



togetherforbetter

**AMENDMENT NO. 1  
RFQ NO. 606777-23  
SPECIALIZED FOSTER CARE**

**THIS AMENDMENT** is made and entered into this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, by and between CLARK COUNTY, NEVADA (hereinafter referred to as “COUNTY”), and RITE OF PASSAGE ADOLESCENT TREATMENT CENTERS AND SCHOOLS INC. (hereinafter referred to as “PROVIDER”).

**WITNESSETH:**

**WHEREAS** the parties entered into an agreement under RFQ Number 606777-23, entitled “Specialized Foster Care” dated April 7, 2025 (hereinafter referred to as CONTRACT); and

**WHEREAS** the parties desire to amend the CONTRACT.

**NOW, THEREFORE,** the parties agree to amend the CONTRACT as follows:

1. EXHIBIT A, Section XIV. Placement and Private Placements, Subsection d.

ORIGINALLY READ

“COUNTY will adjust bed utilization rate on scorecard if an unauthorized placement was made in the PROVIDERS home.”

REVISED TO READ

“COUNTY will adjust bed utilization rate if an unauthorized placement was made in the PROVIDERS home.”

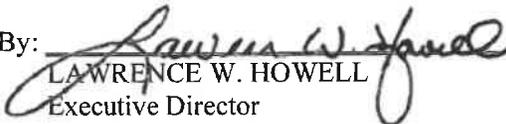
2. ATTACHMENT A-2: SAMPLE PERFORMANCE MEASURES is replaced with REVISED ATTACHMENT A-2: SAMPLE PERFORMANCE MEASURES.
3. ATTACHMENT A-7: FOSTER HOME INSPECTION CHECKLIST is replaced with REVISED ATTACHMENT A-7: FOSTER HOME INSPECTION CHECKLIST.
4. ATTACHMENT A-11: AGENCY PROVIDER CENSUS AND PAYMENT TRACKING is replaced with REVISED ATTACHMENT A-11: AGENCY PROVIDER CENSUS AND PAYMENT TRACKING.

This Amendment No. 1 represents a no cost change.

Except as expressly amended herein, the terms and conditions of the CONTRACT shall remain in full force and effect.

**PROVIDER:**

RITE OF PASSAGE ADOLESCENT TREATMENT CENTERS AND SCHOOLS INC.

By:   
LAWRENCE W. HOWELL  
Executive Director

Date: 01/20/2026

**COUNTY:**

COUNTY OF CLARK, NEVADA

By: \_\_\_\_\_  
JESSICA COLVIN  
Chief Financial Officer

Date: \_\_\_\_\_

**APPROVED AS TO FORM:**

STEVEN B. WOLFSON, District Attorney

By:   
[Sarah Schaerrer \(Feb 18, 2026 15:27:03 PST\)](#)  
SARAH SCHAERRER  
Deputy District Attorney

Date: 02/18/2026

**ATTACHMENT A – 2 (REVISED)**  
**PERFORMANCE MEASURES**

Safety:

Maltreatment in Care

Children will not experience maltreatment in foster placement.

**Numerator: total number of children as Alleged Child Victim (ACV) on matrix report (where perp = caregiver (person who is under the supervision of the PROVIDER))**

**Denominator: total number of children in foster placement (by provider)**

**Benchmark: 95%**

Licensing Regulations

**90% compliance with NAC 424 within the Specialized Foster Homes**

Pass or Fail - Items pose no resolution at time of visit = Fail

**Numerator: total number of passing audits**

**Denominator: total number of audits**

**Benchmark: 90%**

- OWNER will conduct quarterly visits of at least 25% of agency homes with the Foster Home Inspection Checklist. All deficiencies will be noted and communicated to the PROVIDER and foster home.
- PROVIDER will conduct bi-weekly in person visits in the home with specialized foster homes to provide support and education. The PROVIDER will document each visit.

Permanency:

Maintain PROVIDER:

Definition: Provider change is when a child maintains same level of care but changes provider

- When a child returns home, is on runaway, hospitalized, detention is not considered a placement change if that child returns to the same provider.
- A child that has an increase in level of care and does not return to provider is not considered an undesirable provider change.

Create a baseline with each agency through their invoicing / census document (form attached)

- Measurement - Care days defined for every child that spends a day (24-hour cycle)

**Numerator: children who did not have a provider change in the interval**

**Denominator: total number of children with the provider during same interval**

**Benchmark: 90%**

### Medical/ Dental

Children/Teens entering the foster care placement shall receive an initial health screening within the identified time frames for physical, dental and eye exams when needed. As well as yearly well-checks and eye exams and every 6 months for dental.

Medical feedback forms submitted to fax 702-380-9914 or email [dfsmedicalrecordrequest@clarkcountynv.gov](mailto:dfsmedicalrecordrequest@clarkcountynv.gov)

**Benchmark= 95%**

### Governance:

Specialized Agencies (PROVIDERS) will create and provide recruitment and retention plan to OWNER yearly at the binder review with OWNER.

1. Define the goal to increase capacity
2. Include strategies to improve
3. Benchmarks, baselines and use data to demonstrate performance
4. Retention efforts
5. OWNER will review yearly goals for achievement for increasing capacity including recruitment and retention.
6. Home renewal files on time, accurate, and complete with minimal deficiencies (not including safety items) provided to OWNER 60 days prior to the renewal date.
  - a. OWNER will provide a notice of deficiencies to be completed within 30 calendar days of notice.

**Numerator: number submitted on time**

**Dominator: number of renewals due per month**

**Benchmark: 90 %**

### Bed use rate:

Define viable bed: a vacant bed that is not on hold for the day by either the PROVIDER or the OWNER

Bed Day: 1 calendar day, for each licensed bed. Example 10 beds available for 30 days = 300 bed days.

Information will be provided and updated weekly on a shared document available to PROVIDER and OWNER

**Numerator: total bed days used**

**Denominator: total available bed days**

**Benchmark: negotiable per PROVIDER**



# Clark County Family Services

## FOSTER HOME INSPECTION CHECKLIST

Date: \_\_\_\_\_ Arrival: \_\_\_\_\_ Departure: \_\_\_\_\_

Name(s): \_\_\_\_\_ Address: \_\_\_\_\_  
 Inspection Type: Initial- \_\_\_\_\_ Renewal- \_\_\_\_\_ Non-Renewal- \_\_\_\_\_ Relocation- \_\_\_\_\_

### FACILITY GENERAL DESCRIPTION

1. House-\_\_\_\_ / \_\_\_\_ Stories Mobile Home-\_\_\_\_ Apartment/Condo-\_\_\_\_ (located on \_\_\_\_ story of building)
  2. Square footage = \_\_\_\_\_
  3. Total Bedrooms \_\_\_\_ Bathrooms \_\_\_\_
  4. Own- \_\_\_\_ Rent- \_\_\_\_
  5. Family Foster-\_\_\_\_ OR Group Foster-\_\_\_\_ OR Staffed/Non-Staffed-\_\_\_\_
- Licensed Number of Children-\_\_\_\_ Licensed Ages-\_\_\_\_ Gender Preference-\_\_\_\_
- Special Considerations/restrictions-\_\_\_\_\_

		Compliance	Non-Compliance	N/A
<b>REGULATION - NAC REQUIREMENT</b>				
424.120	Medical Examination in preceding 12 months: Name/Date of physical _____ Name/Date of Physical _____  Pertussis Vaccination (licensed for 00-01, Med Fragile) Name/Date of vaccination _____ Name/Date of vaccination _____  Annual Influenza Vaccination (licensed for 00-01 and Med Fragile) Name/Date of Vaccination _____ Name/Date of vaccination _____  At least one foster parent or staff member must be capable of understanding and following directions on the label of any medication _____	_____	_____	_____
424.130	Septic Tank --- Date Approved _____ Individual Well Water Date Approved _____ ID # _____ Bottled water used _____	_____	_____	_____
424.135	<b>Safety from Fire --</b> Number of household members and staff: _____ + _____ Number of foster children for which home is to be licensed: + _____ Projected number of non-ambulatory, severely disabled or special needs + _____ persons. Total household members = _____ If total is 10 or more, date of State Fire Marshal Inspection _____	_____	_____	_____
424.165	Initial license -- Local law received with prints submitted.	_____	_____	_____
424.167	TB -- Once every 24 months. Name & Expiration Date: _____ _____ _____	_____	_____	_____
424.168	<b>Financial Solvency</b> Demonstrate ongoing financial solvency	_____	_____	_____

424.270	<b>CPR -- Name &amp; Expiration Date:</b> _____ <b>Water Safety Training (if applicable) Name/Exp. Date</b> _____ <b>Training hours and date completed:</b> _____	_____	_____	_____
424.360	<b>Grounds of home --</b> Grounds free of debris/hazards _____ Suitable play area, fenced _____			
424.365	<b>Living space and furnishings --</b> Adequate for study and recreation _____ Dining area allows household to eat together _____ Kitchen equipment, refrigeration, cooking area adequate _____ All rooms clean, lighted, well ventilated, and heated _____ Furnishings comfortable and suitable for children _____			
		<b>Compliance</b>	<b>Non-Compliance</b>	<b>N/A</b>
<b>REGULATION - NAC REQUIREMENT</b>				
424.370	<b>Doors and windows --</b> Accessible window in child rooms _____ Two unobstructed exits _____ Exit path not through intervening rooms subject to locking _____ Mobile home exits at opposite sides/ends _____ Flexible ladders for residences with more than one story _____ Exit door locks opened easily, no higher than 48 inches from the floor _____ Bathroom door lock able to open from outside _____ Closet door(s) opens from inside _____ Bedroom window security bars easily opened by child, opening mechanisms must be not higher than 48 inches from the floor _____			
424.375	<b>Sleeping accommodations --</b> Each foster child's room is a designated bedroom _____ Children of opposite gender identity/expression who are 5 years or older can't share bedroom _____ Children over 12 months of age must not sleep in same room with adult _____ Room of child(ren) under five (5) years on same floor as foster parents _____ Each child must have own bed that is at least 27 inches wide & elevated off the floor _____ Bunk beds with more than two bunks are prohibited Upper bunk must have guard rail and not used by children under 6 years _____ Child(ren) has own closet, locker, or dresser space _____ Exit by door/window unobstructed _____			
424.380	<b>Lavatories, toiletries --</b> Number of toilets _____ Tubs/showers _____ Washbasins _____ Each foster child has own toilet articles, towels and washcloths _____			
424.385	<b>Kitchen sanitation; safe equipment --</b> Adequate refrigeration, dishwashing equipment, storage of dishes _____ Any refrigerator or freezer not in use has door removed or locked _____			
424.390	<b>Heating, air conditioning and water heater working, adequate, safe --</b> Heating, ventilation or air conditioning has automatic shutdown _____ Wood stove approved by appropriate authority _____ No portable heaters used _____ Heating system keeps house comfortably warm.			
424.395	<b>Electrical equipment --</b> Electrical cords in good condition; present no hazard _____ No extension cords used in general wiring, joined together, extending from room to room, under rugs, stapled/nailed, etc. _____ Protective plugs on electrical outlets. (Children under five (5) years of age) _____			

424.400	<b>Fire safety standards met --</b> Fire extinguisher 2-A 10BC properly mounted, readily available and serviced annually. Date serviced _____ Must have at least one fire extinguisher on each floor, accessible within 75 feet from any point of the foster home. Smoke detectors working, mounted in each foster child's bedroom & hallway _____ Carbon Monoxide Detectors on each level of the foster home and near each foster child's bedroom _____			
424.405	<b>Handrails --</b> Provided on stairs when there are four (4) or more steps.			
424.410	<b>Telephone in operation --</b> Operable telephone that is accessible in the foster home at all times when the home is occupied _____  Emergency numbers posted including health, fire, police, ambulance _____			
424.415	<b>Refuse --</b> Trash in tightly covered receptacles; removed a minimum of weekly.			
		Compliance	Non-Compliance	N/A
<b>REGULATION - NAC REQUIREMENT</b>				
424.420	<b>Pools, Empty water features, standing bodies of water, saunas and tanning booths</b> Water in healthy condition _____ Fence locked as required _____ Fence on all sides of the empty water feature or standing body of water, separating it from the general yard area (children under 5) _____ Self-Latching and Self-Closing gate _____ Reaching pole and ring buoy (unless the standing body of water is such that a person supervising a child is able, without entering the water, to reach the child in the water and remove the child by hand) _____ Above ground pool steps removed _____ If a swimming pool cannot be emptied after each use it has a working pump and filtration system _____ Sauna, tanning booth, and other attractive nuisances must be locked _____ Children's equipment or materials not stored in pool area _____			
424.425	<b>Mobile Home --</b> Skirted and anchored.			
424.450	<b>License requirements met --</b> Foster home provides foster care only for number, age and sex of children specified on license. Foster home will comply with all licensing requirements, with applicable state laws and regulations and is responsible for all members of foster home knowing and complying with licensing requirements. Foster home shall not discriminate in accordance with US Civil Rights Act and Rehabilitation Act. Foster home shall cooperate as a team member with foster agency.			
424.455	<b>Agency approved paid care for others --</b> day care, adult care, other _____ Roomers, boarders, adults approved _____			
424.460	<b>Approved Contracts and Agreements --</b> Name of contractors:			
424.465	<b>Private Placements approved by Licensing Agency --</b>			
424.475	<b>Removal of foster child notification provided --</b> Foster Parent provided to licensing within 1 working day of child placed or removed by another agency _____ <b>Relocation of foster home to another residence approved by licensing PRIOR TO MOVE OCCURRING _____</b>	_____	_____	_____
424.476	<b>Requirements for notification and reporting: Serious incident, accident or injury to child --</b> Notification to licensing authority and caseworker no later than one (1) business day after the serious incident, accident or injury			

424.478	<p><b>10 WORKING DAYS (30 days for specialized foster homes) notice provided to Agency for foster child removal</b>          Before requesting the removal of a child from a foster home, a provider of foster care shall make every effort to preserve the placement of the child within the foster home by working in partnership with the agency responsible for the foster child to support the well-being of the foster child. ____</p> <p>Notice to licensing for removal of a placement ____</p>			
424.480	<p><b>Children's records maintained --</b>          Ongoing records maintained on development, behavior, treatment, medical/dental ____          All child's belongings remain with child ____</p>			
424.485	<p><b>Confidentiality of foster child(ren) maintained --</b>          Foster children are not identified by name, clear description, photographed for any publication or other print, broadcast, social media or any Internet website without the permission of the licensing authority ____</p>			
424.490	<p><b>Transportation provided --</b>          Seat belts, car seats, insurance provided and maintained as per State law ____          Foster home provides transportation of foster child(ren) to necessary appointments (including visits) ____          Name of insurance company ____</p>	____	____	____
Compliance    Non-Compliance    N/A				
<b>REGULATION – NAC REQUIREMENT</b>				
424.495	<p><b>Communication and visitation provided --</b>          Foster home complies with case plan specification for visitation with family and others.</p>			
424.500	<p><b>Care and treatment of children --</b>          Provide a safe, stable and nurturing environment. ____          Children receive quality, nurturing parenting and are able to experience normalcy ____          All decisions concerning children are made using the reasonable and prudent parent standard ____          Smoking is prohibited in the direct presence of children, in a foster home and in a vehicle used to transport foster children</p>			
424.505	<p><b>Supervision of children --</b>          Minors shall not supervise foster children unless approved by the foster child's caseworker ____          Foster children must be given supervision appropriate to their age and maturity</p>			
424.520	<p><b>Discipline of children fair, reasonable, consistent --</b>          Incident report filed within 48 hours when serious physical intervention required.</p>			
424.530	<p><b>Unacceptable disciplinary techniques not used including but not limited to</b>          Verbal abuse/humiliation-____ Derogatory remarks about child/family-____          Threaten or subject to rough handling-____ Force feeding-____          Hitting of any kind-____ Threaten child loss of love of any person-____          Threaten punishment by deity-____ Threaten to remove from household ____          Threaten to deny food, shelter, medication, rest, use of bathroom-____          Punishment by other children-____ Excessive time out ____          Wash a child's mouth with soap/detergent or taping the mouth of a child-____          Deprive visits of significant others-____ Withhold allowance from agency-____          Signed discipline policy-____</p>			
424.535	<p><b>Assignment of chores appropriate --</b>          Appropriate to age, health, ability ____          Foster child(ren) not used for money-making endeavors ____</p>			

424.540	<b>Provision of food and water to children--</b> Three healthy meals and appropriate snacks must be provided daily in the quantity and quality necessary to meet the child's dietary, nutritional and caloric needs ____ Drinking water must be available to all children at all times ____ Kitchen refrigerator must not be locked ____ Foster children must be included with the family during meals and must not be seated separately ____ Foster children must be provided the same quality of food that the foster parents and their family consume ____			
424.545	<b>Housekeeping and sanitation -</b> Reasonable housekeeping standards met. Linens laundered weekly, more often if necessary ____ Dirty linens stored separately from food, clean linens, and other supplies ____ Personal items not used by more than one person ____ First aid supplies adequately stocked ____			
424.550	<b>Physical and mental health of foster parents and members of household--</b> No serious health problem or communicable disease reported ____ Emotionally capable to provide care ____  Refrain from using illegal substances, engaging in excessive consumption of alcohol and consuming medication in an illegal or improper manner ____	____	____	____
424.555	<b>Provision of health care to children-- Provided to children as needed.</b> Foster parents or staff shall closely observe children for signs of illness. ____ All children residing in home must be immunized according to recommendations set forth by the CDC ____ Ensure any program of medication, physical therapy, special exercise or activity prescribed by licensed medical practitioner for a child in the care of the foster home is adhered to. ____			
424.560	<b>Medications --</b> Foster parent shall supervise and administer all medication ____ Stored and labeled per regulations in a locked place. ____ Record kept on each child given medication. ____ Unused prescribed medications destroyed. ____			
		Compliance	Non- Compliance	N/A
<b>REGULATION – NAC REQUIREMENT</b>				
424.565	<b>Provision of care for mental, behavioral and emotional health of children--</b> Foster parent observes signs of change with child and reports ____ Foster parent along with caseworker shall arrange for any needed services for the care or treatment of the mental, behavioral and emotional health of the child. ____			
424.570	<b>Educational of children --</b> Child attends school. ____ Assists with school assignments, ____ school activities, ____ and provides an adequate study environment. ____, assist in establishing education plan with school district ____			
424.575	<b>Moral and religious training of children-</b> Children permitted to participate in religious activities of choice ____, Children may not be given religious training, be baptized or formally inducted into a faith without written consent of parents or agency responsible for the child's care ____			
424.580	<b>Training in personal health; personal hygiene and grooming-</b> Foster child's caseworker and birth parent must be consulted before anything is done to change the child's personal appearance			
424.585	<b>Clothing and personal possessions of children-</b> Clothing adequate, appropriate, clean and in good condition with receipts kept. ____ Personal possessions inventoried and remains with child. ____ Must have his or her own space for clothing and personal possessions and not be required to share personal items or clothing with others ____			

424.590	<b>Pets and animals--</b> Current inoculations ____ Temperament which is not hazardous or frightening to children. ____ Restricted from areas where food is prepared, eating areas while meals are served. ____ Number and type of pets ____			
424.595	<b>Hazardous materials and chemicals; items and products intended only for adult use--</b> All hazardous chemicals, tools and other equipment, including, without limitation, matches, plastic bags, paints, gasoline, insecticides, and cleaning and laundry products adequately stored. ____ Items or products intended only for adult use, including, without limitation, alcohol, tobacco products, alternative nicotine products, vapor products and lighters, must be reasonably stored and inaccessible to children ____			
424.600	<b>Weapons and ammunition --</b> Weapons unloaded, locked, or inoperable ____ Ammunition stored separate from weapons. ____ Weapons must not be transported in any vehicle in which children are riding unless the weapons are made inoperable and inaccessible. ____ A person who has legal authority to carry a firearm shall provide the licensing authority with appropriate documentation ____			
424.605	<b>Fire drills--</b> Monthly fire drills recorded ____ Fire drill form provided - Date ____			



**REGULATION  
SECTION**

**ACTION PLAN INCLUDING DATE(S)  
FOR COMPLIANCE**

**ACTUAL DATE(S) OF COMPLIANCE**

NAC 424.

NAC 424.

NAC 424.

NAC 424.

NAC 424.

NAC 424.

**DOCUMENTS PROVIDED TO FOSTER FAMILY.**

Foster Parent notified that regulations are available at [www.QPINEVADA.org](http://www.QPINEVADA.org)  
(Foster Parent initials). \_\_\_\_\_

\_\_\_\_\_  
Foster Parent(s) Printed Name

\_\_\_\_\_  
Foster Parent(s) Signature

Foster Parent(s) Contact Number: \_\_\_\_\_

\_\_\_\_\_  
Agency Signature

\_\_\_\_\_  
Date of Inspection

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

