AGREEMENT KC-014-19

This Agreement is entered, into between Kitsap County and the Kitsap Public Health District for the Improving the Health of High-Risk Mothers and Children.

I. **Purpose**

This Agreement is for the appropriation of $127,828, for the purpose of augmenting state and federal funding of mental health, chemical dependency and therapeutic court programs and services with the goal of preventing and reducing the impacts of disabling chemical dependency and mental illness by creating and investing in effective, data-driven programs for a continuum of recovery-oriented systems of care per RCW 82.14.460 for the time period January 1, 2019 – December 31, 2019. Funding must be used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services. No funding provided under this Agreement may be used to supplant existing funding for these programs.

II. **Collaboration and Collective Impact**

The Kitsap Public Health District shall take the initiative to work with other systems to reduce fragmentation or duplication and to strengthen working relationships utilizing collective impact strategies. The Kitsap Public Health District will provide quarterly updates on collaborative efforts and outreach activities that will include issues mutually identified by the Kitsap Public Health District and respective systems that can be addressed through collective impact strategies. Examples of such systems include: mental health, aging, veterans, child protection and welfare, adult protection and welfare, education, juvenile justice, housing, employment services, primary health care plans and other publicly-funded entities promoting substance abuse and mental health services.

All entities providing services to working age adults and youth shall establish a connection with the local WorkSource system to ensure people have access to employment training and placement services.

III. **Identification and Coordination of Available Funding Sources**

The Kitsap Public Health District is required to identify and coordinate all available funding resources to pay for the mental health and chemical dependency services funded by this Agreement, including Federal (Medicaid and Affordable Care Act, etc.), State, local, private insurance and other private sources. The 1/10th of 1% funding should be utilized as a Payor of Last Resort.
IV. **Project Description**

This project will provide behavioral health services within the Prevention, Early Intervention level of the continuum of care and addresses the following strategic goals:

- Improve the health status and wellbeing of Kitsap County residents.
- Reduce the incidence and severity of chemical dependency and/or mental health disorders in adults and youth.

This two-tier project has the goal of preventing mental illness, behavioral problems, and future addiction in young children by intervening with families who either have, or are at risk for, substance abuse and/or mental health problems. There are two components to this project 1. Providing Nurse Family Partnership and 2. Improving access to services by utilizing a community health worker to develop and implement innovative outreach strategies for hard to reach populations and continue to strengthen referral systems.

V. **Project Activities**

The Kitsap Public Health District will provide the following for the Nurse Family Partnership (NFP) Program:

- Maintain 0.5 FTE Nurse Family Partnership (NFP) nurse home visitor.
- NFP staff will participate in ongoing training and education as required by NFP Nursing Services Organization.
- NFP supervisor will participate in ongoing training, education, and consultation as required to support quality, fidelity, and specific population needs.
- Existing caseload will be maintained at twelve (12) families.
- Maintain outreach and referral plan to reach target population and maintain caseload.
- Provide Home Visits for first time, low-income pregnant women, mothers and infants.
- New clients will be enrolled before twenty-eight (28) weeks of pregnancy and receive visits according to NFP guidelines.
- Content of home visits will be aligned with NFP guidelines.
- Staff who provide home visits will receive individual reflective supervision.
- All staff will participate in reflective case conferences.
- Supervisors and nurse home visitors will review and utilize their data.
- Data will be used for quality and fidelity monitoring and improvement.

The Kitsap Public Health District will provide the following to improve access to services:

- Staff a bilingual (English-Spanish) Community Health Worker (CHW) who will work with the Parent Child Health (PCH) team of registered nurses, behavioral health specialist, and registered dietician. The CHW will be a frontline public
health worker who is a trusted member of and/or has an unusually close understanding of the community served.

- The CHW will serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.
- Prenatal and postpartum assessments which include depression and Adverse Childhood Experiences (ACEs) screening.
- Health and parenting education.
- Referrals to community resources, case management, and brief counseling.
- Expand outreach efforts to enroll more eligible women.
- Case management activities that can be done by a community health worker (CHW).

VI. Project Design

The Improving Health and Resiliency of High-Risk Mothers and Their Children project (hereafter referred to as “Improving Health project”) includes providing an evidence-based nurse home visiting service to families and strengthening prevention and early intervention infrastructure in Kitsap County. With the use of a best practice evidenced based program and a collective impact approach, this project will improve the health status and wellbeing of Kitsap residents.

The project has two components: 1. Providing evidence-based Nurse Family Partnership (NFP) services to at least twelve (12) low-income, high-risk first-time mothers and their babies (note total number of clients served by NFP annually is 50-60). 2. Improving access to services by utilizing a community health worker (CHW) to develop and implement innovative outreach strategies for hard to reach populations and continue to work with community partners to strengthen referral systems.

The NFP program is a parental and infancy home visitation service that aims to improve the health, well-being, and self-sufficiency of first time parents and their children. Program activities are designed to link families to needed services, promote good decision making, assist families in making healthy choices, and help women build supportive relationships with families and friends. NFP nurses assess for signs and symptoms of Substance Use Disorders (SUDs), mental illness, and Adverse Childhood Experiences (ACEs) with every client. The nurses provide education to promote health and, because of their trusting relationships with their clients, they are often able to support a parent’s readiness to seek needed treatment services.

The CHW is an established liaison between health/social services and the community and has facilitated access to services with culturally appropriate strategies. The CHW for this project is bilingual in English and Spanish and has been able to provide targeted outreach to Kitsap’s Spanish speaking population. In this proposal the CHW will continue to outreach to our Spanish speaking population and will identify other hard to reach populations with the plan to develop culturally appropriate strategies for engagement. In addition to outreach, the CHW has been integral in the development of
new relationships with community partners. These partners all contribute to our prevention and early intervention infrastructure in Kitsap. An additional activity for the proposal this year includes a system gap analysis to identify areas for improvement related to access and services for pregnant and childbearing age women that need mental health and substance abuse treatment. This information will be used to open dialogue with partners to address areas of need using a collective impact approach.

VII. Project Outcomes and Measurements

The Kitsap Public Health District will participate in the Evaluation Plan for Treatment Sales Tax Programs. Programs or services implemented under the Treatment Sales Tax are monitored by the Citizens Advisory Committee. The Kitsap Public Health District will have an evaluation plan with performance measures developed in partnership with Kitsap Public Health District Epidemiologist. The emphasis will be on capturing data at regular intervals that can be used to determine whether Treatment Sales Tax funded programs met expectations. Some common measures will be identified that will be reported on. Evaluation efforts must include standardized data collection and reporting processes that produce the following types of information:

- Quantity of services (outputs).
- Level of change occurring among participants (outcomes).
- Return-on-investment or cost-benefit (system savings) if evidence-based.
- Adherence to the model (fidelity).
- Common measures (to be identified by the Citizens Advisory Committee and Kitsap Public Health District staff that all programs must report on).

Data will be collected to monitor the following goals and objectives identified by the Kitsap Public Health District:

Goal 1: Prevent mental illness, behavioral problems, and future addiction in young children by intervening with families who either have or are at risk for substance abuse and/or mental health problems.

Objective #1: Funded case load of at least twelve (12) mothers and infants will be maintained through December 31, 2019.

Objective #2: Maintain an average retention rate of 85% for NFP clients over the course of the program year (January-December 2019).

Objective #3: By December 31, 2019 CHW has at least 200 unduplicated outreach and case management encounters.

Objective #4: At least 90% of NFP clients with a potential or identified mental health problem will show improvement in knowledge, behavior, or status as measured by the Omaha System Problem Rating Scale at graduation from services.
Objective #5: At least 90% of NFP clients with a potential or identified substance use problem will show improvement in knowledge, behavior, or status as measured by the Omaha System Problem Rating Scale at graduation from services.

Objective #6: At least 90% or more of NFP clients with a parenting/caretaking problem will show improvement in knowledge, behavior, or status as measured by the Omaha System Problem Rating Scale at graduation from services.

Goal #2: NFP program maintains high fidelity to the NFP evidence-based model.

Objective #7: By December 31, 2019, KPHD will maintain required high fidelity to the NFP model, as required by the National Service Office.

Objective #8: By December 31, 2019, NFP CAB completes at least 5 outreach activities on its outreach plan (outreach includes educational presentations, advocacy efforts to increase funding, and promotional events).

Objective #9: Survey 10 past clients that have graduated the program at least 12 months prior.

VIII. Data Collection

The Kitsap Public Health District will provide a Quarterly Report to the Kitsap County Human Services Department by April 30, July 31, October 31, 2019 and January 31, 2020 each year funding is received under this grant detailing progress made on program outcomes during the quarter, what other funding sources have been investigated, and what the future potential for alternative funding is. In addition, outcomes identified in the Evaluation Plan for Mental Health, Chemical Dependency and Therapeutic Court Programs will be reported.

IX. Billing and Payment

Payments to Kitsap Public Health District shall be requested using an invoice form, which is supplied by the County. Kitsap Public Health District invoices must be sent to the County by the fifteenth (15th) calendar day after the end of the month.

The Kitsap Public Health District is authorized to receive payments in accordance with the cost reimbursable budget included under this Agreement. The Kitsap Public Health District will comply with the following standards as applicable.

Reimbursement Request – Upon Completion of each month, the Kitsap Public Health District must provide to the County a written explanation of expenditures which are less than 90% of, or more than 115% of the year-to-date budgeted total.
All payments to be made by the County under this Agreement shall be made to:

Kitsap Public Health District
345 6th Street, Suite 300
Bremerton, WA 98337

The Agreement shall not exceed the total amount indicated on the cover sheet of this Agreement and any other modifications hereof.

X. **Duration**

This agreement is in effect from January 1, 2019 – December 31, 2019.

XI. **Amendments**

This agreement may only be modified by one or more written amendments duly approved and executed by both parties.

XII. **Attachments**

The parties acknowledge that the following attachments constitute a part of this agreement:

**Attachment A:** Budget
This Agreement shall be effective January 1, 2019.

DATED this 7th day November, 2018.

KITSAP PUBLIC HEALTH DISTRICT

Keith Grellner
Administrator

DATED this 26th day NOVEMBER 2018.

KITSAP COUNTY BOARD OF COMMISSIONERS

ROBERT GELDER, Chair

EDWARD E. WOLFE, Commissioner

CHARLOTTE GARRIDO, Commissioner

ATTEST:

Dana Daniels, Clerk of the Board

Approved as to form by the Prosecuting Attorney's Office
**ATTACHMENT A: BUDGET SUMMARY/ESTIMATED EXPENDITURES**

**Kitsap County Human Services Department**  
**Expenditure Plan: January 1, 2019 - December 31, 2019**

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