

GLENN COUNTY HEALTH AND HUMAN SERVICES AGENCY
REQUEST FOR PROPOSAL
FOR
*SERVICES IN SUPPORT OF THE LOCAL ORAL HEALTH PLAN
AND TOBACCO EDUCATION PLAN*

Proposal No. 2018-04



Proposals must be received no later than 3:00 P.M., April 4, 2018

**County of Glenn
Health and Human Services Agency
Jamie Umble, Staff Services Specialist
420 East Laurel Street
Willows, CA 95988
530-934-1496**

Table of Contents

I.	PROPOSAL SUBMITTAL.....	3
II.	PURPOSE	3
III.	BACKGROUND INFORMATION.....	4
IV.	DESCRIPTION OF SERVICES	4
V.	PROPOSAL PROCESS	4
VI.	TIMELINE FOR THIS RFP	8
VII.	RFP ATTACHMENTS	8
VIII.	PROPOSAL CONTENTS.....	8
IX.	ADDITIONAL REQUIREMENTS	11
X.	EVALUATION OF PROPOSALS	11
XI.	INTERVIEWS.....	12
XII.	RIGHTS.....	12
XIII.	ATTACHMENT 1, AGREEMENT.....	14
XIV.	ATTACHMENT 2, SCOPE OF SERVICE	26
	1. PROJECT 1: LOCAL ORAL HEALTH PLAN (LOHP).....	26
	2. PROJECT 2: TOBACCO EDUCATION PROGRAM (TEP).....	30

RFP NUMBER: 2018-04

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FOR
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I. PROPOSAL SUBMITTAL

- A. Proposals will be accepted until 3:00 P.M. on April 4, 2018. Use of U.S. mail will be at the proposer's risk. **Proposals received after this date and time will not be considered.**
- B. Proposals must be signed by a duly authorized officer of the bidding organization, delivered along with all required documents and plainly marked as follows:

County of Glenn
Health and Human Services Agency
Jamie Umble, Staff Services Specialist
420 East Laurel Street
Willows, CA 95988

- C. All costs of the Request for Proposal preparation shall be the responsibility of the proposer.
- D. The original and three (3) copies of the proposal package must be completed and submitted as outlined above.
- E. If a prospective bidder has any questions relating to this invitation, they must be received in writing by mail or email by 3:00 P.M., March 15, 2018, by: Jamie Umble, Staff Services Specialist, 420 East Laurel Street, Willows, CA 95988 admin@countyofglenn.net. Questions will not be accepted by FAX, telephone or orally. All questions and responses will be distributed to all bidders.
- F. All materials submitted in response to the Request for Proposal become the property of the HHSa and may be returned only at the HHSa's option and at the bidder's expense.

II. PURPOSE

The purpose of this Request for Proposal (RFP) is to solicit and award contract(s) to service provider(s) for high quality, cost-effective services provided to the Glenn County Health and Human Services Agency (HHSa) in support of its Local Oral Health Plan (LOHP) and Tobacco Education Plan (TEP). This RFP is the means for prospective service providers to submit their qualifications and request selection as a service provider. Providers may apply to support either plan or both.

Proposals will be considered from all potential provider types, including but not limited to:

- Sole practitioners
- General partnerships
- Government agencies
- Non-profit organizations
- Private firms
- Panel organizational configurations
- Any combination of the above

III. BACKGROUND INFORMATION

In 2017, Glenn County (County) Health & Human Services Agency (HHSA) received a grant from the California Department of Public Health under the California Oral Health Plan, which is funded by the Research and Prevention Tobacco Tax Act of 2016 (Proposition 56). The purpose and goal is for the County to implement the strategies recommended in the California Oral Health Plan and establish or expand the existing LOHP and TEP. These programs are designed to educate the community about oral health, dental disease prevention, and linkage to treatment of dental disease including disease caused by the use of cigarettes and other tobacco products, as well as the prevention of tobacco use.

IV. DESCRIPTION OF SERVICES

Glenn County Health and Human Services Agency seeks qualified consultation in the areas listed within the Scope of Services. The Scope of Services is included in *Attachment 2 – Scope of Services* and is divided into two distinct service areas – Project 1 and Project 2. Project 1 is supporting the LOHP and Project 2 is supporting the TEP. Proposers are permitted to bid for one or both service areas, but cost proposals and proposal responses should break down services into two distinct parts so bids may be properly evaluated and compared.

V. PROPOSAL PROCESS

A. Period of Offer

1. Response to this RFP constitutes an irrevocable offer to the HHSA to perform according to the proposal specifications and the proposed contract for a period of not less than 120 days from proposal opening.

B. Bidders' Questions

1. Questions regarding the RFP should be submitted in writing or email by March 15, 2018, at 3:00 P.M. Questions will not be accepted by telephone, facsimile (FAX), or orally, the HHSA reserves the right to decline a response to any question if, in the HHSA's assessment, the information cannot be obtained and shared with all potential bidders in a timely manner. The HHSA will provide responses to questions to all bidders by March 20, 2018. Questions should be addressed to:

County of Glenn
Health and Human Services Agency
Jamie Umble, Staff Services Specialist
420 East Laurel Street
Willows, CA 95988
or emailed to admin@countyofglenn.net

2. A summary of the questions submitted, including responses deemed relevant and appropriate by the HHSA, will be provided to all potential bidders.

C. Submission of Proposals

1. Proposals must be received no later than 3:00 P.M., April 4, 2018 at:

County of Glenn
Health and Human Services Agency
Jamie Umble, Staff Services Specialist
420 East Laurel Street
Willows, CA 95988

Proposals received after the 3:00 P.M. deadline shall not be considered.
Reliance on the United States Postal Service will not excuse late proposals.

2. All proposals are final after the filing deadline. No adjustments shall be permitted after that time. Any proposal received after the exact time specified for receipt will not be considered unless it is received before an award is made, and it is determined by the HHSA that the late receipt was due solely to mishandling by the HHSA after receipt at the designated address. The only acceptable evidence to establish whether a proposal is late or meets the exception listed above, shall be the time of receipt at the HHSA as determined by the date stamp of the HHSA on the proposal wrapper or other evidence of receipt maintained by the HHSA.
3. Bidders must be aware that the submission of a proposal in response to this RFP shall create a contractual liability to perform according to the enclosed contract if the proposal is accepted by the HHSA for the award of the contract.
4. Bidders will be required to conform to all applicable provisions of law and regulations.

D. Proposal Review and Evaluation Criteria

1. The Community Development Director, selected County staff, and/or selected interested professionals will evaluate the proposals to determine a bidder's responsibility and responsiveness.
2. A responsible bidder is one whose proposal substantially complies with all requirements of the RFP.

A responsible bidder is one who:

- a. Possesses the competency, experience and education required to effectively perform the duties as enumerated in the *Scope of Services*, and
 - b. Has no record of unsatisfactory performance, lack of integrity, or poor business ethics, and
 - c. Is otherwise qualified and eligible to receive an award under applicable statutes and regulations, and
 - d. Has the experience of successfully performing similar services with particular focus on report writing, data analysis and support, technical assistance, and program evaluation, and
 - e. Has articulated a comprehensible approach to completing the required work, and
 - f. Has acceptable references.
3. Any proposal may be declared irregular and not considered for award of the contract if it is conditional, incomplete, or not responsive to the RFP, or contains any alteration of form or irregularity that would prevent it from being compared to other proposals.
 4. The HHSA reserves the right to waive any proposal irregularity; however, this will not relieve the Contractor from full compliance with the bidding requirements if awarded the contract.
 5. The HHSA reserves the right to reject any and all proposals, and to cancel the procurement process.
 6. After review of all proposals and a recommendation for award of contract or contracts is made, all bidders shall be notified in writing of the recommendation.
 7. The contract(s) award will not be based solely on price, but a combination of factors determined to be in the best interest of the HHSA. Given that the expertise required for this RFP is highly specialized, the HHSA reserves the right to negotiate a contract or contracts with successful bidder(s) including

to further negotiate the proposed scope(s) of work, method of delivery and amount of compensation.

E. Protests

1. Following notification to bidders of the recommendation for award of contract(s), protests may be submitted to the HHSa regarding the RFP process and selection of the Contractor. Protests shall be received within ten (10) calendar days immediately following the recommendation to award a contract. The HHSa shall consider any protest or objection regarding the award of the contract(s), providing it is submitted in the time period stated above.

2. Protests shall be in writing and shall be addressed to:

County of Glenn
Health and Human Services Agency
Jamie Umble, Staff Services Specialist
420 East Laurel Street
Willows, CA 95988
or by email: admin@countyofglenn.net

3. Protests shall state the reason for the protest, citing the law, rule, regulation, or practice, on which the protest is based. The HHSa shall respond in writing to the protestor within ten (10) calendar days of the end of the protest period. The response shall include the final decision on the protest and the basis for the decision.

F. Contract Award

1. The award of the contract(s) will be made on the basis of evaluation as described in the Evaluation of Proposals section, and scoring in accordance with the matrix contained herein, and will be limited to proposals submitted by a responsive, responsible, and qualified bidder.
2. The contract(s) shall not take effect before 12:01 AM on April 25, 2018, or once approved by the Board of Supervisors.
3. Payment for services under any contract(s) resulting from this RFP is dependent upon the availability of County, State, and Federal funding.

VI. TIMELINE FOR THIS RFP

HHSa has developed the following list of key events related to this RFP. All dates are subject to change at the discretion of the HHSa.

EVENT	DATE
Issuance of Request for Proposal	March 5, 2018
Deadline for written questions	March 15, 2018
Questions and answers posted	March 20, 2018
Deadline for proposal submission (3PM)	April 4, 2018
Anticipated interview dates (optional)	April 5, 2018
Notice of Intent to Award	April 6, 2018
Protest period – Submit formal protest by	April 16, 2018
HHSa responds to protest no later than	April 20, 2018

VII. RFP ATTACHMENTS

The following attachments are included as part of this RFP:

ATTACHMENT & APPENDICES	DESCRIPTION
Attachment 1: Proposed Agreement	If selected, the person(s) or entity(ies) submitting proposals must sign an Agreement with these terms and conditions.
Attachment 2: Scope of Services	This provides the description of Services to be provided by Proposer(s) if selected.

VIII. PROPOSAL CONTENTS

The following information must be included in the proposal.

A proposal lacking any of the following information may be deemed non-responsive.

A. Title Page - the title page will include the following information:

1. Proposal title
2. Date submitted
3. Proposer's name
4. Identification of Proposer as individual, partnership, corporation, public agency, or joint venture of one or more of the preceding
5. Proposer's contact information (physical and electronic addresses, telephone, and fax)
6. Name and contact information (physical and electronic addresses, telephone, and fax) for the person or persons who will be authorized to make representations for the Proposer

7. Project(s) the Proposer is applying for
8. Signature of duly authorized representative.
 - a. If the proposal is made by a sole proprietor, it must be signed by the sole proprietor.
 - b. If the proposal is made by a partnership, it must be signed by a member of the partnership and include the name and address of each member of the partnership.
 - c. If the proposal is made by a corporation, it must be signed by two officers of the corporation, consisting of one of each of the following: (1) chairman of the board, president, or vice president, and (2) the secretary, assistant secretary, chief financial officer, or assistant financial officer.
 - d. If the proposal is made by a corporation and is signed by a person other than an officer, or by only one officer, there must be attached to the proposal satisfactory evidence that the person signing is authorized by the corporation to execute contracts and bind the corporation on its behalf (e.g., certified copy of a corporation resolution or copy of appropriate corporate bylaws).
 - e. If the proposal is made by a public agency, it must be signed by an individual authorized to make representations on behalf of the agency.

B. Description of Services to be Provided:

1. Services

Provide a general description of the services to be provided to meet the Scope of Services requirements, as described in Attachment 2 - Scope of Services. Services are divided into two distinct project areas, and proposers may submit a proposal for one or both of these projects. Each project proposal should be adequately delineated and separated so proposals can be adequately and easily evaluated as to each part.

2. Organization and Staffing Plan

This section of the proposal must include information regarding the Proposer's proposed organizational structure, length of time in business, including experience, training and credentials.

3. Reporting and Billing Requirements

Proposals must include a plan for maintaining case and billing information required for reporting and billing purposes.

C. Competency and Experience Requirements (Including Resumes of Any Key Staff)

Qualifications and Resumes -Resumes must be included that describe background and experience in conducting the proposed activities. Proposal must describe the proposer's knowledge of the requirements necessary to render these services and describe professional qualifications and experience, including the proposer's ability and experience in conducting the proposed activities. Resumes must demonstrate training and experience necessary to successfully complete the proposed activities.

D. Methods and Outcomes

The Proposer must describe the methods that will be utilized to accomplish the proposed activities, and what deliverables are to be produced by the end of the contract period. Specifically, the Proposer should outline what methods will be used to obtain stakeholder engagement in the processes. Proposer should emphasize any relevant experience and may provide examples based on their experience with successfully completing similar or related activities.

E. Acceptance of the Terms and Conditions

Attachment 1, Proposed Agreement, sets forth Terms and Conditions, Proposer must either indicate acceptance of the Terms and Conditions or clearly identify exceptions to the Terms and Conditions. An "exception" includes any addition, deletion, qualification, limitation, or other change. If exceptions are identified, the Proposer must provide an explanation or rationale for each exception and/or proposed change.

F. Certifications, Attachments, and other requirements

Proposer must include the following certifications/forms in its proposal:

- Copies of current business licenses
- Copies of professional certifications
- Copies of other pertinent credentials

G. Cost Portion of Proposal

Proposers are asked to submit proposals based on completion of each activity as described in the Scope of Services for HHS (included within the Attachment 2- Scope of Services), including an hourly rate and/or a total annual cost.

1. The Proposer must specify their charges in terms of an hourly rate during the following time periods. State any projected increases in hourly rates during these time periods:

- July 1, 2018 to June 30, 2019
 - July 1, 2019 to June 30, 2020
 - July 1, 2020 to June 30, 2021
2. The cost proposal should include the following costs of Proposer, and the method in which these costs will be charged (if in addition to the hourly rate):
- Travel (includes in-county and out-of-county travel),
 - Training,
 - Insurance: These costs must reflect coverage levels as outlined in *Attachment 1, Proposed Agreement, Paragraph 10*
 - Overhead (includes rent, utilities, supplies, etc.),
 - No facilities will be provided for the Proposer under this proposal; all office space will be the responsibility of the Proposer.
 - Other unique costs as determined by Proposer.

IX. ADDITIONAL REQUIREMENTS

References: Proposers should provide at least three current professional references. The HHSa may check references provided by the proposer. Proposer may identify businesses or entities for which they have provided similar services; if such organizations are identified, proposer must state that he or she agrees that the HHSa may contact them. Information for references must include the following:

- Organization name;
- Contact person name, address, email and telephone number; and
- Dates that services were provided.

X. EVALUATION OF PROPOSALS

- A. At the time proposals are opened, each proposal will be checked for the presence or absence of the required proposal contents. Proposals will be evaluated by an evaluation team to determine the proposer's demonstrated ability to provide quality and competent services in relation to these projects. Proposals will be evaluated and ranked by score. The highest scoring participants may be set up for an interview.

B. The HHSA will evaluate submitted proposals on a 100-point scale using the criteria set forth in the table below. Although some categories are weighted more than others, all are considered necessary, and a proposal must be technically acceptable in each area to be eligible for an award. The evaluation categories, maximum possible points for each category, and evaluation criteria for each category are set forth below:

CRITERION	RFP REFERENCES	MAX POINTS
<p>A plan to provide comprehensive, high-quality services including timelines and deliverables to the HHSA, taking into consideration the proposed Scope of Work:</p> <ol style="list-style-type: none"> 1. Description of how services will be provided; 2. Organization and Staffing Plan; 3. Related experience, background and professional qualifications of the personnel that will be providing services and program administration; 4. Adequate oversight of the quality of services provided by the Proposer and subcontractors, if applicable, under this proposal; and 5. Complete and timely response to follow-up questions from the HHSA regarding the proposal, if applicable. 	VIII – B.1., B.2., B.3, C.	50
Description of methods that will be utilized in accomplishing the proposed activities, and deliverables. Methods that will be used to obtain stakeholder engagement in the processes. Relevant experience with successfully completing similar or related activities.	VIII – D.	30
Reasonableness of cost proposal	VIII – G.	20

XI. INTERVIEWS

The HHSA may conduct interviews with Proposers to clarify aspects set forth in their proposals or to assist in finalizing the ranking of top-ranked proposals. The interviews may be conducted in person or by phone. If conducted in person, interviews will likely be held at the HHSA’s offices in Willows, California. The HHSA will not reimburse Proposers for any costs incurred in traveling to or from the interview location. The HHSA will notify eligible Proposers regarding interview arrangements.

XII. RIGHTS

The HHSA reserves the right to reject any and all proposals, in whole or in part, as well as the right to issue similar RFPs in the future. This RFP is in no way an agreement, obligation, or contract and in no way is the HHSA or the State of California responsible for the cost of preparing a proposal. One copy of each proposal will be retained by the HHSA for official files and will become a public record.

CONFIDENTIAL OR PROPRIETARY INFORMATION

PROPOSALS ARE SUBJECT TO DISCLOSURE PURSUANT TO APPLICABLE PROVISIONS OF THE CALIFORNIA PUBLIC CONTRACT CODE. The HHSA will not disclose (i) social security numbers, or (ii) balance sheets or income statements submitted by a Proposer that is not a publicly-traded corporation. All other information in proposals will be disclosed in response to applicable public records requests. Such disclosure will be made regardless of whether the proposal (or portions thereof) is marked “confidential,” “proprietary,” or otherwise, and regardless of any statement in the proposal (a) purporting to limit the HHSA’s right to disclose information in the proposal or (b) requiring the HHSA to inform or obtain the consent of the Proposer prior to the disclosure of the proposal (or portions thereof). Proposers are accordingly cautioned not to include confidential, proprietary, or privileged information in proposals.

XIII. ATTACHMENT 1, AGREEMENT

**AGREEMENT BETWEEN THE COUNTY OF GLENN, THROUGH ITS
HEALTH AND HUMAN SERVICES AGENCY, AND
CONTRACTOR NAME HERE
FISCAL YEARS 2018-2021**

This agreement is entered into by and between the County of Glenn, through its Health and Human Services Agency ("County"/"HHSA"), and **CONTRACTOR NAME** ("Contractor") for the purpose of **ENTER INFO HERE**.

1. RESPONSIBILITIES OF CONTRACTOR

ENTER INFO HERE

2. RESPONSIBILITIES OF THE COUNTY

County shall pay Contractor upon receipt and approval of the invoice(s).

3. COMPENSATION

The total amount of this agreement shall not exceed \$**xxxxx** (**\$written out**) per each fiscal year, through June 30, 20**21**. Pursuant to Title 04.02.05B of the Glenn County Administrative Manual, the Glenn County Health and Human Services Agency Director certifies that adequate unexpended funds are available in the department budget.

4. BILLING AND PAYMENT

Contractor shall submit an itemized invoice to the **Glenn County Health & Human Services Agency, P.O. Box 611, Willows, CA 95988**, Attention: Fiscal, within 15 days after completion of the services described in Paragraph 1. The final invoice must be received no later than July 10, 20**21**.

5. TERM OF AGREEMENT

This agreement shall commence on July 1, 2018, and shall terminate on June 30, 20**21**.

6. TERMINATION OF AGREEMENT

If Contractor fails to perform his duties to the satisfaction of County, or if Contractor fails to fulfill in a timely and professional manner his obligations under this agreement, or if Contractor violates any of the terms or provisions of this agreement, then County shall have the right to terminate this agreement effective immediately upon County giving written notice thereof to Contractor. Either party may terminate this agreement on 30 days written notice. County shall pay Contractor for all work satisfactorily completed as of the date of notice. County may terminate this contract immediately upon oral notice should funding cease or be materially decreased.

7. ENTIRE AGREEMENT; MODIFICATION

This agreement supersedes all previous agreements and constitutes the entire understanding of the parties hereto. Contractor shall be entitled to no other benefits other than those specified herein. No changes, amendments, or alterations shall be effective unless in writing and signed by both parties. Contractor specifically acknowledges that in entering into and executing this

agreement, Contractor relies solely upon the provisions contained in this agreement and no others.

8. NON-ASSIGNMENT OF AGREEMENT

Inasmuch as this agreement is intended to secure the specialized services of Contractor, Contractor may not assign, transfer, delegate or sublet any interest herein without the prior written consent of County.

9. EMPLOYMENT STATUS

Contractor shall, during the entire term of this agreement, be construed to be an independent contractor and nothing in this agreement is intended nor shall be construed to create an employer/employee relationship, a joint venture relationship, or to allow County to exercise discretion or control over the professional manner in which Contractor performs the services which are the subject matter of this agreement, provided always, however, that the services to be provided by Contractor shall be provided in a manner consistent with the professional standards applicable to such services. The sole interest of County is to ensure that the services shall be rendered and performed in a competent, efficient, and satisfactory manner. Contractor shall be fully responsible for payment of all taxes due to the State of California or the Federal Government, which would be withheld from compensation if Contractor were a County employee. County shall not be liable for deductions for any amount for any purpose from Contractor's compensation.

Contractor shall not be eligible for coverage under County's Workers' Compensation Insurance Plan nor shall Contractor be eligible for any other County benefit.

10. INSURANCE REQUIREMENTS

Contractor shall procure and maintain for the duration of the contract insurance against claims for injuries to persons or damages to property which may arise from or in connection with the performance of the work hereunder and the results of that work by the Contractor, his agents, representatives, employees or subcontractors.

MINIMUM SCOPE AND LIMIT OF INSURANCE

Coverage shall be at least as broad as:

- a. Commercial General Liability (CGL): Insurance Services Office Form CG 00 01 covering CGL on an "occurrence" basis, including products and completed operations, property damage, bodily injury and personal & advertising injury with limits no less than \$2,000,000 per occurrence. If a general aggregate limit applies, either the general aggregate limit shall apply separately to this project/location (ISO CG 25 03 or 25 04) or the general aggregate limit shall be twice the required occurrence limit.
- b. Automobile Liability: ISO Form Number CA 00 01 covering any auto (Code 1), or if Contractor has no owned autos, hired, (Code 8) and non-owned autos (Code 9), with limit no less than \$1,000,000 per accident for bodily injury and property damage.

- c. Workers' Compensation: as required by the State of California, with Statutory Limits, and Employer's Liability Insurance with limit of no less than \$1,000,000 per accident for bodily injury or disease.
- d. Professional Liability (Errors and Omissions): Insurance appropriate to the Contractor's profession, with limit no less than \$2,000,000 per occurrence or claim, \$2,000,000 aggregate. (If applicable).

If the contractor maintains broader coverage and/or higher limits than the minimums shown above, the County requires and shall be entitled to the broader coverage and/or the higher limits maintained by the contractor. Any available insurance proceeds in excess of the specified minimum limits of insurance and coverage shall be available to the County.

OTHER INSURANCE PROVISIONS

The insurance policies are to contain, or be endorsed to contain, the following provisions:

Additional Insured Status

The County, its officers, officials, employees, and volunteers are to be covered as additional insureds on the CGL policy with respect to liability arising out of work or operations performed by or on behalf of the Contractor including materials, parts, or equipment furnished in connection with such work or operations. General liability coverage can be provided in the form of an endorsement to the Contractor's insurance (at least as broad as ISO Form CG 20 10 11 85 or if not available, through the addition of both CG 20 10, CG 20 26, CG 20 33, or CG 20 38; and CG 20 37 if a later edition is used).

Primary Coverage

For any claims related to this contract, the Contractor's insurance coverage shall be primary coverage at least as broad as ISO CG 20 01 04 13 as respects the County, its officers, officials, employees, and volunteers. Any insurance or self-insurance maintained by the County, its officers, officials, employees, or volunteers shall be excess of the Contractor's insurance and shall not contribute with it.

Notice of Cancellation

Each insurance policy required above shall provide that coverage shall not be canceled, except with notice to the County.

Waiver of Subrogation

Contractor hereby grants to County a waiver of any right to subrogation which any insurer of said Contractor may acquire against the County by virtue of the payment of any loss under such insurance. Contractor agrees to obtain any endorsement that may be necessary to affect this waiver of subrogation, but this provision applies regardless of whether or not the County has received a waiver of subrogation endorsement from the insurer.

Self-Insured Retentions

Self-insured retentions must be declared to and approved by the County. The County may require the Contractor to purchase coverage with a lower retention or provide proof of ability to pay losses and related investigations, claim administration, and defense expenses within the

retention. The policy language shall provide, or be endorsed to provide, that the self-insured retention may be satisfied by either the named insured or County.

Acceptability of Insurers

Insurance is to be placed with insurers with a current A.M. Best's rating of no less than A:VII, unless otherwise acceptable to the County.

Claims Made Policies

If any of the required policies provide claims-made coverage:

1. The Retroactive Date must be shown, and must be before the date of the contract or the beginning of contract work.
2. Insurance must be maintained and evidence of insurance must be provided for at least five (5) years after completion of the contract of work.
3. If coverage is canceled or non-renewed, and not replaced with another claims-made policy form with a Retroactive Date prior to the contract effective date, the Contractor must purchase "extended reporting" coverage for a minimum of five (5) years after completion of work.

Verification of Coverage

Contractor shall furnish the County with original Certificates of insurance including all required amendatory endorsements (or copies of the applicable policy language effecting coverage required by this clause) and a copy of the Declarations and Endorsement Page of the CGL policy listing all policy endorsements to entity before work begins. However, failure to obtain the required documents prior to the work beginning shall not waive the Contractor's obligation to provide them. The County reserves the right to require complete, certified copies of all required insurance policies, including endorsements required by these specifications, at any time.

Special Risks or Circumstances

County reserves the right to modify these requirements, including limits, based on the nature of the risk, prior experience, insurer, coverage, or other special circumstances.

11. INDEMNIFICATION

Contractor shall hold harmless, defend and indemnify Glenn County and its officers, officials, employees and volunteers from and against any and all liability loss, damage, expense, and costs (including without limitation costs and fees of litigation) of every nature arising out of or in connection with Contractor's performance of work hereunder contained in the contract, except such loss or damage which was caused by the sole negligence or willful misconduct of the County.

Contractor shall also indemnify County of any adverse determination made by the Internal Revenue Service or the State Franchise Tax Board against County with respect to Contractor's independent contractor status that would establish a liability for failure to make social security or income tax withholding.

12. INDEPENDENT CONTRACTOR CLAUSE

It is specifically and expressly understood between the parties that this agreement creates no relationship of employer/employee between the parties and that Contractor is, and shall remain throughout the term of this agreement, an independent contractor. Contractor agrees that he is not, and will not become, an employee, partner, agent or principal of county while this agreement is in effect. Contractor agrees that he is not entitled to the rights or benefits afforded to County's employees, including disability or unemployment insurance, workers' compensation, medical insurance, sick leave, or any other employment benefit. Contractor is responsible to pay or provide from his own expense, all federal and state income taxes, including estimated taxes, social security, and any other payroll tax obligations that he may owe as a result of compensation received for services rendered pursuant to this agreement.

Contractor is further responsible for providing, at his own expense, disability, unemployment, and other insurance, workers' compensation, training, permits and licenses for himself and for his employees and subcontractors. Contractor agrees to indemnify County for any claims, costs, losses, fees, penalties, interest, attorney's fees, or damages suffered by County resulting from Contractor's failure to comply with these provisions.

13. NON-DISCRIMINATION

During the performance of this agreement, Contractor and its subcontractors shall not unlawfully discriminate, harass, or allow harassment against any employee or applicant for employment because of sex, race, color, ancestry, religious creed, national origin, physical disability (including HIV and AIDS), mental disability, medical condition (cancer), age (over 40), marital status, and denial of family care leave. Contractor and subcontractors shall ensure that the evaluation and treatment of their employees and applicants for employment are free from such discrimination and harassment. Contractor and subcontractors shall comply with the provisions of the Fair Employment and Housing Act (Government Code Section 12990 (a-f) et seq.) and the applicable regulations promulgated thereunder (California Code of Regulations, Title 2, Section 7285 et seq.). The applicable regulations of the Fair Employment and Housing Commission implementing Government Code Section 12990 (a-f), set forth in Chapter 5 of Division 4 of Title 2 of the California Code of Regulations, are incorporated into this Agreement by reference and made a part hereof as if set forth in full. Contractor and its subcontractors shall give written notice of their obligations under this clause to labor organizations with which they have a collective bargaining or other agreement. The Contractor shall comply with Executive order 11246, entitled "Equal Employment Opportunity," as amended by Executive Order 11375 and as supplemented in Department of Labor regulation (41 CFR Part 60).

14. NOTICES

Any notice required to be given pursuant to the terms and provisions of this agreement shall be in writing and shall be sent first-class mail to the following addresses:

If to County:	Administration Glenn County Health and Human Services Agency P.O. Box 611 Willows, CA 95988 Phone: (530) 934-1439 Fax: (530) 934-6521 Email: admin@countyofglenn.net
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If to Contractor: **Name, telephone and address.**

Notice shall be deemed to be effective two days after mailing.

15. AVAILABILITY OF FUNDS

All funding under the Contract is subject to the availability of state or federal funds.

16. RIGHT TO MONITOR AND AUDIT

County shall have the right to monitor all work performed, as well as to review all records and procedures to ensure that the expenditure of funds is in conformity with this agreement and applicable Federal and State regulations.

Contractor and sub-contractors are required to provide a copy of a certificate of liability insurance to County prior to commencement of services and may be required to provide a copy of their business license. Contractor certifies that it is not listed as debarred or suspended by the System for Award Management (SAM, www.sam.gov), formerly known as Excluded Parties Listing Service (EPLS).

17. RESPONSIBILITY FOR AUDIT EXCEPTIONS

Contractor agrees to accept responsibility for receiving, replying to and/or complying with any audit exception(s) by appropriate State or County audit agencies occurring during the performance of this agreement. Contractor also agrees to pay to County the full amount of County's liability to the appropriate entity resulting from said audit exceptions that result from a breach of contract.

18. RECORDS RETENTION

Contractor shall maintain and preserve all records related to this agreement in its possession (or will ensure the maintenance of such records in the possession of any third party performing work related to this agreement) for a period of not less than **seven (7)** years from the effective date of this agreement or until all State audits are complete, whichever is later.

19. CONFIDENTIALITY/PRIVACY

A. Personally Identifiable Information ("PII") is defined as an individual's first name or first initial and last name in combination with any one or more of the following data elements including, but not limited to: social security number, passport number, credit card number(s), clearances, bank numbers, biometrics, date and place of birth, mother's maiden name, criminal, medical and financial records, educational transcripts, etc.

B. To the extent that the work under this Agreement requires the Contractor to have access to PII, the Contractor shall, after receipt thereof, treat such PII as confidential and safeguard such information from unauthorized use and disclosure. Contractor agrees to execute a Confidentiality Agreement protecting PII, when necessary, and further agrees not to appropriate such PII for its own use or to disclose such information to third parties unless specifically authorized by the County, in writing. If and when Contractor becomes aware of, or should reasonably have been aware of a breach of PII, Contractor shall notify County within two (2) business days.

IN WITNESS WHEREOF, County and Contractor have executed this agreement on the day and year set forth below.

NAME HERE /CONTRACTOR:

Signature Date

**COUNTY OF GLENN, THROUGH ITS HEALTH AND
HUMAN SERVICES AGENCY
APPROVED AS TO CONTENT AND FUND AVAILABILITY:**

Christine Zoppi, Director Date

APPROVED AS TO FORM:

Alicia Ekland, County Counsel
County of Glenn, California

- Approved by Deputy Director Admin _____
- Approved by Deputy Director of Program _____
- Approved by Fiscal Manager _____
- Approved by Program Manager _____

GLENN COUNTY BUSINESS ASSOCIATE AGREEMENT

[This addition to the contract is required for every contract in which the service contracted for involves the provision of medical, dental, pharmaceutical, psychological, psychiatric or any other service in which client's Protected Health Information could at some point be used or disclosed to the contractor.]

This Business Associate Agreement (“Agreement”) supplements and is made a part of the contract (“Contract”).

The County and Business Associate intend to protect the privacy and provide for the security of protected health information (PHI) disclosed to Business Associate pursuant to the Contract in compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the Health Information Technology for Economic and Clinical Health Act (HITECH), and regulations promulgated there under by the U.S. Department of Health and Human Services and other applicable laws.

As part of the HIPAA Regulations, the Privacy and Security Rules require the County enter into a contract containing specific requirements with its Business Associates prior to disclosure of PHI.

In consideration of the mutual promises below and the exchange of information pursuant to this Agreement, the parties agree as follows:

DEFINITIONS

Terms used but not otherwise defined in this Agreement shall have the same meaning as those terms used in the above referenced regulations.

OBLIGATIONS OF BUSINESS ASSOCIATE

1. **Compliance:** Business Associate shall comply with, and assist the County in complying with the Health Insurance Portability and Accountability Act (including but not limited to 42 U.S.C. 1320d et seq.; “HIPAA”) and its implementing regulations (including but not limited to 45 CFR Parts 142, 160, 162 and 164). Business Associate shall further comply with, and assist the County in complying with the Health Information Technology for Economic and Clinical Health Act (including but not limited to 42 U.S.C. 17921 “HITECH”).
2. **Independent Contractor:** It is specifically and expressly understood between the parties that the Contract and this Agreement creates no relationship of employer/employee between the parties and that contractor is, and shall remain throughout the term of this Contract and Agreement, an independent contractor. Contractor agrees that he is not, and will not become, an employee, partner, agent, or principal of County while this Agreement is in effect.

3. **Permitted Uses and Disclosures:** Business Associate shall not use or disclose protected health information (PHI) except for the purpose of performing Business Associate's obligations under the Contract, as permitted under the Contract and Agreement, and as required by law. Business Associate shall not disclose PHI in any manner that would constitute a violation of the Privacy Rule or the HITECH Act. Business Associate shall not use or further disclose PHI other than as permitted or required by this Agreement, or as required by law.
4. **Prohibited Uses and Disclosures:** Business Associate shall not use or disclose PHI for fundraising or marketing purposes. Except as otherwise required by law, Business Associate shall not disclose PHI to a health plan for payment or health care operations purposes if the patient has requested this special restriction, and has paid out of pocket in full for the health care item or service to which the PHI solely relates. Associate shall not directly or indirectly receive remuneration in exchange for PHI, except with prior written consent of the County and as permitted by the HITECH Act. However, this prohibition shall not affect payment by the County to Business Associate for services provided pursuant to the Contract.
5. **Appropriate Safeguards:** Business Associate shall implement appropriate administrative, physical and technical safeguards that reasonably and appropriately protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains or transmits on behalf of the County, from use or disclosure other than as provided for by this Agreement. Business Associate shall comply with 45 C.F.R. Sections 164.308, 164.310, and 164.312. Business Associate shall also comply with the policies and procedures and documentation requirements of the HIPAA Security Rule, including but not limited to, 45 C.F.R. Section 164.316.
6. **Report of Improper Access, Use, or Disclosure:** Business Associate shall report to the County any access, use, or disclosure of the PHI not permitted by this Agreement, including but not limited to security incidents of which the Business Associate becomes aware.
7. **Business Associate's Agents:** Business Associate shall ensure that any agents, including subcontractors, to whom it provides PHI received from, created, or received by Business Associate on behalf of the County, agrees in writing to the same restrictions and conditions that apply through this Agreement to Business Associate with respect to such information.
8. **Access to PHI:** Business Associate shall, within ten (10) days of receipt of a request from the County, provide access to PHI maintained by the Business Associate, or its agents or subcontractors, in a Designated Record Set. This PHI will be released to the County or, as directed by the County, to an Individual, in order to meet the requirements under 45 CFR 164.524. If Business Associate maintains an Electronic Health Record (EHR), Business Associate shall provide such information in electronic format to enable the County to fulfill its obligations under the HITECH Act.
9. **Amendment of PHI:** Business Associate shall, within ten (10) days of receipt of a request from the County, make any amendment(s) to PHI maintained in a Designated Record Set that the County directs, pursuant to 45 CFR 164.526, at the request of the County or an Individual. If any individual requests an amendment of PHI directly from the Business Associate, or its agents or

subcontractors, Business Associate must, within five (5) days of the request, notify the County in writing. Any approval or denial of amendment to PHI maintained by the Business Associate, or its agents or subcontractors, shall be the responsibility of the County.

10. **Accounting Rights:** Business Associate shall, within ten (10) days of notice by the County, make available to the County information required to provide an accounting of disclosures to enable the County to fulfill its obligations under section 164.528 of the Privacy Rule and the HITECH ACT. Business Associate agrees to implement a process that allows for an accounting to be collected and maintained by Business Associate, and its agents or subcontractors, for at least six (6) years prior to the request.
 - a. If Business Associate uses or maintains an EHR with respect to PHI (1) the exception for tracking disclosures of PHI related to treatment, payment or health care operation purposes no longer applies and (2) information relating to disclosures are required to be collected and maintained for only three (3) years prior to the request. This only applies to the extent the Business Associate uses or maintains an EHR.
 - b. In the event that the request for an accounting is delivered directly to the Business Associate, or its agents or subcontractors, Business Associate shall within five (5) days of a request, forward it to the County in writing. It shall be the County's responsibility to prepare and deliver any such accounting requested.
 - c. At a minimum, the information collected and maintained shall include: (1) the date of the disclosure; (2) the name of the entity or person; (3) a brief description of PHI disclosed; and (4) a brief statement of purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or in lieu of such statement, a copy of the individual's authorization, or a copy of the written request for disclosure.
11. **Government Access:** Business Associate shall make internal practices, books, and records relating to the use and disclosure of PHI available to the County; or at the request of the County, to the Secretary of the United States Department of Health and Human Services ("Secretary"), in a time and manner designated by the County or the Secretary, for purposes of determining compliance with the Privacy Rule. Business Associates shall provide to the County a copy of any PHI that Business Associate provides to the Secretary concurrently with providing such information to the Secretary.
12. **Minimum Necessary:** Business Associate, and its agents or subcontractors, shall request, use and disclose only the minimum amount of PHI necessary to accomplish the purpose of the request, use, or disclosure. Business Associate understands and agrees that the definition of "minimum necessary" is in flux and shall keep itself informed of guidance issued by the Secretary with respect to what constitutes "minimum necessary."
13. **Breach Pattern or Practice by Covered Entity:** Pursuant to 42 U.S.C. Section 17934(b), if the Business Associate knows of a pattern of activity or practice of the Business Associate that constitutes a material breach or violation of the Business Associate's obligations under the Contract

or Agreement or other arrangement, the Business Associate must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, the Business Associate must terminate the Contract or other arrangement if feasible, or if termination is not feasible, report the problem to the Secretary of the Department of Health and Human Services. The Business Associate shall provide written notice to the County of any pattern of activity or practice of the Business Associate that constitutes a material breach or violation of the Business Associate's obligations under the Contract or Agreement or other arrangement within twenty-four (24) hours of discovery and shall meet with the County to discuss and attempt to resolve the problem as one of the reasonable steps to cure the breach or end the violation.

14. **Notification of Breach:** During the term of the Contract, Business Associate shall notify the County within twenty-four (24) hours of any suspected or actual breach of security, intrusion or unauthorized access, use, or disclosure of PHI of which the Business Associate becomes aware and or any actual use or disclosure of data in violation of any applicable federal or state laws or regulations. This notice shall include, to the extent possible, the identification of each individual whose PHI has been or is reasonably believed by the Business Associate to have been accessed, acquired, or disclosed during the breach. Business Associate shall provide the County with any other available information that County is required to include in the notification to the affected individuals. Business Associate shall take (1) prompt corrective action to cure any such deficiencies and (2) any action pertaining to such unauthorized disclosure required by applicable federal and state laws and regulation.
15. **Mitigation:** Business Associate shall mitigate, to the extent practical, any harmful effect that is known to Business Associate as a result of a use or disclosure of PHI by Business Associate in violation of the requirements of this Agreement.

TERMINATION

16. **Material Breach:** A breach by Business Associate of any provision of this Agreement, as determined by County, shall constitute a material breach of the Contract and shall provide grounds for immediate termination of the Contract by the County.
17. **Judicial or Administrative Proceedings:** The County may terminate the Contract, effective immediately, if (1) Business Associate is named as a defendant in a criminal proceeding for a violation of HIPAA, the HITECH Act, the HIPAA Regulations, or other security or privacy laws or (2) a finding or stipulation that Business Associate has violated any standard or requirement of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws is made in any administrative or civil proceedings in which the party has been joined.
18. **Termination for Convenience:** County may terminate this Agreement at any time at its pleasure upon giving thirty (30) days written notice.
19. **Effect of Termination:** Except as provided in subparagraph A of this section, upon termination of the Contract for any reason, Business Associate shall, at the option of the County, return or destroy all PHI that Business Associate still maintains in any form, and shall retain no copies of such PHI.

This provision shall apply to PHI that is in the possession of subcontractor or agents of the Business Associate.

- a. If return or destruction is not feasible, as determined by the County, Business Associate shall continue to extend the protections of this Agreement to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction not feasible, for so long as Business Associate, or any of its agents or subcontractors, maintain such PHI.
- b. If the County elects destruction of the PHI, Business Associate shall certify in writing to the County that such information has been destroyed.

AMENDMENT

20. **Amendment to Comply with Law:** The parties acknowledge that state and federal law relating to data security and privacy are rapidly evolving and that amendment of the Contract or Agreement may be required to provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH Act, the Privacy Rule, the Security Rule, and other applicable laws relating to the security and confidentiality of PHI. The parties understand and agree that the County must receive satisfactory written assurance from Business Associate that Business Associate will adequately safeguard PHI. Upon the request of either party, the other party agrees to promptly enter into negotiations concerning the terms of an amendment to this Agreement embodying written assurances consistent with the standards and requirements of HIPAA, the HITECH ACT, the Privacy Rule, the Security Rule, or other applicable laws. County may terminate the Contract upon thirty (30) days written notice in the event (1) Business Associate does not promptly enter into negotiations to amend the Contract or Agreement when requested by County pursuant to this Section or (2) Business Associate does not enter into an amendment to the Contract or Agreement providing assurances regarding the safeguarding of PHI that County, in its sole discretion, deems sufficient to satisfy the standards and requirements of applicable laws.

County:
Glenn County
Health and Human Services Agency

Business Associate:

Signature: _____

Signature: _____

Print Name: Christine Zoppi, Director

Print Name:

Date: _____

Date: _____

The wording of this attachment,
unless modified, is approved by
Jennifer Peters
HIPAA Privacy and Security Officer
Glenn County

XIV. ATTACHMENT 2, SCOPE OF SERVICE

Scope of Services

1. PROJECT 1: LOCAL ORAL HEALTH PLAN (LOHP)

OVERVIEW: Established Local Health Jurisdictions (LHJ) are funded by the California Healthcare, Research and Prevention Tobacco Tax Act of 2016 (Prop 56) for the purpose of educating about oral health, dental disease prevention, and linkage to treatment of dental disease including dental disease caused by the use of cigarettes and other tobacco products. Provider will assist the LHJ of Glenn County (County), through its HHSAs, in the implementation of the strategies recommended in the California Oral Health Plan and the establishment and expansion of existing Local Oral Health Programs (LOHP) to include program activities related to oral health in their communities: education, dental disease prevention, linkage to treatment, surveillance, and case management.

DELIVERABLES: Below are the selected deliverables the Provider will assist the HHSAs in achieving.

Local Oral Health Plan Deliverables

Deliverable	Activities
Deliverable 1 <i>Objective 1</i>	Assist in the development of an Advisory Committee/Coalition/Partnership/Task Force (AC) and recruitment of key organizations/members representing diverse stakeholders and non-traditional partners. AC to determine best practices to address priorities, identify evidence-based programs to implement, and improve access to evidence based programs and clinical services.
Deliverable 2 <i>Objective 2 & 3</i>	Conduct needs assessment of available data to determine LHJs health status, oral health status, needs, and available dental and health care services to resources to support underserved communities and vulnerable population groups.
Deliverable 3 <i>Objective 4</i>	Assist in development and implementation of Five-year Oral Health Improvement Plan (the “Plan”) and an action plan (also called the “work plan”). Updating the plan annually, describing disease prevention, surveillance, education, linkage to treatment programs, and evaluation strategies implemented to improve the oral health of the target population based on an assessment of needs, assets and resources.
Deliverable 4 <i>Objective 5</i>	Create a program logic model describing the local oral health program and update annually

Deliverable	Activities
<p>Deliverable 5 <i>Objective 5</i></p>	<p>Coordinate with County to develop a surveillance report to determine the status of children’s oral health and develop an evaluation work plan for implementation objectives.</p>
<p>Deliverable 6 <i>Objective 6</i></p> <p>School- Based/ School Linked</p>	<p>Compile data for, and report annually on, educational activities, completing all relevant components on the Data Form:</p> <ul style="list-style-type: none"> A. Schools meeting criteria of low-income and high-need for dental program (>50% participation in Free or Reduced Price Meals (FRPM) participating in a fluoride program. B. Schools, teachers, parents and students receiving educational materials and/or educational sessions. C. Children provided preventive services.
<p>Deliverable 7 <i>Objective 6</i></p> <p>School-Based/ School- Linked</p>	<p>Compile data for and report annually on School-based/linked program activities, completing all relevant components on the Data Form:</p> <ul style="list-style-type: none"> A. Schools meeting criteria of low-income and high-need for dental program (>50% participation in Free or Reduced Price Meals (FRPM) participating in a School-based/linked program. B. Schools, teachers, parents and students receiving dental sealant, educational materials, and/or educational sessions. C. Children screened, linked or provided preventive services including dental sealants.
<p>Deliverable 8 <i>Objective 6</i></p> <p>Fluoridation</p>	<p>Compile data for and report annually on Community Water Fluoridation program activities, completing all relevant components on the Data Form:</p> <ul style="list-style-type: none"> A. Regional Water District engineer/operator training on the benefits of fluoridation. B. Training for community members who desire to educate others on the benefits of fluoridation at Board of Supervisor, City Council, or Water Board meetings. C. Community-specific Fluoridation Education Materials D. Community public awareness campaign such as PSAs and Radio Advertisements

Deliverable	Activities
<p>Deliverable 9 <i>Objective 7</i></p> <p>Kinder-Assessment</p>	<p>Compile data for, and report annually on, kindergarten oral health assessment activities, completing all relevant components on the Data Form:</p> <ul style="list-style-type: none"> A. Schools currently not reporting the assessments to SCHOR B. Champions trained to promote kindergarten oral health assessment activities C. Community public relations events and community messages promoting oral health. D. New schools participating in the kindergarten oral health assessment activities. E. Screening linked to essential services. F. Coordination efforts of programs such as kindergarten oral health assessment, WIC/Head Start, pre-school/school based/linked programs, Denti-Cal, Children’s Health and Disability Prevention Program, Home Visiting, and other programs.
<p>Deliverable 10 <i>Objective 1-11</i></p>	<p>Progress reporting: Assisting in the preparation and submission of biannual progress reports describing in detail progress of program and evaluation activities and progress towards completing deliverables.</p>
<p>Deliverable 11 <i>Objective 1-11</i></p>	<p>Expense Reporting: Assisting in the collection and organization of all expenses incurred during each state fiscal year in a report and back-up documentation for expenses in sufficient detail to allow CDPH-OHP to ascertain compliance with Proposition 56, the California Healthcare, Research and Prevention Tobacco Tax Act of 2016. Preparation of biannual Progress Reports describing in detail the program activities conducted, and the ability to provide source documentation in sufficient detail to support the reported activities.</p>

OBJECTIVES: Below is a brief summarization of Objectives 1-11 referenced in the deliverables above. Objectives 1-5 below represent public health best practices for planning, and are to be completed before implementing Objectives 6-11:

Objective 1: Build capacity and engage community stakeholders to provide qualified professional expertise in dental public health for program direction, coordination, and collaboration.

Objective 2: Assess and monitor social and other determinants of health, health status, health needs, and health care services available to California communities, with a special focus on underserved areas and vulnerable population groups.

Objective 3: Identify assets and resources that will help to address the oral health needs of the community with an emphasis on underserved areas and vulnerable population groups within the jurisdiction.

Objective 4: Develop a Community Health Improvement Plan (CHIP) and an action plan for the implementation phase, to address oral health needs of underserved areas and vulnerable population groups in order to achieve local and state oral health objectives.

Objective 5: Develop an Evaluation Plan that will be used to monitor and assess the progress and success of the Local Oral Health Program.

Objective 6: Implement evidence-based programs to achieve California Oral Health Plan objectives.

Objective 7: Work with partners to promote oral health by developing and implementing prevention and healthcare policies and guidelines for programs, health care providers, and institutional settings (e.g., schools) including integration of oral health care and overall health care.

Objective 8: Address common risk factors for preventable oral and chronic diseases, including tobacco and sugar consumption, and promote protective factors that will reduce disease burden.

Objective 9: Coordinate outreach programs, implement education and health literacy campaigns, and promote integration of oral health and primary care.

Objective 10: Assess, support, and ensure establishment and improvement of effective oral healthcare delivery and care coordination systems and resources, including workforce development and collaborations to serve vulnerable and underserved populations by integrating oral health care and overall health care.

Objective 11: Create or expand existing local oral health networks to achieve oral health improvements through policy, financing, education, dental care, and community engagement strategies.

1. PROJECT 2: TOBACCO EDUCATION PROGRAM (TEP)

OVERVIEW: The County currently has a Tobacco Education Program (TEP) in place. Provider will assist the County, through coordination with its HHSA, in supporting the program by consultation, collection, evaluation and interpretation of data, and assisting in meeting objectives set by the state-funded grant. The deliverables below set the basic scope of work.

Deliverable	Activities
Deliverable 1	In collaboration with the County's Tobacco Education Program (TEP) Project Director/project staff, develop/design evaluation instruments for the project consistent with sound evaluation and measurement principles for valid outcome evaluation for the objectives of the County's 2017-2021 California Tobacco Control Program's (CTCP) Evaluation Plan.
Deliverable 2	Provide consultation in the administration of evaluation methods, such as, but not limited to, procedures for conducting Key Informant Interviews and Observation Surveys, to ensure reliability as well as validity.
Deliverable 3	Assemble data collected by project staff, e.g., Media Activity Records, Public Intercept Surveys, and Observations, or collect data and information (primary data), e.g., Focus Groups.
Deliverable 4	Process and prepare data for analysis, e.g., Media Activity Records, Observations, etc. Clean data and conduct analyses for each evaluation activity in the County's 2017-2021 CTCP Evaluation Plan
Deliverable 5	Interpret results of each data collection/evaluation activity, formulate recommendations, and facilitate the project's understanding of the results of data collection and how the data informs the project's intervention activities.
Deliverable 6	Set up forms, tally sheets and databases for online/handheld data collection for project staff to populate with data, as necessary.
Deliverable 7	For each evaluation activity, write a summary report for the project and for inclusion in the progress reports in the Online Tobacco Information System (OTIS).
Deliverable 8	Develop final evaluation reports - three brief evaluation reports for three non-primary objectives, and one final evaluation report for one primary objective - in accordance with County's 2017-2021 CTCP's Evaluation Plan and in collaboration with the program's Project Director. All evaluation reports will be developed at the conclusion of the County's 2017-2021 CTCP scope of work and shall be prepared consistent with the format described in the California Tobacco Control Program's "Tell Your Story: Guidelines for Preparing Useful Evaluation Reports".
Deliverable 9	Evaluation Plan Implementation & Monitoring: meet with Project Director monthly, or as needed, to monitor evaluation plan implementation.
Deliverable 10	Develop and enter narratives into OTIS for all evaluation activities for each six-month progress report.
Deliverable 11	Perform evaluation activities, per the objectives listed below, organized by type of activity and year, in the County's 2017-2021 CTCP Scope of Work.

Objectives: The following Objectives for the future may include:

Objective 1: A minimum of 2 jurisdictions, such as the city of Willows and the unincorporated city/area such as Hamilton City will adopt and/or implement a comprehensive tobacco free policy prohibiting smoking in public places, entryways outdoor recreation facilities (such as parks), or workplaces.

Objective 2: A minimum of one jurisdiction within Glenn County such as the City of Orland will adopt a land use regulation policy to prohibit the location of tobacco and/or electronic nicotine delivery device retail outlets within 1,000 feet of schools, parks, and youth facilities.

Objective 3: At least 30 Glenn County youth coalition members will be recruited, educated, trained and sustained as leaders and spokespersons to implement program objectives and advance tobacco control efforts; and at least 50% will participate in a minimum of one community engagement activity such as public opinion polls, helping to develop educational materials and making presentations.

Objective 4: Create and maintain a community coalition with a minimum of 12 culturally diverse members and/or organizations that serves Glenn County to participate in a minimum of four coalition meeting and 2 non-meeting activities annually, to enable them to effectively recruit new members and educate the public about tobacco control issues in the community.