Exhibit A

1. Service Overview

Pilgrim Place in Claremont, the non-profit licensee, has a project named the “Make It Home” project which is expected to benefit the residents of Pilgrim Place Health Services Center (HSC), the subsidiary/facility of the contractor, by creating an environment for the residents to be in charge of their own lives. The HSC is in collaboration with Action Pact will train select staff and residents in person-centered care (PCC) and teach them ways to evaluate and implement their own ideas; enhance front line staff’s capacity to be responsive and thereby improving the quality of resident care; and implement nursing initiates to return the locus of control to the residents through a well-trained and empowered workforce.

Per the Federal Code of Regulations §488.433, the California Department of Public Health (CDPH) has authority to contract for these local assistance services.

2. Service Location

The services shall be performed at Pilgrim Place, a Skilled Nursing Facility, located at 721 Harrison Avenue, Claremont, CA 91711.

3. Service Hours

The services shall be provided during facility working hours, 24 hours each day, seven days a week.

4. Project Representatives

A. The project representatives during the term of this agreement will be:

<table>
<thead>
<tr>
<th>California Department of Public Health</th>
<th>Pilgrim Place in Claremont</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carly Carroll, Analyst</td>
<td>Contract Manager: Rich Rodas, Administrator</td>
</tr>
<tr>
<td>Telephone: (916) 449-5582</td>
<td>Telephone: (909) 399-5592</td>
</tr>
<tr>
<td>Fax: N/A</td>
<td>Fax: (909) 399-5556</td>
</tr>
<tr>
<td>E-mail: <a href="mailto:Carly.Carroll@cdph.ca.gov">Carly.Carroll@cdph.ca.gov</a></td>
<td>E-mail: <a href="mailto:rrodas@pilgrimplace.org">rrodas@pilgrimplace.org</a></td>
</tr>
</tbody>
</table>
B. Direct all inquiries to:

<table>
<thead>
<tr>
<th>California Department of Public Health</th>
<th>Pilgrim Place in Claremont</th>
</tr>
</thead>
<tbody>
<tr>
<td>Center for Health Care Quality</td>
<td>Pilgrim Place Health Services Center</td>
</tr>
<tr>
<td>Attention: Carly Carroll</td>
<td>Attention: Rich Rodas</td>
</tr>
<tr>
<td>1616 Capitol Ave, MS 3202</td>
<td>721 Harrison Ave</td>
</tr>
<tr>
<td>Sacramento California 95814</td>
<td>Claremont, CA 91711</td>
</tr>
<tr>
<td>Telephone: (916) 449-5582</td>
<td>Telephone: (909) 399-5592</td>
</tr>
<tr>
<td>Fax: N/A</td>
<td>Fax: (909) 399-5556</td>
</tr>
<tr>
<td>E-mail: <a href="mailto:Carly.Carroll@cdph.ca.gov">Carly.Carroll@cdph.ca.gov</a></td>
<td>E-mail: <a href="mailto:rrodas@pilgrimplace.org">rrodas@pilgrimplace.org</a></td>
</tr>
</tbody>
</table>

C. All payments from CDPH to the Contractor; shall be sent to the following address:

<table>
<thead>
<tr>
<th>Remittance Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contractor:</td>
</tr>
<tr>
<td>Pilgrim Place in Claremont</td>
</tr>
<tr>
<td>Attention: Rich Rodas</td>
</tr>
<tr>
<td>Address: 625 Mayflower Rd</td>
</tr>
<tr>
<td>Claremont, CA, 91711</td>
</tr>
<tr>
<td>Contract Number 20-10235</td>
</tr>
<tr>
<td>Email: <a href="mailto:rrodas@pilgrimplace.org">rrodas@pilgrimplace.org</a></td>
</tr>
</tbody>
</table>

D. Either party may make changes to the information above by giving written notice to the other party. Said changes shall not require an amendment to this agreement.

5. **Services to be Performed**

Goal 1: Training for Pilgrim Place Staff to Develop Culture Change

A. Objective 1: Training development and kick-off

1. Tasks:
   a. Initiate a two-day Kick-off Leadership session, either onsite or virtually, led by Action Pact (AP), for 15 Steering Team members (including designated administrators, HSC staff members, and Pilgrim volunteers) plus up to 10 additional staff chosen to attend for staff development and organizational redesign for person-centered care (PCC).
      i. Day 1 – Leadership Transformation:
         a. Shared leadership
         b. High involvement
         c. Team empowerment
      ii. Day 2 – Initiating the Change Process:
          a. Meeting with Executive Team to begin the process of reviewing possible culture change decisions
iii. 60 day follow up with “Mobile HouseWorks”: eLearning access made available for 100% of staff, residents, and family members.
   a. Multiple modules made available for two (2) months following presentation of topic.

2. Timeline: January 15, 2021 – February 28, 2021

3. Deliverables/Performance Measures:
   a. Submit to the CDPH Project Contract Manager (PCM) seminar agenda and sign-in sheets via email no later than two weeks after onsite kick-off sessions.

B. Objective 2: Intensive training sessions for select staff

1. Tasks:
   a. Pilgrim Place will provide intensive training via Action Pact course for lead administrative staff from HSC, Human Resources and Dining Services involving 8 staff total:
      i. “Choreography of Culture Change”: Four key Culture Change champions will attend 3-day training in Milwaukee for intensive training on assisting in guiding the creation of the climate, organizing the Person First initiative and developing community awareness. July 01, 2021 – June 30, 2022
      ii. “Life Happens in the Kitchen”: Two key Culture Change Dining staff will attend 3-day training in Milwaukee for intensive training on assisting in guiding a deep exploration of household model dining – resulting in strong in-house knowledge to think through options in decentralizing dining services. July 01, 2021 – June 30, 2022
      iii. “Nurse Leadership”: Two key Culture Change Nursing champions will attend an intensive 3-day training in Philadelphia. July 01, 2021 – June 30, 2022

   2. Timeline: July 01, 2021 - June 30, 2022

   3. Deliverables/Performance Measures:
      a. Submit to the CDPH PCM seminar completion certificates via email no later than two weeks after completion of each course.

C. Objective 3: Select workshop training sessions for staff

1. Tasks:
   a. Coordinate with AP to provide four (4) semi-annual onsite two-day workshop sessions for up to 40 staff and volunteers (in each session) over the course of three (3) Fiscal Years (Jan 01, 2021 – Dec 31, 2022), covering the duration of the project.
      i. FY 1 (JAN 01, 2021 – JUN 30, 2021): Direct selected staff to workshop courses involving the following topic:
         a. Workshop #1: Good Neighbors - Training staff as Neighborhood Coordinators, identifying Neighborhood Champions, training Neighborhood Nurses and empowering PCC “Champions”.
      ii. FY 2 (JUL 01, 2021 – JUN 30, 2022): Direct selected staff to workshop courses involving the following topics:
a. **Workshop #2: Redesigning Dining:** Nourishing the Body and Soul - Working with all of staff to see the importance of person-centered dining services as part of good care and vibrant life.

b. **Workshop #3: Creating the Environment and Culture:** Nurtures a good daily life for the residents and engages staff in a good work life, filled with learning and a sense of worth and contribution. Creating new channels for communication between medical staff, HSC residents and their families, and the network of Pilgrim Place volunteer programs in HSC neighborhoods.

iii. FY 3 (JUL 01, 2022 – DEC 31, 2022): Direct selected staff to workshop courses involving the following topics:

   a. **Workshop #4: Topic of choice** from the following list to be determined upon completion of Workshop #3:
      
      a. **Emphasis on Self-directed Team**
      b. **Vibrant Living**
      c. **Neighborhood Life**
      d. **One additional topic of choice**

2. **Timeline:** Semi-Annually: Beginning January 2021 through December 2022.

3. **Deliverables:**
   
   a. Submit to the CDPH PCM seminar attendance sign-in sheets via email no later than two weeks after completion of each course.

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**Goal 2: Enhancing Staff Ability to Improve the Quality of Resident Care**

A. **Objective 1: Develop consistent staffing assignments with self-managed work teams in each Neighborhood**

1. **Tasks:**
   
   a. Develop staff assignments for each Neighborhood to encourage staff to develop consistent knowledge in residents' interests, desires, and their family members.
   
   b. Identify a staff Champion in each Neighborhood and assign mentoring responsibilities.
   
   c. Establish interdisciplinary Neighborhood teams for additional training, team-building, and idea cultivation and sharing.

2. **Timeline:** January 01, 2021 through April 30, 2022

3. **Deliverables:**

   a. Include data showing increased positive resident outcomes from Champion assignments, staff encouragement and team-building as stated above, via required quarterly reports per the schedule outlined in section 6.A., of this exhibit.
B. Objective 2: Empower nursing staff to streamline Neighborhood decision-making and develop ownership of Neighborhood scheduling

1. Tasks:
   a. Restructure front line nursing staff job descriptions to provide more responsibility for decisions and training them to define and evaluate their initiatives that affect residents’ quality of life.
   b. Delegate staff responsibility for developing schedules.

2. Timeline: May 01, 2021 through June 30, 2022

3. Deliverables:
   a. Include data showing staffing consistency in Neighborhoods and positive outcomes for residents via required quarterly reports per the schedule outlined in section 6.A., of this exhibit.

C. Objective 3: Implement cross-training and coaching for nursing staff

1. Tasks:
   a. Create and provide internal training and development opportunities for staff.
   b. Train staff to reduce emphasis on tasks, increase emphasis on resident experience.
   c. Encourage and coach Certified Nursing Assistant’s to be present in care conferences so that they may share recommendations based on daily observations.

2. Timeline: May 01, 2021 through June 30, 2022

3. Deliverables:
   a. Include data showing positive outcomes for residents from cross-training and coaching staff via required quarterly reports per the schedule outlined in section 6.A., of this exhibit.

D. Objective 4: Modify hiring and retention practices

1. Tasks:
   a. Develop and implement extended orientation for new staff to cover PCC topics.
   b. Update annual review documentation to include PCC as a new rating.


3. Deliverables:
   a. Submit to the CDPH PCM copies of current and revised orientation materials via email no later than two weeks after December 31, 2021.
   b. Submit to the CDPH PCM copies of current and revised annual review documentation clearly signifying the new rating(s) no later than two weeks after December 31, 2021.
Goal 3: Implement person-centered care

A. Objective 1: Promote self-care, such as continence and mobility, consistently

1. Tasks:
   a. Expand restorative exercise programs offerings.
   b. Review calendars to ensure consistent staffing and develop prompted toileting plans.

2. Timeline: April 01, 2022 through July 31, 2022

3. Deliverables:
   a. Include data showing positive outcomes for residents from promotion of self-care via required quarterly reports per the schedule outlined below.

B. Objective 2: Promote quality end-of-life care

1. Tasks:
   a. Promote hospice with doctors and family members by setting up clear expectations and lines of communication; training staff on the principles of end of life and the dying and grieving process; offer visits with spiritual caregivers; maintain close connections with families.
   b. Create and deliver a training to all nursing staff on the principles of palliative care.
   c. Create a schedule for new spiritual team members to increase spiritual care team visits.

2. Timeline: January 31, 2021 through December 31, 2022

3. Deliverables:
   a. Submit to the CDPH PCM schedule for spiritual care visits via email no later than two weeks after the end of each quarter.
   b. Submit to the CDPH PCM palliative care training attendance sign-in sheets via email no later than two weeks after completion of each course.
6. **Results Measurement**

A. Quarterly Reports Requirement

1. Quarterly and final reports shall be submitted to the assigned CDPH PCM 30 days after completion of each quarter, unless otherwise specified. A final report shall be cumulative and shall be due by the last day of the contract period. Progress report due dates are as follows:

<table>
<thead>
<tr>
<th>PROGRESS REPORT</th>
<th>PERIOD</th>
<th>DUE DATE</th>
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<tbody>
<tr>
<td>First</td>
<td>01/01/21 – 03/30/21</td>
<td>04/30/21</td>
</tr>
<tr>
<td>Second</td>
<td>04/01/21 – 06/30/21</td>
<td>07/31/21</td>
</tr>
<tr>
<td>Third</td>
<td>07/01/21 – 09/30/21</td>
<td>10/31/21</td>
</tr>
<tr>
<td>Fourth</td>
<td>10/01/21 – 12/31/21</td>
<td>01/31/22</td>
</tr>
<tr>
<td>Fifth</td>
<td>01/01/22 – 03/30/22</td>
<td>04/30/22</td>
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<tr>
<td>Sixth</td>
<td>04/01/22 – 06/30/22</td>
<td>07/31/22</td>
</tr>
<tr>
<td>Seventh</td>
<td>07/01/22 – 09/30/22</td>
<td>10/31/22</td>
</tr>
<tr>
<td>(Final Report)</td>
<td>10/01/22 – 12/31/22</td>
<td>12/31/22</td>
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</table>

2. The content of these reports shall include, but not be limited to, progress accomplished on contract objectives; progress on activity schedules; major problems encountered and proposed solutions to those problems; issues requiring project coordinator consultation; and data on research services.

3. The final report shall additionally include a final project summary discussing the outcomes of the project, including data and metrics to support the discussion.

B. Monthly Meetings Requirement

1. Monthly face-to-face meetings or teleconference to monitor operations and discuss programmatic challenges.