.0	72.51 72.87	76.21	80.10 80.50	84.19 84.61	88.48 88.92	305.5 306.0	12568-15337 12631-15413
306.5	73.23	76.59	80.90	85.03	89.36	306.5	12693-15489
307.0	73.60	77.36	81.31	85.46	89.81	307.0	12757-15567
307.5	73.00	77.75	81.72	85.89	90.26	307.5	12821-15645
308.0	74.34	78.13	82.12	86.31	90.71	308.0	12886-15723
308.5	74.71	78.52	82.53	86.74	91.16	308.5	12950-15801
309.0	75.08	78.91	82.94	87.17	91.62	309.0	13014-15881
309.5	75.46	79.30	83.35	87.61	92.08	309.5	13080-15961
310.0	75.83	79.70	83.77	88.04	92.54	310.0	13144-16040
310.5	76.21	80.10	84.19	88.48	93.00	310.5	13210-16120
311.0	76.59	80.50	84.61	88.92	93.46	311.0	13276-16201
311.5	76.97	80.89	85.02	89.35	93.92	311.5	13341-16282

Salary Range Number	Step 1	Step 2	Step 3	Step 4	Step 5	Salary Range Number	Approximate Monthly Equivalent
312.0	77.36	81.31	85.46	89.81	94.40	312.0	13409-16362
312.5	77.75	81.72	85.89	90.26	94.87	312.5	13476-16444
313.0	78.13	82.12	86.31	90.71	95.34	313.0	13542-16525
313.5	78.52	82.53	86.74	91.16	95.82	313.5	13610-16608
314.0	78.91	82.94	87.17	91.62	96.29	314.0	13677-16690
314.5	79.30	83.35	87.61	92.08	96.77	314.5	13745-16773
315.0	79.70	83.77	88.04	92.54	97.25	315.0	13814-16856
315.5	80.10	84.19	88.48	93.00	97.74	315.5	13884-16941
316.0	80.50	84.61	88.92	93.47	98.22	316.0	13953-17024
316.5	80.90	85.03	89.36	93.94	98.71	316.5	14022-17109
317.0	81.31	85.46	89.81	94.40	99.20	317.0	14093-17194
317.5	81.72	85.89	90.26	94.87	99.70	317.5	14164-17281
318.0	82.12	86.31	90.71	95.34	100.19	318.0	14234-17366
318.5	82.53	86.74	91.16	95.82	100.69	318.5	14305-17452
319.0	82.94	87.17	91.62	96.29	101.19	319.0	14376-17539
319.5	83.35	87.61	92.08	96.77	101.70	319.5	14447-17628
320.0	83.77	88.04	92.54	97.25	102.20	320.0	14520-17714
320.5	84.19	88.48	93.00	97.74	102.71	320.5	14592-17803
321.0	84.61	88.92	93.47	98.22	103.22	321.0	14665-17891
321.5	85.03	89.36	93.94	98.71	103.74	321.5	14738-17981
322.0	85.46	89.81	94.40	99.20	104.25	322.0	14813-18070
322.5	85.89	90.26	94.87	99.70	104.77	322.5	14887-18160
323.0	86.31	90.71	95.34	100.19	105.29	323.0	14960-18250
323.5	86.74	91.16	95.82	100.69	105.82	323.5	15034-18342
324.0	87.17	91.62	96.29	101.19	106.34	324.0	15109-18432
324.5	87.61	92.08	96.77	101.70	106.87	324.5	15185-18524
325.0	88.04	92.54	97.25	102.20	107.40	325.0	15260-18616
325.5	88.48	93.00	97.74	102.71	107.94	325.5	15336-18709 15412-18801
326.0	88.92 89.36	93.47	98.22	103.22	108.47	326.0	
326.5 327.0	89.81	93.94 94.40	98.71 99.20	103.74 104.25	109.01 109.55	326.5	15489-18895 15567-18988
327.5	90.26	94.40	99.70	104.25	110.10	327.0 327.5	15645-19084
327.5	90.20	95.34	100.19	104.77	110.10	328.0	15723-19179
328.5	91.16	95.82	100.19	105.29	111.20	328.5	15801-19274
329.0	91.62	96.29	100.09	105.82	111.76	329.0	15880-19371
329.5	92.08	96.77	101.19	106.87	112.32	329.5	15960-19468
330.0	92.54	97.25	101.70	107.40	112.88	330.0	16040-19565
330.5	93.00	97.74	102.20	107.40	113.44	330.5	16120-19662
331.0	93.47	98.22	102.71	107.94	114.01	331.0	16201-19761
331.5	93.94	98.71	103.74	109.10	114.58	331.5	16282-19860
301.0	00.0 +	00.71	100.17	100.10	1 1 7.00	301.0	10202 10000

SECTION II - General Employees CLASSES ASSIGNED TO SALARY RANGE NUMBERS

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles shown below.

		*Effective Salary Range	3/17/2025 Approx. Monthly	*Effective Salary Range	3/17/2025 Approx. Monthly	*Effective Salary Range	7/7/2025 Approx. Monthly
Code CO6	Class Title Accounting Assistant I	<u>Number</u> 165.5	<u>Salary</u> 3120-3806	Number 169.5	<u>Salary</u> 3245-3961	Number 170.5	<u>Salary</u> 3278-4001
C05	Accounting Assistant II	175.5	3446-4205	179.5	3585-4377	180.5	3621-4420
B13	Accountant I	216.5	5181-6325	220.5	5391-6581	221.5	5446-6647
B02	Accountant II	226.5	5723-6987	230.5	5957-7271	231.5	6016-7344
N02	Ag & Standard Technician	178.5	3550-4332	182.5	3695-4508	183.5	3732-4553
N04	Ag & Standards Inspector I	193.5	4122-5028	197.5	4288-5233	198.5	4332-5285
N03	Ag & Standards Inspector II	208.5	4786-5840	212.5	4978-6077	213.5	5028-6139
N05	Ag & Standards Inspector III	223.5	5555-6781	227.5	5782-7056	228.5	5840-7127
N14	Animal Control Officer I	175.5	3446-4205	179.5	3585-4377	180.5	3621-4420
N13	Animal Control Officer II	185.5	3806-4644	189.5	3961-4833	190.5	4001-4881
N31	Animal Services Outreach Coordinator	189.5	3961-4833	193.5	4122-5028	194.5	4163-5080
N37	Animal Shelter Technician I	159.0	2924-3567	163.0	3042-3713	164.0	3073-3749
N36	Animal Shelter Technician II	169.0	3229-3942	173.0	3361-4101	174.0	3394-4143
N35	Animal Shelter Technician Trainee	157.0	2865-3498	161.0	2983-3640	162.0	3013-3676
B19	Appraiser I	197.5	4288-5233	201.5	4463-5446	202.5	4508-5500
B18	Appraiser II	207.5	4739-5782	211.5	4930-6016	212.5	4978-6077
B31	Appraiser III	222.5	5500-6713	226.5	5723-6987	227.5	5782-7056
E71	Assessment Technician I	163.0	3042-3713	167.0	3167-3864	168.0	3198-3902
E72	Assessment Technician II	173.0	3361-4101	177.0	3498-4267	178.0	3533-4311
E73	Assessment Technician III	183.0	3713-4531	187.0	3864-4715	188.0	3902-4761
B17	Auditor-Appraiser I	203.5	4553-5555	207.5	4739-5782	208.5	4786-5840
B16	Auditor-Appraiser II	213.5	5028-6139	217.5	5233-6387	218.5	5285-6453
B34	Auditor-Appraiser III	228.5	5840-7127	232.5	6077-7417	233.5	6139-7493
P92	Behavioral Health Clinician I	229.5	5899-7200	233.5	6139-7493	234.5	6200-7568
P93	Behavioral Health Clinician II	239.5	6517-7953	243.5	6781-8277	244.5	6850-8360
P77	Behavioral Health Services Assistant	170.0	3262-3981	174.0	3394-4143	175.0	3429-4184
N07	Building Inspector I	202.0	4486-5472	206.0	4668-5696	207.0	4715-5753
N17	Building Inspector II	212.0	4954-6048	216.0	5155-6294	217.0	5207-6356
N08	Building Inspector III	222.0	5472-6680	226.0	5696-6952	227.0	5753-7022
N09	Building Inspector IV	232.0	6048-7381	236.0	6294-7680	237.0	6356-7757
B90	Business Applications Specialist	233.5	6139-7493	237.5	6387-7795	238.5	6453-7875
P94	Case Review Officer	219.5	5337-6517	223.5	5555-6781	224.5	5611-6850
C48	Caseworker I	170.5	3278-4001	174.5	3411-4163	175.5	3446-4205
C49	Caseworker II	180.5	3621-4420	184.5	3768-4599	185.5	3806-4644
P87	Care Coordinator	189.5	3961-4833	193.5	4122-5028	194.5	4163-5080
C30	Central Services Assistant	166.0	3136-3825	170.0	3262-3981	171.0	3295-4021
P47	Child Support Assistant	164.0	3073-3749	168.0	3198-3902	169.0	3229-3942
P45	Child Support Specialist II	174.0	3394-4143	178.0	3533-4311	179.0	3567-4354
P27 C72	Child Support Specialist II	184.0	3749-4576 3182-3883	188.0	3902-4761	189.0 172.5	3942-4808
C72	Clerk-Recorder Assistant I Clerk-Recorder Assistant II	167.5 177.5	3515-4288	171.5 181.5	3312-4042 3659-4463	182.5	3345-4082 3695-4508
C71	Clerk-Recorder Assistant III	187.5	3883-4739	191.5	4042-4930	192.5	4082-4978
E45	Code Compliance Specialist I	201.0	4441-5418	205.0	4621-5639	206.0	4668-5696
E44	Code Compliance Specialist I	211.0	4905-5987	215.0	5105-6231	216.0	5155-6294
E41	Code Compliance Specialist II	221.0	5418-6614	225.0	5639-6883	226.0	5696-6952
101	Community Health Assistant I	164.0	3073-3749	168.0	3198-3902	169.0	3229-3942
102	Community Health Assistant II	174.0	3394-4143	178.0	3533-4311	179.0	3567-4354
E67	Community Outreach Specialist	199.0	4354-5311	203.0	4531-5528	204.0	4576-5583
B80	Computer Forensics Specialist I	207.5	4739-5782	211.5	4930-6016	212.5	4978-6077
B79	Computer Forensics Specialist II	222.5	5500-6713	226.5	5723-6987	227.5	5782-7056
E18	Construction Inspector	218.0	5259-6420	222.0	5472-6680	223.0	5528-6748
B74	Department Information Technology Technician I	191.5	4042-4930	195.5	4205-5131	196.5	4247-5181
B73	Department Information Technology Technician II	201.5	4463-5446	205.5	4644-5666	206.5	4690-5723
P44	Deputy Public Guardian I	197.0	4267-5207	201.0	4441-5418	202.0	4486-5472
P40	Deputy Public Guardian II	207.0	4715-5753	211.0	4905-5987	212.0	4954-6048
M26	Deputy Sheriff Cadet	201.0	4441-5418	205.0	4621-5639	206.0	4668-5696
H28	Dietitian	215.5	5131-6263	219.5	5337-6517	220.5	5391-6581
C26	Elections Technician I	167.0	3167-3864	171.0	3295-4021	172.0	3328-4061
C25	Elections Technician II	177.0	3498-4267	181.0	3640-4441	182.0	3676-4486

SECTION II - General Employees CLASSES ASSIGNED TO SALARY RANGE NUMBERS

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles shown below.

		*Effective Salary Range	3/17/2025 Approx. Monthly	*Effective Salary Range	3/17/2025 Approx. Monthly	*Effective Salary Range	7/7/2025 Approx. Monthly
Code	Class Title	Number	Salary	Number	Salary	Number	Salary
P16	Eligibility Worker I	170.5	3278-4001	174.5	3411-4163	175.5	3446-4205
P17	Eligibility Worker II	180.5	3621-4420	184.5	3768-4599	185.5	3806-4644
E38	Emergency Dispatcher I	188.0	3902-4761	192.0	4061-4954	193.0	4101-5004
E37	Emergency Dispatcher II	198.0	4311-5259	202.0	4486-5472	203.0	4531-5528
C99	Emergency Services Specialist	180.5	3621-4420	184.5	3768-4599	185.5	3806-4644
P07	Employment & Training Worker I	183.5	3732-4553	187.5	3883-4739	188.5	3921-4786
P08	Employment & Training Worker II	193.5	4122-5028	197.5	4288-5233	198.5	4332-5285
E08	Engineer I (Civil)	230.5	5957-7271	234.5	6200-7568	235.5	6263-7642
E09	Engineer II (Civil)	240.5	6581-8032	244.5	6850-8360	245.5	6918-8443
E10	Engineer III (Civil)	260.5	8032-9800	264.5	8360-10197	265.5	8443-10301
N12	Environmental Health Specialist I	200.5	4420-5391	204.5	4599-5611	205.5	4644-5666
N11	Environmental Health Specialist II	210.5	4881-5957	214.5	5080-6200	215.5	5131-6263
N19	Environmental Health Specialist III	220.5	5391-6581	224.5	5611-6850	225.5	5666-6918
N34	Environmental Health Technician	185.5	3806-4644	189.5	3961-4833	190.5	4001-4881
H39	Epidemiologist	239.0	6484-7913	243.0	6748-8235	244.0	6815-8318
M24	Evidence Technician	198.0	4311-5259	202.0	4486-5472	203.0	4531-5528
P56	Family Resource Assistant	166.5	3151-3845	170.5	3278-4001	171.5	3312-4042
P57	Family Resource Technician	186.5	3845-4690	190.5	4001-4881	191.5	4042-4930
S05	Fleet Service Attendant	157.0	2865-3498	161.0	2983-3640	162.0	3013-3676
M48	Fingerprint Technician I	188.0	3902-4761	192.0	4061-4954	193.0	4101-5004
M47	Fingerprint Technician II	198.0	4311-5259	202.0	4486-5472	203.0	4531-5528
E47	First 5 Resource Specialist	176.5	3481-4247	180.5	3621-4420	181.5	3659-4463
E31	Fiscal Specialist I	195.5	4205-5131	199.5	4377-5337	200.5	4420-5391
E27	Fiscal Specialist II	205.5	4644-5666	209.5	4833-5899	210.5	4881-5957
E64	G.I.S. Technician I	197.5	4288-5233	201.5	4463-5446	202.5	4508-5500
E63	G.I.S. Technician II	212.5	4978-6077	216.5	5181-6325	217.5	5233-6387
H15	Health Education Specialist	214.5	5080-6200	218.5	5285-6453	219.5	5337-6517
B06	Information Technology Analyst I	222.0	5472-6680	226.0	5696-6952	227.0	5753-7022
B05	Information Technology Analyst II	232.0	6048-7381	236.0	6294-7680	237.0	6356-7757
B04	Information Technology Analyst III	242.0	6680-8154	246.0	6952-8485	247.0	7022-8570
B60	Information Technology Technician I	198.5	4332-5285	202.5	4508-5500	203.5	4553-5555
B59	Information Technology Technician II	208.5	4786-5840	212.5	4978-6077	213.5	5028-6139
C53	Investigative Assistant	189.0	3942-4808	193.0	4101-5004	194.0	4143-5054
K20	Jail Cook I	160.0	2954-3604	164.0	3073-3749	165.0	3104-3787
K21	Jail Cook II	170.0	3262-3981	174.0	3394-4143	175.0	3429-4184
C86	Juvenile Center Support Clerk	164.0	3073-3749	168.0	3198-3902	169.0	3229-3942
P35	Juvenile Services Officer I	189.5	3961-4833	193.5	4122-5028	194.5	4163-5080
P36	Juvenile Services Officer II	199.5	4377-5337	203.5	4553-5555	204.5	4599-5611
C91	Law Clerk	204.0	4576-5583	208.0	4761-5810	209.0	4808-5869
B48	Law Librarian/Small Claims Advisor	188.0	3902-4761	192.0	4061-4954	193.0	4101-5004
C57	Legal Clerk I	157.0	2865-3498	161.0	2983-3640	162.0	3013-3676
C58	Legal Clerk II	166.5	3151-3845	170.5	3278-4001	171.5	3312-4042
C50	Legal Secretary	181.5	3659-4463	185.5	3806-4644	186.5	3845-4690
B21	Librarian I	201.5	4463-5446	205.5	4644-5666	206.5	4690-5723
B20	Librarian II	211.5	4930-6016	215.5	5131-6263	216.5	5181-6325
B36	Library Assistant I	157.0	2865-3498	161.0	2983-3640	162.0	3013-3676
B37	Library Assistant II	166.5	3151-3845	170.5	3278-4001	171.5	3312-4042
H49	Licensed Vocational Nurse I	190.5	4001-4881	194.5	4163-5080	195.5	4205-5131
H48	Licensed Vocational Nurse II	200.5	4420-5391	204.5	4599-5611	205.5	4644-5666
H31	Medical Assistant	175.5	3446-4205	179.5	3585-4377	180.5	3621-4420
114	Medical Social Worker I	189.5	3961-4833	193.5	4122-5028	194.5	4163-5080
115	Medical Social Worker II	199.5	4377-5337	203.5	4553-5555	204.5	4599-5611
H36	Medical Office Receptionist	165.5	3120-3806	169.5	3245-3961	170.5	3278-4001
C98	Medical Billing Assistant I	169.5	3245-3961	173.5	3378-4122	174.5	3411-4163
C97	Medical Billing Assistant II	179.5	3585-4377	183.5	3732-4553	184.5	3768-4599
l122	Nutrition Assistant I	158.5	2909-3550	162.5	3028-3695	163.5	3058-3732
1121	Nutrition Assistant II	168.5	3214-3921	172.5	3345-4082	173.5	3378-4122
H42	Nutrition Education Specialist	204.5	4599-5611	208.5	4786-5840	209.5	4833-5899

SECTION II - General Employees CLASSES ASSIGNED TO SALARY RANGE NUMBERS

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles shown below.

	<u>Class Title</u>	*Effective Salary Range <u>Number</u>	3/17/2025 Approx. Monthly <u>Salary</u>	*Effective Salary Range <u>Number</u>	3/17/2025 Approx. Monthly <u>Salary</u>	*Effective Salary Range <u>Number</u>	7/7/2025 Approx. Monthly <u>Salary</u>
H38	Occupational Therapist	249.5	7200-8785	253.5	7493-9140	254.5	7568-9230
C10	Office Assistant I	157.0	2865-3498	161.0	2983-3640	162.0	3013-3676
C09	Office Assistant II	164.0	3073-3749	168.0	3198-3902	169.0	3229-3942
P89	Patient Rights Advocate	202.5	4508-5500	206.5	4690-5723	207.5	4739-5782
P73	Peer Support Specialist	165.5	3120-3806	169.5	3245-3961	170.5	3278-4001
E39	Permit Technician I	185.5	3806-4644	189.5	3961-4833	190.5	4001-4881
E40	Permit Technician II	195.5	4205-5131	199.5	4377-5337	200.5	4420-5391
E46	Permit Technician III	205.5	4644-5666	209.5	4833-5899	210.5	4881-5957
H40	Physical Therapist	255.0	7604-9277	259.0	7913-9655	260.0	7992-9752
E04	Planner I	213.0	5004-6108	217.0	5207-6356	218.0	5259-6420
E16	Planner II	223.0	5528-6748	227.0	5753-7022	228.0	5810-7093
E21	Planner III	233.0	6108-7455	237.0	6356-7757	238.0	6420-7835
B55	Program Coordinator	217.0	5207-6356	221.0	5418-6614	222.0	5472-6680
P31	Probation Technician	184.5	3768-4599	188.5	3921-4786	189.5	3961-4833
P30	Process Server	162.5	3028-3695	166.5	3151-3845	167.5	3182-3883
P59	Psychiatric Technician I	187.0	3864-4715	191.0	4021-4905	192.0	4061-4954
P58	Psychiatric Technician II	197.0	4267-5207	201.0	4441-5418	202.0	4486-5472
P90	Public Health Emergency Planner	230.0	5928-7235	234.0	6169-7530	235.0	6231-7604
H02	Public Health Nurse I	241.5	6647-8112	245.5	6918-8443	246.5	6987-8526
H01	Public Health Nurse II	251.5	7344-8961	255.5	7642-9324	256.5	7719-9417
E55	Purchasing Technician	182.0	3676-4486	186.0	3825-4668	187.0	3864-4715
	G						
P91	Quality Assurance Clinician	250.5	7271-8871	254.5	7568-9230	255.5	7642-9324
E68	Quality Assurance Specialist	200.5	4420-5391	204.5	4599-5611	205.5	4644-5666
B95	Radio Communications Programmer	248.0	7093-8655	252.0	7381-9005	253.0	7455-9095
H27	Registered Dietitian	230.5	5957-7271	234.5	6200-7568	235.5	6263-7642
H06	Registered Nurse I	226.5	5723-6987	230.5	5957-7271	231.5	6016-7344
H05	Registered Nurse II	236.5	6325-7719	240.5	6581-8032	241.5	6647-8112
M30	Security Officer	158.0	2895-3533	162.0	3013-3676	163.0	3042-3713
E74	Senior Assessment Technician	193.0	4101-5004	197.0	4267-5207	198.0	4311-5259
P26	Senior Child Support Specialist	194.0	4143-5054	198.0	4311-5259	199.0	4354-5311
P32	Senior Eligibility Worker	190.5	4001-4881	194.5	4163-5080	195.5	4205-5131
P09	Senior Employment & Training Worker	203.5	4553-5555	207.5	4739-5782	208.5	4786-5840
N10	Senior Environmental Health Specialist	230.5	5957-7271	234.5	6200-7568	235.5	6263-7642
E26	Senior Fiscal Specialist	215.5	5131-6263	219.5	5337-6517	220.5	5391-6581
B11	Senior Information Technology Analyst	252.0	7381-9005	256.0	7680-9370	257.0	7757-9464
P39	Senior Juvenile Services Officer	209.5	4833-5899	213.5	5028-6139	214.5	5080-6200
B38	Senior Library Assistant	176.5	3481-4247	180.5	3621-4420	181.5	3659-4463
C08	Senior Office Assistant	174.0	3394-4143	178.0	3533-4311	179.0	3567-4354
C16	Senior Sheriff's Records Technician	192.0	4061-4954	196.0	4226-5155	197.0	4267-5207
P23	Senior Veterans Service Rep	190.5	4001-4881	194.5	4163-5080	195.5	4205-5131
P51	Senior Victim/Witness Advocate	190.5	4001-4881	194.5	4163-5080	195.5	4205-5131
P33	Senior Welfare Fraud Investigator	227.0	5753-7022	231.0	5987-7308	232.0	6048-7381
C13	Sheriff's Records Technician I	172.0	3328-4061	176.0	3463-4226	177.0	3498-4267
C14	Sheriff's Records Technician II	182.0	3676-4486	186.0	3825-4668	187.0	3864-4715
M45	Sheriff's Investigative Technician	198.0	4311-5259	202.0	4486-5472	203.0	4531-5528
P81	Social Service Worker Practitioner - CPS	229.5	5899-7200	233.5	6139-7493	234.5	6200-7568
P14	Social Service Worker I	189.5	3961-4833	193.5	4122-5028	194.5	4163-5080
P13	Social Service Worker II	199.5	4377-5337	203.5	4553-5555	204.5	4599-5611
P12	Social Service Worker III	209.5	4833-5899	213.5	5028-6139	214.5	5080-6200
P84	Social Service Worker I - CPS	199.5	4377-5337	203.5	4553-5555	204.5	4599-5611
P83	Social Service Worker II - CPS	209.5	4833-5899	213.5	5028-6139	214.5	5080-6200
P82	Social Service Worker III - CPS	219.5	5337-6517	223.5	5555-6781	224.5	5611-6850
P76	Social Worker Assistant I	160.0	2954-3604	164.0	3073-3749	165.0	3104-3787
P75	Social Worker Assistant II	170.0	3262-3981	174.0	3394-4143	175.0	3429-4184
	Staff Support Specialist I	187.5	3883-4739	191.5	4042-4930	192.5	4082-4978
	Staff Support Specialist II	197.5	4288-5233	201.5	4463-5446	202.5	4508-5500
E17	Survey Technician	209.5	4833-5899	213.5	5028-6139	214.5	5080-6200
E57	Treasury Specialist	215.5	5131-6263	219.5	5337-6517	220.5	5391-6581
P24	Veterans' Service Representative I	170.5	3278-4001	174.5	3411-4163	175.5	3446-4205
P25	Veterans' Service Representative II	180.5	3621-4420	184.5	3768-4599	185.5	3806-4644
P21	Victim/Witness Advocate I	170.5	3278-4001	174.5	3411-4163	175.5	3446-4205
P19	Victim/Witness Advocate II	180.5	3621-4420	184.5	3768-4599	185.5	3806-4644

SECTION II - General Employees

CLASSES ASSIGNED TO SALARY RANGE NUMBERS

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles shown below.

		*Effective Salary Range	3/17/2025 Approx. Monthly	*Effective Salary Range	3/17/2025 Approx. Monthly	*Effective Salary Range	7/7/2025 Approx. Monthly
Code	Class Title	<u>Number</u>	<u>Salary</u>	Number	<u>Salary</u>	Number	Salary
P38	Welfare Fraud Investigator I	207.0	4715-5753	211.0	4905-5987	212.0	4954-6048
P37	Welfare Fraud Investigator II	217.0	5207-6356	221.0	5418-6614	222.0	5472-6680
H52	WIC Breastfeeding Coordinator	204.5	4599-5611	208.5	4786-5840	209.5	4833-5899

^{*}See General Unit MOU Side Letter of Agreement dated March 25, 2025

Effective January 6, 2025 -approved by the Board of Supervisors on November 5, 2024

Microbiologist and Microbiologist Trainee classifications deleted.

Laboratory Assistant III classification deleted.

Effective February 17, 2025 - approved by the Board of Supervisors on February 25, 2025

Patient Rights Advocate - new classification with salary set at Range 202.5 (\$4,508-\$5,500)

Effective March 17, 2025 - approved by the Board of Supervisors on March 25, 2025

Behavioral Health Services Assistant I/II classification reclassified to Behavioral Health Services Assistant I/II with salary set at Range 170.0 (\$3,262-\$3,981)

Central Services Operator I/II classification reclassified to Central Services Assistant I/II with salary set at Range 166.0 (\$3,136-\$3,825)

Children's Medical Services Worker classification reclassified to Caseworker I with salary set at Range 170.5 (\$3,278-\$4,001)

Deputy Public Guardian classification reclassified to Deputy Public Guardian II with salary set at Range 207.0 (\$4,715-\$5,753)

Jail Cook classification reclassified to Jail Cook II with salary set at Range 170.0 (\$3,262-\$3,981)

Licensed Mental Health Clinician classification reclassified to Behavioral Health Clinician II salary set at Range 239.5 (\$6,517-\$7,953)

Recovery Support Coordinator II, BH or PH classification reclassified to Care Coordinator with salary set at Range 189.5 (\$3,961-\$4,833)

Senior Programmer Analyst classification reclassified to Information Technology Analyst III with salary set at Range 242.0 (\$6,680-\$8,154)

Unlicensed Mental Health Clinician classification reclassifed to Behavioral Health Clinician I with salary set at 229.5 (\$5,899-\$7,200)

Effective March 17, 2025 - approved by the Board of Supervisors on March 25, 2025

Account Clerk I/II classification retitled to Accounting Assistant I/II classification

Agricultural and Standards Aide classification retitled to Agricultural and Standards Technician classification

Assessment Specialist I/II/III classification retitled to Assessment Technician I/II/III classification

Child Support Specialist III classification retitled to Senior Child Support Specialist classification

Clerk-Recorder Specialist I/II classification retitled to Clerk-Recorder Assistant I/II classification

 ${\it Clerk-Recorder\ Specialist\ III\ classification\ retitled\ to\ Clerk-Recorder\ Assistant\ III\ classification\ and\ an extension\ are the classification\ and\ are the classification\ are the classification\ and\ are the classification\ are t$

Computer Support Technician I/II classification retitled to Infortmation Technician I/II Elections Specialist I/II classification retitled to Elections Technician I/II classification

Eligibility Worker III classification retitled to Senior Eligibility Worker classification

Employment and Training Worker III classification retitled to Senior Employment and Training Worker classification

Fiscal Specialist III classification retitled to Senior Fiscal Specialist classification

GIS Specialist I/II classification retitled to GIS Technician I/II classification

Library Assistant III classification retitled to Senior Library Assistant classification

Medical Billing Clerk I/II classification retitled to Medical Billing Assistant I/II classification

Office Assistant III classification retitled to Senior Office Assistant classification

Prevention Coordinator, BH or PH classification retitled to Program Coordinator classification

Purchasing Assistant classification retitled to Purchasing Technician classification

Sheriff Records Clerk I/II classification retitled to Sheriff's Records Technician I/II classification

 $Sheriff\ Records\ Clerk\ III\ classification\ retitled\ to\ Senior\ Sheriff's\ Records\ Technician\ classification$

Sheriff's Investigative Assistant classification retitled to Sheriff's Investigative Technician classification

Social Services Assistant I/II classification retitled to Social Worker Assistant I/II classification

Social Service Worker I/II classification retitled to Social Worker I/II classification

Social Service Worker III classification retitled to Social Worker III classification

Social Service Worker I/II - CPS classification retitled to Social Worker I/II - CPS classification

Social Service Worker III - CPS classification retitled to Social Worker III - CPS classification

Social Service Practitioner - CPS classification retitled to Social Worker Practitioner - CPS classification

Welfare Fraud Investigator III classification retitled to Senior Welfare Fraud Investigator classification

Victim Witness Advocate III retitled to Senior Victim Witness Advocate classification

Effective March 17, 2025 - approved by the Board of Supervisors on March 25, 2025

Caseworker II new classification with salary set at Range 180.5 (\$3,621-\$4,420)

Construction Inspector new classification with salary set at Range 218.0 (\$5,259-\$6,420) Department I.T. Technician I new classification with salary set at Range 191.5 (\$4,042-\$4,930)

Department I.T. Technician I new classification with salary set at Range 191.5 (\$4,042-\$4,950) Department I.T. Technician II new classification with salary set at Range 201.5 (\$4,463-\$5,446)

Deputy Public Guardian I new classification with salary set at Range 197.0 (\$4,267-\$5,207)

Jail Cook I new classification with salary set at Range 160.0 (\$2,954-\$3,604)

Medical Social Worker I new classification with salary set at Range 189.5 (\$3,961-\$4,833)

Medical Social Worker II new classification with salary set at Range 199.5 (\$4,377-\$5,337)

Information Technology Analyst I new classification with salary set at Range 222.0 (\$5,472-\$6,680)

Information Technology Analyst II new classification with salary set at Range 232.0 (\$6,048-\$7,381)

Quality Assurance Clinician new classification set at Range 250.5 (\$7,271-\$8,871)

Senior Assessment Technician new classification with salary set at Range 193.0 (\$4,101-\$5,004)

Senior Information Technology Analyst new classification set at Range 252.0 (\$7,381-\$9,005)

Survey Technician new classification with salary set at Range 209.5 (\$4,833-\$5,899)

Effective March 17, 2025 - approved by the Board of Supervisors on March 25, 2025

Account Clerk III classification deleted

Accounting Assistant classification deleted

Accounting Technician classification deleted

Cadastral GIS Technician I/II classification deleted

Cadastral GIS Technician III classification deleted Community Health Aide III classification deleted

Elections Specialist III classification deleted

Employment and Training Technician I/II classification deleted

Legal Clerk III classification deleted

Library Technology Specialist I/II classification deleted

Network Analyst I/II/III classifications deleted

Office Systems Analyst I/II/III classification deleted

Public Guardian Accounting Technician classification deleted

Recovery Support Coordinator I classification deleted Recovery Support Coordinator III, Behavioral or Public Health classification deleted

Senior Employment and Training Technician classification deleted

Senior Network Analyst classification deleted

Senior Office Systems Analyst classification deleted

Senior Planner classification deleted

Supervising Health Education Specialist deleted from General Unit and moved to Supervisor's Unit

WIC Nutrition Assistant III classification deleted

Effective June 9, 2025 - approved by the Board of Supervisors on June 10, 2025

Ag Computer Systems Coordinator classification deleted

Ag Research Assistant classification deleted

Building & Planning Aid I/II classification deleted

Collections Assistant classification deleted

Collector-Tax classification deleted

County Surveyor classification deleted

Finance Specialist classification deleted

Fire Equipment Supply Specialist classification deleted

Fire Equipment Supply Trainee classification deleted

Licensed Clinical Social Worker classification deleted

Public Guardian/Vet Svcs Case Worker classification deleted

Right of Way Agent classification deleted

System Support Specialist classification deleted

SECTION II - Blue Collar Employees

CLASSES ASSIGNED TO SALARY RANGE NUMBERS

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles as shown below.

		Effective Salary Range	12/9/2024 Approx. Monthly	Effective Salary Range	7/7/2025 Approx. Monthly
<u>Code</u>	<u>Class Title</u>	<u>Number</u>	<u>Salary</u>	<u>Number</u>	<u>Salary</u>
J05	Building Maintenance Worker	184.5	3768-4599	185.5	3806-4644
J11	Building Operations Specialist I	201.5	4463-5446	202.5	4508-5500
J10	Building Operations Specialist II	216.5	5181-6325	217.5	5233-6387
K14	Equipment Mechanic	180.5	3621-4420	181.5	3659-4463
S10	Equipment Serviceworker	178.0	3533-4311	179.0	3567-4354
K06	Groundsworker I	165.5	3120-3806	166.5	3151-3845
K05	Groundsworker II	175.5	3446-4205	176.5	3481-4247
J02	Janitor	165.0	3104-3787	166.0	3136-3825
S02	Master Mechanic	213.5	5028-6139	214.5	5080-6200
S01	Mechanic	203.5	4553-5555	204.5	4599-5611
U01	Park Aide	158.0	2895-3533	159.0	2924-3567
K13	Park Caretaker	185.5	3806-4644	186.5	3845-4690
R04	Road Maintenance Worker I	181.0	3640-4441	182.0	3676-4486
R05	Road Maintenance Worker II	191.0	4021-4905	192.0	4061-4954
J04	Senior Bldg Maintenance Wkr	194.5	4163-5080	195.5	4205-5131
J17	Senior Janitor	175.0	3429-4184	176.0	3463-4226
S03	Senior Mechanic	223.5	5555-6781	224.5	5611-6850
R07	Senior Road Maintenance Worker	201.0	4441-5418	202.0	4486-5472
K32	Service Coordinator	188.0	3902-4761	189.0	3942-4808

Employees who are designated "classic members" of PERS pay the full employee contribution for the 2% at 55 Miscellaneous plan. Employees who are designated "new members" of PERS pay the full employee contribution for the 2% at 62 Miscellaneous plan.

^{*}See Blue Collar MOU Side Letter of Agreement dated September 10, 2024

SECTION II - Supervisors Employees

CLASSES ASSIGNED TO SALARY RANGE NUMBERS

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles as shown below.

		*Effective Salary Range	12/23/2024 Approx. Monthly	Salary Range	12/23/2024 Approx. Monthly	Salary Range	Approx. Monthly
<u>Code</u>	<u>Class Title</u>	Number	Salary	Number	Salary	Number	Salary
P49	Behavioral Health Services Supervisor	232.0	6048-7381	236.0	6294-7680	237.0	6356-7757
J21	Building Maintenance Supervisor	205.5	4644-5666	209.5	4833-5899	210.5	4881-5957
J03	Building Operations Supervisor	222.5	5500-6713	226.5	5723-6987	227.5	5782-7056
P10	Child Support Supervisor	209.0	4808-5869	213.0	5004-6108	214.0	5054-6169
B49	Elections Supervisor	207.0	4715-5753	211.0	4905-5987	212.0	4954-6048
P28	Eligibility Supervisor	205.5	4644-5666	209.5	4833-5899	210.5	4881-5957
E60	Emergency Dispatcher Supervisor	223.0	5528-6748	227.0	5753-7022	228.0	5810-7093
P15	Employment & Training Supervisor	218.5	5285-6453	222.5	5500-6713	223.5	5555-6781
J01	Janitor Supervisor	186.0	3825-4668	190.0	3981-4857	191.0	4021-4905
C92	Legal Office Supervisor	198.5	4332-5285	202.5	4508-5500	203.5	4553-5555
K12	Parks and Grounds Supervisor	196.5	4247-5181	200.5	4420-5391	201.5	4463-5446
B76	Information Technology Supervisor	262.0	8154-9948	266.0	8485-10351	267.0	8570-10455
R08	Roads Supervisor	217.0	5207-6356	221.0	5418-6614	222.0	5472-6680
B32	Senior Appraiser	237.5	6387-7795	241.5	6647-8112	242.5	6713-8195
H12	Senior Dietitian	245.5	6918-8443	249.5	7200-8785	250.5	7271-8871
E23	Senior Emergency Dispatcher	208.0	4761-5810	212.0	4954-6048	213.0	5004-6108
K23	Senior Jail Cook	180.0	3604-4397	184.0	3749-4576	185.0	3787-4621
P06	Social Worker Supervisor	229.5	5899-7200	233.5	6139-7493	234.5	6200-7568
P80	Social Worker Supervisor - CPS	244.5	6850-8360	248.5	7127-8698	249.5	7200-8785
P62	Supervising Family Resource Technician	201.5	4463-5446	205.5	4644-5666	206.5	4690-5723
H16	Supervising Health Education Specialist	215.5	5131-6263	219.5	5337-6517	220.5	5391-6581
P42	Supervising Juvenile Services Officer	229.5	5899-7200	233.5	6139-7493	234.5	6200-7568
C51	Supervising Office Assistant	189.0	3942-4808	193.0	4101-5004	194.0	4143-5054
E59	Tax Collection Supervisor	215.5	5131-6263	219.5	5337-6517	220.5	5391-6581

Employees who are designated "classic members" of PERS pay the full employee contribution for the 2% at 55 Miscellaneous plan or the 3% at 55 Safety plan. Employees who are designated "new members" of PERS pay the full employee contribution for the 2% at 62 Miscellaneous plan or the 2.7% at 57 Safety plan.

Effective December 23, 2024 - approved by the Board of Supervisors on January 7, 2025

Supervising Office Assistant new classification with salary set at Range 189.0 (\$3,942-\$4,808) Supervising Health Education Specialist moved from General Unit to Supervisors Unit

<u>Effective December 23, 2024 - approved by the Board of Supervisors on January 7, 2025</u> Behavioral Health Unit Supervisor classification retitled to Behavioral Health Services Supervisor Principal Info Tech Analyst classification retitled to Information Technology Supervisor Social Service Supervisor classification retitled to Social Worker Supervisor Social Service Supervisor - CPS classification retitled to Social Worker Supervisor - CPS

Effective December 23, 2024 - approved by the Board of Supervisors on January 7, 2025

Child Support Office Supervisor classification deleted Human Services Office Supervisor classification deleted Public Health Office Supervisor classification deleted

Effective June 9, 2025 - approved by the Board of Supervisors on June 10, 2025

Senior Accounting Assistant classification deleted Work Crew Supervisor classification deleted

^{*}See Supervisors Unit MOU Side Letter of Agreement dated December 23, 2024

SECTION II - Fire Employees

CLASSES ASSIGNED TO SALARY RANGE NUMBERS

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles as shown below.

		Effective Salary	7/8/2024 Approx.
Class		Range	Monthly
<u>Code</u>	<u>Class Title</u>	Number	Salary
M16	Fire Captain	245.5	6918-8443
M14	Fire Engineer	230.5	5957-7271
M18	Firefighter	220.5	5391-6581
M17	Heavy Fire Equipment Operator I	231.5	6016-7344
M19	Heavy Fire Equipment Operator II	241.5	6647-8112

FIRE SALARY SCHEDULE - HOURLY RATES based on average 56 hour workweek

EFFECTIVE - July 8, 2024 - (hourly rates)

Class							
Code	Class Title	Range	Step 1	Step 2	Step 3	Step 4	Step 5
M16	Fire Captain	245.5	28.51	29.96	31.49	33.10	34.79
M14	Fire Engineer	230.5	24.55	25.81	27.12	28.51	29.96
M18	Firefighter	220.5	22.21	23.35	24.55	25.81	27.12
M17	Heavy Fire Equipment Operator I	231.5	24.79	26.06	27.39	28.79	30.26
M19	Heavy Fire Equipment Operator II	241.5	27.39	28.79	30.26	31.81	33.43

Effective April 15, 2013, employees who are designated "classic members" of PERS pay the full employee contribution for the 3% @ 55 Safety Plan. Employees hired on or after January 1, 2013 and who are designated "new members" of PERS pay the full employee contribution for the 2.7% at 57 Safety plan.

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles as shown below.

		Effective Salary Range	12/23/2024 Approx. Monthly	Effective Salary Range	12/23/2024 Approx. Monthly	Effective Salary Range	7/7/2025 Approx. Monthly
<u>Code</u>	Class Title_	Number	Salary	Number	Salary	Number	Salary
M49	Detentions Assistant	175.5	3446-4205	179.5	3585-4377	180.5	3621-4420
M52	Detentions Technician I	170.5	3278-4001	174.5	3411-4163	175.5	3446-4205
M51	Detentions Technician II	180.5	3621-4420	184.5	3768-4599	185.5	3806-4644
M04	Detentions Deputy I	195.5	4205-5131	199.5	4377-5337	200.5	4420-5391
M08	Detentions Deputy I-STC	200.5	4420-5391	204.5	4599-5611	205.5	4644-5666
M03	Detentions Deputy II	210.5	4881-5957	214.5	5080-6200	215.5	5131-6263
M09	Detentions Sergeant	235.5	6263-7642	239.5	6517-7953	240.5	6581-8032
M07	Senior Detentions Deputy	220.5	5391-6581	224.5	5611-6850	225.5	5666-6918
M50	Senior Detentions Technician	190.5	4001-4881	194.5	4163-5080	195.5	4205-5131

Employees who are designated "classic members" of PERS pay the full employee contribution for the 3% at 55 Safety plan. Employees who are designated "new members" to PERS pay the full contribution for the 2.7% at 57 Safety plan.

Effective April 29, 2013, employees who are designated "classic members" of PERS pay the full employee contribution for the 2% at 55 Miscellaneous plan.

Employees hired on or after January 1, 2013 and who are designated "new members" to PERS pay the full employee contribution for the 2% at 62 Miscellaneous plan.

SECTION II - Law Enforcement Employees

CLASSES ASSIGNED TO SALARY RANGE NUMBERS

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles as shown below.

		*Effective Salary Range	12/9/2024 Approx. Monthly	*Effective Salary Range	7/7/2025 Approx. Monthly
<u>Code</u>	<u>Class Title</u>	Number	Salary	<u>Number</u>	<u>Salary</u>
M06	Chief Civil Deputy Sheriff	260.0	7992-9752	261.0	8072-9849
M35	Chief Dep Coroner/Public Admin	260.0	7992-9752	261.0	8072-9849
M25	Deputy Sheriff I	225.0	5639-6883	226.0	5696-6952
M02	Deputy Sheriff II	235.0	6231-7604	236.0	6294-7680
L16	District Attorney Investigator I	231.0	5987-7308	232.0	6048-7381
L15	District Attorney Investigator II	241.0	6614-8072	242.0	6680-8154
M23	Senior Deputy Sheriff	245.0	6883-8401	246.0	6952-8485
M05	Sheriff's Sergeant	260.0	7992-9752	261.0	8072-9849
L14	Supervising DA Investigator	256.0	7680-9370	257.0	7757-9464

Employees who are designated "classic members" of PERS pay the full employee contribution for the 3% at 55 Safety plan. Employees who are designated "new members" of PERS pay the full employee contribution for the 2.7% at 57 Safety plan.

^{*}See Deputy Sheriff's Association MOU Side Letter of Agreement dated November 19, 2024

SECTION II - Probation Employees

CLASSES ASSIGNED TO SALARY RANGE NUMBERS

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles as shown below.

		*Effective Salary Range	12/9/2024 Approx. Monthly	Effective Salary Range	7/7/2025 Approx. Monthly
<u>Code</u>	Class Title	Number	Salary	Number	Salary
P03	Deputy Probation Officer I	208.0	4761-5810	209.0	4808-5869
P02	Deputy Probation Officer II	218.0	5259-6420	219.0	5311-6484
P01	Senior Deputy Probation Officer	228.0	5810-7093	229.0	5869-7164
P05	Supervising Deputy Probation Officer	243.0	6748-8235	244.0	6815-8318

Employees who are designated "classic members" of PERS pay the full employee contribution for the 3% at 55 Safety plan. Employees who are designated "new members" of PERS pay the full employee contribution for the 2.7% at 57 Safety plan.

^{*}See Probation Officers Association MOU Side Letter of Agreement dated November 14, 2024

SECTION II - Prosecutor's Employees

CLASSES ASSIGNED TO SALARY RANGE NUMBERS

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles as shown below.

		Effective Salary	10/14/2024 Approx.
		Range	Monthly
<u>Code</u>	<u>Class Title</u>	<u>Number</u>	<u>Salary</u>
T19	Child Advocacy Attorney I	244.0	6815-8318
T18	Child Advocacy Attorney II	259.0	7913-9655
T17	Child Advocacy Attorney III	279.0	9655-11781
T16	Child Advocacy Attorney IV	289.0	10665-13014
T15	Child Support Attorney I	244.0	6815-8318
T14	Child Support Attorney II	259.0	7913-9655
T13	Child Support Attorney III	279.0	9655-11781
T12	Child Support Attorney IV	289.0	10665-13014
T09	Deputy District Attorney I	244.0	6815-8318
T08	Deputy District Attorney II	259.0	7913-9655
T07	Deputy District Attorney III	279.0	9655-11781
T06	Deputy District Attorney IV	289.0	10665-13014
T04	Senior Deputy District Attorney	294.0	11209-13678

Employees who are designated "classic members" of PERS pay the full employee contribution for the 2% at 55 Miscellaneous plan. Employees who are designated "new members" of PERS pay the full employee contribution for the 2% at 62 Miscellaneous plan.

SECTION II - Middle Management & Confidential Employees

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles as shown below.

	15 SHOWI	i below.	Effective Salary Range	12/9/2024 Approx. Monthly	Effective Salary Range	12/9/2024 Approx. Monthly	Effective Salary Range	7/7/2025 Approx. Monthly
9	<u>Code</u>	<u>Class Title</u>	Number	<u>Salary</u>	Number	<u>Salary</u>	Number	<u>Salary</u>
	072	Accountant-Auditor	236.5	6325-7719	240.5	6581-8032	241.5	6647-8112
	D46	Administrative Analyst I Administrative Analyst II	226.5	5723-6987	230.5	5957-7271	231.5	6016-7344
	D38 D24	Administrative Analyst III	236.5 246.5	6325-7719 6987-8526	240.5 250.5	6581-8032 7271-8871	241.5 251.5	6647-8112 7344-8961
	0104	Animal Services Manager	229.5	5899-7200	233.5	6139-7493	234.5	6200-7568
	055	Assistant Assessor/Clerk/Recorder (1)	276.0	9370-11435	280.0	9752-11899	281.0	9849-12019
1	0127	Assistant Chief District Attorney Investigator	267.0	8570-10455	271.0	8916-10880	272.0	9005-10989
	010	Assistant County Counsel (1)	309.0	13014-15881	314.0	13677-16690	314.0	13677-16690
	0154	Assistant Director of Behavioral Health	276.0	9370-11435	280.0	9752-11899	281.0	9849-12019
	052	Assistant Director of Child Support Svcs (1) Assistant Director of Finance – Accounting (1)	277.0 270.0	9464-11549	281.0 274.0	9849-12019	282.0	9948-12139 9277-11322
	D20 D09	Assistant Director of Finance – Accounting (1) Assistant Director of Finance – Treasury and Tax (1)	270.0	8828-10773 8828-10773	274.0	9185-11209 9185-11209	275.0 275.0	9277-11322
	0136	Assistant Director of Human Services (1)	296.5	11492-14023	300.5	11958-14593	301.5	12080-14739
	0143	Assistant Director of Public Health (1)	276.0	9370-11435	280.0	9752-11899	281.0	9849-12019
[0131	Assistant District Attorney (1)	309.0	13014-15881	314.0	13677-16690	314.0	13677-16690
	0105	Assistant Fire Chief (1)	278.5	9608-11724	282.5	9998-12199	282.5	9998-12199
	027	Assistant Public Guardian/Veterans Service Officer(1)	256.0	7680-9370	260.0	7992-9752	261.0	8072-9849
	014	Assistant Sheriff (1)	293.0	11099-13543	297.0	11549-14094	298.0	11665-14234
	019 0138	Assistant Sheriff - STC (1) Auditor-Accountant	270.5 236.5	8871-10826 6325-7719	274.5 240.5	9230-11265 6581-8032	275.5 241.5	9324-11379 6647-8112
	045	Battalion Chief (Operations) (2) / (Training/Prevention)	265.5	8443-10301	269.5	8785-10719	269.5	8785-10719
	0111 025	Behavioral Health Program Manager Building Maintenance Superintendent	250.5 259.0	7271-8871 7913-9655	254.5 263.0	7568-9230 8235-10046	255.5 264.0	7642-9324
١	J25	·	259.0	/913-9055	263.0		264.0	8318-10147
	050	Chief Appraiser	252.5	7417-9050	256.5	7719-9417	257.5	7795-9511
	D75 D34	Chief Child Advocacy Attorney Chief Child Support Attorney	299.0 299.0	11781-14376	304.0 304.0	12383-15109	304.0 304.0	12383-15109 12383-15109
)54)93	Chief District Attorney Investigator	282.0	11781-14376 9948-12139	286.0	12383-15109 10351-12631	287.0	10455-12757
	006	Chief Engineer	285.5	10301-12568	289.5	10719-13080	290.5	10826-13210
	089	Child Support Program Manager	246.0	6952-8485	250.0	7235-8828	251.0	7308-8916
[054	Child Welfare Program Manager	260.5	8032-9800	264.5	8360-10197	265.5	8443-10301
	084	Clerk of the Board of Supervisors (1)	247.5	7056-8613	251.5	7344-8961	252.5	7417-9050
	068	Clerk/Recorder Manager	229.0	5869-7164	233.0	6108-7455	234.0	6169-7530
	0117	Clinical Program Manager	260.5	8032-9800	264.5	8360-10197	265.5	8443-10301
	D83	Compliance Officer	249.5	7200-8785	253.5	7493-9140	254.5	7568-9230
	040	Deputy Ag Commissioner	233.5	6139-7493	237.5	6387-7795	238.5	6453-7875
	039	Deputy Ag Comm/Sealer of Weights and Measures	248.5	7127-8698	252.5	7417-9050	253.5	7493-9140
	035 Q20	Deputy Chief Probation Officer Deputy Clerk to the Board of Supervisor I	274.0 197.5	9185-11209 4288-5233	278.0 201.5	9559-11665 4463-5446	279.0 202.5	9655-11781 4508-5500
	220 Q19	Deputy Clerk to the Board of Supervisor II	207.5	4739-5782	211.5	4930-6016	212.5	4978-6077
	0115	Deputy Community Development Director – Building (1)	277.0	9464-11549	281.0	9849-12019	282.0	9948-12139
	0112	Deputy Community Development Director – Planning (1)	277.0	9464-11549	281.0	9849-12019	282.0	9948-12139
[048	Deputy County Administrative Officer (1)	271.5	8961-10934	275.5	9324-11379	276.5	9417-11492
	087	Deputy County Counsel I	239.0	6484-7913	244.0	6815-8318	244.0	6815-8318
	085	Deputy County Counsel II	254.0	7530-9185	259.0	7913-9655	259.0	7913-9655
	D18 D28	Deputy County Counsel III Deputy County Counsel IV	274.0 284.0	9185-11209 10147-12383	279.0 289.0	9655-11781 10665-13014	279.0 289.0	9655-11781 10665-13014
	0125	Deputy Director of Behavioral Health (1)	264.0 261.0	8072-9849	265.0	8401-10249	266.0	8485-10351
	016	Deputy Director of Human Services (1)	286.5	10403-12693	290.5	10826-13210	291.5	10934-13341
	0153	Deputy Director of Public Health (1)	261.0	8072-9849	265.0	8401-10249	266.0	8485-10351
1	0155	Deputy Director of Public Works (1)	276.0	9370-11435	280.0	9752-11899	281.0	9849-12019
	0149	Deputy District Attorney Supervisor	299.0	11781-14376	304.0	12383-15109	304.0	12383-15109
	041	Deputy Sealer of Weights & Measures	233.5	6139-7493	237.5	6387-7795	238.5	6453-7875
I	011	Detentions Lieutenant	250.5	7271-8871	254.5	7568-9230	255.5	7642-9324
	076	Economic Development Manager	246.0	6952-8485	250.0	7235-8828	251.0	7308-8916
	053 057	Emergency Services Coordinator	225.5	5666-6918	229.5	5899-7200	230.5	5957-7271
	057 0102	Emergency Services Manager Environmental Health Division Manager	255.5 267.5	7642-9324 8613-10507	259.5 271.5	7953-9703 8961-10934	260.5 272.5	8032-9800 9050-11045
	001	Executive Assistant to the C.A.O.	207.5	5391-6581	271.5	5611-6850	272.5	5666-6918
	Q22	Executive Secretary	197.5	4288-5233	201.5	4463-5446	202.5	4508-5500

SECTION II - Middle Management & Confidential Employees

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles as shown below.

u3 3110W	ii below.	Effective Salary Range	12/9/2024 Approx. Monthly	Effective Salary Range	12/9/2024 Approx. Monthly	Effective Salary Range	7/7/2025 Approx. Monthly
<u>Code</u>	<u>Class Title</u>	<u>Number</u>	<u>Salary</u> ´	<u>Number</u>	<u>Salary</u> ´	Number	<u>Salary</u> ´
D114	Facilities Manager	237.5	6387-7795	241.5	6647-8112	242.5	6713-8195
D130	Family Nurse Practitioner/Physician's Assistant	273.5	9140-11154	277.5	9511-11606	278.5	9608-11724
D56	First 5 Program Manager Fiscal Analyst I	236.5	6325-7719	240.5	6581-8032	241.5	6647-8112
D17 D02	Fiscal Analyst II	222.5 232.5	5500-6713 6077-7417	226.5 236.5	5723-6987 6325-7719	227.5 237.5	5782-7056 6387-7795
D124	Fiscal Analyst III	237.5	6387-7795	241.5	6647-8112	242.5	6713-8195
D124	Fiscal Manager	247.5	7056-8613	251.5	7344-8961	252.5	7417-9050
D121	Fleet Services Superintendent	235.0	6231-7604	239.0	6484-7913	240.0	6549-7992
D111	Food Services Manager	210.0	4857-5928	214.0	5054-6169	215.0	5105-6231
D03	Human Resources Analyst I	220.5	5391-6581	224.5	5611-6850	225.5	5666-6918
D04	Human Resources Analyst II	231.5	6016-7344	235.5	6263-7642	236.5	6325-7719
D05	Human Resources Analyst III	246.5	6987-8526	250.5	7271-8871	251.5	7344-8961
Q12	Human Resources Assistant I	187.5	3883-4739	191.5	4042-4930	192.5	4082-4978
Q13	Human Resources Assistant II	197.5	4288-5233	201.5	4463-5446	202.5	4508-5500
D139	Human Resources Manager	266.5	8526-10403	270.5	8871-10826	271.5	8961-10934
Q05 Q04	Human Resources Technician I Human Resources Technician II	200.5 210.5	4420-5391 4881-5957	204.5 214.5	4599-5611 5080-6200	205.5 215.5	4644-5666 5131-6263
D65	Human Services Program Manager	250.5	7271-8871	254.5 254.5	7568-9230	255.5	7642-9324
D03	Tuttian Services Program Manager	230.3	7271-0071	234.3	7508-5250	233.3	7042-3324
D106	Information Security Officer	263.5	8277-10097	267.5	8613-10507	268.5	8698-10611
D59	Information Technology Manager	272.0	9005-10989	276.0	9370-11435	277.0	9464-11549
D61	JTO Program Manager	246.0	6952-8485	250.0	7235-8828	251.0	7308-8916
D123	Juvenile Services Manager	244.5	6850-8360	248.5	7127-8698	249.5	7200-8785
D79	Library Manager	236.5	6325-7719	240.5	6581-8032	241.5	6647-8112
D101	Nursing Division Manager	281.5	9897-12080	285.5	10301-12568	286.5	10403-12693
D37	Nutrition Services Program Manager	260.5	8032-9800	264.5	8360-10197	265.5	8443-10301
D77	Parks & Grounds Superintendent	245.0	6883-8401	249.0	7164-8741	250.0	7235-8828
D133	Payroll Tochnician L	238.5	6453-7875	242.5	6713-8195	243.5	6781-8277
Q23 Q24	Payroll Technician I Payroll Technician II	198.5 208.5	4332-5285 4786-5840	202.5 212.5	4508-5500 4978-6077	203.5 213.5	4553-5555 5028-6139
D67	Planner IV	243.0	6748-8235	247.0	7022-8570	248.0	7093-8655
D42	Probation Division Manager	254.0	7530-9185	258.0	7835-9559	259.0	7913-9655
D96	Program Specialist	225.5	5666-6918	229.5	5899-7200	230.5	5957-7271
D71	Property Tax Manager	225.5	5666-6918	229.5	5899-7200	230.5	5957-7271
D151	Public Health Program Manager	250.5	7271-8871	254.5	7568-9230	255.5	7642-9324
D92	Purchasing Manager	244.0	6815-8318	248.0	7093-8655	249.0	7164-8741
D141	Quality Assurance Manager	250.5	7271-8871	254.5	7568-9230	255.5	7642-9324
D88	Risk Analyst I*	217.5	5233-6387	218.5	5285-6453	219.5	5337-6517
D66	Risk Analyst II*	231.5	6016-7344	228.5	5840-7127	229.5	5899-7200
D135	Risk Manager	268.5	8698-10611	272.5	9050-11045	273.5	9140-11154
Q17	Risk Technician I	194.5	4163-5080	198.5	4332-5285	199.5	4377-5337
Q16	Risk Technician II	204.5	4599-5611	208.5	4786-5840	209.5	4833-5899
D60	Road Superintendent	259.0	7913-9655	263.0	8235-10046	264.0	8318-10147
Q07	Secretary Secretary to the County Counsel	187.5	3883-4739	191.5	4042-4930	192.5	4082-4978
Q02 Q03	Secretary to the County Counsel Secretary to the District Attorney	215.5 215.5	5131-6263 5131-6263	219.5 219.5	5337-6517 5337-6517	220.5 220.5	5391-6581 5391-6581
Q32	Secretary to the District Attorney	215.5	5131-6263	219.5	5337-6517	220.5	5391-6581
D08	Senior Accountant-Auditor	251.5	7344-8961	255.5	7642-9324	256.5	7719-9417
D150	Senior Deputy County Counsel	289.0	10665-13014	294.0	11209-13678	294.0	11209-13678
D29	Sheriff's Commander	271.0	8916-10880	275.0	9277-11322	276.0	9370-11435
D134	Sheriff's Records Manager	227.0	5753-7022	231.0	5987-7308	232.0	6048-7381
D140	Staff Support Manager	247.5	7056-8613	251.5	7344-8961	252.5	7417-9050
D108	Supervising Environmental Health Specialist	245.5	6918-8443	249.5	7200-8785	250.5	7271-8871
D13	Supervising Public Health Nurse	266.5	8526-10403	270.5	8871-10826	271.5	8961-10934
D122	Supervising Welfare Fraud Investigator	242.0	6680-8154	246.0	6952-8485	247.0	7022-8570

SECTION II - Middle Management & Confidential Employees

CLASSES ASSIGNED TO SALARY RANGE NUMBERS

The following classes are hereby assigned to the salary ranges in the basic salary schedule which are designated opposite the class titles as shown below.

Code D91	<u>Class Title</u> Treasury and Tax Manager	Effective Salary Range <u>Number</u> 255.5	12/9/2024 Approx. Monthly <u>Salary</u> 7642-9324	Effective Salary Range <u>Number</u> 259.5	12/9/2024 Approx. Monthly Salary 7953-9703	Effective Salary Range <u>Number</u> 260.5	7/7/2025 Approx. Monthly Salary 8032-9800	
D15	Undersheriff (1)	299.0	11781-14376	303.0	12260-14960	304.0	12383-15109	
D109	Victim Witness Coordinator	216.0	5155-6294	220.0	5365-6549	221.0	5418-6614	
D142	Water, Solar, and Natural Resources Manager	256.5	7719-9417	260.5	8032-9800	261.5	8112-9897	

Employees who are designated "classic members" of PERS pay the full employee contribution for the 2% at 55 Miscellaneous plan or the 3% at 55 Safety plan. Employees who are designated "new members" to PERS pay the full employee contribution for the 2% at 62 Miscellaneous plan or the 2.7% at 57 Safety plan.

- (1) These classifications are at-will and exempt from the merit system.
- (2) BATTALION CHIEF (Operations) HOURLY RATES when assigned to a 224 hour, 28-day work cycle.

Effective: 12/9/2024 Range 269.5

 Step 1
 Step 2
 Step 3
 Step 4
 Step 5

 \$36.20
 \$38.04
 \$39.99
 \$42.02
 \$44.17

Effective January 6, 2025 - approved by the Board of Supervisors on November 5, 2024

Public Health Laboratory Director classification deleted.

*Effective June 9, 2025 - approved by the Board of Supervisors on June 10, 2025

Risk Analyst I revised job specification and adjusted salary from range 221.5 to range 218.5 (\$5,285-\$6,453) Risk Analyst II revised job specification and adjusted salary from range 235.5 to range 228.5 (\$5,840-\$7,127)

SECTION III

SALARIES FOR COUNTY OFFICIALS

The following Officers and Department Heads (appointed and elected) shall receive compensation within the following band structure:

Salary Band Designation	Approximate 40% <u>Salary Band</u>	<u>Classifications</u>	Class Code
1	\$15,000-\$21,000	County Administrative Officer County Counsel County Health Officer	A02 A41 A50
2	\$13,000-\$19,000	Assessor/Clerk/Recorder District Attorney Sheriff	A25 A11 A21
3	\$12,000-\$17,000	Ag. Commissioner/Sealer of Wts. & Measures Assistant County Administrative Officer Chief Information Officer Chief Probation Officer (a) County Fire Chief Director of Behavioral Health Director of Child Support Services Director of Community Development Director of Finance Director of Human Resources Director of Human Services Director of Public Health Director of Public Works Economic and Workforce Development Director	A23 A07 A09 A22 A42 A47 A45 A27 A37 A40 A33 A29 A31 A43
4	\$10,000-\$ 14,000	Library Director Public Guardian/Veteran's Service Officer Registrar of Voters	A38 A35 A26

Effective: February 17, 2025

Monthly

\$8,973.32 Board of Supervisors A01 \$9,421.98 Chairperson, Board of Supervisors A00

By Ordinance #711 approved December 10, 2024

Effective March 17, 2025 – approved by the Board of Supervisors on March 18, 2025 Assistant County Administrative Officer reestablished classification with salary set at Band 3

Employees who are designated "classic members" of PERS pay the full employee contribution for the 2% at 55 Miscellaneous plan or the 3% at 55 Safety plan. Employees who are designated "new members" to PERS pay the full employee contribution for the 2% at 62 Miscellaneous plan or the 2.7% at 57 Safety plan.

(a) The Chief Probation Officer is covered by a modified merit system (see Personnel Rule 2034).

SECTION III

SALARIES FOR COUNTY OFFICIALS

Salary Bands

Selected management positions receive the equivalent of a flat rate monthly salary. The Board of Supervisors has adopted salary bands specifying a minimum and maximum flat dollar amount (salary) payable for each position. Adjustment to this flat dollar amount is based on action by the Board of Supervisors as certified by the County Administrative Officer on a County Personnel Action Form.

The County Administrative Officer's flat dollar salary amount shall be certified by the Chair of the Board of Supervisors on a County Personnel Action Form. Adjustments to compensation within Salary Bands is at the sole discretion of the Board of Supervisors, after advice from the County Administrative Officer and:

- 1. Is not intended to be adjusted periodically based on length of service, (which distinguishes Salary Bands from Salary Ranges which require consideration of 5% incremental pay adjustments at predetermined intervals);
- 2. Adjustments may be made in any increment either a dollar amount or percentage; provided however, such adjustment shall be rounded to the nearest whole dollar;
- 3. Salary Bands, may be adjusted by the Board of Supervisors, from time to time, but not necessarily annually, and are intended to remain fixed for one or more years, during which time salary increases or decreases to individual positions may be made based on such factors and conditions as Board of Supervisors deems appropriate including but not limited to: employee performance, changes in the cost of living and the County's ability to pay;
- 4. The inclusion of multiple positions in salary bands should not be construed to imply that all positions in each band are deemed exactly comparable for purposes of compensation; but only requires at the time of adoption or amendment of the Salary Bands, a salary amount within that band shall be designated for each position;
- 5. Five Step salary ranges for most classifications are typically adjusted annually based on negotiated agreements with employee organizations. Individual position salaries are automatically adjusted by the change in the range. Flat monthly salaries, designated by the Board of Supervisors do not automatically change at such time as the Board may elect to modify Salary Bands, except that no position in a band may be paid more or less than the minimum or maximum dollar amount that defines the Salary Band;
- 6. There is no expectation that any particular position in a Salary Band would be set at the highest dollar amount permitted by the band in the same manner that positions in salary ranges, after designated service intervals, reach the fifth or top step of a range. Salary Bands are purposely designed to provide maximum flexibility to the Board of Supervisors to increase, decrease or leave salaries unchanged; and
- 7. When a salary-banded position is vacated, the Board of Supervisors after consultation with the County Administrative Officer shall designate a salary rate or a salary range within the Salary Band that shall be used for purposes of recruitment. Notwithstanding this provision governing the recruitment process, the Board of Supervisors may appoint the candidate selected for the position at any flat dollar amount within the Salary Band.

SR3/MOU

MILEAGE

Employees required to use their personal vehicles for work-related travel will receive reimbursement according to the rate permitted by IRS regulations, as determined and administered by the Department of Finance.

EMPLOYEE CONTRIBUTION REQUIREMENTS

Part-Time (Permanent)

Part-time employees must contribute 6.2% of their compensation to Social Security and 1.45% to Medicare.

Extra Help (Temporary)

Extra Help and Reserves not already enrolled in PERS, must contribute 7.5% of their compensation to the County's Deferred Compensation Plan. Additionally, they must contribute 1.45% of their compensation to Medicare. Extra help does not contribute to Social Security.

EXTRA HELP

Employees in this category will typically be compensated at Step 1 of the hourly rate of the salary range for their employment classification. Extra help employees not assigned to a class covered by this resolution will receive compensation at the minimum wage rate. These positions are not part of the competitive service and are specifically intended to address needs on a limited or short-term basis, with a maximum of 900 hours permitted in any fiscal year. NOTE: CalPERS retirees are limited to a maximum of 960 working hours in any fiscal year.

DEPARTMENT OF FINANCE

Student Accountant (Z51)

Unless below minimum wage, the salary for positions in this classification shall not exceed a rate higher than:

- 30 ranges below the hourly rate of Step 1 for Accountant I with completion of 30-59 units.
- 20 ranges below the hourly rate of Step 1 for Accountant I with completion of 60-89 units.
- 10 ranges below the hourly rate of Step 1 for Accountant I with completion of 90 units to graduation.

GOVERNMENT AIDE & GOVERNMENT INTERN (Z55)

Unless below minimum wage, the salary for positions in these classifications shall not exceed a rate higher than 10 ranges below the hourly rate of Step 1 for the training classification. If a degree is required, the following shall apply:

- 30 ranges below the hourly rate of Step 1 with completion of 30-59 units.
- 20 ranges below the hourly rate of Step 1 with completion of 60-89 units.
- 10 ranges below the hourly rate of Step 1 with completion of 90 units to graduation.

PUBLIC GUARDIAN/VETERANS' SERVICE

Transportation Aide (Z21)

Unless below minimum wage, the salary for positions in this classification shall not exceed a rate higher than 2 ranges below the hourly rate of Step 1 for Veterans' Service Representative I.

PUBLIC WORKS

Museum Curator (U03)

Unless below minimum wage, the salary for positions in this classification shall not exceed a rate higher than 25 ranges below the hourly rate of Step 1 for Librarian I.

Student Engineer (U07)

Unless below minimum wage, the salary for positions in this classification shall not exceed a rate higher than:

- 30 ranges below the hourly rate of Step 1 for Engineer I (Civil) with completion of 30-59 units.
- 20 ranges below the hourly rate of Step 1 for Engineer I (Civil) with completion of 60-89 units.
- 10 ranges below the hourly rate of Step 1 for Engineer I (Civil) with completion of 90 units to graduation.

SPECIAL COMPENSATION SCHEDULE

Student Road Worker (U06)

Unless below minimum wage, the salary for positions in this classification shall not exceed a rate higher than:

- Minimum wage during the first year of employment.
- 15 ranges below the hourly rate of Step 1 for Road Maintenance Worker I during the second year of employment and thereafter.

SHERIFF'S OFFICE

Reserve Deputy Sheriff – Level II (M21) and Reserve Deputy Sheriff – Level I (M00)

Shall receive reimbursement for uniform expenses, calculated at 1/26 of the annual uniform allowance of a Deputy Sheriff I, for each pay period worked. Retirees are not eligible for uniform allowance. Unless below minimum wage, effective July 7, 2025, Reserve Deputy Sheriff - Level II personnel are compensated for hours worked at a rate not exceeding 10 ranges below the hourly rate of Step 1 for Deputy Sheriff I. Reserve Deputy Sheriff - Level I personnel are compensated for hours worked at a rate not exceeding the hourly rate of Step 1 for Deputy Sheriff I.

Reserve Detentions Deputy (M11)

Shall receive reimbursement for uniform expenses, calculated at 1/26 of the annual uniform allowance of a Detentions Deputy I, for each pay period worked. Retirees are not eligible for uniform allowance. Unless below minimum wage, Reserve Detentions Deputy personnel are compensated for hours worked at a rate not exceeding 7 ranges below the hourly rate of Step 1 for Detentions Deputy I.

Technical Reserve (M01)

Unless below minimum wage, effective July 7, 2025, Technical Reserve personnel are compensated for hours worked at a rate not exceeding 10 ranges below the hourly rate of Step 1 for Deputy Sheriff I.

Sheriff Chaplain (M28)

Unless below minimum wage, effective, July 7, 2025, the salary for positions in this classification shall not exceed a rate higher than 15 ranges below the hourly rate of Step 1 for Deputy Sheriff I.

UNREPRESENTED MANAGEMENT BENEFITS

<u>Management Group I</u> = Appointed and elected officials in salary bands.

<u>Management Group II</u> = Middle management (all other management not in Group I or III).

Confidential Management Group III (non-exempt) =

Executive Secretary Risk Technician I/II

Deputy Clerk to the B.O.S. I/II Secretary

Human Resources Assistant I/II Secretary to the County Counsel Human Resources Technician I/II Secretary to the District Attorney

Payroll Technician I/II Secretary to the Sheriff

VACATION AND MANAGEMENT LEAVE

1. An eligible management employee may accrue vacation at the appropriate rate applicable to the employee's length of service (2080 hours of actual service as defined in the County Personnel rules equals one year) as follows:

Service	Hours (days)	Rate
Hours	Earned (based on hrs)	(based on hours)
0 - 10,400	96 (12 days)	.046154
10,401 - 20,800	120 (15 days)	.057693
20,801 - 31,200	140 (17.5 days)	.067308
31,201 +	160 (20 days)	.076924

2. An eligible management employee may accrue vacation at the appropriate rate applicable to the employee's length of service (as set forth above) until the employee reaches one of the following accrued hours of vacation limits:

Hours (days)	Maximum Vacation
Earned (based on hrs)	Accumulation Limits
96 (12 days)	192 hours
120 (15 days)	240 hours
140 (17.5 days)	280 hours
160 (20 days)	320 hours

Once the appropriate accumulation limit has been reached, the employee shall cease to earn additional vacation until the employee's accumulated vacation balance falls below the limits listed above.

3. Effective July 1, 2014, management employees in Group I & II will be granted 64 hours of additional vacation time as management leave in the first full pay period of each fiscal year (or pro-rated upon hire date). These hours are a separate leave benefit and not counted against the maximum vacation accrual established based on length of service. Employees may, at their option, sell back up to 48 of the 64 hours of management leave each fiscal year at their hourly rate of pay. This leave will be tracked separately from the regular vacation accrual and is not intended to carry over from year to year. If this time is not used by the end of the fiscal year (see note), up to 48 hours of the remaining balance will be automatically cashed out to the employee. Any sale of management vacation hours will be deducted only from the management vacation leave balance. The remaining 16 hours of leave cannot be cashed out and must be taken as time off only.

If any hours remain at the end of the fiscal year after 48 hours are cashed out, the remaining hours will carry over to the new fiscal year (see note) <u>However, the hours granted for the new fiscal year shall be reduced by the number of hours equal to those carried over.</u> Effective July 1, 2025, the amount of management vacation time will increase from 64 hours to 80 hours of which will not carry over and may be cashed out in full.

- a) All management attorneys in the District Attorney's Office, Child Support, Administration-Minors Advocate, and County Counsel will be granted 80 hours additional management leave in the first full pay period of each fiscal year (or prorated upon hire date). Which will not carry over and may be cashed out in full. Effective July 1, 2025, the amount of management vacation time will increase from 80 to 100 hours each fiscal year (or pro-rated upon hire date).
- b) Management employees in Group III will be granted 40 hours of vacation time in the first full pay period of each fiscal year (or pro-rated upon hire date). All other terms described above apply. Effective July 1, 2025, the amount of management vacation time will increase from 40 to 50 hours each fiscal year (or pro-rated upon hire date).
- 4. <u>All Management employees may, at their option, sell back an additional 8 hours of accrued regular</u> vacation each fiscal year, (see note below) at their hourly rate of pay, to be contributed directly to the employee's deferred compensation account.
- 5. Upon the recommendation of the Human Resources Director, the County Administrative Officer may authorize a vacation accrual rate for management positions hired from outside the county at an amount equivalent to what their accrual would be if their service time with other public agencies was earned in Kings County. Additionally, when this advanced accrual rate is authorized at the time of hire, the prior public service time will be used for calculating future adjustments to the accrual rate as if the time was earned with Kings County.

<u>NOTE</u>: 1) For the purpose of payroll processing of vacation hour cash outs described above, the end of the fiscal year is defined as the last day of pay period 13 in any year. 2) Management vacation leave is not available for use during pay period 14. 3) Provisions regarding vacation do not apply to elected officials.

NOTE: Provisions regarding vacation and management leave do not apply to elected officials.

COMPENSATORY TIME OFF

This article applies to Management Group III employees only due to their non-exempt status.

Compensatory time is any time which may be taken off by an employee in lieu of cash payment for hours worked beyond the normal work period. Compensatory time is accrued at the same rate as overtime. All time to be taken as compensatory time is to be formally recorded. Employees with thirty hours or less accrued compensatory time may elect to use vacation or compensatory time. Employees with more than thirty accrued hours compensatory time shall use compensatory time before using vacation time. The accrual cap for compensatory time off is 60 hours.

HEALTH/DENTAL/OPTICAL PLAN PREMIUM CONTRIBUTION

Employees who elect to use a Health Plan offered by the County must continue to participate in the dental and optical plans and must remain in that plan until the open enrollment period of the plan. Employees electing to pretax their insurance will not be allowed to drop insurance coverage except at open enrollment unless the employee has a qualifying status change.

Effective May 26, 2025 (pay period 12-2025), the County contribution to the health/dental/optical insurance premium (per month based on 24 pay periods) will be as follows:

PPO Plan

Health/Dental/Vision

<u>Plan Level</u>	County Share
Single	\$716.91
Two-Party	\$1,305.28
Family	\$1,964.02

The County shall pay 100% of the health insurance premium (including the medical, dental and vision plans) for the health plan offered by the County for each management employee and their eligible family members, based on their enrollment in such health plan. Employees promoting into or demoting out of management classifications after open enrollment will be treated as a "status" change and may enter or leave the plan or modify the number of dependents covered.

DEFERRED COMPENSATION

Effective January 1, 2025, for every three dollars contributed to the County contracted deferred compensation programs by management employees, the County shall contribute one dollar to the employee's account, up to a maximum of \$3,500 per calendar year.

RETIREMENT/PERS SERVICE CREDIT

The County contracts with the Public Employee Retirement System (PERS) for this benefit and pays the employee contribution for members of the Board of Supervisors only. All management employees pay the total Miscellaneous or Safety PERS employee contribution

depending on their classification and status within PERS (Classic or "new member" – see below).

Miscellaneous Non-Safety Management

- 1. New Members –Employees hired on or after January 1, 2013, and designated as "new members" to CalPERS are eligible for the PERS 2% at 62 Miscellaneous Plan pursuant to AB 340/SB197 (Pension Reform Act 2013). These employees pay the entire employee contribution rate reviewed and set annually by CalPERS. Such payment shall vest to the employee.
- 2. Classic Members Employees hired prior to January 1, 2013, or those hired on or after that date that are not designated as "new members" to CalPERS by the Pension Reform Act of 2013, are eligible for the 2% at 55 Miscellaneous Plan. These employees pay the entire employee contribution of 7.0% of salary. Such payment shall vest to the employee.
 - a) The 2% at 55 Plan has been modified to also include the following optional benefits: One-Year Final Compensation and Military Service Credit.
 - b) The Miscellaneous Plan has also been modified for employees to have, at their option, the ability to apply to PERS for retirement service credit for their unused sick leave balance. However, the County limits the use of this provision to employees who have not cashed out their sick leave or opted for the Retiree Health benefit.

Safety Management

- New Members Employees hired on or after January 1, 2013, and designated as "new members" to CalPERS are eligible for the PERS 2.7% at 57 Safety Plan pursuant to AB 340/SB197 (Pension Reform Act of 2013). These employees pay the entire employee contribution rate reviewed and set annually by CalPERS. Such payment shall vest to the employee.
- 2. Classic Members Employees hired prior to January 1, 2013, or those hired on or after that date that are not designated as "new members" to CalPERS by the Pension Reform Act of 2013, are eligible for the 3% at 55 Safety Plan, which became effective 4/1/02. These employees pay the entire 9% of salary PERS employee contribution. Such payment shall vest to the employee.
 - a) The 3% at 55 Plan has been modified to also include the following optional benefits: One-Year Final Compensation and Military Service Credit.

Elected Officials

Pursuant to State Law local elected officials have the option of declining participation in the Public Employees Retirement System. An amount equal to the Employee's share of retirement may, if an elected officer declines participation in PERS, be applied toward the County Sponsored deferred compensation plan in lieu of the PERS contribution.

UNREPRESENTED MANAGEMENT BENEFITS

The County match amount for this benefit shall not exceed the match provided to management employees described above.

TERM LIFE/ACCIDENT INSURANCE

Term life/accident insurance (with an option for portability when leaving County service in good standing) is provided for management employees as follows:

Management Group I \$ 50,000 Management Group II/III \$ 40,000

LONG TERM DISABILITY INSURANCE

Long Term Disability (LTD) Insurance is provided to all management employees.

SICK LEAVE ACCRUAL

- a. All regular full-time and regular part-time management employees hired prior to January 1, 1999, shall be entitled to point zero-four-six-one-five-four (.046154) hours of sick leave with pay for each out of actual hours of regular employment.
- b. All regular full-time and regular part-time management employees hired on or after January 1, 1999 will accrue sick leave as follows:

Services hours	Hours Earned	Sick leave earned at the rate of
		(based on hours worked)
0 - 10,400	80 (10 days)	.038462
10,401 - 20,800	88 (11 days)	.042308
20,801 +	96 (12 days)	.046154

NOTE: Provisions regarding sick leave do not apply to elected officials.

UNUSED SICK LEAVE PAYOFF/POST RETIREMENT HEALTH BENEFIT

This Article does not apply to employees who elect the PERS service credit.

a) Management employees hired January 1, 1999 or later, who have five (5) years of Kings County continuous service immediately prior to retirement, are age 50 or older, and retire in good standing at the time of their separation from Kings County employment will receive a percentage of the dollar value of accrued sick leave (at time of retirement) put into an "account" to be used toward Kings County health insurance premiums, at a rate not to exceed the family option per month until the employee, and/or spouse if covered, is eligible for Medicare or the money runs out, whichever occurs first. When an employee and/or spouse, if covered, reach Medicare eligibility the remaining money may be used for Medicare supplemental premiums until the money runs out. The retiree health benefit percentage shall be as follows:

Percent of compensation (based on hours)
Retiree Health Benefit

10,401 - 41,600	40%
41,601 and over	50%

To qualify for the retiree health benefit the employee and any eligible dependents to be covered must be enrolled in the County's existing health benefit plan at the time of the employee's retirement from County service. Retiree health benefit payments may be used toward coverage for the employee's dependents only as long as the dependent(s) is eligible for coverage under the plan, has not reached Medicare eligibility and, in the case of children, only to the age permitted under the plan contract as dependent children. If the employee dies after retirement (or while still employed in good standing) prior to Medicare eligibility and there is money remaining in the account, the employee's covered dependent(s) may continue to use the account toward Kings County health insurance premiums or Medicare supplemental insurance premiums, if eligible as stated above. Any unused balance in account remains the property of the County.

b) <u>Management employees hired prior to January 1, 1999</u>, who separate in good standing shall be allowed a one time irrevocable election to decide whether to receive the retiree health benefit option or cash as follows:

	Percent of		Percent of
	Compensation		compensation
Service	(based on hrs.)		(based on hrs.)
Hours	Cash	OR	Retiree Health Benefit
10,401 - 41,600	25%		40%
41,601 and over	30%		50%

Taxes will be paid by the employee on the full cash distribution, or the portion of the deposit into the account that could have been taken in cash. Additionally, the cash benefit is taxable in the year the cash is received. Any unused balance in the account remains the property of the County.

1) Retiree health benefit option:

To qualify for the retiree health benefit (non-cash) benefit the employees must have five (5) years of Kings County continuous service immediately prior to retirement, are age 50 or older, and retire in good standing at the time of separation from Kings County employment. A percentage of the dollar value of accrued sick leave (at time of retirement) will be put into an "account" to be used toward Kings County health insurance premiums. The employee and any eligible dependents to be covered must be enrolled in the County's existing health benefit plan at the time of the employee's retirement in good standing from County service. Employees electing to utilize the retiree health benefit option must submit their election in writing to the Department of Finance not later than 14 days after the effective date of retirement. If the employee elects the retiree health benefit option, the County will pay up to the family option per month toward the employee's health insurance premium until the employee, and/or spouse if covered, is eligible for Medicare or the money runs out, whichever occurs first. Retiree health benefit payments may be used toward coverage for

the employee's dependents only as long as the dependent(s) is eligible for coverage under the plan; has not reached Medicare eligibility and, in the case of children, only to the age permitted under the plan contract as dependent children. When an employee and/or spouse, if covered, reach Medicare eligibility the remaining money may be used for Medicare supplemental premiums until the money runs out. If the retiree dies prior to Medicare eligibility and there is money remaining in the account, the employee's dependent(s) may continue to use the account, if eligible as stated above. In the event of death of an eligible employee (while still employed in good standing), the qualifying eligible dependent(s) shall make a determination of either cash or the retiree health benefit option within 30 days of the death of the employee.

2) Cash benefit option:

Employees who fail to elect the retiree health benefit will be cashed out, if eligible. If the employee elects the cash option, the employee will receive the benefit if the employee separates in good standing as a result of resignation, layoff, retirement or death.

ELECTED OFFICIALS - POST RETIREMENT HEALTH INSURANCE

Kings County elected Officials may be eligible for a Post Retirement Health Benefit upon retiring from the County. All the criteria shall apply as for management post retirement health insurance generally except that: An elected official is eligible for the post retirement health insurance benefit described below if that elected official: 1) serves at least five (5) consecutive years in office without break in service between the five years served and the date of departure from elected office; and 2) either simultaneously retires from PERS at the end of such service (or is at that time already retired from PERS). The benefit is calculated by multiplying the hourly rate at the time of eligibility, by the number of consecutive years in office, and then multiplying the result by one half of the annual sick leave benefit provided to management employees at the time of eligibility. The official may defer use of this benefit if otherwise covered on the County health plan at the time of eligibility so long as there is no break in coverage during the deferral period. Pursuant to existing practice the balance does not accrue interest. (NOTE: The change in the formula will go into effect at the start of each sitting elected's next consecutive term in office and at the time of filing candidacy papers for any new candidate who is subsequently elected.) Any previously earned benefit will be calculated and recorded by the Finance Department.

If a balance remains at the time the elected, and/or his/her spouse or eligible dependent no longer participates in the County health insurance, this amount can be applied toward a Medicare Part B plan or Medicare supplement, or PERS Long Term Care plan. Participation in the County health insurance program is not required for the elected, and/or spouse or eligible dependent to direct all or part of the funds in this account to a Medicare Part B or PERS Long Term Care plan premium. In all other instances, any balance on account remains property of County.

P.O.S.T. EDUCATION INCENTIVE PAY

- 1. Employees in the classifications of Assistant Chief DA Investigator, Undersheriff, Assistant Sheriff, Sheriff's Commander, and Chief District Attorney Investigator who possess a valid P.O.S.T. Management Certificate shall be entitled to receive compensation in the amount of \$550.00 per month (\$253.85 per pay period). Employees must submit certification to the appropriate department head prior to payment authorization. Employees receiving compensation for P.O.S.T. Management Certification shall not be entitled to compensation for other P.O.S.T. certification.
- 2. Employees in the above indicated classifications possessing valid, current P.O.S.T. Supervisory Certification shall be entitled to receive compensation in the amount of \$500.00 per month (\$230.76 per pay period). Eligible employees must submit appropriate certification to the department prior to payment authorization. Employees receiving compensation for P.O.S.T. Supervisory Certification shall not be entitled to compensation for other P.O.S.T. certification.
- 3. Employees in the above indicated classifications possessing valid, current P.O.S.T. Advanced Certification shall be entitled to receive compensation in the amount of \$450.00 per month (\$207.69 per pay period). Eligible employees must submit appropriate certification to the department head prior to payment authorization. Employees receiving compensation for P.O.S.T. Advanced Certification shall not be entitled to compensation for other P.O.S.T. certification.
- 4. Employees in the above indicated classifications possessing valid, current P.O.S.T. Intermediate Certification shall be entitled to receive compensation in the amount of \$400.00 per month (\$184.61 per pay period). Eligible employees must submit appropriate certification to the department head prior to payment authorization. Employees receiving compensation for P.O.S.T. Intermediate Certification shall not be entitled to compensation for other P.O.S.T. certification.

FIRE CERTIFICATION PAY

- 1. Employees in the classification of Assistant Fire Chief and Battalion Chief who obtain and maintain EMT-D qualification shall be entitled to additional compensation in the amount of \$75.00 per month (\$34.61 per pay period).
- 2. Employees in the above indicated classifications who obtain and maintain a Fire Officer certification shall be entitled to additional compensation in the amount of \$175.00 per month (\$80.76 per pay period). All Battalion Chiefs who obtain and maintain a Chief Officer certification shall be entitled to additional compensation in the amount of \$237.00 monthly (\$109.38 per pay period). Appropriate certification documentation must be received by the department prior to payment authorization. Employees receiving compensation for Chief Officer shall not be entitled to receive additional compensation for Fire Officer certification.

FIRE STIPEND

The intent for the Fire Stipend is to provide a method of compensation when the Assistant Fire Chief or Battalion Chiefs are assigned to work extra shifts outside their regular assigned working hours. Based on an estimate of anticipated vacation, training time and possible sick leave use for the three field Battalion Chiefs, it is necessary to provide additional field coverage for up to 52 shifts or partial shifts annually. The Fire Stipend applies to the Assistant Fire Chief and all assigned Battalion Chiefs in the Operations, Fire Prevention and Training Divisions.

The stipend rates are as follows:

Stipend	<u>Hours</u>
\$500 \$1.000	8 to less than 16 hours 16 to less than 24 hours
\$1,500	24 hours or more

- * Coverage of less than eight (8) hours will not be compensated. This time is compensated through Management Leave.
- * Employees shall not receive stipend pay for any hours they receive strike team pay.

While the Administrative Battalion Chief assigned to Fire Prevention/Training activity would also be eligible for the stipend if they cover for an Operation Battalion, this stipend will not apply for coverage of the Fire Prevention/ Training Battalion Chief's absences.

FIRE MANAGEMENT STRIKE TEAM PAY

Fire management positions (Battalion Chief and Assistant Fire Chief) will be compensated while on, or as relief to, strike team at the current rate required by the California Fire Assistance Agreement with Cal OES.

*Employees shall not receive stipend pay for any hours they receive strike team pay.

BATTALION CHIEF HOLIDAY-IN-LIEU

All Shift (56-Hour work week) Fire Battalion Chiefs shall receive Holiday-in-Lieu. Holiday-in-Lieu time will be recorded and paid as 24 hours of "Holiday-in-Lieu" for each whole holiday and 12 hours for each half-day holiday. If a Shift Battalion Chief is required to work on a holiday, no other day off will be traded or exchanged for the schedule day.

All Administrative (40-hour work week - Fire Prevention/ Training) Battalion Chiefs shall receive eight (8) hours Holiday Pay and will receive an additional 16 hours of Holiday-in-Lieu for each whole holiday. On ½ day holidays, Administrative Battalion Chiefs will receive four (4) hours of Holiday Pay with no additional compensation of Holiday-in-lieu.

LONGEVITY PAY

1. Effective December 9, 2024, management employees, except for the safety management positions identified below, who have ten (10) years of continuous full-

time service (20,800 service hours) with the County in an allocated position shall, in addition to their regular salary, receive longevity pay in the amount of three percent (3%). Employees who have completed twenty (20) years of continuous full-time service (41,600 service hours) with the County in an allocated position shall, in addition to their regular salary, receive longevity pay in the amount of five percent (5%). Longevity pay is not compounded. Longevity Pay for those employees who are eligible, shall become effective no later than the full pay period following the completion of the required period of continuous service. It is the County's intent that longevity pay will be determined by CalPERS to be pensionable consistent with existing laws and regulations.

2. Effective December 9, 2024, employees in the safety management classifications identified in the table below, who have completed five (5) years of continuous, full-time service (10,400 service hours) with the County in an allocated position shall, in addition to their regular salary, receive longevity pay in the amount of two percent (2%). Employees who have completed ten (10) years of continuous full-time service (20,800 service hours) with the County in an allocated position shall, in addition to their regular salary, receive longevity pay in the amount of five percent (5%). Longevity Pay is not compounded. Longevity pay for those employees who are eligible, shall become effective no later than the full pay period following the completion of the required period of continuous service. Longevity pay will be determined by CalPERS to be pensionable consistent with the existing laws and regulations.

Probation Officers Management	
Chief Probation Officer	
Deputy Chief Probation Officer	
Probation Division Manager	

3. Effective December 9, 2024 (Pay Period 26-2024), employees in the safety management classifications identified in the table below, who have completed five (5) years of continuous full-time service (10,400 service hours) with the County in an allocated position shall, in addition to their regular salary, receive longevity pay in the amount of two percent (2%). Employees in the following safety management classifications, who have completed ten (10) years of continuous full-time services (20,800 service hours) with the County in an allocated position shall, in addition to their regular salary, receive longevity pay in the amount of five percent (5%). Employees who have completed fifteen (15) years of continuous, full-time service (31,200 service hours) with the County in an allocated position shall, in addition to their regular salary, receive longevity pay in the amount of seven and a half percent (7.5%). Longevity pay is not compounded. Longevity pay for those employees who are eligible, shall become effective no later than the full pay period following the completion of the required period of continuous service. It is the County's intent that longevity pay will be determined by CalPERS to be pensionable consistent with existing laws and regulations.

Deputy Sheriff Management	Detentions Management
Assistant Chief District Attorney Investigator	Assistant Sheriff-STC

Assistant Sheriff	Detentions Lieutenant
Chief District Attorney Investigator	
Sheriff's Commander	Fire Management
Sheriff	Assistant Fire Chief
Undersheriff	Battalion Chief
	Fire Chief

<u>UNIFORM ALLOWANCE</u>

The management employee classifications listed below shall be entitled to receive a uniform allowance which will automatically be adjusted to the same amount as the bargaining unit employees they supervise, currently:

Assistant Chief DA Investigator	\$800
Assistant Fire Chief	\$1,200
Assistant Sheriff	\$950
Assistant Sheriff-STC	\$900
Battalion Chief	\$1,200
Chief District Attorney Investigator	\$800
Chief Probation Officer	\$650
Deputy Chief Probation Officer	\$650
Detentions Lieutenant	\$900
*Emergency Services Coordinator	\$275
*Emergency Services Manager	\$275
Fire Chief	\$1,200
Food Services Manager	\$275
Juvenile Services Manager	\$450
Probation Division Manager	\$650
Sheriff	\$950
Sheriff's Commander	\$950
Sheriff's Records Manager	\$275
Undersheriff	\$950

^{*} Effective December 9, 2024.

- 1. All employees required to wear a uniform by the County shall receive a uniform allowance paid directly to the employee. Only the initial uniform allowance paid to employees shall be paid in a lump sum. New employees shall receive their initial allowance in the first full pay period following the date of employment. Employees who voluntarily terminate within the first 90 days after receiving their initial allowance shall be required to reimburse the County for one-half of their initial allowance. Those who voluntarily terminate during the second 90 days after receiving their initial allowance will be required to reimburse the County for one-quarter of the allowance.
- 2. Eligible employees who are on the regular County payroll in paid status shall receive the annual uniform allowance as follows: Employees will be paid 1/26 of the annual allowance each pay period in paid status. The uniform allowance shall not be paid for any pay period the employee is in unpaid status the entire pay period.

3. For employees hired on or after January 1, 2013, and designated as "new members" to CalPERS, any uniform allowance will not be subject to PERS pursuant to AB 340/SB197 (Pension Reform Act of 2013).

BILINGUAL PAY

Upon the written request of a department head explaining the business necessity, the County Administrative Officer may approve bilingual pay for a management employee in the amount of \$25 per pay period when use of their bilingual skills is determined to be an essential service need. Bilingual pay shall be terminated, and a new request for bilingual compensation may be submitted, if the employee is demoted, promoted, transferred or reassigned. The decision of the County Administrative Officer regarding the granting and termination of bilingual payment shall be final and shall not be subject to appeal or grievance procedures. Employees receiving bilingual pay may be required to use their bilingual ability to assist other departments within the County. When a part-time employee is assigned bilingual duties, the bilingual pay shall be prorated. Employees who translate for more than one language are not eligible to receive additional bilingual compensation for the additional language(s).

LEGAL SPECIALIST CERTIFICATION PAY

Employees who are hired at or promoted to the Management attorney classifications at or above the III level are eligible for additional compensation as outlined below once they have acquired and maintain a State Bar of California-approved Legal Specialist Certification as a Family Law Specialist or Child Welfare Law Specialist. Certification in any other legal specialties will not be considered qualifying for Legal Specialist Certification pay.

\$150 per month	\$200 per month
Deputy County Counsel III	Chief Child Advocacy Attorney
	Chief Child Support Attorney
	Deputy County Counsel IV

Eligible employees must present proof of certification to qualify for Legal Specialist Certification Pay. Proof of re-certification must be presented at the end of each subsequent certification period to continue to qualify for certification pay.

PUBLIC HEALTH DEPARTMENT PROFESSIONAL LICENSES

The County will reimburse, or pay, required professional license fees for unrepresented management employees in the classifications listed below (which will be monitored by the Public Health Department):

Environmental Health Division Manager Family Nurse Practitioner Nursing Division Manager Nutrition Services Program Manager Physician's Assistant Supervising Environmental Health Specialist Supervising Public Health Nurse

RECRUITMENT AND RETENTION BONUS

The following classifications only shall receive up to an amount of \$10,000 as a retention bonus. The retention bonus shall be effective for current employees in these classifications beginning September 4, 2023 (PP19-2023) or upon approval of the Board of Supervisors, whichever is later. The retention bonus shall be paid to employees on a pay-period basis in an amount of \$192.31, for each actively employed pay-period (active status) between September 4, 2023 (PP19-2023) through August 31, 2025 (PP18-2025).

Assist. Chief District Attorney Investigator	Deputy County Counsel I
Assistant County Counsel	Deputy County Counsel II
Assistant District Attorney	Deputy County Counsel III
Assistant Fire Chief	Deputy County Counsel IV
Assistant Sheriff	Deputy District Attorney Supervisor
Assistant Sheriff-STC	Detentions Lieutenant
Battalion Chief	District Attorney
Chief Child Advocacy Attorney	Fire Chief
Chief Child Support Attorney	Juvenile Services Manager
Chief District Attorney Investigator	Probation Division Manager
Chief Probation Officer	Sheriff
County Counsel	Sheriff's Commander
Deputy Chief Probation Officer	Undersheriff

HOLIDAY CLOSURE

Subject to annual County Administrative Officer (CAO) approval, the County may offer paid closure days during the month of December and January. Such closure days must be designated and approved by the CAO. If any management employee in Groups I and II are required to work during this period when their office is closed, or is not permitted to have the time off in their department due to a 24-hour shift requirements, shall bank the hours as Holiday Credit Work Bank, up to the actual amount of time worked, not to exceed the allotted amount of holiday closure time. Confidential management employees in Group III shall either be paid straight-time holiday in lieu pay or bank the hours as Holiday Credit Work Bank, up to the actual amount of time worked, not to exceed the allotted amount of holiday closure time. Holiday-in-lieu shall only be used by a confidential management employee when an employee is working regular hours.

Part-time management employees will participate in the closure based on their assigned hours and earnings on a pro-rated basis. Management employees on paid leave of absence will participate in the closure; however, employees on unpaid leaves of absence will be excluded. Employees must be in fully paid status prior to the closure and after the closure to receive the closure holidays.

NOTE: Holiday Credit Work Bank cannot exceed 50 hours of accrued time. For Management Group I and II there is no cash value for this time.

BASE AND TIME OF PAY

Compensation shall be paid on a bi-weekly basis within the hourly or monthly rate established for the class of position to which an individual has been appointed except where otherwise indicated in this resolution. For accounting purposes within the Auditor's Office and in the Human Resources Department, the employment records of all employees, whether paid at a monthly or hourly rate, will be maintained on an hourly basis. The first pay period shall be from Monday (starting at 0001 Monday morning) to midnight (2400) of the second Sunday thereafter. Compensation shall be payable on or before the fifth working day after the conclusion of each pay period for service rendered during the preceding pay period.

Any officer required to file an affidavit as a condition of receiving his/her salary for any one month shall not receive the final installment of his/her salary for any month until he/she has submitted to the Auditor/Controller such affidavit or affidavits as are required by law.

EFFECTIVE DATE

This Resolution shall take effect June 9, 2025, except as to those items previously approved by action of the Kings County Board of Supervisors, and as to those items, the effective day shall be the date of the Board action.

The foregoing resolution was adopted upon motion by Supervisor Neves, seconded by Supervisor Valle, at a regular meeting held June 10, 2025 by the following vote:

AYES: Supervisors: Neves, Valle, Robinson, Thayer, Verboon

NOES: None ABSENT: None

William Verboon, Chairman of the Board of Supervisors County of Kings, State of California

WITNESS my hand and seal of said Board of Supervisors this 10th day of June, 2025.

Clerk of said Board of Supervisors

SR6



Date of Meeting: August 5, 2025

Study Session

Final Grantee Achievement Report FY 2024-2025

Date of Meeting: Agenda Item Type: August 6, 2024 Informational Item

AGENDA ITEM: Fiscal Year 2024-2025 Final Grantee Achievement Report for First 5

Funded Projects

A. Background/History:

The Commission has transitioned from a formative evaluation framework into a summative evaluation framework; therefore the reporting of program status reports and evaluation results are now two separate items for the Commission to consider. Staff is providing the Commission, on a quarterly basis, a progress report regarding the status of programs attaining contracted goals and deliverables.

B. Summary of Request, Description of Project and/or Primary Goals of Agenda Item:

Staff is requesting the Commission review and discuss the program status report representing activities and number of clients served through FY 2024-2025.

C. Timeframe:

Reports will be provided to the Commission on a quarterly basis, on the following schedule:

1st Quarter Report: December meeting

2nd Quarter Report: February meeting

• 3rd Quarter Report: June meeting

Year End Report: August meeting

D. Costs:

No costs associated with this item.

E. Staff Recommendation:

Staff recommends the commission review and discuss the program reports as provided.

F. Attachments:

FY 2024-2025 Final Project Achievement Report

FY 2024-2025 Quarter 4 Progress Update

WFIRST5		Unduplicated	Participant Co	unt (Cumula	Objectives to be	Objective	es Met (Q1)	Objectives Not Met (Q1)			
KINGS COUNTY	Children 0-2	Children 0-2 Children 3-5 Children Unk Children Parents/Caregivers Pr		Providers	Achieved	Count	Percent ²	Count	Percent		
Family Resource Center Initiative											
Corcoran FRC	82	67	0	149	138		21	15	71%	6	29%
Hanford FRC	193	161	0	354	290		37	37	100%	0	0%
Lemoore FRC ¹							36	34	94%	2	6%
Kettleman City FRC	25	42	0	67	57		16	13	81%	3	19%
School Readiness Initiative											
UCP Parent & Me	174	49	0	223	186		15	10	67%	5	33%
UCP Special Needs Program	91	5	0	96	73	56	5	3	60%	2	40%
E3 Initiative											
KCOE CARES						297	9	9	100%	0	0%
New Project Initiative											
United Way 211	148	100	0	248	171		4	4	100%	0	0%

¹ Unduplicated participant counts for Lemoore are included in Hanford reporting.

² The Objectives Met percentage is based on an adjusted annual target based on the project timeline (e.g., an annual target of 100 would have an adjusted target of 50 by the end of Q2).

Lemoore Family Connections - Family Resource Center

Provide Barly & Me Early Care & Education Activities to Infrants and their parents. O-12 m Child Provide Barly & Me Early Care & Education Activities to Infrants and their parents. O-12 m Child Provide Barly & Me Early Care & Education Activities to Infrants and their parents. O-12 m Child Provide Barly & Me Early Care & Education Activities to Infrants and their parents. O-12 m Adult I S 8 2 0 3 8 10 11 18 15 12 13% 14% 133% 107% Provide Barly & Me Early Care & Education Activities to Indefines to Infrants and Their parents. O-12 m Adult I S 8 2 0 3 8 10 11 18 15 12 13% 14% 133% 107% Provide Activities to Indefines to Indefines to Infrants and Their parents. O-12 m Adult I S 8 2 0 3 8 10 11 18 15 12 13% 14% 133% 107% Provide Activities to Indefines to Indefines to Indefines to Indefines to Indefines to Indefines to Indefine the Indefine Indefines to Indefine Indefines to Indefines to Indefines to Indefines to Indefines to Indefines to Indefine Indefines to Indefine Indefines		rogram Specific Strategies Quarterly Un				Quarterly Unduplicated Count				YTD Unduplicated Count (Cumulative)				YTD % On Track to Meet Objectives			
Provide Barby & Me Early Care & Education Activities to Indiana and their parents. 1-2 yrs Provide Sirg & Plays Early Care & Education Activities to Indiana and their parents. 1-2 yrs Provide Sirg & Plays Early Care & Education Activities to Indiana and their parents. 1-2 yrs Provide Sirg & Plays Early Care & Education Activities to Indiana and their parents. 1-2 yrs Provide Sirg & Plays Early Care & Education Activities to Indiana. 1-2 yrs Provide Art Explosion Early Care and Education Activities to Indiana. 1-2 yrs Provide Art Explosion Early Care and Education Activities to Indiana. 1-2 yrs Provide Art Explosion Early Care and Education Activities to Indiana. 1-2 yrs Provide Art Explosion Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide Early Care and Education Activities to Indiana. 1-2 yrs Provide I					Annual Goal	Q1	Q2	Q3	Q4	YTD (Q1)	YTD (Q2)	YTD (Q3)	YTD (Q4)	Q1	Q2	Q3	Q4
Provide Sing's R Play Early Care & Education Activities to Londlersan at their parents. 1-2 yrs April 72 87 87 87 87 87 87 87 87 87		Provide Baby & Me Early Care & Education Activities to infants and their parents.	0-12 m	Child	15	7	4	2	3	7	11	13	16	187%	147%	116%	107%
Provide Fung & Flays Education Activities to Indefersand their parents. 1-2 yrs Adult 72 39 11 8 15 39 50 58 73 217% 139% 107% 179% 119% 179% 119% 119% 119% 119% 11		Provide Baby & Me Early Care & Education Activities to infants and their parents.	0-12 m	Adult	15	8	2	2	3	8	10	12	15	213%	133%	107%	100%
Forvide Art Explasion Early Care and Education Activities to toddlers. 1-2 yrs Child 72 32 18 9 13 32 51 63 77 178% 1179% 1099%		Provide Sing & Play Early Care & Education Activities to toddlers and their parents.	1-2 yrs	Child	72	39	11	10	16	39	50	60	76	217%	139%	111%	106%
Provide Mr. Spranse Early Care and Education Activities to loddlens. 1-2 yrs Adult 72 32 18 9 13 32 50 59 72 178% 139% 109%		Provide Sing & Play Early Care & Education Activities to toddlersand their parents.	1-2 yrs	Adult	72	39	11	8	15	39	50	58	73	217%	139%	107%	101%
Provide My S Senses Early Care and Education Activities to locidiers. 1-2 yrs Adult 72 41 13 10 12 41 54 64 76 228% 150% 119%	Ö	Provide Art Explosion Early Care and Education Activities to toddlers.	1-2 yrs	Child	72	32	19	12	14	32	51	63	77	178%	142%	117%	107%
Provide Flys Somese Early Care and Education Activities to toddlers. 1-2 yrs Adult 72 40 14 8 11 40 54 62 73 222% 150% 115% 115% 115% 115% 115% 115% 115	äŧ	Provide Art Explosion Early Care and Education Activities to toddlers.	1-2 yrs	Adult	72	32	18	9	13	32	50	59	72	178%	139%	109%	100%
Provide Explore & Learn Early Care and Education Activities to toddlers. 1-2 yrs	ğ	Provide My 5 Senses Early Care and Education Activities to toddlers.	1-2 yrs	Child	72	41	13	10	12	41	54	64	76	228%	150%	119%	106%
Provide Explore & Learn Early, Care and Education Activities to toddlers. 1-2 yrs Provide Smart AT Education to preschool age children. 3-5 years Child 46 33 12 14 53 17 70 yrovide Compu Kids Early Care and Education activities to preschool age children. 3-5 years Child 40 30 8 11 70 8 15 8 16 8 12 38 54 62 74 2118 66 28 67 84 28 59 64 28 28 67 89 61 18 36 61 360% 215% 18 90% 173% 18 90% 173% 173% 173% 173% 173% 173% 173% 173	ш	Provide My 5 Senses Early Care and Education Activities to toddlers.	1-2 yrs	Adult	72	40	14	8	11	40	54	62	73	222%	150%	115%	101%
Provide Comput Kiss Early Care and Education Larivilles to preschool age children. 3-5 years Child 46 33 12 14 5 33 45 59 64 287% 198% 171% Provide Comput Kiss Early Care and Education activities to preschool age children. 3-5 years Child 40 36 7 11 7 36 43 54 61 360% 175% 180% Provide Playing to Learn activities to preschool age children. 3-5 years Child 40 30 8 14 5 30 38 52 57 300% 199% Provide Playing to Learn activities to preschool age children. 3-5 years Child 40 30 8 14 5 30 38 52 57 300% 199% Provide Playing to Learn activities to preschool age children. 3-5 years Child 40 35 10 15 8 35 45 60 68 350% 225% 185% 167% Provide P	яц	Provide Explore & Learn Early Care and Education Activities to toddlers.	1-2 yrs	Child	72	38	17	9	13	38	55	64	77	211%	153%	119%	107%
Provide For Ompu Kids Early Care and Education activities to preschool age children. 3-5 years Child 40 36 7 111 7 36 43 54 51 380% 215% 180% Provide Playing to Learn activities to preschool age children. 3-5 years Adult 40 29 8 13 4 29 37 50 54 200% 185% 167% 225% 200% 195% 167% 180% 195% 173% 195% 195% 195% 195% 195% 195% 195% 195	ē	Provide Explore & Learn Early Care and Education Activities to toddlers.	1-2 yrs	Adult	72	38	16	8	12	38	54	62	74	211%	150%	115%	103%
Provide Playing to Learn activities to preschool age children. 3-5 years Adult 40 29 8 13 4 29 37 50 54 290% 165% 167%	ca	Provide Smart Art Education to preschool age children.	3-5 years	Child	46	33	12	14	5	33	45	59	64	287%	196%	171%	139%
Provide Learn with Me Early Care and Education Services to preschool age children. 3-5 years Adult 40 35 10 15 8 35 45 60 68 835 64 56 66 88 350% 225% 200% 195% 177% 177% 177% 177% 186 187% 187% 187% 187% 187% 187% 187% 187%	텵	Provide Compu Kids Early Care and Education activities to preschool age children.	3-5 years	Child	40	36	7	11	7	36	43	54	61	360%	215%	180%	153%
Provide Learn with Me Early Care and Education Services to preschool age children. 3-5 years Child 40 35 10 15 8 35 45 60 68 350% 225% 200% Provide Tool Time to parents of/and children (3-5 years). 3-5 years Child 40 29 10 14 4 29 39 53 57 290% 177% Provide Tool Time to parents of/and children (3-5 years). 3-5 years Adult 40 28 10 14 4 28 38 52 56 280% 190% 173% Provide Hands on Science to families of/and children O-5. 0-5 years Child 50 36 5 10 8 36 41 51 9 280% 160% 147% 150% Provide Family Literacy Events to families of/and children O-5. 0-5 years Child 40 23 11 12 6 6 23 37 42 54 63 280% 190% 173% Provide Hands on Science to families of/and children O-5. 0-5 years Child 50 36 5 10 8 36 41 51 59 280% 160% 147% 190% 173% Provide Family Literacy Events to families of/and children O-5. 0-5 years Child 40 23 11 12 6 6 23 34 46 52 230% 170% 153% 260% 270% 270% 270% 270% 270% 270% 270% 27	ਠੋ	Provide Playing to Learn activities to preschool age children.	3-5 years	Child	40	30	8	14	5	30	38	52	57	300%	190%	173%	143%
Provide Tool Time to parents of/and children (3-5 years). 3-5 years Adult 40 29 10 14 4 4 28 39 53 57 290% 195% 177% Provide Tool Time to parents of/and children (3-5 years). 3-5 years Adult 40 28 10 14 4 4 28 38 52 56 280% 190% 173% Provide Hands on Science to families of/and children 0-5. 4-5 years Adult 50 37 5 12 9 37 42 54 63 290% 186% 144% Provide Car Seat Safety Training and Installation to Parents of Children 0-5. 4-6 years Adult 50 36 5 10 8 36 41 51 59 288% 186% 144% 155 59 288% 144% 155 59 288% 144% 155 59 288% 144% 155 59 288% 144% 155 59 288% 144% 155 59 288% 144% 155 59 288% 145% 145% 155% 155% 155% 155% 155% 155	奆	Provide Playing to Learn activities to preschool age children.	3-5 years	Adult	40	29	8	13	4	29	37	50	54	290%	185%	167%	135%
Provide Tool Time to parents of/and children (3-5 years). 3-5 years Adult 40 29 10 14 4 4 28 38 55 57 290% 195% 177% Provide Family Literacy Events to families of/and children (3-5 years). 3-5 years Adult 40 28 10 14 4 28 38 52 56 280% 190% 173% Provide Hands on Science to families of/and children 0-5. 3-5 years Adult 50 37 5 12 9 37 42 54 63 296% 188% 144% Provide Hands on Science to families of/and children 0-5. 4-6 years Adult 50 36 5 10 8 36 41 51 59 288% 168% 144% 150 36 5 10 8 36 41 51 59 288% 168% 144% 150 36 5 10 8 36 41 51 59 288% 168% 144% 150 36 5 10 8 36 41 51 59 288% 168% 144% 150 36 5 10 8 36 41 51 59 288% 168% 144% 150 36 5 10 8 36 41 51 59 288% 168% 144% 150 36 5 10 8 36 5 10 8 36 41 51 59 288% 168% 144% 150 36 5 10 8 36 5 10 8 36 41 51 59 288% 168% 144% 150 36 5 10 8 36 5 10 8 36 41 51 59 288% 168% 144% 150 36 5 10 8 36 5 10 8 36 41 51 59 288% 168% 144% 150 36 5 10 8 36 5 10 8 36 41 51 59 288% 168% 144% 150 36 5 10 8 36 5	щ	Provide Learn with Me Early Care and Education Services to preschool age children.	3-5 years	Child	40	35	10	15	8	35	45	60	68	350%	225%	200%	170%
Provide Hands on Science to families of/and children 0-5. Provide Car Seat Safety Training and Installation to Parents of Children 0-5. Provide Car Seat Safety Training and Installation to Parents of Children 0-5. Provide Story Time early literacy activities to preschool age children. O-5 years Adult 10 0 1 1 1 9 0 1 1 2 11 0% 20% 27% Provide Family Literacy Events to families of/and children age 0-5. O-5 years Child 50 0 77 0 1 9 0 77 77 86 0% 342% 228% 160% 228% 16		Provide Tool Time to parents of/and children (3-5 years).	3-5 years	Child	40		10	14	4	29	39	53		290%	195%	177%	143%
Provide Hands on Science to families of/and children 0-5. O-5 years Adult 50 37 5 12 9 37 42 54 63 296% 168% 144% 57 59 288% 168% 144% 59 36 5 10 8 36 5 10 8 36 41 51 59 288% 164% 136% 136% 136% 136% 136% 136% 136% 136		Provide Tool Time to parents of/and children (3-5 years).	3-5 years	Adult	40	28	10	14	4	28	38	52	56	280%	190%	173%	140%
Provide Hands on Science to families of/land children 0-5. Provide Car Seat Safety Training and Installation to Parents of Children 0-5. Provide Story Time early literacy activities to preschool age children. O-5 years Child O-77 O-13 O-77 O-13 O-77 O-77		Provide Hands on Science to families of/and children 0-5.	•	Child	50	37	5	12	9	37	42	54	63		168%		126%
Provide Story Time early literacy activities to preschool age children. Provide Family Literacy Events to families of/and children age 0-5. Provide Family Literacy Events to families of/and children age 0-5. Provide Family Literacy Events to families of/and children age 0-5. Provide Family Literacy Events to families of/and children age 0-5. Provide Family Socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5. Provide Family socialization events with self directed activities to families of children age 0-5		Provide Hands on Science to families of/and children 0-5.	•	Adult	50	36	5	10	8	36	41	51		288%	164%	136%	118%
Provide Family Literacy Events to families of/and children age 0-5. 0-5 years Child 50 0 77 0 13 0 77 77 90 0 9 0 0% 342% 225% Provide Family Literacy Events to families of families of children age 0-5. 0-5 years Adult 45 0 77 0 9 9 0 77 77 86 0 0% 342% 228% Provide Family Socialization events with self directed activities to families of children age 0-5. 0-5 years Child 30 30 9 11 11 11 30 39 50 61 400% 260% 222% Provide Family socialization events with self directed activities to families of children age 0-5. 0-5 years Adult 30 30 9 11 11 11 30 39 50 61 400% 260% 222% Provide Family socialization events with self directed activities to families of children age 0-5. 0-5 years Adult 30 30 8 10 8 30 38 48 56 400% 253% 213% The FRC will provide referral information to parents/caregivers of/and children 0-5. 0-5 years Child 10 3 0 2 1 1 3 3 3 5 6 6 120% 60% 67% The FRC will provide referral information to parents/caregivers of/and children 0-5. 0-5 years Adult 15 1 10 1 1 0 1 1 11 12 12 27% 147% 107% age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with Joe Neves to provide Parent Education to parents of children age 0-5. Coordinate with Lings View to provide Parent Education to parents of children age 0-5. 0-5 years Adult 10 9 0 0 0 4 9 9 9 13 360% 180% 133% Coordinate with Cal Viva to provide Parent Education to parents of children age 0-5. 0-5 years Adult 10 9 0 0 0 4 9 9 9 9 13 360% 180% 120% Provide Ago Developmental Screenings to children age 0-5. 0-5 years Adult 10 9 0 0 0 4 9 9 9 9 13 360% 180% 120% Provide Ago Developmental Screenings to children age 0-5. 0-5 years Child 50 34 6 14 14 4 51 70 94 108 204% 140% 125% 170% 145% 140% 140% 140% 140% 140% 140% 140% 140		Provide Car Seat Safety Training and Installation to Parents of Children 0-5.	0-5 years	Adult	10	0	1	1	9	0	1	2	11	0%	20%	27%	110%
Provide Family Literacy Events to families of/and children age 0-5. O-5 years Adult 45 0 777 0 9 9 0 777 77 86 0 9 0 777 77 86 0 9 0 777 77 86 0 9 0 777 77 86 0 9 0 777 77 86 0 9 0 777 77 86 0 9 0 777 77 86 0 9 0 777 77 86 0 9 0 777 77 86 0 9 0 777 77 77 86 0 9 0 777 77 86 0 9 0 777 77 86 0 9 0 777 77 86 0 9 0 777 77 86 0 9 0 777 77 86 0 9 0 0 777 77 86 0 9 0 0 777 77 86 0 9 0 0 777 77 86 0 9 0 0 777 77 86 0 9 0 0 777 77 86 0 9 0 0 777 77 86 0 9 0 0 777 77 86 0 9 0 0 777 77 86 0 9 0 0 777 77 86 0 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Provide Story Time early literacy activities to preschool age children.	0-5 years	Child	40	23	11	12	6	23	34	46	52	230%	170%	153%	130%
Provide Family socialization events with self directed activities to families of children age 0-5. 0-5 years	t	Provide Family Literacy Events to families of/and children age 0-5.	0-5 years	Child	50	0	77	0	13	0	77	77	90	0%	308%	205%	180%
Provide Family socialization events with self directed activities to families of children age 0-5. 0-5 years	<u>o</u>	Provide Family Literacy Events to families of/and children age 0-5.	0-5 years	Adult	45	0	77	0	9	0	77	77	86	0%	342%	228%	191%
The FRC will provide referral information to parents/caregivers of/and children 0-5. O-5 years Adult O-5 years Child O-5 years Adult O-5 years Child O-5 years Adult O-5 years Adult O-5 years Child O-	ď	Provide Family socialization events with self directed activities to families of children age 0-5.	0-5 years	Child	30	30	9	11	11	30	39	50	61	400%	260%	222%	203%
The FRC will provide referral information to parents/caregivers of/and children 0-5. O-5 years Adult 15 1 10 1 0 1 1 11 12 12 27% 147% 107% 20 20 11 15 12 12 27% 147% 107% age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with Joe Neves to provide Parent Education to parents of children age 0-5. Coordinate with Kings View to provide Parent Education to parents of children age 0-5. O-5 years Adult 15 1 10 1 1 1 1 12 12 23 3 38 240% 120% 153% 14 2 12 12 12 12 12 12 12 12 12 12 12 12 1	Б	Provide Family socialization events with self directed activities to families of children age 0-5.	0-5 years	Adult	30	30	8	10	8	30	38	48	56	400%	253%	213%	187%
The FRC will provide referral information to parents/caregivers of/and children 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with Joe Neves to provide Parent Education to parents of children age 0-5. Coordinate with Kings View to provide Parent Education to parents of children age 0-5. Coordinate with Cal Viva to provide Parent Education to parents of children age 0-5. Coordinate with Cal Viva to provide Parent Education to parents of children age 0-5. D-5 years Adult D-5 years Adult D-5 years Adult D-6 years Child D-7 years Child D-8 years Child D-8 years Child D-9 D D	a	The FRC will provide referral information to parents/caregivers of/and children 0-5.	0-5 years	Child	10	3	0	2	1	3	3	5	6	120%	60%	67%	60%
Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Coordinate with local provider (s) to provide Parent Education to parents of/and children age 0-5. Coordinate with local provider (s) to provide Parent Education to parents of children age 0-5. Coordinate with local provider (s) to provide Parent Education to parents of children age 0-5. Coordinate with local provider (s) to provide Parent Education to parents of children age 0-5. Coordinate with local provider (s) to provide Parent Education to parents of children age 0-5. Coordinate with Local Provider (s) to provide Parent E	<u>.ö</u>		•			1	10	1	0	1	11	12	12				80%
age 0-5. Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5. Adult 20 13 4 5 12 13 17 22 34 260% 170% 147% 260% 170% 147% 27% 280% 27% 280%	ucai		,		20	12	0	11	15	12							190%
age 0-5. Coordinate with Joe Neves to provide Pictures with Santa to children age 0-5. Coordinate with Kings View to provide Parent Education to parents of children age 0-5. Coordinate with Cal Viva to provide Parent Education to parents of children age 0-5. O-5 years Adult 15 6 8 1 17 22 34 260% 170% 147% 220% 220% 220% 220% 220% 220% 220% 220% 237% 240 15 6 8 1 5 6 14 15 7 9 9 9 13 360% 180% 180% 180% 120% 180%	В		0-5 years	Criliu	20	12	O		10	12	12	23	36	24070	12070	15570	19070
age 0-5. Coordinate with Joe Neves to provide Pictures with Santa to children age 0-5. Coordinate with Kings View to provide Parent Education to parents of children age 0-5. Coordinate with Cal Viva to provide Parent Education to parents of children age 0-5. Coordinate with Cal Viva to provide Parent Education to parents of children age 0-5. O-5 years Adult 10 9 0 4 9 9 9 13 360% 180% 120%	Ħ		0 E voore	Λdult	20	12	4	5	12	12	17	22	24	260%	170%	1.470/	170%
Coordinate with Kings View to provide Parent Education to parents of children age 0-5. O-5 years Adult 15 6 8 1 5 6 14 15 20 160% 187% 133% 133% 120% Provide ASQ Developmental Screenings to children age 0-5. O-5 years Child 100 9 0 0 4 9 9 9 9 13 360% 180% 120%	a <u>r</u> e	age 0-5.	0-5 years	Addit	20	13	4	3	12	13	17	22	34	20076	17076	147 70	17070
Coordinate with Cal Viva to provide Parent Education to parents of children age 0-5. 0-5 years Adult 10 9 0 0 4 9 9 9 13 360% 180% 120% Provide ASQ Developmental Screenings to children age 0-5. 0-5 years Child 100 51 19 24 14 51 70 94 108 204% 140% 125% Provide physical fitness activities "Motor Movements" to children age 3-5. 3-5 years Child 50 34 6 14 14 34 40 54 68 272% 160% 144% Provide Snack Attack Early Care and Education activities to preschool age children. 3-5 years Child 49 29 13 15 14 29 42 57 71 237% 171% 155%	ď	Coordinate with Joe Neves to provide Pictures with Santa to children age 0-5.	0-5 years	Child	30	0	66	0	0	0	66	66	66		220%	220%	220%
Provide ASQ Developmental Screenings to children age 0-5. 0-5 years		Coordinate with Kings View to provide Parent Education to parents of children age 0-5.	0-5 years	Adult	15	6	8	1	5	6	14	15	20	160%	187%	133%	133%
Provide physical fitness activities "Motor Movements" to children age 3-5. 3-5 years Child 50 34 6 14 14 34 40 54 68 272% 160% 144% The provide Spack Attack Early Care and Education activities to preschool age children. 3-5 years Child 49 29 13 15 14 29 42 57 71 237% 171% 155%		Coordinate with Cal Viva to provide Parent Education to parents of children age 0-5.	0-5 years	Adult	10	9	0	0	4	9	9	9	13	360%	180%	120%	130%
Provide physical fitness activities "Motor Movements" to children age 3-5. 3-5 years Child 50 34 6 14 14 34 40 54 68 272% 160% 144% pp 29 13 15 14 29 42 57 71 237% 171% 155%		Provide ASQ Developmental Screenings to children age 0-5.	,	Child	100	51	19	24	14	51	70	94			140%	125%	108%
불통을 Provide Snack Attack Early Care and Education activities to preschool age children. 3-5 years Child 49 29 13 15 14 29 42 57 71 237% 171% 155%	⊱ He	Provide physical fitness activities "Motor Movements" to children age 3-5.	3-5 years	Child	50		6	14	14	34	40	54	68				136%
	ਰੇ ≢		,	Child	49		13	15	14		42	57		237%			145%
T 🙃 Provide Car Seats to Children age 0-5 for the parents who attend Car Seat Satety Training and Installation	S E	Provide Car Seats to Children age 0-5, for the parents who attend Car Seat Safety Training and Installation.	•				1	1			1	,					140%
0-5 years Child 10 0 1 1 12 0 1 1 2 14 0% 20% 27%			u-b years	Child	10	U	1	1	12	U	1	2	14	U%	20%	21%	140%

Quarterly Unduplicated Count = Count of first time participants per quarter (excludes counts of continuing clients)

Annual Goal = Annual Target for unduplicated participants

YTD Unduplicated Count (Cumulative) = Unduplicated count of clients served through the quarter end

YTD % On Track to Meet Objectives = Unduplicated count of clients served through the quarter end relative to the adjusted quarter target

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Lemoore Family Resource Center - Targets

Program Specific Strategies				3.75 7.5 11.2 3.75 7.5 11.2 18 36 54 18 36 54 18 36 54 18 36 54 18 36 54 18 36 54 18 36 54 18 36 54 11.5 23 34.3 10 20 30 10 20 30 10 20 30 10 20 30 10 20 30 10 20 30 12.5 25 37.3 12.5 25 37.3 2.5 5 7.5	rget	_
		Annual	Q1	Q2	Q3	Q4
Provide Baby & Me Early Care & Education Activities to infants (0-12 and their parents.	months) Child	15	3.75	7.5	11.25	15
Provide Baby & Me Early Care & Education Activities to infants (0-12 and their parents.	months) Adult	15	3.75	7.5	11.25	15
Provide Sing & Play Early Care & Education Activities to toddlers (1-2 and their parents.	2 years) Child	72	18	36	54	72
Provide Sing & Play Early Care & Education Activities to toddlers (1-2 and their parents.	2 years) Adult	72	18	36	54	72
Provide Art Explosion Early Care and Education Activities to toddlers years).	(1-2 Child	72	18	36	54	72
Provide Art Explosion Early Care and Education Activities to toddlers years).	` Adult	72	18	36	54	72
Provide My 5 Senses Early Care and Education Activities to toddlers years).	` Child	72	18	36	54	72
Provide My 5 Senses Early Care and Education Activities to toddlers years).	` Adult	72	18	36	54	72
Provide Explore & Learn Early Care and Education Activities to toddle years).	Child	72	18	36	54	72
Provide Art Explosion Early Care and Education Activities to toddlers years). Provide My 5 Senses Early Care and Education Activities to toddlers years). Provide My 5 Senses Early Care and Education Activities to toddlers years). Provide Explore & Learn Early Care and Education Activities to toddle years). Provide Explore & Learn Early Care and Education Activities to toddle years). Provide Smart Art Education to preschool age children (3-5 years).	ers (1-2 Adult	72	18	36	54	72
Provide Smart Art Education to preschool age children (3-5 years).	Child	46	11.5	23	34.5	46
Provide Compu Kids Early Care and Education activities to preschoo children (3-5 years).	Child	40	10	20	30	40
Provide Playing to Learn activities to preschool age children (3-5 year	rs). Child	40	10	20	30	15 15 72 72 72 72 72 72 72 72 46
Provide Playing to Learn activities to preschool age children (3-5 year	Addit	40	10	20	30	40
Provide Learn with Me Early Care and Education Services to preschool children (3-5 years).	Child	40	10		30	
Provide Tool Time to parents of/and children (3-5 years).	Child	40	10		30	
Provide Tool Time to parents of/and children (3-5 years).	Adult	40			30	
Provide Hands on Science to families of/and children 0-5.	Child	50			37.5	
Provide Hands on Science to families of/and children 0-5.	Adult	50	12.5	25	37.5	50
Provide Car Seat Safety Training and Installation to Parents of Childr	en 0-5. Adult	10	2.5	5	7.5	10
Provide Story Time early literacy activities to preschool age children.		40	10	20	30	
Provide Family Literacy Events to families of/and children age 0-5.	Child	50	12.5	25	37.5	
Provide Family Literacy Events to families of/and children age 0-5.	Adult	45	11.25	22.5	33.75	45

ri Ti	Provide Family socialization events with self directed activities to families of children age 0-5.	Child	30	7.5	15	22.5	30
Suppo	Provide Family socialization events with self directed activities to families of children age 0-5.	Adult	30	7.5	15	22.5	30
	The FRC will provide referral information to parents/caregivers of/and children 0-5.	Child	10	2.5	5	7.5	10
	The FRC will provide referral information to parents/caregivers of/and children 0-5.	Adult	15	3.75	7.5	11.25	15
nt Edu	Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5.	Child	20	5	10	15	20
Pare	Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5.	Adult	20	5	10	15	20
	Coordinate with Joe Neves to provide Pictures with Santa to children age 0-5.	Child	30	0	30	30	30
children a coordina for paren Coordina age 0-5. Coordina age 0-5. Provide a Provide a children a	Coordinate with Kings View to provide Parent Education to parents of children age 0-5.	Adult	15	3.75	7.5	11.25	15
	Coordinate with Cal Viva to provide Parent Education to parents of children age 0-5.	Adult	10	2.5	5	7.5	10
en	Provide ASQ Developmental Screenings to children age 0-5.	Child	100	25	50	75	100
hildr	Provide physical fitness activities "Motor Movements" to children age 3-5.	Child	50	12.5	25	37.5	50
althy C	Provide Snack Attack Early Care and Education activities to preschool age children (3-5 years).	Child	49	12.25	24.5	36.75	49
Hea	Provide Car Seats to Children age 0-5, for the parents who attend Car Seat Safety Training and Installation.	Child	10	2.5	5	7.5	10

Hanford Family Connections - Family Resource Center

	Program Specific Strategies				Quarterly Unduplicated Count			YTD Unduplicated Count (Cumulative)				YTD % On Track to Meet Objectiv				
				Annual Goal	Q1	Q2	Q3	Q4	YTD (Q1)	YTD (Q2)	YTD (Q3)	YTD (Q4)	Q1	Q2	Q3	Q4
	Provide Baby & Me Early Care & Education Activities to infants and their parents.	0-12 m	Child	15	7	4	9	3	7	11	20	23	187%	147%	178%	153%
	Provide Baby & Me Early Care & Education Activities to infants and their parents.	0-12 m	Adult	15	8	4	9	3	8	12	21	24	213%	160%	187%	160%
	Provide Sing & Play Early Care & Education Activities to toddlers and their parents.	1-2 yrs	Child	75	44	9	9	13	44	53	62	75	235%	141%	110%	100%
	Provide Sing & Play Early Care & Education Activities to toddlersand their parents.	1-2 yrs	Adult	75	43	10	9	13	43	53	62	75	229%	141%	110%	100%
<u>6</u>	Provide Art Explosion Early Care and Education Activities to toddlers.	1-2 yrs	Child	75	42	8	6	22	42	50	56	78	224%	133%	100%	104%
gt	Provide Art Explosion Early Care and Education Activities to toddlers.	1-2 yrs	Adult	75	41	8	6	20	41	49	55	75	219%	131%	98%	100%
ğ	Provide My 5 Senses Early Care and Education Activities to toddlers.	1-2 yrs	Child	75	42	14	13	12	42	56	69	81	224%	149%	123%	108%
Ш	Provide My 5 Senses Early Care and Education Activities to toddlers.	1-2 yrs	Adult	75	42	14	13	14	42	56	69	83	224%	149%	123%	111%
an	Provide Explore & Learn Early Care and Education Activities to toddlers.	1-2 yrs	Child	75	44	7	13	12	44	51	64	76	235%	136%	114%	101%
ē	Provide Explore & Learn Early Care and Education Activities to toddlers.	1-2 yrs	Adult	75	44	6	13	12	44	50	63	75	235%	133%	112%	100%
ca	Provide Smart Art Education to preschool age children.	3-5 years	Child	46	25	7	15	6	25	32	47	53	217%	139%	136%	115%
텵	Provide Compu Kids Early Care and Education activities to preschool age children.	3-5 years	Child	50	29	7	15	4	29	36	51	55	232%	144%	136%	110%
$\ddot{\circ}$	Provide Playing to Learn activities to preschool age children.	3-5 years	Child	50	30	4	18	3	30	34	52	55	240%	136%	139%	110%
듩	Provide Playing to Learn activities to preschool age children.	3-5 years	Adult	50	29	4	14	3	29	33	47	50	232%	132%	125%	100%
ш	Provide Learn with Me Early Care and Education Services to preschool age children.	3-5 years	Child	50	30	3	18	3	30	33	51	54	240%	132%	136%	108%
	Provide Tool Time to parents of/and children (3-5 years).	3-5 years	Child	46	28	2	17	4	28	30	47	51	243%	130%	136%	111%
	Provide Tool Time to parents of/and children (3-5 years).	3-5 years	Adult	46	27	3	14	5	27	30	44	49	235%	130%	128%	107%
	Provide Hands on Science to families of/and children 0-5.	0-5 years	Child	50	30	4	14	8	30	34	48	56	240%	136%	128%	112%
	Provide Hands on Science to families of/and children 0-5.	0-5 years	Adult	50	30	3	11	8	30	33	44	52	240%	132%	117%	104%
	Provide Car Seat Safety Training and Installation to Parents of Children 0-5.	0-5 years	Adult	10	0	0	9	3	0	0	9	12	0%	0%	120%	120%
	Provide Story Time early literacy activities to preschool age children.	0-5 years	Child	50	27	5	10	9	27	32	42	51	216%	128%	112%	102%
t	Provide Family Literacy Events to families of/and children age 0-5.	0-5 years	Child	65	0	68	0	21	0	68	68	89	0%	209%	139%	137%
od.	Provide Family Literacy Events to families of/and children age 0-5.	0-5 years	Adult	55	0	67	0	18	0	67	67	85	0%	244%	162%	155%
gnb	Provide Family socialization events with self directed activities to families of children age 0-5.	0-5 years	Child	40	28	2	12	13	28	30	42	55	280%	150%	140%	138%
5	Provide Family socialization events with self directed activities to families of children age 0-5.	0-5 years	Adult	40	27	3	12	11	27	30	42	53	270%	150%	140%	133%
a	The FRC will provide referral information to parents/caregivers of/and children 0-5.	0-5 years	Child	10	4	1	4	1	4	5	9	10	160%	100%	120%	100%
ij	The FRC will provide referral information to parents/caregivers of/and children 0-5.	0-5 years	Adult	20	0	35	0	0	0	35	35	35	0%	350%	233%	175%
cal	Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children	,			-	-		_								
n	age 0-5.	0-5 years	Child	20	26	2	10	0	26	28	38	38	520%	280%	253%	190%
퓓	Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children							_								
<u>ē</u>	age 0-5.	0-5 years	Adult	20	25	4	15	3	25	29	44	47	500%	290%	293%	235%
P _o	Coordinate with Joe Neves to provide Pictures with Santa to children age 0-5.	0-5 vears	Child	30	0	47	0	0	0	47	47	47		313%	209%	157%
	Coordinate with Kings View to provide Parent Education to parents of children age 0-5.	0-5 years	Adult	20	13	6	0	12	13	19	19	31	260%	190%	127%	155%
	Coordinate with Cal Viva to provide Parent Education to parents of children age 0-5.	0-5 years	Adult	15	8	4	10	0	Q Q	12	22	22	213%	160%	196%	147%
	Coordinate with La Leche League to provide lactation support to parents of infants/toddlers.	0-5 years	Addit		-	4		•	0							
	0 1 11 1			10	8	1	5	2	8	9	14	16	320%	180%	187%	160%
~ E	Provide ASQ Developmental Screenings to children age 0-5.	0-5 years	Child	100	60	23	21	23	60	83	104	127	240%	166%	139%	127%
althy Idren	Provide physical fitness activities "Motor Movements" to children age 3-5.	3-5 years	Child	50	32	3	12	11	32	35	47	58	256%	140%	125%	116%
leal hilo	Provide Snack Attack Early Care and Education activities to preschool age children.	3-5 years	Child	56	30	8	17	4	30	38	55	59	214%	136%	131%	105%
エロ	Provide Car Seats to Children age 0-5, for the parents who attend Car Seat Safety Training and Installation.	0-5 years	Child	15	0	0	12	6	0	0	12	18	0%	0%	107%	120%
				ı l			Objectives	Met	_	١,		<u> </u>	31	35	35	37
Quarterly Unduplicated Count = Count of first-time participants per quarter (excludes counts of continuing clients) Total Objectives											37					

Annual Goal = Annual Target for unduplicated participants

YTD Unduplicated Count (Cumulative) = Unduplicated count of clients served through the quarter end
YTD % On Track to Meet Objectives = Unduplicated count of clients served through the quarter end relative to the adjusted quarter target

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Hanford Family Resource Center - Targets

	Program Specific Strategies				Adjusted Ta	rget	
			Annual	Q1	Q2	Q3	Q4
	Provide Baby & Me Early Care & Education Activities to infants (0-12 months) and their parents.	Child	15	3.75	7.5	11.25	15
	Provide Baby & Me Early Care & Education Activities to infants (0-12 months) and their parents.	Adult	15	3.75	7.5	11.25	15
	Provide Sing & Play Early Care & Education Activities to toddlers (1-2 years) and their parents.	Child	75	18.75	37.5	56.25	75
	Provide Sing & Play Early Care & Education Activities to toddlers (1-2 years) and their parents.	Adult	75	18.75	37.5	56.25	75
	Provide Art Explosion Early Care and Education Activities to toddlers (1-2 years).	Child	75	18.75	37.5	56.25	75
<u>a</u>	Provide Art Explosion Early Care and Education Activities to toddlers (1-2 years).	Adult	75	18.75	37.5	56.25	75
7	Provide My 5 Senses Early Care and Education Activities to toddlers (1-2 years).	Child	75	18.75	37.5	56.25	75
מ מ	Provide My 5 Senses Early Care and Education Activities to toddlers (1-2 years).	Adult	75	18.75	37.5	56.25	75
	Provide Explore & Learn Early Care and Education Activities to toddlers (1-2 years).	Child	75	18.75	37.5	56.25	75
Early Childcare and Education	Provide Explore & Learn Early Care and Education Activities to toddlers (1-2 years).	Adult	75	18.75	37.5	56.25	75
П	Provide Smart Art Education to preschool age children (3-5 years).	Child	46	11.5	23	34.5	46
	Provide Compu Kids Early Care and Education activities to preschool age children (3-5 years).	Child	50	12.5	25	37.5	50
	Provide Playing to Learn activities to preschool age children (3-5 years).	Child	50	12.5	25	37.5	50
	Provide Playing to Learn activities to preschool age children (3-5 years).	Adult	50	12.5	25	37.5	50
	Provide Learn with Me Early Care and Education Services to preschool age children (3-5 years).	Child	50	12.5	25	37.5	50
	Provide Tool Time to parents of/and children (3-5 years).	Child	46	11.5	23	34.5	46
	Provide Tool Time to parents of/and children (3-5 years).	Adult	46	11.5	23	34.5	46
	Provide Hands on Science to families of/and children 0-5.	Child	50	12.5	25	37.5	50
	Provide Hands on Science to families of/and children 0-5.	Adult	50	12.5	25	37.5	50
	Provide Car Seat Safety Training and Installation to Parents of Children 0-5.	Adult	10	2.5	5	7.5	10
	Provide Story Time early literacy activities to preschool age children.	Child	50	12.5	25	37.5	50
	Provide Family Literacy Events to families of/and children age 0-5.	Child	65	16.25	32.5	48.75	65
	Provide Family Literacy Events to families of/and children age 0-5.	Adult	55	13.75	27.5	41.25	55

'n	Provide Family socialization events with self directed activities to families of children age 0-5.	Child	40	10	20	30	40
Support	Provide Family socialization events with self directed activities to families of children age 0-5.	Adult	40	10	20	30	40
	The FRC will provide referral information to parents/caregivers of/and children 0-5.	Child	10	2.5	5	7.5	10
ıcatio	The FRC will provide referral information to parents/caregivers of/and children 0-5.	Adult	20	5	10	15	20
Parent Education and	Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5.	Child	20	5	10	15	20
Pare	Coordinate with local provider(s) to provide Community Resource presentations for parents of/and children age 0-5.	Adult	20	5	10	15	20
	Coordinate with Joe Neves to provide Pictures with Santa to children age 0-5.	Child	30	7.5	15	22.5	30
	Coordinate with Kings View to provide Parent Education to parents of children age 0-5.	Adult	20	5	10	15	20
	Coordinate with Cal Viva to provide Parent Education to parents of children age 0-5.	Adult	15	3.75	7.5	11.25	15
	Coordinate with La Leche League to provide lactation support to parents of infants/toddlers.		10	2.5	5	7.5	10
en	Provide ASQ Developmental Screenings to children age 0-5.	Child	100	25	50	75	100
hildr	Provide physical fitness activities "Motor Movements" to children age 3-5.	Child	50	12.5	25	37.5	50
Healthy Children	Provide Snack Attack Early Care and Education activities to preschool age children (3-5 years).	Child	56	14	28	42	56
He	Provide Car Seats to Children age 0-5, for the parents who attend Car Seat Safety Training and Installation.	Child	15	3.75	7.5	11.25	15

Corcoran Family Resource Center

	Program Specific Strategies				C	uarterly Undu	plicated Cou	int			Count (Cum		YTD %	6 On Track to	Meet Objec	tives
				Annual Goal	Q1	Q2	Q3	Q4	YTD (Q1)	YTD (Q2)	YTD (Q3)	YTD (Q4)	Q1	Q2	Q3	Q4
Ж	The FRC Staff will provide Pottery & Painting (Time 4 Art) classes to children 2 to 5 years old.	2 - 5 years	Child	35	36	6	19	3	36	42	61	64	411%	240%	232%	183%
	The FRC Staff will provide (Dramatic Play) classes to children 2 to 5 years old.	2 - 5 years	Child	20	18	18	15	5	18	36	51	56	360%	360%	340%	280%
	The FRC Staff will provide Tummy Play Time classes for children 0-6 months of age and their parents.	0-6 m	Child	8	3	3	0	0	3	6	6	6	150%	150%	100%	75%
	The FRC Staff will provide Tummy Play Time classes for children 0-6 months of age and their parents.	0-6 m	Adult	8	4	3	1	0	4	7	8	8	200%	175%	133%	100%
pport	The FRC Staff will provide child development instruction to children age 0-5 in tandem with Parent Education Workshop.	0-5 years	Child	15	5	8	5	5	5	13	18	23	133%	173%	160%	153%
nd Su	The FRC Staff will provide early childhood activities (Time 2 Finger Paint) and literacy skills to children 6 months old to 24 months old.	6 - 24 m	Child	10	14	7	12	4	14	21	33	37	560%	420%	440%	370%
ation a	The FRC Staff will provide early childhood activities (Time 2 Finger Paint) and literacy skills to children 6 months old to 24 months old. (PARENT)	6 - 24 m	Adult	10	16	9	13	4	16	25	38	42	640%	500%	507%	420%
ğ	The FRC will provide referral information to parents/caregivers of/and children 0-5.	0-5 yrs	Child	30	11	6	5	10	11	17	22	32	147%	113%	98%	107%
Щ	The FRC will provide referral information to parents/caregivers of/and children 0-5.	0-5 years	Adult	40	4	19	6	2	4	23	29	31	40%	115%	97%	78%
Ē	The FRC will provide resource assistance to parents/caregivers of/and children 0-5.	0-5 years	Child	40	4	39	8	23	4	43	51	74	40%	215%	170%	185%
Ра	The FRC will provide resource assistance to parents/caregivers of/and children 0-5.	0-5 years	Adult	45	5	38	4	14	5	43	47	61	44%	191%	139%	136%
	Coordinate with UCP to provide Parent & Me to children 0-5.	0-5 years	Child	40	15	4	15	2	15	19	34	36	150%	95%	113%	90%
	Coordinate with local provider to provide car seat installation and education services to parents of children 0-5.	0-5 years	Adult	10	1	2	3	1	1	3	6	7	40%	60%	80%	70%
	Coordinate with local provider to provide Parent Education Workshops to parents of children 0-5.	0-5 years	Adult	10	2	8	6	4	2	10	16	20	80%	200%	213%	200%
	The FRC Staff will provide Little Chef's Kitchen cooking healthy snack classes for children 2 to 5 years of age.	2-5 years	Child	20	36	4	12	9	36	40	52	61	720%	400%	347%	305%
ren	The FRC Staff will provide Little Chefs Kitchen cooking healthy snack classes for children 2 to 5 years of age.	2-5 years	Adult	20	33	4	12	10	33	37	49	59	660%	370%	327%	295%
를	The FRC Staff will provide Let's Move & Play dance classes for children 2 to 5 years old.	2-5 years	Child	35	43	6	17	3	43	49	66	69	491%	280%	251%	197%
Š	The FRC will provide ASQ Developmental Screening to children age 0-5.	0-5 years	Child	20	3	4	6	4	3	7	13	17	60%	70%	87%	85%
뜵	Coordinate with local provider to provide community Baby Shower for expectant mothers.		Adult	10	7	11	2	0	7	18	20	20	280%	360%	267%	200%
Ĕ	Coordinate with local agencies to provide Health and Nutrition Awareness trainings and workshops to children 0-5 and their parents.	0-5 years	Child	10	9	0	0	0	9	9	9	9	360%	180%	120%	90%
	Coordinate with local agencies to provide Health and Nutrition Awareness trainings and workshops to children 0-5 and their parents.	0-5 years	Adult	10	8	8	1	6	8	16	17	23	320%	320%	227%	230%
							Objectives N		_				15	18	17	15

Quarterly Unduplicated Count = Count of first time participants per quarter (excludes counts of continuing clients)
Annual Goal = Annual Target for unduplicated participants

YTD Unduplicated Count (Cumulative) = Unduplicated count of clients served through the quarter end
YTD Wo On Track to Meet Objectives = Unduplicated count of clients served through the quarter end relative to the adjusted quarter target

21 Total Objectives 21 71% 81%

Corcoran Family Resource Center - Targets

	Program Specific Strategies				Adjusted Ta	rget	
			Annual	Q1	Q2	Q3	Q4
Early Childcare	The FRC Staff will provide Pottery & Painting (Time 4 Art) classes to children 2 to 5 years old.	Child	35	8.75	17.5	26.25	35
Chilc	The FRC Staff will provide (Dramatic Play) classes to children 2 to 5 years old.	Child	20	5	10	15	20
	The FRC Staff will provide Tummy Play Time classes for children 0-6 months of age and their parents.	Child	8	2	4	6	8
	The FRC Staff will provide Tummy Play Time classes for children 0-6 months of age and their parents.	Adult	8	2	4	6	8
	The FRC Staff will provide child development instruction to children age 0-5 in tandem with Parent Education Workshop.	Child	15	3.75	7.5	11.25	15
port	The FRC Staff will provide early childhood activities (Time 2 Finger Paint) and literacy skills to children 6 months old to 24 months old.	Child	10	2.5	5	7.5	10
Parent Education and Support	The FRC Staff will provide early childhood activities (Time 2 Finger Paint) and literacy skills to children 6 months old to 24 months old. (PARENT)	Adult	10	2.5	5	7.5	10
ation	The FRC will provide referral information to parents/caregivers of/and children 0-5.	Child	30	7.5	15	22.5	30
t Educ	The FRC will provide referral information to parents/caregivers of/and children 0-5.	Adult	40	10	20	30	40
Paren	The FRC will provide resource assistance to parents/caregivers of/and children 0-5.	Child	40	10	20	30	40
_	The FRC will provide resource assistance to parents/caregivers of/and children 0-5.	Adult	45	11.25	22.5	33.75	45
	Coordinate with UCP to provide Parent & Me to children 0-5.	Child	40	10	20	30	40
	Coordinate with local provider to provide car seat installation and education services to parents of children 0-5.	Adult	10	2.5	5	7.5	10
	Coordinate with local provider to provide Parent Education Workshops to parents of children 0-5.	Adult	10	2.5	5	7.5	10
	The FRC Staff will provide Little Chef's Kitchen cooking healthy snack classes for children 2 to 5 years of age.	Child	20	5	10	15	20
	The FRC Staff will provide Little Chef's Kitchen cooking healthy snack classes for children 2 to 5 years of age.	Adult	20	5	10	15	20
Children	The FRC Staff will provide Let's Move & Play dance classes for children 2 to 5 years old.	Child	35	8.75	17.5	26.25	35
hy Chi	The FRC will provide ASQ Developmental Screening to children age 0-5.	Child	20	5	10	15	20

Healt	Coordinate with local provider to provide community Baby Shower for expectant mothers.	Adult	10	2.5	5	7.5	10
	Coordinate with local agencies to provide Health and Nutrition Awareness trainings and workshops to children 0-5 and their parents.	Child	10	2.5	5	7.5	10
	Coordinate with local agencies to provide Health and Nutrition Awareness trainings and workshops to children 0-5 and their parents.	Adult	10	2.5	5	7.5	10

Kettleman City Family Resource Center

Program Specific Strategies		Quarterly Unduplicated Count YTD Unduplicated Count (Cumulat				ulative)	YTD %	On Track to	o Meet Objec	ctives					
			Annual Goal	Q1	Q2	Q3	Q4	YTD (Q1)	YTD (Q2)	YTD (Q3)	YTD (Q4)	Q1	Q2	Q3	Q4
Provide home visitation services to children 0 to 5 and their parents using Identified curriculum.	0-5 years	Child	10	8	0	0	0	8	8	8	8	320%	160%	107%	80%
Provide home visitation services to children 0 to 5 and their parents using Identified curriculum.	0-5 years	Adult	7	8	0	0	0	8	8	8	8	457%	229%	152%	114%
Provide socialization events to children 0 to 5 enrolled in the home visitation program and other interested community members.	0-5 years	Child	20	14	17	0	4	14	31	31	35	280%	310%	207%	175%
Provide socialization events to children 0 to 5 enrolled in the home visitation program and other interested community members.	0-5 years	Adult	15	15	12	0	5	15	27	27	32	400%	360%	240%	213%
Provide Raising a Reader book bag rotation literacy program to children 0 to 5 enrolled at home visits and socialization events.	0-5 years		10	12	0	0	0	12	12	12	12	480%	240%	160%	120%
The FRC will provide referral information to parents/caregivers of/and children 0-5.	0-5 years	Child	30	1	0	9	28	1	1	10	38	13%	7%	44%	127%
The FRC will provide referral information to parents/caregivers of/and children 0-5.	0-5 years	Adult	20	14	0	21	2	14	14	35	37	280%	140%	233%	185%
The FRC will provide resource assistance to parents/caregivers of/and children 0-5.	0-5 years	Child	35	9	26	3	5	9	35	38	43	103%	200%	145%	123%
The FRC will provide resource assistance to parents/caregivers of/and children 0-5.	0-5 years	Adult	35	13	9	7	7	13	22	29	36	149%	126%	110%	103%
Coordinate with local providers to provide parent workshops to parents of children 0-5.	0-5 years	Adult	15	4	1	5	4	4	5	10	14	107%	67%	89%	93%
Coordinate with local providers to provide counseling services to parents of children 0 to 5.	0-5 years	Adult	5	3	0	3	0	3	3	6	6	240%	120%	160%	120%
Coordinate to provide Parent Cafes to parents and caregivers of children 0 to 5.	0-5 years	Adult	10	0	0	14	0	0	0	14	14	0%	0%	187%	140%
Provide developmental screening using ASQ/NIPPISING tool for children 0 to 5.	0-5 years		30	6	3	9	13	6	9	18	31	80%	60%	80%	103%
£ © Coordinate with SNAP ED to provide nutrition education to parents and caregivers of children 0-5.	0-5 years	Adult	10	0	5	0	3	0	5	5	8	#DIV/0!	100%	67%	80%
Coordinate with local providers to provide food distributions to parents of children 0 to 5.	0-5 years	Adult	50	25	18	2	7	25	43	45	52	200%	172%	120%	104%
Coordinate with local providers to distribute items for Thanksgiving and Christmas holidays.	0-5 years	Adult	25	0	25	0	0	0	25	25	25		100%	100%	100%
						Objectives		_	•			11	12		
Quarterly Unduplicated Count = Count of first time participants per quarter (excludes counts of continuing clie	ents)					Total Object	ctives					16	16	16	
Annual Goal = Annual Target for unduplicated participants												69%	75%	75%	81%

Annual Goal = Annual Target for unduplicated participants
YTD Unduplicated Count (Cumulative) = Unduplicated count of clients served through the quarter end
YTD % On Track to Meet Objectives = Unduplicated count of clients served through the quarter end relative to the adjusted quarter target

150

14 16

88%

Kettleman City Family Resource Center - Targets

	Program Specific Strategies				Adjusted Ta	rget	
			Annual	Q1	Q2	Q3	Q4
	Provide home visitation services to children 0 to 5 and their parents using Identified curriculum.	Child	10	2.5	5	7.5	10
	Provide home visitation services to children 0 to 5 and their parents using Identified curriculum.	Adult	7	1.75	3.5	5.25	7
	Provide socialization events to children 0 to 5 enrolled in the home visitation program and other interested community members.	Child	20	5	10	15	20
port	Provide socialization events to children 0 to 5 enrolled in the home visitation program and other interested community members.	Adult	15	3.75	7.5	11.25	15
Parent Education and Support	Provide Raising a Reader book bag rotation literacy program to children 0 to 5 enrolled at home visits and socialization events.		10	2.5	5	7.5	10
ion an	The FRC will provide referral information to parents/caregivers of/and children 0-5.	Child	30	7.5	15	22.5	30
ducat	The FRC will provide referral information to parents/caregivers of/and children 0-5.	Adult	20	5	10	15	20
rent E	The FRC will provide resource assistance to parents/caregivers of/and children 0-5.	Child	35	8.75	17.5	26.25	35
Ра	The FRC will provide resource assistance to parents/caregivers of/and children 0-5.	Adult	35	8.75	17.5	26.25	35
	Coordinate with local providers to provide parent workshops to parents of children 0-5.	Adult	15	3.75	7.5	11.25	15
	Coordinate with local providers to provide counseling services to parents of children 0 to 5.	Adult	5	1.25	2.5	3.75	5
	Coordinate to provide Parent Cafes to parents and caregivers of children 0 to 5.	Adult	10	2.5	5	7.5	10
	Provide developmental screening using ASQ/NIPPISING tool for children 0 to 5.	Child	30	7.5	15	22.5	30
hildren	Coordinate with SNAP ED to provide nutrition education to parents and caregivers of children 0-5.	Adult	10	0	5	7.5	10
Healthy Children	Coordinate with local providers to provide food distributions to parents of children 0 to 5.	Adult	50	12.5	25	37.5	50
He	Coordinate with local providers to distribute items for Thanksgiving and Christmas holidays.	Adult	25	0	25	25	25

CARES Family Resource Center

Program Specific Strategies		C	Quarterly Und	luplicated Co	ount	YTD U	Induplicated	Count (Cum	ulative)	YTD 9	6 On Track t	o Meet Obje	ctives
	Annual Goal	Q1	Q2	Q3	Q4	YTD (Q1)	YTD (Q2)	YTD (Q3)	YTD (Q4)	Q1	Q2	Q3	Q4
Provide Technical assistance to CARES participants to include; reviewing PGP, assistance with permit application, access to higher education, and or coaching and mentoring (if participant does not have access to these services through their employer)	30	50	27	94	87	50	77	171	258	667%	513%	760%	860%
Provide Resource assistance to CARES participants to include classroom assessment implementation materials, check-out materials, computer access, etc.	75	64	64	116	142	64	128	244	386	341%	341%	434%	515%
Provide trainings in collaboration with KCAO's R & R program that will align with the QRIS elements for FCC sites	15	24	0	0	0	24	24	24	24	640%	320%	213%	160%
Establish and Distribute a county-wide training calendar for ECE professionals by publishing to the CARES and First 5 website and sending link to partners and participants.	200	535	1312	1312	257	535	1847	3159	3416	1070%	1847%	2106%	17089
Provide Technical Assistance, professional growth trainings and material supports in response to the needs identified through assessment process.	19	4	1	4	1	4	5	9	10	84%	53%	63%	53%
Provide Coaching by KCCAQ staff to FCC providers via in person visits, telephone contact, email, texting or other forms of electronic contact	25	38	35	54	45	38	73	127	172	608%	584%	677%	6889
Provide stipends and materials to participants Purchase data system for QRIS system that tracks DRDP, ERS, CLASS and Matrix scores	35 1	0 1	1044 0	1380 0	233 0	0 1	1044 1	2424 1	2657 1	0% 100%	5966% 100%	9234% 100%	75919 100%
Facilitate a Leadership Team Network that will increase capacity, provide support on latest trends, and assist with analyzing data and developing training for site staff	15	10	18	0	0	10	28	28	28	267%	373%	249%	1879
Facilitate Alternative Sites' Learning Group that will increase staff capacity, provide support with curriculum and resources for families and children in these programs	8	8	13	13	11	8	21	34	45	100%	263%	425%	5639
Quarterly Unduplicated Count = Count of first time participants per quarter (excludes counts of continuing clients)				Objectives Total Objectives		_	•			8 10	9	9	

Annual Goal = Annual Target for unduplicated participants
YTD Unduplicated Count (Cumulative) = Unduplicated count of clients served through the quarter end
YTD % On Track to Meet Objectives = Unduplicated count of clients served through the quarter end relative to the adjusted quarter target

CARES Family Resource Center - Targets

	Program Specific Strategies			Adjusted Ta	rget	_
		Annual	Q1	Q2	Q3	Q4
	Provide Technical assistance to CARES participants to include; reviewing PGP, assistance with permit application, access to higher education, and or coaching and mentoring (if participant does not have access to these services through	30	7.5	15	22.5	30
	Provide Resource assistance to CARES participants to include classroom assessment implementation materials, check-out materials, computer access, etc.	75	18.75	37.5	56.25	75
_	Provide trainings in collaboration with KCAO's R & R program that will align with the QRIS elements for FCC sites	15	3.75	7.5	11.25	15
Education	Establish and Distribute a county-wide training calendar for ECE professionals by publishing to the CARES and First 5 website and sending link to partners and participants.	200	50	100	150	200
	Provide Technical Assistance, professional growth trainings and material supports in response to the needs identified through assessment process.	19	4.75	9.5	14.25	19
Early Childcare and	Provide Coaching by KCCAQ staff to FCC providers via in person visits, telephone contact, email, texting or other forms of electronic contact	25	6.25	12.5	18.75	25
arly	Provide stipends and materials to participants	35	8.75	17.5	26.25	35
Ш	Purchase data system for QRIS system that tracks DRDP, ERS, CLASS and Matrix scores	1	1	1	1	1
	Facilitate a Leadership Team Network that will increase capacity, provide support on latest trends, and assist with analyzing data and developing training for site staff	15	3.75	7.5	11.25	15
	Facilitate Alternative Sites' Learning Group that will increase staff capacity, provide support with curriculum and resources for families and children in these programs	8	8	8	8	8

Parent & Me Services

Program Specific Strategies		A			olicated Count			nduplicated (YTD ' Q1	% On Track to		
-		Annual Goal	Q1	Q2	Q3	Q4	YID (Q1)	YTD (Q2)	Y I D (Q3)	Y I D (Q4)	Q1	Q2	Q3	Q4
Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: 0 3: every 6 months; 3-5: every 12 months	0 - 5 years	42	25	4	20	8	25	29	49	57	238%	138%	156%	136%
Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes.	0 - 5 years	42	41	2	9	7	41	43	52	59	390%	205%	165%	140%
Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me.		34	29	1	8	7	29	30	38	45	341%	176%	149%	132%
					bjectives Met otal Objective					·	3 3 100%	3 3 3 100%		3 3 1 00 %
Corcoran														
Program Specific Strategies		AI OI			olicated Count	04		nduplicated (% On Track to		
Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age:		Annual Goal	Q1	Q2	Q3	Q4	Y ID (Q1)	YTD (Q2)	Y ID (Q3)	Y I D (Q4)	Q1	Q2	Q3	Q4
• 10-3: every 6 months • 13-5: every 12 months	0 - 5 years	35	24	18	16	4	24	42	58	62	274%	240%	221%	177%
Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate	0 - 5 years	35	49	8	10	1	49	57	67	68	560%	326%	255%	194%
ormat through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me.		28	43	7	8	1	43	50	58	59	614%	357%	276%	211%
				(bjectives Met			<u> </u>			3	3	3	3
				1	otal Objective	es					3	3	3	
											100%	100%	100%	100%
Lemoore														
Program Specific Strategies		AI OI			olicated Count	0.4		nduplicated (% On Track to		
Program Specific Strategies		Annual Goal	Qu Q1	arterly Undu _l Q2	olicated Count Q3	Q4		nduplicated (YTD (Q2)			YTD Q1	% On Track to Q2	o Meet Objec Q3	ctives Q4
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age:		Annual Goal				Q4								
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age:	0 - 5 years	Annual Goal				Q4 12								
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes.	0 - 5 years 0 - 5 years		Q1	Q2	Q3		YTD (Q1)	YTD (Q2)	YTD (Q3)	YTD (Q4)	Q1	Q2	Q3 ´	Q4
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate		35	Q1 20	Q2 8 7 6	Q3 12 12 6	12 15 12	YTD (Q1) 20	28	YTD (Q3)	YTD (Q4)	Q1 229%	Q2 160%	Q3 152%	Q4 149%
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending		35 35	Q1 20 30	Q2 8 7 6	Q3 12 12 6 Objectives Met	12 15 12	20 30	28 37	40 49	52 64	Q1 229% 343%	Q2 160% 211% 229%	152% 187% 181% 3	Q4 149% 183% 179%
Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending		35 35	Q1 20 30	Q2 8 7 6	Q3 12 12 6	12 15 12	20 30	28 37	40 49	52 64	Q1 229% 343% 371%	Q2 160% 211% 229% 3 3 3	Q3 152% 187% 181% 3 3	Q4 149% 183% 179%
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me.		35 35	Q1 20 30	Q2 8 7 6	Q3 12 12 6 Objectives Met	12 15 12	20 30	28 37	40 49	52 64	Q1 229% 343%	Q2 160% 211% 229% 3 3	Q3 152% 187% 181% 3 3	Q4 149% 183% 179%
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me. Avenal		35 35	Q1 20 30 26	8 7 6 C 1	12 12 6 Objectives Met otal Objectives	12 15 12	20 30 26	28 37 32	40 49 38	52 64 50	Q1 229% 343% 371% 3 100%	Q2 160% 211% 229% 3 3 3 3 4 100%	Q3 152% 187% 181% 3 100%	Q4 149% 183% 179% 3 100%
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me.		35 35 28	Q1 20 30 26	Representation of the second o	12 12 6 Dijectives Met otal Objective	12 15 12 12	YTD (Q1) 20 30 26	28 37 32	40 49 38	52 64 50	Q1 229% 343% 371% 3 100%	Q2 160% 211% 229% 3 3 3 6 100%	Q3 152% 187% 181% 3 100% Meet Object	Q4 149% 183% 179% 3 100%
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: -0-3: every 6 months -3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me. Avenal Program Specific Strategies		35 35	Q1 20 30 26	8 7 6 C 1	12 12 6 Objectives Met otal Objectives	12 15 12	YTD (Q1) 20 30 26	28 37 32	40 49 38	52 64 50	Q1 229% 343% 371% 3 100%	Q2 160% 211% 229% 3 3 3 3 4 100%	Q3 152% 187% 181% 3 100%	Q4 149% 183% 179% 3 100%
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me. Avenal Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age:		35 35 28	Q1 20 30 26	Representation of the second o	12 12 6 Dijectives Met otal Objective	12 15 12 12	YTD (Q1) 20 30 26	28 37 32	40 49 38	52 64 50	Q1 229% 343% 371% 3 100%	Q2 160% 211% 229% 3 3 3 6 100%	Q3 152% 187% 181% 3 100% Meet Object	Q4 149% 183% 179% 3 100%
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me. Avenal Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate	0 - 5 years	35 35 28 Annual Goal	Q1 20 30 26 Q1	Representation of the second o	12 12 6 Dijectives Met otal Objective	12 15 12 12 12 12	YTD (Q1) 20 30 26 YTD U YTD (Q1)	28 37 32	40 49 38 Count (Cumry YTD (Q3)	52 64 50 Alative) YTD (Q4)	Q1 229% 343% 371% 3 100% YTD Q1	Q2 160% 211% 229% 3 3 3 6 100% % On Track to Q2	Q3 152% 187% 181% 3 100% Meet Object Q3	Q4 149% 183% 179% 3 100%
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me. Avenal Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending	0 - 5 years 0 - 5 years	35 35 28 Annual Goal	Q1 20 30 26 Q1 Q1	Reserved to the second	Q3 12 12 6 Objectives Met otal Objective	12 15 12 18 18 19 19 19	YTD (Q1) 20 30 26 YTD U YTD (Q1) 0	28 37 32 Induplicated (YTD (Q2) 1	40 49 38 Count (Cum YTD (Q3)	52 64 50 Allative) YTD (Q4) 13	Q1 229% 343% 371% 3 100% YTD 0 Q1 0%	Q2 160% 211% 229% 3 3 3 6 100% % On Track to Q2	Q3 152% 187% 181% 3 100% Meet Object Q3 67%	Q4 149% 183% 179% 3 100% ctives Q4 65%
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: -0-3: every 6 months -3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me. Avenal Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: -0-3: every 6 months -3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes.	0 - 5 years 0 - 5 years	35 35 28 Annual Goal 20	Q1 20 30 26 Q1 0	Representation of the second o	Q3 12 12 6 Objectives Met otal Objectives Olicated Count Q3 9 4 4	12 15 12 12 15 12 12 15 12 12 12 12 12 12 12 12 12 12 12 12 12	YTD (Q1) 20 30 26 YTD U YTD (Q1) 0 10	28 37 32 Induplicated (YTD (Q2) 1 12	40 49 38 Count (CumryTD (Q3) 10 16	52 64 50 Allative) YTD (Q4) 13	Q1 229% 343% 371% 3 100% YTD Q1 0% 200%	Q2 160% 211% 229% 3 3 3 5 100% % On Track to Q2 10%	Q3 152% 187% 181% 3 100% Meet Object Q3 67% 107%	Q4 149% 183% 179% 3 100% stives Q4 65% 90%
Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me. Avenal Program Specific Strategies Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes. Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending	0 - 5 years 0 - 5 years	35 35 28 Annual Goal 20	Q1 20 30 26 Q1 0	Q2 8 7 6 (1) arterly Undul Q2 1 2	Q3 12 12 6 Objectives Met otal Objective	12 15 12 12 15 12 12 15 12 12 12 12 12 12 12 12 12 12 12 12 12	YTD (Q1) 20 30 26 YTD U YTD (Q1) 0 10	28 37 32 Induplicated (YTD (Q2) 1 12	40 49 38 Count (CumryTD (Q3) 10 16	52 64 50 Allative) YTD (Q4) 13	Q1 229% 343% 371% 3 100% YTD Q1 0% 200%	Q2 160% 211% 229% 3 3 3 5 100% % On Track to Q2 10% 120% 150% 2 2	Q3 152% 187% 181% 3 100% Meet Object Q3 67% 107% 133% 2	Q4 149% 183% 179% 3 100% stives Q4 65% 90%

Kettleman City

Program Specific Strategies			(Quarterly Und	luplicated Co	unt	YTD L	Induplicated	Count (Cum	ulative)	YTD 9	% On Track to	o Meet Obje	ctives
		Annual Goal	Q1	Q2	Q3	Q4	YTD (Q1)	YTD (Q2)	YTD (Q3)	YTD (Q4)	Q1	Q2	Q3	Q4
Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months	0 - 5 years	10	2	0	1	1	2	2	3	4	80%	40%	40%	40%
Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes.	0 - 5 years	10	2	2	0	1	2	4	4	5	80%	80%	53%	50%
Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me.		8	2	2	0	1	2	4	4	5	100%	100%	67%	63%
Quarterly Unduplicated Count = Count of first time participants per quarter (excludes counts of continuing clien	nts)				Objectives Total Object				•		1	1	0) }

Quarterly Unduplicated Count = Count of first time participants per quarter (excludes counts of continuing clients)

Annual Goal = Annual Target for unduplicated participants

YTD Unduplicated Count (Cumulative) = Unduplicated count of clients served through the quarter end

YTD % On Track to Meet Objectives = Unduplicated count of clients served through the quarter end relative to the adjusted quarter target

10 15

67%

33%

3

11

15

73%

0%

Parent & Me Services - Targets

Н	а	n	f	O	r	d

	namoru					
	Program Specific Strategies			Adjusted Ta	rget	
		Annual	Q1	Q2	Q3	Q4
Healthy Children	Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months	42	10.5	21	31.5	42
Ш	Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes.	42	10.5	21	31.5	42
ECE	Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me.	34	8.5	17	25.5	34
	Corcoran					
	Program Specific Strategies			Adjusted Ta	raet	
		Annual	Q1	, Q2	Q3	Q4
Healthy Children	Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months	35	8.75	17.5	26.25	35
	Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes.	35	8.75	17.5	26.25	35
ECE	Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me.	28	7	14	21	28
	Lemoore					
	Program Specific Strategies			Adjusted Ta	rget	
		Annual	Q1	, Q2	Q3	Q4
Healthy Children	Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months	35	8.75	17.5	26.25	35
ECE	Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes.	35	8.75	17.5	26.25	35
<u> </u>	Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me.	28	7	14	21	28

Avenal

Program Specific Strategies			Adjusted Target							
		Annual	Q1	Q2	Q3	Q4				
	velopmental screenings to children 0-5 in COVID appropriate format, according to age: 6 months 12 months	20	5	10	15	20				
ய COVID app	ldren 0-5* with early childhood education and school readiness instruction propriate format through Parent & Me classes.	20	5	10	15	20				
ш Provide mo	odeling parenting and school readiness instruction COVID appropriate arents attending Parent & Me.	16	4	8	12	16				

Kettleman City

	Program Specific Strategies	Adjusted Target							
		Annual	Q1	Q2	Q3	Q4			
Healthy	Provide developmental screenings to children 0-5 in COVID appropriate format, scheduled according to age: •0-3: every 6 months •3-5: every 12 months	10	2.5	5	7.5	10			
	Provide children 0-5* with early childhood education and school readiness instruction COVID appropriate format through Parent & Me classes.	10	2.5	5	7.5	10			
EC	Provide modeling parenting and school readiness instruction COVID appropriate format to parents attending Parent & Me.	8	2	4	6	8			

UCP Special Needs Services

Program Specific Strategies		Quarterly Unduplicated Count			YTD Unduplicated Count (Cumulative)				YTD % On Track to Meet Objectives				
	Annual Goal	Q1	Q2	Q3	Q4	YTD (Q1)	YTD (Q2)	YTD (Q3)	YTD (Q4)	Q1	Q2	Q3	Q4
ହୁ ରୁ Provide inclusion opportunities for families in the Parent & Me Program. (In COVID-19 appropriate format.)	78	26	16	0	6	26	42	42	48	133%	108%	72%	62%
Provide parent mentorship support and education at Parent & Me Programs	150	36	26	12	4	36	62	74	78	96%	83%	66%	52%
Provide Special Needs In-service Training to Early Care & Education Providers to support services in an integrated fashion. (In COVID-19 appropriate format.)	45	31	5	20	0	31	36	56	56	276%	160%	166%	124%
Provide screenings of children 0-5 for referral to appropriate services. (In COVID-19 appropriate format.)	32	9	1	6	19	9	10	16	35	113%	63%	67%	109%
Provide follow-up screenings for children 0-5 who do not qualify under IDEA funding to determine if qualifiers are now met. (In COVID-19 appropriate format.)	20	1	10	0	21	1	11	11	32	20%	110%	73%	160%
Quarterly Unduplicated Count = Count of first time participants per quarter (excludes counts of continuing clients) Objectives Met Total Objectives						3 5	3 5	1	5				

Quarterly Unduplicated Count = Count of first time participants per quarter (excludes counts of continuing clients) Annual Goal = Annual Target for unduplicated participants
YTD Unduplicated Count (Cumulative) = Unduplicated count of clients served through the quarter end
YTD % On Track to Meet Objectives = Unduplicated count of clients served through the quarter end relative to the adjusted quarter target

UCP Special Needs Services - Targets

	Program Specific Strategies			Adjusted Ta	rget	
		Annual	Q1	Q2	Q3	Q4
re and	Provide inclusion opportunities for families in the Parent & Me Program. (In COVID-19 appropriate format.)	78	19.5	39	58.5	78
· Childcare Education	Provide parent mentorship support and education at Parent & Me Programs	150	37.5	75	112.5	150
Early C	Provide Special Needs In-service Training to Early Care & Education Providers to support services in an integrated fashion. (In COVID-19 appropriate format.)	45	11.25	22.5	33.75	45
Healthy Children	Provide screenings of children 0-5 for referral to appropriate services. (In COVID-19 appropriate format.)	32	8	16	24	32
Hea	Provide follow-up screenings for children 0-5 who do not qualify under IDEA funding to determine if qualifiers are now met. (In COVID-19 appropriate format.)	20	5	10	15	20

UCP Special Needs Services

Program Specific Strategies		Quarterly Unduplicated Count				YTD Unduplicated Count (Cumulative)				YTD % On Track to Meet Objectives				
_		Annual Goal	Q1	Q2	Q3	Q4	YTD (Q1)	YTD (Q2)	YTD (Q3)	YTD (Q4)	Q1	Q2	Q3	Q4
Systems Integrations & Alignment	Screen all 211 callers to determine which callers have a child 0-5 years in their household.	1500	750	609	590	516	750	1359	1949	2465	200%	181%	173%	164%
	Conduct <u>follow-up calls</u> with families that include a child 0-5 years of age to determine whether the family received services requested during initial 211 call and determine if additional community resource information is needed.	100	110	80	95	69	110	190	285	354	440%	380%	380%	354%
	Provide additional <u>referrals</u> to households with children 0-5 years to ensure families have access and linkage to community services to meet basic needs and promote wellness.	175	162	117	182	235	162	279	461	696	370%	319%	351%	398%
	Provide <u>referrals and linkage</u> to services that specifically cater to children 0-5 years, with an emphasis on Family Resource Centers and other programs that prepare children to succeed.	60	576	463	201	173	576	1039	1240	1413	3840%	3463%	2756%	2355%
	Quarterly Unduplicated Count = Count of first time participants per quarter (excludes counts of continuing clients)				Objectives Total Objectives					_	4 4	4 4	4 4	4 4
	Annual Goal = Annual Target for unduplicated participants				•					-	100%	100%	100%	100%

YTD Unduplicated Count (Cumulative) = Unduplicated count of clients served through the quarter end
YTD % On Track to Meet Objectives = Unduplicated count of clients served through the quarter end relative to the adjusted quarter target

Kings United Way - Targets

	Program Specific Strategies	Adjusted Target							
		Annual	Q1	Q2	Q3	Q4			
<u>«</u>	<u>Screen all 211 callers</u> to determine which callers have a child 0-5 years in their household.	1500	375	750	1125	1500			
ons	Conduct <u>follow-up calls</u> with families that include a child 0-5 years of age to determine whether the family received services requested during initial 211 call and determine if additional community resource information is needed.	100	25	50	75	100			
	determine if additional community resource information is needed. Provide additional referrals to households with children 0-5 years to ensure families have access and linkage to community services to meet basic needs and promote wellness.	175	43.75	87.5	131.25	175			
	Provide <u>referrals and linkage</u> to services that specifically cater to children 0-5 years, with an emphasis on Family Resource Centers and other programs that prepare children to succeed.	60	15	30	45	60			



Date of Meeting: August 5, 2025

Study Session

Spotlight On Service: Corcoran Family Resource Center



Date of Meeting: Agenda Item Type: August 5, 2025 Study Session

AGENDA ITEM: Spotlight on Service: Recreation Association of Corcoran – Corcoran Family Resource Center

A. Background/History:

The First 5 Commission has scheduled annual program presentations by funded programs. This offers grantees the opportunity to share their successes, achievements, and progress from the last year.

B. Summary of Request, Description of Project and/or Primary Goals of Agenda Item:

The Corcoran Family Resource Center (CFRC) is a community based family resource center that is providing school readiness services to families residing in Corcoran and surrounding communities. The services offered at the CFRC are developmentally appropriate, and specifically engineered to the age of the child.

C. Timeframe:

The Corcoran Family Resource Center has been a component of the First 5 Kings County strategic plan since FY 2003/2004.

D. Costs:

There is no additional cost associated with this agenda item. CFRC's budget is a part of the approved FY 2025-2026 budget.

E. Staff Recommendation:

Staff recommends that the commission review the information provided by Recreation Association of Corcoran regarding the Corcoran Family Resource Center.

F. Attachments:

 Recreation Association of Corcoran – Corcoran Family Resource Center – PowerPoint Presentation

Corcoran Family Resource Center





Executive Director: Daniel Gonzalez Program Coordinator: Stephany Martinez Child Enrichment Teacher: Luz Perez

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Early Childhood Activities

0-6 months

Tummy Play Time:

A special time for parents and babies to bond through music, movement, and play. Helps babies build early motor skills.

6-24 months

Time to finger paint:

Infants explore colors and textures with paint to create fun crafts, helping them learn through sensory play.



Early Childhood Activities



2-5 years of age

Dramatic play:

Encourages children to learn through play and social interactions giving the opportunity to improve cognitive, social and emotional, and language skills.

Little chef:

Gives the child and parent the opportunity to learn how to prepare a nutritional snack in a healthy and simple way.



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Early Childhood Activities

Let's move and play:

The objective of this class is to get kids to stay active by stretching, dancing, exercising and enjoying outdoor play,

Time for art:

Invites children to explore their creativity through hands-on activities using textures, colors, and clay. It also helps strengthen fine motor skills and encourages self-expression.





Coordinated services

- Parent Café
 - Provides educational workshops for the community about various services that are
 offered to the community.
 - o UCCE Cal-Fresh
 - o Thriving Minds
 - o Kings United Way
 - o Kings View
- · Community Baby Shower
 - Provides expecting mothers with the resources needed during and after their pregnancy while celebrating their upcoming baby.

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Coordinated Services

- UCP Parent & Me
 - This program offers children 0-5 and their parents the ability to strengthen the parent and child's hands-on growth experiences and demonstrates their child's intellectual development.
- ESL English as a Second Language
- -Provides classes to parents wanting to learn the basic English language, it boosts their confidence and allows them to participate more fully with their children and their community.
- Car Seat Check-ups
 - -During a car seat check-up, we demonstrate how to properly install their child's car seat.

Outreach activities

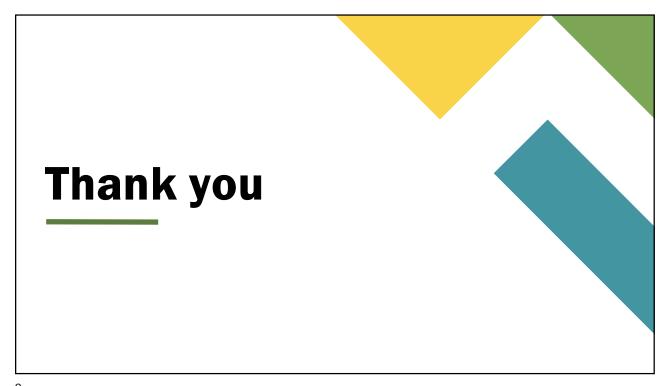
- RAC Family Pool Nights
- Police Night Out
- Corcoran Cotton Festival
- Kings County Resource Fair
- J.G. Boswell Health Fair
- Corcoran's Farmer's Market
- Corcoran Trunk-or-Treat Event



- Provide ongoing mailing to FRC clients to include calendars, brochures and up coming events.
- Provide information, FRC highlights to local newspaper to promote FRC services.

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Date of Meeting: August 5, 2025

Study Session

Executive Director/
Program Manager Report

June-July 2025



Executive Director/Program Manager Report

June-July 2025

Program Officer Report

Administrative Activities

- Regional Home Visiting Technical Assistance workgroups (Collaborative)
- First 5 Association ED Meeting (monthly)
- First 5 Central Valley Regional ED Meeting (monthly)
- o FY 2024/2025 Audit
- KCDPH Accreditation Workforce Development & Staff Retention domain (bimonthly – on hold until Fall2025)
- KCDPH Senior Leadership CHA/CHIP/SMART Goal activities; Collaboration with BHA on BHSA
- o KCDPH Employee Wellness Committee
- Perimenopause/Menopause Workgroup
- o Training FSU Management Training Series, HIPAA, Active Threat
- Dolly Parton Imagination Library –2,200 children registered as of 7/31/2025, with 103 graduates. Presented to California All LPP Meeting: Publicizing Program + Enrollment on 7/15 & 7/16
- Help Me Grow Regional Partnership Agreement Program coordinator position interviews conducted in June. Changed Program Coordinator position to Program Manager, but no additional cost to the partners – savings from not hiring until now & postponing hiring of clerical support for the 1st year.
- Children & Youth Behavioral Health Initiative –
- Kings County Family Support Network Development Planning meetings with consultants; Network Development meetings (monthly through October); Leadership update in November

Meetings, Webinars and Conferences:

- o CYBHI Implementation & Equity Learning Collaborative June 3
- o REDI Core Team Meeting June 5
- o CYBHI Data Collection & Evaluation Learning Collaborative June 10
- o Medi-Cal Learning Community June 10
- o Introductory meeting with External Auditor June 13
- DPIL Homecoming Conference June 17-18
- Heart of the Valley Wrap-up Session June 17
- First 5 CA Program Division Quarterly June 18

- FSU Management Training Series: Situational Leadership June 19
- Family Resource & Support Network Development meeting June 23
- CYBHI Contract Support Meeting June 23
- First 5 Association webinar: Community Pathways in Action: FFPSA Implementation & the Role of First 5's – June 26
- PCORI Maternal Diabetes Advisory Board June 30
- CYBHI Data Collection & Evaluation Learning Collaborative July 1
- Family Resource & Support Network Development meeting July 14
- o CalTRIN Overview of the Protective Factors webinar July 15
- o REDI Core Team Meeting July 17
- Resilience Fund Townhall (First 5 California) July 17
- First 5 Association Fiscal Workgroup July 24
- Family First Prevention Services (FFPS) Program Town Hall: Moving from Conceptualization to Implementation – July 31

Upcoming Events:

- CYBHI Implementation & Equity Learning Collaborative August 5
- o Child Support Services 2nd Annual Summer Kids Day August 7
- o OVCDC and First 5 meeting Program & Community updates August 11
- o Family Resource & Support Network Development meeting August 11
- First 5 California Commission Meeting August 14
- Santa Rosa Rancheria Tachi Yokut Tribe's Tribal Social Services and First 5 meeting - Program & Community updates – August 11
- o CalTRIN Protective Factors webinar: Parental Resilience August 19
- o Children's Data Network First 5 California August 20
- Family Resource & Support Network Development meeting September 8
- o First 5 Leadership Network September 12
- o CIBHS EBP/CDEP Conference September 25-26