



**BOARD OF SUPERVISORS AGENDA ITEM REPORT
CONTRACTS / AWARDS / GRANTS**

Award Contract Grant

Requested Board Meeting Date: June 12, 2018

* = *Mandatory, information must be provided.*

or Procurement Director Award

***Contractor/Vendor Name/Grantor (DBA):**

Arizona Department of Health Services

***Project Title/Description:**

Tobacco and Chronic Disease Prevention. The IGA being amended is included here for reference.

***Purpose:**

Educate the community on the harms of tobacco and ways to prevent/manage chronic health conditions. Reduce prevalence levels of both tobacco use and chronic conditions related to tobacco use. Amendment #2 extends the IGA for an additional year, to June 30, 2019.

***Procurement Method:**

N/A - Grant IGA

***Program Goals/Predicted Outcomes:**

Reduce tobacco use and exposure among adults and children. Reduce the prevalence rate of the five leading causes of death related to tobacco use and assist those with existing conditions to manage them.

***Public Benefit:**

The program increases the health and wellness of residents and reduces the rate of premature death due to tobacco and chronic diseases.

***Metrics Available to Measure Performance:**

The following reporting tools measure the program's performance:

- Division Monthly Reports
- ADHS quarterly reports (Action Plan)
- Arizona Youth Survey
- Youth Risk Factor Surveillance System
- Behavior Risk Factor Surveillance System

***Retroactive:**

No.

MAY 30 10 50 AM '18

Contract / Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e.,15-123): _____

Effective Date: _____ Termination Date: _____ Prior Contract Number (Synergen/CMS): _____

Expense Amount: \$ _____ Revenue Amount: \$ _____

***Funding Source(s) required:**

Funding from General Fund? Yes No If Yes \$ _____ % _____

Contract is fully or partially funded with Federal Funds? Yes No

***Is the Contract to a vendor or subrecipient?**

Were insurance or indemnity clauses modified? Yes No

If Yes, attach Risk's approval

Vendor is using a Social Security Number? Yes No

If Yes, attach the required form per Administrative Procedure 22-73.

Amendment / Revised Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e.,15-123): _____

Amendment No.: _____ AMS Version No.: _____

Effective Date: _____ New Termination Date: _____

Prior Contract No. (Synergen/CMS): _____

Expense or Revenue Increase Decrease Amount This Amendment: \$ _____

Is there revenue included? Yes No If Yes \$ _____

***Funding Source(s) required:**

Funding from General Fund? Yes No If Yes \$ _____ % _____

Grant/Amendment Information (for grants acceptance and awards) Award Amendment

Document Type: GTAM Department Code: HD Grant Number (i.e.,15-123): 18-40

Effective Date: 07/01/2018 Termination Date: 06/30/2019 Amendment Number: 02

Match Amount: \$ _____ Revenue Amount: \$ _____

***All Funding Source(s) required:** The money for the Tobacco program has been moved to the Healthy People Healthy Communities IGA with ADHS. This IGA currently does not have any funding associated with it.

***Match funding from General Fund?** Yes No If Yes \$ _____ % _____

***Match funding from other sources?** Yes No If Yes \$ _____ % _____

***Funding Source:** _____

***If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?** N/A

Contact: Sharon Grant

Department: Health Telephone: 724-7842

Department Director Signature/Date: *Marcy [Signature]* 5.10.18

Deputy County Administrator Signature/Date: *[Signature]* 5-15-2018

County Administrator Signature/Date: *[Signature]* 5-15-2018

(Required for Board Agenda/Addendum Items)



**INTERGOVERNMENTAL AGREEMENT (IGA)
AMENDMENT**

ARIZONA DEPARTMENT OF
HEALTH SERVICES
150 N. 18th Avenue, Ste. No. 260
Phoenix, Arizona 85007

CONTRACT No.: ADHS14-072245

AMENDMENT No.: 2

PROCUREMENT OFFICER
Merrilyn Forbin

TOBACCO EDUCATION AND PREVENTION SERVICES

Effective July 1, 2018, it is mutually agreed that the Intergovernmental Agreement (IGA) referenced is amended as follows:

Pursuant to the Terms and Conditions, Provision Four (4) Contract Administration and Operation, Item 4.2, Contract Renewal, the Contract is hereby extended through **June 30, 2019** (Its Fifth Year).

ALL OTHER PROVISIONS OF THIS AGREEMENT SHALL REMAIN IN THEIR ENTIRETY.

Pima County Health Department
Contractor Name

3950 S Country Club
Address

Tucson Arizona 85714
City State Zip

CONTRACTOR SIGNATURE

Contractor Authorized Signature

Printed Name

Title

CONTRACTOR ATTORNEY SIGNATURE

Pursuant to A.R.S. § 11-952, the undersigned public agency attorney has determined that this Intergovernmental Agreement is in proper form and is within the powers and authority granted under the laws of the State of Arizona.

Paula S. Ferrera 4.24.18
Signature Date

Paula S. Ferrera
Printed Name

This Intergovernmental Agreement Amendment shall be effective the date indicated. The Public Agency is hereby cautioned not to commence any billable work or provide any material, service or construction under this IGA until the IGA has been executed by an authorized ADHS signatory.

State of Arizona

Signed this _____ day of _____ 20____

Procurement Officer

RESERVED FOR USE BY THE SECRETARY OF STATE

Under House Bill 2011, A.R.S. § 11-952 was amended to remove the requirement that Intergovernmental Agreements be filed with the Secretary of State.

Signature Date
Assistant Attorney General

Printed Name:

REVIEWED BY:

Appointing Authority or Designee
Pima County Health Department



INTERGOVERNMENTAL AGREEMENT (IGA)

Contract No. ADHS14-072245

ARIZONA DEPARTMENT OF HEALTH SERVICES
1740 West Adams, Room 303
Phoenix, Arizona 85007
(602) 542-1040
(602) 542-1741 FAX

Project Title: TOBACCO EDUCATION/PREVENTION SERVICES

Begin Date: JULY 1, 2014

Geographic Service Area: PIMA COUNTY

Termination Date: JUNE 30, 2017

Arizona Department of Health Services has authority to contract for services specified herein in accordance with A.R.S. §§ 11-951, 11-952, 36-104 and 36-132. The Contractor represents that it has authority to contract for the performance of the services provided herein pursuant to:

- Counties: A.R.S. §§ 11-201, 11-951, 11-952 and 36-182.
- Indian Tribes: A.R.S. §§ 11-951, 11-952 and the rules and sovereign authority of the contracting Indian Nation.
- School Districts: A.R.S. §§ 11-951, 11-952, and 15-342.
- City of Phoenix: Chapter II, §§ 1 & 2, Charter, City of Phoenix.
- City of Tempe: Chapter 1, Article 1, §§ 1.01 & 1.03, Charter, City of Tempe.

Amendments signed by each of the parties and attached hereto are hereby adopted by reference as a part of this Contract, from the effective date of the Amendment, as if fully set out herein.

<p>Arizona Transaction (Sales) Privilege: _____</p> <p>Federal Employer Identification No.: _____</p> <p>Tax License No.: _____</p> <p>Contractor Name: Pima County Health Department Address: 3950 South Country Club Road Tucson, Arizona 85714</p>	<p style="text-align: center;">FOR CLARIFICATION, CONTACT:</p> <p>Name: <u>Francisco Garcia, M.D., Director</u></p> <p>Telephone: <u>(520) 243-7704</u></p> <p>Fax No: _____</p> <p>E-mail: <u>Francisco.garcia@pima.gov</u></p>
<p style="text-align: center;">CONTRACTOR SIGNATURE:</p> <p>The Contractor agrees to perform all the services set forth in the Agreement and Work Statement.</p> <p style="text-align: center;"><i>Sharon Bronson</i> JUL 01 2014</p> <p>Signature of Person Authorized to Sign _____ Date _____</p> <p>Sharon Bronson, Chair</p> <p>Print Name and Title _____</p>	<p>This Contract shall henceforth be referred to as Contract No. <u>ADHS14-072245</u></p> <p>The Contractor is hereby cautioned not to commence any billable work or provide any material, service or construction under this Contract until Contractor receives a fully executed copy of the Contract.</p> <p>State of Arizona</p> <p>Signed this <u>21</u> day of <u>July</u>, 2014</p> <p style="text-align: center;"><i>Sharon Bronson</i></p> <p>Procurement Officer _____</p>
<p style="text-align: center;">CONTRACTOR ATTORNEY SIGNATURE:</p> <p>Pursuant to A.R.S. § 11-952, the undersigned Contractor's Attorney has determined that this Intergovernmental Agreement is in proper form and is within the powers and authority granted under the laws of Arizona. Subject to Contractor's Addendum:</p> <p style="text-align: center;"><i>Barbara S. Burstin</i> JUNE 20, 2014</p> <p>Signature of Person Authorized to Sign _____ Date _____</p> <p>Barbara S. Burstin Deputy County Attorney</p> <p>Print Name and Title _____</p>	<p style="text-align: center;">RESERVED FOR USE BY THE SECRETARY OF STATE</p> <p>Under House Bill 2011, A.R.S. § 11-952 was amended to remove the requirement that Intergovernmental Agreements be filed with the Secretary of State.</p>
<p>Attorney General Contract, No. P0012014000078, which is an Agreement between public agencies, has been reviewed pursuant to A.R.S. § 11-952 by the undersigned Assistant Attorney General, who has determined that it is in the proper form and is within the powers granted under the laws of the State of Arizona to those parties to the Agreement represented by the Attorney General.</p> <p>The Attorney General, BY:</p> <p style="text-align: center;"><i>Patricia Lettagna</i> 7-15-14</p> <p>Signature _____ Date _____</p> <p>Assistant Attorney General: Patricia Lettagna</p>	<div style="border: 1px solid black; padding: 5px;"> <p>REVIEWED BY: <i>MacCallister</i></p> <p>Appointing Authority or Designee Pima County Health Department</p> </div>

ATTEST:

Robert Brigode

Clerk, Board of Supervisors

CONTRACT NUMBER ADHS14-072245	INTERGOVERNMENTAL AGREEMENT TERMS AND CONDITIONS
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1. **DEFINITION OF TERMS.** As used in this Contract, the terms listed below are defined as follows:
- 1.1 "Attachment" means any document attached to the Contract and incorporated into the Contract.
 - 1.2 "ADHS" means Arizona Department of Health Services.
 - 1.3 "Budget Term" means the period of time for which the contract budget has been created and during which funds should be expended.
 - 1.4 "Change Order" means a written order that is signed by a Procurement Officer and that directs the Contractor to make changes authorized by the Uniform Terms and Conditions of the Contract.
 - 1.5 "Contract" means the combination of the Uniform and Special Terms and Conditions, the Specifications and Statement or Scope of Work, Attachments, Referenced Documents, any Contract Amendments and any terms applied by law.
 - 1.6 "Contract Amendment" means a written document signed by the Procurement Officer and the Contractor that is issued for the purpose of making changes in the Contract.
 - 1.7 "Contractor" means any person who has a Contract with the Arizona Department of Health Services.
 - 1.8 "Cost Reimbursement" means a contract under which a contractor is reimbursed for costs, which are reasonable, allowable and allocable in accordance with the contract terms and approved by ADHS.
 - 1.9 "Days" means calendar days unless otherwise specified.
 - 1.10 "Fixed Price" establishes a set price per unit of service. The set price shall be based on costs, which are reasonable, allowable and allocable.
 - 1.11 "Gratuity" means a payment, loan, subscription, advance, deposit of money, services, or anything of more than nominal value, present or promised, unless consideration of substantially equal or greater value is received.
 - 1.12 "Materials" unless otherwise stated herein, means all property, including but not limited to equipment's, supplies, printing, insurance and leases of property.
 - 1.13 "Procurement Officer" means the person duly authorized by the State to enter into and administer Contracts and make written determinations with respect to the Contract.
 - 1.14 "Purchase Order" means a written document that is signed by a Procurement Officer, that requests a vendor to deliver described goods or services at a specific price and that, on delivery and acceptance of the goods or services by ADHS, becomes an obligation of the State.
 - 1.15 "Services" means the furnishing of labor, time or effort by a Contractor or Subcontractor.
 - 1.16 "Subcontract" means any contract, express or implied, between the Contractor and another party or between a subcontractor and another party delegating or assigning, in whole or in part, the making or furnishing of any material or any service required for the performance of this Contract.
 - 1.17 "State" means the State of Arizona and/or the ADHS. For purposes of this Contract, the term "State" shall not include the Contractor.

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	TERMS AND CONDITIONS

2. CONTRACT TYPE.

This Contract shall be:

 X Cost Reimbursement

3. CONTRACT INTERPRETATION.

- 3.1 Arizona Law. The law of Arizona applies to this Contract including, where applicable, the Uniform Commercial Code as adopted by the State of Arizona.
- 3.2 Implied Contract Terms. Each provision of law and any terms required by law to be in this Contract are a part of this Contract as if fully stated in it.
- 3.3 Contract Order of Precedence. In the event of a conflict in the provisions of the Contract, as accepted by the State and as they may be amended, the following shall prevail in the order set forth below:
 - 3.3.1 Terms and Conditions;
 - 3.3.2 Statement or Scope of Work;
 - 3.3.3 Attachments;
 - 3.3.4 Referenced Documents.
- 3.4 Relationship of Parties. The Contractor under this Contract is an independent Contractor. Neither party to this Contract shall be deemed to be the employee or agent of the other party to the Contract.
- 3.5 Severability. The provisions of this Contract are severable. Any term or condition deemed illegal or invalid shall not affect any other term or condition of the Contract.
- 3.6 No Parole Evidence. This Contract is intended by the parties as a final and complete expression of their agreement. No course of prior dealings between the parties and no usage of the trade shall supplement or explain any terms used in this document.
- 3.7 No Waiver. Either party's failure to insist on strict performance of any term or condition of the Contract shall not be deemed a waiver of that term or condition even if the party accepting or acquiescing in the nonconforming performance knows of the nature of the performance and fails to object to it.
- 3.8 Headings. Headings are for organizational purposes only and shall not be interpreted as having legal significance or meaning.

4. CONTRACT ADMINISTRATION AND OPERATION.

- 4.1 Term. As indicated on the signature page of the Contract, the Contract shall be effective as of the Begin Date and shall remain effective until the Termination Date.
- 4.2 Contract Renewal. This Contract shall not bind, nor purport to bind, the State for any contractual commitment in excess of the original Contract period. The term of the Contract shall not exceed five years. However, if the original Contract period is for less than five years, the State shall have the right, at its sole option, to renew the Contract, so long as the original Contract period together with the renewal periods does not exceed five years. If the State exercises such rights, all terms, conditions and provisions of the original Contract shall remain the same and apply during the renewal period with the exception of price and Scope of Work, which may be renegotiated.
- 4.3 New Budget Term. If a budget term has been completed in a multi-term Contract, the parties may agree to

CONTRACT NUMBER ADHS14-072245	INTERGOVERNMENTAL AGREEMENT TERMS AND CONDITIONS
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change the amount and type of funding to accommodate new circumstances in the next budget term. Any increase or decrease in funding at the time of the new budget term shall coincide with a change in the Scope of Work or change in cost of services as approved by the Arizona Department of Health Services.

- 4.4 **Non-Discrimination.** The Contractor shall comply with State Executive Order No. 2009-09 and all other applicable Federal and State laws, rules and regulations, including the Americans with Disabilities Act.
- 4.5 **Records and Audit.** Under A.R.S. § 35-214 and A.R.S. § 35-215, the Contractor shall retain and shall contractually require each subcontractor to retain all data and other records ("records") relating to the acquisition and performance of the Contract for a period of five years after the completion of the Contract. All records shall be subject to inspection and audit by the State and where applicable the Federal Government at reasonable times. Upon request, the Contractor shall produce a legible copy of any or all such records.
- 4.6 **Financial Management.** For all contracts, the practices, procedures, and standards specified in and required by the Accounting and Auditing Procedures Manual for the ADHS funded programs shall be used by the Contractor in the management of Contract funds and by the State when performing a Contract audit. Funds collected by the Contractor in the form of fees, donations and/or charges for the delivery of these Contract services shall be accounted for in a separate fund.
 - 4.6.1 ***Federal Funding.*** Contractors receiving federal funds under this Contract shall comply with the certified finance and compliance audit provision of the Office of Management and Budget (OMB) Circular A-133, if applicable. The federal financial assistance information shall be stated in a Change Order or Purchase Order.
 - 4.6.2 ***State Funding.*** Contractors receiving state funds under this Contract shall comply with the certified compliance provisions of A.R.S. § 35-181.03.
- 4.7 **Inspection and Testing.** The Contractor agrees to permit access, at reasonable times, to its facilities.
- 4.8 **Notices.** Notices to the Contractor required by this Contract shall be made by the State to the person indicated on the signature page by the Contractor, unless otherwise stated in the Contract. Notices to the State required by the Contract shall be made by the Contractor to an ADHS Procurement Officer, unless otherwise stated in the Contract. An authorized ADHS Procurement Officer and an authorized Contractor representative may change their respective person to whom notice shall be given by written notice, and an amendment to the Contract shall not be necessary.
- 4.9 **Advertising and Promotion of Contract.** The Contractor shall not advertise or publish information for commercial benefit concerning this Contract without the prior written approval of an ADHS Procurement Officer.
- 4.10 **Property of the State.**
 - 4.10.1 ***Equipment.*** Except as provided below or otherwise agreed to by the parties, the title to any and all equipment acquired through the expenditure of funds received from the State shall remain the property of the State by and through the ADHS and, as such, shall remain under the sole direction, management and control of the ADHS. When this Contract is terminated, the disposition of all such property shall be determined by the ADHS. For Fixed Price contracts, when the Contractor provides the services/materials required by the Contract, any and all equipment purchased by the Contractor remains the property of the Contractor. All purchases of equipment need to be reported to the ADHS Office of Inventory Control.
 - 4.10.2 ***Title and Rights to Materials.*** As used in this section, the term "Materials" means all products created or produced by the Contractor under this Contract, including, but not limited to: written and electronic information, recordings, reports, research, research findings, conclusions, abstracts, results, software, data and any other intellectual property or deliverables created, prepared, or received by the Contractor in performance of this Contract. Contractor acknowledges that all

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	TERMS AND CONDITIONS

Materials are the property of the State by and through the ADHS and, as such, shall remain under the sole direction, management and control of the ADHS. The Contractor is not entitled to a patent or copyright on these Materials and may not transfer a patent or copyright on them to any other person or entity. To the extent any copyright in any Materials may originally vest in the Contractor, the Contractor hereby irrevocably transfers to the ADHS, for and on behalf of the State, all copyright ownership. The ADHS shall have full, complete and exclusive rights to reproduce, duplicate, adapt, distribute, display, disclose, publish, release and otherwise use all Materials. The Contractor shall not use or release these Materials without the prior written consent of the ADHS. When this Contract is terminated, the disposition of all such Materials shall be determined by the ADHS. Further, the Contractor agrees to give recognition to the ADHS for its support of any program when releasing or publishing program Materials.

- 4.10.3 *Notwithstanding the above, if the Contractor is a State agency, the following shall apply instead:* It is the intention of ADHS and Contractor that all material and intellectual property developed under this Agreement be used and controlled in ways to produce the greatest benefit to the parties to this Contract and the citizens of the State of Arizona. As used in this paragraph, "Material" means all written and electronic information, recordings, reports, findings, research information, abstracts, results, software, data, discoveries, inventions, procedures and processes of services developed by the Contractor and any other materials created, prepared or received by the Contractor and subcontractors in performance of this Agreement. "Material" as used herein shall not include any pre-existing data, information, materials, discoveries, inventions or any form of intellectual property invented, created, developed or devised by Contractor (or its employees, subcontractors or agents) prior to the commencement of the services funded by this Agreement or that may result from Contractor's involvement in other service activities that are not funded by the Agreement.
- 4.10.4 Title and exclusive copyright to all Material shall vest in the State of Arizona, subject to any rights reserved on behalf of the federal government. As State agencies and instrumentalities, both ADHS and Contractor shall have full, complete, perpetual, irrevocable and non-transferable rights to reproduce, duplicate, adapt, make derivative works, distribute, display, disclose, publish and otherwise use any and all Material. The Contractor's right to use Material shall include the following rights: the right to use the Material in connection with its internal, non-profit research and educational activities, the right to present at academic or professional meetings or symposia and the right to publish in journals, theses, dissertations or otherwise of Contractor's own choosing. Contractor agrees to provide ADHS with a right of review prior to any publication or public presentation of the Material, and ADHS shall be entitled to request the removal of its confidential information or any other content the disclosure of which would be contrary to the best interest of the State of Arizona. Neither party shall release confidential information to the public without the prior expressly written permission of the other, unless required by the State public records statutes or other law, including a court order. Each party agrees to give recognition to the other party in all public presentations or publications of any Material, when releasing or publishing them.
- 4.10.5 In addition, ADHS and Contractor agree that any and all Material shall be made freely available to the public to the extent it is in the best interest of the State. However, if either party wants to license or assign an intellectual property interest in the material to a third-party for monetary compensation, ADHS and Contractor agree to convene to determine the relevant issues of title, copyright, patent and distribution of revenue. In the event of a controversy as to whether the Material is being used for monetary compensation or in a way that interferes with the best interest of the state or ADHS, then the Arizona Department of Administration shall make the final decision. Notwithstanding the above, "monetary compensation" does not include compensation paid to an individual creator for traditional publications in academia (the copyrights to which are Employee-Excluded Works under ABOR Intellectual Property Policy Section 6-908C.4.), an honorarium or other reimbursement of expenses for an academic or professional presentation, or an unprofitable distribution of Material.
- 4.11 E-Verify Requirements In accordance with A.R.S. § 41-4401, Contractor warrants compliance with all Federal immigration laws and regulations relating to employees and warrants its compliance with Section A.R.S. § 23-214, Subsection A.

CONTRACT NUMBER ADHS14-072245	INTERGOVERNMENTAL AGREEMENT TERMS AND CONDITIONS
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4.12 Federal Immigration and Nationality Act The Contractor shall comply with all federal, state and local immigration laws and regulations relating to the immigration status of their employees during the term of the Contract. Further, the Contractor shall flow down this requirement to all subcontractors utilized during the term of the Contract. The State shall retain the right to perform random audits of Contractor and subcontractor records or to inspect papers of any employee thereof to ensure compliance. Should the State determine that the Contractor and/or any subcontractors be found noncompliant, the State may pursue all remedies allowed by law, including, but not limited to; suspension of work, termination of the Contract for default and suspension and/or debarment of the Contractor.

5. COSTS AND PAYMENTS.

5.1 Payments. Payments shall comply with the requirements of A.R.S. Titles 35 and 41, net 30 days. Upon receipt and acceptance of goods or services, the Contractor shall submit a complete and accurate Contractor's Expenditure Report for payment from the State within thirty (30) days, as provided in the Accounting and Auditing Procedures Manual for the ADHS.

5.2 Recoupment of Contract Payments.

5.2.1 Unearned Advanced Funds. Any unearned State funds that have been advanced to the Contractor and remain in its possession at the end of each budget term, or at the time of termination of the Contract, shall be refunded to the ADHS within forty-five (45) days of the end of a budget term or of the time of termination.

5.2.2 Contracted Services. In a fixed price contract, if the number of services provided is less than the number of services for which the Contractor received compensation, funds to be returned to the ADHS shall be determined by the Contract price. Where the price is determined by cost per unit of service or material, the funds to be returned shall be determined by multiplying the unit of service cost by the number of services the Contractor did not provide during the Contract term. Where the price for a deliverable is fixed, but the deliverable has not been completed, the Contractor shall be paid a pro rata portion of the completed deliverable. In a cost reimbursement contract, the ADHS shall pay for any costs that the Contractor can document as having been paid by the Contractor and approved by ADHS. In addition, the Contractor will be paid its reasonable actual costs for work in progress as determined by Generally Accepted Accounting Procedures up to the date of contract termination.

5.2.3 Refunds. Within forty-five (45) days after the end of each budget term or of the time of termination of the Contract, the Contractor shall refund the greater of: i) the amount refundable in accordance with paragraph 4.2.1, Unearned Advanced Funds; or ii) the amount refundable in accordance with paragraph 5.2.2, Contracted Services.

5.2.4 Unacceptable Expenditures. The Contractor agrees to reimburse the ADHS for all Contract funds expended, which are determined by the ADHS not to have been disbursed by the Contractor in accordance with the terms of this Contract. The Contractor shall reimburse ADHS within 45 days of the determination of unacceptability.

5.3 Unit Costs/Rates or Fees. Unit costs/rates or fees shall be based on costs, which are determined by ADHS to be reasonable, allowable and allocable as outlined in the Accounting and Auditing Procedures Manual for the ADHS.

5.4 Applicable Taxes.

5.4.1 State and Local Transaction Privilege Taxes. The State of Arizona is subject to all applicable state and local transaction privilege taxes. Transaction privilege taxes apply to the sale and are the responsibility of the seller to remit. Failure to collect taxes from the buyer does not relieve the seller from its obligation to remit taxes.

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	TERMS AND CONDITIONS

5.4.2 *Tax Indemnification.* The Contractor and all subcontractors shall pay all federal, state and local taxes applicable to its operation and any persons employed by the Contractor. Contractor shall require all subcontractors to hold the State harmless from any responsibility for taxes, damages and interest, if applicable, contributions required under Federal, and/or state and local laws and regulations and any other costs, including transaction privilege taxes, unemployment compensation insurance, Social Security and Worker's Compensation.

5.4.3 *I.R.S. W9 Form.* In order to receive payment under any resulting Contract, the Contractor shall have a current I.R.S. W9 Form on file with the State of Arizona.

5.5 Availability of Funds for the Next Fiscal Year. Funds may not be presently available for performance under this Contract beyond the first year of the budget term or Contract term. The State may reduce payments or terminate this Contract without further recourse, obligation or penalty in the event that insufficient funds are appropriated in the subsequent budget term. The State shall not be liable for any purchases or Subcontracts entered into by the Contractor in anticipation of such funding. The Procurement Officer shall have the discretion in determining the availability of funds.

5.6 Availability of Funds for the Current Contract Term. Should the State Legislature enter back into session and decrease the appropriations through line item or general fund reductions, or for any other reason these goods or services are not funded as determined by ADHS, the following actions may be taken by ADHS:

- 5.6.1 Accept a decrease in price offered by the Contractor;
- 5.6.2 Reduce the number of goods or units of service and reduce the payments accordingly;
- 5.6.3 Offer reductions in funding as an alternative to Contract termination; or
- 5.6.4 Cancel the Contract.

6. CONTRACT CHANGES.

6.1 Amendments, Purchase Orders and Change Orders. This Contract is issued under the authority of the Procurement Officer who signed this Contract. The Contract may be modified only through a Contract Amendment, Purchase Order and/or Change Order within the scope of the Contract, unless the change is administrative or otherwise permitted by the Special Terms and Conditions. Changes to the Contract, including the addition of work or materials, the revision of payment terms, or the substitution of work or materials, directed by an unauthorized State employee or made unilaterally by the Contractor are violations of the Contract and of applicable law. Such changes, including unauthorized Contract Amendments, Purchase Orders and/or Change Orders, shall be void and without effect, and the Contractor shall not be entitled to any claim under this Contract based on those changes.

6.2 Subcontracts. The Contractor shall not enter into any subcontract under this Contract without the advance written approval of the Procurement Officer. The subcontract shall incorporate by reference all material and applicable terms and conditions of this Contract.

6.3 Assignments and Delegation. The Contractor shall not assign any right nor delegate any duty under this Contract without the prior written approval of the Procurement Officer. The State shall not unreasonably withhold approval.

7. RISK AND LIABILITY.

7.1 Risk of Loss. The Contractor shall bear all loss of conforming material covered under this Contract until received and accepted by authorized personnel at the location designated in the Purchase Order, Change Order or Contract. Mere receipt does not constitute final acceptance. The risk of loss for nonconforming materials shall remain with the Contractor regardless of receipt.

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	TERMS AND CONDITIONS

- 7.2 **Mutual Indemnification.** Each party (as "indemnitor") agrees to indemnify, defend and hold harmless the other party (as "indemnitee") from and against any and all claims, losses, liability, costs or expenses (including reasonable attorney's fees) (hereinafter collectively referred to as "claims") arising out of bodily injury of any person (including death) or property damage, but only to the extent that such claims, which result in vicarious/derivative liability to the indemnitee, are caused by the act, omission, negligence, misconduct, or other fault of the indemnitor, its officers, officials, agents, employees or volunteers.
- 7.3 **Indemnification - Patent and Copyright.** To the extent permitted by A.R.S. § 41-621 and A.R.S. § 35-154, the Contractor shall indemnify and hold harmless the State against any liability, including costs and expenses, for infringement of any patent, trademark or copyright arising out of performance of the Contract or use by the State of materials furnished by or work performed under this Contract. The State shall reasonably notify the Contractor of any claim for which it may be liable under this paragraph.
- 7.4 **Force Majeure.**
- 7.4.1 **Liability and Definition.** Except for payment of sums due, neither party shall be liable to the other nor deemed in default under this Contract if and to the extent that such party's performance of this Contract is prevented by reason of force majeure. The term "*force majeure*" means an occurrence that is beyond the control of the party affected and occurs without its fault or negligence. Without limiting the foregoing, force majeure includes acts of God; acts of the public enemy; acts of terrorism; war; riots; strikes; mobilization; labor disputes; civil disorders; fire; flood; lockouts; injunctions-interventions not caused by or resulting from the act or failure to act of the parties; failures or refusals to act by government authority not caused by or resulting from the act or failure to act of the parties; and other similar occurrences beyond the control of the party declaring force majeure, which such party is unable to prevent by exercising reasonable diligence.
- 7.4.2 **Exclusions.** Force Majeure shall not include the following occurrences:
- 7.4.2.1 Late delivery of Materials caused by congestion at a manufacturer's plant or elsewhere, or an oversold condition of the market;
- 7.4.2.2 Late performance by a subcontractor unless the delay arises out of a force majeure occurrence in accordance with this force majeure term and condition; or
- 7.4.2.3 Inability of either the Contractor or any subcontractor to acquire or maintain any required insurance, bonds, licenses or permits.
- 7.4.3 **Notice.** If either party is delayed at any time in the progress of the work by force majeure, the delayed party shall notify the other party in writing of such delay, as soon as is practicable and no later than the following working day of the commencement thereof, and shall specify the causes of such delay in such notice. Such notice shall be delivered or mailed certified-return receipt and shall make a specific reference to this article, thereby invoking its provisions. The delayed party shall cause such delay to cease as soon as practicable and shall notify the other party in writing when it has done so. The time of completion shall be extended by Contract Amendment for a period of time equal to the time that the results or effects of such delay prevent the delayed party from performing in accordance with this Contract.
- 7.4.4 **Default.** Any delay or failure in performance by either party hereto shall not constitute default hereunder or give rise to any claim for damages or loss of anticipated profits if, and to the extent that, such delay or failure is caused by force majeure.
- 7.5 **Third Party Antitrust Violations.** The Contractor assigns to the State any claim for overcharges resulting from antitrust violations to the extent that those violations concern materials or services supplied by third parties to the Contractor for or toward the fulfillment of this Contract.

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	TERMS AND CONDITIONS

8. DESCRIPTION OF MATERIALS. The following provisions shall apply to Materials only:

- 8.1 Liens. The Contractor agrees that the Materials supplied under this Contract are free of liens. In the event the Materials are not free of liens, Contractor shall pay to remove the lien and any associated damages or replace the Materials with Materials free of liens.
- 8.2 Quality. Unless otherwise modified elsewhere in these terms and conditions, the Contractor agrees that, for one year after acceptance by the State of the Materials, they shall be:
 - 8.2.1 Of a quality to pass without objection in the Contract description;
 - 8.2.2 Fit for the intended purposes for which the Materials are used;
 - 8.2.3 Within the variations permitted by the Contract and are of even kind, quantity, and quality within each unit and among all units;
 - 8.2.4 Adequately contained, packaged and marked as the Contract may require; and
 - 8.2.5 Conform to the written promises or affirmations of fact made by the Contractor.
- 8.3 Inspection/Testing. Subparagraphs 8.1 through 8.2 of this paragraph are not affected by inspection or testing of or payment for the Materials by the State.
- 8.4 Compliance With Applicable Laws. The Materials and services supplied under this Contract shall comply with all applicable federal, state and local laws, and the Contractor shall maintain all applicable license and permit requirements.
- 8.5 Survival of Rights and Obligations After Contract Expiration and Termination.
 - 8.5.1 Contractor's Representations. All representations and warranties made by the Contractor under this Contract in paragraphs 7 and 8 shall survive the expiration or termination hereof. In addition, the parties hereto acknowledge that pursuant to A.R.S. § 12.510, except as provided in A.R.S. § 12-529, the State is not subject to or barred by any limitations of actions prescribed in A.R.S. Title 12, Chapter 5.
 - 8.5.2 Purchase Orders and Change Orders. Unless otherwise directed in writing by the Procurement Officer, the Contractor shall fully perform and shall be obligated to comply with all Purchase Orders and Change Orders received by the Contractor prior to the expiration or termination hereof, including, without limitation, all Purchase Orders and Change Orders received prior to but not fully performed and satisfied at the expiration or termination of this Contract.

9. STATE'S CONTRACTUAL REMEDIES.

- 9.1 Right to Assurance. If the State, in good faith, has reason to believe that the Contractor does not intend to, or is unable to, perform or continue performing under this Contract, the Procurement Officer may demand in writing that the Contractor give a written assurance of intent to perform. Failure by the Contractor to provide written assurance within the number of Days specified in the demand may, at the State's option, be the basis for terminating the Contract.
- 9.2 Stop Work Order.
 - 9.2.1 Terms. The State may, at any time, by written order to the Contractor, require the Contractor to stop all or any part of the work called for by this Contract for a period up to ninety (90) Days after the order is delivered to the Contractor, and for any further period to which the parties may agree. The order shall be specifically identified as a stop work order issued under this clause. Upon receipt of the order, the Contractor shall immediately comply with its terms and take all reasonable

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	TERMS AND CONDITIONS

steps to minimize the incurrence of costs allocable to the work covered by the order during the period of work stoppage.

9.2.2 Cancellation or Expiration. If a stop work order issued under this clause is canceled or the period of the order or any extension expires, the Contractor shall resume work. The Procurement Officer shall make an equitable adjustment in the delivery schedule or Contract price, or both, and the Contract shall be amended in writing accordingly.

9.3 Non-exclusive Remedies. The rights and remedies of ADHS under this Contract are not exclusive, and ADHS is entitled to all rights and remedies available to it, including those under the Arizona Uniform Commercial Code and Arizona common law.

9.4 Right of Offset. The State shall be entitled to offset against any sums due the Contractor in any Contract with the State or damages assessed by the State because of the Contractor's non-conforming performance or failure to perform this Contract. The right to offset may include, but is not limited to, a deduction from an unpaid balance and a collection against the bid and/or performance bonds. Any offset taken for damages assessed by the State shall represent a fair and reasonable amount for the actual damages and shall not be a penalty for non-performance.

10. CONTRACT TERMINATION.

10.1 Cancellation for Conflict of Interest. Pursuant to A.R.S. § 38-511, the State may cancel this Contract within three (3) years after Contract execution without penalty or further obligation if any person significantly involved in initiating, negotiating, securing, drafting or creating the Contract on behalf of the State is, or becomes at any time while the Contract or an extension of the Contract is in effect, an employee of or a consultant to any other party to this Contract with respect to the subject matter of the Contract. The cancellation shall be effective when the Contractor receives written notice of the cancellation, unless the notice specifies a later time. If the Contractor is a political subdivision of the State, it may also cancel this Contract as provided in A.R.S. § 38-511.

10.2 Gratuities. The State may, by written notice, terminate this Contract, in whole or in part, if the State determines that employment or a Gratuity was offered or made by the Contractor or a representative of the Contractor to any officer or employee of the State for the purpose of influencing the outcome of the procurement, securing the Contract or an Amendment to the Contract, or receiving favorable treatment concerning the Contract, including the making of any determination or decision about Contract performance. The State, in addition to any other rights or remedies, shall be entitled to recover exemplary damages in the amount of three times the value of the Gratuity offered by the Contractor.

10.3 Suspension or Debarment. The State may, by written notice to the Contractor, immediately terminate this Contract if the State determines that the Contractor or its subcontractor has been debarred, suspended or otherwise lawfully prohibited from participating in any public procurement activity, including but not limited to, being disapproved as a subcontractor of any public procurement unit or other governmental body.

10.4 Termination Without Cause.

10.4.1 Both the State and the Contractor may terminate this Contract at any time with thirty (30) days' notice in writing specifying the termination date. Such notices shall be given by personal delivery or by certified mail, return receipt requested.

10.4.2 If the Contractor terminates this Contract, any monies prepaid by the State, for which no service or benefit was received by the State, shall be refunded to the State within 5 days of the termination notice. In addition, if the Contractor terminates the Contract, the Contractor shall indemnify the State for any sanctions imposed by the funding source as a result of the Contractor's failure to complete the Contract.

10.4.3 If the State terminates this Contract pursuant to this Section, the State shall pay the Contractor the

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	TERMS AND CONDITIONS

Contract price for all Services and Materials completed up to the date of termination. In a fixed price contract, the State shall pay the amount owed for the Services or Materials by multiplying the unit of service or item cost by the number of unpaid service units or items. In a cost reimbursement contract, the ADHS shall pay for any costs that the Contractor can document as having been paid by the Contractor and approved by ADHS. In addition, the Contractor will be paid its reasonable actual costs for work in progress as determined by GAAP up to the date of termination. Upon such termination, the Contractor shall deliver to the ADHS all deliverables completed. ADHS may require Contractor to negotiate the terms of any remaining deliverables still due.

- 10.5 **Mutual Termination.** This Contract may be terminated by mutual written agreement of the parties specifying the termination date and the terms for disposition of property and, as necessary, submission of required deliverables and payment therein.
- 10.6 **Termination for Default.** The State reserves the right to terminate the Contract in whole or in part due to the failure of the Contractor to comply with any material obligation, term or condition of the Contract, to acquire and maintain all required insurance policies, bonds, licenses and permits, or to make satisfactory progress in performing the Contract. In the event the ADHS terminates the Contract in whole or in part as provided in this paragraph, the ADHS may procure, upon such terms and in such manner as deemed appropriate, Services or Materials, similar to those terminated, and Contractor shall be liable to the ADHS for any excess costs incurred by the ADHS in obtaining such similar Services or Materials.
- 10.7 **Continuation of Performance Through Termination.** Upon receipt of the notice of termination and until the effective date of the notice of termination, the Contractor shall perform work consistent with the requirements of the Contract and, if applicable, in accordance with a written transition plan approved by the ADHS. If the Contract is terminated in part, the Contractor shall continue to perform the Contract to the extent not terminated. After receiving the notice of termination, the Contractor shall immediately notify all subcontractors, in writing, to stop work on the effective date of termination, and on the effective date of termination, the Contractor and subcontractors shall stop all work.
- 10.8 **Disposition of Property.** Upon termination of this Contract, all property of the State, as defined herein, shall be delivered to the ADHS upon demand.
- 11. **ARBITRATION.** Pursuant to A.R.S. § 12-1518, disputes under this Contract shall be resolved through the use of arbitration when the case or lawsuit is subject to mandatory arbitration pursuant to rules adopted under A.R.S. § 12-133.
- 12. **COMMUNICATION.**
 - 12.1 **Program Report.** When reports are required by the Contract, the Contractor shall provide them in the format approved by ADHS.
 - 12.2 **Information and Coordination.** The State will provide information to the Contractor pertaining to activities that affect the Contractor's delivery of services, and the Contractor shall be responsible for coordinating their activities with the State's in such a manner as not to conflict or unnecessarily duplicate the State's activities. As the work of the Contractor progresses, advice and information on matters covered by the Contract shall be made available by the Contractor to the State throughout the effective period of the Contract.
- 13. **CLIENT GRIEVANCES.** If applicable, the Contractor and its subcontractors shall use a procedure through which clients may present grievances about the operation of the program that result in the denial, suspension or reduction of services provided pursuant to this Contract and which is acceptable to and approved by the State.
- 14. **SOVEREIGN IMMUNITY.** Pursuant to A.R.S. § 41-621(O), the obtaining of insurance by the State shall not be a waiver of any sovereign immunity defense in the event of suit.

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	TERMS AND CONDITIONS

- 15. ADMINISTRATIVE CHANGES.** The Procurement Officer, or authorized designee, reserves the right to correct any obvious clerical, typographical or grammatical errors, as well as errors in party contact information (collectively, "Administrative Changes"), prior to or after the final execution of a Contract or Contract Amendment. Administrative Changes subject to permissible corrections include: misspellings, grammar errors, incorrect addresses, incorrect Contract Amendment numbers, pagination and citation errors, mistakes in the labeling of the rate as either extended or unit, and calendar date errors that are illogical due to typographical error. The Procurement Office shall subsequently send to the Contractor notice of corrections to administrative errors in a written confirmation letter with a copy of the corrected Administrative Change attached.
- 16. SURVIVAL OF TERMS AFTER TERMINATION OR CANCELLATION OF CONTRACT.** All applicable Contract terms shall survive and apply after Contract termination or cancellation to the extent necessary for Contractor to complete and for the ADHS to receive and accept any final deliverables that are due after the date of the termination or cancellation.
- 17. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 (HIPAA).**
- 17.1 The Contractor warrants that it is familiar with the requirements of HIPAA, as amended by the Health Information Technology for Economic and Clinical Health Act (HITECH Act) of 2009, and accompanying regulations and will comply with all applicable HIPAA requirements in the course of this Contract. Contractor warrants that it will cooperate with the Arizona Department of Health Services (ADHS) in the course of performance of the Contract so that both ADHS and Contractor will be in compliance with HIPAA, including cooperation and coordination with the Arizona Strategic Enterprise Technology (ASET) Office, Statewide Information Security and Privacy Office (SISPO) Chief Privacy Officer and HIPAA Coordinator and other compliance officials required by HIPAA and its regulations. Contractor will sign any documents that are reasonably necessary to keep ADHS and Contractor in compliance with HIPAA, including, but not limited to, business associate agreements.
- 17.2 If requested by the ADHS Procurement Office, Contractor agrees to sign a "Pledge To Protect Confidential Information" and to abide by the statements addressing the creation, use and disclosure of confidential information, including information designated as protected health information and all other confidential or sensitive information as defined in policy. In addition, if requested, Contractor agrees to attend or participate in HIPAA training offered by ADHS or to provide written verification that the Contractor has attended or participated in job related HIPAA training that is: (1) intended to make the Contractor proficient in HIPAA for purposes of performing the services required and (2) presented by a HIPAA Privacy Officer or other person or program knowledgeable and experienced in HIPAA and who has been approved by the ASET /SISPO Chief Privacy Officer and HIPAA Coordinator.
- 18. COMMENTS WELCOME.** The ADHS Procurement Office periodically reviews the Uniform Terms and Conditions and welcomes any comments you may have. Please submit your comments to: ADHS Procurement Administrator, Arizona Department of Health Services, 1740 West Adams, Suite 303, Phoenix, Arizona, 85007.
- 19. DATA UNIVERSAL NUMBERING SYSTEM (DUNS) NUMBER REQUIREMENT.**
- 19.1 Pursuant to 2 CFR 25.100 *et seq.*, no entity (defined as a Governmental organization, which is a State, local government, or Indian tribe; foreign public entity; domestic or foreign nonprofit organization; domestic or foreign for-profit organization; or Federal agency, but only as a subrecipient under an award or subaward to a non-Federal entity) may receive a subaward from ADHS unless the entity provides its DUNS Number to ADHS.
- 20. AUTHORIZATION FOR PROVISION OF SERVICES:**

Authorization for Provision of Services: Authorization for purchase of services under this Contract shall be made only upon ADHS issuance of a Purchase Order that is signed by an authorized agent. The Purchase Order will indicate the Contract number and the dollar amount of funds authorized. The Contractor shall only be authorized to perform services up to the amount on the Purchase Order. ADHS shall not have any legal obligation to pay for services in excess of the amount indicated on the Purchase Order. No further obligation for

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	TERMS AND CONDITIONS

payment shall exist on behalf of ADHS unless a) the Purchase Order is changed or modified with an official ADHS Procurement Change Order, and/or b) an additional Purchase Order is issued for purchase of services under this Contract.

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	SCOPE OF SERVICES

1. BACKGROUND:

- 1.1 Commercial Tobacco use is the leading preventable cause of death and disease in the United States. Commercial Tobacco use leads to almost 500,000 deaths annually within the United States and almost 7,000 deaths annually in Arizona alone. Tobacco control programs are designed to help reduce disease, disability and death related to commercial tobacco use.
- 1.2 In 2010, chronic diseases such as cancer, heart disease, stroke and pulmonary disease, were responsible for seven (7) of the ten (10) leading underlying causes of death in Arizona. When combined, these chronic diseases were responsible for more than 29,500 Arizona deaths in 2010. (Arizona Health Status & Vital Statistics, 2010). These leading causes of mortality and morbidity share common primary risk factors, including obesity, commercial tobacco use, poor nutrition and physical inactivity. However, their relationship is not limited to common indicators. Quite often, the populations most burdened by these conditions overlap; diabetes, for example, is also a significant risk factor for cardio-vascular disease (CVD).
- 1.3 The mission of the Arizona Department of Health Services Bureau of Tobacco and Chronic Disease (ADHS-BTCD) is to work together to build individual, organizational and community capacities to reduce the impact of commercial tobacco abuse and reduce chronic disease. This is accomplished through development of quality programs, policies, and services; that include community network building, youth prevention activities and integrating community efforts that establishes strategic partnerships and collaborations, in order to eliminate tobacco and chronic disease.

2. PURPOSE:

- 2.1 The ADHS-BTCD intends to establish Intergovernmental Agreements with counties to provide Commercial Tobacco education/prevention services and implement chronic disease prevention and control strategies to address the four (4) leading causes of death (cancer, stroke, heart disease, and pulmonary disease) specific to Arizona.

3. TASKS:

The Contractor shall:

- 3.1 Adhere to the guidelines and principles set forth in the ADHS-BTCD Sustaining Arizona's Tobacco Program Plan and the 2014-2015 ADHS-BTCD Chronic Disease Prevention and Control Strategies that pertain to the services and activities identified in the corresponding Action Plans. These documents can be found on the ADHS Tobacco Free Arizona website (http://tobaccofreearizona.com/reports/pdf/tfa_strategic_plan.pdf) and the ADHS Chronic Disease website (<http://www.azdhs.gov/phs/chronicdisease/>);
- 3.2 Develop and perform an Action Plan in conjunction with ADHS-BTCD, inclusive of goals, objectives and timelines to address ADHS-BTCD Sustaining Arizona's Tobacco Program Plan and the 2014-2015 ADHS-BTCD Chronic Disease Prevention and Control Strategies;
- 3.3 Implement the Action Plans upon ADHS-BTCD approval;
- 3.4 Participate in Bi-Monthly calls with BTCD staff to gauge progress and activities in the action plan. This information will be utilized in the ADHS-BTCD Evaluation Plan for County Contracts. The ADHS-BTCD Evaluation plan for County Contracts and the Bi-Monthly call sheet will be reviewed and revised each year to ensure proper assessment of county activities. The template will be issued to the county by August 1st of each year.
- 3.5 Cessation Activity:
 - 3.5.1 Contractor shall work with the ASHLine Community Development Team (CDT) to create/implement ASHLine Outreach/Referral Development Action Plan,

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	SCOPE OF SERVICES

3.5.2 Contractor shall participate in quarterly calls with the ASHLine CDT representative to discuss status of the ASHLine Outreach/Referral Development Action Plan and to cover any possible technical assistance need.

3.6 Prevention – Youth Coalition:

3.6.1 Contractor shall work with Pima Prevention Partnership (PPP) to develop and implement a Youth Coalition Action Plan,

3.6.2 Contractor shall ensure youth coordinators and youth participate in PPP trainings twice a year and, shall work with PPP on any technical assistance needs and,

3.6.3 Contractor shall provide PPP technical assistance.

3.7 Enforcement:

3.7.1 Attorney General's Counter Strike Program:

3.7.1.1 Participate in the Arizona Attorney General's Office (AGO) Counter Strike Program,

3.7.1.2 Promote and recruit youth from the community to participate in the Retailer Compliance Checks. Youth shall be sixteen (16) or seventeen (17) years of age, possess a valid Arizona State Identification Card and shall be available on nights and weekends; AGO compliance checks will be scheduled at a minimum of twice a year,

3.7.1.3 Facilitate and conduct the AGO Merchant Diversion Program with retailers and clerks that have been cited for selling tobacco to underage youth,

3.7.1.4 Follow up with retailers to provide resources and education,

3.7.1.5 Promote, facilitate, and conduct the AGO Youth Diversion Training,

3.7.1.6 Maintain quarterly communication with the AGO Youth Tobacco Program.

3.7.2 Food & Drug Administration (FDA) – Tobacco Control Act (TCA) Program/SYNAR:

3.7.2.1 Participate in the ADHS-FDA TCA program for youth underage boys throughout each fiscal year,

3.7.2.2 Promote and recruit youth from the community to participate in the FDA youth underage boys. Number of inspections will be based on FDA requirements and may vary from year to year,

3.7.2.3 Have at least two (2) youth available for inspections at all times,

3.7.2.4 Assist SYNAR in ensuring accurate locations of tobacco retailers within each county,

3.7.2.5 Maintain bi-monthly communication with the ADHS-FDA TCA Program Staff.

3.8 Policy:

3.8.1 Identify one (1) policy related to tobacco control (i.e. smoking in multi-unit housing, point of sale restriction in the retail environment or other policies related to second hand smoke exposure) to pursue throughout the year. Policy can be multi-year,

3.8.2 Policy implementation plan shall be approved by ADHS-BTCD, and

3.8.3 Participate in policy trainings.

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	SCOPE OF SERVICES

3.9 Chronic Disease:

- 3.9.1 Adhere to the strategies outlined by the Office of Chronic Disease in conjunction with the ADHS-BTCD 2013-2017 Chronic Disease Strategic Plan which can be found on Arizona Department of Health Services/Bureau of Tobacco and Chronic Disease website. The following strategies include:
 - 3.9.1.1 Provide support and coordinate the delivery of a Chronic Disease Self Manage Program/Tomando Control de su Salud,
 - 3.9.1.2 Implement the National Million Hearts Campaign/Su Corazon – Su Vida to include strategies such as ABC's, Know Your Numbers and My Life Check,
 - 3.9.1.3 Implement the American Heart Association/American Stroke Association Together To End Stroke Campaign, and
 - 3.9.1.4 School Health Index (SHI)/School Health Advisory Council (SHAC). (<http://www.azdhs.gov/phs/chronicdisease/documents/az-chronic-disease-strategic-plan-2012-2015.pdf>).
- 3.9.2 Collaborate with County staff that are implementing or participating in other ADHS initiatives (i.e., Health in All Policies Initiative, Public Health in Action Grant) to leverage and integrate chronic disease prevention and control strategies,
- 3.9.3 Collaborate with community organizations and tribal entities that receive ADHS-BTCD funding to implement Center for Disease Control and Prevention (CDC) strategies, and
- 3.9.4 Participate in all chronic disease related conference and technical assistance calls, unless waived with approval from the ADHS-BTCD. County must inform ADHS-BTCD of non-participation at least forty-eight (48) hours prior to call.

3.10 Marketing & Media:

- 3.10.1 Adhere to the Partner Marketing and Media Communication Calendar, which will be issued by July 1st of each year,
- 3.10.2 Participate and promote ADHS-BTCD marketing initiatives as requested, and
- 3.10.3 Local marketing plans utilizing ADHS-BTCD funding shall be submitted to ADHS-BTCD for approval prior to implementation.

3.11 Meetings, Calls, and Trainings:

Contractor shall attend the following meetings in person, unless waived with approval from ADHS-BTCD:

- 3.11.1 County Partner Meetings,
- 3.11.2 County Partner Specific Meetings (i.e. – ASHLine Summit, Youth Coalition Adult Trainings, Youth Winter Planning Summit, STAND summer conference, Chronic Disease trainings and presentations), as deemed necessary by ADHS-BTCD,
- 3.11.3 Participate in all conference calls and technical assistance calls for ADHS-BTCD, unless waived with approval from the ADHS-BTCD, Contractor must notify ADHS-BTCD staff of non-participation at least forty-eight (48) hours prior to call.
- 3.11.4 Monthly Partner Update Conference Calls, call agenda will be released by ADHS-BTCD no less than four (4) days prior to the conference call,

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	SCOPE OF SERVICES

3.11.5 ASHLine Community Development Team (CDT) Quarterly Call, to be scheduled by the ASHLine CDT representative,

3.11.6 Youth Coalition Technical Assistance/Event Calls (as needed for Statewide Tobacco Event planning and Winter/Summer Conference Planning), and

3.11.7 Participate in Bi-Monthly call with BTCD staff to gauge progress and activities in the action plan. This information will be utilized in the ADHS-BTCD Evaluation Plan for County Contracts. Calls will be schedule by BTCD Prevention specialists.

3.12 The ADHS-BTCD Evaluation plan for County Contracts and the Bi-Monthly call sheet will be reviewed and revised each year to ensure proper assessment of county activities. The template will be issued to the county by August 1st, of each year.

4. REQUIREMENTS:

The Contractor shall meet all of the following requirements:

4.1 Revisions to the Action Plan strategies, goals, objectives and timelines shall require approval from ADHS-BTCD staff,

4.2 Staffing changes shall be reported to ADHS-BTCD within five (5) business days,

4.3 Out of state travel under this Agreement shall require prior ADHS-BTCD authorization. Documentation shall be submitted to ADHS-BTCD for review, including location and reason for travel, how it pertains to the work covered in this Agreement and costs associated with the travel,

4.4 Equipment purchases shall require prior ADHS-BTCD authorization. Documentation shall be submitted to ADHS-BTCD for review, including proposed equipment, cost and justification of need. Examples of equipment include, but are not limited to, computers, computer equipment, software, office furniture, printers, and phones. Any equipment purchased with ADHS-BTCD funds shall be the property of the State of Arizona. As such, the property shall be returned to ADHS-BTCD once it is no longer in use or when the Contract is concluded.

4.5 Property of the State. Any materials, including reports, computer programs and other deliverables, created under this Contract are the sole property of the State. The Contractor is not entitled to a patent or copyright on those materials and may not transfer the patent or copyright to anyone else. The Contractor shall not use or release these materials without the prior written consent of the State.

5. DELIVERABLES AND DELIVERY SCHEDULE:

The Contractor shall:

5.1 Submit a Contractor Expenditure Report (CER), Exhibit 1 an electronic version will be made available upon request to ADHS-BTCD, due fifteen (15) days after month end,

5.2 Enter at a minimum two (2) submissions for annual awards/recognition program available at www.tobaccofreearizona.com/resources due by July 31st, of each year, and

5.3 Provide success stories related to specific chronic disease strategies being implemented in their county on a quarterly basis utilizing the form provided by the ADHS-BTCD staff.

6. NOTICES, CORRESPONDENCE, REPORTS AND INVOICES:

6.1 Notices, Correspondence, Reports and Invoices/CERs from the contractor to ADHS shall be sent to:

Arizona Department of Health Services

CONTRACT NUMBER ADHS14-072245	INTERGOVERNMENTAL AGREEMENT SCOPE OF SERVICES
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Bureau of Tobacco and Chronic Disease
 Attn: Courtney Ward, BTCD Office Chief or Stacy Green, Tobacco Program Manager
 150 N. 18th Avenue, Suite #310
 Phoenix, AZ 85007
 Telephone: (602) 542-2075
 E-Mail: Courtney.ward@azdhs.gov

6.2 Notices, Correspondence, Reports and Payments from the ADHS to the Contractor shall be sent to:

Pima County Health Department
 Attn: Francisco Garcia, M.D., Director
 3950 South Country Club Road
 Tucson, Arizona 85714
 Telephone: (520) 243-7704
 E-mail: Francisco.garcia@pima.gov

6.3 Payments from ADHS to the Contractor shall be sent to the "Remit To" Address listed on the Contractor's ProcureAZ vendor profile.

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS14-072245	PRICE SHEET

BUDGET

Effective July, 2014

Cost Reimbursement Line Items	Budget Amount
1. Personnel Services/ERE	\$540,522
2. Professional & Outside Services	\$412,800
3. Travel Expenses	\$15,897
4. Other Operating Expense	\$66,703
5. Capital Outlay Expense	\$0
6. Other (Indirect Costs)	\$81,078
Total Contract Amount (not to exceed)	\$1,117,000

1. ITEMIZED SERVICE BUDGET (ISB) RESTRICTIONS:

1.1 The Contractor is authorized to transfer up to a maximum of ten percent (10%) of the total Contract amount among the categorical line items. Transfers of funds are only allowed among funded line items as detailed in the original ISB. Transfers exceeding ten percent (10%) of the Contracted amount, or to a non-funded line item, shall require a Contract Amendment.

1.2 Indirect Costs shall not exceed fifteen (15%) of the combined total of Personnel Services and Employee Related Expenses as listed on the ISB. For more detailed information regarding indirect costs, refer to the ADHS Accounting and Auditing Procedures Manual for Contractors of ADHS Funded Programs. This manual is incorporated into this Contract by reference herein.

CONTRACT NUMBER
ADHS14-072245

INTERGOVERNMENTAL AGREEMENT
ATTACHMENT 1

Attachment 1 - Action Plan for FY 2015

County: Pima

Time Frame: July 1st – June 30th of each year

Vision Statement:

Goal 1: Reduce youth use and exposure of tobacco products in Pima County

- 1. Strategy:** During School Year 2014-2015, the Youth Coalitions will continue to build and sustain its efforts. This will be measured by our adherence of the Pima Prevention Partnership (PPP) Youth Action Plan and youth/adult coordinator attendance to events/trainings and monthly reporting.

Strategy is integrated with (check all that apply):

- Tobacco Prevention Policy
- Chronic Disease Self-Management
- Tobacco Cessation Policy
- School Health Policy
- Other (i.e. increase community collaboration)
- Tobacco education

Agency Lead: Pima County Health Department (PCHD)

Partners: School Districts, PPP

Related policy change:

Tobacco Control & prevention

Related environmental change:

Increased awareness of tobacco related health issues for all ages
Decreased exposure and initiation of use of tobacco products

What do you plan to do?

Action 1:
Follow the PPP Youth Action Plan and hold monthly meetings during the school year to keep on track.

Action 2: PCHD conducts two policy-related trainings, one for coalition youth and one for adult coalition leaders.

Action 3: Coordinate & participate in Bureau of Tobacco & Chronic Disease (BTCD) required tobacco prevention campaigns (i.e. Kick Butt Day, World No Tobacco Day, Great American Smoke Out

Who will do the work?

- PCHD Coordinator Youth (Y)
- PPP

- PCHD Coordinator (Y)
- PCHD Health Educators

- PCHD Coordinator (Y)
- PCHD Health Educators
- ADHS BTCD
- Youth Coalitions

What does success look like?

Action plan in line with statewide tobacco policy and prevention goals will be developed and implemented successfully in Pima County.

Coalition leaders better prepared to support and guide youth coalitions. Coalition youth educated on policy development and implementation and will better understand the statewide tobacco policy and prevention goals.

Pima County residents and youth more aware of Students Taking A New Direction (STAND) and supportive of statewide tobacco policy and prevention goals. Disseminate tobacco messaging within the community

What non-financial resources are needed?

- PPP technical assistance

- Partnership with community organizations

	Q1 Sept 30 th	Q2 Dec. 31 st	Q3 March 30 th	Q4 June 30 th
	X	X	X	X
		X	X	
	X	X		

CONTRACT NUMBER
ADHS14-072245

INTERGOVERNMENTAL AGREEMENT
ATTACHMENT 1

Action 4: Staff/Adult Coordinators and youth participates in PPP trainings, attend Winter Summit, and summer conference.	- PCHD Coordinator (Y) - PCHD Health Educators - ADHS BTCD - Youth Coalitions	Youth learning about the effects of tobacco on community and participate in planning sessions for other STAND activities.	- PPP	X	X
Action 5: Provide youth diversion training throughout Pima County to youth under the age of 18 referred by local law enforcement or school for using tobacco.	- PCHD Coordinator (Y) - PCHD Health Educators	Youth tobacco rates will decrease		X	X

Goal 2: Reduce youth access to tobacco products in Pima County

1. **Strategy:** By June 30, 2015, the percent of retail tobacco outlets selling tobacco products to minors in Pima County will have decreased from the 2014 rate, as evidence in the Attorney General's Office (AGO) and the Food & Drug Administration (FDA) tobacco sales compliance checks report findings.

Strategy is integrated with (check all that apply):

- Tobacco Prevention Policy
- Chronic Disease Self-Management
- Tobacco Cessation Policy
- School Health Policy
- Other (to increase community collaboration):
- Tobacco education

Agency Lead: PCHD Partners: FDA, AGO	Related policy change: Tobacco control	Related environmental change: Reduce access of tobacco products to minors and educate retailers on the harms of tobacco use and exposure to minors	Q1 Sept 30 th	Q2 Dec. 31 st	Q3 Marc h 30 th	Q4 June 30 th
What do you plan to do?	Who will do the work?	What does success look like?	What non-financial resources are needed?			
Action 1: Recruit and maintain a pool of youth volunteers to participate in AGO's and FDA's, tobacco compliance inspections	- PCHD Coordinator (Y) - PCHD Health Educators	PCHD youth volunteers readily available to assist in conducting tobacco compliance inspections for all 3 programs.	- Partnership with school district - Community partners	X	X	X
Action 2: Participate in AGO and FDA retailer compliance inspections as assigned	- Attorney General's Office - FDA - Youth Volunteers - PCHD Coordinator (Y) - PCHD Health Educators	PCHD youth volunteers are scheduled for retailer inspections on dates set by the AGO and FDA	- Youth volunteers	X	X	X
Action 3: Complete SYNAR cluster canvassing within Pima County as assigned	- PCHD Coordinator (Y) - PCHD Health Educators	Visual inspection of tobacco retailers within cluster boundaries are identified and confirmed in compliance with SYNAR guidelines.	- Cluster List provided by BTCD		X	X

CONTRACT NUMBER
ADHS14-072245

INTERGOVERNMENTAL AGREEMENT
ATTACHMENT 1

<p>Action 4: Offer AGO Merchant Diversion Program every other month for retailers that have failed compliance inspections</p>	<p>- PCHD Coordinator (Y) - PCHD Health Educators</p>	<p>Retailers who have failed compliance inspections will be referred to retailer training to increase employees knowledge of Arizona tobacco laws, health effects of tobacco use on youth, and to reduce tobacco sales to minors.</p>	<p>- Collaboration with Pima County (PC) Justice Courts</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 5: Maintain quarterly communication with AGO and FDA offices as needed.</p>	<p>- PCHD Coordinator (Y)</p>	<p>Communication will be maintained to execute retailer inspections and diversion programs efficiently and effectively.</p>	<p>- Partnership with AGO & FDA Office</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>

Goal 3: Reduce youth access to tobacco products in Pima County

1. Strategy: Pima County will convene a group of stakeholders from various organization who work in or have interest in tobacco cessation/prevention to advise and work on Tobacco Collaborative to advise and support Tobacco Retailer Licensing initiative in Pima County.

Strategy is integrated with (check all that apply):
 Tobacco Prevention Policy
 Chronic Disease Self-Management
 Tobacco Cessation Policy
 School Health Policy
 Other (i.e. increase community collaboration):
 Tobacco prevention education

Agency Lead: PCHD

Partners: American Lung Association (ALA), Arizona Cancer Society Cancer Action Network (AZCAN), American Heart Association (AHA), Arizona Smokers Help Line (ASHLine), University of Arizona (U of A), Pima County Board of Health, AGO, PPP, Bureau of Tobacco & Chronic Disease (BTCD), Mayo Clinic

Related policy change:

Retailer tobacco licensing

Related environmental change:

Improved tracking of tobacco retailers and enforcement of tobacco laws. Reduced tobacco use prevalence and product access amongst minors

What do you plan to do?

Action 1:
Facilitate and/or attend scheduled Youth Tobacco Collaborative meetings.

Who will do the work?

- PCHD Coordinator Youth/Adult (Y/A)
- PCHD Health Educators

What does success look like?

PCHD TCD actively participating in County-wide collaboration focused on reducing youth tobacco access as evidenced by sign-in sheet and meeting summary.

What non-financial resources are needed?

- Participation of collaborating agencies
- Meeting space

Q1

Q2

Q3

Q4

Sept 30th

Dec. 31st

March 30th

June 30th

X

X

X

X

CONTRACT NUMBER
ADHS14-072245

INTERGOVERNMENTAL AGREEMENT
ATTACHMENT 1

Action 2: Participate in creation of Pima County Retailer Licensing action plan and steps to complete goal.	- PCHD Coordinator (Y/A) - Participating Agencies	Action plan developed and implemented successfully.	- Participation of collaborating agencies - Meeting space.	X	
Action 3: Present datafindings supporting need for Tobacco Retailer Licensing to key stakeholders.	- PCHD Coordinator (Y/A) - Participating Agencies	Key stakeholders aware and supportive of Tobacco Retailers Licensing.	- Participation of collaborating agencies	X	
Action 4: Assist in research and development of policy.	- PCHD Coordinator (Y/A) - Participating Agencies	Research conducted and policy developed.	- Participation of collaborating agencies - Technical assistance		X
Action 5: Once policy adopted, offer technical assistance and education regarding policy.	- PCHD Coordinator (Y/A) - Participating Agencies	Policy in place and tobacco licensing implemented in Pima County with technical assistance given from Pima County Health Department.	- Participation of collaborating agencies		X

Goal 4: Reduce tobacco use prevalence in Pima County		Strategy is integrated with (check all that apply): <input type="checkbox"/> Tobacco Prevention Policy <input type="checkbox"/> Chronic Disease Self-Management <input checked="" type="checkbox"/> Tobacco Cessation Policy <input type="checkbox"/> School Health Policy <input type="checkbox"/> Other (i.e. increase community collaboration): <input type="checkbox"/> Tobacco education				
Agency Lead: PCHD Partners: ASHLine	Related policy change:	Related environmental change: Healthier community through a reduction in tobacco users and exposure to second hand smoke	Q1 Sept 30 th	Q2 Dec. 31 st	Q3 March 30 th	Q4 June 30 th
What do you plan to do?	Who will do the work? - PCHD Coordinator (A) - ASHLine	What does success look like? ASHLine plan will assist PCHD in systematically engaging organizations to maintain and build a network of ASHLine partners.	What non-financial resources are needed? - Partnership with ASHLine	X	X	X
Action 1: Follow ASHLine Action Plan and participate on quarterly calls with assigned ASHLine Community Development Coordinator.						X

CONTRACT NUMBER

ADHS14-072245

**INTERGOVERNMENTAL AGREEMENT
ATTACHMENT 1**

<p>Action 2: Level 1: Pima County staff will proactively refer adult tobacco users to ASHLine services through events, presentations, and brief interventions</p>	<p>- PCHD Health Educator - PCHD Coordinators (All)</p>	<p>Residents of Pima County will be connected to assistance and tools needed to quit tobacco use thus improving their health and those around them.</p>	<p>- Community partnerships - ASHLine materials</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 3: Level 2: Work specifically with healthcare providers and other organizations that serve disparate populations (as classified by Arizona Department of Health Services (ADHS)-BTCD) to set up as proactive referral sites</p>	<p>- PCHD Coordinators Networkers (N)</p>	<p>Healthcare providers and organizations that serve disparate populations will have increased access to cessation services</p>	<p>- Community partnerships - ASHLine materials</p>		<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 4: Level 3: Continue working with PCHD Electronic Health Records (ehr) team to integrate ASHLine referrals into the department wide system</p>	<p>- PCHD Coordinator (A)</p>	<p>PCHD EHR will prompt and allow staff to complete ASHLine referrals electronically for tobacco users who want to quit.</p>	<p>- Technical assistance from ASHLine</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 5: Level 2: Coordinate ASHLine Ask, Advise, Refer (A-A-R) in-service training with new Site Managers and requesting parties.</p>	<p>- PCHD Coordinator (A) - PCHD Health Educators</p>	<p>Site Managers and requesting parties trained on A-A-R which will give them the ability to engage adult tobacco users and refer them to cessation services through ASHLine.</p>	<p>- ASHLine presentations - ASHLine materials</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 6: Maintain ASHLine referring sites by way of quarterly follow ups and tracking activity in Webquit</p>	<p>- PCHD Coordinators Adult/Networkers (A/N)</p>	<p>Increase the likelihood that sites will continue to actively refer tobacco users to cessation services through ASHLine</p>	<p>- Webquit</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 7: Program Manager will track all activity in WebQuit</p>	<p>- PCHD Coordinator</p>	<p>Provide a better tracking of events and services provided to residents of Pima County</p>		<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>

Goal 5: Pima County residents, with chronic conditions, will have increased knowledge of how to self-manage conditions more effectively to increase their sense of wellbeing.

Strategy is Integrated with (check all that apply):
 Tobacco Prevention Policy

CONTRACT NUMBER
ADHS14-072245

INTERGOVERNMENTAL AGREEMENT
ATTACHMENT 1

1. Strategy: Chronic Disease Self-Management Program (CDSMP) and Tomando Control De Su Salud		<input checked="" type="checkbox"/> Chronic Disease Self-Management <input type="checkbox"/> Tobacco Cessation Policy <input type="checkbox"/> School Health Policy <input type="checkbox"/> Other (i.e. increase community collaboration): <input type="checkbox"/> Tobacco education					
Agency Lead: PCHD	Related policy change:	Related environmental change:	What non-financial resources are needed?	Q1 Sep 30 th	Q2 Dec. 31 st	Q3 March 31 st	Q4 June 30 th
Partners: Pima Council on Ageing (PCOA), AZ Living Well Institute, Veteran Affairs (VA) of Southern Arizona	Who will do the work? - PCHD Coordinator Healthy Living (H) - PCHD Lay Leaders	Healthier community through the self-management of chronic disease	What does success look like? Participants completing workshops will have increased knowledge of how to self-manage chronic conditions more effectively and feel an increased sense of well being	X	X	X	X
What do you plan to do? Conduct 15 CDSMP workshops Q1-5; Q2-5; Q3-5; Q4-5	Who will do the work? - PCHD Coordinator (H) - PCHD Lay Leaders	Participants completing workshops will have increased knowledge of how to self-manage chronic conditions more effectively and feel an increased sense of well being	- Tomando materials - Community partners - Meeting space	X	X	X	X
Action 2: Conduct 8 Tomando workshops Q1-2; Q2-2; Q3-2; Q4-1	Who will do the work? - PCHD Coordinator (H) - PCHD Lay Leaders	Participants completing workshops will have increased knowledge of how to self-manage chronic conditions more effectively and feel an increased sense of well being	- Tomando materials - Community partners - Meeting space	X	X	X	X
Action 3: Conduct 3 of the 23 CDSMP/Tomando workshops in rural Pima County Q2-1; Q3-1; Q4-1	Who will do the work? - PCHD Coordinator (H) - PCHD Lay Leaders	Residents living in rural areas of Pima County have access to CDSMP/Tomando workshops. Furthermore, rural participants that complete the workshops will have increased knowledge of how to self-manage chronic conditions more effectively and feel an increased sense of well-being.	- CDSMP materials - Community partners - Meeting space		X	X	X

CONTRACT NUMBER
ADHS14-072245

INTERGOVERNMENTAL AGREEMENT
ATTACHMENT 1

<p>Action 4: Conduct 3 of the 15 CDSMP workshops to disparate populations Q2-1; Q3-1; Q4-1</p>	<p>- PCHD Coordinator (H) - PCHD Lay Leaders</p>	<p>Members of disparate populations in Pima County have access to CDSMP/Tomando. Furthermore, members of disparate populations that complete the workshops will have increased knowledge of how to self-manage chronic conditions more effectively and feel an increased sense of well-being.</p>	<p>- CDSMP materials - Community partners - Meeting space</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 5: Identify organizations and work towards developing a systematic referral process.</p>	<p>- PCHD Coordinators Health Living/Networkers (H/N)</p>	<p>Community stakeholders (medical doctor's, worksites, community organizations, etc) will be able to directly refer community members to CDSMP/Tomando through a systematic referral process.</p>	<p>- CDSMP materials - Community partners</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 6: Conduct 1 CDSMP and 1 Tomando Lay Leader training Q3 - 1; Q4 - 1</p>	<p>- PCHD Coordinator (H) - Pima Council on Aging</p>	<p>The capacity to facilitate CDSMP/Tomando workshops in the community increases as new lay leaders are trained in the program.</p>	<p>- CDSMP training materials - Community partners - Meeting space</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 7: Recruit and train 4 volunteer CDSMP/Tomando Lay Leaders that will work under the PCHD license Q3 - 2; Q4 - 2</p>	<p>- PCHD Coordinators (H/N) - PCHD Lay Leaders</p>	<p>The capacity to facilitate CDSMP/Tomando workshops under the PCHD license will increase. Lay leaders trained under PCHD license will have the ongoing support of the PCHD Coordinator.</p>	<p>- Community partners</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 8: Have 1 PCHD staff member trained as a Master Trainer in both CDSMP and Tomando</p>	<p>- PCHD Coordinators Health Living/Adult (H/A)</p>	<p>PCHD increases its capacity to train Lay Leaders in CDSMP/Tomando in Pima County.</p>				<p>X</p>

**INTERGOVERNMENTAL AGREEMENT
ATTACHMENT 1**

<p>CONTRACT NUMBER ADHS14-072245</p>						
<p>Action 4: PCHD will provide School SHAC's monthly prevention articles that will promote ASHLine, Million Hearts, and Stroke Awareness messaging for use in their newsletters</p>	<p>- PCHD Coordinator (S) - PCHD Health Educators</p>	<p>Services and education campaigns will be promoted to a wider audience of community members that include school staff, parents, and students.</p>	<p>- District and school partnerships - Technical assistance</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 5: PCHD will develop and distribute a pre/post survey to measure wellness improvements and program satisfaction at select schools Q1 - Pre; Q2 - Post</p>	<p>- PCHD Coordinator (S) - PCHD School Based Coordinators</p>	<p>PCHD will be able to measure participant satisfaction and program impact from school administration, staff, student and parent survey responses. This will allow PCHD to identify gaps in service and provide technical assistance (TA) in low scoring areas.</p>	<p>- District and school partnerships</p>	<p>X</p>		<p>X</p>

<p>Goal 7: Reduce heart related health problems and stroke amongst Pinna County residents through education</p>		<p>Strategy is integrated with (check all that apply): <input type="checkbox"/> Tobacco Prevention Policy <input type="checkbox"/> Chronic Disease Self-Management <input type="checkbox"/> Tobacco Cessation Policy <input type="checkbox"/> School Health Policy <input checked="" type="checkbox"/> Other (i.e. increase community collaboration) <input type="checkbox"/> Tobacco education</p>			
<p>Agency Lead: PCHD Partners:</p>	<p>Related policy change:</p>	<p>Related environmental change:</p>			
<p>What do you plan to do? Action 1: Support and provide technical assistance to Public Health Nurses on A-A-R and Quit Fax form completion</p>	<p>Who will do the work? - PCHD Coordinator (A)</p>	<p>What does success look like? Public Health Nurses successfully making ASHLine Referrals as part of Million Hearts Campaign and Stroke Awareness Campaign outreach.</p>	<p>What non-financial resources are needed? - Internal partners - ASHLine presentation - ASHLine materials - Technical assistance</p>		
<p>Action 2: Collaborate with library Public Health Nurses to actively promote Million Hearts/Stroke Awareness during patient interactions</p>	<p>- PCHD Coordinator (A)</p>	<p>Library patrons interacting with Public Health Nurses are aware of Million Heart and Stroke Awareness Campaigns.</p>	<p>- Internal partners</p>		
		<p>Q1 Sept 30th</p>	<p>Q2 Dec. 31st</p>	<p>Q3 March 30th</p>	<p>Q4 June 30th</p>

CONTRACT NUMBER
ADHS14-072245

INTERGOVERNMENTAL AGREEMENT
ATTACHMENT 1

<p>Action 9: Coordinate, evaluate and offer technical assistance to volunteer lay leaders working under the PCHD license</p>	<p>- PCHD Coordinators (H)</p>	<p>Lay Leaders trained and working under the PCHD license are successfully following program fidelity guidelines.</p>	<p>- CDSMP materials - Community partners - Technical assistance</p>	<p>X</p>	<p>X</p>	<p>X</p>
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Goal 6: School health and wellness increased throughout Pima County.

1. Strategy: School Health Index (SHI) / School Health Advisory Council (SHAC)

Strategy is integrated with (check all that apply):

- Tobacco Prevention Policy
- Chronic Disease Self-Management
- Tobacco Cessation Policy
- School Health Policy
- Other (i.e. increase community collaboration):
- Tobacco education

<p>Agency Lead: PCHD Partners: School Districts University of Arizona</p>	<p>Related policy change: School Health Policies</p>	<p>Related environmental change: Healthy School Environments</p>				
<p>What do you plan to do?</p> <p>Action 1: 70 School based Wellness Coordinators will complete SHI action plans and receive technical assistance Q1-35; Q2-35</p> <p>Action 2: 40 physical activity trainings will be conducted with school Wellness Coordinators and staff Q1-10; Q2-10; Q3-10; Q4-10</p> <p>Action 3: PCHD school based coordinators will attend county wide district wellness coordinator meetings to provide technical assistance Q1-1; Q2-1; Q3-1; Q4-1</p>	<p>Who will do the work?</p> <ul style="list-style-type: none"> - PCHD Coordinator Schools (S) - PCHD School Based Coordinators - School Wellness Coordinators - SHACs <ul style="list-style-type: none"> - PCHD Coordinator (S) - PCHD School Based Coordinators <ul style="list-style-type: none"> - PCHD Coordinator (S) - PCHD School Based Coordinators 	<p>What does success look like?</p> <p>Participating schools will complete individualized plans that will assist them in achieving objectives and goals that will create healthier school environments.</p> <p>Wellness Coordinators and school staff will have the knowledge to increase and enhance student physical activity throughout the school day.</p> <p>District Wellness Coordinators will receive ongoing training and technical assistance that will increase their capacity to effectively</p>	<p>What non-financial resources are needed?</p> <ul style="list-style-type: none"> - District and school partnerships - Technical assistance <ul style="list-style-type: none"> - District and school partnerships - Meeting space <ul style="list-style-type: none"> - District and school partnerships - Technical assistance 	<p>X</p>	<p>X</p>	<p>X</p>

**INTERGOVERNMENTAL AGREEMENT
ATTACHMENT 1**

**CONTRACT NUMBER
ADHS14-072245**

<p>Action 3: Provide and post Million Hearts/Stroke Awareness resources to 50 community organizations and specifically focus on 10 that serve disparate populations</p>	<p>- PCHD Coordinator Adult/Networkers (A/N)</p>	<p>Pima County residents, including members of disparate populations, are aware of Million Hearts/Stroke Awareness campaigns.</p>	<p>- Community partners</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Q2-15; Q3-15; Q4-20 Action 4: Present and provide Million Hearts/Stroke Awareness materials to 20 healthcare providers/organizations to actively promote during patient interactions</p>	<p>- PCHD Coordinator (A/N)</p>	<p>Healthcare providers/organizations actively promoting Million Hearts/Stroke Awareness campaigns with their patients as part of a patient visit.</p>	<p>- Healthcare partners</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Q2-5; Q3-5; Q4-5 Action 5: Continue to build PCHD's Million Hearts/Stroke Awareness webpage to include more education and localized resources</p>	<p>- PCHD Coordinator (A) - PCHD Health Educators</p>	<p>Increased numbers of hits on PCHD Million Hearts/Stroke Awareness webpage as community members seek more education and localized resources on topics.</p>	<p>- PC Information Technology Dept. - PCHD Communications Dept.</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 6: Demonstrate and provide hands-on education of proper blood pressure machine use and tracking</p>	<p>- PCHD Health Educators</p>	<p>More community members using blood pressure machines for home use properly and tracking results accurately.</p>	<p>- Community partners</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 7: Make available Million Hearts, Stroke Awareness, and ASHLine materials at all CDSMP/Tomando workshops conducted by PCHD</p>	<p>- PCHD Coordinator (A) - PCHD Lay Leaders</p>	<p>CDSMP/Tomando participants accessing Million Hearts/Stroke Awareness Campaign information at resource tables made available at workshops.</p>	<p>- Community partners - ASHLine materials</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Action 8: PCHD will provide promotional bags and informational inserts to healthcare providers/pharmacy's for patient distribution during the nationally observed heart health/ stroke prevention months</p>	<p>- PCHD Coordinator (A/N)</p>	<p>Pima County residents receive Million Hearts/ Stroke Awareness campaign information with their prescription medications and more aware of campaign goals.</p>	<p>- Healthcare partners</p>	<p></p>	<p>X</p>	<p>X</p>

CONTRACT NUMBER
ADHS14-072245

INTERGOVERNMENTAL AGREEMENT
ATTACHMENT 1

Goal 8: Reduce Native youth access to tobacco products in Pima County and support community partnerships.

1. Strategy: Increase Community Collaboration: Support Tucson Indian Center

Strategy is integrated with (check all that apply):

- Tobacco Prevention Policy
- Chronic Disease Self-Management
- Tobacco Cessation Policy
- School Health Policy
- Other (i.e. increase community collaboration):
- Tobacco education

Agency Lead: PCHD

Partners:

Related policy change:

Related environmental change:

What do you plan to do?

Who will do the work?

What does success look like?

What non-financial resources are needed?

Q1

Q2

Q3

Q4

Action 1:
Pima County Health Department will subcontract Tucson Indian Center (TIC) to complete work in tobacco cessation, prevention, and chronic disease amongst urban Native American populations

- PCHD Tobacco and Chronic Disease Prevention Program

TIC will provide tobacco cessation, prevention, and chronic disease programming to reduce use/initiation of tobacco and increase knowledge of chronic disease self-management skills to urban Native American populations

X

X

X

X

N/A

**INTERGOVERNMENTAL AGREEMENT
EXHIBIT ONE (1)**

CONTRACT NUMBER
ADHS14-072245

Arizona Department of Health Services
Accounting/Contracts
1740 W. Adams Street
Phoenix, Arizona 85007

CONTRACTOR'S EXPENDITURE REPORT
1. Contract Number _____ P.O. # _____
2. Contractor Name _____
3. Title of Program _____
4. Reporting Period Covered: From _____ To _____

4A. Cost Reimbursement -
Cumulative Actual Expenditures
 Fixed Price
4B. Periodic Report
 FINAL REPORT

Contractor's Detailed Statement of Expenditures and Fixed Price

5. COST REIMBURSEMENT (Actual Expenditures) A. Account Classification:	Approved Budget	Prior Reporting Period	Year-to-Date	Current Reporting Period	Total Year-to-Date
	(a)	Date Expenditures	Expenditures	Expenditures	Expenditures
Personnel Services	\$ -	-	\$ -	-	\$ -
ERE	\$ -	-	\$ -	-	\$ -
Professional and Outside Services	\$ -	-	\$ -	-	\$ -
Travel Expenses	\$ -	-	\$ -	-	\$ -
Operating Expense	\$ -	-	\$ -	-	\$ -
Capital Outlay Expense	\$ -	-	\$ -	-	\$ -
Other	\$ -	-	\$ -	-	\$ -
Total	\$ -	-	\$ -	-	\$ -
6. FIXED PRICE		Number of Units Provided this Reporting Period	Total Funds Earned this Reporting Period	Prior Report Period Year to Date Funds Earned	Total Year to Date Funds Earned
A. Type of Unit:	(1)	(2)	(3)	(4)	(5)
TOTAL					

ADHS USE ONLY

Total Expenditures or total Fixed Price _____

Adj (if required): _____

Less: Year to date payments _____

Adj (if required): _____

Net payment due: _____

Index _____

PCA _____ AY _____ Amount _____

ADHS PROGRAM COORDINATOR CERTIFICATION:
 Performance satisfactory for payment
 Performance unsatisfactory, withhold payment
 No payment due

PROGRAM COORDINATOR SIGNATURE/DATE _____

7. CONTRACTOR CERTIFICATION
I certify that this report has been examined by me, and to the best of my knowledge and belief, the reported expenditures and fixed price information is valid, based upon our official accounting records (book of account) and consistent with the terms of the contract. It is also understood that the contract payments are calculated by the Department of Health Services based upon information provided in this report.

AUTHORIZED CONTRACTOR'S SIGNATURE / TITLE / DATE _____

PLEASE PRINT - PREPARED BY / PHONE NUMBER _____

ARIZONA DEPARTMENT OF HEALTH SERVICES

INTERGOVERNMENTAL AGREEMENT

CONTRACTOR'S ADDENDUM TO CONTRACT NO. ADHS14-072245

TERMS AND CONDITIONS

7. RISK AND LIABILITY.

7.3 Indemnification – Patent and Copyright is amended to read as follows:

To the extent permitted by A.R.S. § 41-621, A.R.S. § 35-154, A.R.S. § 11-261 and A.R.S. § 11-981, the Contractor shall indemnify and hold harmless the State against any liability, including costs and expenses, for infringement of any patent, trademark or copyright arising out of performance of the Contract or use by the State of materials furnished by or work performed under this Contract. The State shall reasonably notify the Contractor of any claim for which it may be liable under this paragraph.

10. CONTRACT TERMINATION.

10.4 Termination Without Cause is amended to read as follows:

10.4.2. if the Contractor terminates this Contract, any monies prepaid by the State, for which no service or benefit was received by the State, shall be refunded to the State within 5 days of the termination notice. In addition, if the Contractor terminates the Contract, the Contractor shall, to the extent permitted by law, indemnify the State for any sanctions imposed by the funding source as a result of the Contractor's failure to complete the Contract.