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**DEPARTMENT OF PUBLIC HEALTH  
NURSE-FAMILY PARTNERSHIP PROGRAM SERVICES AGREEMENT**

Amendment No. 4

THIS AMENDMENT is made and entered into this 5<sup>th</sup> day  
of November, 2019,

by and between

COUNTY OF LOS ANGELES (hereafter  
"County"),

and

CITY OF LONG BEACH (hereafter  
"Contractor").

WHEREAS, reference is made to that certain document entitled "NURSE-FAMILY PARTNERSHIP PROGRAM SERVICES AGREEMENT", dated July 1, 2011, and further identified as Contract No. PH-001739 and any Amendments thereto (all hereafter "Contract"); and

WHEREAS, on April 12, 2016, the Board of Supervisors delegated authority to the Director of Public Health, or designee, to execute amendments to the Contract; and

WHEREAS, it is the intent of the parties hereto to amend Contract to extend the term through June 30, 2020, increase the maximum obligation of County, and make other hereafter designated changes; and

WHEREAS, said Contract provides that changes may be made in the form of a written amendment which is formally approved and executed by the parties; and

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WHEREAS, Contractor warrants that it possesses the competence, expertise, and personnel necessary to provide services consistent with the requirements of this Contract and consistent with the professional standard of care for these services.

NOW, THEREFORE, the parties hereto agree as follows:

1. This Amendment shall be effective July 1, 2019.
2. The first Subparagraph of Paragraph 1, TERM, shall be deleted in its

entirety and replaced as follows:

“The term of this Contract shall be effective July 1, 2011 and shall continue in full force and effect unless sooner canceled or terminated as provided herein through June 30, 2020.”

3. Paragraph 2, DESCRIPTION OF SERVICES, Subparagraph A, shall be deleted in its entirety and replaced as follows:

“A. Contractor shall provide services in the manner described in Exhibit A (Scopes of Work A, A-1 and A-2), attached hereto and incorporated herein by reference.”

4. Paragraph 4, MAXIMUM OBLIGATION OF COUNTY, Subparagraph I, shall be added to read as follows:

“I. During the period of July 1, 2019 through June 30, 2020, the maximum obligation of County for all services provided hereunder shall not exceed one hundred twenty-five thousand, nine hundred fifty-two dollars (\$125,952) as set forth in Schedule 9, attached hereto and incorporated herein by reference.”

5. Paragraph 12, ASSIGNMENT AND DELEGATION, shall be deleted in its entirety and replaced as follows:

“12. ASSIGNMENT AND DELEGATION/MERGERS OR ACQUISITIONS:

A. Contractor shall notify County of any pending acquisitions/mergers of its company unless otherwise legally prohibited from doing so. If Contractor is restricted from legally notifying County of pending acquisitions/mergers, then it should notify County of the actual acquisitions/mergers as soon as the law allows and provide to County the legal framework that restricted it from notifying County prior to the actual acquisitions/mergers.

B. Contractor shall not assign its rights or delegate its duties under this Contract, or both, whether in whole or in part, without the prior written consent of County, in its discretion, and any attempted assignment or delegation without such consent shall be null and void. For purposes of this sub-paragraph, County consent shall require a written Amendment to the Contract, which is formally approved and executed by the parties. Any payments by County to any approved delegatee or assignee on any claim under this Contract shall be deductible, at County's sole discretion, against the claims, which Contractor may have against County.

C. Shareholders, partners, members, or other equity holders of Contractor may transfer, sell, exchange, assign, or divest themselves of any interest they may have therein. However, in the event any such transfer, exchange, assignment, or divestment is effected in such a way

as to give majority control of Contractor to any person(s), corporation, partnership, or legal entity other than the majority controlling interest therein at the time of execution of the Contract, such disposition is an assignment requiring the prior written consent of County in accordance with applicable provisions of this Contract.

D. Any assumption, assignment, delegation, or takeover of any of Contractor's duties, responsibilities, obligations, or performance of same by any person or entity other than Contractor, whether through assignment, subcontract, delegation, merger, buyout, or any other mechanism, with or without consideration for any reason whatsoever without County's express prior written approval, shall be a material breach of the Contract which may result in the termination of this Contract. In the event of such termination, County shall be entitled to pursue the same remedies against Contractor as it could pursue in the event of default by Contractor."

6. Paragraph 8, CONSIDERATION OF HIRING GAIN/GROW

PARTICIPANTS, of the ADDITIONAL PROVISIONS, shall be deleted in its entirety and replaced as follows:

"8. CONSIDERATION OF HIRING GAIN/GROW PROGRAM

PARTICIPANTS: Intentionally Omitted.

7. Paragraph 25, TERMINATION FOR INSOLVENCY, DEFAULT,

GRATUITIES AND/OR IMPROPER CONSIDERATIONS, AND CONVENIENCE, of the ADDITIONAL PROVISIONS, Subparagraph C, shall be deleted in its entirety and

replaced as follows:

“C. County may, by written notice to Contractor, immediately terminate Contractor's right to proceed under this Contract, if it is found that gratuities or consideration in any form, were offered or given by Contractor, either directly or through an intermediary, to any County officer, employee, or agent, with the intent of securing the Contract or securing favorable treatment with respect to the award, amendment, or extension of the Contract, or making of any determinations with respect to the Contractor's performance pursuant to the Contract. In the event of such termination, County shall be entitled to pursue the same remedies against Contractor as it could in the event of default by Contractor.

Contractor shall immediately report any attempt by a County officer, employee, or agent, to solicit such improper gratuity or consideration. The report shall be made either to the County manager charged with the supervision of the employee or agent, or to the County Fraud Hotline at (800) 544-6861 or <http://fraud.lacounty.gov>.

Among other items, such improper gratuities and considerations may take the form of cash, discounts, services, the provision of travel or entertainment, or other tangible gifts.”

8. Paragraph 34, COUNTY'S QUALITY ASSURANCE PLAN, of the ADDITIONAL PROVISIONS, shall be deleted in its entirety and replaced as follows:

“34. COUNTY'S QUALITY ASSURANCE PLAN: County or its agent will monitor Contractor's performance under this Contract on not less than an annual

basis. Such monitoring will include assessing Contractor's compliance with all Contract terms and performance standards. Contractor deficiencies which County determines are significant or continuing and that may place performance of the Contract in jeopardy if not corrected will be reported to the Board of Supervisors and listed in the appropriate contractor performance database. The report to the Board will include improvement/corrective action measures taken by County and the Contractor. If improvement does not occur consistent with the corrective action measures, the County may terminate this Contract or impose other penalties as specified in this Contract.

County maintains databases that track/monitor contractor performance history. Information entered into such databases may be used for a variety of purposes, including determining whether County will exercise a contract term extension option.”

9. Paragraph 44, SAFELY SURRENDERED BABY LAW, of the ADDITIONAL PROVISIONS, shall be deleted in its entirety and replaced as follows:

“44. CONTRACTOR'S ACKNOWLEDGEMENT OF COUNTY'S COMMITMENT TO THE SAFELY SURRENDERED BABY LAW: Contractor acknowledges that County places a high priority on the implementation of the Safely Surrendered Baby Law. Contractor understands that it is County's policy to encourage all County Contractors to voluntarily post the County's "Safely Surrendered Baby Law" poster in a prominent position at the Contractor's place of business. Contractor will also encourage its Subcontractors, if any, to post this poster in a prominent position in the Subcontractor's place of business.

Information on how to receive the poster can be found on the Internet at [www.babysafela.org](http://www.babysafela.org).”

10. Paragraph 46, COMPLIANCE WITH COUNTY'S ZERO TOLERANCE POLICY ON HUMAN TRAFFICKING, shall be added to the ADDITIONAL PROVISIONS, to read as follows:

“46. COMPLIANCE WITH COUNTY'S ZERO TOLERANCE POLICY ON HUMAN TRAFFICKING:

A. Contractor acknowledges that the County has established a Zero Tolerance Human Trafficking Policy prohibiting contractors from engaging in human trafficking.

B. If a Contractor or a member of Contractor's staff is convicted of a human trafficking offense, the County shall require that the Contractor or member of Contractor's staff be removed immediately from performing services under the Contract. County will not be under any obligation to disclose confidential information regarding the offenses other than those required by law.

C. Disqualification of any member of Contractor's staff pursuant to this Paragraph shall not relieve Contractor of its obligation to complete all work in accordance with the terms and conditions of this Contract.”

11. Paragraph 47, DATA ENCRYPTION, shall be added to the ADDITIONAL PROVISIONS, to read as follows:

“47. DATA ENCRYPTION:

Contractor and Subcontractor(s) that electronically transmit or store personal information (PI), protected health information (PHI) and/or medical information (MI) shall comply with the encryption standards set forth below. PI is defined in California Civil Code Section 1798.29(g). PHI is defined in Health Insurance Portability Act of 1996 (HIPAA), and implementing regulations. MI is defined in California Civil Code Section 56.05(j).

A. Stored Data: Contractors' and Subcontractors' workstations and portable devices (e.g., mobile, wearables, tablets, thumb drives, external hard drives) require encryption (i.e. software and/or hardware) in accordance with: (1) Federal Information Processing Standard Publication (FIPS) 140-2; (2) National Institute of Standards and Technology (NIST) Special Publication 800-57 Recommendation for Key Management- Part 1: General (Revision 3); (3) NIST Special Publication 800-57. Recommendation for Key Management - Part 2: Best Practices for Key Management Organization; and (4) NIST Special Publication 800-111 Guide to Storage Encryption Technologies for End User Devices. Advanced Encryption Standard (AES) with cipher strength of 256-bit is minimally required.

B. Transmitted Data: All transmitted (e.g. network) County PI, PHI and/or MI require encryption in accordance with: (1) NIST Special Publication 800-52 Guidelines for the Selection and Use of Transport Layer Security Implementations; and (2) NIST Special Publication 800-57



Recommendation for Key Management - Part 3: Application- Specific Key Management Guidance.

Secure Sockets Layer (SSL) is minimally required with minimum cipher strength of 128-bit.

C. Certification: County must receive within ten (10) business days of its request, a certification from Contractor (for itself and any Subcontractors) that certifies and validates compliance with the encryption standards set forth above. In addition, Contractor shall maintain a copy of any validation/attestation reports that its data encryption products(s) generate and such reports shall be subject to audit in accordance with the Contract. Failure on the part of Contractor to comply with any of the provisions of this Paragraph (Data Encryption) shall constitute a material breach of this Contract upon which County may terminate or suspend this Contract.”

12. Paragraph 48, COMPLIANCE WITH FAIR CHANCE EMPLOYMENT

PRACTICES, shall be added to the ADDITIONAL PROVISIONS, to read as follows:

“48. COMPLIANCE WITH FAIR CHANCE EMPLOYMENT PRACTICES:

Contractor shall comply with fair chance employment hiring practices set forth in California Government Code Section 12952, Employment Discrimination: Conviction History. Contractor’s violation of this paragraph of the Contract may constitute a material breach of the Contract. In the event of such material breach, County may, in its sole discretion, terminate the Contract.”

13. Paragraph 49, DEFAULT METHOD OF PAYMENT: DIRECT DEPOSIT OR ELECTRONIC FUNDS TRANSFER, shall be added to the ADDITIONAL PROVISIONS, to read as follows:

“49. DEFAULT METHOD OF PAYMENT: DIRECT DEPOSIT OR ELECTRONIC FUNDS TRANSFER:

A. County, at its sole discretion, has determined that the most efficient and secure default form of payment for goods and/or services provided under an agreement/ contract with the County shall be Electronic Funds Transfer (EFT) or direct deposit, unless an alternative method of payment is deemed appropriate by the Auditor-Controller (A-C).

B. Contractor shall submit a direct deposit authorization request via the website <https://directdeposit.lacounty.gov> with banking and vendor information, and any other information that the A-C determines is reasonably necessary to process the payment and comply with all accounting, record keeping, and tax reporting requirements.

C. Any provision of law, grant, or funding agreement requiring a specific form or method of payment other than EFT or direct deposit shall supersede this requirement with respect to those payments.

D. At any time during the duration of the agreement/contract, a Contractor may submit a written request for an exemption to this requirement. Such request must be based on specific legal, business or operational needs and explain why the payment method designated by the A-C is not feasible and an alternative is necessary. The A-C, in

consultation with the contracting department(s), shall decide whether to approve exemption requests.”

14. Paragraph 50, COMPLIANCE WITH COUNTY’S POLICY OF EQUITY, shall be added to the ADDITIONAL PROVISIONS, to read as follows:

“50. COMPLIANCE WITH COUNTY’S POLICY OF EQUITY: Contractor acknowledges that the County takes its commitment to preserving the dignity and professionalism of the workplace very seriously, as set forth in the County Policy of Equity (CPOE) (<https://ceop.lacounty.gov/>). Contractor further acknowledges that the County strives to provide a workplace free from discrimination, harassment, retaliation and inappropriate conduct based on a protected characteristic, and which may violate the CPOE. Contractor, its employees and subcontractors acknowledge and certify receipt and understanding of the CPOE. Failure of Contractor, its employees or its subcontractors to uphold County's expectations of a workplace free from harassment and discrimination, including inappropriate conduct based on a protected characteristic, may subject Contractor to termination of contractual agreements as well as civil liability.”

15. Paragraph 51, GUIDELINES FOR STAFF TUBERCULOSIS SCREENING, shall be added to the ADDITIONAL PROVISIONS, to read as follows:

“51. GUIDELINES FOR STAFF TUBERCULOSIS SCREENING: Annual tuberculin screening shall be done for each employee, volunteer, subcontractor and consultant providing services hereunder on or before the twelve-month period ends from the last screening date. Such tuberculosis screening shall consist of tuberculin skin test) Mantoux test screening test,

Tuberculin Sensitivity Test, Pirquet test, or PPD test for Purified Protein Derivative) or blood test (Quaniferon, IGRA, or T-spot) and if positive a written certification by a physician that the person is free from active tuberculosis based on a chest x-ray prior to resuming job duties”.

16. Effective on the date of this Amendment, Exhibit A-2, Scope of Work, shall be added, attached hereto and incorporated herein by reference.

17. Effective on the date of this Amendment, Schedule 9, Budget, shall be attached hereto and incorporated herein by reference.

18. Except for the changes set forth hereinabove, Contract shall not be changed in any other respect by this Amendment.

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IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by its Director of Public Health, and Contractor has caused this Amendment to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

COUNTY OF LOS ANGELES

By   
Barbara Ferrer, Ph.D., M.P.H., M.Ed.  
Director

CITY OF LONG BEACH  
Contractor

Rebecca Garner, Acting Assistant City Manager  
EXECUTED PURSUANT TO SECTION 301 OF THE CITY  
CHARTER

By   
Signature


Tom Modica  
Printed Name

Title Acting City Manager  
(AFFIX CORPORATE SEAL)

APPROVED AS TO FORM  
BY THE OFFICE OF THE COUNTY COUNSEL  
MARY C. WICKHAM  
County Counsel

APPROVED AS TO FORM  
October 2, 2019  
CHARLES PARKIN, City Attorney

APPROVED AS TO CONTRACT  
ADMINISTRATION:

By   
TAYLOR M. ANDERSON  
DEPUTY CITY ATTORNEY

Department of Public Health

By   
Patricia Gibson, Chief  
Contracts and Grants Division

#04782

County of Los Angeles – Department of Public Health  
 Division of Maternal, Child, and Adolescent Health (MCAH)

NURSE FAMILY PARTNERSHIP – LOS ANGELES

**CITY OF LONG BEACH**

Scope of Work

July 1, 2019 through June 30, 2020

Under this Contract, the Nurse Family Partnership (NFP) Nurse in the City of Long Beach will serve first-time pregnant teens/youth who are living in poverty within the jurisdiction of the City of Long Beach.

The focus for continuation of NFP services will be on recruiting clients from all of the Long Beach area that meet the criteria of the Prevention and Early Intervention (PEI) target populations including:

- A. Children/Youth in stressed families;
- B. Underserved cultural populations;
- C. Pregnant teens and women from stressed families;
- D. Pregnant teens or women with co-occurring mental health problems and substance abuse;
- E. Pregnant teens at risk of entry or in the juvenile justice system;
- F. Pregnant women who are risk of entry or in the criminal justice system;
- G. Pregnant teens who exhibit early signs of a severe mental illness or at risk of developing maternal depression;
- H. Pregnant teens or women experiencing homelessness;
- I. Pregnant teens in the foster care system;
- J. Pregnant women who are deaf and/or hearing impaired; and
- K. Pregnant teens who have been exposed to trauma

NFP services will be delivered by a NFP-trained public health nurse (NFP PHN) who will manage an average caseload of no less than 20 clients, with the goal of maintaining a case load of 25 clients. The NFP nurse will perform the NFP services in accordance to NFP-National Service Office protocols and policies, and will also perform:

- A. Screening for program eligibility – Participants must be first-time mothers, living in poverty, and less than 28 weeks into their pregnancy.
- B. Mental Health Assessment – In addition to their initial mental health screening, NFP PHN will assess participants every six months using the following recommended instruments:

PHQ-9	GAD-7	ASQ3	ASQ-SE2	PAPF
1. Intake	1. Intake	1. Infancy 4 months	Collected in Infant Health Care Form:	1. 10 Weeks post-partum
2. Pregnancy 36 weeks	2. Pregnancy 36 weeks	2. Infancy 10 months	1. Infancy 6 months	2. 4 Months post-partum
3. Infancy 1-8 weeks	3. Infancy 1-8 weeks	3. Toddler 18 months	2. Infancy 12 months	3. 8 Months post-partum
4. Infancy 4-6 months	4. Infancy 4-6 months	4. Toddler 24 months (optional)	3. Toddler 18 months	4. 12 Months post-partum
5. Infancy 12 months	5. Infancy 12 months		4. Toddler 24 months	5. 18 Months post-partum
6. PRN	6. PRN			6. 24 Months post-partum or Termination

County of Los Angeles – Department of Public Health  
 Division of Maternal, Child, and Adolescent Health (MCAH)

NURSE FAMILY PARTNERSHIP – LOS ANGELES

**CITY OF LONG BEACH**

Scope of Work

July 1, 2019 through June 30, 2020

1. Referral to Mental Health Provider – Based on the screening results and upon agreement by the participant, the participant will be referred for mental health services for further mental health assessment and services as appropriate.
  
- C. Referral and Linkage to Needed Services and Provide Case Management – The PHN home visitor will refer participants to the NFP Mental Health Specialist who will assist the client and/or coordinate care with the Department of Mental Health (DMH) System Navigator who will help with arranging the most appropriate referral resources for those participants as needed to improve their quality of life and promote mental wellness. DMH will help to provide coordination of services to ensure that participants follow through with referrals.
  
- D. Culturally and Linguistically Appropriate Services – Eliminating mental health disparities is a central principle of PEI. The City of Long Beach will ensure that services are culturally and linguistically competent.
  
- E. Community Partnerships – City of Long Beach will demonstrate the ability to form community partnerships with agencies, programs and services to promote mental wellness for participants.
  
- F. Outreach – City of Long Beach will provide outreach to attempt recruitment of clients who fit the target populations as specified in this Agreement, including the first time pregnant teen/youth/woman who is deaf or hearing impaired. In the event that the population enrolled varies significantly from the target population, Department of Public Health will evaluate City of Long Beach outreach efforts to determine if any needed changes in the outreach activities and corrective action are required.
  
- G. Schedule of Visits – A PHN shall provide home visitation services beginning before the mother’s 28<sup>th</sup> week of pregnancy and continue until the child reaches his/her second (2<sup>nd</sup>) birthday. Prenatal visits will occur once a week for the first four weeks, then every other week until the baby is born. Postpartum visits will occur weekly for the first six weeks and then every other week until the baby is 21 months. From 21 to 24 months, visits will be monthly. The PHN may adjust the frequency of visits as needed.
  
- H. Specifically perform the following key activities to accomplish the target objectives as outlined:

Measurable Objectives	Key Activities	Evaluation Indicators	Implementation Timeline
<ul style="list-style-type: none"> <li>• Increase percentage of normal birth weight births (≥ than 2500 grams or 5.5 lbs).</li> </ul>	<ul style="list-style-type: none"> <li>• Educate clients on the importance of prenatal care.</li> <li>• Refer clients to prenatal care providers as needed.</li> </ul>	<ul style="list-style-type: none"> <li>• Number of normal birth weight births.</li> </ul>	These activities are implemented for each client during her pregnancy.

County of Los Angeles – Department of Public Health  
 Division of Maternal, Child, and Adolescent Health (MCAH)

NURSE FAMILY PARTNERSHIP – LOS ANGELES

CITY OF LONG BEACH

Scope of Work

July 1, 2019 through June 30, 2020

Measurable Objectives	Key Activities	Evaluation Indicators	Implementation Timeline
<ul style="list-style-type: none"> <li>Increase percentage of full-term births (<math>\geq</math> thirty-seven 37 weeks gestation).</li> </ul>	<ul style="list-style-type: none"> <li>Make referrals to other health care providers as needed.</li> <li>Ensure compliance with prenatal appointments.</li> <li>Educate clients on adequate nutrition, fetal growth and development, and danger signs during pregnancy.</li> </ul>	<ul style="list-style-type: none"> <li>Number of full-term births.</li> </ul>	<p>The infant's birth weight and gestational age are collected during the first home visit after the birth of the infant.</p>
<ul style="list-style-type: none"> <li>Decrease percentage of women who smoke during pregnancy.</li> </ul>	<ul style="list-style-type: none"> <li>Educate clients on the risks of smoking during pregnancy.</li> <li>Assess readiness of clients to quit.</li> <li>Counsel clients on quitting methods.</li> <li>Assess exposure to secondary smoke.</li> <li>Provide continuous support with cessation efforts.</li> </ul>	<ul style="list-style-type: none"> <li>Number of clients who report smoking during pregnancy.</li> </ul>	<p>These activities are implemented for each client during her pregnancy.</p> <p>The client is asked about her smoking practices at program enrollment, at thirty-six (36) weeks of pregnancy, and at twelve (12) months after delivery.</p>
<ul style="list-style-type: none"> <li>Decrease percentage of women who drink alcohol during pregnancy.</li> </ul>	<ul style="list-style-type: none"> <li>Discuss the risks of drinking alcohol during pregnancy.</li> <li>Encourage clients to avoid alcohol as the single leading cause of infant mental retardation.</li> <li>Assess readiness to quit or decrease the amount of alcohol.</li> <li>Provide continuous support with cessation efforts.</li> </ul>	<ul style="list-style-type: none"> <li>Number of clients who report drinking alcohol during pregnancy.</li> </ul>	<p>These activities are implemented for each client during her pregnancy.</p> <p>The client is asked about her drinking practices at program enrollment, at thirty-six (36) weeks of pregnancy, and at twelve (12) months after delivery.</p>
<ul style="list-style-type: none"> <li>Decrease the average number of months women receive cash assistance through California Work Opportunities and Responsibility to Kids (CalWORKs) by helping them or their household family members find employment.</li> </ul>	<ul style="list-style-type: none"> <li>Refer clients and their family members for job training/job referral programs as available and follow-up on referrals.</li> <li>Help to increase clients' self-esteem by providing positive feedback and assistance in steps taken toward job-related activities.</li> </ul>	<ul style="list-style-type: none"> <li>Number of months clients report receiving cash assistance through Temporary Assistance for Needy Families (TANF)/ CalWORKs.</li> </ul>	<p>These activities are generally implemented with each client after the birth of her child and when the client expresses readiness to (re)enter the workforce. The nurses may help the clients' household family members at any time.</p> <p>Each client is asked how many months they have been receiving TANF/Welfare during their</p>



County of Los Angeles – Department of Public Health  
 Division of Maternal, Child, and Adolescent Health (MCAH)

NURSE FAMILY PARTNERSHIP – LOS ANGELES

**CITY OF LONG BEACH**

Scope of Work

July 1, 2019 through June 30, 2020

Measurable Objectives	Key Activities	Evaluation Indicators	Implementation Timeline
			pregnancy, and also at six (6), twelve (12), eighteen (18), and twenty-four (24) months after delivery of their child.
<ul style="list-style-type: none"> <li>• Increase the percentage of pregnant/parenting minors (&lt; eighteen (18) years of age) who are enrolled in school.</li> </ul>	<ul style="list-style-type: none"> <li>• Refer minor clients to Adolescent Family Life Program (AFLP) as applicable and encourage completion of high school education.</li> <li>• Follow-up on referrals to Black Infant Health, AFLP or other home visiting programs.</li> <li>• Educate clients regarding the value of completing education.</li> </ul>	<ul style="list-style-type: none"> <li>• Number of minor clients who report current enrollment in school.</li> </ul>	These activities are implemented with each minor client from the time she enrolls into the program until the time she either graduates from high school, or graduates from the NFP program (since she may still be a minor at that time).  Each client is asked if they are currently enrolled in an education program at the time of enrollment, and also six (6), twelve (12), eighteen (18), and twenty-four (24) months after delivery of their child.
<ul style="list-style-type: none"> <li>• Increase the percentage of women who initiate breastfeeding.</li> <li>• Increase the percentage of women who continue to breastfeed at six (6) months after delivery.</li> <li>• Increase the percentage of women who continue to breastfeed at twelve (12) months after delivery.</li> </ul>	<ul style="list-style-type: none"> <li>• Educate clients on the benefits of breastfeeding to both the mother and the infant, breastfeeding delivery techniques, and how to avoid/ameliorate common breastfeeding problems.</li> <li>• Provide breastfeeding consultation and support after the delivery of the child.</li> <li>• Refer the client to a Lactation Consultant or program, if necessary.</li> </ul>	<ul style="list-style-type: none"> <li>• Number of clients who report initiating breastfeeding.</li> <li>• Number of clients who report continued breastfeeding at six (6) months after delivery.</li> <li>• Number of clients who report continued breastfeeding at twelve (12) months after delivery.</li> </ul>	These activities are implemented during pregnancy and after delivery of the child.  The client is asked if she ever initiated breastfeeding and if she is currently breastfeeding six (6), twelve (12), eighteen (18), and twenty-four (24) months after delivery.

County of Los Angeles – Department of Public Health  
 Division of Maternal, Child, and Adolescent Health (MCAH)

NURSE FAMILY PARTNERSHIP – LOS ANGELES

**CITY OF LONG BEACH**

Scope of Work

July 1, 2019 through June 30, 2020

Measurable Objectives	Key Activities	Evaluation Indicators	Implementation Timeline
<ul style="list-style-type: none"> <li>Decrease the percentage of minors (&lt; eighteen (18) years of age) who experience a subsequent pregnancy within two (2) years of the birth of their first child.</li> </ul>	<ul style="list-style-type: none"> <li>Discuss and stress the importance of family planning, including the benefits of inter-pregnancy spacing, methods of birth control, and plans for future children.</li> <li>Assist clients in identifying challenges and responsibilities that come with having multiple children at a young age.</li> <li>Present the various methods of birth control and assist client in finding a resource for receiving birth control.</li> </ul>	<ul style="list-style-type: none"> <li>Number of minor clients who report a subsequent pregnancy while enrolled in the program.</li> </ul>	<p>These activities are implemented for each client after the birth of her child and continue for the duration of her enrollment.</p> <p>The client is asked if she has become pregnant since the birth of her child at six (6), twelve (12), eighteen (18), and twenty-four (24) months after delivery.</p>
<ul style="list-style-type: none"> <li>Increase the percentage of children who are up-to-date with their immunizations.</li> </ul>	<ul style="list-style-type: none"> <li>Educate the client on the benefits of having her child's immunizations kept up-to-date.</li> <li>Help the client determine if the child is up-to-date on his/her immunizations.</li> <li>Help the client find a location in which she can have her child immunized.</li> <li>Answer any questions the client may have regarding immunizations.</li> </ul>	<ul style="list-style-type: none"> <li>Number of clients' children who are up-to-date with their immunizations according to the Recommended Childhood and Adolescent Immunization Schedule.</li> </ul>	<p>These activities are implemented for each client after the birth of her child and continue for the duration of her enrollment.</p> <p>The client is asked what immunizations her child has received at six (6), twelve (12), eighteen (18), and twenty-four (24) months after delivery.</p>

County of Los Angeles – Department of Public Health  
Nurse Family Partnership – Los Angeles

City of Long Beach  
Budget Term: July 01, 2019 through June 30, 2020

<b>Personnel Costs</b>	<b>Monthly Rate</b>	<b>Funds Requested</b>
NFP Public Health Nurse - Irene Lee	6,283	\$ 75,396
<b>Subtotal</b>		<b>\$ 75,396</b>
<b>Benefits</b>	<b>Percentage</b>	
Retirement (PERS)	23.304%	\$ 17,570
FICA	6.200%	\$ 4,675
Medicare	1.450%	\$ 1,093
Health/Dental	14.163%	\$ 10,678
Payroll/Benefits Overhead	2.139%	\$ 1,613
Other Benefits	2.022%	\$ 1,525
Workers Compensation	4.300%	\$ 3,242
<b>Subtotal</b>	<b>53.578%</b>	<b>\$ 40,396</b>
<b>Ancillary Expenses</b>		
Office Supplies		\$ 500
Technology Service		\$ 3,700
Cell Phone Stipend		\$ 360
Mileage		\$ 3,600
<b>Subtotal</b>		<b>8,160</b>
<b>Travel and Training Costs</b>		
DANCE Travel and Training		\$ 1,000
NFP Professional Development		\$ 1,000
<b>Subtotal</b>		<b>\$ 2,000</b>
<b>Other Costs</b>		<b>0</b>
	<b>Total</b>	<b>\$ 125,952</b>