

BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

C Award C Contract C Grant

Requested Board Meeting Date: July 1, 2025

* = Mandatory, information must be provided

*Contractor/Vendor Name/Grantor (DBA):

or Procurement Director Award:

Early Childhood Development and Health Board / First Things First

*Project Title/Description:

Child Care Health Consultation

*Purpose:

This amendment provides for a new budget of \$865,125.00 for the coming fiscal year. There are no changes to the previous Scope of Services. The purpose of this agreement is to fund Child Care Health Consultation (CCHC) services for child care centers and homes in Pima County that are participating in the First Things First Quality First Program. Child Care Health Consultants work with early care and education administrative and teaching staff at centers and homes to increase knowledge and compliance with best health and safety practices.

*Procurement Method:

The grant amendment was reviewed and signed by PCAO.

*Program Goals/Predicted Outcomes:

This agreement will support CCHC services for 225 providers located within Pima County, including the Pascua Yaqui Tribe and the Tohono O'odham Nation. Pima County Health Department-Child Care Health Consultants will provide health and safety consultation training, technical assistance, and referral services to child care providers not currently participating in the Quality First Program. These services will foster healthier and safer child care environments, leading to higher star-level ratings with the Quality First program and an overall improvement in child care quality.

*Public Benefit:

By enhancing the quality of child care providers, Pima County is investing in an important time in a child's development. Families will benefit from knowing that their children are participating in quality child care and will enter the school system ready to learn.

*Metrics Available to Measure Performance:

- Number of participants

- Number and types of child care visits
- Number of trainings

*Retroactive:

No.

6M/approves 6/11/2015

	(S) BELOW MUST BE COMPLETED indicate "N/A". Make sure to complete mandatory (*) fields
Contract / Award Information	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Document Type: Department Code:	Contract Number (i.e., 15-123):
Commencement Date: Termination Date:	Prior Contract Number (Synergen/CMS):
Expense Amount \$*	Revenue Amount: \$
*Funding Source(s) required:	
Funding from General Fund? CYes CNo If Yes \$	%
Contract is fully or partially funded with Federal Funds? ^{(* Yes} If Yes, is the Contract to a vendor or subrecipient?	C No
Were insurance or indemnity clauses modified? C Yes If Yes, attach Risk's approval.	⊂ No
Vendor is using a Social Security Number? Yes If Yes, attach the required form per Administrative Procedure 22-10.	C No
Amendment / Revised Award Information	
Document Type: Department Code:	Contract Number (i.e., 15-123):
Amendment No.:	AMS Version No.:
Commencement Date:	New Termination Date:
	Prior Contract No. (Synergen/CMS):
C Expense C Revenue C Increase C Decrease Is there revenue included? C Yes C No If Yes \$ *Funding Source(s) required:	Amount This Amendment: \$
Funding from General Fund? CYes CNo If Yes \$	%
Grant/Amendment Information (for grants acceptance and awards	C Aurand C Amandament
Document Type: <u>Grant Amendment</u> Department Code: <u>HD</u>	Grant Number (i.e., 15-123): <u>70298</u>
Commencement Date: 07/01/2025 Termination Date:	<u>06/30/2026</u> Amendment Number: <u>02</u>
☐ Match Amount: \$	Revenue Amount: \$ <u>865,125.00</u>
*All Funding Source(s) required: This amendment is funded by the	e First Things First State tobacco tax revenues
Match funding from General Fund? ^{(} Yes (* No If Yes \$	%
*Match funding from other sources? ^{CYes} • No If Yes \$	%
*Funding Source: <u>N/A</u>	
*Funding Source: <u>N/A</u> *If Federal funds are received, is funding coming directly from the <u>N/A</u>	Federal government or passed through other organization(s)?
*If Federal funds are received, is funding coming directly from the <u>N/A</u>	Federal government or passed through other organization(s)?
*If Federal funds are received, is funding coming directly from the	Federal government or passed through other organization(s)? Telephone: <u>520-724-7614</u>
*If Federal funds are received, is funding coming directly from the <u>N/A</u> Contact: <u>Christina Drennan</u> Department: <u>Health</u>	
*If Federal funds are received, is funding coming directly from the N/A Contact: <u>Christina Drennan</u>	Telephone: <u>520-724-7614</u>

 Pima County Health Deparment PURPOSE OF AMENDMENT: The parties renew the Grant Agreement for the period of July 1, 2025 the Total award amount for the grant period is \$865,125 Contracted Service Units: Strategy: Child Care Health Consultation Number of Slots: (Pascua Yaqui Tribe – 2, Pima North – 134, Pin The grantee is responsible for all updated Standards of Practice located in (PGMS) under Grantee Resources/Standards of Practice. All other terms and conditions remain unchanged and are according to the renewal submission documents. 	1-Y3 ma South, Tohono ership Councils iltation fough June 30, 2026. ma South – 81, Tohono O'odham Nation – 8) n the First Things First Partner and Grant Management System
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(PGMS) under Grantee Resources/Standards of Practice. 5. All other terms and conditions remain unchanged and are according to the renewal submission documents. Contractor hereby acknowledges receipt and understanding of the	
renewal submission documents.	ne original award documents, clarification documents and
	The above referenced amendment is hereby executed effective July 1, 2025 once signed and dated below:
	Josh Allen CFO/COO
lame [Date
itle	
ate	

Deputy County Attorney Sabrina Fladness

REVIEWED Page 1 1 11 6 D Appointing Authority or Designee Pima County Health Department

Line-Item Budget and Budget Narrative

SFY26 Line-Item Budget Budget period: July 1, 2025 – June 30, 2026

Budget Category	Line Item Description	Requested Funds	Total Cost
PERSONNEL SERVICES		Personnel Services Sub Total	\$566,60
	.80 Program Manager II, 1 RN-CCHC, 8 Program Coordinate	or-	
	CCHC, .50 Program Specialist		
EMPLOYEE RELATED EX	(PENSES Emj	ployee Related Expenses Sub Total	\$153,57
	.80 Program Manager II, 1 RN-CCHC, 8 Program Coordinate	or-	
	CCHC, .50 Program Specialist		
PROFESSIONAL AND O	UTSIDE SERVICES Profess	ional & Outside Services Sub Total	\$
	N/A		
TRAVEL		Travel Sub Total	\$22,62
	In-State Travel	\$22,624	
AID TO ORGANIZATION	IS OR INDIVIDUALS Aid to Orga	anizations or Individuals Sub Total	\$
	N/A		
OTHER OPERATING EXP	PENSES Ot	her Operating Expenses Sub Total	\$45,08
	Telephones/Communications Services- 9 staff	\$55/month	\$5,94
	Internet Access	+/	+-/-
	General Office Supplies		\$5,00
	Food		
	Rent/Occupancy		
	Utilities		
	Furniture		
	Postage		
	Software (including IT supplies)		
	Dues/Subscriptions/Membership	Varies	\$1,00
	Advertising		
	Printing/Copying		\$5,00
	Equipment Maintenance		
	Professional Development (Staff Training, Conferences, Workshops, Training Fees for Staff)		
	Insurance		
	Program Materials & Supplies & Training Material		\$12,74
	Program Supplies		<i><i>Q</i>12,74</i>
	Scholarships		
	Program Incentives		\$15,39
NON-CAPITAL EQUIPME		Non-Capital Sub Total	+ -= ,= =
	N/A	*	
	SUBTOTA	L DIRECT PROGRAM COSTS	\$787,877
ADMINISTRATIVE/INDIRECT COSTS		Total Admin/Indirect	\$77,24
	Indirect/Admin Costs-10%	\$772,481	
		TOTAL	\$865,125
		IUIAL	2002,123

Authorized Signature

Kimberly Van Pelt Digtally signed by Kimberly Van Pelt Dic cn=Kimberly Van Pelt Dic cn=Kimberly Van Pelt Department, email=Kimberly, vanpelt@pima.gov, c=US Date: 2025.06.04 11:12:13 - 0700" Date 06/04/2025

SFY26 Budget Narrative

The budget narrative should provide a clear and concise description of how amounts were determined, including calculations, for each proposed line item in the Line-Item Budget. If a budget category does not apply, either leave blank or delete the category.

<u>Personnel Services</u>: Include information such as position title(s), name of employee (if known), salary, time to be spent on this program (hours or %), number of months assigned to this program, etc. Explain how the salary rate for each position was determined. If salaries are expected to increase during the program year, indicate the percentage increases for each position and justify the percent of the salary increase.

Description	Number	Unit	Rate	Total
1 Program Manager II, CCHC-V. Altamirano (1 FTE)	1664	Hour	\$40.58	\$67,525
1 CCHC Program Coordinator, lead – Y. Houston (1 FTE)	2080	Hour	\$27.71	\$57,637
1 CCHC RN-R. May (1 FTE)	2080	Hour	\$45.47	\$94,578
1 CCHC-Program Coordinator-H. Krouskop (1 FTE)	2080	Hour	\$26.19	\$54,475
1 CCHC- Program Coordinator -C. Montgomery (1 FTE)	2080	Hour	\$26.19	\$54,475
1 CCHC- Program Coordinator -T. Yanez (1 FTE)	2080	Hour	\$26.19	\$54,475
1 CCHC Program Coordinator -J. Graham (1-FTE)	2080	Hour	\$26.19	\$54,475
1 CCHC-Program Coordinator- M. DeLaTorre (1 FTE)	2080	Hour	\$26.19	\$54,475
1 CCHC-Program Coordinator-VACANT (1 FTE) NEW	2080	Hour	\$25.12	\$52,250
1 Program Specialist-T. Silver (.50 FTE)	1040	Hour	\$21.38	\$22,235
Personnel Salary Total				\$566,600

Employee Related Expenses: Include a benefit percentage and what expenses make up employee benefit costs. Indicate any special rates for part-time employees, if applicable. Explain how the benefits for each position were determined. If using a fringe benefit rate, explain how this percentage is justified or approved by your agency/organization.

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Description	Number	Unit	Rate	Total
1 Program Manager II, CCHC- V. Altamirano (1 FTE)	2080	Hour	Actual Cost	\$15,642
1 CCHC Program Coordinator, lead–Y. Houston (1 FTE)	2080	Hour	Actual Cost	\$9,907
1 CCHC RN-R. May (1 FTE)	2080	Hour	Actual Cost	\$27,638
1 CCHC-Program Coordinator-H. Krouskop (1 FTE)	2080	Hour	Actual Cost	\$10,820
1 CCHC- Program Coordinator -C. Montgomery (1 FTE)	2080	Hour	35% salary	\$19,066
1 CCHC- Program Coordinator -T. Yanez (1 FTE)	2080	Hour	Actual Cost	\$13,747
1 CCHC Program Coordinator -J. Graham (1 FTE)	2080	Hour	Actual Cost	\$14,337
1 CCHC-Program Coordinator-M. DeLaTorre (1 FTE)	2080	Hour	35% salary	\$19,066
1 CCHC-Program Coordinator-VACANT (1 FTE) NEW	2080	Hour	35% salary	\$18,287
1 Program Specialist-T. Silver (.50 FTE)	1040	Hour	Actual Cost	\$5,061
ERE Related Total \$153,57				.53,571

Professional and Outside Services: If professional consultants/services costs are proposed in the budget, define how the costs for these services were determined and the justification for the services related to the program. Explain how all contracts will be procured.

N/A

<u>Travel</u>: Separate in-state and out-of-state travel. Include a detailed breakdown of hotel, transportation, meal costs, etc. Indicate the location(s) of travel, the justification for travel, how many employees will attend and how the estimates have been determined. Applicants <u>must</u> use the State of Arizona Travel Policy reimbursement rates for mileage, lodging, and meals for both in-state and out-of-state travel. For current Arizona state rates, visit: <u>https://gao.az.gov/state-arizona-accounting-manual-saam</u> - Travel Policy (Topic 50) & Reimbursement Rates (Section 95).

Description	Number	Unit	Rate	Total
Local Mileage (Reimbursement) x 9 staff	20,000	miles	\$.70	\$14,000
Motor Pool	8	Daily Charge	\$150	\$1,200
In state conference (Prevent Child Abuse or similar in-state)	1 conf.	x 9	\$400	\$3,200
Conference-Per Diem	8	X 1	\$288	\$2,304
Hotel for conference	8	X 2	\$120	\$1,920
Travel Total				\$22,624

<u>Aid to Organizations or Individuals</u>: In the event that this application represents collaboration and you will be utilizing subcontractors (including subgrantees) to perform various components of the program, include a list of subcontractors, programmatic work each subcontractor will perform, and how costs for each subcontractor are determined.

N/A

Other Operating Expenses: Explain each item to be purchased, how the costs were determined and justify the need for the items. All purchases should be made through competitive bid or using established purchasing procedures. Items can only be categorized in the following line items: Telephones /Communications Services, Internet Access, General Office Supplies, Food, Rent/Occupancy, Utilities, Furniture, Postage, Software (including IT supplies), Dues/Subscriptions, Advertising, Printing/Copying, Equipment Maintenance, Professional Development (Staff Training, Conferences, Workshops, and Training Fees for Staff), Insurance, Program Materials, Program Supplies, Scholarships, and Program Incentives.

Description	Number	Unit	Rate	Total
Cell Phone Service – 9 staff	12	Monthly	\$55	\$5 <i>,</i> 940
Printing	1	Annual	varies	\$5,000
General Office Supplies	1	Annual	varies	\$5,000
Dues, Subscriptions, Memberships	1	Annual	varies	\$1,000
Program Supplies & Training Material	1	Annual	varies	\$12,746
Incentives for Programs/Providers	1	Annual	varies	\$15,396
Other Operating Expenses Total			Sec. and a	\$45,082

Non-Capital Equipment: For items with a unit cost less than \$5,000 and an initial estimated useful life beyond a single year, explain each item to be purchased, how the costs were determined and justify the need for the items. All purchases should be made through competitive bid or using established purchasing procedures. For example, items such as computers, printers, projectors, etc. each with a unit cost less than \$5,000. N/A

<u>Administrative/Indirect Costs</u>: Administrative costs are general or centralized expenses of overall administration of an agency/organization that receives grant funds and <u>does not include</u> particular program costs. Such costs are generally identified with the agency/organization's overall operation and are further described in 2 CFR 220, 2 CFR 225, and 2 CFR 230.

Description	Number	Unit	Rate	Total
Administrative/Indirect	\$772,481	10% of Direct Cost	10%	\$77,248
Administrative/Indirect Cost Total				\$77,248

Indirect costs are costs of an organization that are not readily assignable to a particular program, but are necessary to the operation of the organization and the performance of the program. The cost of operating and maintaining facilities, depreciation, and administrative salaries are examples of the types of costs that are usually treated as indirect.

Applicants must list either Option A or Option B and provide proper justification for expenses included:

X <u>Option A - Administrative Costs</u>: with proper justification, applicants may include an allocation for administrative costs for up to 10% of the total direct costs requested of the grant request. Administrative costs may include allocable direct charges for: costs of financial, accounting, auditing, contracting or general legal services; costs of internal evaluation, including overall management improvement costs; and costs of general liability insurance that protects the agency/organization(s) responsible for operating a program, other than insurance costs solely attributable to the program. Administrative costs may also include that portion of salaries and benefits of the program's director and other administrative staff not attributable to the time spent in support of a specific program.

OR

Option B - Federally Approved Indirect Costs: If your agency/organization has a federally approved indirect cost rate agreement in place, applicants may include an allocation for indirect costs for up to 10% of the direct costs. Applicants must provide a copy of their federally approved indirect cost rate agreement.

Authorized Signature Kimberly Van Pelt

Date 06/04/2025

辩 FIRST THINGS FIRST

Program Personnel Table

In the following table, provide a list of all personnel or positions that will be **fully or partially funded** through the program (listed under Personnel Services/Salaries in the budget) and the Full-Time Equivalent (FTE) for each position. For Key Personnel positions to be hired (TBH), describe the desired background/experience/degrees and field of study - and for all Key Personnel positions, indicate whether personnel meet the staffing qualifications in the Standards of Practice (SOP).

Key Personnel - those individuals directly responsible for program implementation (services and are fully or partially funded through the

Name/ Position Title	Background/Expertise* Must include qualifications that align with the Standards of Practice (SOP)	Key Roles and Responsibilities	Meets the SOP Staffing Qualifications Yes/No**	FTEs funded through the program
Victoria Altamirano, Public Health Program Manager II	More than 20 years of experience working in the public health field. Management experience in Public Health exceeds 5 years. Education: MAEd, bachelor's in management.	The Public Health Program Manager II provides administrative leadership and oversight of the Maternal/Child Health Programs within the Community Outreach, Prevention Education Division. This position provides direct managerial oversight of the Child Care Health Consultant FTF grant including budget allocation and hiring processes.	Hired before July 1, 2018	0.80
Richard May, Public Health Nurse/CCHC	Experience working as a Public Health Nurse in Pima County Health Department. Has experience working with children in the clinical setting.	Provides assessment, consultation, referral, and training to Quality First-enrolled programs.	Yes	1.0
Yvette Houston, Public Health Coordinator/CCHC	Experience working with children in childcare and has a bachelor's in public health.	Provides assessment, consultation, referral, and training to Quality First-enrolled programs. Will serve as lead CCHC for the program.	Yes	1.0
Chris Montgomery, Public Health Coordinator/ CCHC	Experience working as an educator working with groups of various ages. Has a degree in English	Provides assessment, consultation, referral, and training to Quality First-enrolled programs.	No but an exemption was approved by FTF	1.0

		Prog	ram Total FTEs:	9.3
Tiana Silver, Program Serv	vices Specialist, provides administrative support to staff. A	lso has MPH.		.50
Additional Personnel - the oversight of the program.	ose individuals partially funded through the proposed prog	gram but who do not directly implement or have direct p	program	
VACANT, Public Health Coordinator/CCHC		Provides assessment, consultation, referral, and training to Quality First-enrolled programs		1.0
Mayra DeLaTorre, Public Health Coordinator/ CCHC	Has a bachelor's degree in international relations and has experience providing education to people of various backgrounds and is fluent in Spanish	Provides assessment, consultation, referral, and training to Quality First-enrolled programs.	Yes	1.0
Haley Krouskop, Public Health Coordinator/ CCHC	Has bachelor's degrees in biochemistry and sociology and has a Master's degree in Public Health	Provides assessment, consultation, referral, and training to Quality First-enrolled programs.	Yes	1.0
Jalelah Graham, Public Health Coordinator/ CCHC	Experience working students and has a master's degree in public health	Provides assessment, consultation, referral, and training to Quality First-enrolled programs.	Yes	1.0
Tyra Yanez, Public Health Coordinator/ CCHC	Experience working with children in childcare as a teacher's aid and has a master's degree in public health	Provides assessment, consultation, referral, and training to Quality First-enrolled programs.	Yes	1.0

* Resumes and/or job descriptions for key personnel may be requested at any time but unless otherwise indicated, they do not need to be submitted.

** By signing this document, I assure that all key personnel meet the Personnel/Staff Qualifications outlined in the FTF Standards of Practice or if any personnel do not meet the Staff Qualification standards, they have been approved through the FTF Request for Exemption from Staff Qualification process prior to hire.

Victoria Altamirano, Public Health Program Manager II	6/4/2025	
Name/Title	Date	