

Department of Benefits and Family Support

Department of Disability and Aging Services

MEMORANDUM

TO: HUMAN SERVICES COMMISSION

THROUGH: TRENT RHORER, EXECUTIVE DIRECTOR

FROM: JOAN MILLER, DEPUTY DIRECTOR

ESPERANZA ZAPIEN, DIRECTOR OF CONTRACTS

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P.O. Box 7988 San Francisco, CA 94120-7988 www.SFHSA.org

DATE: JUNE 16, 2023

SUBJECT: NEW GRANT: **SAFE AND SOUND** (NON-PROFIT) TO

PROVIDE MANDATED REPORTER TRAINING,

INTERVENTION SERVICES, MULTI-DISCIPLINARY

TEAMS FOR COMMERICALLY SEXUALLY

EXPLOITED CHILDREN AND YOUTH (CSEC) AND

SYSTEM IMPROVEMENTS

GRANT TERM: 7/1/23 to 6/30/28

 GRANT
 New
 Contingency
 Total

 AMOUNT:
 \$3,979,550
 \$397,955
 \$4,377,505

ANNUAL \$795,910

AMOUNT

Funding Source | County | State | Federal | Contingency | Total

FUNDING: \$2,706,094 \$596,933 \$675,713 \$397,955 \$4,377,505

PERCENTAGE: | 68% | 15% | 17%

The Department of Benefits and Family Support (BFS) requests authorization to enter into a new grant with Safe and Sound (formerly the San Francisco Child Abuse Prevention Center) for the period of July 1, 2023 to June 30, 2028 in an amount of \$3,979,550 plus a 10% contingency for a total grant amount not to exceed \$4,377,505. The purpose of this grant is 1) to educate the public about child abuse and child abuse reporting requirements and to provide intervention services for families at risk of abuse and/or neglect, including commercially sexually exploited children and young adults (CSEC/YA) and 2) continue community education and training on child abuse to the most at-risk populations.



London Breed Mayor

Trent RhorerExecutive Director

Background

The Child Abuse Prevention Center has been designated by the Board of Supervisors as the county's Child Abuse Council since 1982, and as such, has responsibility to:

- 1. Facilitate interagency cooperation and coordination in the prevention, detection, treatment, and legal processing of child abuse cases;
- 2. Promote public awareness of the abuse and neglect of children and of the resources available for intervention and treatment;
- 3. Encourage and facilitate the training of professionals in the detection, treatment, and prevention of child abuse and neglect;
- 4. Recommend improvements in services to families and victims; and
- 5. Encourage and facilitate community support for child abuse and neglect programs.

Services to be Provided

Safe & Sound will deliver a broad range of services related to community education, system improvement, and direct intervention to families. Safe and Sound will continue to provide the following:

- **Community Training**: Provide community and professional education on child abuse prevention to a broad audience, including mandated reporters, elementary school children, teachers, and staff, and parents and caregivers. Professional training and technical support will be provided to community agencies.
- **System Improvement:** Convene, facilitate, and support interagency partners, both within the county and regionally, to improve systemic efforts in preventing child abuse. The Children's Advocacy Center on 3rd Street is the focus for this work.
- Intervention Services: Provide clinical services including crisis intervention, individual and family therapy, group supports, and care management services to families. Safe & Sound's drop in center in the Haight Ashbury district offers a variety of services including a drop in center, respite, and the agency's clinical services.
- **CSEC MDT**: Convene the interagency multi-disciplinary team to identify and address the needs of children and youth in or at risk of sexual exploitation, and other efforts related to this work.

For more specific information regarding the services to be provided, please refer to the attached Appendices A.

Safe & Sound has worked closely with HSA and other interagency partners for many years on these programs and improvement efforts. They have provided education and support to thousands

of individuals and worked effectively on a number of interagency efforts to prevent and address child abuse.

Selection

Grant was competitively bid in RFP 1033, released in February 2023.

Funding

Funding for these grants is provided by Federal and State and local General Fund funding.

Attachments

Appendices A – Services to be Provided Appendix B – Program Budget

Appendix A - Services to be Provided Safe & Sound

Mandated Reporter Training, Intervention Services, Multi-Disciplinary Team for Commercially Sexually Exploited Children and Young Adults, and System Improvements 7/1/23-6/30/28

I. Purpose of Grant

These services will:

- A. Educate mandated reporters about child abuse and child abuse reporting requirements, provide the community, including child-serving professionals, parents, and children, with knowledge and tools to prevent abuse and to speak up when it happens, and provide technical assistance and prevention and awareness training in the areas of child abuse, children and young adults who have been commercially sexually exploited (CSEC/YA), and other relevant topics;
- B. Maintain and improve partnerships to prevent and respond to child abuse in San Francisco in a more effective and coordinated manner;
- C. Provide prevention and intervention services to families at risk of abuse and neglect in order to improve outcomes for both children and their families by enhancing their protective factors, and thereby reducing the risk of child abuse neglect;
- D. Serve as a subcommittee of the CSEC Steering Committee by coordinating ongoing multi-disciplinary team meetings specifically to address issues related to children and young adults who have been commercially sexually exploited (CSEC/YA). Depending on current needs and important issues, these multidisciplinary meetings will discuss, among a variety of topics, the following:
 - a. Specific cases of children and youth, who are being sexually trafficked or have indicators suggesting they are at high risk of being trafficked, in order to provide case coordination among the various organizations, and to focus on the complex emotional, physical and behavioral needs of young person;
 - b. Individual, community, and systemic approaches to and recommendations for prevention of and response to commercial sexual exploitation; and
 - c. Systems improvement related to CSEC/YA.

II. Definitions

AB 12 Youth, ages 18-21 who have opted to continue to receive Child

Welfare Services

BHS Behavioral Health Services, part of Department of Public Health

Behavioral frediti Services, part of Department of Fubite frediti

7/1/23-6/30/28 Appendix A CAC Children's Advocacy Center of San Francisco

CARBON Contracts Administration Reporting, Billing Online system

CASARC Child and Adolescent Support, Advocacy and Research Center

CHILD ABUSE COUNCIL

A legislatively controlled requirement that each county in California designate a Child Abuse Council, tasked with system coordination,

community education, and policy

CSEC Commercially Sexually Exploited Children

CSEC/YA Commercially Sexually Exploited Children/Young Adult

DPH San Francisco Department of Public Health

FCS Family and Children's Services, a division of HSA

FCS-LINKED Clients that have active/open cases with FCS at the time of

engagement.

GRANTEE Safe & Sound

HSA Human Services Agency of San Francisco

PRIMARY PREVENTION TRAINING Child Safety Awareness, a child abuse prevention program for children and the adults actively supporting them. The program focuses on elementary school children in the San Francisco Unified School District (and occasionally middle-school students) and provides them with knowledge, tools, and assertiveness skills to protect themselves in unsafe and uncomfortable situations. Seminars for adults reinforce the lessons taught to the children and educate

adults about child abuse and its prevention.

PROFESSIONAL Master's Level-MFT, MSW, LCSW; in some cases, a B.A. with a

Master's in progress with supervision by an LCSW.

MANDATED REPORTER

Those persons mandated by law to report suspected incidents of child abuse. These include school teachers and administrators, child care workers, substance abuse treatment staff, nurses, social workers, shelter and domestic violence staff, animal care and control officers, dentists, physicians, law enforcement personnel, and staff of child-and youth-serving agencies and faith-based organizations.

CSEC MDT

A Multi-Disciplinary Team, designed to provide system improvement strategies and recommendations for CSEC/YA as well as identification, assessment, service and placement recommendations for CSEC/YA that are not involved in FCS and the provision of services, including system improvement, to design a case plan to increase stabilization and continued engagement of CSEC/YA.

III. Target Populations

The target population is San Franciscans of all ethnicities with the following unique characteristics:

There are unique target populations for each of the four service areas.

- 1. For training and public awareness, the target population is mandated reporters for child abuse, elementary school children and the adults actively involved with them, including parents, families, and child-serving professionals as well as the general public.
- 2. For the systems-improvement services, the target population is local public, nonprofit, and private agencies that prevent and/or respond to child maltreatment.
- 3. For the intervention services, the target population is families with children residing in San Francisco under age 18 at risk for abuse and/or neglect.
- 4. For the CSEC/YA multi-disciplinary team meetings, the target population includes professionals working with CSEC/YA, up to age 21, as well as those CSEC/YA that are referred to the MDT.

IV. Location and Time of Services

Safe & Sound operates out of two San Francisco locations:

- 1757 Waller Street and 3450 Third Street, Building 2.
- 3450 3rd Street, San Francisco. This location will house the CSEC MDT meetings when they return to in-person. Multidisciplinary team functions take place Monday through Friday from 9 AM to 5 PM.

Mandated Reporter Training, Intervention Services, and System Improvement Services will be housed at both Safe & Sound sites and take place in the community. Hours of operation and training locations may vary but will be a minimum of 20 hours a week, based upon client and target population needs.

Some services are offered virtually due to continued effects of the pandemic and changing needs of the target populations.

V. Description of Services Community Education

Through the Child Abuse Prevention Council, Grantee will perform the following community education services:

- A. Provide training on child abuse, its prevention, and child abuse reporting to mandated reporters. Grantee will regularly schedule training at various sites in the community and will explore other methods of disseminating knowledge and education on these issues, including additional online communications.
- B. Teach safety lessons to elementary school children and provide resources and technical assistance to adults in the school community, including social workers, nurses, and teachers.
- C. Provide training to adults on child abuse and child abuse prevention; talk to children about safe and unsafe situations and respond to children if abuse is disclosed. Grantee will schedule trainings with diverse groups in the community.
- D. Provide technical support to community agencies as requested, including mandated reporting, child abuse prevention and response resources, such as training, family supports, and other programs.
- E. Provide CSEC overview training. The goal of the training is to support community providers, who work with children and families, to better understand their role in relation to CSEC youth, as well as identify and respond to child exploitation.
- F. Collaborate with FCS when needed and joint planning to enhance mandated reporter and primary prevention trainings, support Grantee's technical assistance capabilities, and provide increased collaboration on developments in child abuse prevention and response, such as a trauma-informed approach, an enhanced focus on prevention in child welfare, and reforms to mandated reporting.
- G. Provision of services does not include providing legal services to City departments/staff
 - a. Grantee will not represent itself/act as legal counsel for the City.
 - b. Grantee will refer to the City Attorney's Office, any legal issues that develop/arise.

Systems Improvements

Through Safe & Sound's Child Abuse Prevention Council, Grantee will provide the following System Improvement services:

- A. Co-Chair, if appropriate, and attend meetings of the County Child Death Review Committee and work to ensure system coordination and follow up related to child deaths and trends in San Francisco.
- B. Co-Chair, if appropriate, and attend meetings that pertain to response to and prevention of child abuse and neglect in the community, such as the Family Violence Council.
- C. Participate in the Bay Area Regional Coalition of Child Abuse Council meetings.

Intervention Services

Grantee will provide one or more of the following therapeutic services:

- A. Formal Clinical Intervention Services includes the following:
 - 1. Crisis intervention: Assessment and prioritization of needs, linkage to resources, services or support to deescalate crisis and physically or emotionally stabilize family members thereby assisting the family in regaining their previous level of functioning.
 - 2. Supportive Counseling: Formal written assessment with intensive counseling by professional staff to address issues and behaviors that negatively affect the health, safety and well-being of the family and/or individual family members. Where appropriate, families will receive: Individual therapy, Family therapy, Play therapy, Drop-in supportive counseling and Therapeutic childcare
- B. Care Management: Intervention and coordination of action in partnership with a parent (child or family members) to help the family identify priorities and develop a plan of action to address the problems that are affecting the socioeconomic, basic needs, health, safety or well-being of a family or individual family member. Intervention includes completion of a comprehensive strength-based assessment; development of service plan and monitoring of progress towards identified goals and outcomes with an overarching focus on building each family's Protective Factors. Care manager roles and functions include advocating, mediating, active listening, and information and referrals.
- C. Groups: Facilitate activity that provides parents/caregivers the opportunity to share information and create problem-solving strategies during a supportive shared group experience. Specific groups may include but are not limited to Single Parent Network, parenting skills and education workshops, and facilitated social activities.

Multi-Disciplinary Team for CSEC/YA

Safe & Sound will work closely with both FCS and the CSEC Steering Committee to organize, coordinate, chair, and facilitate the CSEC Ongoing multi-disciplinary team (MDT) process to: (a) increase agency collaboration, communication, and coordination around young people being sexually trafficked or at high risk of being trafficked; (b) determine strategies for prevention of and response to CSEC and provide related recommendations; and (c) identify systems issues.

All work is to be developed within the guiding principles for CSEC.

- A. The coordination of the CSEC MDT will include the following activities:
 - 1. Active participation in CSEC Steering Committee.
 - 2. Develop an understanding of regional and national practices around MDTs for CSEC and incorporate as relevant.
 - 3. Develop relationships with other counties to share best practices regarding CSEC and coordinate policies and services.
 - 4. Establish guidelines and decision-making processes.
 - 5. Serve as a subcommittee of the CSEC Steering Committee. Safe & Sound will facilitate workgroup meetings for partners to work collectively on prevention-related goals or systems-issues identified by members of the CSEC Workgroup and/or members of the CSEC Steering Committee. The frequency of the meeting and duration of the workgroup will be determined by the workgroup participants.
 - 6. Coordination of multidisciplinary team case review meetings on an needed basis, as noted above, including scheduling, staffing support, facilitation, and minutes/action items. Meetings shall be:
 - a. Victim centered
 - b. Trauma informed
 - c. Strengths based
 - d. Developmentally appropriate
 - e. Culturally, linguistically, and LGBTQ competent and affirming
 - 7. Engage stakeholders for the multidisciplinary team meeting that includes, but is not be limited to, the following participants, as specified in CSEC Protocol:
 - a. Child Welfare
 - b. Safe & Sound
 - c. Huckleberry House (CSEC crisis intervention specialists)
 - d. Juvenile Probation
 - e. Mental Health (BHS/DPH)
 - f. CASARC Medical (DPH)

7/1/23-6/30/28 Appendix A

- g. Education/San Francisco Unified School District
- 8. Connect stakeholders to community-based organizations serving this population in order to identify and connect CSEC youth to services.

VI. Service Objectives

<u>Prevention and Response Services: Community Education and Systems Improvements</u>

- A. Annually provide mandated reporter training to a minimum of $\underline{1,400}$ mandated reporters in the community.
- B. Annually provide a minimum of <u>45</u> training sessions for mandated reporters: *i.e.* school teachers, child care workers, substance abuse staff, nurses, social workers, shelter and battered women staff, animal care and control officers, dentists, physicians, law enforcement, and staff of child- and youth-serving agencies and faith-based organizations.
- C. Annually provide primary prevention training (Child Safety Awareness) to children at a minimum of <u>15</u> schools.
- D. Annually provide primary prevention training to a minimum of <u>200</u> adults that interact with children such as parents and/or professionals.
- E. Annually provide CSEC overview training to a minimum of $4\underline{0}$ providers that work with children and families.
- F. Coordinate relevant meetings with FCS when needed to ensure up-to-date information from CPS is being related to the community, and systems issues are referred back to CPS as well as to discuss other issues related to the prevention of and response to child abuse.
- G. Annually attend and co-chair, if appropriate, <u>4</u> meetings of the County Child Death Review Committee.
- H. Annually co-chair or attend a minimum of $\underline{\mathbf{6}}$ inter-agency meetings that pertain to response to or prevention of child abuse and neglect in the community, such as the Family Violence Council.
- I. Annually attend a minimum of **6** Bay Area Regional Coalition of Child Abuse Council meetings

Intervention Services

A. Safe & Sound will serve a minimum of <u>150</u> unduplicated parents/caregivers annually.

- B. Safe & Sound will provide clinical services to 40 unduplicated families.
- C. Safe & Sound will provide care management to <u>100</u> unduplicated families.
- D. Safe & Sound will provide groups to **80** unduplicated families annually.

Multi-Disciplinary Team for CSEC/YA

- **A.** Conduct CSEC MDT case review meetings on an as needed basis, reviewing 100% of the appropriate non-FCS involved referrals (Each meeting will have sign-in sheets, agendas, minutes, and action steps; Track and follow-up on action steps.)
- B. Attend and actively participate in annual CSEC Steering Committee meetings and State CSEC Convening. Work with the CSEC Steering Committee to provide accountability for recommendations from the CSEC Workgroup/Subcommittee on systems-issues, prevention strategies, and improvement of response to CSEC. Annually, provide a written report for the CSEC Steering Committee to provide a summary to highlight successes and challenges on addressing systems-issues, implementing prevention strategies, and improving the response to CSEC. The report shall also include recommendations on how to improve systemic issues and challenges.
- C. Whenever there is an active CSEC working group, create a work plan of goals and activities for the workgroup and provide updates to the CSEC Steering Committee annually on this plan.

VII. Performance Outcomes Objectives

<u>Prevention and Response Services: Community Education and Systems Improvements</u>

- A. In surveys conducted by the Grantee for mandated reporter training, a minimum of 80% of respondents will indicate that the training increased their knowledge regarding child abuse and child abuse reporting requirements.
- B. In surveys conducted by the Grantee for mandated reporter training, a minimum of <u>75%</u> of respondents will state that they will report any suspected child abuse as a result of the training.
- C. In surveys conducted by the Grantee for Child Safety Awareness training, the professionals working with the children receiving this training will state that a minimum of 80% of these children received lasting tools to help them remain safe in unsafe and uncomfortable situations.
- D. In surveys conducted by the Grantee, <u>75%</u> of the adults receiving training on child abuse and its prevention will indicate that the training increased their

knowledge of child abuse, and a minimum of <u>70%</u> will state that they are more likely to take action to prevent abuse as a result of the training.

Intervention Services

- A. <u>80%</u> of recipients, who respond to an anonymous satisfaction survey, of services will rate the services at least a three on five-point scale including measures of: Comfortable Environment, Responsiveness of Staff, Availability of Staff, and Effectiveness of Staff.
- B. <u>65-75%</u> of parents receiving care planning services will show improvement on their Protective Factors, as measured by completion of a pre and post evaluation tool. Protective Factors include: Parental Resilience, Knowledge of Parenting & Child Development, Social Connections, Concrete Support, and Social & Emotional Competence of Children.

Multi-Disciplinary Team for CSEC/YA

The performance of the multi-disciplinary team will be evaluated via a revised member survey on at least an annual basis to improve facilitation, collaboration and functioning of the team. It is expected that 80% of survey respondents will report:

A. Increased creative problem-solving to address prevention recommendations and/or systems issues of CSEC/YA.

VIII. Grantee Responsibilities

- A. Grantee will provide public outreach to increase awareness of Safe & Sound programs and services.
- B. Grantee will provide professional supervision of all staff (professional and paraprofessional) interns and volunteers, and psychiatric consultation as needed.
- C. Grantee will provide mandated reporter training to all employees working directly with children. Should a case require a referral back to CPS, the grantee will contact HSA.
- D. Report all incidents of suspected child abuse and neglect as required by law.
- E. Grantee will develop and maintain adequate language capacity and make appropriate referrals for other languages.

IX. Reporting

- A. Grantee will provide a **monthly** metrics in the CARBON database by the 15th of each following month. Metrics are as follows:
 - Number of mandated reporter trainings provided that month
 - Number of unduplicated parents/caregivers seen that month
 - Number of unduplicated individuals that received the CSEC overview training if a training occurred during the month of the reporting period.
- B. Grantee will provide a quarterly report of activities referenced in Sections VI and VII Service Objectives and Performance Outcomes Objectives.

Grantee will enter the quarterly metrics in the CARBON database by the 15th day of the month following the reporting period. Metrics should be for both the current quarter and cumulative (fiscal year-to-date).

- C. Grantee will provide an **annual** report summarizing the contract activities, referencing the tasks as described in *Sections VI & VII Service and Performance Outcome Objectives*. This report will also include accomplishments and challenges encountered by the Grantee. Grantee will enter the annual metrics in the CARBON database by the 15th of the month following the end of the program fiscal year (July 15). A copy of the annual report should be uploaded to CARBON and emailed to the Program Manager and Program Analysts. Note: Do not upload any client confidential information to CARBON.
- D. Grantee will provide an annual report to include accomplishments and challenges/obstacles and any recommendations for CSEC interagency work to support CSEC/YA as noted above in Section VI, <u>Multi-Disciplinary Team for CSEC/YA</u>Grantee will submit report to FCS Program Analyst and the CSEC Steering Committee by the 15th of the month following the end of the program fiscal year (July 15).
- E. Grantee may be asked to provide Ad Hoc reports to the Department.
- F. For assistance with reporting requirements or submission of reports, contact:

FCS Program Manager, Tommy.Pazhempallil@sfgov.org

FCS Program Analyst, Karina.Zhang@sfgov.org

Senior Contracts Manager, Johanna.Gendelman@sfgov.org

X. Monitoring

- A. <u>Program Monitoring</u>: Program monitoring will include review of any backup documentation for reporting progress towards meeting service and performance outcome objectives, including documentation supporting client eligibility for services.
- B. <u>Fiscal Compliance and Grant Monitoring</u>: Fiscal monitoring will include review of the Grantee's organizational budget, the general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subgrants, and MOUs, and the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

Appendix B, Page 1

HUMAN SERVICES AGENCY BUDGET SUMMARY BY PROGRAM

| Name | | | | Term | | |
|--|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|
| Safe&Sound | | | | | | 7/1/23 to 6/30/2028 |
| (Check One) New Renewal | Modification | | | | | |
| If modification, Effective Date of Mod. | No. of Mod. | | | | | |
| Program: Child Abuse Prevention: Service | | | | | | |
| Budget Reference Page No.(s) | | | | | | |
| Program Term | 7/1/23 to 6/30/2024 | 7/1/24 to 6/30/2025 | 7/1/25 to 6/30/2026 | 7/1/26 to 6/30/2027 | 7/1/27 to 6/30/2028 | Total |
| Expenditures | | | | | | |
| Salaries & Benefits | \$619,220 | \$619,220 | \$619,220 | \$619,220 | \$619,220 | \$3,096,100 |
| Operating Expense | \$72,880 | \$72,880 | \$72,880 | \$72,880 | \$72,880 | \$364,400 |
| Subtotal | \$692,100 | \$692,100 | \$692,100 | \$692,100 | \$692,100 | \$3,460,500 |
| Indirect Percentage (%) | 15% | 15% | 15% | 15% | 15% | |
| Indirect Cost (Line 16 X Line 15) | \$103,810 | \$103,810 | \$103,810 | \$103,810 | \$103,810 | \$519,050 |
| Capital Expenditure | | | | | | |
| Total Expenditures | \$795,910 | \$795,910 | \$795,910 | \$795,910 | \$795,910 | \$3,979,550 |
| HSA Revenues | | | | | | |
| General Fund | \$541,219 | \$541,219 | \$541,219 | \$541,219 | \$541,219 | \$2,706,095 |
| State | \$119,386 | \$119,386 | \$119,386 | \$119,386 | \$119,386 | \$596,930 |
| Federal | \$135,305 | \$135,305 | \$135,305 | \$135,305 | \$135,305 | \$676,525 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTAL HSA REVENUES | ¢705.040 | \$70F 010 | ¢705 040 | \$70F.040 | ¢705 040 | ¢2.070.550 |
| | \$795,910 | \$795,910 | \$795,910 | \$795,910 | \$795,910 | \$3,979,550 |
| Other Revenues | | | | | | |
| | | | | | | |
| | | | | | | |
| Tatal Barrana | ф 7 05 040 | \$705.040 | Ф 7 05 040 | \$705.040 | \$705.040 | #0.070.550 |
| Total Revenues | \$795,910 | \$795,910 | \$795,910 | \$795,910 | \$795,910 | \$3,979,550 |
| Full Time Equivalent (FTE) | | | | | | |
| Prepared by: | Date: | | | | | |
| HSA-CO Review Signature: | | | _ | | | |
| HSA #1 | | | | | | 10/25/2016 |

Appendix B, Page 2

Program Name: Child abuse Prevention (Same as Line 9 on HSA #1)

Salaries & Benefits Detail

| 7/4/22 +0 6/20/20247/4/24 + | ~ C/20/20257/4/25 +~ | C/20/20067/4/20 +c | 6/20/2027/11/27 to 6/20/2029 |
|-----------------------------|----------------------|--------------------|------------------------------|

| | | | | 1/1/23 10 6/30/2024 | 7/1/24 to 6/30/2025 | 7/1/25 10 6/30/2020 | 1/1/20 10 6/30/2021 | 1// 1/2/ 10 6/30/2020 | 0 | |
|------------------------------|-------------|-----------|-----------------|---------------------|---------------------|---------------------|---------------------|-----------------------|-----------------|---------------------|
| | Agency | Totals | HSA Pr | ogram | DHS Program | DHS Program | DHS Program | DHS Program | DHS Program | TOTAL |
| | Annual Full | | % FTE funded by | | | | | | | |
| | TimeSalary | | HSA | Adjusted | | | | | | |
| POSITION TITLE | for FTE | Total FTE | (Max 100%) | FTE | Budgeted Salary | Budgeted Salary | Budgeted Salary | Budgeted Salary | Budgeted Salary | 7/1/23 to 6/30/2028 |
| SPM of Parent/Child Educa | \$79,800 | 1.00 | 35% | 0.35 | \$27,930 | \$27,930 | \$27,930 | \$27,930 | \$27,930 | \$139,650 |
| Parent Child Education Ma | \$74,480 | 1.00 | 40% | 0.40 | \$29,800 | \$29,800 | \$29,800 | \$29,800 | \$29,800 | \$149,000 |
| Playroom Coordinator, Cyr. | \$74,480 | 1.00 | 45% | 0.45 | \$33,520 | \$33,520 | \$33,520 | \$33,520 | \$33,520 | \$167,600 |
| Therapeutic Caregiver, Ma. | \$59,480 | 1.00 | 45% | 0.45 | \$26,770 | \$26,770 | \$26,770 | \$26,770 | \$26,770 | \$133,850 |
| Therapeutic Caregiver, Jilli | \$57,400 | 1.00 | 45% | 0.45 | \$25,830 | \$25,830 | \$25,830 | \$25,830 | \$25,830 | \$129,150 |
| SPM of Operations, Linda I | \$79,800 | 1.00 | 10% | 0.10 | \$7,980 | \$7,980 | \$7,980 | \$7,980 | \$7,980 | \$39,900 |
| Operations Coordinator, Ar | \$67,080 | 1.00 | 13% | 0.13 | \$8,390 | \$8,390 | \$8,390 | \$8,390 | \$8,390 | \$41,950 |
| Operations and Program A | \$57,400 | 1.00 | 15% | 0.15 | \$8,610 | \$8,610 | \$8,610 | \$8,610 | \$8,610 | \$43,050 |
| Operations and Program A | \$57,400 | 1.00 | 15% | 0.15 | \$8,610 | \$8,610 | \$8,610 | \$8,610 | \$8,610 | \$43,050 |
| SPM of Care Coordination, | \$81,880 | 1.00 | 32% | 0.32 | \$26,210 | \$26,210 | \$26,210 | \$26,210 | \$26,210 | \$131,050 |
| Clinical Care Coordinator, I | \$67,080 | 1.00 | 35% | 0.35 | \$23,480 | \$23,480 | \$23,480 | \$23,480 | \$23,480 | \$117,400 |
| Clinical Care Coordinator, I | \$65,000 | 1.00 | 35% | 0.35 | \$22,750 | \$22,750 | \$22,750 | \$22,750 | \$22,750 | \$113,750 |
| Clinical Care Coordinator, I | \$67,080 | 1.00 | 35% | 0.35 | \$23,480 | \$23,480 | \$23,480 | \$23,480 | \$23,480 | \$117,400 |
| Clinical Care Coordinator, I | \$67,080 | 1.00 | 35% | 0.35 | \$23,480 | \$23,480 | \$23,480 | \$23,480 | \$23,480 | \$117,400 |
| Care Manager, Yifang Li | \$62,080 | 1.00 | 40% | 0.40 | \$24,840 | \$24,840 | \$24,840 | \$24,840 | \$24,840 | \$124,200 |
| AD of Children & Family Se | \$104,200 | 1.00 | 9% | 0.09 | \$8,860 | \$8,860 | \$8,860 | \$8,860 | \$8,860 | \$44,300 |
| AD of CEP, Will Roy | \$104,200 | 1.00 | 5% | 0.05 | \$5,210 | \$5,210 | \$5,210 | \$5,210 | \$5,210 | \$26,050 |
| SPM of CEP, Andrew Tan | \$79,800 | 1.00 | 3% | 0.03 | \$2,000 | \$2,000 | \$2,000 | \$2,000 | \$2,000 | \$10,000 |
| Community Educator, Bani | \$57,400 | 1.00 | 94% | 0.94 | \$53,670 | \$53,670 | \$53,670 | \$53,670 | \$53,670 | \$268,350 |
| Community Education Man | \$72,400 | 1.00 | 80% | 0.80 | \$57,920 | \$57,920 | \$57,920 | \$57,920 | \$57,920 | \$289,600 |
| Strategic Partnerships & Po | \$65,000 | 1.00 | 15% | 0.15 | \$9,760 | \$9,760 | \$9,760 | \$9,760 | \$9,760 | \$48,800 |
| Chief Policy Officer, Jenny | \$176,800 | 1.00 | 8% | 0.08 | \$13,260 | \$13,260 | \$13,260 | \$13,260 | \$13,260 | \$66,300 |
| CEO, Pegah Faed | \$285,000 | 1.00 | 3% | 0.03 | \$8,550 | \$8,550 | \$8,550 | \$8,550 | \$8,550 | \$42,750 |
| Chief Program Officer, Gag | \$176,800 | 1.00 | 10% | 0.10 | \$17,680 | \$17,680 | \$17,680 | \$17,680 | \$17,680 | \$88,400 |
| Chief Administrative Office | \$163,500 | 1.00 | 5% | 0.05 | \$8,180 | \$8,180 | \$8,180 | \$8,180 | \$8,180 | \$40,900 |
| Data & Evaluation Manage | \$85,800 | 1.00 | 15% | 0.15 | \$12,870 | \$12,870 | \$12,870 | \$12,870 | \$12,870 | \$64,350 |
| SPM of Data & Evaluation, | \$104,200 | 1.00 | 5% | 0.05 | \$5,210 | \$5,210 | \$5,210 | \$5,210 | \$5,210 | \$26,050 |
| TOTALS | | 27.00 | 725% | 7.25 | 524,850.00 | \$524,850 | \$524,850 | \$524,850 | \$524,850 | \$2,624,250 |
| FRINGE BENEFIT RATE 18% | | | | | | | | | | |
| EMPLOYEE FRINGE BENI | EFITS | | | | \$94,370 | \$94,370 | \$94,370 | \$94,370 | \$94,370 | \$471,850 |
| | | | | | | | | | | |
| TOTAL SALARIES & BENE | FITS | | | | 619,220 | \$619,220 | \$619,220 | \$619,220 | \$619,220 | \$3,096,100 |
| HSA #2 10/25/2016 | | | | | | | | | | |

Appendix B, Page 3

Program Name: Child Abuse (Same as Line 9 on HSA #1)

Operating Expense Detail

TOTAL

| Expenditure Category TERM | 7/1/23 to 6/30/2024 | 7/1/24 to 6/30/2025 | 7/1/25 to 6/30/2026 | 7/1/26 to 6/30/2027 | 7/1/27 to 6/30/2028 | |
|---|------------------------|------------------------|------------------------|------------------------|------------------------|------------|
| Rental of Property | \$31,400 | \$31,400 | \$31,400 | \$31,400 | \$31,400 | \$157,000 |
| Building Maintenance Supplies and Repair & Utilitie | \$13,100 | \$13,100 | \$13,100 | \$13,100 | \$13,100 | \$65,500 |
| Office Supplies, Postage | | | | | | |
| Printing and Reproduction | | | | | | |
| Insurance | \$13,100 | \$13,100 | \$13,100 | \$13,100 | \$13,100 | \$65,500 |
| Staff Training | | | | | | |
| Staff Travel-(Local & Out of Town) | | | | | | |
| Rental of Equipment | | | | | | |
| CONSULTANT/SUBCONTRACTOR DESCRIPTIVE TITLE | | | | | | |
| Mandated Reporter Trainers | \$5,000 | \$5,000 | \$5,000 | \$5,000 | \$5,000 | \$25,000 |
| CSEC program expenses(Prevention curriculum tra | \$5,000 | \$5,000 | \$5,000 | \$5,000 | \$5,000 | \$25,000 |
| | | | | | | |
| OTHER | | | | | | |
| SalesForce (Dues & Subscriptions) | \$5,280 | \$5,280 | \$5,280 | \$5,280 | \$5,280 | \$26,400 |
| | | | | | | |
| | | | | | | |
| | | | | | | \$0 |
| TOTAL OPERATING EXPENSE | \$72,880 | \$72,880 | \$72,880 | \$72,880 | \$72,880 | \$364,400 |
| HSA #3 | | | | | | 10/25/2016 |