



## **GRANT AGREEMENT AND CONDITIONS**

This grant from the California HealthCare Foundation (CHCF), a California nonprofit public benefit corporation, is for the purposes described below and is subject to your acceptance of the conditions specified below. This Agreement will be effective when signed by a properly authorized representative of your organization and returned to CHCF.

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**Grant Number:** 07-1491

**Grantee:** El Dorado County Department of Public Health

**Award Amount:** \$49,998

**Period of Grant:** February 1, 2008 through August 31, 2008

**Project:** ACCEL Specialty Access Project

**Project Director:** Ms. Gayle Erbe-Hamlin

**Phone:** (530) 621-6191

**Fax:** (530) 626-4713

**Purpose:**

The purpose of the grant is to support a coalition of organizations to collaboratively identify key specialty care access priorities and develop a shared strategy to improve access to appropriate specialty care services for the uninsured and underinsured populations.

**CHCF Staff Assigned to this Grant:** Rafael Gomez, Program Officer

**Report/Deliverable Schedule:\***

<b>Date Due</b>	<b>Type of Report</b>
January 31, 2008	Signed Agreement
February 15, 2008	Convening #1
May 31, 2008	Progress Report
TBD	Convening #2
August 31, 2008	Two-Year Implementation Plan
September 30, 2008	Final Financial Report

\* It is the Grantee's responsibility to submit deliverables and reports on time and to alert CHCF if problems arise that impact the grant reporting schedule.

Grantees will complete periodic progress reports, which will include written questions pertaining to the progress, successes and challenges of the coalition-based planning process, as well as, progress in achieving those activities outlined in the planning grant workplan.

All financial reporting must be submitted on CHCF Financial Report Forms, which can be downloaded from our Web site [www.chcf.org](http://www.chcf.org) under *Grants and RFPs, Grantee Resources*. For manuscripts or other reports for potential publication, please use CHCF's Report Guidelines and Stylesheet, which can also be downloaded from this same section of our Web site.

**Payment Schedule:**

<b>\$39,998</b>	Within 30 days of receipt of fully-executed grant agreement due January 31, 2008
<b>\$10,000</b>	Within 30 days of receipt and approval of Final Financial Report and all project deliverables due by September 30, 2008

**Objectives/Scope of Work:**

The lead agency shall convene a coalition of organizations to collaboratively develop a two-year implementation plan for improving appropriate access to specialty care for uninsured and underinsured populations in the defined target area. The implementation plan will detail the strategies and activities their community will employ to increase access and/or supply and/or reduce demand for specialty care for their uninsured and underinsured populations. As stated in the CHCF RFP for Improving Appropriate Access to Specialty Care in Rural California, project activities will include the completion of a needs assessment, identification of priority areas, strategy selection, sustainability plan and workplan, as well as participation in two grantee convenings. Results of these activities will be included in the implementation plan submitted to CHCF at the conclusion of the grant.

**Evaluation:** In addition to the evaluation components outlined in the proposal and this agreement, the Grantee will participate in CHCF sponsored evaluations of the specialty care planning and implementation grant initiative.

**Special Conditions:** None.

**Type of Organization\* (Check one)**

- Private Foundation**
- 501(c)3 organization**
- Other nonprofit organization**      **TYPE: 501(c)** \_\_\_\_\_

*\*Documentation Required*

**GRANT CONDITIONS**

**1. Political Activities**

Grant funds may not be used for any of the following purposes: to carry out propaganda, or otherwise attempt to influence legislation; to influence the outcome of any specific public election or to carry on directly or indirectly any voter registration drive; to make any grants that do not comply with the rules for individual grants and organizational grants in Section 4945 of the Internal Revenue Code; or to undertake any activity for a non-charitable purpose.

**2. IRS Determination**

A copy of the determination letter from the Internal Revenue Service should be submitted to CHCF as an attachment to this Agreement. *(Public agencies are exempt from this requirement.)*

**3. Reporting**

**Progress Reports**

Periodic reports may be required as a condition of this grant. Narrative reports should include project progress to date and any related project activities. Financial reports should include a summary of expenditures for the period covered by the report, consistent with the approved project budget.

### **Final Report**

A final report is usually required as a condition of CHCF grants (see page 2 of this agreement for the specific requirements of this grant). If required, the final report should be comprehensive and include: 1) a summary of the project objectives; 2) accomplishments toward achieving those objectives and any changes made during the course of the project in the strategy for accomplishing them; 3) problems you may have encountered and how they were resolved; and 4) a complete financial statement showing all grant funds received and expended. In the case of multi-year grants, the final financial report need only report on expenditures from the last reporting period through the end of the grant period.

### **4. Expenditure of Funds**

This grant is to be used in accordance with the Grantee's approved program and budget. Permission to make any major changes in program objectives, implementation strategy, key personnel, timetable, or in the approved budget (line items added or deleted or transfers among line items, amounting to \$1,000 or 10 percent of the approved line item amount, whichever is larger), must be requested in writing, and CHCF's approval obtained before such changes are implemented.

Grantees are encouraged to deposit grant funds in insured interest bearing accounts. Interest funds accrued during the course of the grant may be used to benefit project activities with prior approval of CHCF staff assigned to the project. Any funds (including interest accrued) not expended or committed for the purposes of the grant within the grant period (or any authorized extension of the grant period) must be returned to CHCF within 60 days of the close of the grant.

### **5. Payments**

All payments under this grant will be made in accordance with the specific requirements described under the "Payment Schedule." Payments contingent on progress reports listed under the "Report Schedule" will be issued within thirty (30) days of receipt and approval of the reports. Reference: page 2 of this agreement.

### **6. Financial Records**

The Grantee is expected to maintain complete books and records of revenues and expenditures for the project, which should be made available for inspection at reasonable times if deemed necessary by CHCF. CHCF, at its expense, will periodically audit a selected number of its grants. If your grant is selected, you will be expected to provide all necessary assistance in connection with such audit. Records must be kept for at least three (3) years after completion of the grant.

## **7. Acknowledgment and Publicity**

The California HealthCare Foundation is commissioning this research for its use. If CHCF chooses to publish material resulting from this project, either in print or electronically, appropriate acknowledgment of the Grantee will be included. If the Grantee wishes to issue a press release regarding this grant or the resulting published material, CHCF requires review and final sign-off of the text by its Publishing and Communications Department.

Any publication produced by the grantee that refers or results from this research should include an acknowledgment of CHCF that reads: *Supported by a grant from the California HealthCare Foundation, based in Oakland, California.*

CHCF's Publishing and Communications Department will oversee dissemination of final research and any resulting publicity activities. CHCF will send publicity material to the Grantee for final review and approval and will also provide the Grantee copies of the final product.

## **8. Grant Termination**

CHCF, at its sole option, may terminate the grant at any time if, in CHCF's judgment, the grantee becomes unable to carry out the purposes of the grant, ceases to be an appropriate means of accomplishing the purposes of the grant, or fails to comply with any of the conditions of the grant award.

## **9. Limitation**

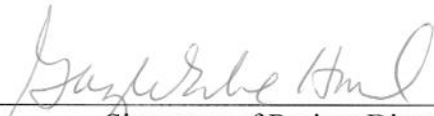
It is expressly understood that CHCF has no obligation to provide other or additional support for this or any other project or purposes.

**Acceptance of Terms and Conditions.** This document is to be signed by an official authorized to sign for your organization and by the project director,\* signifying that your organization agrees to comply with all the terms and conditions of the grant specified above. If the project director is authorized to sign for the institution, the same person may sign in both capacities.

The above terms and conditions of the grant are hereby accepted and agreed to as of the date specified:

For: El Dorado County Department of Public Health  
Grantee Institution

By: \_\_\_\_\_  
Signature of Authorized Official

  
\_\_\_\_\_  
Signature of Project Director

\_\_\_\_\_  
Name

Gayle Erbe-Hamlin  
\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

Director  
El Dorado Co. Dept. of Public Health  
\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

11/30/08  
\_\_\_\_\_  
Date

\*The project director is the individual directly responsible for developing the proposed activity, its implementation, and day-to-day direct supervision of the project.

**Please return a signed copy of this document to:**

**Glenda Pacha, Program Assistant  
California HealthCare Foundation  
1438 Webster Street, Suite 400  
Oakland, CA 94612**