

	<b>INTERAGENCY AGREEMENT for TFCBT / CBT-Plus Training &amp; Consultation Services</b>	HCA Contract Number: K5688 Contractor Contract Number:
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**THIS AGREEMENT** is made by and between Washington State Health Care Authority (HCA) and University of Washington, (Contractor), pursuant to the authority granted by Chapter 39.34 RCW.

<b>CONTRACTOR NAME</b> University of Washington		<b>CONTRACTOR DOING BUSINESS AS (DBA)</b> Harborview Medical Center	
<b>CONTRACTOR ADDRESS</b>   Street 325 Ninth Avenue, Mail Stop #359947	City Seattle	State WA	Zip Code 98104
<b>CONTRACTOR CONTRACT MANAGER</b> Laura Merchant	<b>CONTRACTOR TELEPHONE</b> (206) 744-1600	<b>CONTRACTOR E-MAIL ADDRESS</b> <a href="mailto:lmerchan@uw.edu">lmerchan@uw.edu</a>	

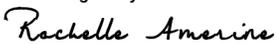
<b>HCA PROGRAM</b> Behavioral Health - Prenatal to 25	<b>HCA DIVISION/SECTION</b> Division of Behavioral Health and Recovery
<b>HCA CONTRACT MANAGER NAME AND TITLE</b> Paul Davis, Program Administrator	<b>HCA CONTRACT MANAGER ADDRESS</b> Health Care Authority 626 8th Avenue SE PO Box 42730 Olympia, WA 98504-2730
<b>HCA CONTRACT MANAGER TELEPHONE</b> (360) 725-1632	<b>HCA CONTRACT MANAGER E-MAIL ADDRESS</b> <a href="mailto:paul.davis@hca.wa.gov">paul.davis@hca.wa.gov</a>

<b>CONTRACT START DATE</b> September 30, 2021	<b>CONTRACT END DATE</b> September 29, 2022	<b>TOTAL CONTRACT MAXIMUM</b> \$263,455.
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**PURPOSE OF CONTRACT:**

The purpose of this Agreement is for the Contractor to support the statewide goal of implementing evidence-based practices in the community mental health system. This agreement supports workforce development through the dissemination of training in Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), and Cognitive Behavioral Therapy Plus (CBT+) for depression, anxiety, and behavioral problems; Common Elements Treatment Approach (CETA); the development of standardized and systematized implementation activities and practices that build and sustain fidelity practice and; a trauma- informed community mental health system.

The parties signing below warrant that they have read and understand this Contract, and have authority to execute this Contract. This Contract will be binding on HCA only upon signature by both parties.

<b>CONTRACTOR SIGNATURE</b> DocuSigned by: 	<b>PRINTED NAME AND TITLE</b> Sommer Kleweno-Walley Chief Executive Officer	<b>DATE</b> 11/18/2021
<b>HCA SIGNATURE</b> DocuSigned by: 	<b>PRINTED NAME AND TITLE</b> Rachelle Amerine Contracts Administrator	<b>DATE</b> 11/17/2021

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## 1. DEFINITIONS

**“Authorized Representative”** means a person to whom signature authority has been delegated in writing acting within the limits of the person’s authority.

**“Behavioral Health Administration Service Organization”** or **“BHASO”** means a regional organization providing state funded capitated non Medicaid behavioral health services for that region.

**“Cognitive Behavioral Therapy - Plus”** or **“CBT+”** is used as a basis for treatment for moderate to severe depression, anxiety, behavior and effects of Trauma for which “modules” related to specific clinical circumstances and diagnoses are applied.

- **CBT+ training and implementation activities include:** core-learning collaboratives, consultation, technical assistance/coaching, provider supports, fidelity training and coaching activities. Includes course materials, facilities, catering and supplies, and communication services.

**“Common Elements Treatment Approach”** or **“CETA”** means a therapeutic model that addresses anxiety, depression, and post-traumatic stress disorder.

- **CETA training and implementation activities include:** core-learning collaborative, consultation, technical assistance/coaching, provider supports, fidelity training and coaching activities. Includes course materials, facilities, catering and supplies, and communication services.

**“Community Mental Health Agency”** or **“CMHA”** is licensed by the State of Washington to provide Medicaid mental health services to eligible individuals, whether contracted with Prepaid Health Plans or not.

**“Confidential Information”** means information that may be exempt from disclosure to the public or other unauthorized persons under chapter 42.56 RCW or chapter 70.02 RCW or other state or federal statutes or regulations. Confidential Information includes, but is not limited to, any information identifiable to an individual that relates to a natural person’s health, finances, education, business, use or receipt of governmental services, names, addresses, telephone numbers, social security numbers, driver license numbers, financial profiles, credit card numbers, financial identifiers and any other identifying numbers, law enforcement records, HCA source code or object code, or HCA or State security information.

**“Contract”** or **“Agreement”** means the entire written agreement between HCA and the contractor, including any exhibits, documents, or materials incorporated by reference. The parties may execute this contract in multiple counterparts, each of which is deemed an original and all of which constitute only one agreement. E-mail (electronic mail) or fax (facsimile) transmission of a signed copy of this contract shall be the same as delivery of an original. Contract and Agreement may be used interchangeably.

**“Contractor”** means University of Washington, DBA Harborview Medical Center, its employees and agents. Contractor includes any firm, provider, organization, individual or other entity performing

services under this Agreement. It also includes any Subcontractor retained by Contractor as permitted under the terms of this Agreement.

**“Data”** means information disclosed, exchanged or used by Contractor in meeting requirements under this Agreement. Data may also include Confidential Information as defined in this Contract.

**“Evidence Based Practices”** or **“EBP”** means A program or practice that has had multiple site random controlled trials across heterogeneous populations demonstrating that the program or practice is effective for the population.

**“Health Care Authority”** or **“HCA”** means the Washington State Health Care Authority, any division, section, office, unit or other entity of HCA, or any of the officers or other officials lawfully representing HCA.

**“Learning Collaboratives”** means an interactive skill acquisition platform where participants learn from experts as well as other participants in the session.

**“Managed Care Organization”** or **“MCO”** is an organization that provides behavioral health services in a fully integrated region of the state.

**“Mental Health Providers”** mean licensed mental health professionals according to Washington Administrative Code who provide mental health services to individuals covered by Medicaid under core provider contracts with the Department of Social and Health Services or a Healthy Options Plan.

**“Regional Authority”** means a Behavioral Health Organization or Managed Care Organization that is a risk bearing entity that provides behavioral health services to Medicaid eligible individuals at the regional level and is contracted by HCA to administer services in a defined region.

**“Services”** means all work performed or provided by Contractor pursuant to this Contract.

**“Statement of Work”** or **“SOW”** means a detailed description of the work activities the Contractor is required to perform under the terms and conditions of this Contract, including the deliverables and timeline, and is attached as Schedule A.

**“Subcontractor”** means a person or entity that is not in the employment of the Contractor, who is performing all or part of the business activities under this Agreement under a separate contract with Contractor. The term “Subcontractor” means subcontractor(s) of any tier.

**“Trauma Focused-Cognitive Behavioral Therapy”** or **“TF-CBT”** is an evidence-based model for providing cognitive-therapy-based services to individuals who have experienced extreme effects of trauma incidences.

**“UMU Asynchronous Training Format”** means pre-recorded training material that can be accessed by participants at a time of their choosing.

**2. STATEMENT OF WORK**

Contractor will furnish the necessary personnel, equipment, material and/or service(s) and otherwise do all things necessary for or incidental to the performance of work set forth in Schedule "A"

**3. PERIOD OF PERFORMANCE**

Subject to its other provisions, the period of performance of this Contract will commence on **September 30, 2021**, and be completed on **September 29, 2022**, unless terminated sooner or extended upon written agreement between the parties.

**4. PAYMENT**

Compensation for the work provided in accordance with this Agreement has been established under the terms of RCW 39.34.130. The parties have determined that the cost of accomplishing the work herein will not exceed **\$263,455.00**. Payment for satisfactory performance of the work will not exceed this amount unless the parties mutually agree to a higher amount. Compensation for services will be based on the following rates or in accordance with the terms as set forth in accordance with Schedule A, *Statement of Work - TFCBT / CBT+ Training & Consultation Services*, Section 3, *Deliverables*.

**5. BILLING PROCEDURE**

Contractor must submit accurate invoices to the following address for all amounts to be paid by HCA via e-mail to: [paul.davis@hca.wa.gov](mailto:paul.davis@hca.wa.gov) with a cc to [HCAAdminAccountsPayable@hca.wa.gov](mailto:HCAAdminAccountsPayable@hca.wa.gov) . Include the HCA Contract number in the subject line of the email.

Invoices must describe and document to HCA's satisfaction a description of the work performed, the progress of the project, and fees. If expenses are invoiced, invoices must provide a detailed breakdown of each type. Any single expense in the amount of \$50.00 or more must be accompanied by a receipt in order to receive reimbursement. All invoices will be reviewed and must be approved by the Contract Manager or designee prior to payment.

Contractor must submit properly itemized invoices to include the following information, as applicable:

- a. HCA Contract number K5688;
- b. Contractor name, address, phone number;
- c. Description of Services;
- d. Date(s) of delivery;
- e. Net invoice price for each item;
- f. Applicable taxes;
- g. Total invoice price; and
- h. Payment terms and any available prompt payment discount.

Contractor will return incorrect or incomplete invoices for correction and reissue. The Agreement number must appear on all invoices, bills of lading, packages, and correspondence relating to this Agreement.

Payment will be considered timely if made within thirty (30) calendar days of receipt of properly completed invoices. Payment will be directly deposited in the bank account or sent to the address Contractor designated in this Agreement.

Upon expiration or termination any claims for payment for costs due and payable under this Agreement that are incurred prior to the expiration date must be submitted by Contractor within sixty (60) calendar days after the expiration date. There will be no obligation to pay any claims that are submitted sixty-one (61) or more calendar days after the expiration date ("Belated Claims"). Belated Claims will be paid at HCA's sole discretion, and any such potential payment is contingent upon the availability of funds.

## **6. AGREEMENT CHANGES, MODIFICATIONS AND AMENDMENTS**

This Agreement may be amended by mutual agreement of the parties. Such amendments are not binding unless they are in writing and signed by an Authorized Representative of each party.

## **7. SUBCONTRACTING**

Neither the Contractor nor any Subcontractor shall enter into subcontracts for any of the work contemplated under this Agreement without obtaining HCA's prior written approval. HCA shall have no responsibility for any action of any such Subcontractors.

## **8. ASSIGNMENT**

The work to be provided under this Agreement, and any claim arising thereunder, is not assignable or delegable by either party in whole or in part, without the express prior written consent of the other party, which consent will not be unreasonably withheld.

## **9. CONTRACT MANAGEMENT**

The Contract Manager for each of the parties, named on the face of this Contract, will be responsible for and will be the contact person for all communications and billings regarding the performance of this Agreement. Either party must notify the other party within thirty (30) days of change of Contract Management. Changes in Contract Management shall require an amendment.

## **10. DISALLOWED COSTS**

The Contractor is responsible for any audit exceptions or disallowed costs incurred by its own organization or that of its Subcontractors.

## **11. DISPUTES**

In the event that a dispute arises under this Agreement, it will be determined by a Dispute Board in the following manner: Each party to this Agreement will appoint one member to the Dispute Board. The members so appointed will jointly appoint an additional member to the Dispute Board. The Dispute Board will review the facts, Agreement terms and applicable statutes and rules and make a

determination of the dispute. The Dispute Board will thereafter decide the dispute with the majority prevailing. The determination of the Dispute Board will be final and binding on the parties hereto. As an alternative to this process, either of the parties may request intervention by the Governor, as provided by RCW 43.17.330, in which event the Governor's process will control.

## **12. GOVERNANCE**

This Agreement is entered into pursuant to and under the authority granted by the laws of the state of Washington and any applicable federal laws. The provisions of this Agreement will be construed to conform to those laws.

In the event of an inconsistency in the terms of this Agreement, or between its terms and any applicable statute or rule, the inconsistency will be resolved by giving precedence in the following order:

- 12.1. Applicable state and federal statutes and rules;
- 12.2. Schedule A, Statement of Work - TFCBT / CBT+ Training & Consultation Services; and
- 12.3. Any other provisions of the agreement, including materials incorporated by reference.

## **13. INDEPENDENT CAPACITY**

The employees or agents of each party who are engaged in the performance of this Agreement will not be considered for any purpose to be employees or agents of the other party.

## **14. RECORDS MAINTENANCE**

The parties to this Agreement will each maintain books, records, documents and other evidence which sufficiently and properly reflect all direct and indirect costs expended by either party in the performance of the services described herein. These records will be subject to inspection, review or audit by personnel of both parties, other personnel duly authorized by either party, the Office of the State Auditor, and federal officials so authorized by law. All books, records, documents, and other material relevant to this Agreement will be retained for six years after expiration and the Office of the State Auditor, federal auditors, and any persons duly authorized by the parties will have full access and the right to examine any of these materials during this period.

Records and other documents, in any medium, furnished by one party to this Agreement to the other party, will remain the property of the furnishing party, unless otherwise agreed. The receiving party will not disclose or make available this material to any third parties without first giving notice to the furnishing party and giving it a reasonable opportunity to respond. Each party will use reasonable security procedures and protections to assure that records and documents provided by the other party are not erroneously disclosed to third parties.

## **15. RIGHTS IN DATA**

Unless otherwise provided, data which originates from this Agreement will be "works for hire" as defined by the U.S. Copyright Act of 1976 and will be owned by **HCA**. Data will include, but not be limited to, reports, documents, pamphlets, advertisements, books, magazines, surveys, studies, computer programs, films, tapes and/or sound reproductions. Ownership includes the right to copyright, patent, register and the ability to transfer these rights.

## **16. CONFIDENTIALITY**

Each party agrees not to divulge, publish or otherwise make known to unauthorized persons confidential information accessed under this Agreement. Contractor agrees that all materials containing confidential information received pursuant to this Agreement, including, but not limited to information derived from or containing patient records, claimant file and medical case management report information, relations with HCA's clients and its employees, and any other information which may be classified as confidential, shall not be disclosed to other persons without HCA's written consent except as may be required by law.

## **17. SEVERABILITY**

If any provision of this Agreement or any provision of any document incorporated by reference will be held invalid, such invalidity will not affect the other provisions of this Agreement, which can be given effect without the invalid provision if such remainder conforms to the requirements of applicable law and the fundamental purpose of this agreement, and to this end the provisions of this Agreement are declared to be severable.

## **18. FUNDING AVAILABILITY**

HCA's ability to make payments is contingent on funding availability. In the event funding from state, federal, or other sources is withdrawn, reduced, or limited in any way after the effective date and prior to completion or expiration date of this Agreement, HCA, at its sole discretion, may elect to terminate the Agreement, in whole or part, or to renegotiate the Agreement subject to new funding limitations and conditions. HCA may also elect to suspend performance of the Agreement until HCA determines the funding insufficiency is resolved. HCA may exercise any of these options with no notification restrictions.

## **19. TERMINATION**

Either party may terminate this Agreement upon 30-days' prior written notification to the other party. If this Agreement is so terminated, the parties will be liable only for performance rendered or costs incurred in accordance with the terms of this Agreement prior to the effective date of termination.

## **20. TERMINATION FOR CAUSE**

If for any cause, either party does not fulfill in a timely and proper manner its obligations under this Agreement, or if either party violates any of these terms and conditions, the aggrieved party will give the other party written notice of such failure or violation. The responsible party will be given the opportunity to correct the violation or failure within 15 working days. If failure or violation is not corrected, this Agreement may be terminated immediately by written notice of the aggrieved party to the other.

## **21. WAIVER**

A failure by either party to exercise its rights under this Agreement will not preclude that party from subsequent exercise of such rights and will not constitute a waiver of any other rights under this Agreement unless stated to be such in a writing signed by an Authorized Representative of the party and attached to the original Agreement.

**22. ALL WRITINGS CONTAINED HEREIN**

This Agreement contains all the terms and conditions agreed upon by the parties. No other understandings, oral or otherwise, regarding the subject matter of this Agreement will be deemed to exist or to bind any of the parties hereto.

**23. SURVIVORSHIP**

The terms, conditions and warranties contained in this Agreement that by their sense and context are intended to survive the completion of the performance, expiration or termination of this Agreement shall so survive. In addition, the terms of the sections titled Rights in Data, Confidentiality, Disputes and Records Maintenance shall survive the termination of this Agreement.

**Schedules**

Schedule A: Statement of Work (SOW) TFCBT / CBT+ Training & Consultation Services

## **Schedule A**

### **Statement of Work - TFCBT / CBT+ Training & Consultation Services**

The Contractor shall provide the services and staff, and otherwise do all things necessary for or incidental to the performance of this work, as set forth below.

Cognitive Behavioral Therapy-Plus (CBT+) will require participants to pay \$250.00 to contribute to support for the training. The purpose of this fee is to build a sustainable and expanded model with contributions from multiple sources, including provider organizations, the states and other sources.

#### **1 COORDINATION AND FACILITATION**

The Contractor shall coordinate and facilitate ongoing training and technical assistance in CBT+, including use of the Evidence Based Practices (EBP) Toolkit and three-hour UMU Asynchronous Training Format and provide ongoing training and technical assistance to Community Mental Health Agencies (CMHA) including:

- 1.1 Five virtual CBT+ regional Learning Collaboratives will be offered.
- 1.2 The Washington CBT+ Trainer/Regional Consultants will assume primary responsibility in their communities for encouraging interest, publicizing the trainings, arranging online training platforms, and soliciting additional support. They will work closely with managed care plans including Managed Care Organizations (MCOs) and Behavioral Health Administration Service Organizations (BHASO) in terms of identifying need, helping publicize and potentially providing some support. Trainings will be identified as co-sponsored by HCA, CBT+ Contractor, and the local mental health provider organization that helps with the organization and delivery. If other entities contribute to the training, those will also be identified.
  - 1.2.1 The regional CBT+ Learning Collaboratives will adhere to the written requirements including; completion of the 3-hour Asynchronous training prior to the in-person training, attendance at the 4-day online training, participation in the required number of consultation calls, delivery of the EBPs to the requisite number of cases with fidelity, and completion of a baseline and follow-up evaluation survey.
  - 1.2.2 Contractor will provide quality assurance and maintain the infrastructure support including registration, obtaining Continuing Education Units (CEUs), documenting and tracking payment for the Learning Collaborative, creating and revising training curricula, creating training resources for participants, compiling training evaluations, tracking attendance and completion, issuing and maintaining the certificates, placing participants on the listserv, placing resources on the CBT+ Notebook, sending reminder notices for consultation calls, and overseeing invoicing from trainer/consultants.
- 1.3 Clinical and/or fidelity-based follow-up group telephonic consultation for core learning session trainees consisting of:
  - 1.3.1 A one-hour, online, group consultation session twice per month for six months, for a total of 12 sessions.
  - 1.3.2 Use the EBP Toolkit to document fidelity for the training cases.

#### 1.4 Advanced Clinical Training

Contractor shall conduct a one-day advanced training for attendees of past learning collaboratives by August 31, 2022, and is responsible for the following:

##### 1.4.1 Submission of a narrative as part of the following quarter's report to HCA including:

- 1.4.1.1 Date, time, place, topic, and presenter;
- 1.4.1.2 List of provider affiliation of attendees i.e., position, CMHC, managed care plan, and county; and
- 1.4.1.3 Narrative summary of attendee feedback and recommendations for future advanced topics.

#### 1.5 Clinical Senior Leader/Supervisor Training

Coordinate and conduct a one-day clinical senior leader/supervisor training for CMHA organizations and supervisors who have attended a core learning collaborative. The focus of the clinical senior leader/supervisor one-day training will be practical strategies for sustainment of the four EBPs comprised within CBT+. Contractor will:

- 1.5.1 Work with Clinical Senior Leaders/Supervisors to identify operational, system and clinical topics relevant to sustainment of EBPs past the Learning Collaborative.
- 1.5.2 Permit agency or Regional Authority administration to attend as indicated.
- 1.5.3 Conduct routine satisfaction surveys and include summary of attendee feedback and recommendations in the following quarterly report.
- 1.5.4 Offer 12 one-hour monthly consultation sessions for CMHA supervisors who have attended and completed one or more core-learning collaborative and are implementing agency fidelity supports.

#### 1.6 Conduct Washington Trainer Candidate training for new potential Washington Trainer/Consultant candidates. Training occurs through mentorship during training and providing co-facilitation options for new candidates to learn how to successfully provide CBT+ consultation.

#### 1.7 Provider and/or Clinician Support

The Contractor shall continue to facilitate clinician and agency fidelity practice and growth through maintenance of:

- 1.7.1 Provider list-serve.
- 1.7.2 CBT+ Notebook on the Contractor website containing public domain resources for delivery of the 4 CBT+ EBPs.

## 1.8 Evaluation

The Contractor shall conduct evaluation of activities consisting of:

- 1.8.1 Training evaluations following each workshop and training activity communicating satisfaction, learning achieved, and subjective feedback of recommendations.
- 1.8.2 Baseline, post in-person learning session, and post-consultation surveys of participating providers on competence in the four CBT+ EBPs.
- 1.8.3 Provide recommendations for future dissemination and implementation support.

## 1.9 Recruit and maintain quality assurance for the Washington CBT+ approved trainers/consultants for the regional CBT+ trainings. CBT+ trainers shall be approved by the Contractor in consultation with HCA Contract Manager listed on the Cover Page of this Agreement.

- 1.9.1 Identify and train new Washington CBT+ Trainer/Consultants to ensure sufficient trainers and consultants to meet need.
- 1.9.2 Review and update the Training Guide and PowerPoint presentation that all Washington Trainer/Consultants must use based on feedback and input from UW Trainer Consultants.
- 1.9.3 Participate in regional trainings to ensure that the Washington CBT+ Trainer/Consultants are teaching consistent with the Trainer Guide and CBT+ Training PowerPoint presentation and to insure sufficient trainers for application of adult learning principles.
- 1.9.4 Provide quality assurance for adherence to the training and consultation expectations. Monitor to determine whether the WA CBT+ Trainer/Consultants covered the key learning points for each slide.
- 1.9.5 Provide constructive feedback to WA CBT+ Trainer/Consultants on teaching style, coverage of required content, and engagement with the audience.

## 1.10 Overall Leadership and Quality Assurance for CBT+

- 1.10.1 Continue reviewing and sharing new and relevant research with the Trainers and/or Consultants and on the listservs, create and post new handouts, cheat sheets, or other resources on the CBT+ Notebook.
- 1.10.2 Review and revise in-person learning content and activities including modeling, role plays, and table activities as needed.
- 1.10.3 Following each regional CBT+ training, review post training surveys to identify areas needing improvement.
- 1.10.4 Review and update WA CBT+ Consultant Guide annually and as needed.
- 1.10.5 Provide supportive information for the Washington CBT+ Trainer/Consultants to maintain adherence to the CBT+ consultation model.

1.11 Coordinate and facilitate ongoing training and technical assistance in Common Elements Treatment Approach (CETA)

The Contractor shall provide ongoing training and technical assistance to CMHAs including:

- 1.11.1 Two CETA three-day online Learning Collaboratives will be offered for up to 35 providers each. CETA will require participants to pay \$150 to contribute to support for the Learning Collaborative which includes training and twice monthly group case consultation for six months. The purpose of the fee is to build a sustainable and expanded model that involves contributions from multiple sources, including provider organizations and the state.
- 1.11.2 The Contractor CETA Trainer/Consultants will conduct the in-person or online training and consultation calls along with regional trainer/consultants.
- 1.11.3 Potential candidates for WA CETA Trainer/Consultants will be identified and given co-training and consultation experience.
- 1.11.4 The participation and certificate of completion requirements will be modeled on the CBT+ requirements and include:
  - 1.11.4.1 Attendance at the two-day in-person or online training;
  - 1.11.4.2 Participation in the consultation calls; and
  - 1.11.4.3 Delivery of CETA to the requisite number of cases with fidelity.
- 1.11.5 Contractor will provide quality assurance and maintain the infrastructure support including registration, obtaining CEUs, documenting and tracking payment for the Learning Collaborative, creating and revising curricula, creating training resources for participants, compiling training evaluations, tracking attendance and completion, issuing and maintaining the certificates, placing participants on the listserv, placing resources on the
- 1.11.6 CETA Notebook, sending reminder notices for consultation calls, overseeing invoicing from trainer/consultants.

1.12 Clinical and/or fidelity-based follow-up group telephonic consultation for core learning session trainees consisting of:

- 1.12.1 A one-hour online group consultation session twice per month for six months, for a total of 12 sessions.
- 1.12.2 Use the EBP Toolkit to document fidelity for the training cases.

1.13 Update CETA materials to include a manual, trainer guide, Power Point presentation, and provider and client materials.

1.14 Make attendance and fidelity monitoring improvements in the CETA Toolkit.

1.15 Develop and carry out an evaluation of the CETA Learning Collaborative.

## 2 REPORTS

### 2.1 October 1, 2021 - September 29, 2022

Report Title	Documented Information	Date(s) Due
<b>Quarterly Report</b>	<ul style="list-style-type: none"> <li>• Training, consultation, and coaching activity</li> <li>• Numbers served</li> <li>• Faculty</li> <li>• Satisfaction and feedback surveys results and recommendations.</li> </ul>	Submit quarterly on: <ul style="list-style-type: none"> <li>• December 31, 2021</li> <li>• March 31, 2022</li> <li>• June 30, 2022</li> <li>• September 29, 2022</li> </ul>
<b>WA CBT+ &amp; CETA Consultant Guide</b>	<ul style="list-style-type: none"> <li>• Updated consultant guide submitted to the HCA Contract Manager.</li> </ul>	<ul style="list-style-type: none"> <li>• September 29, 2022</li> </ul>
<b>Final Report</b>	<ul style="list-style-type: none"> <li>• Evaluation data and analysis</li> <li>• Annual overview:               <ul style="list-style-type: none"> <li>– Satisfaction surveys, lessons learned, subjective feedback;</li> <li>– Fidelity / quality management activities, lessons learned, subjective feedback;</li> <li>– Agency and Regional Authority involvement, both current and total overall participation; and</li> <li>– Recommendations for future fidelity / quality management practices.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• September 31, 2022</li> </ul>

## 3 DELIVERABLES TABLE(S)

Revenue for CBT+ and CETA registrations to cover trainer fees.

### 3.1 October 1, 2021 - September 29, 2022

Deliverable	Due Date	Per Quarter	Total Payment
Quarterly Reports	Quarterly per Section 2.1	\$58,051.25	\$232,205.
Co-Consultants Fees	Quarterly per Section 2.1	\$450.	\$1,800.
Zoom Accounts	Quarterly per Section 2.1	\$300.	\$1,200.

	Toolkit Access *1 year for 245 people	Quarterly per Section 2.1	\$3,062.50	\$12,250.
	Travel	Quarterly per Section 2.1	\$500.	\$2,000.
	CETA Co-trainer	Quarterly per Section 2.1	\$500.	\$2,000.
	Supplies	Quarterly per Section 2.1	\$250.	\$1,000.
	1-day Supervisor Training Expenses	3/31/2022 & 6/30/2022	\$2,000. Q2 & Q3 Only	\$2,000.
	CBT+ Advanced Training Honorarium & Travel	6/30/2022	\$6,000. Q3 Only	\$6,000.
	Evaluation Report CBT+ *Invoice following report submission.	9/29/2022	\$1,000. Q4 Only	\$1,000.
	Evaluation Report CETA *Invoice following report submission.	9/29/2022	\$1,000. Q4 Only	\$1,000.
	Revised/Updated WA CBT+ Consultant Guide	9/29/2022	\$250. Q4 Only	\$250.
	Revised/Updated WA CETA Manual, Training Guide, and Power Point	9/29/2022	\$250. Q4 Only	\$250.
	Final Report	9/29/2022	\$500. Q4 Only	\$500.
<b>Total Contract Maximum:</b>				<b>\$263,455.</b>