

Families Helping Families of SELA  
CFMS# 715954

CRITICAL INCIDENT REPORTING: according to MHSD's protocol as found in Attachment 5. CONTRACTOR is responsible for following this protocol and ensuring MHSD program management receives the critical incidents reports

**PERIOD OF PERFORMANCE**

Subject to other contract provisions, the period of performance under this contract will be from **July 1, 2012**, through **June 30, 2013**. This contract may be terminated by MHSD upon giving thirty (30) days advance written notice to the other party with or without cause, but in no case shall continue beyond the specified termination date unless MHSD exercises its right to renew. MHSD reserves the right to renew the contract for an additional twelve (12) months. This contract may be terminated by CONTRACTOR upon giving sixty (60) days advance written notice to the other party with or without cause, but in no case shall continue beyond the specified termination date. If CONTRACTOR terminates contract, Transition of Care provisions must be agreed upon by MHSD prior to termination.

**TRANSITION OF CARE – N/A**

Sixty (60) days prior to termination of the contract, the existing CONTRACTOR will work with the new CONTRACTOR closely so that all cases are carefully transitioned and without any disruption of care. Continuity of care is vital to the clients served by Metropolitan Human Services District. In the event the contract is not renewed or is terminated, CONTRACTOR shall provide a detailed plan regarding the transition of cases /clients so there is no disruption of care.

**AMENDMENT OF CONTRACT TERMS**

Any alteration, variation, modification, or waiver of provisions of this contract shall be valid only when reduced to writing, duly signed, and attached to the original of this agreement.

**MAXIMUM CONTRACT AMOUNT**

Total compensation payable to the CONTRACTOR for satisfactory performance of the work under this contract shall not exceed **\$75,244.00 (of which \$58,500.00 is IAT funds) and \$16,744.00 is Reporting Category #8004.**

**TERMS OF PAYMENT**

The CONTRACTOR'S compensation for services rendered shall be based on the following rates or in accordance with the following terms:

*FEE FOR SERVICE:*

*Payment will be made on a fee for service basis at the following rate: If progress and/or completion of services are provided to the satisfaction of the initiating office, payments are to be made as follows – IAT funds of 12 monthly installment of \$4,875.00 and family support funds of monthly payments of \$1,395.33 with the 12<sup>th</sup> payment of \$1,395.37 or monthly installments of \$6,270.33 and 12<sup>th</sup> payment of \$6,270.37 upon receipt of approved invoices, not to exceed the above maximum contract amount. The monthly expenditure and programmatic reports will be attached to the invoice for payment. Documentation of goals, outcomes, performance requirement and service delivery are to be attached to the monthly invoices.*

**Other activities included:**

a) Staff Retreat - \$600.00

b) People First of NOLA - \$5,000.00 – to include: \$2,500.00 for transportation stipends, \$1,000.00 for Summer Activity, and \$1,500.00 for Mardi Gras Ball.

CONTRACTOR will provide the contracted services for 12 months and, unless otherwise made explicit in the budget, MHSD expects that monthly expenses will be approximately 1/12 of the total contracted amount.

Initials/Date efc 7/19/12