

**EXHIBIT A(Sub-Exhibit A)-SCOPE OF WORK (SOW):  
EATING DISORDER (ED) SERVICES**

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| <b>Contractor Name</b> | Account Name<br>Contractor Legal Name |
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*See Applicable Exhibit A Documents. Any additional specifications or variations in contracted service requirements applicable to this Exhibit A-SOW shall be contained herein.*

**I. PROGRAM NAME**

Eating Disorders (ED) Services

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| <b>Additional Specifications</b> |
| Program Name - Add Specs         |

**II. CONTRACTED SERVICES**

ED Services

- Intensive Outpatient Program (IOP)
- Partial Hospitalization Program (PHP)
- Transitional Housing (TH)
- Residential Treatment Program (RTP)

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| <b>Additional Specifications</b> |
| Contracted Services - Add Specs  |

**III. PROGRAM INFORMATION AND REQUIREMENTS**

**A. Program Goals**

Contractor shall provide services to help clients accomplish the following goals:

- i. Enact positive behavioral changes;
- ii. Stabilize around eating and food issues, including timely weight restoration as needed;
- iii. Eliminate or significantly reduce harmful behaviors associated with ED, including restricting food intake, binging and/or purging, etc.;
- iv. Build emotional insight, intellectual and cognitive re-education, and interpersonal/social awareness;
- v. Reduce harmful impacts of mental health symptoms related to ED on daily functioning;
- vi. Establish a foundation for continuing recovery and support by involving family and significant others;
- vii. Maintain connection to any applicable service providers and/or treatment team members, including but not limited to physicians, dieticians, and mental health clinicians;
- viii. Maintain positive recovery in a less restrictive environment; and
- ix. Develop and maintain supportive relationships with adults and peers in the school and/or community setting.

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| <b>Additional Specifications</b> |
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## Program Goals - Add Specs

### B. Target Population

Contractor shall provide services to the following populations:

#### 1. Service Groups

Contractor shall serve adolescents and adults who are experiencing a serious ED and require an IOP or higher level of service.

#### Additional Specifications

##### Service Groups - Add Specs

#### 2. Referral Process to Program

Contractor shall only accept referrals from the Alameda County Behavioral Health Department (ACBHD) Clinical Liaison for ED programs (ACBHD Clinical Liaison).

#### Additional Specifications

##### Referral Process to Program - Add Specs

#### 3. Program Eligibility

Contractor shall only serve clients who have:

- i. An ED diagnosis such as anorexia nervosa, bulimia, binge eating, avoidant/restrictive food intake disorder, and/or other diagnoses for disordered eating; and
- ii. Been referred and authorized for services for the specific level of care (IOP, PHP, or RTP) by the ACBHD Clinical Liaison.

#### Additional Specifications

##### Program Eligibility - Add Specs

#### 4. Limitations of Service

Not applicable.

#### Additional Specifications

##### Limitations of Service - Add Specs

### C. Program Description

Contractor shall maintain programmatic services at or above the following minimum levels:

#### 1. Program Design

Contractor shall work collaboratively with each client to design and implement a comprehensive ED treatment plan customized to match the needs of each client throughout the course of treatment. Contractor shall participate in a weekly concurrent phone review with the ACBHD Clinical Liaison and/or fax a treatment summary to seek authorization to transition clients through the various levels of care, as appropriate for each client. Contractor shall work with the ACBHD Clinical Liaison and **ACBHD**

**First Step: Behavioral Health Connection, Screening, and Referral** (First Step, formerly ACCESS) to arrange for follow-up care upon discharge from any level of care within Contractor's program. Contractor's individualized treatment approach shall aim to support each client to adapt to the changing conditions of the ED. Contractor shall provide a structured, closely supervised, nurturing, and personalized treatment environment that is aimed at effecting physical, psychological, behavioral, emotional, and social growth for clients and their families. Contractor shall work with the client and family to uncover the root causes of the ED, identify the function of the ED for the client, and offer alternative ways to cope, communicate, and change longstanding patterns. Contractor's treatment services shall include individual therapy, group therapy and family therapy as well as psychiatric, medical, and nutritional consultations. During the course of treatment, Contractor shall work collaboratively with the clients' established treatment providers as clinically indicated, including primary care practitioners, Regional Center case managers, outpatient therapists, psychiatrists, and other mental health providers.

Contractor shall participate in weekly concurrent reviews to obtain authorization from the ACBHD Clinical Liaison for length of stay exceeding initial approval (e.g., beyond initial seven days for RTP). Contractor shall obtain authorization from the ACBHD Clinical Liaison before changing client levels of care between IOP, PHP, or RTP.

#### IOP

Contractor shall provide intensive outpatient services in a structured environment for an average of three to four hours per day with at least one supervised meal and a snack with a registered dietician. Services shall be provided for four to six days per week, depending on client's individual treatment plan. Average length of stay for IOP shall be four to six weeks per client, which may vary based on an individual client's treatment plan.

#### PHP

Contractor shall provide partial hospitalization that includes a full day of treatment with at least two supervised meals and a snack with a registered dietician. Services shall be provided for a minimum of five days per week, depending on client's individual treatment plan. Average length of stay for PHP shall be four to six weeks per client, which may vary based on an individual's treatment plan.

#### TH

Contractor shall provide transitional housing as an option for clients receiving PHP or IOP services.

#### RTP

Contractor shall provide a highly structured 24/7 treatment environment. The average length of stay shall be four weeks with a specific length of stay determined by continued review and authorization by the ACBHD Clinical Liaison or their designee.

### **Additional Specifications**

## Program Design - Add Specs

### 2. Discharge Criteria and Process

Contractor shall begin discharge planning upon client enrollment and shall address discharge on a continuing basis in counseling sessions. Contractor shall coordinate discharge planning among Contractor's staff and client in collaboration with the ACBHD Clinical Liaison, and the client's existing or subsequent treatment provider(s),<sup>1</sup> at least seven days prior to the intended discharge date. Contractor shall provide discharge plans in writing and include such plans as part of the client's record.

## Additional Specifications

### Discharge Criteria and Proc - Add Specs

### 3. Hours of Operation

Contractor shall maintain the following hours of operation:

## Hours of Operation - Add Specs

### 4. Service Delivery Sites

Contractor shall provide services at the following location(s):

## Service Delivery Sites - Add Specs

At each specified service delivery site, Contractor shall have California Department of Social Services Community Care Group Home or California Department of Public Health Congregate Living Facility licensure, as appropriate for RTP.

### D. Minimum Staffing Qualifications

Contractor shall maintain staffing to deliver the services as described in this agreement in accordance with all regulatory requirements.

## Minimum Staffing Qual - Add Specs

## IV. CONTRACT DELIVERABLES AND REQUIREMENTS

### A. Process Objectives

Contractor shall provide the services/deliverables, as described in the Program Description, to eligible clients.

## Additional Specifications

### Process Objectives - Add Specs

<sup>1</sup> Contractor's collaboration with the client's other treatment provider(s) shall include the sharing of pertinent clinical information.

## **B. Quality Objectives**

Contractor shall work collaboratively with ACBHD to develop performance measures around the quality of services.

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| <b>Additional Specifications</b> |
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| Quality Objectives - Add Specs |
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## **C. Impact Objectives**

Contractor shall work collaboratively with ACBHD to develop performance measures around the impact of services.

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| <b>Additional Specifications</b> |
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| Impact Objectives - Add Specs |
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## **V. REPORTING AND EVALUATION REQUIREMENTS**

In addition to participating in weekly concurrent phone reviews with the ACBHD Clinical Liaison, Contractor shall supply the ACBHD Clinical Liaison with a discharge summary for each client that includes the following outcome measures for each client, if applicable:

- i. Weight Restoration/Stabilization: Change in body weight as recorded in the client's chart at intake and discharge;
- ii. Eating Behaviors: Change in binge and purge behaviors, observed by Contractor's staff and self-reported by clients as recorded in client's chart at intake and discharge; and
- iii. Mental Health: Change in mood symptoms of depression and anxiety, as recorded in client's chart at intake and discharge.

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| <b>Additional Specifications</b> |
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| Reporting And Eval Req - Add Specs |
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## **VI. ADDITIONAL REQUIREMENTS**

No additional requirements.

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| <b>Additional Specifications</b> |
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| Additional Requirements - Add Specs |
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