



Psychiatric Education Capacity Expansion (PECE) Program

Psychiatry Residency Grant Program

Grant Guide  
For Fiscal Year 2022-23

If your program requires approval to contract from a coordinating authority, please inform the authority of the terms and conditions contained in the sample grant agreement. Applicants must agree to the terms and conditions before receiving funds. The Department of Health Care Access and Information will not make changes to the terms and conditions specified in the sample grant agreements.

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## **A. Background and Mission**

The Department of Health Care Access and Information (HCAI) administers health workforce programs, including the Psychiatric Education Capacity Expansion (PECE) Grant Programs. State budget appropriations fund the expansion of postsecondary education and training to meet behavioral health occupational and service shortage needs.

This grant opportunity will result in one or more grant agreements with educational institutions, medical sites, or other organizations to develop and expand psychiatry residency programs that train and prepare residents, child and adolescent psychiatry fellows, and/or addiction psychiatry fellows to serve underserved children and youth ages 0 through 25, as well as others at risk of chronic behavioral health conditions. These activities would include capacity to:

1. Work on multi-disciplinary teams
2. Work with underserved populations
3. Reflect PECE guiding principles in coursework and clinical rotations

## **B. Purpose and Description of Services**

This Grant Guide will result in funding organizations to train psychiatry residents, child and adolescent psychiatry fellows, and/or addiction psychiatry fellows to work in underserved communities, including, but not limited to:

1. Adding psychiatry residency, child and adolescent psychiatry fellowship, and/or addiction psychiatry fellowship slots to an existing psychiatry residency program.
2. Recruiting culturally and linguistically diverse psychiatry residents, child and adolescent psychiatry fellows, and/or addiction psychiatry fellows that reflect the socio-demographic and other characteristics of underserved communities.
3. Providing training in how to deliver culturally competent and linguistically appropriate psychiatric care.
4. Increasing the number of hours psychiatry residents, child and adolescent psychiatry fellows, and/or addiction psychiatry fellows train in underserved communities, focused on delivering services to children and youth through age 25 and their caregivers, as well as others at risk of chronic behavioral health conditions.
5. Modifying curriculum as necessary to include the PECE guiding principles:
  - a. Work in multidisciplinary teams that include primary care physicians, family nurse practitioners, and other health care workers with unserved and/or

- underserved populations in underserved communities, including children and youth involved in justice, child welfare, and/or special education systems.
- b. Are trained to provide services in a culturally competent and sensitive manner.
  - c. Are trained in the values of wellness, recovery, and resilience, to include the role of self-help, recovery, and empowerment support.
  - d. Are specifically trained in assisting children and youth through age 25 and family members to access public benefits, work incentive provisions, and transition from a public to a private benefit system, as well as educational systems.
  - e. Are trained to work in and foster a consumer and family member driven system of care.
  - f. Are trained to provide integrated primary and behavioral health services, including:
    1. Assessment
    2. Diagnosis
    3. Outcome identification
    4. Individualized planning
    5. Coordination of care
6. Providing training that leads to certification by the American Board of Psychiatry and Neurology.
7. Encouraging psychiatry residents and/or child and adolescent fellows to choose work serving underserved communities after they complete their residency/fellowship requirements.

### **C. Determining Eligibility**

To find out if your program is eligible for this funding opportunity, please answer the questions below:

1. Are you an Accreditation Council for Graduate Medical Education (ACGME) accredited program for psychiatry residency willing to seek accreditation of additional psychiatry residency slots? Will you receive approval before June 30, 2023?

If yes, you may apply for psychiatry residency expansion program funds.

2. Are you an ACGME accredited program for psychiatry residency willing to seek accreditation to establish or expand child and adolescent psychiatry fellowships and/or addiction psychiatry fellowships positions?

If yes, you may apply for psychiatry residency expansion training program funds for this specific purpose.

3. Are you a hospital willing to seek accreditation of a new psychiatry residency program?

If yes, will you expect to receive ACGME accreditation by June 30, 2025?

If yes, you may apply for this grant opportunity providing you expect to receive ACGME accreditation by June 30, 2025.

#### **D. Available Funding**

HCAI is offering a one-time grant opportunity with no implied or expressed guarantee of subsequent funding after the initial contract award resulting from this application. Awardees shall use the funding to enhance the capacity of psychiatric residency programs to meet behavioral health occupation shortage needs. Awardees shall not use these funds to supplant existing funds.

State funding is available to support PECE, which includes new and expanded Psychiatric Mental Health Nurse Practitioner (PMHNP) training programs, and new and expanded Psychiatry Residency Programs.

HCAI may award full, partial, or no funding to an applicant based on the applicant's criteria score and the amount of available funds. Competitive proposals will meet the PECE Program evaluation criteria and demonstrate a commitment to PECE guiding principles.

1. New Psychiatry Residency Programs

Eligible programs may receive an award up to \$2,500,000.

2. Expand existing Psychiatry Residency Programs Expansion

Eligible programs may receive \$175,000 per filled first year positions. HCAI will reimburse costs annually per psychiatry resident for up to four years, as well as per child and adolescent psychiatry fellow and/or addition psychiatry fellow for up to two years.

#### **E. Funding Categories**

1. **New Psychiatry Residency Programs**

Funding to offset the costs associated with achieving accreditation by June 30, 2025.

2. **Psychiatry Residency Expansion Programs**

Funding to support a Psychiatry Residency Programs that is permanently expanding the number of residents through up to state fiscal year (FY) 2026-27.

## F. Grant Questions and Answers

You can find answers to most questions in this Grant Guide.

Prospective applicants may submit questions to [MSHAWET@HCAI.ca.gov](mailto:MSHAWET@HCAI.ca.gov) at any time during the application cycle.

## G. Initiating an Application

1. Applicants should provide concise descriptions of their ability to satisfy the Grant Guide requirements. Applicants must submit applications that are complete and accurate. HCAI may reject an application that contains omissions, inaccuracies, or misstatements.
2. Applicants must submit their applications by July 1, 2022, through the web-based PECE Application located at [https://oshpd.sjc1.qualtrics.com/jfe/form/SV\\_cVbECJBuGRXzTMO](https://oshpd.sjc1.qualtrics.com/jfe/form/SV_cVbECJBuGRXzTMO).
3. Applicants must submit a sustainability letter that indicates the number residents to be permanently added. See Attachment C “Sample Psychiatry Residency Sustainability Letter.”
4. HCAI may reject an application if it is conditional or incomplete, or if the application contains any alterations of form or other irregularities of any kind. HCAI may reject any or all applications and may waive an immaterial deviation in an application. HCAI's waiver of an immaterial deviation shall in no way modify the Grant Guide or excuse the applicant from full compliance with all requirements if awarded the agreement.
5. Applicants are entirely responsible for costs incurred in developing applications in anticipation of award of the agreement and shall not charge the State of California for these costs.
6. An individual authorized to represent the applicant shall complete the PECE Application.
7. HCAI may modify this Grant Guide prior to the final application submission deadline by issuing an addendum at <https://hcai.ca.gov/loans-scholarships-grants/grants/bhp/>
8. HCAI reserves the right to reject all applications.
9. HCAI considers that the submission of an application implies express acceptance of the terms. All applicants must agree to the terms and conditions outlined in Attachment D: Sample PECE Psychiatry Residency Program Expansion Grant Agreement before receiving funds, or Attachment E: New PECE Residency Program Grant Agreement.

10. HCAI does not accept alternate grant agreement language from a prospective Grantee. HCAI will consider an application with such language to be a counteroffer and will reject it. HCAI will not negotiate the terms and conditions outlined in sample grant agreement located in Attachment D or Attachment E.
11. If your program requires approval from a coordinating authority to enter into a grant agreement with HCAI, please inform the authority of the terms and conditions contained in the Sample Grant Agreement located in Attachment D or Attachment E.
12. Awardees must sign and submit grant agreements by the HCAI due date. If the Awardee fails to sign and return the grant agreement by the due date, it may result in loss of the award.
13. When the Grantee is a county or other local public body, the Grantee must include a copy of the resolution, order, motion, ordinance, or other similar document from the local governing body authorizing execution of the grant agreement with the signed grant agreement.
14. If, upon reviewing all deliverables, HCAI finds that the Grantee has not met all requirements and/or expended all funds, HCAI will withhold payment(s) and/or request the remittance of funds from the Grantee.
15. The Public Records Act shall apply to all grant deliverables, including applications, reports, and supporting documentation.
16. HCAI shall not consider any oral understanding or agreement to be binding on either party.

## **H. Budget Restrictions**

Grantee shall not use these funds to supplant existing funds.

## **I. Evaluation and Scoring Procedures**

### **1. Evaluation and Scoring**

HCAI staff will review and score all applicants with complete applications.

### **2. Evaluation and Scoring Criteria**

Please refer to Attachment A for the Evaluation Criteria.

**i. Review Process**

During the review process, HCAI staff will verify the presence of required information as specified in this Grant Guide and score applications using only the established evaluation criteria as described in Attachment A. The most competitive applicants are those most consistent with the intent of this grant opportunity.

If, in the opinion of HCAI, an application contains false or misleading information, or provides documentation that does not support an attribute or condition claimed, HCAI shall reject the application. HCAI reserves the right to reject any or all applications or to reduce the amount funded to an applicant.

An applicant may not change its application after the application deadline.

**ii. Evaluation and Scoring**

HCAI will make final selections using the Evaluation and Scoring Criteria described in Attachment A. HCAI also intends for the PECE Psychiatry Residency Grant Program to support a geographic distribution in California. Applicants seeking to support geographic regions not addressed by other scored applications may receive preference. Once HCAI makes the final selections, HCAI will announce awardees.

HCAI reserves the right to determine the number of grant agreement(s) awarded and to modify the amount awarded to each Grantee.

**J. Grant Agreement Deliverables**

Grantees must submit annual program reports, along with supporting materials, to HCAI in accordance with the schedule provided in the grant agreement.

The Program Report is an annual online survey that HCAI will send out at the end of the first fiscal year. The Program Report collects data on program processes and outcomes and HCAI will use the results to evaluate the impact of the grant program. It will collect data on residents/fellows, graduate employment, field placement(s), and training hours worked in underserved communities and/or rural areas, along with expenditures over each year and for the grant duration.

Grantees establishing new programs are required to complete each of the following phases:

Phase A	ACGME Institutional Accreditation
Phase B	Fiscal Plan
Phase C	Timeline in place
Phase D	Training sites recruited
Phase E	Curriculum Development
Phase F	Faculty Recruitment
Phase G	ACGME Program Accreditation

It is the sole responsibility of the grantee to adhere to the terms of the grant agreement. HCAI will withhold the final payment until the Grantee has submitted all required reports and received HCAI approval

**K. Post Award and Payment Provisions for Psychiatry Residency Program Expansion Funding**

1. Grantees will enter into agreements expiring on June 30, 2027, or earlier.
2. HCAI does not allow indirect costs.
3. HCAI makes payments annually in arrears upon receipt of annual program report, expenditure documentation, and verification of increased psychiatry residency positions.
4. HCAI will release the first annual payment upon receipt of proof of ACGME accreditation for the increased number of psychiatry residency positions.
5. Any new awards will rescind previous awards/grant agreements.

**L. Post Award and Payment Provisions for New Psychiatry Residency Programs**

1. Grantees will enter into agreements expiring on June 30, 2025.
2. New Psychiatry Residency Programs that have not received ACGME program accreditation by the end of the grant term will not be reimbursed for costs incurred.
3. HCAI will release the first payment (25 percent of grant award) upon completion of Phase A for allowable expenses upon receipt of the ACGME institutional accreditation letter.
4. HCAI will release the second payment (25 percent of grant award) upon completion of Phases A through D and other stipulated conditions in grant agreement based on reported allowable expenses and proof of expenditures.

5. HCAI will release the balance of the grant payable based on actual expenses, with proof of completing Phases A through G, receipt of ACGME Residency Accreditation, and other stipulated conditions in grant agreement based on reported allowable expenses up to the grant amount awarded. See Attachment B-2: Sample New Program Accreditation Letter.
6. Any new awards will rescind previous awards/grant agreements.

#### **M. Additional Terms and Conditions**

1. The grantee shall submit in writing any requests to change or to extend the grant period or to change the budget at least 90 days before the grant end date.
2. The grantee shall submit post-graduation employment and related data, for five years.

#### **N. Webinar**

HCAI will conduct a webinar to assist applicants to complete and submit an application. For information about the webinar, see <https://hcai.ca.gov/loans-scholarships-grants/grants/bhp/>.

#### **O. Key Dates**

The key dates for the program year are:

<b>Key Event</b>	<b>Dates and Times</b>
Application opens	May 27, 2022, at 3:00 p.m.
Technical Assistance Webinar	June 13, 2022 at 12:00 p.m.
Application closes	July 1, 2022, at 3:00 p.m.
Notice sent to awardees	July 22, 2022
Grant terms: New Psychiatry Residency Programs Psychiatry Residency Expansion Programs	Proposed term date: August 29, 2022 – June 30, 2025 August 29, 2022 – June 30, 2027

#### **P. Application Components**

A submitted application must contain all information and conform to the format described in this Grant Guide.

The PECE Application gathers information that HCAI will use to evaluate the merits of applying education institutions, hospitals, and organizations seeking funds to create or expand residencies and/or child and adolescent fellowships. The application seeks information that includes, but is not limited to, the number of current or proposed

residents and/or fellowships that the applicant plans to admit in the existing or proposed program, current and/or proposed rotations in underserved communities and in rural settings and plans to sustain program after HCAI grant expires.

PECE Psychiatry Residency Expansion Program applications must include a copy of the ACGME accreditation letter for current slots for psychiatry residents and child and adolescent fellowships.

Applications must also include a letter from the organization or sponsoring organization committing to sustain the expanded slots. See Attachment C: Sample Psychiatry Residency Sustainability Letter.

#### **Q. Department Contact**

For questions related to the PECE Psychiatry Residency Grant Program application, please email HCAI staff at [MHSAWET@HCAI.ca.gov](mailto:MHSAWET@HCAI.ca.gov).

#### **Thank you!**

We thank you for your interest in applying for the PECE Psychiatry Residency Expansion Program and for your continued efforts in educating psychiatry residents to serve in underserved communities.

### Attachment A: Evaluation Criteria for Psychiatry Residency Program

	ELEMENT	METHODOLOGY	MAX
1	Patient Demographics	0 points: patient language is equal to or less than 10% of Medi-Cal Threshold languages 10 points: patient language is between 10%-34% of Medi-Cal Threshold languages 20 points: patient language is at least 35% of Medi-Cal Threshold languages	20
2	Resident Recruitment Strategies	Does the applicant identify how their program will implement culturally responsive care training into the program's curriculum? 0 points: The applicant does not identify any strategies 8 points: The applicant identifies 1-5 strategies demonstrating that their program will implement culturally responsive care training into the program's curriculum. 15 points: The applicant identifies 6 or more strategies demonstrating that their program will implement culturally responsive care training into the program's curriculum.	15
3	Workforce in Areas of Unmet Need Strategies	Does the applicant identify program strategies to address how they will encourage residents to practice in areas of unmet need? 0 points: The applicant does not identify any strategies 8 points: The applicant identifies 1-3 strategies demonstrating how they will ensure encourage residents practice in areas of unmet need 15 points: The applicant identifies 4 or more strategies demonstrating how they will ensure encourage residents to practice in areas of unmet need	15
4	Cultural Competency Strategies	Does the applicant identify how their program will implement culturally responsive care training into the program's curriculum? 0 points: The applicant does not identify any strategies 8 points: The applicant identifies 1-5 strategies demonstrating how their program will implement culturally responsive care training into the program's curriculum. 15 points: The applicant identifies 6 or more strategies demonstrating how their program will implement culturally responsive care training into the program's curriculum.	15
5	Payor Mix	20 points: combination of Medi-Cal, Medi-Cal/Medicare, and Uninsured Payers 75-100% 10 points: combination of Medi-Cal, Medi-Cal/Medicare, and Uninsured Payers 50-74% 0 points: combination of Medi-Cal, Medi-Cal/Medicare, and Uninsured Payers 0-49%	20
6	Training Sites	Assign points to primary sites based on the severity of the HPSA score 20 points—HPSA Mental Health score equal to or greater than 18 10 points—HPSA Mental Health score between 17 and 14 0 points—HPSA Mental Health score equal to or below 13	20
Maximum points:			105

**Attachment B-1: Required Attachment – Sample ACGME Psychiatry Residency  
Program Expansion Letter Showing Number of Residents**

Accreditation Council for  
Graduate Medical  
Education

515 North State Street  
Suite 2000  
Chicago, IL 60654

Phone 312.755.5000  
Fax 312.755.7498  
www.acgme.org

August 12, 2015



██████████  
Program Director

Dear Dr. ██████████

The Residency Review Committee for ██████████, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

██████████  
████████████████████████████████████████████████████████████████████████████████  
████████████████████████████████████████████████████████████████████████████████  
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Program ██████████

Maximum Number of Residents: ██████████

**OTHER COMMENTS**

The Review Committee approved your request for a permanent increase from ██████ to ██████ positions, effective 7/1/2015.

This office must be notified of any major changes in the organization of the program. When corresponding with this office, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System.

## Attachment B-2: Required Attachment – Sample ACGME New Psychiatry Residency Program Accreditation Letter

Accreditation Council for  
Graduate Medical  
Education

515 North State Street  
Suite 2000  
Chicago, IL 60654

Phone 312.755.5000  
Fax 312.755.7498  
www.acgme.org

11/18/2015



Residency Director  
Residency Program

Dear Dr. [REDACTED]

The Residency Review Committee for [REDACTED] functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the application for accreditation submitted by the following program:



Program [REDACTED]

Based on all of the information available at its recent meeting, the Review Committee conferred the following action:

Status: Initial Accreditation  
Maximum Number of Residents: [REDACTED]  
Effective Date: 07/01/2016  
Approximate Next Site Visit: 07/01/2018

### AREAS NOT IN COMPLIANCE (Citations)

The Review Committee cited the following areas as not in substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements:

### NEW CITATIONS

#### Institutional Support-Sponsoring Institution | Since: 10/19/2015 | Status: New

Sponsoring Institution - I.A.3.

There must be agreement with specialists in other areas/services regarding the requirement (II.D.2) that residents maintain concurrent commitment to their patients in the [REDACTED] site during these rotations. (Core)

The Committee was not able to determine substantial compliance with the requirement. Specifically, at the time of the site visit, there were no written agreements in place, and the program director reported having "verbal" discussions with and is working with specialists in other areas/services. (Site Visitor Report, pp. 7)

#### Responsibilities of Faculty | Since: 10/19/2015 | Status: New

## Attachment C: Sample Psychiatry Residency Sustainability Letter

Department of Health Care Access and Information  
2020 West El Camino Avenue, Suite 800  
Sacramento, CA 95833

Re: [REDACTED] Residency (Grant Application [REDACTED])

Dear Sir or Madam:

To achieve the best outcomes, [REDACTED] Residency trains the next generation of [REDACTED] professionals to meet the health care needs of patients and their families.

[REDACTED], accredited by ACGME as a Sponsoring Institution, seeks to create the most compassionate and comprehensive, integrated care model to provide a high quality [REDACTED] delivery system which provides equal access to available care and serves our mission and Core Values to reflect [REDACTED] love to our community by healing body, mind and spirit.

As a Sponsoring Institution, [REDACTED] pledges our ongoing financial commitment to the program, operational support of resident learning experiences, and commitment of physical space for resident learning and patient care activities in addition to necessary financial support for administrative, resources, including personnel, of the [REDACTED] Residency Program which:

- Demonstrate quality and excellence in:
  - clinical care (patient safety, quality improvement, transitions in care, supervision of care delivery);
  - resident performance (knowledge, skills, scholarly activities, communication, professionalism, fatigue/stress management);
  - faculty development; and
  - long-term academic leadership.
- Prepare practitioners, researchers and healthcare leaders to provide the highest quality, evidence-based, cost effective, medical services.
- Improve quality, compassionate access to quality [REDACTED] health care and enhance wellness of [REDACTED] adolescents, and adults throughout our medically underserved region and beyond.
- Prepare future medical educators and researchers to advance the state of knowledge in healthcare.

We remain deeply committed to [REDACTED] education and continuously assess the quality of the [REDACTED] Residency Program, track trainee performance, and measure the program's outcomes. [REDACTED] maintains an ethical, professional and educationally rich environment for all trainees. The results are shared bi-monthly with the Graduate Medical Education Committee and the [REDACTED] Executive Committee. Additionally, graduate medical education has the full support of the Board of Directors (GME is a standing agenda item for [REDACTED] Committee and Board meetings).

We are extremely proud of the residents, faculty and staff in our Graduate Medical Education programs and welcome your questions or comments. Thank you for considering the grant application for the [REDACTED] Residency.

Sincerely,

[REDACTED]  
President and Chief Executive Officer

**Attachment D: Sample PECE Psychiatry Residency Program Expansion Grant Agreement**

**GRANT AGREEMENT BETWEEN THE  
DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION AND  
[GRANTEE NAME], [PROGRAM NAME]**

**GRANT AGREEMENT NUMBER [GRANT AGREEMENT NUMBER]**

THIS GRANT AGREEMENT ("Agreement") is entered into on [Agreement Start Date] ("Effective Date") by and between the State of California, Department of Health Care Access and Information (hereinafter "HCAI") and [Grantee Name], [Program Name] (collectively the "Grantee").

WHEREAS, state funds are available to increase the educational capacity to train psychiatry residents and child and adolescent psychiatry fellows representative of underserved communities.

WHEREAS, HCAI supports health care accessibility through the promotion of a diverse and competent workforce while providing analysis of California's healthcare infrastructure and coordinating healthcare workforce issues.

WHEREAS, HCAI supports engaging in activities that promote the employment of consumers of mental health services to engage in activities that promote the employment of mental health consumers and family members of consumers in the mental health system.

WHEREAS, HCAI supports engaging in activities that promote the employment of consumers with substance use disorders (SUD) and family members of consumers of SUD treatment and support.

WHEREAS, expanding the capacity of the PMHNP training programs is a priority strategy.

WHEREAS, the PMHNP Training programs will develop and implement strategies to increase educational capacity that align with guiding principles and address workforce needs by strengthening recruitment, training, education, and retention of workforce reflecting the socio-demographic and other characteristics of underserved communities.

WHEREAS, workforce training and education programs will adhere to PECE guiding principles that ensure behavioral health (mental health and substance use) professionals:

- Provide care that is child- and youth-centered, with priority on early intervention.
- Provide care that is client-centered for persons with or at risk of serious mental illness, with priority on early intervention.
- Ensure racial diversity, cultural humility, and a linguistically competent workforce.

- Conduct outreach to and engagement with unserved, underserved, and inappropriately served children and youth and their caregivers and persons with or at risk of serious mental illness.
- Use effective, innovative, evidence-based, and community-identified practices.
- Promote wellness, recovery, resilience, and other positive behavioral health, and primary care outcomes of children and youth and their families.
- Include the viewpoints and expertise of persons with lived experience, including consumers and their families and caregivers, in healthcare and other child-serving settings.
- Provide early intervention and treatment services that are culturally and linguistically responsive to California's diverse communities.
- Work collaboratively to deliver individualized, strengths-based, consumer- and family-driven services.
- Promote inter-professional care by working across disciplines.
- Promote interagency services that includes K-12 educational institutions.

WHEREAS, the Grantee applied to participate in the Psychiatric Education Capacity Expansion (PECE) Program, by submitting an application in accordance with the PECE Psychiatry Residency Expansion Grant Guide for Fiscal Year (FY) 2022-23.

WHEREAS, the Grantee was selected by HCAI to receive grant funds through procedures duly adopted by HCAI for the purpose of administering such grants.

NOW THEREFORE, HCAI and the Grantee, for the consideration and under the conditions hereinafter set forth, agree as follows:

A. Definitions:

1. "Application" means the grant application/proposal submitted by Grantee.
2. "Deputy Director" means the Deputy Director of the Healthcare Workforce Development Division in HCAI.
3. "Director" means the Director of HCAI or his/her designee.
4. "Grant Agreement/Grant Number" means Grant Number [Grant Agreement Number] awarded to Grantee.
5. "Grantee" means the fiscally responsible entity in charge of administering the Grant Funds and includes the Program identified on the Application.
6. "Grant Funds" means the money provided by HCAI for the Project described by Grantee in its Application and Scope of Work.

7. "Program" means the Grantee's Psychiatry Residency and/or Child and Adolescent Fellowship training program(s) listed on the Application.
  8. "Program Director" means the Director of Grantee's training program(s) for which grant funds are being awarded.
  9. "Project" means the activity described in the Application and Scope of Work to be accomplished with the Grant Funds.
  10. "State" means the State of California and includes all its Departments, Agencies, Committees and Commissions.
  11. "Training Institution" means the Grantee.
- B. Term of the Agreement: This Agreement shall take effect on [Agreement Start Date] and shall terminate on June 30, 2027.

All requests for amending the term of this agreement shall Comply with the amendment requirements stated in Section J of this Agreement. Requests for an extension must be made no later than ninety calendar days prior to the termination of the Agreement. This Agreement cannot be amended after its termination.

C. Scope of Work:

1. While performing the activities, the Grantee shall:
  - a. Expand the capacity of an existing Psychiatry Residency program by adding psychiatry residents and/or child and adolescent fellows to work in underserved communities with a focus on children and youth ages 25 and under.
  - b. Encourage members from unserved or underserved and culturally diverse populations, including individuals who have had experience with the behavioral health system as consumers and/or family members of consumers to become psychiatrists.
  - c. Implement outreach and recruitment activities to psychiatry residents and/or child and adolescent fellows, who are from unserved and/or underserved areas, and culturally diverse; and to individuals with consumer and/or family member experience.
  - d. Recruit residents who can meet diversity needs consistent with PECE guiding principles.

- e. Ensure that the psychiatry residents and/or child and adolescent fellows perform at least part of their residency/child and adolescent fellowship in underserved communities. The Grantee shall encourage individuals who successfully complete training to work in underserved communities.
- f. Ensure that psychiatry residents and/or child and adolescent fellows are trained using the curriculum that was developed in accordance with Section C. Scope of Work, Subsection 3b.
- g. Submit annual Program Reports to HCAI on Psychiatry Residents and/or Child and Adolescent Fellows describing efforts to secure employment in underserved communities working with unserved and/or underserved populations.
- h. Annual Program Reports to HCAI shall include the number of years Psychiatry Residents/Fellows who have successfully finished the Program spend in underserved communities providing direct services through five years post-graduation.
- i. Not conduct lobbying activities as part of this Agreement or use Grant Funds for lobbying activities.
- j. Be held fully accountable for proper use of Grant Funds under this Agreement.
- k. Credit HCAI in all publications resulting from this Agreement.
- l. Provide HCAI with outcomes on an annual basis, as specified in the PECE Expansion Program Report instructions.

Report	Reporting Period	Report Due Date
Program Report 1	August 29, 2022 – June 30, 2023	July 31, 2023
Program Report 2	July 1, 2023 – June 30, 2024	July 31, 2024
Program Report 3	July 1, 2024 – June 30, 2025	July 31, 2025
Program Report 4	July 1, 2025 – June 30, 2026	July 31, 2026
Program Report 5	July 1, 2026 – June 30, 2027	July 31, 2027

2. Under the direction of the Program Director, use Grant Funds to provide psychiatry residency and/or child and adolescent fellowship training for [number of participants] and/or residents for up to a four-year cycle and/or child and adolescent fellow(s) for up to two years beginning July 1, 2023, and ending June 30, 2027. Each resident and/or fellow supported represents a permanent expansion of the program.
3. The Grantee agrees to use the funds provided under this Grant Agreement to HCAI expanded capacity in the Program to address workforce shortages in agencies and institutions serving underserved communities. The Grantee shall:

- a. Provide the name(s), contact information, and number of hours served in underserved communities for the psychiatry residents and/or child and adolescent fellows.
- b. Develop or revise a curriculum and teaching method(s) that is consistent with the PECE guiding principles and which ensures that the psychiatry residents and/or child and adolescent fellows:
  - i. Work in multidisciplinary teams that include primary care physicians, family nurse practitioners, and other health care workers with unserved and/or underserved populations in underserved communities, including children and youth involved in justice, child welfare, and/or special education systems.
  - ii. Are trained to provide services in a culturally competent and sensitive manner.
  - iii. Are trained in the values of wellness, recovery, and resilience, to include the role of self-help, recovery, and empowerment support.
  - iv. Are specifically trained in assisting children and youth through age 25 and family members to access public benefits, work incentive provisions, and transition from a public to a private benefit system, as well as educational systems.
  - v. Are trained to work in and foster a consumer and family member driven system of care.
  - vi. Are trained to provide integrated primary and behavioral health services, including:
    - a. Assessment
    - b. Diagnosis
    - c. Outcome identification
    - d. Individualized planning
    - e. Coordination of care

D. Reports and Deliverables:

Grantee shall submit all the deliverables for Grant Number **#XX-XXXXX**, no later than the due dates stated above in Section C. Grantee will submit deliverables, including annual PECE Program Reports, using the online forms that HCAI provides.

E. Invoicing:

1. For services satisfactorily rendered in accordance with the Scope of Work, and upon receipt and approval of the certifications as specified in subsection (3) hereunder, HCAI agrees to compensate Grantee in accordance with the rates specified herein.
2. The total amount payable to the Grantee under this Agreement shall not exceed [Total Award Amount].
3. HCAI will release the annual payments in arrears upon receipt of annual reports, expenditure documentation, and verification of increased psychiatry residency

positions. The first annual payment also requires proof of ACGME accreditation for added psychiatry residency positions.

4. Program reports shall include the names of the resident(s) and/or fellow(s) trained under this Agreement, certifying that each resident(s) and/or fellow(s) was engaged in activities authorized by this Agreement, and submitted electronically.
5. Additional information may be requested by HCAI during the term of the Grant Agreement.

F. Budget Detail:

	22-23	23-24	24-25	25-26	26-27	TOTALS
A. Program Personnel						
B. Faculty Salaries and Benefits						
C. Faculty Recruitment/Retention Incentive: Subsidized Faculty Housing						
D. Faculty Recruitment/Retention Incentive: Faculty Student Loan Repayment						
E. Faculty Recruitment/Retention Incentive: Faculty Bonus						
F. Faculty Recruitment/Retention Incentive: Other. Please describe in text box below						
G. Salaries (Psychiatry Residents/Fellows)						
H. Other Costs. Please describe in text box below						
TOTAL						

G. Accounting Records and Audits: Grantee shall comply with the following reporting requirements:

1. Accounting: Accounting for grant funds will be in accordance with the training institution's accounting practices based on generally accepted accounting principles

consistently applied regardless of the source of funds. Supporting records must be in sufficient detail to show the exact amount and nature of expenditures.

Training institutions may elect to commingle grant funds received pursuant to the Agreement with any other income available for operation of the Program provided that the institution maintains such written fiscal control and accounting procedures as are necessary to assure proper disbursement of, and accounting for, such commingled funds, including provisions for:

- a. The accurate and timely separate identification of funds received.
  - b. The separate identification of expenditures that cannot be paid with Grant Funds
  - c. An adequate record of proceeds from the sale of any equipment purchased by funds
2. Expenditure Reporting: Reports of Program expenditures and enrollment of residents and/or child and adolescent fellows under the Agreement must be submitted as requested by the HCAI for purposes of program administration, evaluation, or review.
3. Records Retention and Audit:
- a. The training institution shall permit HCAI, the California State Auditor, the Department of General Services, the State Controller, or their designated representatives, access to records maintained on source of income and expenditures of the Program and any other records pertaining to the performance of this Agreement for the purpose of audit and examination. These state entities shall have the right to review and to copy any of these records and supporting documentation.
  - b. The training institution agrees to allow auditor(s) access to records (as described above) during normal business hours and to allow interviews of any employees who might reasonably have information related to such records. Further, the training institution agrees to include a similar right of the State to audit records and interview staff in any subcontract related to performance of this Agreement.
  - c. The training institution shall maintain books, records, documents, and other evidence pertaining to the costs and expenses of this grant (hereinafter collectively called the "records") to the extent and in such detail as will properly reflect all net costs, direct and indirect, of labor, materials, equipment, supplies and services, and other costs and expenses of whatever nature for which reimbursement is claimed under the provisions of this Agreement.
  - d. The training institution shall preserve and make available its records (a) for a period of three years from the date of final payment under this Agreement, and (b)

for such longer period, if any, as is required by applicable statute, by any other clause of this Agreement, by stipulation of the Grantee and HCAI, or by subparagraph (a) or (ii) below:

- i. If this Agreement is completely or partially terminated, the records relating to the work terminated shall be preserved and made available for a period of three years from the date of any resulting final settlement.
- ii. Records which relate to (1) litigation of the settlement of claims arising out of the performance of this Agreement, or (2) costs and expenses of this Agreement as to which exception has been taken by the State or any of its duly authorized representatives, shall be retained by the training institution until disposition of such appeals, litigation, claims, or exceptions.

#### H. Budget Contingency Clause:

1. It is mutually agreed that if the Budget Act of the current year and/or any subsequent years covered under this Agreement does not appropriate sufficient funds for the program, this Agreement shall be of no further force and effect. In this event, the HCAI shall have no liability to pay any funds whatsoever to Grantee or to furnish any other considerations under this Agreement and Grantee shall not be obligated to perform any provisions of this Agreement.
2. If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this grant program, the HCAI shall have the option to either cancel this Agreement with no liability occurring to the HCAI or offer an agreement amendment to Grantee to reflect the reduced amount.

#### I. Budget Adjustments:

1. Budget adjustments consist of a change within the approved budget that does not amend the total amount of this Agreement or any other terms of the Agreement.
2. All requests for budget adjustments shall be submitted in writing for HCAI approval and shall include an explanation for the reallocation of funds by the Grantee. An accounting of how the funds were expended will also be submitted with the last annual Program Report.

#### J. General Terms and Conditions:

1. **Timeliness:** Time is of the essence in this Agreement. Grantee will submit the required deliverables as specified and adhere to the deadlines as specified in this Agreement. Anticipating potential overlaps, conflicts, and scheduling issues, to adhere to the terms of the Agreement, is the sole responsibility of the Grantee.
2. **Final Agreement:** This Agreement, along with the Grantee's Application, exhibits, and

forms constitutes the entire and final agreement between the parties and supersedes any and all prior oral or written agreements or discussions.

3. **Ownership and Public Records Act:** All reports and the supporting documentation and data collected during the funding period which are embodied in those reports, shall become the property of the State and subject to the California Public Records Act (Gov. Code § 6250 et seq.).
4. **Audits:** The Grantee agrees that HCAI, the Department of General Services, the State Auditor, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to the performance of this Agreement. The Grantee agrees to maintain such records for possible audit for a minimum of three years after final payment, unless a longer period of records retention is stipulated by the State. The Grantee agrees to allow the auditor(s) access to such records during normal business hours and to allow interviews of any employees who might reasonably have information related to such records. Further, the Grantee agrees to include a similar right of the State to audit records and interview staff in any subcontract related to performance of this Agreement.
5. **Independence from the State:** Grantee and the agents and employees of Grantee, in the performance of this Agreement, shall act in an independent capacity and not as officers or employees or agents of the State.
6. **Non-Discrimination Clause (See Cal. Code Regs., Title 2, § 11105):**
  - a. During the performance of this Agreement, Grantee and its subcontractors shall not deny the Agreement's benefits to any person on the basis of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status, nor shall they discriminate unlawfully against any employee or applicant for employment because of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status. Grantee shall ensure that the evaluation and treatment of employees and applicants for employment are free of such discrimination.
  - b. Grantee and its subcontractors shall comply with the provisions of the Fair Employment and Housing Act (Gov. Code § 12900 et seq.), the regulations promulgated thereunder (Cal. Code Regs., tit. 2, § 11000 et seq.), the provisions of Article 9.5, Chapter 1, Part 1, Division 3, Title 2 of the Government Code (Gov. Code §§ 11135-11139.5), and any regulations or standards adopted by HCAI to implement such article.

- c. Grantee shall permit access by representatives of the Department of Fair Employment and Housing and HCAI upon reasonable notice at any time during the normal business hours, but in no case less than 24 hours' notice, to such of its books, records, accounts, and all other sources of information and its facilities as said Department or HCAI shall require to ascertain compliance with this clause.
  - d. Grantee and its subcontractors shall give written notice of their obligations under this clause to labor organizations with which they have a collective bargaining or other agreement.
  - e. Grantee shall include the nondiscrimination and compliance provisions of this clause in all subcontracts to perform work under this Agreement.
7. Waiver: The waiver by HCAI of a breach of any provision of this Agreement by the Grantee will not operate or be construed as a waiver of any other breach. HCAI expressly reserves the right to disqualify Grantee from any future grant awards for failure to comply with the terms of this Agreement.
8. Approval: This Agreement is of no force or effect until signed by both parties. Grantee may not commence performance until such approval has been obtained.
9. Amendment: No amendment or variation of the terms of this Agreement shall be valid unless made in writing, signed by the parties, and approved as required. No oral understanding or agreement not incorporated in the Agreement is binding on any of the parties.
10. Assignment: This Agreement is not assignable by the Grantee, either in whole or in part, without the consent of the State in the form of a formal written amendment.
11. Indemnification: Grantee agrees to indemnify, defend and hold harmless the State, its officers, agents and employees from (i) from any and all claims and losses accruing or resulting to any and all Grantee's, subcontractors, suppliers, laborers, and any other person, firm, or corporation furnishing or supplying work services, materials, or supplies resulting from the Grantee's performance of this Agreement, and (ii) from any and all claims and losses accruing or resulting to any person, firm, or corporation who may be injured or damaged by Grantee in the performance of this Agreement.
12. Disputes: Grantee shall continue with the responsibilities under this Agreement during any dispute. Any dispute arising under this Agreement, shall be resolved as follows:
- a. The Grantee will discuss the problem informally with the Program Manager. If unresolved, the problem shall be presented, in writing, to the Deputy Director stating the issues in dispute, the basis for the Grantee's position, and the remedy sought. Grantee shall include copies of any documentary evidence and describe

any other evidence that supports its position with its submission to the Deputy Director.

- b. Within ten working days after receipt of the written grievance from the Grantee, the Deputy Director or their designee shall make a determination and shall respond in writing to the Grantee indicating the decision and reasons for it.
  - c. Within ten working days of receipt of the Deputy Director's decision, the Grantee may appeal the decision of the Deputy Director by submitting a written appeal to the Chief Deputy Director stating why the Grantee does not agree with the Deputy Director's decision.
  - d. Within ten working days after receipt of appeal, the Chief Deputy Director or their designee shall respond in writing to the Grantee with their decision. The Chief Deputy Director's decision will be final.
13. Termination for Cause: HCAI may terminate this Agreement and be relieved of any payments should the Grantee fail to perform the requirements of this Agreement at the time and in the manner herein provided. Grantee shall return any Agreement Funds that were previously provided to Grantee for use within 60 days of termination.
- If all grant funds have not been expended upon completion of the Agreement term, HCAI will request the remittance of all unexpended funds. If HCAI determines that improper payments have been made to Grantee, HCAI will request disgorgement of all disallowed costs. Grantee may dispute disallowed costs in accordance with Section J, Paragraph 12. Grantee will submit a check or warrant for the amount due within 60 days of the Grantee's receipt of HCAI's disgorgement request or 30 days from the Grantee's receipt of HCAI's last Dispute decision. If Grantee fails to remit payment, HCAI may withhold the amount due from any future grant payments.
14. Grantee's Subcontractors: Nothing contained in this Agreement shall create any contractual relationship between the State and the Grantee or any subcontractors, and no subcontract shall relieve the Grantee of its responsibilities and obligations hereunder. The Grantee agrees to be as fully responsible to the State for any and all acts and omissions of its subcontractors and of persons either directly or indirectly employed by the Grantee. The Grantee's obligation to pay its subcontractors is an independent obligation from the State's obligation to disburse funds to the Grantee. As a result, the State shall have no obligation to pay or to enforce the payment of any money to any subcontractor.
15. Governing Law: This Agreement is governed by and shall be interpreted in accordance with the laws of the State of California.
16. Unenforceable Provision: In the event that any provision of this Agreement is unenforceable or held to be unenforceable, then the parties agree that all other

provisions of this Agreement have force and effect and shall not be affected thereby.

17. Use of Funds: The funding established pursuant to this act shall be utilized to expand behavioral health services. These funds shall not be used to supplant existing state or local funds to provide behavioral health services.

Project Representatives: The project representatives during the term of this agreement will be:

State Agency: Department of Health Care Access and Information	Grantee: [Grantee Name]
Section/Unit: Healthcare Workforce Development PECE Program	
Name: [HCAI Assigned Analyst] Program Officer	Name (Main Contact): [Project Representative] [Title]
Address: 2020 West El Camino Avenue, Suite 1222 Sacramento, CA 95833	Address: [Grantee Address] [Program City, CA Zip code]
Phone: [Program Officer Phone Number]	Phone: [Grantee Phone Number]
Email: <a href="mailto:MHSAWETI@HCAI.ca.gov">MHSAWETI@HCAI.ca.gov</a>	Email: [Grantee Email]

Direct all grant inquiries to:

State Agency: Department of Health Care Access and Information	Program Representative: [Program Name]
Section/Unit: Healthcare Workforce Development Division PECE Program	
Name: [HCAI Assigned Analyst] Program Officer	Name of Representative: [Program Representative] [Program Title]
Address: 2020 West El Camino Avenue, Suite 1222 Sacramento, CA 95833	Address: [Program Address] [Program City, CA Zip Code]
Phone: [Program Officer Phone Number]	Phone: [Program Phone Number]
Email: <a href="mailto:MHSAWET@HCAI.ca.gov">MHSAWET@HCAI.ca.gov</a>	Email: [Program Email]

IN WITNESS WHEREOF, the parties hereto have executed this Agreement.

DEPARTMENT OF HEALTH CARE  
ACCESS AND INFORMATION

GRANTEE

Signature:

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Signature:

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Name:

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Name:

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Title:

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Title:

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Date:

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Date:

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**Attachment E: Sample PECE New Program Grant Agreement**

**GRANT AGREEMENT BETWEEN THE  
DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION (HCAI) AND  
[GRANTEE NAME], [PROGRAM NAME]**

**GRANT AGREEMENT NUMBER [GRANT AGREEMENT NUMBER]**

THIS GRANT AGREEMENT ("Agreement") is entered into on [Agreement Start Date] ("Effective Date") by and between the State of California, Office of Statewide Health Planning and Development (hereinafter "HCAI") and [Grantee Name], [Program Name] [Specialty] (collectively the "Grantee").

WHEREAS, state funds are available to increase the educational capacity to train psychiatry residents and child and adolescent psychiatry fellows representative of underserved communities.

WHEREAS, HCAI supports health care accessibility through the promotion of a diverse and competent workforce while providing analysis of California's healthcare infrastructure and coordinating healthcare workforce issues.

WHEREAS, HCAI supports engaging in activities that promote the employment of consumers of mental health services to engage in activities that promote the employment of mental health consumers and family members of consumers in the mental health system.

WHEREAS, HCAI supports engaging in activities that promote the employment of consumers with substance use disorders (SUD) and family members of consumers of SUD treatment and support.

WHEREAS, expanding the capacity of the PMHNP training programs is a priority strategy.

WHEREAS, the PMHNP Training programs will develop and implement strategies to increase educational capacity that align with PECE guiding principles and address workforce needs by strengthening recruitment, training, education, and retention of workforce reflecting the socio-demographic and other characteristics of underserved communities.

WHEREAS, workforce training and education programs will adhere to the relevant PECE guiding principles that ensure behavioral health (mental health and substance use) professionals:

- Provide care that is child- and youth-centered, with priority on early intervention.
- Provide care that is client-centered for persons with or at risk of serious mental illness, with priority on early intervention.
- Conduct outreach to and engagement with unserved, underserved, and inappropriately served children and youth and their caregivers and persons with or at risk of serious mental illness.
- Use effective, innovative, evidence-based, and community-identified practices.
- Promote wellness, recovery, resilience, and other positive behavioral health, and primary care outcomes of children and youth and their families.
- Include the viewpoints and expertise of persons with lived experience, including consumers and their families and caregivers, in healthcare and other child-serving settings.
- Provide early intervention and treatment services that are culturally and linguistically responsive to California's diverse communities.
- Work collaboratively to deliver individualized, strengths-based, consumer- and family-driven services.
- Promote inter-professional care by working across disciplines.
- Promote interagency services that includes K-12 educational institutions.

WHEREAS, the Grantee applied to participate in the Psychiatric Education Capacity Expansion (PECE) Program, by submitting an application in accordance with the PECE Psychiatry Residency Grant Guide for Fiscal Year (FY) 2022-23.

WHEREAS, the Grantee was selected by HCAI to receive grant funds through procedures duly adopted by HCAI for the purpose of administering such grants.

NOW THEREFORE, HCAI and the Grantee, for the consideration and under the conditions hereinafter set forth, agree as follows:

A. Definitions:

1. "Application" means the grant application/proposal submitted by Grantee.
2. "Deputy Director" means the Deputy Director of the Healthcare Workforce Development Division in HCAI
3. "Director" means the Director of HCAI or his/her designee.
4. "Grant Agreement/Grant Number" means Grant Number [Grant Agreement Number] awarded to Grantee.

5. "Grantee" means the fiscally responsible entity in charge of administering the Grant Funds and includes the Program identified on the Application.
  6. "Grant Funds" means the money provided by HCAI for the Project described by Grantee in its Application and Scope of Work.
  7. "Other Sources of Funds" means all cash, donations, or in-kind contributions that are required or used to complete the Project beyond the grant funds provided by this Grant Agreement.
  8. "Program" means the Grantee's Psychiatry Residency, Child/Adolescence Fellowship, AND/OR Addiction Psychiatry Fellowship training program(s) listed on the Grant Application.
  9. "Program Director" means the Director of Grantee's training program(s) for which grant funds are being awarded.
  10. "Project" means the activity described in the Grantee's Application and Scope of Work to be accomplished with the Grant Funds.
  11. "State" means the State of California and includes all its Departments, Agencies, Committees and Commissions.
  12. "Training Institution" means the Grantee.
- B. Term of the Agreement: This Agreement shall take effect on [Agreement Start Date] and shall terminate on June 30, 2025 .

All requests for amending the term of this agreement shall Comply with the amendment requirements stated in Section J of this Agreement. Requests for an extension must be made no later than ninety calendar days prior to the termination of the Agreement. This Agreement cannot be amended after its termination.

- C. Scope of Work: Grantee agrees to the following Scope of Work as set forth herein. In the event of a conflict between the provisions of this section and the Grantee's Application, the provisions of this Scope of Work Section shall prevail:
1. Under the direction of the Program Director, use Grant Funds to develop a new Psychiatry Residency program.
  2. Under the direction of the Program Director, use Grant Funds to develop a new Psychiatry Residency program that includes Child/Adolescence Psychiatry and/or addiction psychiatry fellowship positions.
  3. The Grantee agrees to provide to the HCAI expanded capacity in a Psychiatry

Residency program to address workforce shortages in underserved communities. The Grantee will use the funds provided under this Grant Agreement to:

- a. Provide the name(s) of the new Psychiatry Residents, and number of hours the Psychiatry Residents spend in publicly funded clinical settings serving children and youth and their caregivers and/or clients in the PMHS and PSUDS to HCAI.
  - b. Develop or revise a curriculum and teaching method(s) that is consistent with PECE guiding principles, and which ensures that the psychiatry residents, child and adolescent fellows, and/or addiction psychiatry fellows:
    - i. Work in multidisciplinary teams that include primary care physicians, family nurse practitioners, and other health care workers with unserved and/or underserved populations in underserved communities, including children and youth involved in justice, child welfare, and/or special education systems.
    - ii. Are trained to provide services in a culturally competent and sensitive manner.
    - iii. Are trained in the values of wellness, recovery, and resilience, to include the role of self-help, recovery, and empowerment support.
    - iv. Are specifically trained in assisting children and youth through age 25 and family members to access public benefits, work incentive provisions, and transition from a public to a private benefit system, as well as educational systems.
    - v. Are trained to work in and foster a consumer and family member driven system of care.
    - vi. Are trained to provide integrated primary and behavioral health services, including:
      1. Assessment
      2. Diagnosis
      3. Outcome identification
      4. Individualized planning
      5. Coordination of care
4. The grantee shall complete all of the following phases as described, in the sequence listed, and submit documentation to HCAI for each completed phase.
- a. Approved ACGME Institutional Accreditation: An institutional affiliation with a residency program or hospital already accredited by ACGME to serve as the applicant's sponsor for the new medical residency program. Proof of this affiliation provided to HCAI in the form of the ACGME Institutional Accreditation letter.

- b. A fiscal plan, including identified funding streams, that reflects the consultant, staff, faculty, facility and/or other costs associated with achieving ACGME accreditation.
- c. An accreditation timeline that describes the planned schedule for ACGME accreditation phases a – g listed here.
- d. Recruited training sites in the form of health facilities and other clinical sites at which residents will train over the course of their residency.
- e. Psychiatry Residency program design and curriculum, including an overall plan for clinical rotations, didactic teaching, and other longitudinal curricula.
- f. Recruited and developed Psychiatry Residency program faculty that reflect the socio-demographic and other characteristics of the underserved community they will be teaching and develop the skills of program faculty to utilize best practices in education, communication and cooperation within their department.
- g. ACGME residency program accreditation in the form of an ACGME-approved application that has been through every step of the Application Review Process, which includes:
  - i. Psychiatry Residency accreditation Review Committee initial review
  - ii. Psychiatry Residency accreditation Site Visit is conducted (if applicable)
  - iii. Psychiatry Residency accreditation Review Committee Meeting second review
  - iv. Psychiatry Residency accreditation approval or denial with number of approved residency positions

D. Reports and Deliverables:

Grantee shall submit all the Deliverables for grant **#XX-XXXXX**, no later than the deliverable dates outlined in Agreement Section C. Grantee will submit deliverables using the online forms that HCAI provides.

Reporting Requirements		
Phase A	ACGME Institutional Accreditation	For first advanced payment, provide ACGME letter of Institutional Accreditation
Phase B Phase C Phase D	Fiscal Plan Timeline in place Training sites recruited	For second advanced payment, provide documents demonstrating (a) completion of Phases B through D, and (b) allowable expenses accrued through completion of Phase D.
Phase E Phase F Phase G	Curriculum Development Faculty Recruitment ACGME Accreditation	For balance of funds up to the amount of allowable expenses, provide documents demonstrating (a) completion of Phases E through G and (b) all allowable expenses through phase G.

E. Invoicing:

1. For services satisfactorily rendered in accordance with the Scope of Work, and upon receipt and approval of the certifications as specified in subsection (4) hereunder. HCAI agrees to compensate Grantee in accordance with the rates specified herein.
2. The total amount payable to the Grantee under this Agreement shall not exceed [Total Award Amount].
3. HCAI will release the payment for allowable expenses upon receipt of the ACGME accreditation letter approving new psychiatry residency/child and adolescent fellowship slots.
4. Certifications shall include the Agreement Number, the names of the resident(s) trained under this Agreement, a signature by the Program Director certifying that each resident(s) was engaged in activities authorized by this Agreement, and shall be submitted electronically
5. Additional information may be requested by HCAI during the term of the Grant Agreement.

F. Budget Detail and Payment Provisions:

1. Budget Detail:

HCAI shall reimburse Grantee for the expenses incurred in performing the Scope of Work through up to three payments that shall not exceed [Total Award Amount].

## 2. Payment provisions

Payment Provisions		
Phase A	Institutional Accreditation request letter to ACGME or ACGME granting Institutional Accreditation	Twenty-five percent (25%) payable within 60 days of their full award after execution of this Agreement.
Phase B Phase C Phase D	Fiscal Plan Timeline in place Training sites recruited	Additional twenty-five percent (25%) payable with proof of completing Phases B through D, and provided proof of expenses accrued through completion of Phase D.
Phase E Phase F Phase G	Curriculum Development Faculty Recruitment Secure ACGME Accreditation	Balance of grant payable based on actual expenses, with proof of completing Phases A through G and all other stipulated conditions in grant agreement based on reported allowable expenses.

G. Accounting Records and Audits: Grantee shall comply with the following reporting requirements established by the Commission, as amended from time to time:

1. Accounting: Accounting for grant funds will be in accordance with the training institution's accounting practices based on generally accepted accounting principles consistently applied regardless of the source of funds. Supporting records must be in sufficient detail to show the exact amount and nature of expenditures.

Training institutions may elect to commingle grant funds received pursuant to the Agreement with any other income available for operation of the residency program provided that the institution maintains such written fiscal control and accounting procedures as are necessary to assure proper disbursement of, and accounted for, such commingled funds, including provisions for:

- a. The accurate and timely separate identification of funds received
- b. The separate identification of expenditures prohibited by the grant criteria
- c. An adequate record of proceeds from the sale of any equipment purchased by funds

2. Expenditure Reporting: Reports of the training program expenditures and enrollment of residents under the Agreement must be submitted as requested by the Commission or the HCAI Director for purposes of program administration, evaluation, or review.
3. Records Retention and Audit:
  - a. The training institution shall permit the HCAI Director, or the California State Auditor, or the State Controller, or their authorized representatives, access to records maintained on source of income and expenditures of its residency program for the purpose of audit and examination.
  - b. The training institution shall maintain books, records, documents, and other evidence pertaining to the costs and expenses of this grant (hereinafter collectively called the "records") to the extent and in such detail as will properly reflect all net costs, direct and indirect, of labor, materials, equipment, supplies and services, and other costs and expenses of whatever nature for which reimbursement is claimed under the provisions of this Agreement.
  - c. The training institution agrees to make available at the office of the training institution at all reasonable times during the period set forth in subparagraph (d) below any of the records for inspection, audit or reproduction by an authorized representative of the State.
  - d. The training institution shall preserve and make available its records (a) for a period of three (3) years from the date of final payment under this Agreement, and (b) for such longer period, if any, as is required by applicable statute, by any other clause of this Agreement, or by subparagraph (i) or (ii) below:
    - i. If this Agreement is completely or partially terminated, the records relating to the work terminated shall be preserved and made available for a period of three years from the date of any resulting final settlement.
    - ii. Records which relate to (i) litigation of the settlement of claims arising out of the performance of this Agreement, or (ii) costs and expenses of this Agreement as to which exception has been taken by the State or any of its duly authorized representatives, shall be retained by the training institution until disposition of such appeals, litigation, claims, or exceptions.

H. Budget Contingency Clause:

1. It is mutually agreed that if the Budget Act of the current year and/or any subsequent years covered under this Agreement does not appropriate sufficient

funds for the program, this Agreement shall be of no further force and effect. In this event, the HCAI shall have no liability to pay any funds whatsoever to Grantee or to furnish any other considerations under this Agreement and Grantee shall not be obligated to perform any provisions of this Agreement.

2. If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this Program, the HCAI shall have the option to either cancel this Agreement with no liability occurring to the HCAI or offer an agreement amendment to Grantee to reflect the reduced amount.

I. Budget Adjustments:

1. Budget adjustments consist of a change within the approved budget that does not amend the total amount of the grant.
2. All requests to change the budget shall be submitted in writing for HCAI approval and shall include an explanation for the reallocation of funds by the Grantee. An accounting of how the funds were expended will also be submitted with the Final Report.
3. All requests for extending the grant period shall be submitted in writing to HCAI for approval. Requests for a time extension must be made to HCAI no later than thirty (30) calendar days prior to the expiration of the Agreement. There shall be no activity on an Agreement after its expiration.

J. General Terms and Conditions:

1. Time: Time is of the essence in this Agreement. Grantee will submit the required deliverables as specified and adhere to the deadlines as specified in this Agreement. Anticipating potential overlaps, conflicts, and scheduling issues, to adhere to the terms of the Agreement, is the sole responsibility of the Grantee.
2. Final Agreement: This Agreement, along with the Application, exhibits and forms constitutes the entire and final agreement between the parties and supersedes all prior oral or written agreements or discussions.
3. Ownership and Public Records Act: All reports and the supporting documentation and data collected during the funding period which are embodied in those reports, shall become the property of the State and subject to the Public Records Act.
4. Additional Audits: Grantee agrees that the awarding department, the Department of General Services, the California State Auditor, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to the performance of this Agreement.

Grantee agrees to maintain such records for possible audit for a minimum of three (3) years after final payment, unless a longer period of records retention is stipulated. Grantee agrees to allow the auditor(s) access to such records during normal business hours and to allow interviews of any employees who might reasonably have information related to such records. Further, Grantee agrees to include a similar right of the State to audit records and interview staff in any subcontract related to performance of this Agreement. (Gov. Code §8546.7, Pub. Contract Code §10115 et seq., Cal. Code Regs. Tit. 2, Section 1896).

5. Independent Contractor: Grantee and the agents and employees of Grantee, in the performance of this Agreement, shall act in an independent capacity and not as officers or employees or agents of the State.
6. Non-Discrimination Clause: During the performance of this Agreement, the Grantee and its subcontractors shall not unlawfully discriminate, harass, or allow harassment against any employee or applicant for employment. The Grantee and its subcontractors shall ensure that the evaluation and treatment of their employees and applicants for employment are free from discrimination and harassment. The Grantee and its subcontractors shall comply with the provisions of the Fair Employment and Housing Act (Gov. Code §12990 (a-f) et seq.) and the applicable regulations promulgated thereunder (Cal. Code of Regs., tit. 2, §11000 et seq.). The applicable regulations of the Fair Employment and Housing Commission implementing Government Code section 12990 (a-f), set forth in Chapter 5 of Division 4 of Title 2 of the California Code of Regulations, are incorporated into this Agreement by reference and made a part hereof as if set forth in full. The Grantee and its subcontractors shall give written notice of their obligations under this clause to labor organizations with which they have a collective bargaining or other Agreement.
7. Waiver: The waiver by the HCAI of a breach of any provision of this Agreement by the Grantee will not operate or be construed as a waiver of any other subsequent breach by the Grantee. HCAI expressly reserves the right to disqualify Grantee from any future grant awards for failure to comply with the terms of this Agreement.
8. Approval: This Agreement is of no force or effect until signed by both parties. Grantee may not commence performance until such approval has been obtained.
9. Amendment: No amendment or variation of the terms of this Agreement shall be valid unless made in writing, signed by the parties and approved as required. No oral understanding or Agreement not incorporated in the Agreement is binding on any of the parties.
10. Assignment: This Agreement is not assignable by the Grantee, either in whole or in part.

11. Indemnification: Grantee agrees to indemnify, defend and hold harmless the State, its officers, agents and employees from any and all claims and losses accruing or resulting to any and all Grantee's, subcontractors, suppliers, laborers, and any other person, firm or corporation furnishing or supplying work services, materials, or supplies in connection with the performance of this Agreement, and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged by Grantee in the performance of this Agreement.
12. Disputes: Grantee shall continue with the responsibilities under this Agreement during any dispute. Any dispute arising under this Agreement, shall be resolved as follows:
  - a. The Grantee will discuss the problem informally with the Program Manager. If unresolved, the problem shall be presented, in writing, to the Deputy Director stating the issues in dispute, the basis for the Grantee's position, and the remedy sought. Grantee shall include copies of any documentary evidence and describe any other evidence that supports its position with its submission to the Deputy Director.
  - b. Within ten working days after receipt of the written grievance from the Grantee, the Deputy Director or their designee shall make a determination and shall respond in writing to the Grantee indicating the decision and reasons for it.
  - c. Within ten working days of receipt of the Deputy Director's decision, the Grantee may appeal the decision of the Deputy Director by submitting a written appeal to the Chief Deputy Director stating why the Grantee does not agree with the Deputy Director's decision.
  - d. Within ten working days after receipt of appeal, the Chief Deputy Director or their designee shall respond in writing to the Grantee with their decision. The Chief Deputy Director's decision will be final
13. Termination for Cause: HCAI may terminate this Agreement and be relieved of any payments should the Grantee fail to perform the requirements of this Agreement at the time and in the manner herein provided. Grantee shall return any Agreement Funds that were previously provided to Grantee for use within 60 days of termination.

If all grant funds have not been expended upon completion of the Agreement term, HCAI will request the remittance of all unexpended funds. If HCAI determines that improper payments have been made to Grantee, HCAI will request disgorgement of all disallowed costs. Grantee may dispute disallowed

costs in accordance with Section J, Paragraph 12. Grantee will submit a check or warrant for the amount due within 60 days of the Grantee's receipt of HCAI's disgorgement request or 30 days from the Grantee's receipt of HCAI's last Dispute decision. If Grantee fails to remit payment, HCAI may withhold the amount due from any future grant payments.

14. Potential Subcontractors: Nothing contained in this Agreement shall create any contractual relation between the State and the Grantee or any subcontractors, and no subcontract shall relieve the Grantee of its responsibilities and obligations hereunder. The Grantee agrees to be as fully responsible to the State for any and all acts and omissions of its subcontractors and of persons either directly or indirectly employed by the Grantee. The Grantee's obligation to pay its subcontractors is an independent obligation from HCAI's obligation to disburse funds to the Grantee. As a result, the State shall have no obligation to pay or to enforce the payment of any money to any subcontractor.
15. Governing Law: This Agreement is governed by and shall be interpreted in accordance with the laws of the State of California.
16. Unenforceable Provision: In the event that any provision of this Agreement is unenforceable or held to be unenforceable, then the parties agree that all other provisions of this Agreement have force and effect and shall not be affected thereby.
17. Use of Funds: The funding established pursuant to this act shall be utilized to expand primary care services. These funds shall not be used to supplant existing state or local funds to provide primary care services.

Project Representatives: The project representatives during the term of this agreement are listed below. Direct all contract inquiries to:

State Agency: Department of Health Care Access and Information	Grantee Name: [Contractor Name]
Section/Unit: Healthcare Workforce Development PECE Program	
Name: [HCAI Assigned Analyst]	Name (Main Contact): [Contract Representative] [Contract Title]
Address: 2020 West El Camino Avenue, Suite 1222 Sacramento, CA 95833	Address: [Contractor Address]
Phone: [Analyst Phone Number]	Phone: [Contractor Phone Number]
Email: <a href="mailto:MHSAWET@HCAI.ca.gov">MHSAWET@HCAI.ca.gov</a>	Email: [Contractor Email]

The project representatives during the term of this Agreement will be:

State Agency: Department of Health Care Access and Information	Training Program Name: [Program Name]
Section/Unit: Healthcare Workforce Development PECE Program	
Name: [HCAI Assigned Analyst] \ Program Officer	Program Director Name: [Program Representative] [Program Title]
Address: 2020 West El Camino Avenue, Suite 1222 Sacramento, CA 95833	Address: [Program Address]
Phone: [Program Officer Phone Number]	Phone: [Program Phone Number]
Email: <a href="mailto:MHSAWET@HCAI.ca.gov">MHSAWET@HCAI.ca.gov</a>	Email: [Program Email]

IN WITNESS WHEREOF, the parties hereto have executed or have caused their duly authorized officers to execute this Agreement as of [Agreement Start Date].

DEPARTMENT OF HEALTH CARE  
ACCESS AND INFORMATION

GRANTEE:

Signature:

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Name:

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Title:

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Date:

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Signature:

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Name:

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Title:

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Date:

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