



MINI-GRANT CONTRACT

Contract # 010-500-0708-865

Mini-Grant Proposal RFP # 07-08-01
(Original release date June 12, 2007)

THIS AGREEMENT is made this 10 day of September 2007, by and between **FIRST 5 EL DORADO CHILDREN AND FAMILIES COMMISSION** ("Commission") and

El Dorado County Public Health Department ("Grantee")
931 Spring Street
Placerville, CA 95667
CONTACT: Kirsten Rogers

RECITALS:

WHEREAS, Grantee has successfully proposed Strategies to further the Vision, Goals and Objectives in **FIRST 5 EL DORADO CHILDREN AND FAMILIES COMMISSION STRATEGIC PLAN**.

WHEREAS, Grantee warrants that it is qualified and agreeable to render the work proposed in the Application submitted in response to RFP #07-08-01, which application is attached hereto as Forms A – E, pages 1 – 7, and incorporated herein by reference.

NOW, THEREFORE, for and in consideration of the agreement made, and the payments to be made by Commission, the parties agree to the following:

1. **SCOPE OF WORK:** Grantee agrees to use the grant to: Purchase dental treatment services for 0-5 year olds.
2. **REPORTING REQUIREMENT:** Grantee shall complete the attached Program Evaluation Form (Attachment III) and the Expenditure and Performance Report (Attachment IV) to Commission after the work is completed as described in the attached Application, with documentation of all purchases and expenditures. Grantee shall use funds derived from this Contract as outlined in the budget submitted to and approved by the Commission. Amendments to the proposed project budget may be made with prior written approval of the Commission. Grantee's Application is attached hereto as Forms A – E, pages 1 – 7, and incorporated herein by reference.
Administrative costs are not an allowable budget item
3. **PAYMENT:** Grantee shall be approved to receive ninety percent (90%) of grant award upon the signing of this Contract, and ten percent (10%) upon contract completion. The Commission shall forward the payment request to the County Auditor/Controller within five days of the signing of the Contract, and within five days of completion of the contract.

4. **CONTRACT PERFORMANCE TIME:** Work required by this Contract shall be completed no later than April 30, 2008. Grantee shall have up to thirty (30) days beyond the contract completion date to submit the Program Evaluation Form and the Mini-Grant Expenditure Report and required documentation to the Commission.
5. **MAXIMUM COST TO COMMISSION:** Notwithstanding any other provision of this contract; in no event will the cost to Commission for the work to be provided herein exceed the maximum sum of **\$7,500.00**
6. **INSURANCE:** Grantee shall, as required by this contract, and applicable by law, at all times during the performance of the agreed upon services, maintain in force, insurance covering all of its operations in performing this contract. Grantee's insurance shall be primary to any insurance held by Commission. Proof of insurance satisfactory to the First 5 El Dorado Children and Families Commission evidencing the maintenance of such insurance coverage shall be filed with First 5 El Dorado Children and Families Commission prior to beginning any activities paid for by the grant. The First 5 El Dorado Children and Families Commission shall be given notice in writing at least 30 days in advance of cancellation, modification, or reduction of coverage.
7. **BOOKS OF RECORD AND AUDIT PROVISION:** Grantee shall maintain on a current basis, complete books and records relating to this Contract. Such records shall include, but not be limited to, documents supporting all bids, all income and all expenditures. These documents and records shall be retained for at least three years from the completion of this Contract. Grantee will permit Commission to audit all books, accounts or records relating to this Contract or all books, accounts or records of any business entities controlled by Grantee who participated in this Contract in any way.
 - A) Any audit may be conducted on Grantee's premises or, at Commission's option; Grantee shall provide all books and records within a maximum of fifteen (15) days upon receipt of written notice from Commission. Grantee shall refund any moneys erroneously charged. If Commission requires an audit due to errors on the part of the Grantee, Grantee shall be liable for the costs of the audit in addition to any other penalty imposed.
 - B) Grantee agrees to remain in business two full years after completion of this contract or all materials/funds may, at the discretion of the Commission, be requested to be returned to the Commission.
8. **WRITTEN NOTICE:** Grantee agrees to provide immediate written notice to the Commission if significant changes or events occur during the term of the award which could potentially impact the progress or outcome of the grant including, but not limited to, changes in the Grantees management personnel, loss of funding, revocation or suspension of the Grant Recipient's tax-exempt status (if applicable) or license.
9. **TITLE TO PROPERTY:** At the conclusion of this Contract, title to all expendable and nonexpendable personal or real property purchased with Commission funds shall vest with the Grantee as long as written certification is made to the Commission that the property will continue to be used for grant-related purposes and the Commission approves such certification in writing.

- A) If the above-noted certification is not made, or the Commission disapproves such certification, title to all property with an aggregate or individual value of \$1,000 or more shall vest with the Commission, and the grantee must await specific written instructions from the Commission regarding transfer of title or disposition.

10. **CONTRACT TERMINATION:** Time is of the essence with respect to this Contract. Grantee agrees to commence and to complete the work within the time schedules outlined within this Contract.

- a. If the Grantee fails to provide in any manner the services required under this Contract, or otherwise fails to comply with the terms of this Contract or violates any ordinance, regulation or other law which applies to its performance herein, the Commission may terminate this Contract by giving five (5) calendar days written notice to Grantee as identified in Section 13 below.
- b. Failure of the Grantee to secure or obtain funding from other sources, which are needed by the Grantee to completely carry out the programs provided in this Contract may be grounds for termination of this Contract, at the discretion of the Commission.
- c. Either party may terminate this Contract for any reason by giving thirty (30) calendar days written notice to the other parties. Notice of termination shall be by written notice to the other parties as identified in Section 13 below and be sent by registered mail.
- d. In the event of termination for reasons deemed by the Commission not to be the fault of the Grantee, the Grantee shall be paid for services performed to the date of termination in accordance with the terms of this Contract. Grantees shall refund any advanced funds, which were not used in accordance with this Contract.

11. **INDEMNIFICATION:** Grantee agrees to indemnify and hold Commission harmless from any and all liabilities arising out of Grantee's performance under this Contract, except liabilities arising out of the sole or active negligence of Commission, and from any and all claims and losses to anyone who may be injured or damaged by reason of Grantee's willful misconduct or negligent performance of this Contract. Grantee agrees to immediately notify Commission staff if any legal action is filed against Grantee related to work funded by this Contract.

12. **COMPLIANCE WITH APPLICABLE LAWS:** The Grantee shall comply with any and all state and local laws affecting the services covered by this Contract. No funds provided by the Commission shall be used for any political activity or political collaborations.

13. **INSURANCE SCREENING:** Based on the principles of First 5 El Dorado to maximize the opportunity of screening children aged 0-5 for health insurance, the Grantee agrees to:

- A) Ensure children aged 0-5 and their families, where appropriate, are informed of and screened for eligibility for Medi-Cal, Healthy Families, or other available health insurance programs through the El Dorado County Care Pathways Program administered by ACCEL.

14. **ADVERTISEMENT:** The Grantee agrees to utilize the First 5 El Dorado logo or a statement shall appear on all documents, for the duration of the Contract, designating that the agency/organization receives funding from First 5 El Dorado, The Children and Families Commission.

15. **NOTICES:** Notices shall be given to Commission at the following location:
FIRST 5 EL DORADO
4111 Creekside Drive, Suite B
Shingle Springs, CA 95682
Contact: Steven M. Thaxton, PhD
Executive Director

Notices shall be given to Grantee at the following address:

El Dorado County Public Health Department
Gayle Erbe-Hamlin, Contract Administrator
Kirsten Rogers, Program Contact
931 Spring Street
Placerville, CA 95667

IN WITNESS WHEREOF, the parties have executed this Contract on the date written.
APPROVED BY: FIRST 5 EL DORADO

Steven M. Thaxton, PhD
Executive Director, First 5 El Dorado

Date

Commissioner
First 5 El Dorado

Date

GRANTEE:

COUNTY OF EL DORADO

By: _____

Date

El Dorado County Board of Supervisors

ATTEST:
Cindy Keck, Clerk

By: _____ Date: _____

Form A
Application Cover Page
(5 Points)
Mini-Grants Maximum request \$7,500

Applicant Name: El Dorado County Children's Health Initiative

Applicant Agency/Organization: El Dorado County Public Health Department

Name of Proposed Project: Children's Dental Access

Agency/Organization Address: 931 Spring Street

City: Placerville, CA Zip: 95667

Contact Person: Kirsten Rogers Phone: (530) 621-6143

Email: krogers@co.el-dorado.ca.us Fax: (530) 626-4713

Agency License number: El Dorado County Governmental Agency

Summary of Application (Brief Description of Program): The Children's Dental Access project has been developed to provide children with increased access to routine, preventive and follow-up dental care. The major goals of the program are to educate families regarding the importance of oral health care, to provide children with oral assessments and varnishing services, to refer children with follow-up treatment needs to local dental practitioners, and to link each child to a dental home. The overall impact is aligned with the Healthy People 2010 Oral Health Objectives for Children which are to reduce dental caries, to reduce untreated dental decay, to increase utilization of oral health systems and to increase preventive dental services.

Number of Parents/Guardians Receiving Service: 100

Number of children Receiving Service: 150 (0-2) 50 (3-5) 100

Number of Special Needs Children 5 Years of Age and Under: 25

Has applicant been previously funded? If so, when and for what purpose?

- FY 01/02 – Shots for Tots
- FY 01/02 – Blood Lead Analyzer
- FY 01/02 - Spectrophotometer
- FY 01/02 – Passenger Safety Seat Classes
- FY 01/02 – Lactation Education
- FY 03/04 – Safe and Healthy Homes
- FY 03/04 – ACCEL Initiative

Amount Requested from the Commission: \$7,500

Total Project Cost: \$150,000 +

Form B
Organization Description/Capability
(10 Points)

The history of the organization including the year it was founded/began, number of years in operation, along with the primary mission.

The El Dorado County Public Health Department has been operational since the 1930s. Our mission is to promote the health and safety of people who reside in El Dorado County.

Describe the services/programs and how they relate to expectant women and/or children birth through five years of age.

The Public Health Department oversees a variety of clinical and community services aimed at promoting individual and family health and wellness. Specific to women and children, the Child Health Disability Prevention services and family planning programs provides over 10,000 patient visits a year in South Lake Tahoe and Placerville. In operation since the 1960's, the clinic provides preventive health services and screenings to residents who may have no other regular source of care. The vast majority of children who receive immunizations are under five years of age. Over 50% of the clinic patients are Latino and many are non-English speaking. The staff has strong bilingual capability and all staff hired through this grant will be bilingual.

Please list past accomplishments, current projects, and how they would relate to the First 5 El Dorado 2006-2011 Strategic Plan (see page 1 of Applicant Information Section).

The Public Health Department has a current contract with First 5 El Dorado to support the El Dorado County's Children's Health Initiative. In the past three years, the Children's Health Initiative has assisted families in obtaining health insurance for over 2,500 children in El Dorado County; 850 of those children were under age 5.

Additionally, the Children's Health Initiative and First 5 El Dorado have partnered together to become part of the Health Kids Healthy Future Regional Children's Health Initiative. The First Five Commissions in El Dorado, Sacramento, Colusa and Yuba have committed to a 3 year funding plan to support premium costs for a regional universal health coverage plan for children ages 0 to 5 years of age.

Both of these projects are designed to improve the overall health of children which is a fundamental component of the First 5 El Dorado 2006-2011 Strategic Plan.

Form C
Disclosure Statement
(5 Points)

I, Sharon Elliott, of the El Dorado County Public Health Department,
Name Agency

Hereby state that the funds being requested in this application do not supplant any existing revenue sources and that the answers given below are true and correct.

Sharon Elliott
Signature

7/18/07
Date

Health Promotions Division Manager
Title

In addition, please check yes or no on the following questions. If a yes answer is checked, please explain fully the circumstances and include discussion of the potential impact on the program if funded. As part of the application selection process, the Commission may validate the responses made below. The Commission reserves the right to reject all or part of the application if the applicant submits false or incorrect information.

A "yes" WILL NOT automatically exclude your application from the review process. (Please explain "yes" answers on a separate sheet of paper)

	Yes	No
Have you or anyone working for you been involved in litigation that may have a potential impact on the proposed program if funded?		X
Have there been unfavorable rulings by a funding source against your agency/organization for improper management or agreement compliance deficiencies?		X
Have you or anyone working for you had granted funds withheld?		X
Have you, or anyone working for you, been convicted of a crime?		X

Form D
(30 Points)
Budget Information

Please briefly describe each resource to be used in the project/event	Funds requested from the Commission	Funds from other sources/in-kind
Equipment/Supplies 1. Health Education Materials 2. Tooth Varnish	1. -0- 2. -0-	1. \$5,000 2. \$5,000
Other (describe) 1. Personnel costs 2. Dental treatment services for 0-5 year olds	1. -0- 2. \$7,500*	1. \$140,000 2. -0-

Amount requested from Commission \$7,500
 Total Project Cost \$150,00+

*This funding will be used to pay for dental services that are not covered under the child's health insurance plan, for children in the 0-5 age range, provided by local dental practitioners. All other program costs will be provided through other funding sources or as an in-kind service to the Children's Dental Access project.

I hereby state that the funds requested in this application do not supplant any existing revenue sources. I certify that all that has been stated in this application is true and correct.

Name of Agency President/Organization's Authorized Representative:

Sharon Elliott, Health Promotions Division Manager, El Dorado County Public Health

Signature: Sharon Elliott Date: 7/18/07

Form E
(50 Points)
Project Description/Scope of Work

Describe how this project is aligned to the 2006-2011 Strategic Plan result areas.
<p>This project is aligned to the 2006-2011 strategic Plan result Area 3: Healthy children. It will directly impact oral health access for children 0-5. Specifically, it will allow these children to access treatment services that insurance plans and dental providers will not currently cover.</p>
Describe the community need, as identified in the 2006-2011 Strategic Plan (Pg 16-20), your proposal will address, and the basis used for determining the need.
<p>The most recent El Dorado County (EDC) community health needs assessment was done in 2004 by a health care research firm, Barbara Avid and Associates. The findings demonstrated substantial gaps in access to medical and dental services. The need to address this issue resulted in the formation of the EDC Health Alliance which transitioned to a larger coalition, the EDC Safety Net Provider Network.</p> <p>The Safety Net Provider Network commissioned the Children's Health Initiative to coordinate efforts to identify and reduce risks to the health and well being of children.</p> <p>The most pertinent and immediate needs in relation to oral health care are: 1) an increase in the number of dental providers accepting a wide variety of health insurance plans; 2) increased slots in dental practices for publicly insured children; 3) provision of dental treatment services that are not covered by health insurance plans; 4) increased access to dental screenings; 5) no cost varnishing services and 6) family support, education and coordination in utilizing dental services.</p>
Describe the steps that will be taken to address this need.
<p>The Children's Health Initiative is proposing a comprehensive plan to improve children's dental access by providing: 1) family education; 2) dental screenings, varnishing services and treatment; 3) linkages to "dental homes"; 4) tracking and follow-up with children who frequently miss appointments; and 5) resource assistance for families with complex needs.</p> <p>Health promotion, education, screening and treatment are the foundation of this proposal. Families will be given the information they need to make informed, practical decisions regarding their children's dental needs and how to begin to address them. The Surgeon General reports that dental caries (tooth decay) is the most chronic disease of childhood – five times as common as asthma. Moreover, low levels of oral health literacy lead to often-severe dental disease that could otherwise be prevented cheaply and easily.</p> <p>The PHD will expand staffing and services to implement a broad-based approach to assisting families. A Community Health Worker will be hired to provide 400 new children (150 of these children will be in the 0-5 age range) enrolled into health insurance plans through the Public Health Department with face-to-face, oral health education that emphasizes how to be a "good consumer" of oral health care. The children will then be referred to a Public Health Nurse for an oral assessment. The results of the oral exam will determine if the child will receive varnishing services through the Public Health Nurse or be referred to a dentist for follow-up services. It is anticipated that 200-300</p>

(100 these children will be in the 0-5 age range) of the children will receive varnishing services with up to three applications per child. The El Dorado First 5 Mini-Grant funding will be used to pay for necessary dental services, for children 0-5, which cannot be billed to the children's health insurance plans (we are estimating that approximately 50 children in the 0-5 age range will be referred for follow-up dental treatment services). The children who do not have immediate dental treatment needs will be given resources by the Community Health Worker regarding how to access a "dental home" for ongoing and preventive oral health care. Children who miss appointments and/or do not follow through with dental treatment plans will be given follow-up services by the Community Health Worker to aide families in reducing their personal barriers to accessing care. Finally, children identified with additional health needs with be referred to appropriate providers, including nutrition and obesity education (which has a strong correlation with poor oral care). The Community Health Worker and Public Health Nurse will serve clients in the South Lake Tahoe Basin as well as the Western Slope of El Dorado County. All services, with the exception of dental treatment, will be conducted at locations convenient for families such as family homes, schools, community centers, etc.

The Public Health Department has applied for other sources of funding to provide for a part-time Office Assistant to assist with administrative functions and a full-time Community Health Worker to conduct all oral health education, coordinate referrals for screenings, varnishing and treatment, and provide follow-up services for families with complex needs. The varnishing product and the Public Health Nurse who will provide oral assessments and varnishing services will also be included as an in-kind contribution to the project.

Describe the specific activities being planned.

- 1) Family education - new families of children enrolled into health insurance plans through the Public Health Department, including newborns, will receive face-to-face, oral health education that emphasizes how to be a "good consumer" of oral health care.
- 2) Dental screenings and varnishing services –children will be referred to a Public Health Nurse for an oral assessment. The results of the oral exam will determine if the child will receive varnishing services through the Public Health Nurse or be referred to a dentist for follow-up services.
- 3) Dental treatment – The El Dorado First 5 Mini-Grant funding will be used to pay for necessary dental services, for children 0-5, that cannot be billed to the child's health insurance plan.
- 4) Linkages to "dental homes" – children who do not have immediate dental treatment needs will be given resources by the Community Health Worker regarding how to access a "dental home" for ongoing and preventive oral health care.
- 5) Tracking and follow-up with children who frequently miss appointments - children who miss appointments and/or do not follow through with dental treatment plans will be given follow-up services by the Community Health Worker to aide families in reducing their personal barriers to accessing care
- 6) Resource assistance for families with complex needs - children identified with additional health needs with be referred to appropriate providers.

Provide a brief description of the potential impact this project will have on the children and families served.

- 1) Education, care coordination and assistance with finding a dental home will help parents prioritize and schedule their children's routine and preventive dental care.
- 2) 150 children in the 0-5 age range will receive dental screenings and varnishing services.
- 3) 50 children in the 0-5 age range will receive follow-up dental treatment.

All of these outcomes are addressed in the Healthy People 2010 Oral Health Objectives for children by reducing dental caries, reducing untreated dental decay, increasing utilization of oral health services and increasing preventive dental services for low income youth.

Timeline for implementation.

10/1/07 – 4/30/08 – Oral health education, screening and varnishing services are conducted.

10/15/07 – 4/30/08 - Children will follow-up treatment needs are referred to local dental providers.

4/30/08 – Tracking, follow-up and resource assistance will continue for families beyond the mini-grant cycle.

Identify your partners.

Our partners will include the Safety Net Providers in El Dorado County. This consists of a diverse group of community agencies including the EDC Office of Education, First 5 El Dorado, Marshall Medical Center and Hospital, Barton Hospital, the Barton Community Clinic, the EDC Community Health Center, the Divide Wellness Center, the Shingle Springs Tribal Health Clinic, private medical and dental practices, and the EDC Departments of Social Services, Community Services, Mental Health and Public Health.

Identify staff that will serve as lead for this project.

The current Children's Health Initiative will support the work activities for the Children's Dental Access project. This includes a Program Administrator/Supervisor, a Health Education Coordinator, 2 Health Program Specialists and 4 Community Health Workers.

Staff that will support the direct treatment activities will include a Public Health Nurse and a minimum of one Dental Practitioner in the Placerville area and one Dental Practitioner in the South lake Tahoe area.



4111 Creekside Drive, Suite B
Shingle Springs, CA 95682
www.first5eldorado.com

Phone: 530•672•8298
Fax: 530•672•8576
E-mail: first5edc@pacbell.net



Attachment III
(Due upon completion of contract)

Program Evaluation Form

Agency:

Program:

Funding Amount:

Contact (s):

Number of Parents/Guardians Receiving Service _____

Number of Children Receiving Service _____ 0-2 _____ 3-5

Number of Special Needs Children 5 Years of Age and Under _____

1. Please describe how this grant benefited the children/families it was intended to serve.

2. What changes would you have made?

