

In compliance with the Americans with Disabilities Act, if you require a modification or accommodation to participate in this meeting, including the availability of assistive listening devices or agendas in alternative formats, please contact the First 5 Kings County Children and Families Commission's office at (559) 585-0814 (California Relay 711) at least 48 hours prior to the start this meeting.

Meeting Agenda

August 14, 2018 3:00 PM Kings County Board of Supervisors Chambers, Kings County Government Center 1400 West Lacey Blvd. Hanford, CA 93230

Call to Order & Welcome

Commissioners Roll Call

Review and Modification to Agenda

Opportunity for Public Comment

This portion of the meeting is reserved for persons to address the Commission on any matter not on this agenda but under the jurisdiction of the Commission. Commissioners may respond to statements made or questions posed. They may ask a question for clarification; make a referral to staff for factual information or request staff to report back to the Commission at a later meeting. Also, the Commission may take action to direct staff to place a matter of business on a future agenda.

Speakers are limited to two minutes. Please state your name before making your presentation.

Consent Calendar

All items listed under the consent calendar are considered to be routine and will be enacted by one motion if no member of the Commission or audience wishes to comment or ask questions. If comment or discussion is desired by anyone, the item will be removed from the consent agenda and will be considered in the listed sequence with an opportunity for any member of the public to address the Commission concerning the item before action is taken.

P. 003 2018-08-018 Approval of Minutes: June 5, 2018 Commission Meeting P. 009 FY 17/18 June 2018 Fiscal Report

Action Items

P. 014 2018-08-019 Approve Proposition 56 Local Oral Consultant Contract with Diringer and Associates: Commission to review, discuss and consider appointing a contract between First 5 Kings and Diringer and Associates for Oral Health Planning. P. 052 2018-08-020 Approve Contract Amendment with Evaluation, Planning and Management (EMT) for Evaluation of Prop56 Local Oral Prevention Grant: Commission to review, discuss and consider appointing a contract between First 5 Kings and EMT for Evaluation Services.

Informational Agenda Items

- P. 074 First 5 Kings County Executive Director: Staff from First 5 Kings County will present an overview of the requirements from Proposition 10 and local policies for having an Executive Director.
- P. 090 Strategic Planning Process for 2020 to 2025: Commission to review and discuss the upcoming process to develop a new strategic plan for FY 2020/2021 through FY 2025/2026.
- P. 092 Final Grantee Achievement Report: Commission to review and discuss the progress of funded projects for FY 17/18.
- P. 095 **Spotlight on Service:** Staff from UCP will present an overview of the funded projects Parent & Me and Special Needs.
- P. 109 **Spotlight on Service:** Staff from West Hills Community College will present an overview of the funded project Avenal family Connection.
- P. 118 Staff Report: June 2018 & July 2018

Future Agenda Items

August 2018

- Minutes from August 14, 2018 Commission Meeting
- August 2018 Fiscal Report
- Final FY 17/18 Fiscal Report
- FY 17/18 Audit
- FY 17/18 Annual Report
- Action Item on First 5 Kings County Executive Director (if Required)
- Study Session: Annual Evaluation Report
- Spotlight on Service: Recreation Association of Corcoran

Commissioner Comments

Review Next Meeting Date & Adjournment

• October 9, 2018 at 3:00 PM

Public Comment is Taken on Each Agenda Item

Please note that the order in which the agenda items are considered may be subject to change.

Agenda backup information and any public records provided to the Commission after the posting of the agenda for this meeting will be available for public review at the first 5 office: **330 Campus Drive**, **Hanford, CA 93230**. Upon a timely request, reasonable efforts will be made to provide such information or records in alternative formats.



Date of Meeting: August 14, 2018

2018-08-018

Commission Meeting Minutes from June 5, 2018



Meeting Minutes

June 5, 2018 3:00 PM Kings County Board of Supervisors Chambers, Kings County Government Center 1400 West Lacey Blvd. Hanford, CA 93230

Call to Order & Welcome

The meeting was called to order at 3:01 PM by Commissioner Bowers.

Commissioners Roll Call

Commissioner	Present	Absent	Joined Meeting After Roll Call
Tim Bowers	X		
Joe Neves	X		
Dr. Milton Teski	X		
Sanja Bugay	X		
Steve Naylon	X		
Crystal Hernandez	X		
Lisa Lewis	X		

Review and Modification to Agenda

Commissioner Bowers asked to split item #2018-06-15 in half due to his participation on the KCAO board. The agenda items were split into Item A. KCAO- Kettleman City Family Resource Center and Item B. Kings United Way- Kings 211.

Program Officer Waite also had Information Agenda Item: Spotlight on Service removed from meeting agenda.

Opportunity for Public Comment

Commissioner Tim Bowers offered opportunity for public comment, none were offered.

Consent Calendar

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2018-06-012 Approval of Minutes: April 3, 2018 Commission Meeting FY 17/18 April 2018 Fiscal Report

Motion Made by:	Joe Neves		
2 nd Motion by:	Dr. Milton Teski	l	
Motion (Pass/Fail)	Pass		
Commissioner	Aye	Nay	Abstain
Tim Bowers	Х		
Joe Neves	Х		
Dr. Milton Teski	Х		
Sanja Bugay	Х		
Steve Naylon	Х		
Crystal Hernandez	Х		
Lisa Lewis	Х		

Action Items

2018-06-013 Commission Meeting Schedule for FY 2018/2019: Commission to review, discuss and consider approving the FY 18/19 schedule.

Program Officer Waite commented meetings will be scheduled for the 1st Tuesday of the month. However, August and October meetings will be moved to the 2nd Tuesday of the month, due to scheduling conflicts.

Motion Made by:	Sanja Bugay		
2 nd Motion by:	Steve Naylon		
Motion (Pass/Fail)	Pass		
Commissioner	Aye	Nay	Abstain
Tim Bowers	Х		
Joe Neves	Х		
Dr. Milton Teski	Х		
Sanja Bugay	Х		
Steve Naylon	Х		
Crystal Hernandez	Х		
Lisa Lewis	Х		

2018-06-014 Commission Budget Modification for FY 2017/2018: Commission to review, discuss and consider approving a Budget Modification for FY 17/18.

Program Officer Waite briefly went over a budget modification for FY 2017/2018 and commented First 5 Kings County was overall under budget for fiscal year due to salary savings.

Motion Made by:	Sanja Bugay							
2 nd Motion by:	Crystal Hernand	Crystal Hernandez						
Motion (Pass/Fail)	Pass							
Commissioner	Aye	Nay	Abstain					
Tim Bowers	Х							
Joe Neves	Х							
Dr. Milton Teski	Х							
Sanja Bugay	Х							
Steve Naylon	X							
Crystal Hernandez	X							
Lisa Lewis	X							

2018-06-015 Approval of Grantee Contracts for FY 2018/2019: Commission to review, discuss and consider approving contracts for the following:

A. Kings Community Action Organization – Kettleman City Family Resource Center

Commissioner Bowers stepped down and joined the audience, due to conflict of interest.

Program Officer Waite briefly discussed approval of contract for Kettleman City Family Resource Center.

Motion Made by:	Joe Neves		
2 nd Motion by:	Lisa Lewis		
Motion (Pass/Fail)	Pass		
Commissioner	Aye	Nay	Abstain
Tim Bowers			Conflict of
			interest
Joe Neves	Х		
Dr. Milton Teski	Х		
Sanja Bugay	Х		
Steve Naylon	Х		
Crystal Hernandez	Х		
Lisa Lewis	Х		

Commissioner Tim Bowers rejoined the Commission.

B. Kings United Way – Kings 211

Program Officer Waite went over contracted goals for 211, which is to keep the Spanish language database up to date as well as begin an outreach plan to support the app.

Motion Made by:	Joe Neves		
2 nd Motion by:	Sanja Bugay		
Motion (Pass/Fail)	Pass		
Commissioner	Aye	Nay	Abstain
Tim Bowers	Х		
Joe Neves	Х		
Dr. Milton Teski	Х		
Sanja Bugay	Х		
Steve Naylon	Х		
Crystal Hernandez	Х		
Lisa Lewis	Х		

2018-06-016 Approve Proposition 56 Local Oral Health Prevention Contract with the California Department of Public Health: Commission to review, discuss and consider appointing a contract between First 5 Kings and CDPH for Oral Health Prevention Services.

Program Officer Waite confirmed contract will be a four year contract due to time it took to approve scope of work however revenue annual amount will stay the same. Overall total will decrease by one year of funding.

Motion Made by:	Crystal Hernand	lez	
2 nd Motion by:	Lisa Lewis		
Motion (Pass/Fail)	Pass		
Commissioner	Aye	Nay	Abstain
Tim Bowers	Х		
Joe Neves	Х		
Dr. Milton Teski	Х		
Sanja Bugay	Х		
Steve Naylon	Х		
Crystal Hernandez	Х		
Lisa Lewis	X		

2018-06-017 Authorize Release of Request for Qualifications (RFQ) for Consultant Services to support Proposition 56 Local Oral Health Prevention: Commission to review, discuss and consider approving the release of a RFQ for Consultant Services to support Proposition 56 Local Oral Health Prevention.

Program Officer Waite commented with approval, the RFQ would be released June 6th and consultant would begin in July 2018. The RFQ will also be posted on County website, Joe Neves recommended a local list be generated to get the word out.

Motion Made by:	Joe Neves		
2 nd Motion by:	Sanja Bugay		
Motion (Pass/Fail)	Pass		
Commissioner	Aye	Nay	Abstain
Tim Bowers	Х		
Joe Neves	Х		
Dr. Milton Teski	Х		
Sanja Bugay	Х		
Steve Naylon	Х		
Crystal Hernandez	Х		
Lisa Lewis	Х		

Informational Agenda Items

3rd Quarter Grantee Achievement Report: Commission to review and discuss the progress of funded projects through the first three quarters of FY 17/18.

Program Officer Waite briefly discussed grantee achievement report. Most of the grantees are achieving the majority of their objectives, if not will achieve objectives by end of fiscal year.

Staff Report: April 2018 & May 2018

Program Officer Waite commented he added a last page of revenue projections in his staff report.

Commissioner Comments

Commissioner Bugay asked what the Executive Director long term plan is. Program Officer Waite commented he can add a study session for the following commission meeting.

Review Next Meeting Date & Adjournment

• August 14, 2018 at 3:00 PM

Meeting adjourned @ 3:29 p.m.



Date of Meeting: August 14, 2018



June 2018 First 5 Operations Fiscal Report

				.		-						-		·
SALARY SUMMARY		\$	181,483	\$	38,287	\$	110,947	\$	27,303	\$	176,537	\$	4,946	97%
SERVICES & SUPPLIES			BUDGET		Admin		Program	H	Evaluation		YTD		BALANCE	%
Communications	82212000	\$	1,544	¢	842	¢	254	¢	737	¢	1,832	¢	(288)	119%
Maintenance SIG	82212000	3 \$	3,655	\$	1.188	3 \$	1,188	\$	509	\$	2,885	\$	770	79%
Maintenance sig	82220000	3 \$	4,000	\$	4,000	3 ¢	1,100	\$	509	\$	4.000	\$	//0	100%
Office Expenses	82222000	\$	1,050	\$	1.442	\$	268	\$		\$	1.710	\$	(660)	163%
Books & Periodicals	82222000	3 \$	1,050	3	1,442	3	200	3 \$		\$	1,/10	3	(000)	#DIV/0!
Postage & Freight	82222010	\$	875	\$	222	ф С		\$		\$	222	\$	653	25%
Offset Printing	82222030	\$		\$		\$		\$		\$		\$		#DIV/0!
Computer Software	82222045	\$	2.160	\$	2,375	\$		\$		\$	2,375	\$	(215)	110%
Prof. & Spec. Services	82223000	\$	25,000	\$	2,373	ŝ		\$	25.000	\$	25,000	\$	(215)	100%
Legal Services	82223005	\$	1,500	\$	1.186	\$	-	\$	- 23,000	\$	1,186	\$	315	79%
Community Outreach	82223035	\$	1,500	\$		\$	872	\$	-	\$	872	\$	628	58%
Auditing & Accounting	82223040	\$	6,560	\$	6,560	\$		\$	-	\$	6,560	\$		100%
Publications & Legal Notices	82224000	\$	100	\$	-	\$	-	\$	-	\$		\$	100	0%
Purchasing Charges	82228200	\$	233	\$	34	\$	34	\$	129	\$	196	\$	37	84%
Brd. & Comm. Meeting Expense	82228205	\$	500	\$	27	\$	-	\$	-	\$	27	\$	473	5%
Program Expenses	82228600	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	0%
Motor Pool	82229000	\$	1,050	\$	366	\$	-	\$	-	\$	366	\$	684	35%
Travel Expenses	82229010	\$	7,140	\$	4,877	\$	2,297	\$	-	\$	7,174	\$	(34)	100%
Utilities	82230000	\$	2,869	\$	526	\$	526	\$	1,999	\$	3,051	\$	(182)	106%
Office Equipment	82222050	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	#DIV/0!
Admin Allocation	82314000	\$	75,255	\$	70,078	\$	-	\$	-	\$	70,078	\$	5,177	93%
Information & Technology	82314050	\$	12,184	\$	1,620	\$	1,620	\$	6,156	\$	9,395	\$	2,789	77%
Cap Charges	82314060	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	#DIV/0!
TOTAL SERVICES & SUPPLIES		\$	147,175	\$	95,342	\$	7,058	\$	34,529	\$	136,929	\$	10,246	93%
TOTAL OPERATIONS COSTS		\$	328.658	\$	133.629	\$	118.005	\$	61.832	\$	313,466	\$	15.192	95%
TOTAL OF ERATIONS COSTS		3	520,050	3	133,029	\$	110,005	\$	01,032	3	515,400	3	15,192	93%0

First 5 Internal Programs	Ľ	BUDGET]	YTD	BALANCE	%
Linkages to Learning		172,723]	\$ 173,206	\$ (483)	100%
TOTAL COSTS		172,723]	\$ 173,206	\$ (483)	100%

First 5 Contracted Programs		BUDGET		YTD		BALANCE	%
FRC Initiative	82312602	\$ 726,012	\$	722,923	\$	3,089	100%
Avenal Family Connection		\$ 90,000	\$	90,000	\$	-	
Corcoran Family Resource Ce	nter	\$ 116,000	\$	113,854	\$	2,146	
Kettleman City Family Resour	rce Center	\$ 90,000	\$	90,000	\$	-	
KCOE: Hanford & Lemoore Fa	mily Connection	\$ 425,012	\$	424,212	\$	800	
FRC Support (Professional Le	arning Community)	\$ 5,000	\$	4,857	\$	143	
E3 Initiative	82312604	\$ 483,904	\$	489,788	\$	(5,884)	101%
Kings County Office of Educat	ion CARES	\$ 483,904	\$	489,788	\$	(5,884)	
School Readiness	82312606	\$ 439,800	\$	439,800	\$	-	100%
UCP Parent & Me Program		\$ 349,800	\$	349,800	\$	-	
Special Needs Project		\$ 90,000	\$	90,000	\$	-	
New Project		\$ 40,000	\$	39,181	\$	819	98%
New Project		\$ 40,000	\$	39,181	\$	819	
TOTAL CONTRACT COSTS		\$ 1,689,716	\$	1,652,511	\$	37,205	98%

June 2018 Linkages 2 Learning Fiscal Report

		¢	110.055	\$	102 774	\$	16 101
SALARY SUMMARY		\$	119,955	2	103,774	3	16,181
SERVICES AND SUPPLIES			BUDGET		YTD	BALANCE	
Communications	82212000	\$	662	\$	222	\$	440
Maintenance SIG	82218000	\$	1,567	\$	1,075	\$	492
Memberships	82220000	\$	-	\$	-	\$	-
Office Expenses	82222000	\$	450	\$	2,027	\$	(1,577)
Books & Periodicals	82222010	\$	-	\$	-	\$	-
Postage & Freight	82222030	\$	-	\$	1,300	\$	(1,300)
Offset Printing	82222040	\$	-	\$	-	\$	-
Computer Software	82222045	\$	-	\$	-	\$	-
Prof. & Spec. Services	82223000	\$	-	\$	-	\$	-
Legal Services	82223005	\$	-	\$	-	\$	-
Community Outreach	82223035	\$	-	\$	-	\$	-
Auditing & Accounting	82223040	\$	-	\$	-	\$	-
Publications & Legal Notices	82224000	\$	-	\$	-	\$	-
Purchasing Charges	82228200	\$	-	\$	29	\$	(29)
Brd. & Comm. Meeting Expense	82228205	\$	-	\$	-	\$	-
Program Expenses	82228600	\$	45,000	\$	62,920	\$	(17,920)
Motor Pool	82229000	\$	450	\$	-	\$	450
Travel Expenses	82229010	\$	1,260	\$	-	\$	1,260
Utilities	82230000	\$	1,229	\$	456	\$	773
Office Equipment	82222050	\$	-	\$	-	\$	-
Admin Allocation	82314000	\$	-	\$	-	\$	-
Information & Technology	82314050	\$	2,150	\$	1,404	\$	746
Cap Charges	82314060	\$	-	\$	-	\$	-
TOTAL		\$	52,768	\$	69,432	\$	(16,664)
TOTAL LINKAGES TO LEARNING COS	ГS	\$	172,723	\$	173,206	\$	(483)
			,				

June 2018 Consolidated Report Fiscal Report

SERVICES & SUPPLIES Budget Admin Program Evaluation L2L VTD General Ledger Dif (~/) Communications 82212000 \$ 2.227 \$ 1.880 \$ 7.977 \$ 2.221 \$ 2.054 \$ 2.054 \$ 2.054 \$ 3.960 \$ \$ \$ \$ \$ \$ <td< th=""><th>SALARY SUMM</th><th>ARY</th><th>\$</th><th>301,438</th><th>\$</th><th>38,287</th><th>\$ 110,947</th><th>\$</th><th>27,303</th><th>\$</th><th>103,774</th><th>\$</th><th>280,311</th><th>\$</th><th>280,311</th><th>\$0</th></td<>	SALARY SUMM	ARY	\$	301,438	\$	38,287	\$ 110,947	\$	27,303	\$	103,774	\$	280,311	\$	280,311	\$0
Mantemace SiG 8221000 \$ 5,223 \$ 1,188 \$ 1,08 \$ 500 \$ 4,000 \$ 4,000 Office Expenses 8222000 \$ 1,500 \$ 1,600 \$ 1,520 \$ 1,600 \$ 1,520 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,600 \$ 1,520 \$ 1,522 \$ 1,522 \$ 1,600 \$ 1,520 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 1,522 \$ 2,5000 \$ 2,2375 \$ 2,2375 \$ 2,2375 \$ 2,2375 \$ 2,2375 \$ 2,2375 \$ 2,2375 \$ 2,2375 \$ 2,2375 \$ 2,2500 \$ 2,2500 \$ 2,2500 \$ 2,2500 \$ 2,2500 \$ 2,2500 \$ 2,2500 \$ 2,2500 \$ 2,2500 <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>,</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>,</th> <th></th> <th></th> <th></th>							,						,			
Memberships 9222000 \$ 4,000 \$ 5,00 \$ 5,000	Communications	82212000	\$	2,207	\$	842	\$ 254	\$	737	\$	222	\$	2,054	\$	2,054	\$0
Office Symmess 8222000 \$ 1,500 \$ 1,442 \$ 2,661 \$ 2,027 \$ 3,737 \$ 3,737 Books & Periopht 82222010 \$	Maintenance SIG	82218000	\$	5,223	\$	1,188	\$ 1,188	\$	509	\$	1,075	\$	3,960	\$	3,960	\$0
Books & Periodicals 82222010 \$	Memberships	82220000	\$	4,000	\$	4,000	\$ -	\$	-	\$	-	\$	4,000	\$	4,000	\$0
Protage & Freight 82222030 5 8 222 5 5 5 1,300 5 1,522 5 5 5 1,522 5 5 1,522 5 5 1,522 5 5 1,522 5 1,522 5 1,522 5 1,522 5 1,522 5 1,522 5 1,522 5 1,522 5 1,522 5 1,522 5 2,375	Office Expenses	82222000	\$	1,500	\$	1,442	\$ 268	\$	-	\$	2,027	\$	3,737	\$	3,737	\$0
Offset Printing 92222040 \$ <td>Books & Periodicals</td> <td>82222010</td> <th>\$</th> <td>-</td> <td>\$</td> <td>-</td> <td>\$ -</td> <td>\$</td> <td>-</td> <td>\$</td> <td>-</td> <td>\$</td> <td>-</td> <td>\$</td> <td>-</td> <td>\$0</td>	Books & Periodicals	82222010	\$	-	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$0
Computer Software 9222045 \$ 2.100 \$ 2.375 \$ 3.335 3.335	Postage & Freight	82222030	\$	875	\$	222	\$ -	\$	-	\$	1,300	\$	1,522	\$	1,522	\$0
Prof. & Spec. Services 62223000 \$ <t< td=""><td>Offset Printing</td><td>82222040</td><th>\$</th><td>-</td><td>\$</td><td>-</td><td>\$ -</td><td>\$</td><td>-</td><td>\$</td><td>-</td><td>\$</td><td>-</td><td>\$</td><td>-</td><td>\$0</td></t<>	Offset Printing	82222040	\$	-	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$0
Legal Services 82223005 \$ 1500 \$ 1,186 \$ \$ 1.186 \$ 1.186 \$ 1.186 \$ 1.186 \$ 1.186 \$ 1.186 \$ 1.186 \$ 1.186 \$ 1.186 \$ 1.186 \$ 1.186 \$ 872 \$ <td>Computer Software</td> <td>82222045</td> <th>\$</th> <td>2,160</td> <td>\$</td> <td>2,375</td> <td>\$ -</td> <td>\$</td> <td>-</td> <td>\$</td> <td>-</td> <td>\$</td> <td>2,375</td> <td>\$</td> <td>2,375</td> <td>\$0</td>	Computer Software	82222045	\$	2,160	\$	2,375	\$ -	\$	-	\$	-	\$	2,375	\$	2,375	\$0
Community Outreach #2223035 \$ 1,500 \$ 6 872 \$ \$ 872 \$ <td>Prof. & Spec. Services</td> <td>82223000</td> <th>\$</th> <td>25,000</td> <td>\$</td> <td>-</td> <td>\$ -</td> <td>\$</td> <td>25,000</td> <td>\$</td> <td>-</td> <td>\$</td> <td>25,000</td> <td>\$</td> <td>25,000</td> <td>\$0</td>	Prof. & Spec. Services	82223000	\$	25,000	\$	-	\$ -	\$	25,000	\$	-	\$	25,000	\$	25,000	\$0
Community Outreach #2223035 \$ 1,500 \$ 6 #872 \$ <t< td=""><td>Legal Services</td><td>82223005</td><th>\$</th><td>1,500</td><td>\$</td><td>1,186</td><td>\$ -</td><td>\$</td><td>-</td><td>\$</td><td>-</td><td>\$</td><td>1,186</td><td>\$</td><td>1,186</td><td>\$0</td></t<>	Legal Services	82223005	\$	1,500	\$	1,186	\$ -	\$	-	\$	-	\$	1,186	\$	1,186	\$0
Publications & Legal Notices 82224000 \$ 100 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ 20 \$ 200 \$ 220 \$ 200 \$ 200	Community Outreach	82223035	\$	1,500	\$	-	\$ 872	\$	-	\$	-	\$	872	\$	872	\$0
Purchasing Charges 82228200 \$ 233 \$ 34 \$ 129 \$ 20 \$ 226 \$ 226 \$ 226 \$ 226 \$ 226 \$ 226 \$ 226 \$ 226 \$ 226 \$ 226 \$ 226 \$ 227 \$ 2 2 \$ 2 7 \$ 2 7 \$ 2 7 \$ 2 7 \$ 2 7 \$ 2 2 \$ 2 2 \$ 2 2 \$ 2 2 \$ 2 2 \$ 2 2 \$ 2 2 \$ 2 2 \$ 2 2 \$ 2 2 \$ 2 2 \$ 2 2 \$ 2 2 \$ 2 2 \$ 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Auditing & Accounting	82223040	\$	6,560	\$	6,560	\$ -	\$	-	\$	-	\$	6,560	\$	6,560	\$0
Purchasing Charges 82228200 \$ 233 \$ 34 \$ 129 \$ 29 \$ 226 \$ 226 \$ 226 \$ 226 \$ 226 \$ 226 \$ 226 \$ 226 \$ 27 27 \$ 27 27 5 27 5 27 5 27 5 27 5 27 3 366 366 366 366 366 366 3507 36 36 360 3507 3507 3507 3507 3507 3507 3507	Publications & Legal Notices	82224000	\$	100	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$0
Program Expenses 82228600 \$ 45,000 \$.	0	82228200	\$	233	\$	34	\$ 34	\$	129	\$	29	\$	226	\$	226	\$0
Program Expenses 82228600 \$ 45,000 \$ <	Brd. & Comm. Meeting Expense	82228205	\$	500	\$	27	\$ -	\$	-	\$	-	\$	27	\$	27	\$0
Motor Pool 82229000 \$ 1,500 \$ 366 \$. \$. \$. \$ 366 \$ 367 \$ 367 \$ 367 \$ 367 \$ 366 \$ 366 \$ 366 \$ 366 \$ 366		82228600	\$	45,000	\$	-	\$ -	\$	-	\$	62,920	\$	62,920	\$	62,919	\$0
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TOTAL EXPENSES \$ 2,191,099 \$ 133,629 \$ 1,809,696 \$ 61,832 \$ 173,206 \$ 2,178,363 \$ 2,171,500	TOTAL EXPENSES		\$	2,191,099	\$	133,629	\$ 1,809,696	\$	61,832	\$	173,206	\$	2,178,363	\$	2,171,500	\$0

June 2018 Revenue Fiscal Report

Revenue FY 2017/2018									
Month	Estimated	Prop 10 Revenue	Interest	CARES/IMPACT	Total	%			
July 2017	\$ 139,64	3 \$ 136,136			\$ 136,136	97%			
August 2017	\$ 137,16	2 \$ 123,329			\$ 123,329	90%			
Sepetember 2017	\$ 218,52	3 \$ 119,962	\$ 1,225		\$ 121,186	55%			
October 2017	\$ 139,64	3 \$ 114,515	\$ 4,448	\$ 64,672	\$ 183,636	132%			
November 2017	\$ 137,16	2 \$ 108,136			\$ 108,136	79%			
December 2017	\$ 218,5 2	3 \$ 30,997			\$ 30,997	14%			
January 2018	\$ 139,64	3 \$ 131,022	\$ 4,664		\$ 135,685	97%			
February 2018	\$ 137,16	2 \$ 81,768			\$ 81,768	60%			
March 2018	\$ 218,52	3 \$ 100,854		\$ 101,952	\$ 202,806	93%			
April 2018	\$ 137,16	2 \$ 117,153	\$ 4,576		\$ 121,730	89%			
May 2018	\$ 137,16	2 \$ 118,388			\$ 118,388	86%			
June 2018	\$ 221,00	4 \$ 81,347	\$ 5,609	\$ 241,445	\$ 328,401	149%			
TOTAL OPERATIONS COSTS	\$ 1,981,31	2 \$ 1,263,606	\$ 20,522	\$ 408,069	\$ 1,692,197	85%			



Date of Meeting: August 14, 2018

2018-08-019

Approved Contract with Diringer & Associates for Local Oral Health Planning Services



Date of Meeting: Agenda Item: Discussion/Action Item: August 14, 2018 2018-08-019 Action Item

AGENDA ITEM: Approve Local Oral Consultant Contract with Diringer and Associates

A. Background/History:

In 2016 the voters of California passed Proposition 56, the California Healthcare, research and Prevention Tobacco Tax Act of 2016, that created an additional \$2 tobacco tax. One use for the new revenue was to create a \$30 Million allocation to the state dental program, for the purpose and goal of educating about, preventing and treating dental disease, including dental disease caused by use of cigarettes and other tobacco products. The California Department of Public Health (CDPH) has created local funding opportunities in each county. The allocation to Kings county is \$186,104 annually for 4 years.

At the February 2018 First 5 Commission Meeting a study session was conducted to determine if this funding opportunity was a good fit for First 5 Kings. At that meeting the Commission recommended completing an application.

At the April 2018 Commission meeting the completed application was approved by the Commission for submission to CDPH. This application was approved and the final contract is being brought back to the Commission for approval prior to execution.

At the June 2018 the Commission approved the contract between First 5 and California Department of Public Health. Additionally the Commission released an Request for Qualifications (RFQ), the wining response was from Diringer & Associates.

B. Summary of Request, Description of Project and/or Primary Goals of Agenda Item:

Staff requests the Commission consider approving the attached contract with Diringer & Associates for Local Oral Health Planning services for FY 2018/2019.

C. Timeframe:

Local Oral Health Planning services will be provided from 7/1/2018 through 6/30/19.

D. Costs:

Total Costs budgeted for this contract will not exceed \$104,000 per fiscal year.

E. Staff Recommendation:

Staff recommends the Commission approve the contract with Diringer & Associates for Local Oral Health Planning services in an amount not to exceed \$104,000 annually.

F. Attachments:

- DRAFT contract between First 5 Kings and Diringer & Associates for Local Oral Health Planning services for FY 18/19
- Response to Request for Qualifications by Diringer and Associates

SERVICE AGREEMENT

By and between

First 5 Kings County Children and Families Commission

and

Diringer and Associates

This Agreement is made by and between First 5 Kings County Children and Families Commission ("Commission") and Diringer and Associates ("Consultant") with respect to the following recitals:

WHEREAS, the California Children and Families First Act of 1998, codified in Health and Safety Code §§ 130025 et seq., also known as Proposition 10, requires Commission to implement a county strategic plan to develop and fund programs aimed at promoting, supporting, and improving early childhood development of Kings County children; and

WHEREAS, Commission is in need of the services of Consultant to implement the county strategic plan as mandated by the California Legislature; and

WHEREAS, Consultant represents that it has the experience and knowledge necessary to perform tasks identified in Exhibit A and is ready, willing, and able to provide such services pursuant to the terms and conditions of this Agreement;

NOW, THEREFORE, the parties agree as follows:

1. <u>Services to be Performed by Consultant.</u>

Consultant shall perform all work necessary to complete those tasks described in Exhibit A attached hereto and incorporated herein by this reference as though set forth in full. The work shall be performed in a timely and workmanlike manner and according to generally accepted standards for professional consultants or organizations performing the same or similar work in the State of California.

2. <u>Term.</u>

The effective date of this Agreement is July 1, 2018, and terminates on June 30, 2019.

3. <u>Compensation.</u>

Commission's total payments to Consultant under this Agreement shall not exceed twenty-five thousand dollars (\$104,000) annually. Consultant shall be reimbursed on a monthly basis, no later than fourteen (14) days following receipt of a written monthly invoice to the Executive Director of the Commission. The invoice shall indicate the tasks which are described in Exhibit A which have been completed to that date. Consultant shall submit a final invoice within fifteen (15) days after the termination of this Agreement.

4. <u>Warranty</u>.

Consultant warrants that it has the expertise to perform the tasks described in Exhibit A in a workmanlike manner.

5. <u>Termination of Agreement for Convenience.</u>

Either Party may terminate this Agreement at any time without cause by giving thirty (30) days prior written notice to the other specifying the effective date.

6. <u>Termination of Agreement for Cause.</u>

Commission may, by written notice to Consultant, terminate the whole or any part of this Agreement immediately if Consultant fails to perform the tasks called for under the terms of this Agreement.

If the Commission should fail to pay Contractor all or any part of the compensation set forth in this Agreement on the date due, Contractor may terminate this Agreement if the failure is not remedied within thirty (30) days from the date payment is due. Written notice will be sent to Contractor's address listed on the signed contract.

7. <u>Effects of Termination</u>.

If either party terminates this Agreement, the Commission shall pay Contractor for services rendered through the date of termination at the appropriate pro-rated amount.

Termination of this Agreement shall not terminate any obligations of any liability to Commission for damages sustained by Commission because of any breach of contract by Contractor, nor to indemnify, to maintain and make available any records pertaining to this Agreement, to cooperate with any audit, to be subject to offset, or to make any reports of pretermination contract activities.

8. <u>Payment not to be Construed as Waiver of Breach or Default.</u>

In no event shall any payment by the Commission constitute a waiver by the Commission of any breach of this Agreement or any default which may then exist on the part of the Contractor, nor shall such payment impair or prejudice any remedy available to the Commission with respect to the breach or default.

9. Interest of Consultant.

The principal investigator of the contractor covenants that it presently has no interest and shall not acquire any interest, direct or indirect, in the tasks described in Exhibit A or any other interest which would conflict in any manner or degree with the performance of his or her services hereunder.

10. Assignment and Subcontracting

Consultant shall not assign, transfer, or sublet this Agreement or any portion therein without prior written consent of Commission. Such approval shall be at the sole and absolute discretion of Commission.

In the event of approval of Commission of assignment or subcontracting, Consultant shall be as fully responsible of Commission for the acts and omissions or its subcontractors, or assignees, and of persons either directly or indirectly employed by consultant, as it is for the acts and omissions of persons employed by Consultant.

11. Independent Contractor.

In the performance of the services herein provided for, Consultant shall be, and is, an independent contractor and is not an agent or employee of Commission. Consultant has and shall retain the right to exercise full control and supervision of its officers, employees and agents in the provision of services hereunder, and full control over the employment, direction, compensation and discharge of said officers, employees and agents. Consultant shall be solely responsible for all matters relating to the payment of its employees including compliance with social security, workers compensation, unemployment insurance and income tax withholding and all laws and regulations governing such matters.

12. Indemnification.

Contractor shall indemnify, defend and hold harmless, the Commission, the County, and their elected officials, officers, employees, agents and assigns from and against any and all claims, demands liability, judgments, awards, interest, attorneys fees, costs and expenses of whatsoever kind or nature, at any time arising out of or in any way connected with the performance of this Agreement. Contractor's liability for indemnity under this Agreement shall apply, regardless of fault, to any acts or omissions, willful misconduct or negligent conduct, whether active or passive, on the part of the Contractor, unless the claim, demand liability, judgment, award, interest, attorney's fee, cost or expense is caused solely by the negligent or willful misconduct of the Commission, the County, its elected officials, officers, employees, agents or assigns. Contractor will on request and at its expense defend any action suit or proceeding arising hereunder and shall reimburse and pay the Commission and/or the County for any loss, cost, damage or expense (including the cost of its attorneys) suffered by it hereunder.

13. <u>Insurance</u>.

A. Prior to commencement of work, Contractor shall purchase and maintain the following types of insurance for minimum limits indicated during the term of this Agreement and provide a Certificate of Endorsement from Contractor's Insurance Carrier guaranteeing such coverage to the Commission and the County. Such Certificate shall be mailed directly to the County department as referenced under Section 20, "Notices".

1. Commercial General Liability: \$1,000,000 per occurrence and \$2,000,000 annual aggregate covering bodily injury, personal injury and property damage. The County and its officers, employees and agents shall be endorsed to above policies as additional insured, using ISO form CG2026 or an alternate form that is at least as broad as form CG2026, as to any liability arising from the performance of this Agreement.

2. Comprehensive Automobile Liability Insurance (if applicable) of \$1,000,000 per occurrence or a \$1,000,000 umbrella policy.

3. Workers Compensation: Statutory coverage, if and as required according to the California Labor Code, including Employers' Liability limits of \$1,000,000 per accident. The policy shall be endorsed to waive the insurer's subrogation rights against the County.

4. Professional Liability: \$500,000 limit per occurrence and \$5,000,000 annual aggregate limit covering Contractor's wrongful acts, errors and omissions.

B. Insurance Conditions

1. Insurance is to be placed with admitted insurers rated by A.M. Best Co. as A:VII or higher. Lower rated, or approved but not admitted insurers, may be accepted if prior approval is given by the County's Risk Manager.

2. Each of the above required policies shall be endorsed to provide County with thirty (30) days prior written notice of cancellation or ten (10) days written notice if the reason for cancellation is for non-payment of insurance premium. County is not liable

for the payment of premiums or assessments on the policy. No cancellation provisions in the insurance policy shall be construed in derogation of the continuing duty of Contractor to furnish insurance during the term of this Agreement.

3. The County of Kings, its elected officials, officers, agents, employees and volunteers, individually and collectively, shall be named as additional insured by endorsement to the policy.

4. The County's Risk Manager must approve any deductible or self-insurance retention that exceeds \$100,000.

14. Nondiscriminatory Practices.

In connection with the performance of this Agreement, Consultant shall not discriminate against any person on the basis of ethnic group identification, religion, age, sex, color, or disability.

15. <u>Compliance with the Law.</u>

Contractor shall comply with all federal, state and local laws and regulations applicable with respect to his or her performance under the Agreement, including but not limited to, licensing, employment and purchasing practices, and wages, hours and conditions of employment, including nondiscrimination.

16. <u>Compliance with Commission's Conflict of Interest Code</u>

As a California public entity, Consultant acknowledges that its staff complies with all registration requirements under the Political Reform Act, as applicable. Furthermore, Consultant acknowledges that its conflict of interest policy is in conformance with the conflict of interest policy adopted by the Commission.

17. Publication and Ownership of Documents

All reports prepared for the Commission under this Agreement shall become public records and the Commission shall make such documents available to the public. Both parties shall be free to use and disseminate all data and reports obtained under this Agreement.

18. <u>Records.</u>

Consultant shall maintain all books, documents, papers, accounting records, and other evidence pertaining to cost incurred, and make such materials available at its office at all reasonable times during the term of this Agreement and for three years from the date of final payment to Consultant. Such materials shall be available for inspection by authorized representatives of Commission and copies thereof shall be furnished if requested at no cost to the Commission.

19. Interfering Conditions:

Contractor and the Commission shall promptly and fully notify each other of any condition that interferes with, or threatens to interfere with Contractor's duties and responsibilities under this Agreement. This notice shall not relieve the other of their duties and responsibilities under this Agreement.

20. <u>Notices.</u>

Notices to be given by one party to the other under this Agreement shall be given in writing by personal delivery, by certified mail, return receipt requested, or express delivery service at the addresses specified below. Notices delivered personally shall be deemed received upon receipt; mailed or expressed notices shall be deemed received four (4) days after deposit. A party may change the address to which notice is to be given by giving notice as provided above.

First 5 Kings County Children and Families Commission 330 Campus Drive Hanford, Ca 93230

Diringer and Associates 2475 Johnson Avenue San Luis Obispo, CA 93401

21. Jurisdiction.

This Agreement shall be administered and interpreted under the laws of the State of California. Jurisdiction of litigation arising from the Agreement shall be in the County of Kings. If any part of Agreement is found to be in conflict with applicable laws, such part shall be inoperative, null and void insofar as it is in conflict with said laws, but the remainder of this Agreement shall remain in full force and effect.

22. <u>Concurrent Enforcement of Remedies.</u>

The Commission reserves its right to pursue any and all remedies available by law as needed to enforce its rights under this Agreement.

23. <u>Integration.</u>

This Agreement represents the entire understanding of Commission and Consultant as to those maters contained herein and supersedes all prior negotiations, representations or agreements, either written or oral. This Agreement may be amended only by written instrument, signed by both Commission and Consultant. IN WITNESS WHEREOF, the parties have executed this Agreement to be effective on the date executed by COMMISSION.

Dated:	Dated:
Ву	Ву
First 5 Interim Executive Director	Diringer and Associates, Principal
Commission	Consultant

First 5 Kings County

Oral Health Prevention Planning Services – Scope of Work

Objective 1: By June 30, 2019 build capacity and engage community stakeholders to provide qualified professional expertise in dental public health for program direction, coordination, and collaboration.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
	Identify existing staff support and a structure	07/01/18- 8/01/18	First 5 Program Officer	Program structure in place
	Create a coordinator position and other positions as needed	08/01/18- 09/30/18	First 5 Program Officer	List of positions established; vacancies filled
	Write job descriptions/ duty statements	09/01/18- 12/31/18	First 5 Program Officer	Job descriptions/duty statements developed
	Recruit and hire staff to fill vacancies	01/01/19- 02/28/18	First 5 Program Officer	List of Staff hired, provide number of vacancies
	Participate in trainings offered via meetings, webinars, workshops, conferences, etc.	01/01/18- 12/31/18	First 5 Program Officer, First 5 Resource Specialist & Oral Health Consultant	List of trainings, meetings, webinars, workshops, conference attended

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
	Develop Advisory Committee/Coalition/Partnership/Task Force (AC) and recruit key organizations/members representing diverse stakeholders.	09/01/18- 06/30/19	Oral Health Consultant	Membership list
	Convene first meeting and agenda; set schedule of meetings, develop evaluation for meetings.	09/15/18- 09/30/18	Oral Health Consultant & First 5 Resource Specialist	First meeting agenda; schedule of meetings; number of meetings held. List of participants, participant evaluations
	Identify Mission, Vision, shared values, and structure of AC.	09/15/18- 06/30/19	Oral Health Consultant	Mission, vision, values, AC structure
	Conduct key informant interviews (KI), focus groups, or Knowledge, Attitude and Belief (KAB) surveys of key stakeholders and organizations to determine understanding and priority of addressing oral health.	08/01/18- 06/30/19	Oral Health Consultant	Summary of KI interviews, focus groups and/or KAB surveys to address common themes, challenges, and support of mission, vision, and values
	Identify goals and objectives for improving oral health.	10/01/18- 06/30/19	Oral Health Consultant	Document defining goals and objectives
	Establish communication methods with local partners and stakeholders.	10/01/18- 11/31/18	Oral Health Consultant & First 5 Resource Specialist	List of meetings, webinars; conference calls; list serve developed; mailings, etc.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
	Convene advisory group/task force per schedule. Submit new schedule for the rest of the grant term with revised work plan.	09/01/18- 06/30/19	Oral Health Consultant	Minutes; other documentation from meetings/webinars/calls/mailings
	Conduct qualitative analysis to determine effectiveness of trainings and community organizing approaches to capacity building.	12/01/18- 12/31/18	Oral Health Consultant	Summary of analysis
	Conduct satisfaction survey of AC membership to determine AC progress, recommendations and future direction of the LOHP and strategies to address challenges.	04/15/19- 06/30/19	Oral Health Consultant	Analysis of satisfaction survey which include quantitative measures to assess network density or involvement and recommendations for improvement

Objective 2: By December 31, 2018, 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 underserved areas and vulnerable population groups.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
	Identify staff, consultant or work group from Advisory Committee to develop Needs Assessment.	07/01/18- 12/31/18	Oral Health Consultant	List of work group members
	Conduct an 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 areas and vulnerable population groups.	07/01/18- 12/31/18	Evaluation Consultant, First 5 Resource Specialist & Oral Health Consultant	Summary of resources and needs assessment
	Identify and plan the needs assessment strategy based on available resources. Develop needs assessment instrument.	07/01/18- 12/31/18	Oral Health Consultant	Needs assessment instrument
	Conduct inventory of available primary and secondary data.	07/01/18- 07/31/18	Evaluation Consultant, First 5 Resource Specialist & Oral Health Consultant	Data gathered and inventoried

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
	Determine the need for primary data	07/01/18- 08/15/18	Evaluation Consultant, First 5 Resource Specialist & Oral Health Consultant	Analysis conducted and data gaps identified
	Identify resources	07/01/18- 08/15/18	Oral Health Consultant	Data resources identified to fill gaps
	Select methods	07/01/18- 07/31/18	Evaluation Consultant	Methods selected
	Conduct Needs Assessment	08/01/18- 10/31/18	First 5 Resource Specialist & Oral Health Consultant	Work plan developed to collect missing data
	Collect data	07/01/18- 12/31/18	First 5 Resource Specialist & Oral Health Consultant	Data collected
	Analyze data and prepare summary analysis.	09/01/18- 12/31/18	First 5 Program Officer, Evaluation Consultant & Oral Health Consultant	Summary Report

Objective 3: By December 31, 2018, 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.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
	Take an inventory of all the groups (associations, organizations, and institutions) that exist in within the jurisdiction's communities. Identify existing groups, organizations, etc. that serve underserved and vulnerable populations in the community.	08/01/18- 09/30/18	First 5 Program Officer & Oral Health Consultant	Inventory of existing assets/resources
	Conduct interviews/surveys.	08/01/18- 10/31/18	Oral Health Consultant	Survey instrument; interviews and/or surveys conducted
	Create a map of assets/resources within jurisdiction and Identify gaps.	11/01/18- 12/31/18	Oral Health Consultant	Map of assets/resources (geo mapping) within jurisdiction/List of gaps within LHJ
	Publish the assets/resources/gaps identified.	12/01/18 12/31/18	Oral Health Consultant	Identified assets/resources and identified gaps published on website or in newsletter or as part of Summary Analysis

Objective 4: By May 31, 2019, develop a community health improvement plan (CHIP) and an action plan to address the oral health needs of underserved areas and vulnerable population groups for the implementation phase and to achieve the state oral health objectives.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
	Identify a key staff person or consultant to guide the community health improvement plan process.	01/01/19- 01/15/19	Oral Health Consultant	Key staff member/consultant identified
	Develop a time frame for the community health improvement plan.	01/15/19- 01/31/19	Oral Health Consultant	Timeframe developed
	Identify objectives and strategies to achieve that objective.	01/15/19- 01/31/19	Oral Health Consultant	Summary of objectives and strategies
	Determine which people and sectors of the community should be changed and involved in implementing the strategies.	02/01/19- 03/31/19	Oral Health Consultant	List of partners/stakeholders/ participants representative of the various sectors of the LHJ that participated in the process
	Engage a workgroup to design the Action Plan.	02/01/19- 04/30/19	Oral Health Consultant	List of work group meetings and minutes from meetings

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
	 Identify action steps: What action or change will occur Who will carry it out When will it take place, and for how long What resources (i.e., money, staff) are needed to carry out the change Communication (who should know what) 	02/01/19- 05/15/19	Oral Health Consultant	Action Plan developed by workgroup that identifies the "what, who, when, how long, resources, and communication" aspects of the Action Plan
	Identify how the Action Plan addresses the priorities identified in the Community Health Improvement Plan; provide a summary of key strategies to address vulnerable populations and how they will help to achieve local and state oral health objectives. Describe impact objectives and key indicators that will be used to determine progress.	04/01/19- 05/31/19	Evaluation Consultant & Oral Health Consultant	Summary Report-Identify flow of information between organization, community and other stakeholders; identify how organizational procedures facilitate participation; and identifies the strengths, weaknesses, challenges and opportunities that exist in the community to improve the health status of the community

Objective 5: By June 30, 2019 develop an Evaluation Plan to monitor and assess the progress and success of the Local Oral Health Program.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
	Engage stakeholders in the Evaluation Plan process, including those involved, those affected, and the primary intended users.	07/01/18- 07/31/18	First 5 Program Officer, Evaluation Consultant & Oral Health Consultant	List of stakeholders engaged in this process
	Develop the Program Logic Model, which will become a common reference point for staff, stakeholders, constituents and CDPH/OHP.	08/01/18- 09/30/18	Evaluation Consultant & Oral Health Consultant	Program Logic Model, depicts program outcomes, how the program will accomplish outcomes and basis (logic) for these expectations
	Identify program outcome objectives and indicators.	10/01/18- 11/31/18	Evaluation Consultant & Oral Health Consultant	Document the indicators, sources, quality, quantity, and logistics
	Focus the evaluation design based on selected Objectives and justify conclusions based on data analysis.	02/01/19- 04/31/19	Evaluation Consultant & Oral Health Consultant	Document the purpose, methods, standards, analyses, interpretation, and timeline for the evaluation
	Submit Evaluation Work Plan for Implementation Objectives.	05/01/19- 05/01/19	Evaluation Consultant	Provide comprehensive Evaluation Plan of Required and selected Implementation Objectives

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
	Submit progress reports.	07/01/18- 06/30/19	First 5 Program Officer, Evaluation Consultant & Oral Health Consultant	Summary of successes, challenges, and lessons learned
	Coordinate with CDPH to conduct surveillance to determine the status of children's oral health.	05/01/19- 06/30/19	Evaluation Consultant & Oral Health Consultant	List of schools identified, number of children to be screened, coordination activities conducted

Item	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19
Administration - Contracting and Reporting	JUI-10	Aug-10	264-10	001-18	1404-10	Dec-10	Jan-13	160-13	Wiai-13	<u>vh</u> 13	19109-13	Jun-13
contraction, reporting, invoicing ect.						L						
meeting with First 5 and others												
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monthly meeting (10)												
satisfaction survey												
Community Oral Health Improvement Plan												
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needs assessment strategy and implementation												
key informant interviews												
asset mapping												
community oral health improvement plan - goals, objectives, strategies, action plan												
develop program logic model												
evaluation plan process												
participation in local, regional and statewide calls and convenings												

joel@diringerassociates.com

805.546.0950



June 20, 2018

RESPONSE TO REQUEST FOR QUALIFICATIONS First 5 Kings County Oral Health Prevention Program

SIGNATURE PAGE

Diringer and Associates 2475 Johnson Avenue San Luis Obispo, CA 93401

Joel Diringer, JD, MPH Principal 805.546.0950 joel@diringerassociates.com

The undersigned hereby certifies that he/she is a duly authorized official of their organization and has the authority to submit this Response and sign on behalf of the organization and assure that all statements made in the Response are accurate and truthful. The undersigned agrees to provide the work or services requested in this Request for Response at the price contained therein and will comply with all terms and conditions of the proposed agreement, unless otherwise stipulated through a written exception.

Joel Diringer, JD, MPH Principal

Business License No. (if applicable): City of San Luis Obispo #106988

Professional License No. (if applicable): N/A

First 5 Kings County Attn: Scott Waite, Program Officer 330 Campus Drive Hanford, CA 93230

Dear Mr. Waite:

Diringer and Associates is pleased to respond to First 5 Kings County's Request for Qualifications for a consultant for the Oral Health Prevention Program.

Our team which includes myself and Kathy Phipps, RDH, MPH, DrPH, an oral health epidemiologist, is well equipped to provide the services that you seek. We have both been involved in oral health programs and policy on a local, state and national level for many years for a range of clients ranging from local First 5's and Indian tribes to the American Dental Association and the Association of State and Territorial Dental Directors. We are familiar with California's Proposition 56 efforts and the Dental Transformation Initiative and are working with several counties on their efforts.

Our proposal is our best estimate of the work that needs to be done based upon our experience and your RFQ. However, we are certainly open to refining the proposal to meet your needs as the project evolves.

We look forward to working with the Kings County community to improve oral health for all. Please feel free to contact me for further information.

Allung

Joel Diringer, JD, MPH Principal 2475 Johnson Avenue San Luis Obispo, CA 93401 805.546.0950 – landline 805.544.7722 – mobile joel@diringerassociates.com

Company and Support Team Overview and Qualifications

Diringer and Associates is a Central California-based health policy consulting firm specializing in research, program development and evaluation. Since 2001, Diringer and Associates has provided nonprofit, governmental and philanthropy clients with solutions crafted to meet the unique challenges of their health care issues.

Diringer and Associates works with its clients to develop and evaluate sound programs to enhance the health of underserved populations, expand health coverage for children and workers, improve physical and oral health, and document the growing needs of the region's underserved areas. Among the services provided are technical assistance in strategic planning, fund development, data analysis, facilitation, community relations, media strategies, report writing, and program design, implementation and evaluation.

The firm's main office is located at 2475 Johnson Avenue, San Luis Obispo, CA 93401. The firm's principal is Joel Diringer, JD, MPH and can be contacted at joel@diringerassociates.com, 805.546.0950. Kathy Phipps, RDH, MPH, DrPH can be contacted at <u>kathyphipps1234@gmail.com</u>, 805.776.3393.

The team proposed by Diringer and Associates is composed of Joel Diringer and Kathy Phipps. Both are experts in oral health, as well as long-time residents of Central California. They have worked, together and individually, on the local, state and national levels to improve oral health for all residents and will bring their expertise and local knowledge to the project.

Both consultants are very familiar with the State Oral Health Plan and its development. In fact, Kathy Phipps is noted in the Plan as a member of the Advisory Committee and Work Group that created the Plan. Several years ago, Joel Diringer worked with the California Dental Association on researching the need for improvement of the state oral health infrastructure which eventually culminated in the hiring of a state dental director and the development of the State Oral Health Plan.

As noted below in the qualifications of the consultants, they both have extensive experience in needs assessments, evaluation and developing community health improvement plans.

Joel Diringer is the founder and principal consultant of Diringer and Associates, a Central California-based health policy consulting firm specializing in research, program development and evaluation with a focus on vulnerable populations. He is an attorney and health policy expert who has worked extensively on health access issues affecting children, low-income, immigrant, and farmworker populations for over thirty years, including oral health, access to care, behavioral health integration and farmworker health.

Mr. Diringer's oral health work has included:

- Project director of the San Luis Obispo County Oral Health Program strategic planning team (with Kathy Phipps) responsible for collection of local oral health metrics, conduct of key informant interviews, strategic planning with the oral health coalition, development of strategic plan including mission, vision, values, goals and objectives, program logic model and evaluation plan. This work builds on prior work in 2008 on the development of the county's original plan for oral health improvement.
- Consultant to San Luis Obispo County Public Health Department on application for Dental Transformation Initiative
- Founding board member of the Tolosa Children's Dental Center and program evaluator (with Kathy Phipps)
- Consultant to American Dental Association on critical trends affecting the future of dentistry in America (with Kathy Phipps).
- Policy Consultant on Pediatric Oral and Vision Care Essential Health Benefits under the Affordable Care Act
- Co-investigator with UCSF on report on impact of elimination of adult Denti-Cal benefits
- Co-investigator with USC on dental utilization in Healthy Kids programs and effectiveness of outreach and enrollment strategies in Children's Health Initiatives
- Program evaluation of California Dental Association's Pediatric Oral Health Access Project and Clinica de Tolosa dental clinic (with Kathy Phipps)
- Co-investigator for CHCF-funded study on increasing dental capacity in community health centers (with Kathy Phipps)
- Interim Executive Director for Center for Oral Health, Oakland, CA
- Development of Children's Health Insurance Initiatives for in Fresno, Santa Barbara, Tulare, Kings and San Luis Obispo Counties to provide universal medical, dental and vision coverage to children, including undocumented children
- Development of oral health research and policy briefs on children's and adult access to dental care and coverage, including:
 - Critical Trends Affecting the Future of Dentistry: Assessing the Shifting Landscape prepared for the American Dental Association — May 2013
 - Putting Teeth Into Health Reform: Implementing the ACA's Pediatric Oral Health Benefit — September 2012
 - Pediatric Oral and Vision Care Essential Health Benefits under the Affordable Care Act — July 2012
 - California's State Oral Health Infrastructure: Opportunities for Improvement and Funding. CDA Journal — January 2012
 - Dental Utilization in California's Children's Health Initiatives' Healthy Kids Programs (2007) — July 2009
 - o Eliminating Medi-Cal Adult Dental: Costs and Consequences June 2009
 - Expanding Access to Dental Care Through California's Community Health Centers — August 2008
 - Adult Dental Medi-Cal Cuts: Costs and Consequences May 2008
 - Dental Utilization in Eight Central California Children's Health Initiatives Healthy Kids Program — December 2006. Full report and Executive Summary

- Putting Teeth in Health Care Reform June 2007
- Oral Health: Successes and Opportunities for California's Children's Health Initiatives — 2006

Joel has facilitated many health coalitions throughout Central California including the San Luis Obispo County Oral Health Coalition, the Obesity Prevention Coalition and Hunger Coalition. He is currently the project director of the SLO County Behavioral Health Integration Project and was the project director of New Models of Health Care Coverage for California Farmworkers. He is a frequent lecturer and consultant on the Affordable Care Act and remaining uninsured populations.

In the San Joaquin Valley, Joel is currently working with Kern County community advocates on expanding coverage for the uninsured and the Merced County Public Health Department on the Accountable Communities for Health Initiative. He previously assisted in the convening of the Children's Health Initiatives in Kings, Fresno and Tulare Counties, and facilitated several health access coalitions in Fresno County as well as led the community engagement processes for the creation of what is now called CalViva. He was the lead author of several reports on health in the San Joaquin Valley including Hurting in the Heartland (1996) and Health in the Heartland: The Crisis Continues (2004).

He was an attorney at California Rural Legal Assistance from 1983 to 1996, and Senior Program Officer at The California Endowment from 1996 to 2001. He was a long time commissioner of First 5 San Luis Obispo. Joel received his Masters in Public Health from Harvard School of Public Health in 1991, and his law degree from the University of California at Davis in 1980.

Kathy Phipps is an epidemiologist with extensive experience in the development and implementation of oral health needs assessments and surveillance systems. She was the primary author of the Council of State and Territorial Epidemiologists (CSTE) whitepaper outlining the conceptual framework and operational definition of oral health surveillance systems and is the lead data and surveillance consultant for the Association of State and Territorial Dental Directors (ASTDD).

In her role with ASTDD, she provides technical assistance to state and local health jurisdictions on matters associated with monitoring oral health including the analysis of secondary data and the appropriate collection of primary data. She has assisted more than 50 states and local jurisdictions collect oral health data. In addition to working with ASTDD, she is the oral health surveillance consultant for the Indian Health Service, the Northwest Portland Area Indian Health Board and the Arcora Foundation.

Dr. Phipps is a member of the California Oral Health Program's Surveillance and Evaluation Workgroup and is assisting the Oral Health Program with the implementation of a statewide oral health survey. Dr. Phipps was also a member of the San Luis Obispo County First 5 Oral Health Coordination team which developed the oral health coalition, strategic plan and conducted an oral health assessment. Prior to moving to San Luis Obispo County in 2000, Dr. Phipps was an Associate Professor at Oregon Health and Sciences University with joint appointments in the School of Dentistry and School of Medicine.

<u>Approach</u>

Our approach to the Scope of Work objectives is to work with the First 5 staff and the (to-beformed) oral health coalition to meet the objectives of the Oral Health Prevention Program.

Oral health coalition

We will work with a small advisory committee to form a larger, diverse Oral Health Coalition to develop a mission, vision, values and structure over the course of the year. Developing the Coalition will include facilitated discussions on roles, communications, governance as well as adoption of a strategic oral health improvement plan including goals, objectives and indicators. Feedback processes will be employed to determine future directions of the coalition.

As part of the development of the coalition and strategic plan, we will conduct assessments of oral health in the County to assist in the development of a Community Oral Health Improvement Plan, Logic Model and evaluation process. The consultants will work with First 5 staff and Oral Health Coalition to develop the specific plans for assessments in the initial months of the contract and begin the assessments in September 2018.

Needs assessment

Key components of the assessment will include:

- Key informant interviews with a broad range of stakeholders. Joel Diringer has recently completed 25 such interviews in San Luis Obispo County with providers (private and nonprofit), community advocates, County staff, First 5, health and dental plans, schools, CHDP, Head Start and dental society. These interviews will be used to solicit input on
 - o their involvement in oral health efforts,
 - o the greatest oral health needs, barriers and solutions
 - o elements of an oral health strategic plan
 - o how to improve equity in the accessing of dental services
 - how the broader community can be involved in improving oral health.
- Concurrent with the interviews, the consultants will conduct an assessment of available primary and secondary data to determine the County's health status, oral health status, needs, and available dental and health care services to resources to support underserved areas and vulnerable population groups. Dr. Phipps is a dental epidemiologist who has designed and conducted national, state and local assessments.
- While conducting the data assessment, the consultants will plan and conduct a needs assessment based on available resources. The needs assessment will review current utilization of dental services, capacity to provide oral health education, prevention and treatment to varied populations in the County. The assessment will build on the key informant interviews.

- The consultants will also work with First 5 to conduct an inventory and map Kings County organizations that serve vulnerable populations and can be enlisted in oral health improvement efforts.
- The consultants will also work with First 5 and oral health program staff in identifying primary data collection needs and processes. The data collection can involve stakeholder surveys, oral health screenings or provider interviews.

Should oral health screenings be desired, we would develop protocols for screening a sample of children in Head Start/Pre-K, Kindergarten and third grades. For example, there are 27 elementary schools in Kings County in 11 school districts with approximately 2200 third graders. To achieve a statistical 95% confidence level, approximately 800 children would need to be screened in an estimated 12 schools. Schools would need to be contacted and scheduled. The actual screenings would need to be performed by a trained dental professional with analysis performed. The consultants can assist in identifying schools and sample sizes, training the surveyors, and analyzing the data. The actual screenings could be conducted by oral health program staff (if qualified) or would need to be contracted out at a cost of approximately \$2500 (4 hours per school, 12 schools, \$50 per hour). We would anticipate that the oral health program staff would coordinate with the schools.

Additional screening with Head Start/pre-K and Kindergarten can also be conducted at additional cost and would provide a better estimate of dental disease prevalence among younger children.

Oral health improvement plan

Following the data gathering and assessments, the consultants will work with the Oral Health Coalition to develop goals, objectives and strategies for improving the community's oral health. This process will take place at successive regular Oral Health Coalition meetings or a special strategic planning session if desired by the Coalition.

The goals, objectives and strategies developed by the Coalition will be used to develop a community oral health improvement plan including goals, objectives, action steps and indicators. The consultants will draft the plan with the First 5 and oral health program staff and present it to the Coalition in successive meetings.

Evaluation plan

The community oral health improvement plan will include an evaluation plan process that will include stakeholders, including those involved, those affected, and the primary intended users. The plan will be developed with the evaluation consultant and First 5 staff. The health improvement plan will also include a Program Logic Model, which will become a common reference point for staff, stakeholders, constituents and CDPH/OHP.

Other activities

Consultant will also participate in training, webinars and conference, etc. Travel expenses have been budget for travel for the two consultants for an out of town statewide or regional conference. In addition, the consultants will coordinate with CDPH on surveillance activities.

Assistance from First 5

First 5 staff will be relied upon for reviewing and approving the proposed timeline, needs assessment plan, key informant interview questions and interviewees, drafts of community oral health improvement plan, logic model and evaluation plan. Should actual oral health screenings in schools, pre-schools and other sites be desired, First 5 will need to approve a plan and budget for the screenings.

TIMEFRAME FOR COMPLETION

Item	July	Aug.	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June
	2018	2018	2018	2018	2018	2018	2019	2019	2019	2019	2019	2019
Administration - contracting, reporting												
contracting, reporting, invoicing etc.												
meetings with First 5 and others												
coordination with eval. consultant												
Oral health coalition												
initial development of coalition												
monthly meetings (10)												
satisfaction survey												
Community Oral Health Improvement												
Plan												
Assessment of available primary and												
secondary data												
Needs assessment strategy and												
implementation		_										
Key informant interviews												
Asset mapping												
Community Oral Health Improvement												
Plan - goals, objectives, strategies, action												
plan												
Develop Program Logic Model												
Evaluation Plan process												
Participation in local, regional and				·				·	<u></u>			
statewide calls and convenings												

The following is the proposed timeline subject to discussion with First 5 staff and the Oral Health Coalition.

Diringer and Associates proposes to complete the Scope of Work at the cost of \$92,514. As detailed below, we estimate that the work will require 463 hours of professional time. Professional time for Kathy Phipps will be billed at the hourly rate of \$165. Joel Diringer's time will be billed at the rate of \$175. These rates include all costs including insurance, taxes, retirement, utilities, supplies, copies, and communications. Optional costs are listed below.

Item	Joel Di	ringer hours	Kathy Phipps hours
Administration - contracting, reporting			
Contracting, reporting, invoicing etc.		20	
Meetings with First 5 and others		10	5
Coordination with eval. consultant		10	5
Oral health coalition			
Initial development of coalition		10	
Monthly meetings (10)		100	40
Satisfaction survey		4	1
Community Oral Health Improvement Plan			
Assessment of available primary and secondary data		10	20
Needs assessment strategy and implementation		10	10
Key informant interviews		48	0
Asset mapping		40	5
Community Oral Health Improvement Plan - goals,		40	10
objectives, strategies, action plan			
Develop Program Logic Model		10	5
Evaluation Plan process		10	10
Participation on local, regional and statewide calls			10
and convenings			l
Total hours		342	121
Hourly rate		\$175	\$165
Professional cost		\$59,850	\$19,965
Total professional cost		\$79,815	. ,
Travel			
12 trips to Kings County	\$	1,605	
local mileage w/in Kings Co.	\$	134	
6 overnights	\$	1,050	
Out of town conf (2)	\$	1,500	
Total travel	\$	4,289	
Subtotal	\$	84,104	

Profit and overhead	\$ 8,410	
Total	\$ 92,514	
Graphic design (optional)	\$ 2,500	
Surveillance coordinator (optional)	\$ 5,000	

ACKNOWLEDGEMENT OF ADDENDA EVALUATION OF PROPOSED AGREEMENT

Acknowledgement of addenda

We are not aware of any addenda as of June 19, 2018.

Evaluation of Proposed Agreement

We have reviewed the proposed agreement and make the following requests for amendment. The proposed agreement calls for commercial automobile insurance of \$1 million per occurrence (if applicable) and professional liability of \$1 million per occurrence. For the automobile coverage, we request that an umbrella policy of \$1 million be accepted in lieu of an auto-only policy, or that the requirement be waived since we will not be transporting First 5 staff or clients.

In addition, for professional liability, Diringer and Associates carries a policy with \$.5 million of coverage. This amount has been accepted by both San Luis Obispo County and Merced County and we request that it be accepted by First 5 Kings County. To increase the policy limits would be very costly and might make this project unfeasible. Lastly, we do not have a need for workers' compensation since both consultants act as independent professionals, and are not employees.

With the above noted requests for amendment, Diringer and Associates is willing to enter into a final, negotiated agreement if awarded.

References:

Wendy L Wendt, Executive Director
 First 5 San Luis Obispo County
 3220 S. Higuera Street #232
 San Luis Obispo, CA 93401
 (805) 781- 4058
 wwendt@first5slo.org
 Oral health assessments, coalition building and strategic planning – 2008-9. Joel Diringer and Kathy Phipps - \$50,000
 Health Access Training Project – 2014 to present. Joel Diringer - \$75,000.
 First 5 Commissioner – Joel Diringer 2002 – 2007.

2. Barbara Morrow RDH, BS Oral Health Program Manager- Public Health County of San Luis Obispo- Health Agency 2180 Johnson Ave., Annex San Luis Obispo, CA 93401 (805) 781-5503 bmorrow@co.slo.ca.us

Prop 56 and DTI oral health strategic planning process – 2018 – Joel Diringer and Kathy Phipps, \$25,000.

DTI proposal preparation and editing – 2016. Joel Diringer.

3. Dr. Paul Glassman
Pacific Center for Special Care
University of the Pacific
Arthur A. Dugoni School of Dentistry
155 Fifth Street
San Francisco, CA 94103
(415) 929-6490
pglassman@pacific.edu
Colleague as Board member and Interim Executive Director, Center for Oral Health. 2010-

2015. Joel Diringer.

4. Dr. Jayanth Kumar
State Dental Director
California Department of Public Health Chronic Disease Control Branch
P.O. Box 997377, MS 7208
Sacramento, CA 95899-7377
(916) 552-9900
Jayanth.Kumar@cdph.ca.gov

Colleague on Association of State and Territorial Health Directors and member of California State Oral Health Plan Advisory Committee. Kathy Phipps. 5. Kathleen Grassi Merced County Public Health Director (retired) 260 E. 15th St. Merced CA 95341 (559) 259-1798 kgrassi@att.net

Facilitation of Merced County Health Collaborative (2014 – current), Merced County Accountable Community for Health Initiative (CACHI) (2016 – current). Facilitator and lead researcher for Health Collaborative Subcommittee on Remaining Uninsured (2016-7). Joel Diringer (\$100,000).

Strategic planning and community outreach for development of tri-counties Medi-Cal managed care plan now formed as CalViva. 2008. Joel Diringer (\$25,000).

AFFIDAVIT OF NON-COLLUSION CONFLICT OF INTEREST STATEMENT

CERTIFICATION OF NO CONFLICT OF INTEREST AFFIDAVIT OF NON-COLLUSION

I hereby affirm that:

- 1) I am the Respondent (if Respondent is an individual), a partner of the Respondent (if the Respondent is a partnership), or an officer or employee of the Respondent having authority to sign on the Respondent's behalf (if Respondent is a corporation).
- 2) The Response has been arrived at by the Respondent independently and has been submitted without collusion with, or without agreement, understanding, or planned common course of action with, any other vendor or materials, supplies, equipment, or services described in the request for Response, designed to limit the independent bidding or competition.
- 3) The contents of the Response have not been communicated by the Respondent or its employees or agents, to any person not an employee or agent of the Respondent or its surety or any bond furnished with the Response, and will not be communicated to any such person prior to the official opening of the Response.
- 4) I have fully informed myself regarding the accuracy of the statements made on this affidavit.
- 5) [CONFLICT OF INTEREST] I certify that no official or employee of Kings County, or any business entity in which an official or employee of the County has an interest, has been employed or retained to solicit or aid in the procuring the award of this RFQ.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed in: San Luis Obispo, California on June 20, 2018 by:

Joel Diringer Name of Respondent 2475 Johnson Avenue San Luis Obispo, CA 93401

Alling

Authorized Signature



Date of Meeting: August 14, 2018

2018-08-019

Contract with Evaluation, Management & Training (EMT) for Oral Health Evaluation Services



Date of Meeting: Agenda Item: Discussion/Action Item: August 14, 2018 2018-08-020 Action Item

AGENDA ITEM: Approval of 2018-2021 Evaluation Services for Local Oral Health Program

A. Background/History:

In 2016 the voters of California passed Proposition 56, the California Healthcare, research and Prevention Tobacco Tax Act of 2016, that created an additional \$2 tobacco tax. One use for the new revenue was to create a \$30 Million allocation to the state dental program, for the purpose and goal of educating about, preventing and treating dental disease, including dental disease caused by use of cigarettes and other tobacco products. The California Department of Public Health (CDPH) has created local funding opportunities in each county. The allocation to Kings county is \$186,104 annually for 4 years.

At the February 2018 First 5 Commission Meeting a study session was conducted to determine if this funding opportunity was a good fit for First 5 Kings. At that meeting the Commission recommended completing an application.

At the April 2018 Commission meeting the completed application was approved by the Commission for submission to CDPH. This application was approved and the final contract is being brought back to the Commission for approval prior to execution. One component of the application was funding for evaluation services.

B. Summary of Request, Description of Project and/or Primary Goals of Agenda Item:

Staff requests the Commission consider approving the attached contract with Evaluation, Management and Training (EMT) Associates for evaluation services for the Local Oral Health Project for FY 18/19 through FY 21/22.

C. Timeframe:

Evaluation services will be provided from 7/1/2018 through 6/30/22.

D. Costs:

Total Costs budgeted for this contract will not exceed FY 18/19 \$13,631, FY 19/20 \$8,056, FY 20/21 \$8,056, and FY 21/22 \$8,056. The total of the contract should not exceed \$37,799 over 4 years.

E. Staff Recommendation:

Staff recommends the Commission approve the contract with Evaluation, Management and Training (EMT) Associates for evaluation services in an amount not to exceed \$37,799.

F. Attachments:

DRAFT contract between First 5 Kings and Evaluation, Management and Training (EMT) Associates for evaluation services for the Local Oral Health Project for FY 18/19 through FY 21/22.

SERVICE AGREEMENT By and between First 5 Kings County Children and Families Commission and Evaluation, Management and Training (EMT) Associates, Inc.

This Agreement is made by and between First 5 Kings County Children and Families Commission ("Commission") and Evaluation, Management and Training (EMT) Associates, Inc. ("Consultant") with respect to the following recitals:

WHEREAS, the California Children and Families First Act of 1998, codified in Health and Safety Code §§ 130025 et seq., also known as Proposition 10, requires Commission to implement a county strategic plan to develop and fund programs aimed at promoting, supporting, and improving early childhood development of Kings County children; and

WHEREAS, Commission is in need of the services of Consultant to implement the county strategic plan as mandated by the California Legislature; and

WHEREAS, Consultant represents that it has the experience and knowledge necessary to perform tasks identified in Exhibit A and is ready, willing, and able to provide such services pursuant to the terms and conditions of this Agreement;

NOW, THEREFORE, the parties agree as follows:

1. <u>Services to be Performed by Consultant.</u>

Consultant shall perform all work necessary to complete those tasks described in Exhibit A attached hereto and incorporated herein by this reference as though set forth in full. The work shall be performed in a timely and workmanlike manner and according to generally accepted standards for professional consultants or organizations performing the same or similar work in the State of California.

2. <u>Term.</u>

The effective date of this Agreement is July 1, 2018, and terminates on June 30, 2022.

3. <u>Compensation.</u>

Commission's total payments to Consultant under this Agreement shall not exceed thirty-

seven thousand seven hundred and ninety-nine dollars (\$37,799). Consultant shall be reimbursed Service Agreement between First 5 Kings County and Evaluation, Management and Training Associates, Inc. for Evaluation of Local Oral Health Program Term: 7/1/2018 to 6/30/2022 Page 1 of 19 on a quarterly basis, no later than fourteen (14) days following receipt of a written monthly invoice to the Executive Director of the Commission. The invoice shall indicate the tasks which are described in Exhibit A which have been completed to that date. Consultant shall submit a final invoice within fifteen (15) days after the termination of this Agreement.

4. <u>Warranty</u>.

Consultant warrants that it has the expertise to perform the tasks described in Exhibit A in a workmanlike manner.

5. <u>Termination of Agreement for Convenience.</u>

Either Party may terminate this Agreement at any time without cause by giving thirty (30) days prior written notice to the other specifying the effective date.

6. <u>Termination of Agreement for Cause.</u>

Commission may, by written notice to Consultant, terminate the whole or any part of this Agreement immediately if Consultant fails to perform the tasks called for under the terms of this Agreement.

If the Commission should fail to pay Contractor all or any part of the compensation set forth in this Agreement on the date due, Contractor may terminate this Agreement if the failure is not remedied within thirty (30) days from the date payment is due. Written notice will be sent to Contractor's address listed on the signed contract.

7. <u>Effects of Termination</u>.

If either party terminates this Agreement, the Commission shall pay Contractor for services rendered through the date of termination at the appropriate pro-rated amount.

Termination of this Agreement shall not terminate any obligations of any liability to Commission for damages sustained by Commission because of any breach of contract by Contractor, nor to indemnify, to maintain and make available any records pertaining to this Agreement, to cooperate with any audit, to be subject to offset, or to make any reports of pretermination contract activities.

8. <u>Payment not to be Construed as Waiver of Breach or Default.</u>

In no event shall any payment by the Commission constitute a waiver by the Commission of any breach of this Agreement or any default which may then exist on the part of the Contractor, nor shall such payment impair or prejudice any remedy available to the Commission with respect to the breach or default.

9. <u>Interest of Consultant.</u>

The principal investigator of the contractor covenants that it presently has no interest and shall not acquire any interest, direct or indirect, in the tasks described in Exhibit A or any other interest which would conflict in any manner or degree with the performance of his or her services hereunder.

10. Assignment and Subcontracting

Consultant shall not assign, transfer, or sublet this Agreement or any portion therein without prior written consent of Commission. Such approval shall be at the sole and absolute discretion of Commission.

In the event of approval of Commission of assignment or subcontracting, Consultant shall be as fully responsible of Commission for the acts and omissions or its subcontractors, or assignees, and of persons either directly or indirectly employed by consultant, as it is for the acts and omissions of persons employed by Consultant.

11. Independent Contractor.

In the performance of the services herein provided for, Consultant shall be, and is, an independent contractor and is not an agent or employee of Commission. Consultant has and shall retain the right to exercise full control and supervision of its officers, employees and agents in the provision of services hereunder, and full control over the employment, direction, compensation and discharge of said officers, employees and agents. Consultant shall be solely responsible for all matters relating to the payment of its employees including compliance with social security, workers compensation, unemployment insurance and income tax withholding and all laws and regulations governing such matters.

12. <u>Indemnification.</u>

Contractor shall indemnify, defend and hold harmless, the Commission, the County, and their elected officials, officers, employees, agents and assigns from and against any and all claims, demands liability, judgments, awards, interest, attorneys fees, costs and expenses of whatsoever kind or nature, at any time arising out of or in any way connected with the performance of this Agreement. Contractor's liability for indemnity under this Agreement shall apply, regardless of fault, to any acts or omissions, willful misconduct or negligent conduct, whether active or passive, on the part of the Contractor, unless the claim, demand liability, judgment, award, interest, attorney's fee, cost or expense is caused solely by the negligent or willful misconduct of the Commission, the County, its elected officials, officers, employees, agents or assigns. Contractor will on request and at its expense defend any action suit or proceeding arising hereunder and shall reimburse and pay the Commission and/or the County for any loss, cost, damage or expense (including the cost of its attorneys) suffered by it hereunder.

13. <u>Insurance</u>.

A. Prior to commencement of work, Contractor shall purchase and maintain the following types of insurance for minimum limits indicated during the term of this Agreement and provide a Certificate of Endorsement from Contractor's Insurance Carrier guaranteeing such coverage to the Commission and the County. Such Certificate shall be mailed directly to the County department as referenced under Section 20, "Notices".

1. Commercial General Liability: \$1,000,000 per occurrence and \$2,000,000 annual aggregate covering bodily injury, personal injury and property damage. The County and its officers, employees and agents shall be endorsed to above policies as additional insured, using ISO form CG2026 or an alternate form that is at least as broad as form CG2026, as to any liability arising from the performance of this Agreement.

2. Comprehensive Automobile Liability Insurance (if applicable) of \$1,000,000 per occurrence.

3. Workers Compensation: Statutory coverage, if and as required according to the California Labor Code, including Employers' Liability limits of \$1,000,000 per

accident. The policy shall be endorsed to waive the insurer's subrogation rights against the County.

4. Professional Liability: \$1,000,000 limit per occurrence and \$5,000,000 annual aggregate limit covering Contractor's wrongful acts, errors and omissions.

B. Insurance Conditions

1. Insurance is to be placed with admitted insurers rated by A.M. Best Co. as A:VII or higher. Lower rated, or approved but not admitted insurers, may be accepted if prior approval is given by the County's Risk Manager.

2. Each of the above required policies shall be endorsed to provide County with thirty (30) days prior written notice of cancellation or ten (10) days written notice if the reason for cancellation is for non-payment of insurance premium. County is not liable for the payment of premiums or assessments on the policy. No cancellation provisions in the insurance policy shall be construed in derogation of the continuing duty of Contractor to furnish insurance during the term of this Agreement.

3. The County of Kings, its elected officials, officers, agents, employees and volunteers, individually and collectively, shall be named as additional insured by endorsement to the policy.

4. The County's Risk Manager must approve any deductible or self-insurance retention that exceeds \$100,000.

14. Nondiscriminatory Practices.

In connection with the performance of this Agreement, Consultant shall not discriminate against any person on the basis of ethnic group identification, religion, age, sex, color, or disability.

15. <u>Compliance with the Law.</u>

Contractor shall comply with all federal, state and local laws and regulations applicable with respect to his or her performance under the Agreement, including but not limited to, licensing, employment and purchasing practices, and wages, hours and conditions of employment, including nondiscrimination.

16. <u>Compliance with Commission's Conflict of Interest Code</u>

As a California public entity, Consultant acknowledges that its staff complies with all registration requirements under the Political Reform Act, as applicable. Furthermore, Consultant acknowledges that its conflict of interest policy is in conformance with the conflict of interest policy adopted by the Commission.

17. Publication and Ownership of Documents

All reports prepared for the Commission under this Agreement shall become public records and the Commission shall make such documents available to the public. Both parties shall be free to use and disseminate all data and reports obtained under this Agreement.

18. <u>Records.</u>

Consultant shall maintain all books, documents, papers, accounting records, and other evidence pertaining to cost incurred, and make such materials available at its office at all reasonable times during the term of this Agreement and for three years from the date of final payment to Consultant. Such materials shall be available for inspection by authorized representatives of Commission and copies thereof shall be furnished if requested at no cost to the Commission.

19. <u>Interfering Conditions:</u>

Contractor and the Commission shall promptly and fully notify each other of any condition that interferes with, or threatens to interfere with Contractor's duties and responsibilities under this Agreement. This notice shall not relieve the other of their duties and responsibilities under this Agreement.

20. <u>Notices.</u>

Notices to be given by one party to the other under this Agreement shall be given in writing by personal delivery, by certified mail, return receipt requested, or express delivery service at the addresses specified below. Notices delivered personally shall be deemed received upon receipt; mailed or expressed notices shall be deemed received four (4) days after deposit. A party may change the address to which notice is to be given by giving notice as provided above.

Scott Waite, Program Officer First 5 Kings County Children and Families Commission 330 Campus Drive Hanford, Ca 93230

Victoria Cassel, Senior Research Associate EMT Associates, Inc. 1024 Iron Point Road, Suite 100, #1300 Folsom, CA 95630

21. Jurisdiction.

This Agreement shall be administered and interpreted under the laws of the State of California. Jurisdiction of litigation arising from the Agreement shall be in the County of Kings. If any part of Agreement is found to be in conflict with applicable laws, such part shall be inoperative, null and void insofar as it is in conflict with said laws, but the remainder of this Agreement shall remain in full force and effect.

22. <u>Concurrent Enforcement of Remedies.</u>

The Commission reserves its right to pursue any and all remedies available by law as needed to enforce its rights under this Agreement.

23. Integration.

This Agreement represents the entire understanding of Commission and Consultant as to those maters contained herein and supersedes all prior negotiations, representations or agreements, either written or oral. This Agreement may be amended only by written instrument, signed by both Commission and Consultant.

IN WITNESS WHEREOF, the parties have executed this Agreement to be effective on the date executed by COMMISSION.

Dated:_____ Dated:_____

ByByCrystal Hernandez, Interim Executive DirectorJoel L. Phillips, PresidentCommissionEMT Associates, Inc.

First 5 Kings County Evaluation Services – Scope of Work 07/01/2018 to 06/30/2022

Objective 1: By June 30, 2019 build capacity and engage community stakeholders to provide qualified professional expertise in dental public health for program direction, coordination, and collaboration.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
1.1	Identify existing staff support and a structure	07/01/18- 8/01/18	First 5 Program Officer	Program structure in place
1.2	Create a coordinator position and other positions as needed	08/01/18- 09/30/18	First 5 Program Officer	List of positions established; vacancies filled
1.3	Write job descriptions/ duty statements	09/01/18- 12/31/18	First 5 Program Officer	Job descriptions/duty statements developed
1.4	Recruit and hire staff to fill vacancies	01/01/19- 02/28/18	First 5 Program Officer	List of Staff hired, provide number of vacancies
1.5	Participate in trainings offered via meetings, webinars, workshops, conferences, etc.	01/01/18- 12/31/18	First 5 Program Officer, First 5 Resource Specialist & Oral Health Consultant	List of trainings, meetings, webinars, workshops, conference attended
1.6	Develop Advisory Committee/Coalition/Partnership/Task Force (AC) and recruit key organizations/members representing diverse stakeholders.	09/01/18- 06/30/19	Oral Health Consultant	Membership list
1.7	Convene first meeting and agenda; set schedule of meetings, develop evaluation for meetings.	09/15/18- 09/30/18	Oral Health Consultant & First 5 Resource Specialist	First meeting agenda; schedule of meetings; number of meetings held. List of participants, participant evaluations
1.8	Identify Mission, Vision, shared values, and structure of AC.	09/15/18- 06/30/19	Oral Health Consultant	Mission, vision, values, AC structure
1.9	Conduct key informant interviews (KI), focus groups, or Knowledge, Attitude and Belief (KAB) surveys of key stakeholders and organizations to determine understanding and priority of addressing oral health.	08/01/18- 06/30/19	Oral Health Consultant	Summary of KI interviews, focus groups and/or KAB surveys to address common themes, challenges, and support of mission, vision, and values
1.10	Identify goals and objectives for improving oral health.	10/01/18- 06/30/19	Oral Health Consultant	Document defining goals and objectives

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
1.11	Establish communication methods with local	10/01/18-	Oral Health	List of meetings, webinars; conference calls;
	partners and stakeholders.	11/31/18	Consultant & First 5	list serve developed; mailings, etc.
			Resource	
			Specialist	
1.12	Convene advisory group/task force per schedule.	09/01/18-	Oral Health	Minutes; other documentation from
	Submit new schedule for the rest of the grant term	06/30/19	Consultant	meetings/webinars/calls/mailings
	with revised work plan.			
1.E.1	Conduct qualitative analysis to determine	12/01/18-	Oral Health	Summary of analysis
	effectiveness of trainings and community	12/31/18	Consultant	
	organizing approaches to capacity building.			
1.E.2	Conduct satisfaction survey of AC membership to	04/15/19-	Oral Health	Analysis of satisfaction survey which include
	determine AC progress, recommendations and	06/30/19	Consultant	quantitative measures to assess network
	future direction of the LOHP and strategies to			density or involvement and
	address challenges.			recommendations for improvement

Objective 2: By December 31, 2018, 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 underserved areas and vulnerable population groups.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
2.1	Identify staff, consultant or work group from Advisory Committee to develop Needs Assessment.	07/01/18- 12/31/18	Oral Health Consultant	List of work group members
2.2	Conduct an 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 areas and vulnerable population groups.	07/01/18- 12/31/18	Evaluation Consultant, First 5 Resource Specialist & Oral Health Consultant	Summary of resources and needs assessment
2.3	Identify and plan the needs assessment strategy based on available resources. Develop needs assessment instrument.	07/01/18- 12/31/18	Oral Health Consultant	Needs assessment instrument
2.4	Conduct inventory of available primary and secondary data.	07/01/18- 07/31/18	Evaluation Consultant, First 5 Resource Specialist & Oral Health Consultant	Data gathered and inventoried
2.5	Determine the need for primary data	07/01/18- 08/15/18	Evaluation Consultant, First 5 Resource Specialist & Oral Health Consultant	Analysis conducted and data gaps identified

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
2.6	Identify resources	07/01/18- 08/15/18	Oral Health Consultant	Data resources identified to fill gaps
2.7	Select methods	07/01/18- 07/31/18	Evaluation Consultant	Methods selected
2.8	Conduct Needs Assessment	08/01/18- 10/31/18	First 5 Resource Specialist & Oral Health Consultant	Work plan developed to collect missing data
2.9	Collect data	07/01/18- 12/31/18	First 5 Resource Specialist & Oral Health Consultant	Data collected
2.E.1	Analyze data and prepare summary analysis.	09/01/18- 12/31/18	First 5 Program Officer, Evaluation Consultant & Oral Health Consultant	Summary Report

Objective 3: By December 31, 2018, 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.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
3.1	Take an inventory of all the groups (associations, organizations, and institutions) that exist in within the jurisdiction's communities. Identify existing groups, organizations, etc. that serve underserved and vulnerable populations in the community.	08/01/18- 09/30/18	First 5 Program Officer & Oral Health Consultant	Inventory of existing assets/resources
3.2	Conduct interviews/surveys.	08/01/18- 10/31/18	Oral Health Consultant	Survey instrument; interviews and/or surveys conducted
3.3	Create a map of assets/resources within jurisdiction and Identify gaps.	11/01/18- 12/31/18	Oral Health Consultant	Map of assets/resources (geo mapping) within jurisdiction/List of gaps within LHJ
3.4	Publish the assets/resources/gaps identified.	12/01/1812/ 31/18	Oral Health Consultant	Identified assets/resources and identified gaps published on website or in newsletter or as part of Summary Analysis

Objective 4: By May 31, 2019, develop a community health improvement plan (CHIP) and an action plan to address the oral health needs of underserved areas and vulnerable population groups for the implementation phase and to achieve the state oral health objectives.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
4.1	Identify a key staff person or consultant to guide the community health improvement plan process.	01/01/19- 01/15/19	Oral Health Consultant	Key staff member/consultant identified
4.2	Develop a time frame for the community health improvement plan.	01/15/19- 01/31/19	Oral Health Consultant	Timeframe developed
4.3	Identify objectives and strategies to achieve that objective.	01/15/19- 01/31/19	Oral Health Consultant	Summary of objectives and strategies
4.4	Determine which people and sectors of the community should be changed and involved in implementing the strategies.	02/01/19- 03/31/19	Oral Health Consultant	List of partners/stakeholders/ participants representative of the various sectors of the LHJ that participated in the process
4.5	Engage a workgroup to design the Action Plan.	02/01/19- 04/30/19	Oral Health Consultant	List of work group meetings and minutes from meetings
4.6	 Identify action steps: What action or change will occur Who will carry it out When will it take place, and for how long What resources (i.e., money, staff) are needed to carry out the change Communication (who should know what) 	02/01/19- 05/15/19	Oral Health Consultant	Action Plan developed by workgroup that identifies the "what, who, when, how long, resources, and communication" aspects of the Action Plan
4.E.1	Identify how the Action Plan addresses the priorities identified in the Community Health Improvement Plan; provide a summary of key strategies to address vulnerable populations and how they will help to achieve local and state oral health objectives. Describe impact objectives and key indicators that will be used to determine progress.	04/01/19- 05/31/19	Evaluation Consultant & Oral Health Consultant	Summary Report-Identify flow of information between organization, community and other stakeholders; identify how organizational procedures facilitate participation; and identifies the strengths, weaknesses, challenges and opportunities that exist in the community to improve the health status of the community

Objective 5: By June 30, 2019 develop an Evaluation Plan to monitor and assess the progress and success of the Local Oral Health Program.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
5.1	Engage stakeholders in the Evaluation Plan process, including those involved, those affected, and the primary intended users.	07/01/18- 07/31/18	First 5 Program Officer, Evaluation Consultant & Oral Health Consultant	List of stakeholders engaged in this process
5.2	Develop the Program Logic Model, which will become a common reference point for staff, stakeholders, constituents and CDPH/OHP.	08/01/18- 09/30/18	Evaluation Consultant & Oral Health Consultant	Program Logic Model, depicts program outcomes, how the program will accomplish outcomes and basis (logic) for these expectations
5.3	Identify program outcome objectives and indicators.	10/01/18- 11/31/18	Evaluation Consultant & Oral Health Consultant	Document the indicators, sources, quality, quantity, and logistics
5.4	Focus the evaluation design based on selected Objectives and justify conclusions based on data analysis.	02/01/19- 04/31/19	Evaluation Consultant & Oral Health Consultant	Document the purpose, methods, standards, analyses, interpretation, and timeline for the evaluation
5.5	Submit Evaluation Work Plan for Implementation Objectives.	05/01/19- 05/01/19	Evaluation Consultant	Provide comprehensive Evaluation Plan of Required and selected Implementation Objectives
5.6	Submit progress reports.	07/01/18- 06/30/19	First 5 Program Officer, Evaluation Consultant & Oral Health Consultant	Summary of successes, challenges, and lessons learned
5.E.1	Coordinate with CDPH to conduct surveillance to determine the status of children's oral health.	05/01/19- 06/30/19	Evaluation Consultant & Oral Health Consultant	List of schools identified, number of children to be screened, coordination activities conducted

Objective 6: By June 30, 2022, implement evidence-based programs to achieve California Oral Health Plan Objectives.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
School Based- School Linked	Annually identify children in grades K-6 to receive dental sealants. Children receiving sealants must also receive a retention check-up. List number of children to be served.	01/01/19- 06/30/22	First 5 Program Manager	List of participating schools, identify the number of children to be served
6.1.0				
6.1.1	Provide dental sealant services by providing a referral list for dental sealant providers.	01/01/19- 06/30/22	First 5 Program Manager	List of number of referrals, number of children receiving sealants, number of sealants placed
6.1.2	Obtain input from school administrator, lead teacher, school nurse, or oral health contact at identified schools to schedule activities.	01/01/19- 06/30/22	First 5 Program Manager & First 5 Resource Specialist	Summary of input, schedule of activities
6.1.3	Annually, develop or adapt sealant educational materials and/or educational sessions for teachers, parents, and students.	01/01/19- 06/30/22	First 5 Program Manager & First 5 Resource Specialist	Sealant educational materials
6.1.4	Annually distribute sealant educational materials and/or deliver educational sessions to teachers, parents, and students, and send educational sealant information home with sealant consent form (if referral provider will provide services on- site at the school).	01/01/19- 06/30/22	First 5 Program Manager & First 5 Resource Specialist	List of sealant educational materials provided; copy of consent form (if applicable).
6.1.5	Conduct a basic dental screening of students to determine dental status with parental permission. (optional)	01/01/19- 06/30/22	First 5 Program Manager	Signed consent forms, summary of survey results
6.1.6	Schedule time at school site to conduct screening with those children who submitted signed consent forms.	01/01/19- 06/30/22	First 5 Program Manager	Correspondence with school
6.1.7	Conduct screening event with teachers, site personnel, and volunteers.	01/01/19- 06/30/22	First 5 Program Manager	Number of children screened,
6.1.8	Determine number of children that need dental sealants and the number of sealants per child. Follow-up with teachers to ensure notices were sent home.	01/01/19- 06/30/22	First 5 Program Manager	Data captured in report to CDPH

Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
Annually, facilitate dental sealant placement by a dentist, registered dental hygienist in alternative practice or registered dental hygienist at provider site, or will place sealants on a minimum of 5% of targeted children with signed parental consent form at a coordinated sealant event with teachers, site personnel, and volunteers.	01/01/19- 06/30/22	First 5 Program Manager	Schedule of events, number of children served, number of sealants provided
Annually, complete sealant retention checks on a minimum of 10% of the children who received sealants during the school year.	01/01/19- 06/30/22	First 5 Program Manager & First 5 Resource Specialist	Summary of follow-up activities, number of children who received retention checks, screening forms on file
Annually, identify students in grades K-6 that will receive at least one instructional visit on oral health, lasting at least 20 minutes, using appropriate scope and sequence principles. Multiple educational visits are encouraged if possible.	01/01/19- 06/30/22		List of schools identified to participate, number of children receiving education, list of materials provided, training schedule, list of training topics
The following subject areas may be included: • causes, processes, and effects of oral diseases; • plaque control; • nutrition and healthy snacks, sugar sweetened beverages; • use of preventive dental agents, including fluorides and sealants; • the need for regular dental care and preparation for visiting the dentist; • physical activity; • tobacco cessation; and		First 5 Program Manager	
	 Annually, facilitate dental sealant placement by a dentist, registered dental hygienist in alternative practice or registered dental hygienist at provider site, or will place sealants on a minimum of 5% of targeted children with signed parental consent form at a coordinated sealant event with teachers, site personnel, and volunteers. Annually, complete sealant retention checks on a minimum of 10% of the children who received sealants during the school year. Annually, identify students in grades K-6 that will receive at least one instructional visit on oral health, lasting at least 20 minutes, using appropriate scope and sequence principles. Multiple educational visits are encouraged if possible. The following subject areas may be included: causes, processes, and effects of oral diseases; plaque control; nutrition and healthy snacks, sugar sweetened beverages; use of preventive dental agents, including fluorides and sealants; the need for regular dental care and preparation for visiting the dentist; 	Activity DescriptionFrameAnnually, facilitate dental sealant placement by a dentist, registered dental hygienist in alternative practice or registered dental hygienist at provider site, or will place sealants on a minimum of 5% of targeted children with signed parental consent form at a coordinated sealant event with teachers, site personnel, and volunteers.01/01/19- 06/30/22Annually, complete sealant retention checks on a minimum of 10% of the children who received sealants during the school year.01/01/19- 06/30/22Annually, identify students in grades K-6 that will receive at least one instructional visit on oral health, lasting at least 20 minutes, using appropriate scope and sequence principles. Multiple educational visits are encouraged if possible.01/01/19- 06/30/22The following subject areas may be included: • causes, processes, and effects of oral diseases; • plaque control; • nutrition and healthy snacks, sugar sweetened beverages; • use of preventive dental agents, including fluorides and sealants; • the need for regular dental care and preparation for visiting the dentist; • physical activity; • tobacco cessation; andFrame	Activity DescriptionFrameResponsible PartyAnnually, facilitate dental sealant placement by a dentist, registered dental hygienist in alternative practice or registered dental hygienist at provider site, or will place sealants on a minimum of 5% of

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
6.2.0	Annually, identify children in grades K-6 to receive fluoride supplements. Facilitate fluoride supplements by a dental provider or school-based clinic, Federally Qualified Health Center, Community Health Center or identify if an on-site event is will be conducted at the school. Identify volunteers or organizations that provide fluoride varnish and work with teachers, school administrators, site personnel, and volunteers to coordinate the event. For on-site events, provide and collect permission slips for participating children. Children may receive fluoride rinse, fluoride varnish, or fluoride tablets.	01/01/19- 06/30/22	First 5 Program Manager	List of participating schools, identify if children will be referred or identify the number of on-site events will be planned to provide fluoride varnish
6.2.1	Determine course of action for identified schools in collaboration with AC.	01/01/19- 06/30/22	First 5 Program Manager	AC meeting minutes
6.2.2	For identified school sites, develop or adapt general oral health and hygiene educational materials that are culturally competent and use appropriate health literacy level.	01/01/19- 06/30/22	First 5 Program Manager & First 5 Resource Specialist	List of culturally appropriate oral health materials provided
6.2.3	Develop or adapt fluoride educational materials and/or educational sessions for teachers, parents, and students.	01/01/19- 06/30/22	First 5 Program Manager	List of fluoride educational materials provided
6.2.4	Distribute fluoride educational materials and/or deliver educational sessions to teachers, parents, and students, and send educational fluoride information home with fluoride consent form.	01/01/19- 06/30/22	First 5 Program Manager	Distribution list, signed consent forms (on file, if applicable)
6.2.5	Assess number of children eligible to receive fluoride supplement per identified school.	01/01/19- 06/30/22	First 5 Program Manager	List of classrooms and number of children to receive fluoride supplement
6.2.6	Facilitate referral for fluoride supplements or schedule time at school site to provide fluoride supplements with local providers to children who submitted signed consent forms.	07/01/19- 06/30/22	First 5 Program Manager	List of schools, number of children referred for fluoride supplements or number of children receiving fluoride supplements on-site
6.2.7	Conduct fluoride varnish event at school with teachers, site personnel, and volunteers. TBD children that will receive fluoride supplement.	07/01/19- 06/30/22	First 5 Program Manager & Oral Health Consultant	Number of children receiving fluoride supplement, identify type of supplement provided, flyer to promote event if conducted on-site. Permission slips maintained by LHJ, if applicable
6.2.8	Send notice home with students to inform parents of any relevant information.	07/01/19- 06/30/22	First 5 Program Manager	Data captured in report to CDPH; correspondence with teachers

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
6.2.9	Determine total number of children who received fluoride treatment. Follow-up with teachers to ensure notices were sent home.	07/01/19- 06/30/22	First 5 Program Manager	Provide documentation in progress reports. Provide a summary of clinical linkage efforts and on-site events
6.3.1	Conduct training for community members/partners/stakeholders who desire to learn about the safety, benefits and cost effectiveness of community water fluoridation and its role in preventing dental disease.	07/01/19- 06/30/22	First 5 Program Manager	Agenda/Training Materials/Talking Points/List of Participants
6.3.2	Conduct Regional Water District engineer/operator training on the safety, benefits of fluoridation and the important role water engineers/operators have in preventing dental disease.	07/01/19- 06/30/22	First 5 Program Manager	Agenda/ Training Materials, Talking Points/List of Participants
6.3.3	Adapt materials on fluoridation to meet community literacy levels/ languages/cultures or create new fluoridation education materials	07/01/19- 06/30/22	First 5 Program Manager	Community-specific fluoridation Education Materials
6.3.4	Conduct a community public awareness campaign on fluoridation and its effectiveness in preventing dental caries.	07/01/19- 06/30/22	First 5 Program Manager & First 5 Resource Specialist	Marketing Materials, such as Public Service Announcements, Radio Ads, Letters to the Editor, etc.
6.3.5	Create LHJ specific webpage on fluoridation and its effectiveness in preventing dental caries.	07/01/19- 06/30/22	First 5 Program Manager	Webpage URL
6.E.1	Identify process and qualitative indicators for school-based or school linked programs and determine if progress on evaluation objectives/indicators.	07/01/19- 06/30/22	First 5 Program Manager & Evaluation Consultant	Evaluation Report – identify if target participation rate was met
6.E.2	Identify Success Stories to share with local programs, policymakers, stakeholders, and the general public to help sustain program efforts.	07/01/19- 06/30/22	First 5 Program Manager, First 5 Resource Specialist & Evaluation Consultant	Success stories (qualitative case study) and dissemination plan

Objective 7: By June 30, 2022, 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.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
Kinder- Assessm ent 7.1	Convene meetings of local programs (First 5, Maternal, Child and Adolescent Health (MCAH), Denti-Cal, Child Health and Disability Prevention (CHDP), Women, Infants, and Children (WIC), Black Infant Health (BIH), Early Head Start, Head Start, schools, and Home Visiting etc.) and discuss prevention and access to care issues.	07/01/19- 06/30/22	First 5 Program Manager & First 5 Resource Specialist	Schedule of meetings
7.2	Identify the role of partners – outreach, education, assessment, linkage, case management, delivery of services and follow up.	07/01/19- 06/30/22	First 5 Program Manager & First 5 Resource Specialist	Role of partners identified
7.3	Identify facilitators and barriers to care, and gaps.	07/01/19- 06/30/22	First 5 Program Manager	Facilitators and barriers assessed
7.4	Determine the activities for addressing barriers to care	07/01/19- 06/30/22	First 5 Program Manager	Activities identified
7.5	Assess the number of schools currently not reporting Kindergarten assessments to the System for California Oral Health Reporting (SCOHR).	07/01/19- 06/30/22	First 5 Program Manager	Non participating schools identified
7.6	Identify current processes neighboring schools and identify best practices.	07/01/19- 06/30/22	First 5 Program Manager	Best practices identified
7.7	Identify target schools for intervention.	07/01/19- 06/30/22	First 5 Program Manager	List of target schools identified
7.8	Recruit champions.	07/01/19- 06/30/22	First 5 Program Manager	List of champions recruited
7.9	Provide tools and training to make presentations and write letters for educating school board members to pass supporting resolutions.	07/01/19- 06/30/22	First 5 Program Manager	Tool kit prepared; list of presentations made; copy of letters written
7.10	Provide guidance for implementation.	07/01/19- 06/30/22	First 5 Program Manager	Guidance documents distributed to schools
7.11	Conduct meetings of key partners, mobilize the community, and set targets.	07/01/19- 06/30/22	First 5 Program Manager	List of key partners; schedule of meetings held; targets identified

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
7.E.1	Identify successful strategies to increase the	07/01/19-	First 5 Program Manager	Provide summary in progress reports
	number of Kindergarten Assessments, barriers	06/30/22	& Evaluation Consultant	of successes, challenges, lessons
	and challenges to progress. Identify if any new			learned, and recommendations.
	policies were developed as a result of efforts.			Identify if any policies were revised or
	Communicate results of efforts to partners.			new policies developed
7.E.2	Identify Success Stories to share with local	07/01/19-	First 5 Program Manager	Success Stories (qualitative case
	programs, policymakers, stakeholders, and the	06/30/22	& Evaluation Consultant	study) and dissemination plan
	general public to help sustain program efforts.			

Objective 8: By June 30, 2022, address common risk factors for oral diseases and chronic diseases including tobacco and sugar, and promote protective factors that will reduce disease burden.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
8.1	Partner with the Tobacco Control Program to identify possible areas for collaboration.	07/01/19- 06/30/22	First 5 Program Manager	Partnership developed
8.2	Conduct a survey of dental offices to assess readiness to implement tobacco cessation counseling.	07/01/19- 06/30/22	First 5 Program Manager	Analysis of survey
8.3	Identify Champions.	07/01/19- 06/30/22	First 5 Program Manager	List of identified Champions
8.4	Create an inventory of tobacco cessation resources and provide dental offices with resources.	07/01/19- 06/30/22	First 5 Program Manager	List of resources and number of dental offices that receive information
8.5	Conduct a survey of dental offices to assess readiness to implement Rethink Your Drink (RYD) materials and resources.	07/01/19- 06/30/22	First 5 Program Manager	Analysis of survey
8.6	Create an inventory of RYD materials and resources.	07/01/19- 06/30/22	First 5 Program Manager	RYD inventory created, including languages available
8.7	Develop and deliver training/webinar on RYD for local dental offices.	07/01/19- 06/30/22	First 5 Program Manager	RYD training materials; number of attendees
8.8	Connect dental offices to RYD materials and resources.	07/01/19- 06/30/22	First 5 Program Manager	List of dental offices/RYD materials each utilizes
8.E.1	Conduct follow-up to determine how many dental offices implemented Tobacco Cessation counseling or activities.	07/01/19- 06/30/22	First 5 Program Manager & Evaluation Consultant	Provide summary analysis in progress report

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure	
8.E.2	Conduct follow-up to determine how many dental offices implemented RYD activities.	07/01/19- 06/30/22	First 5 Program Manager & <mark>Evaluation</mark> Consultant	Provide summary analysis in progress report.	
8.E.3	Identify Success Stories to share with local programs, policymakers, stakeholders, and the general public to promote and sustain program efforts.	07/01/19- 06/30/22	First 5 Program Manager & <mark>Evaluation</mark> Consultant	Success stories and dissemination plan	



Date of Meeting: August 14, 2018

Study Session

First 5 Kings County Executive Director



August 14, 2018 Informational

AGENDA ITEM: Study Session: First 5 Kings County Executive Director

A. Background/History:

At the October 15, 2013 meeting the First 5 Children and Families Commission approved a transition of staff to the Kings County Department of Public Health. As a result of this transition the Executive Director position would remain vacant and that Staff would report to Deputy Director of Nursing and Community Services at the Kings County Department of Public Health.

In March 2018 The Deputy Director of Nursing and Community Services resigned leaving the position vacant. The position has been modified and is now called Nursing Division Manager.

At the April 3, 2018 First 5 Commission Meeting the Commission appointed Crystal Hernandez to serve as the Interim Executive Director. At the June 5, 2018 First 5 Commission Meeting former Commissioner Bowers requested a study session regarding a more permanent solution to the Executive Director situation.

B. Summary of Request, Description of Project and/or Primary Goals of Agenda Item: The purpose of this

C. Timeframe:

N/A

D. Costs:

N/A

E. Staff Recommendation:

Commission staff recommends that the Commission read, listen, discuss and request future action regarding the position of the First 5 Kings County Children and Families Executive Director.

F. Attachments:

- PowerPoint Presentation outlining Options regarding the First 5 Kings County Children and Families Executive Director
- Job Description for the First 5 Kings County Children and Families Executive Director





Study Session Executive Director August 14, 2018

Page Number: 76

- Support the Commission and its planning efforts. Staff, as led by the Executive Director, will organize strategic and other organizational planning efforts and provide support as requested by the Commission in the development of such plans.
 - The Executive Director/Staff will:
 - Serve as a professional administrator to the Commission, providing regular feedback to the Commission.
 - Inform the Commission fully and accurately regarding the status of activities and issues affecting the organization.
 - Interpret the needs of the organization and present concerns and issues that should be considered by the Commission.

- Assist with policy development and implement policies adopted by the Board.
 - The Executive Director will:
 - Recommend appropriate policies for consideration.
 - Gather data and community input, and provide other analysis and suggestions as needed to assist the Commission in enacting effective policies.
 - Support policy decisions of the Commission.
 - Implement and ensure ongoing compliance with such policies.
 - Research necessary program and allocation of resources issues.
 - Analyze the process and content issues for each option to be considered.
 - Evaluate all information regarding options and forward a recommendation with rationale for the recommendation.
 - Effectively communicate issues and changes in options or recommendations to the Commission to ensure it has the information it needs to make a decision.

- Serve as the primary point of contact for the community and the Commission. The Executive Director will provide friendly, professional service and be accessible to both community members and the Commissioners working to maintain positive relationships with these constituents.
- Frame decisions and get them ready to be implemented. The Executive Director are responsible for understanding Commission decisions, then developing more detailed plans/processes and organizing the resources needed to implement the decisions.
- **Develop an annual budget.** The Executive Director are responsible for preparing a detailed annual budget according to guidelines set by the Commission.

- Conduct and/or manage all operational activities. The Executive Director will perform and/or delegate all operational and administrative duties necessary to implement the strategic plan and other decisions of the Commission in an effective manner. This includes day-to-day fiscal operations, contract development and monitoring, public relations, preparing reports and grant applications, interactions with the State Commission, and other such duties required to implement the strategic plan and Commission decisions that are not stated elsewhere in the description of staff roles.
- Market the Commission and its leadership role within the community. The Executive Director is responsible for raising community awareness of the work of the Commission. This role also involves managing media and public relations efforts.

- Recruit and manage staff and contractors. The Executive Director will ensure that, subject to budget constraints, sufficient trained resources are available and guided in carrying out the work of the organization. This includes:
 - Recruit, hire, and as necessary terminate staff consistent with the Personnel Regulations of the County and other aspects of the County personnel system.
 - Contract with independent contractors in accordance with standards and procedures of the County and the procurement procedures adopted by the Commission.
 - Provide support to the staff and contractors in carrying out their professional duties, including timely and appropriate information needed by staff and contractors to function effectively.
 - Devote time to developing the staff.
 - Evaluate the work of staff and contractors and provide regular verbal and/or written feedback on strengths, areas for growth, and overall performance.
 - Ensure that all legal and regulatory requirements related to staff are met.

Qualifications

• Education:

 Possession of a Master's degree in public administration, business administration, social science, health science, early childhood development, or a closely related field

• Experience

One year of responsible supervisory or staff
 support experience in a social service agency,
 preferably involving the provision of services to
 children and families

Qualifications

• Education:

 Possession of a Bachelor's degree in the field of social work, psychology, early childhood development, health sciences, public administration, business, or a closely related field

• Experience

 Five years of responsible supervisory or staff support experience in a social service agency, preferably involving the provision of services to children and families

Near by Counties

- First 5 Commissions that are independent from the County:
 - Fresno County
 - Tulare County
 - Kern County
 - Madera County
- First 5 Commissions that are part of the County Structure
 - Merced County part of Public Health
 - Mariposa County county department

Options

- 1. Fill the Vacant Children and Families Director Position.
- 2. Name a new individual the Executive Director.
- Attached the Roles and Responsibilities of the Executive Director to another position/job description within the County.
- 4. Modify/Update First 5 Policy manual to allocate signing authority to the Public Health director and other duties to the Program Officer.
- 5. *Restructure in another way.*
- 6. Other options?

Future Direction & Next Steps

 Provide First 5 Staff direction regarding action items to be placed on future First 5 Kings County Commission Meeting Agendas.

Questions, Comments or Concerns





Children and Families Commission Director

Class Code: A48

KINGS COUNTY Established Date: Apr 1, 2001

SALARY RANGE

\$43.27 - \$60.58 Hourly \$3,461.54 - \$4,846.15 Biweekly \$7,500.00 - \$10,500.00 Monthly \$90,000.00 - \$126,000.00 Annually

DEFINITION:

Under administrative direction, to plan, implement and manage the programs and activities of the Kings County Children and Families Commission; and to perform related duties as assigned.

DISTINGUISHING CHARACTERISTICS

The Director of the Kings County Children and Families Commission serves as the administrator of and advisor to the Commission in its mission of providing successful outcomes for children and families in Kings County through the implementation of the Commission's strategic plan. The incumbent is appointed by the Board of Supervisors, based on the recommendation of the Commission, and receives administrative oversight from the County Administrative Office.

EMPLOYMENT AT WILL

The Director classification is a department head level position and, as such, the incumbent serves at the pleasure of the Board of Supervisors.

EXAMPLE OF DUTIES:

Manages, plans, coordinates and supervises the programs, activities and staff of the Office of the Kings County Children and Families Commission; oversees the development, implementation, evaluation and revisions of the Commission's strategic plan for early childhood development; provides management support as an advisor and resource to the Commission; develops Commission meeting agendas and attends Commission and committee meetings as appropriate; develops funding criteria recommendations for subsequent Commission review, discussion and approval of grants and contracts; develops methods to evaluate the effectiveness of funded programs, including continuation or termination of funding; selects, supervises, trains, evaluates and disciplines department staff; establishes and coordinates cooperative relationships with community organizations, educational institutions, health care providers, child care providers, and social service agencies at the local, regional, state and federal levels; develops and ensures Commission compliance with local, state, and federal policies, regulations and directives; develops and administers the Commission's budget and prepares reports; administers the approved budget and controls expenditures; oversees the administration of contracts and consultant services; monitors programs on contract between the Commission and community service providers; reviews grant proposals and makes recommendations; provides liaison between the Board of Supervisor/County Administrative Office, the Commission, and providers of service; evaluates effectiveness of existing services; coordinates the preparation and presentation of the annual audit in compliance with state regulations; represents the Commission and the County at local, state, regional and national conferences/meetings; prepares and makes presentations to the public and associated agencies to communicate program objectives and activities. (*Reasonable accommodation will be made when requested and determined by the County to be appropriate under applicable law.*)

MINIMUM QUALIFICATIONS:

<u>Education/Experience</u>: Possession of a Master's degree in public administration, business administration, social science, health science, early childhood development, or a closely related field, <u>AND</u> one year of responsible supervisory or staff support experience in a social service agency, preferably involving the provision of services to children and families.

OR

Possession of a Bachelor's degree in the field of social work, psychology, early childhood development, health sciences, public administration, business, or a closely related field, <u>AND</u> five years of responsible supervisory or staff support experience in a social service agency, preferably involving the provision of services to children and families.

<u>License:</u> Possession at the time of appointment of a valid, appropriate California driver's license issued by the Department of Motor Vehicles.

<u>Special Requirements</u>: Ability to work a flexible work schedule depending on assignments, and travel within and outside the County to attend meetings and conferences.

<u>Knowledge of:</u> California Children and Families First Act of 1998 (Proposition 10); early childhood development theories and practices; state, county and community political and policy-making processes; effective preparation and administration of budgets, grants and contracts; group processes and community organizing; techniques to design and implement needs assessments; effective communication techniques and public presentation methods and skills; principles of public administration, organization and management; administrative survey principles and techniques; statistical methods and procedures.

<u>Ability to:</u> Work effectively and collaboratively with a broad range of agencies, communities and individuals; exhibit highly developed interpersonal skills using tact, patience and courtesy; work independently; exhibit strong initiative, integrity, sound judgment and a high degree of maturity; communicate effectively both orally and in writing with individuals or groups; establish and maintain positive, effective work relationships with officials from the County and other agencies, department heads, volunteers, and the general public; analyze problems, consider alternatives, project consequences and adopt appropriate solutions; understand and interpret and apply pertinent provisions of laws and rules; gather and analyze data and prepare persuasive meaningful and grammatically correct oral and written reports and recommendations; follow safe work practices as directed and trained.

SUPPLEMENTAL INFORMATION:

FLSA Status: Exempt Medical Group: C Probationary Status: At-Will



Date of Meeting: August 14, 2018

Study Session

2020-2025 Strategic Planning Process



Date of Meeting: Discussion/Action Item: August 14, 2018 Informational

AGENDA ITEM: Process to Establish Strategic Plan for 2020-2025

A. Background/History:

Proposition 10: Requires all county commissions to "adopt an adequate and complete County Strategic Plan for the support and improvement of early childhood development within the county. The strategic plan must include a description of the goals and objectives proposed to be attained, a description of the programs, services, and projects proposed to be provided, sponsored or facilitated; and a description of how measurable results of such programs, services, and projects will be determined by the County Commission using appropriate and reliable indicators."

In the past First 5 has used variety of methods to engage the Commission, Grantees, Stakeholders, Community Partners, and the Community. During past planning cycles we have used community needs surveys, focus groups, evaluation results, fiscal analysis of grantees by a CPS firm, and submissions by grantees. While all of these data points have proven to be useful there can be a significant cost associated with each one.

B. Summary of Request, Description of Project and/or Primary Goals of Agenda Item:

First 5 Kings County Staff request the Commission review, discuss and provide direction for staff regarding the process for developing the next Strategic Plan.

C. Timeframe:

The new strategic plan would start implementation July 1, 2020. All activities would need to be complete and a strategic plan would need to be adopted at the December 2019 Commission Meeting for new contracts to be in place by July 1, 2020.

D. Costs:

To be determined based on option selected by the First 5 Kings County Children and Families Commission.

E. Staff Recommendation:

Staff recommends that the Commission select a process for the development of a new Strategic Plan to be implemented in FY 2020/2021.

F. Attachments:

- N/A



Date of Meeting: August 14, 2018

Study Session

Final Grantee Achievement Report



Date of Meeting: Agenda Item Type: June 5, 2018 Informational Item

AGENDA ITEM: 2017-2018 Final Quarter Achievement Report for First 5 Funded Projects

A. Background/History:

The Commission has transitioned from a formative evaluation framework into a summative evaluation framework; therefore the reporting of program status reports and evaluation results are now two separate items for the Commission to consider. Staff is providing the Commission, on a quarterly basis, a progress report regarding the status of programs attaining contracted goals and deliverables.

B. Summary of Request, Description of Project and/or Primary Goals of Agenda Item:

Staff is requesting the Commission review and discusses the program status report representing activities and number of clients served through December of FY 2017-2018.

C. Timeframe:

Reports will be provided to the Commission on a quarterly basis, on the following schedule:

- 1st Quarter Report: December 2017
- 2nd Quarter Report: February 2018
- 3rd Quarter Report: June 2018
- Year End Report: August 2018

D. Costs:

No costs associated with this item.

E. Staff Recommendation:

Staff recommends the commission review and discuss the program reports as provided.

F. Attachments:

• FY 2017-2018 Final Achievement Report

FY 2017-2018 Final Achievement Report for First 5 Kings Funded Programs

EIRST5	Unduplicated Count of Clients Served			Objectives to be	Objectives	Objectives that did	Percentage of Budget	Timely Progress
FIRST5 KINGS COUNTY	Children 0 to 2	Children 3 to 5	Significant Others	Achieved	that were Achieved	not meet Target	Expended Goal 100%	Report Submission
Family Resource Center Initiative								
Avenal Family Connection	43	55	63	24	19	5	100%	Yes
Corcoran FRC	107	137	469	23	20	3	98%	Yes
KCOE – HFC & LFC	679	608	1,098	56	51	5	100%	Yes
Kettleman City FRC	45	72	90	14	12	2	100%	Yes
School Readiness Initiative								
UCP Parent & Me	190	61	211	20	20	0	100%	Yes
UCP Special Need Program	152	30	78	7	7	0	100%	Yes
Linkages to Learning	0	2312	56	10	10	0	100%	Yes
E3 Initiative								
KCOE – CARES	N/A	N/A	297	15	12	3	101%	Yes
New Project Initiative								
United Way 211	N/A	N/A	N/A	4	4	0	98%	Yes



Date of Meeting: August 14, 2018

Study Session

Spotlight on Service United Cerebral Palsy Parent & Me Special Needs



Date of Meeting: Agenda Item Type: August 14, 2018 Informational

AGENDA ITEM: Spotlight on Service: United Cerebral Palsy of Central California – Parent & Me and Special Needs Project

A. Background/History:

The First 5 Commission has scheduled annual program presentations by funded programs. This offers grantees the opportunity to share their successes, achievements, and progress from the last year.

B. Summary of Request, Description of Project and/or Primary Goals of Agenda Item:

The Special Needs project seeks to provide services to children identified as having or being at risk for developing a special need. This is a gap funding strategy to provide intervention to a population of children that because of stringent qualification standards, would otherwise not qualify for services under typical funding streams. Services provided through this project include conducting child development assessments, developing and providing interventions based on such assessments, and providing support services for children identified as having a special need for their inclusion into the Parent & Me program. Additionally, this project provides capacity building support to ensure providers are delivering services to children with special needs in an appropriate and inclusive fashion. This funding stream also supports the infrastructure of the Armona Parent & Me inclusion site.

The Parent & Me program is a community-based program designed to strengthen the parent as their child's first teacher and provide hands-on growth experiences for both parent and child which can be repeated at home during the week. Parent and child attend a 1.5 to 2 hour session each week where they participate in activities that are developmentally appropriate for the child. The focus of the program is on children 0-3, however, children age 3-5 who do not have other options or parental preference are welcome. With emphasis on the process rather than results, parents are supported in discovering how and what their child is learning and how they can support their child's development.

C. Timeframe:

United Cerebral Palsy has been a component of the First 5 Kings County strategic plan since FY 2003/2004.

D. Costs:

There is no cost associated with this agenda item.

E. Staff Recommendation:

Staff recommends that the commission review the information provided by United Cerebral Palsy of Central California – Parent & Me and Special Needs Project.

F. Attachments:

• United Cerebral Palsy of Central California – Parent & Me and Special Needs Project – PowerPoint Presentation

UCP Special Needs Parent and Me Programs July 2015 – March 2016

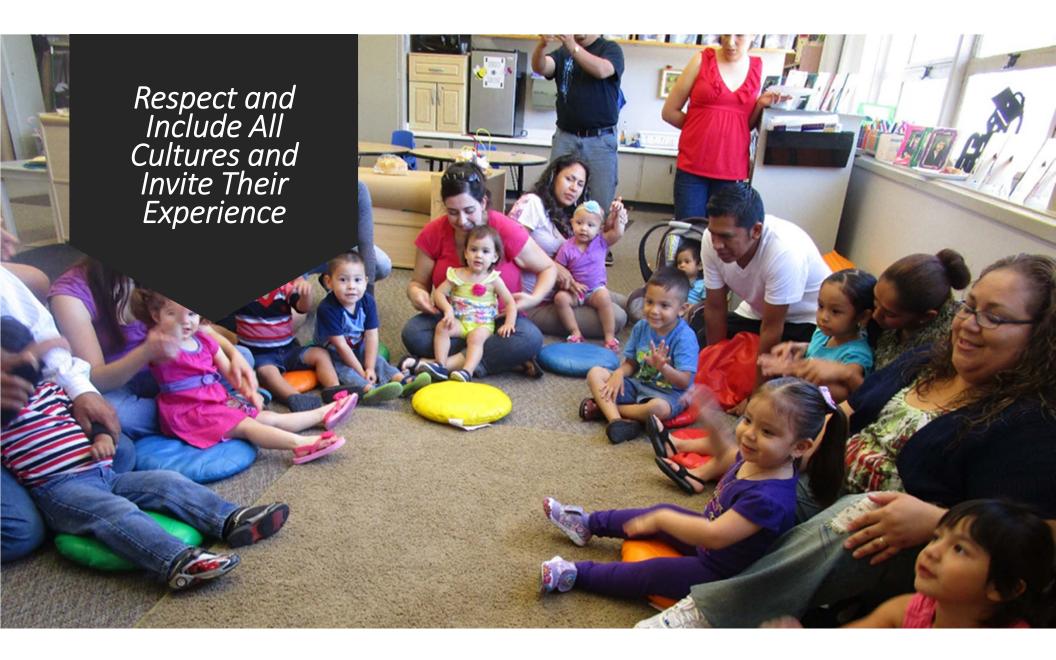
A SASAN

Parent & Me Mission

Supporting parents as their child's first teacher as they participate with their child in a welcoming early learning community setting. Partner with Parents to Develop their Child's Full Potential and Acknowledge Their Expertise

 Provide modeling, parenting, and school readiness instructions to parents attending Parent and Me – 3,841





Emphasize Play as the Doorway to Learning

 Provide school readiness instruction through Parent and Me classes - 4,368





Use a "Whole-Person" Approach and Response with Children and Their Families

Offer Best-Practice and Quality of Services

- Parent and Me Class Sessions 733
- Parent & Me Programs
 Developmental Screenings 259
- Therapists to Teachers Trainings -108
- Teachers Participate in **CARES**







Focus on Prevention and Insure Accessibility to Early Intervention

- Assessments of Children for Special Needs 168
- Interventions for Children with Special Needs 165
- Follow-up Inclusion Support **37**
- Training, Coaching, Mentoring **101 providers**

Advocate for Needed Services

- Parent & Me Teachers Refer to UCP Therapists and Other Services
- Therapists referrals to IDEA Services both CVRC and KCOE
- Access to Special Needs FRC
- Access to Family Empowerment Center



Partner with First 5 and Community Agencies

- First Five Kings County
- Avenal Family Connections
- Corcoran Family Resource Center
- Hanford Family Connections
- Kettleman City Family Connections
- Lemoore Family Connections
- CARES

- Central Valley Regional Center
- Kings County Health Department
- Kings County Behavioral Health
- Kings County Community Action
- Kings County Office of Education
- School Districts County Wide
- United Way



Date of Meeting: August 14, 2018

Study Session

Spotlight on Service West Hills Community College Avenal Family Connection



Date of Meeting: Agenda Item Type: August 14, 2018 Informational

AGENDA ITEM: Spotlight on Service: West Hills community College District – Avenal Family Connection

A. Background/History:

The First 5 Commission has scheduled annual program presentations by funded programs. This offers grantees the opportunity to share their successes, achievements, and progress from the last year.

B. Summary of Request, Description of Project and/or Primary Goals of Agenda Item:

The Avenal Family Connection (AFC) is a community based family resource center that is providing school readiness services to families residing in Lemoore and surrounding communities. The services offered at the Avenal Family Connection are developmentally appropriate, and specifically engineered to the age of the child.

C. Timeframe:

The Avenal Family Connection has been a component of the First 5 Kings County strategic plan since FY 2008/2009.

D. Costs:

There is no cost associated with this agenda item.

E. Staff Recommendation:

Staff recommends that the commission review the information provided by West Hills Community College regarding the Avenal Family Connection.

F. Attachments:

• West Hills Community College District – Avenal Family Connection – PowerPoint Presentation



LOCATED AT 1000 S. UNION AVE

AVENAL





COORDINATED SERVICES

- Hawaiian Elks: Vision Screening, this year 24 children received vision screenings.
- Dr. Elick's office came out for a dental presentation that reached 42 families.
- UCP to provide Parent & Me to parents and children 0-5

MOST SUCCESSFUL COMPONENT ACCORDING TO PARENTS..(UNDUPLICATED)

Snack Attack: 47 participating children





Smart Art: 40 participating children



NEW THIS YEAR! WE ARE BOTH CERTIFIED CAR SEAT TECHS

AAA Grant: received 10 convertible car seats, 10 high back boosters







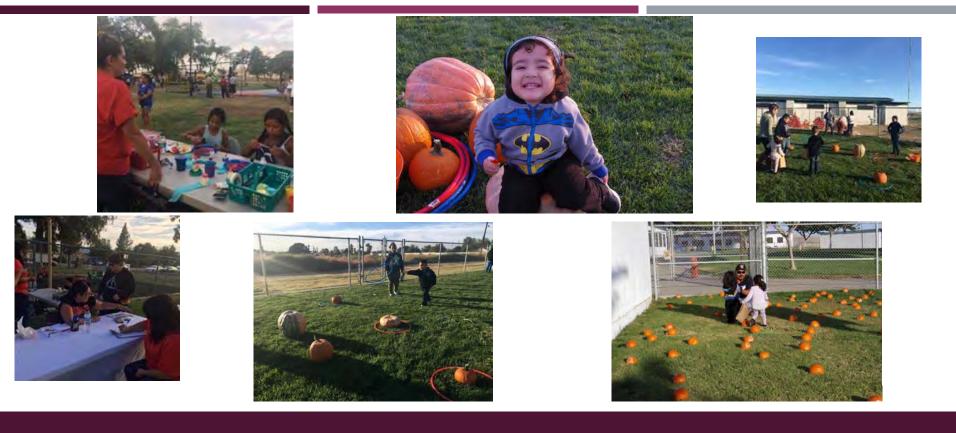




November 11, 2017 Wonderful Preschool, Avenal

Restraint Type Car Seats (All)		Number checked	Number Correct	Misuse Rate
		18	0	100%
	Rear Facing	5	0	100%
	Forward Facing	13	0	100%
Boosters		8	0	100%
Seatbelts		2	0	100%
Arrived Unrestrained		3	0	100%
Total Restraints Checked		31	0	100%

Total number of Car seats Donated: 28



OTHER SERVICES

Fall Festival National Night out



WEEK OF THE YOUNG CHILD

Coordinated w/ City of Avenal



Date of Meeting: August 14, 2018

Study Session

Staff Report June 2018 & July 2018



Staff Report June 2018 and July 2018

Grants & Contracts Program Officer Report –

- Grants & Contracts:
 - I have closed out the FY 17-18 contracts this includes ordering final payments, providing feedback and analyzing final data. All of this information will be used to complete the annual report and the audit. Additionally this information was used to complete the final grantee achievement report that is contained in this agenda packet.
- Audit and Annual Report:
 - We have reached to end of the 17/18 fiscal year, as a result we have begun the process of completing the Audit and Annual Report. I have made initial contact with Brian form Hudson and Henderson to compile the required information. Hudson and Henderson will be completing their fieldwork August 29 through August 30. Additionally I have been working to compile the data required for the annual report. I attended the introductory webinar that explains the new components and requirements for FY 17/18. Both of these items are due to First 5 California no later than October 30, 2018. I will be presenting these items to the commission at the October Commission Meeting.

• Evaluation:

 I have continued to work collaboratively with the Evaluation, Management & Training (EMT) to develop a comprehensive evaluation plan for the 2015/2020 strategic plan. We are currently working to send all data collect during the current fiscal year. Upon receiving the information EMT will process and complete the final draft of the annual evaluation report. This report will be included in our final report to First 5 California.

• IMPACT

 The First 5 Kings County IMPACT Application has been reviewed and approved by first 5 California. Over the next 3+ years this project will address the quality of preschool and childcare in Kings County. During the last month staff has worked with KCOE to develop a plan to access unspent funds from years 1 to 3.

• New Opportunities

 On 7/30/18 the California Department of Social Services released an application to fund Home Visitation services. The initial allocation provides Kings County with \$242,736 for the last 6 months of FY 18/19 and \$485,472 for both FY 19/20 and FY 20/21. The total for the 2.5 years is estimated to be \$1,213,680. My initial estimate is that we will be able to add 4 additional Home Visitors with one serving in a supervisory role.

 Prop 56 funding for oral health – annually \$30,000,000 statewide, \$186,104 locally in Kings, shall be used to provide funding to the State Department of Public Health state dental program for the purpose and goal of educating about, preventing and treating dental disease, including dental disease caused by use of cigarettes and other tobacco products. This funding has the potential to bring \$744,416 over the 4 year term. A contract with an Oral Health Consultant has been developed and is included in the agenda packet.

• Fiscal Report: June 2017

	% of Fiscal Term Expended	Percent of Spending	Comments
First 5 Operation	IS		
Personnel	100%	97%	N/A
Service & Supplies	10078	93%	N/A
TOTAL		9 5%	N/A
Linkages to Lear	ning		
Personnel		87%	N/A
Service & Supplies	100%	132%	N/A
TOTAL		100%	N/A
First 5 Total Budget		99%	FRC: 99% E3: 101% School Readiness: 100% New Project Initiative: 98%

Category	Expended	Percentage
Administration	\$133,629	6.13%
Program	\$1,809,696	83.08%
Evaluation	\$61,832	2.84%
Linkages 2 Learning	\$173,206	7.95%
Total	\$2,178,363	

School Readiness Coordinator/ June-July Linkages Report

School Transition Teams: Jefferson, Hamilton, Monroe, Washington, Armona, Kit Carson, Lakeside, Avenal, Tamarack, Kettleman City, Lemoore, Cinnamon, Meadow Lane and Engvall and Island Elementary

- Fall Orientation events: All linkages to learning school sites were closed for summer break during the month of June and July. Schools will reopen and resume classes the week of August 13th-17th. Each school will host a kinder meet and greet with students and their parents prior to the 1st day of school. The event is an opportunity to explore the new classroom, meet new classmates and of course meet the new kindergarten teacher. The meet and greet event is also helpful in calming first day jitters for both students and parents alike. The meet and greet event is well attended throughout all linkages sites as parents and children are excited about the 1st day of kindergarten. All school sites will be contacted in the next few weeks to begin planning the 2018-19 schoolyear. The first linkages meetings should take place during September/October.
- Implementation Support: With the help of our fiscal department I purchase large quantities of school supplies during the month of July. The supplies are purchased and then given away during the fall meet and greet with parents prior to the first day of school. The school supplies are sold at a significant discounted rate because they are considered back to school specials. Items purchased include; crayons, pencil boxes, glue sticks, scissors, books and pencils. These items will be sorted and then picked up by schools at my office.
- **Backpack Project:** The back pack project is in its final stages for the program year. The majority of back packs have been collected throughout the county. The next step is to count and store all of this year's left over back packs. Once the summer heat has gone down I can spend a day at our storage unit to count and organize the leftovers. I will provide a more specific number of back packs that were distributed this year on my next staff report.



Updated: August 6, 2018 *Questions? Contact Margot Grant Gould at <u>margot@first5association.org</u> or 510.227.6968.*

FamilyResilien				
Bill Number	Author	Description	Position	Status
<u>AB 992</u>	Arambula (D- Fresno)	CalWORKs: Baby Wellness and Family Support Home Visiting Program This bill would establish the Baby Wellness and Family Support Home Visiting Program that would require the State Department of Social Services to award funds to counties for the purpose of implementing or contracting with specified early home visiting programs to provide voluntary maternal, infant, and early childhood home visiting programs approved by the department and would authorize the funds to be used to coordinate early home visiting services with, among others, diaper bank services. Sponsored by the Western Center on Law & Poverty & Children Now	Support	Senate Human Services Passed in Budget \$26.7 million for 2018- 19 for mid-year implementation.
<u>SB 982</u>	Mitchell (D - LA)	CalWORKs: Ending Deep Poverty The baseline CalWORKs grant provides basic needs cash aid to low- income families with children to alleviate the impact of poverty on children and help parents overcome barriers to employment. This bill would set a new floor for the CalWORKs grant to ensure the grant level never fell below 50% of the Federal Poverty Line. CalWORKs serves 1.1 million people (80% of whom are children). An increased grant amount will directly provide more support for children and will help stabilize families. Sponsored by: Black Women for Wellness California Partnership California Latinas for Reproductive Justice Children's Defense Fund- California Coalition for Humane Immigrant Rights County Welfare Directors Association of California Coalition of CA Welfare Rights Organizations Friends Committee on Legislation of California Parent Voices California Western Center on Law and Poverty	Support	Assembly Appropriations Passed through the budget - \$400 million for 2018-19

1

Comprehensi	ve Health & Development			
<u>AB 11</u>	McCarty (D– Sacramento)	Relating to Medi-Cal: Developmental screenings This bill adds language to existing law, requiring the administration of developmental screenings, in alignment with the Bright Futures periodicity schedule, for all children, zero to three, who are enrolled in Medi-Cal. The bill also requires the use of a validated screening tool. Sponsored by First 5 Association, First 5 Ls, and Children Now	Support	Senate Appropriations
<u>SB 1004</u>	Wiener (D-San Francisco) & Moorlach (R-Orange)	Mental Health Services Act: Prevention and Early Diagnosis This bill would further define that MHSA Prevention Early Intervention (PEI) must be spent across four primary categories: (1) Childhood trauma prevention and early intervention, (2) Outreach and engagement strategies that target transition age youth, with a priority on partnership with college mental health programs, (3) Early psychosis and mood disorder detection and intervention, (4) Other programs the commission identifies, with stakeholder participation. *Requires 2/3 vote for passage Sponsored by the Steinberg Institute (sponsors of Prop 64, MHSA)	Support	Assembly Appropriations
Quality Early	Learning			
<u>AB 605</u>	Mullin (D–South San Francisco)	Day Care Centers: Birth to first grade license option This bill would require the Dept of Social Services to adopt regulations by January 1, 2019, to develop and implement a birth to entering first grade license option for day care centers. The bill would require the regulations to include age-appropriate transition times, a requirement that a single integrated license option list the age groups of children being served at the day care center, and a requirement that all other licensing regulations that apply to a day care center shall also apply to a birth to entering first grade license option. Sponsored by the Child Care Resource Center of Greater Los Angeles.		Senate Appropriations

AB 1754	McCarty (D-	Pre-K For All Act of 2018	Support if amended	Senate Appropriations
	Sacramento), Friedman, Eduardo Garcia, Bonta	This bill would streamline the eligibility requirements for full-day preschool programs operated at any California public school, including a charter school, that has at least 40% of its pupils being from low- income families, as specified pursuant to Title I, or a community-based organization that contracts with the above-described school or school district. This bill would also require the school districts to enroll the lowest-incomes children first. Sponsored by Early Edge & Advancement Project	requested that the same	
<u>AB 2001</u>	Reyes (D-San Bernardino)	 Family Child Care Home Education Networks Currently, family child care home education network (FCCHENs) program must include an assessment of each family child care home provider to ensure that services are of high quality and are educationally and developmentally appropriate. This bill would require that tools used to make these assessments be appropriate to family child care home settings, and would require a family child care home education network program to include the maintenance of a developmental portfolio for each child, as provided, and opportunities for parent involvement. Co-sponsors: Child Care Resource Center & Child Care Development Administrators Associations 	Support	Senate Appropriations
<u>AB 2292</u>	Aguiar-Curry (D– Winters)	 Child Care: Reimbursement Rates; start-up cost; grants: This bill would increase access to infant-toddler care for 0-3 year-olds: Increases the adjustment factor for infants who are 0 to 18 months of age, and toddlers who are 18 to 36 months of age, and are served in a child day care center, and for infants and toddlers who are 0 to 36 months of age and are served in a family child care home. Creates the Classroom Planning and Implementation Grant Program at CDE to support general child care and development centers or CSPP programs wanting to open new facilities or convert existing facilities to serve a different age group. Rebuilds family child care by dedicating \$6 million to the "Family Child Care Recruitment and Training Fund" to targeted outreach, recruit a new generation of family child care providers. Co-sponsored by: First 5 CA, Child Care Resource Center (CCRC), and Child Care Development Administrators Associations (CCDAA) 	t	Senate Appropriations Infant-Toddler adjustment factor passed through the 2018-19 state budget.

<u>AB 2398</u>	Mullin (D-South San Francisco)	 <i>Child Care Facilities: funding</i> The Child Care Facilities Revolving Fund in the State Treasury provides loans for the renovation, repair, or improvement of an existing building to make the building suitable for licensure for child care and development services, and for the purchase of new relocatable child care facilities. These loans are required to be repaid within 10 years. This bill would extend that timeline to 20 years. Also, the bill would expand CDE's reporting requirements on the loan fund program to also include loans made for renovations and repairs. Currently reporting is required on the number of funding requests received. <i>This bill is a spot bill, however, the Association appreciates the author's intend and leadership to tackle facilities issues.</i> 	Support	Dead
<u>AB 2626</u>	Mullin (D–South San Francisco)	 Child Care and Development Services Act This bill would make a number of changes to family eligibility, contracting, and professional supports to help counties capture more funding allocated to child care each year, including: Allow 2.9 year olds to enroll in CSPP. Eliminate requirement in CSPP that a minimum of 50% of children served are 4 years old. Change initial income eligibility to 85% of SMI, adjusted for family size. Authorize paid professional development days for profession staff. Professional staff are defined as aides, teachers, site supervisors, and directors. Allow CSPP and CCTR contractors to transfer funds between their CSPP and CCTR contracts Sponsored by the State Superintendent of Public Instruction	Support	Senate Appropriations

<u>AB 2023</u>	Caballero (D- Salinas)	Child and Dependent Care Tax Credit AB 2023 would make the state Child and Dependent Care Expenses Credit refundable, so that low- and moderate-income working families can benefit from the credit and receive a tax refund for their child care expenses. In 2011, the State Legislature made the tax credit non-refundable due to budget shortfalls. This bill would return CA to the previous policy. The LAO reported that families earning under \$50,000 annually receive no benefit under the current n on-refundable tax credit.	Support	Senate Appropriations
		The availability of this refundable provision is contingent upon appropriation by the Legislature. Sponsors: California Child Care Resource & Referral Network – Co- Sponsors: Children's Defense Fund – California, California Alternative Payment Program, Association California Catholic Conference, Inc. Coalition of California Welfare Rights Organizations, Inc.		
<u>AB 2960</u>	Thurmond (D- Richmond)	Child Care and Development Services: Online Portal This bill would require the Superintendent, on or before June 30, 2022, to develop and post on the department's Internet Web site, for use by the general public, an online portal for the state's comprehensive child care and development services. The bill would require the Superintendent, in planning for future enhancements to the online portal to convene a workgroup made up of specified stakeholders, including First 5 county commissions, before June 30, 2019. Sponsored by Resource & Referral Network	Support	Senate Appropriations