



BOARD OF SUPERVISORS AGENDA ITEM REPORT
CONTRACTS / AWARDS / GRANTS

Award Contract Grant

Requested Board Meeting Date: August 20, 2018

* = *Mandatory, information must be provided*

or Procurement Director Award

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

Arizona Early Childhood Development and Health Board (First Things First)

***Project Title/Description:**

Child Care Health Consultation Technical Assistance and Professional Development (training for CCHCs throughout the State of Arizona).

***Purpose:**

Technical assistance services to child care providers and Child Care Health Consultants in Arizona

***Procurement Method:**

Agreement is a non-procurement agreement and not subject to procurement rules.

***Program Goals/Predicted Outcomes:**

This contract requires Pima County to provide training, technical assistance and professional development to Child Care Health Consultants (CCHCs) and Health and Safety Specialists providing services throughout Arizona under the umbrella of First Things First. Child Care Health Consultants offer specialized training and technical assistance to child care staff and directors of centers and homes enrolled in First Things First's Quality First Program. The Health and Safety Specialists are child care staff who on a daily basis dedicate a proportion of his or her hours to the maintenance and improvement of health and safety practices within the child care program where he or she is employed.

***Public Benefit:**

Arizona's child care programs (centers and home-based) provide services to over 215,000 children, about 45,000 of which reside in Pima County. Children require child care while their parent(s), grandparents or foster parents go to work or school or need respite. With large numbers of young children in non-parental care, children's health and safety out-of-home is an essential component of supporting children's physical, cognitive and social-emotional development. This contract provides capacity building in Pima County and throughout Arizona to increase the number of health care professionals trained to act in the roles of Child Care Health Consultants and Health and Safety Specialists so that more child care programs may receive information, training, and technical assistance on creating healthy and safe quality child care environments.

***Metrics Available to Measure Performance:**

This grant requires that Pima County conduct one child care health consultant training, two health and safety specialists trainings, and coordinate four quarterly CCHC professional development sessions on an annual basis. Metrics include the number of health professionals successfully completing training as Child Care Health Consultants, number of child care professionals successfully completing training as Health and Safety Specialists, and the number of individuals attending quarterly professional development sessions.

***Retroactive:**

Yes. This grant agreement is retroactive to July 1, 2018 but was not received until July 24, 2018.

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**If Yes, 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: GTAW Department Code: HD Grant Number (i.e., 15-123): 19-05

Effective Date: 07/01/2018 Termination Date: 06/30/2019 Amendment Number: 00

 Match Amount: \$ _____ Revenue Amount: \$ 53,025.00***All Funding Source(s) required:** First Things First (State tobacco tax revenues)***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)?** _____

Contact: Sharon Grant

Department: Health Telephone: 724-7842

Department Director Signature/Date: *Maryann Janacek* 7-25-18 / *Theresa* 7-25-18Deputy County Administrator Signature/Date: *John* 7-25-18 / *Theresa* 7-25-18County Administrator Signature/Date: *C. DeGeltan* 7/31/18
(Required for Board Agenda/Addendum Items)



MEMORANDUM

Date: July 25, 2018

To: Jan Lesher
Chief Deputy County Administrator

From: Marcy Flanagan, Director *MAK*

Via: Francisco García, Assistant County Administrator *frg*

Re: Proposed Agenda Item for Board of Supervisors Meeting August 20, 2018, Consent Calendar.
New Grant Agreement with the Arizona Early Childhood Development and Health Board (First Things First) for Child Care Health Consultation - Statewide Technical Assistance (GTAW19-05)

Background

Pima County began child care health consultation services in 1987 and began offering Child Care Health Consultant (CCHC) training in 2003. Since 2009, Arizona's child care programs have been receiving CCHC resources through First Things First in support of Arizona's quality improvement and rating system. Pima County has provided the training and technical assistance for CCHCs participating in this program throughout the State from its commencement.

Child Care Health Consultants participating in Arizona's First Things First Quality Improvement and Rating System programs are required to complete training utilizing the National Training Institute for Child Care Health Consultation (NTICCHC) curriculum. Pima County has three CCHCs who implement the CCHC trainings for new hires across Arizona. These CCHCs also provide the health and safety specialist training for child care providers as well as a Train the Trainer health and specialist training for CCHCs statewide.

Discussion

Through this system development grant Pima County is responsible for coordinating the quarterly CCHC update meetings to provide professional development and current information to the CCHCs in Arizona. Four quarterly CCHC update meetings have been planned, with the fourth meeting held as a symposium. The current renewal period for grant, GRA-STATE-19-0975, is July 1, 2018 through June 30, 2018. Total funding for this year is \$53,025.

This grant award is retroactive to July 1, 2018. However, it was not received until July 17, 2018. It has been approved by the FTF Board.

Financial Impact:

There is no cost to the Pima County General Fund.

Recommendation:

Staff recommends approval of this grant amendment.

FIRST THINGS FIRST

Government Agreement Summary	
GRA Number: GRA-STATE-19-0975-01	Region/Funding Source: Statewide
Applicant Information: Pima County Health Department 3950 S. Country Club Road, Suite 100 Tucson, AZ 85714	
Primary Strategy: Child Care Health Consultation	Funding Available: \$53,025.00
Target Service Units <u>Child Care Health Consultation:</u> <ul style="list-style-type: none">• Conduct one CCHC training per fiscal year for newly hired CCHCs in the state and coordinate the training with Maricopa County Department of Public Health.• Conduct two Health and Safety Specialist trainings for early care and education providers per year.	
Brief Description: The purpose of this grant agreement is to provide technical assistance to the Child Care Health Consultants (CCHC) providing services throughout Arizona in the following First Things First Regions: Cochise, Coconino, Colorado River Indian Tribes, East Maricopa, Gila, Gila River Indian Community, Graham/Greenlee, La Paz/Mohave, Navajo Nation, Navajo/Apache, Northwest Maricopa, Pascua Yaqui Tribe, Phoenix North, Phoenix South, Pima North, Pima South, Pinal, San Carlos Apache, Santa Cruz, Southeast Maricopa, Southwest Maricopa, Tohono O'odham Nation, White Mountain Apache Tribe, Yavapai, and Yuma.	
Required Data Template Training The grantee is required to participate in data template training. Further instruction will be provided closer to award.	
Grant Term/Estimated Start Date: The estimated grant term is July 1, 2018 through June 30, 2019, unless terminated, cancelled or extended.	Contact Information: Russell Spencer Fiscal Specialist First Things First Email: Rspencer@azftf.gov Phone: (602) 771-5043

GOVERNMENT AGREEMENT

GRA-STATE-19-0975-01

**Between The
Arizona Early Childhood Development and Health Board
(First Things First)
And
Pima County Health Department
(Grantee)**

I. Purpose

The purpose of this Agreement is to specify the responsibilities and procedures for the Grantee role in administering Arizona Early Childhood Development and Health Board grant funds.

II. Term, Renewal

The term of this Agreement is July 1, 2018 through June 30, 2019. The parties may renew this Agreement for up to three (3) additional twelve (12) month extensions (including lesser parts thereof).

III. Description of Services

Early childhood professionals are entrusted to provide care for children, and they must keep children safe from injuries and infectious diseases while providing care. Health and safety related issues directly impact the quality of early care and education programs. The health and safety standards are based on the Caring for Our Children (*Third edition*) standards that are higher than state licensing standards. The Child Care Health Consultation program is evidence-based and has been shown to promote healthy and safe improvements in child care environments.

The Child Care Health Consultation Technical Assistance (TA) offers training and technical assistance to new Child Care Health Consultants (CCHCs), training for Health and Safety Specialist (HSS) in child care programs, and professional development opportunities for CCHCs. Ongoing professional development is continuing education. Topics for training and professional development are based on the professional development needs of the team of Child Care Health Consultants, which may include licensing, sanitation, hand washing, playground safety, medication management, emergency preparedness, and health and illness management, and updated best practice standards for child care health consultation

The target population includes newly hired Child Care Health Consultants throughout Arizona requiring training and certification prior to providing CCHC services. The TA grant partner may also provide the CCHC training for health assistants or nurses in early care and education programs. In addition, early care and education programs throughout Arizona are the identified population for the Health and Safety Specialist training.

FTF requires grant partners to submit the following types of data for the Child Care Health Consultation strategy:

- Participant level demographic information:
 N/A Yes, Required for SFY 2019 Yes, Capacity Building in SFY 2019
- Programmatic Outcome Data:
 N/A Yes, Required for SFY 2019 Yes, Capacity Building in SFY 2019

IV. GRANTEE'S Responsibilities

The Grantee shall:

- A. Prior to entering into this Agreement, have completed and submitted to First Things First for review and approval the following forms and documents:
 1. Agency/Organization Profile
 2. Personnel - Program Personnel Table and Program Organization Chart
 3. Required Narrative Responses
 4. Implementation Plan
 5. Line-Item Budget and Budget Narrative
 6. Fiscal Information - Funding Sources and Financial Controls
 7. Program Evaluation Information

The completed forms and documents comprise part of this Agreement.

- B. In providing programming described in Section IV.A, the Grantee shall act in accordance with its Program Questions and Narrative Responses; the approved budget; and the following First Things First documents: the Scope of Work (Exhibit A), Guidance Materials (Exhibit B), and the Data Security, Submission and Suppression Guidelines and Requirements for Collaborators (Exhibit C).
- C. Coordinate and collaborate with all First Things First grant recipients, as collaboration is critical to developing a seamless service delivery system for children and families.
- D. Submit timely the reports described in Section VI.

V. Reimbursement/Payment

- A. First Things First shall pay the Grantee on a cost-reimbursement basis for expenses approved in the budget, up to \$53,025.00, on the terms described in this Section.

- B. Payment is conditioned upon receipt by First Things First of timely, accurate and complete (i) reimbursement documents, (ii) Program Narrative Reports and (iii) Data Submission Reports submitted via the First Things First Partner Grant Management System (PGMS). Payments shall be made only for those services performed or goods received.
- C. The Grantee shall submit reimbursement requests at least quarterly, though not more frequently than monthly. **The Grantee shall submit a final reimbursement request marked “final” no more than forty-five (45) days after the Agreement end date.** Expenses eligible for reimbursement must be paid, accrued or obligated by the Grantee by the Agreement term end date. Final payment shall be contingent upon receipt of all fiscal, programmatic, and data reports required of the Grantee under this Agreement. Requests for reimbursement received later than forty-five (45) days after the Agreement end date will not be paid.
- D. Funds provided to the Grantee under this Agreement shall only be used to fulfill the Grantee’s responsibilities under this Agreement. Any questions regarding the appropriate use of the funds shall be resolved by mutual agreement between the parties.
- E. If the Grantee receives reimbursement for expenditures that are disallowed by an audit exception by First Things First, the state or the federal government, the Grantee shall promptly repay the funds to First Things First.

VI. Quarterly Program Narrative and Data Submission Reporting Requirements

- A. At a minimum, the Grantee shall submit quarterly one Program Narrative Report and one Data Submission Report by the 20th of the month following the quarter via PGMS. Failure to submit timely reports will result in suspension of reimbursement. The reports shall contain such information as deemed necessary by First Things First.
- B. Program Narrative and Data Submission Reports are due:

1 st Quarter (July 1 - September 30)	Due: October 20
2 nd Quarter (October 1 - December 31)	Due: January 20
3 rd Quarter (January 1 - March 31)	Due: April 20
4 th Quarter (April 1 - June 30)	Due: July 20
- C. If the Grantee provides services to more than one First Things First region (multi-regional strategies), the Grantee shall collect, store and report the data for the Data Submission Reports separately for each region served.

VII. General Terms

- A. **FTF Grants Uniform Terms and Conditions.** First Things First's Grants Uniform Terms and Conditions (revision date December 2017) are hereby incorporated by reference into this Agreement as if fully set forth herein. Copies of this document are available by emailing the First Things First Procurement Specialist, grants@azftf.gov.
- B. **Working on Tribal Land.** If the Grantee performs any work under this Agreement on sovereign land of a tribe, the Grantee shall comply with any requirements set forth by the tribal government in relation to essential functions of the grant operation, including data collection. It is a material requirement of this Agreement that the Grantee follow all First Things First tribal policies and procedures including the Tribal Data Policy as applicable, obtain all appropriate parental consents and obtain appropriate tribal approvals as designated by tribal authorities, which approval may include a requirement to participate in cultural education and community orientation classes.
- C. **Non-Discrimination.** The provisions of State Executive Order 2009-09 are incorporated herein by reference. These provisions mandate, in part, that contractors will not discriminate against any employee or applicant for employment because of race, age, color, religion, sex or national origin. The Grantee shall also comply with all other applicable state and federal statutes, regulations and executive orders concerning non-discrimination practices, including the Americans with Disabilities Act and Federal Executive Order No. 13279 – Equal Protection of the Laws for Faith-Based and Community Organizations.
- D. **Records.** Pursuant to A.R.S. § 8-1174, the Grantee shall retain and shall contractually require each subcontractor and subgrantee to retain all books, accounts, reports, files and other records ("records") relating to the Agreement for a period of five years after the completion of the Agreement. All records shall be subject to inspection and audit by the State (including First Things First) and by an independent auditor at all reasonable times. Upon request, the Grantee shall produce any or all such records at First Things First's main office in Phoenix, Arizona.

Notwithstanding the foregoing paragraph, pursuant to 2 C.F.R. § 200.333, if the grant includes federal pass-through funds, then the Grantee shall retain and shall contractually require each subcontractor and subgrantee to retain all records pertaining to the federal pass-through funds for a period of three years from the date of submission of the final expenditure report and until any litigation, claims or audit findings involving the records have been resolved and final action taken. All such records shall be accessible and subject to audit in accordance with 2 C.F.R. § 200.336. This paragraph does not apply to a grantee, subgrantee or subcontractor that is a federal agency.

- E. **Non-Availability of Funds.** Every payment obligation of First Things First under this Agreement is conditioned upon the availability of funds appropriated or allocated for the payment of such obligation. If funds are not allocated and available for the continuance of this Agreement, this Agreement may be terminated by First Things

First at the end of the period for which funds are available. No liability shall accrue to First Things First in the event this provision is exercised, and First Things First shall not be obligated or liable for any future payments or for any damages as a result of termination under this paragraph.

F. Relationship of Parties. The Grantee under this Agreement is an independent contractor. Neither party to this Agreement shall be deemed to be the employee or agent of the other party.

VIII. Agreement Administration and Operations

A. Advertising, Publishing and Promotion of Agreement. The Grantee shall not use, advertise or promote information for commercial benefit concerning this grant without the prior written approval of First Things First.

B. Review of Printed Materials. First Things First must review and approve all Grantee publications and/or media funded or partially funded through this Agreement for compliance with this Agreement. The Grantee shall submit to First Things First via PGMS all print and electronic materials related to the programs and services funded under this Agreement before publicly distributing those materials so that First Things First may first review and approve prior to release. If deemed necessary by First Things First, the Grantee shall revise the materials as indicated by First Things First before publicly distributing the materials. First Things First shall have full and complete rights to reproduce, duplicate, disclose, perform, and otherwise use all materials prepared under this Agreement.

C. Acknowledgment of FTF Funding. The Grantee shall recognize First Things First as a funding source of programs and services funded in whole or part under this Agreement in all publicly distributed print or electronic materials related to those programs and services. The Grantee shall make this recognition in a manner described in First Things First's most current protocol and style guide. First Things First will post any updates to the protocol and style guide under the Grantee Resources section of PGMS. The Grantee shall also recognize First Things First as a funding source of programs and services funded in whole or part under this Agreement in all formal oral presentations and media interviews related to those programs and services.

D. Public Awareness Efforts. The Grantee shall consult with First Things First in the planning of public awareness/marketing strategies, such as websites, advertising or media campaigns, related to the programs or services funded under this Agreement.

E. Ownership of Materials and Data. Any materials and data required to be collected, delivered or created under this Agreement, including but not limited to reports, computer programs and other deliverables are the sole property of the State (First Things First). The Grantee shall not use or release these materials or data without the prior written consent of First Things First. The Grantee is not entitled to a patent

or copyright on these materials and data and may not transfer the patent or copyright to anyone else.

- F. **Ownership of Intellectual Property.** Any and all intellectual property, including but not limited to copyright, invention, trademark, trade name, service mark, and/or trade secrets created or conceived pursuant to or as a result of this Agreement and any related subcontract or subgrant ("Intellectual Property"), shall be work made for hire and First Things First shall be considered the creator of such Intellectual Property. First Things First shall own (for and on behalf of the State) the entire right, title and interest to the Intellectual Property throughout the world. The Grantee shall notify First Things First, within thirty (30) days, of the creation of any Intellectual Property by it or its subcontractor(s) and subgrantee(s). The Grantee, on behalf of itself and any subcontractor(s) and subgrantee(s), agrees to execute any and all document(s) necessary to assure ownership of the Intellectual Property vests in the State and shall take no affirmative actions that might have the effect of vesting all or part of the Intellectual Property in any entity other than the State. The Intellectual Property shall not be disclosed by Grantee or its subcontractor(s) and subgrantee(s) to any entity not the State without the express written authorization of First Things First.
- G. **Sectarian Purposes.** Funds provided under this Agreement may not be expended for any sectarian purpose or activity, including religious worship or instruction. Additionally, the Grantee shall implement the programs or services funded under this Agreement consistent with the First Amendment of the United States Constitution. With respect to these programs or services, the Grantee also shall not discriminate against any program or service beneficiary or applicant on the basis of religion. First Things First reserves the right to verify or monitor compliance with this paragraph. The Grantee shall repay any funds awarded under this Agreement that the Grantee spends in violation of this paragraph.

IX. Indemnification

- A. **Not State Agency.** This paragraph applies if the Grantee is not a department, agency, board, commission or university of the State. Each party (as "Indemnitor") agrees to defend, indemnify, and hold harmless the other party (as "Indemnitee") from and against any and all claims, actions, liabilities, damages, losses, costs or expenses (including reasonable attorneys' 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 including its officers, officials, agents, employees or volunteers. The State of Arizona, Early Childhood Development and Health Board (First Things First) is self-insured per A.R.S. § 41-621.
- B. **Patent and Copyright.** The Grantee 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 grant performance or use by the State of materials furnished or work performed under this Agreement. The State shall reasonably notify the Grantee of any claim for which it may be liable under this paragraph. This paragraph does not apply if the Grantee is insured pursuant to A.R.S. § 41-621.

C. Subcontractors. The Grantee shall contractually require its subcontractors and subgrantees, if any, to defend, indemnify and hold harmless the State of Arizona and its departments, agencies, boards, commissions, universities, officers, officials, agents and employees ("State") from and against any and all Claims (including court costs, attorneys' fees, and costs of claim processing, investigation and litigation) for bodily injury or personal injury (including death), or loss or damage to tangible or intangible property caused, or alleged to be caused, in whole or in part, by the negligent or willful acts or omissions of the subcontractor or subgrantee or any of its owners, officers, directors, agents, employees, volunteers, or subcontractors. This indemnity shall include any claim or amount arising out of or recovered under the Workers' Compensation Law or arising out of the failure of the subcontractor or subgrantee to conform to any federal, state or local law, statute, ordinance, rule, regulation, or court decree. It is the specific intention of the parties that the State shall, in all instances, except for Claims arising solely from the negligent or willful acts or omissions of the State, be indemnified by the subcontractor or subgrantee from and against any and all Claims. It is agreed that the subcontractor or subgrantee will be responsible for primary loss investigation, defense and judgment costs where this indemnification is applicable. The subcontractor or subgrantee shall agree to waive all rights of subrogation against the State for losses arising from the work performed by the subcontractor or subgrantee for the State.

X. **Insurance.**

The Grantee shall provide a Certificate of Self-Insurance. The Certification shall be sent directly to First Things First, Fiscal Specialist, 4000 N. Central, Suite 800, Phoenix, Arizona 85012. If the Grantee is a department, agency, board, commission or university of the State of Arizona, then the Certificate of Self-Insurance requirement does not apply.

In addition, the Grantee shall contractually require its subcontractors to procure and maintain until all of its obligations have been discharged or satisfied, including any warranty periods under this Agreement, insurance against claims for injury to persons or damage to property which may arise from or in connection with the performance of the work by the subcontractor and its owners, officers, directors, agents, employees, or volunteers. The insurance policies shall be in accordance with recommendations of the Risk Management Division of the Arizona Department of Administration, including its published Insurance Modules, and in consultation with First Things First.

XI. **Termination Upon 30 Days Notice**

In addition to the termination provisions incorporated by reference, either party may terminate the Agreement for any or no reason by giving at least thirty (30) days written notice of termination to the other party. If the Grantee requests termination under this provision, the Grantee shall cooperate with reasonable requests from First Things First to decrease services and costs related to the Agreement.

XII. Notices

The Grantee shall address all notices related to this Agreement to:

First Things First
Finance Division
4000 N. Central Avenue, Suite 800
Phoenix, AZ 85012

First Things First shall address all notices related to this Agreement to:

Director
Pima County Health Department
3950 S. Country Club Road, Suite 100
Tucson, AZ 85714

XIII. Grantee Assurances

Grantee's Authorized Official to initial the following:

GENERAL

- To adhere to the most current version of the Standards of Practice documents (available at <http://www.firstthingsfirst.org/grants/strategy-toolkit>)
- To adhere to the Data Security, Submission and Suppression Guidelines and Requirements for Collaborators, as applicable.
- To review and adhere to the First Things First Grants Uniform Terms and Conditions. Copies of this document are available by emailing grants@azttf.gov .
- To accept funds and administer the programs in accordance with all applicable federal and state statutes and regulations and Grant Agreement requirements.
- To maintain internal controls, including policies and procedures, for assuring compliance with applicable cost principles and other Grant Agreement requirements.
- To follow established personnel policies related to salary scales, fringe benefits, and travel reimbursement.

- To use generally accepted accounting principles (GAAP).
- To perform required financial and compliance audits in accordance with federal law and guidelines, including the Single Audit Act and 2 CFR Part 200.
- To maintain documentation for employees working across multiple funding sources to ensure the amount of time charged to each employee does not exceed 100%.
- To have fiscal control and fund accounting procedures in place to ensure proper disbursement of and accounting for any funds paid to subcontractors.
- To maintain enrollment and participate in e-verify, if an employer.
- To maintain a system of contract administration to ensure conformance with the Grant Terms and Conditions.

PROGRAMMATIC

- To use proven, effective and/or evidence based programs.

- To maintain the personnel qualifications outlined in the Standards of Practice with subsequent hires.
- To comply with any applicable federal, state, and local health and safety requirements that apply to the facilities used for a program.
- To actively participate in the Quality Assurance process, including assessments.
- To coordinate, to the extent possible, with other programs in the same geographic area that serve similar target populations.
- To coordinate with First Things First during the length of the program period.
- To acknowledge funding from FTF in publicly-distributed materials in compliance with FTF's brand guidelines and submit such materials in advance for review.
- To consult with FTF in the planning of public awareness/marketing strategies such as websites, advertising or media campaigns.

EVALUATION

- To provide regular and timely reporting and to participate in all pertinent First Things First research and evaluation efforts.
- If an evaluation study has been conducted on the proposed program, a copy of the evaluation report (if available) will be submitted to First Things First.
- If funds are being requested to conduct an evaluation study, approval by First Things First Research and Evaluation team will be obtained prior to implementation.
- If the evaluation study will include a tribal community, approval by First Things First Research and Evaluation team and Tribal Affairs division will be obtained prior to implementation.

XIV. Authority to Execute this Agreement

Each individual executing this Agreement represents and warrants that he or she is duly authorized to do so.

XV. In Witness Whereof

The parties hereto agree to carry out the provisions of this Agreement.

**FOR AND BEHALF OF
PIMA COUNTY**

Richard Elías, Chairman
Pima County Board of Supervisors

Date

Attest:

Clerk, Board of Supervisors

Approved as to form:


Paula J. Diaz
Deputy County Attorney

Approved as to content:


Marcy M. Hagan
Department Representative

**FOR AND BEHALF OF THE
Arizona Early Childhood Development
And Health Board**

Josh Allen
CFO/COO

Date

Date

7.24.18

Date

7.25.18

Date

Government Agreement Attachments and Exhibits

Attachment A	Agency/Organization Profile
Attachment B	Personnel - Program Personnel Table and Program Organization Chart
Attachment C	Required Narrative Responses
Attachment D	Implementation Plan
Attachment E	Line Item Budget and Budget Narrative
Attachment F	Fiscal Information - Funding Sources and Financial Controls
Attachment G	Program Evaluation Information
Exhibit A	Overview of First Things First and Scope of Work
Exhibit B	Guidance Materials
Exhibit C	Data Security, Submission and Suppression Guidelines and Requirements for Collaborators

Attachment A - Profile

Agency/Organization Profile

A. Grantee Information:

Agency/Organization Pima County Health Department Contact Person Victoria Altamirano
Address 3950 S Country Club Rd. Ste 100 Position Program Manager, Sr
Address _____ Email Victoria.altamirano@pima.gov
City, State, Zip Tucson, AZ 85714
Phone 520-724-3961 Ext _____ County Pima

Employer Identification Number: 86-6000543

Agency Classification: State Agency County Government Local Government Schools
 Tribal Faith Based Non Profit Private Organization Other

Have you conducted business with First Things First using this EIN within the last year? Yes No
If not or if there has been address or EIN changes, please go to https://goo.az.gov/sites/default/files/GAO-W-9_072815-S%26S%26A.pdf, download the State of Arizona Substitute W-9 Form, and submit with your application.

Congressional district (federal) in which agency provides most services: District # 7

Legislative district (state) in which agency provides most services: District # 25, 26, 27, 28, 29, 30
Go to <http://www.azredistricting.org> and click on Final Maps to identify your congressional and legislative district

Approximate federal funding (from a federal source) to be received in current fiscal year? \$ 40,956,040

Agency's fiscal year-end date: June 30, 2019

Agency's accounting method: Cash Accrual

Does your organization undergo an annual independent audit in accordance with 2 CFR Part 200, Subpart F?
 Yes No

Contact information for firm conducting agency audit:

Audit firm: Arizona Office of the Auditor General

Address: 3910 N 44th Street, Phoenix, AZ 85018

Phone: (602)553-0333

B. Program Details:

Program Name: Pima County Health Department-Child Care Health Consultation

(The specific name of the program if different from the name of the strategy, organization, or model. If none, then enter N/A)

Program Model: N/A

(The specific name of the program model that has been proposed. If none, then enter N/A)

Geographic Area and/or Target Population: Statewide

Brief Program Description (250 words or less):

The Pima County Health Department (PCHD) supports First Things First in the development and promotion of a coordinated statewide Child Care Health Consultation Program serving childcare providers in Arizona. This includes training of Child Care Health Consultants (CCHC) utilizing the curriculum of the National Training Institute for Child Care Health Consultants (NTI-CCHC) and coordinating quarterly update meeting for all Arizona CCHC's. PCHD CCHC Program collaborates with others in the state providing CCHC and Health & Safety Specialist (HSS) training to review and update training materials and practices.

Strategy and Proposed Service Units

Child Care Health Consultation:

- Conduct one CCHC training per fiscal year for newly hired CCHCs in the state and coordinate the training with Maricopa County Department of Public Health.
- Conduct two Health and Safety Specialist trainings for early care and education providers per year.

C. Contact Information:

The First Things First Partner Grant Management System (PGMS) has four contact slots per contract. The same person may be assigned to more than one slot.

Main Contact: is responsible for the overall program and will have access to all financial, programmatic, and data reports in PGMS.

Finance Contact: is responsible for the submission of reimbursement requests through PGMS and will have access to budget and reimbursement information in PGMS.

Program Contact: is responsible for program implementation and will have access to the program and data reports in PGMS.

Evaluation Contact: is responsible for the program evaluation and data collection activities and will have access to only the data reports in PGMS.

PGMS Contacts		
Main Contact	Name: Victoria Altamirano	Email: Victoria.altamirano@pima.gov
	Title/Position: Program Manager, Sr	Phone: 520-724-3961
Physical Address (if different than the agency address):		
Finance Contact	Name: Candace Moore	Email: Candace.moore@pima.gov
	Title/Position: Financial Analyst Supervisor-Finance	Phone: 520-724-7783
Physical Address (if different than the agency address): 130 W Congress, rm 411 Tucson, AZ 85701		
Program Contact	Name: Carol Baker	Email: Carol.baker@pima.gov
	Title/Position: PHN-Lead CCHC	Phone: 50-724-7828
Physical Address (if different than the agency address):		
Evaluation Contact	Name: Victoria Altamirano	Email: Victoria.altamirano@pima.gov
	Title/Position: Program Manager, Sr	Phone: 520-724-3961
Physical Address (if different than the agency address):		

Attachment B - Personnel**Program Personnel Table**

In the following table, provide a list of all personnel or positions employed by the applicant that will be fully or partially funded through the program. Expand as needed. For Key Personnel, include the name and position title; pertinent background/experience that specifically relates to the program, including degrees, field of study, number of years in the field, and other qualifications that align with the Standards of Practice requirements; and their roles and responsibilities. If the position is to be hired (TBH), then describe the desired background/experience/degrees and field of study. For all personnel, provide the Full Time Equivalent (FTE) for each position.

Key Personnel - those individuals directly responsible for program implementation/services and are fully or partially funded through the proposed program.			
Name/ Position Title	Background/Experience* (include qualifications that align with the Standards of Practice)	Key Roles and Responsibilities	FTEs funded through the program
<i>Carol Baker, BSN RN, Supervising Public Health Nurse</i>	<i>Resume on file at FTF: Providing health and safety consultation in child care programs for 6 years. Graduate of the National Training Institute for Child Care Health Consultants</i>	<i>Provide assessment, consultation, referral and training to Quality First- enrolled programs. Assist with program management in the absence of the program manager. Provide monitoring and leadership for CCHC's</i>	<i>0.5</i>
Additional Personnel - those individuals partially funded through the proposed program but who do not directly implement or have direct oversight of the program.			
<i>Example: Roberta Johnson, Executive Director</i>			<i>0.5</i>
Total Number of FTEs funded or partially funded through program:			0.5

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

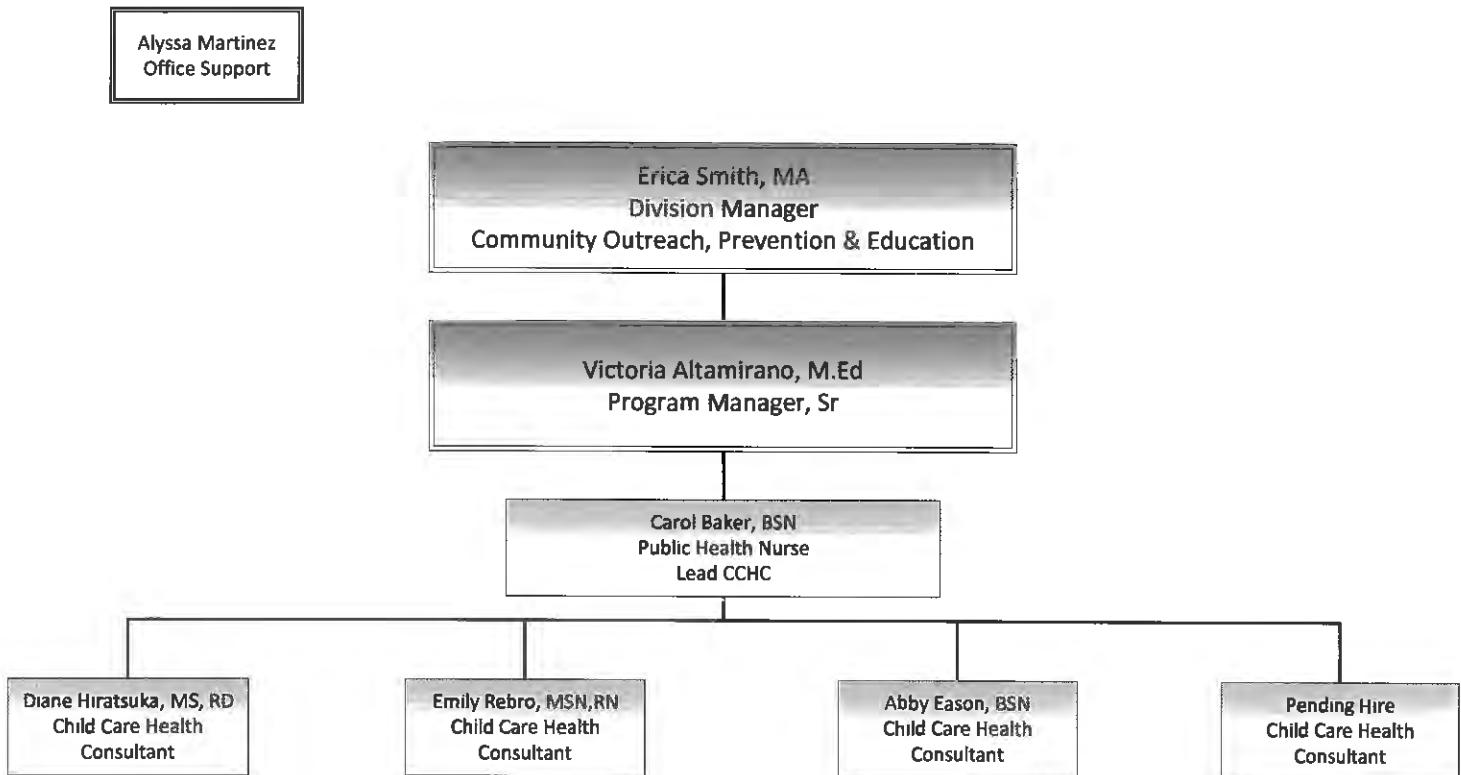
If awarded and the program undergoes changes in staff, a Staff Change Notification form along with an updated version of this Program Personnel Table will need to be submitted to First Things First within 14 days of the proposed change.

Section B - Personnel

Program Organization Chart

Include a Program Organization Chart that represents all personnel involved in program implementation - those that are fully or partially funded through the program and those that are provided in-kind to support some aspect of the program. The chart should illustrate administrative, supervisory, financial, and data collecting/reporting positions - and should differentiate between the funded and in-kind positions in some manner, such as a different background color in the chart. If subcontracting with an agency - list the agency (preferably in another color); the total number of positions involved in program implementation; and identify who has supervisory oversight of the subcontractor.

Example:



Attachment C- Narrative Responses

Required Narrative Responses

Provide a narrative response that addresses the following items.

- A. Provide a description of the Technical Assistance Child Care Health Consultation program proposed, including a description of how you will implement and carry out technical assistance for the CCHC program in Arizona.

Conduct one (1) NTI-CCHC curriculum based training to individuals contracted to provide childcare health consultation to First Things First (FTF) projects and other across the state that request and are qualified to provide CCHC services.

Coordinate and arrange topics and speakers for quarterly CCHC update meetings on issues impacting health and safety in childcare centers with one meeting as a symposium.

Conduct two (2) Health and Safety Specialist trainings for early care and education providers per year.

All trainings and quarterly update meetings will be posted on basecamp.

- B. Provide a description of the following related to the target population to be served by the proposed strategy:

- How the program will specifically serve Child Care Health Consultants, both newly hired and current consultants.

Conduct one (1) NTI-CCHC curriculum based training to individuals contracted to provide childcare health consultation to First Things First (FTF) projects and other across the state that request and are qualified to provide CCHC services.

Coordinate and arrange topics and speakers for quarterly CCHC update meetings on issues impacting health and safety in child care centers with one meeting as a symposium.

- How the program will meet the needs of the targeted population in terms of being culturally responsive, linguistically appropriate, age appropriate and gender responsive.

All trainings are tailored to meet the needs of our audience. Staff are aware of the literacy levels of the various populations we serve and strive to make all trainings appropriate. Translation services are available.

- How the program will specifically outreach to early care and education programs for the Health and Safety Specialist Training.

Conduct two (2) Health & Safety Specialist training in Pima County that is open to anyone in the state to implement material created in collaboration with Maricopa County to provide health & safety support to Early Childhood Education programs through an identified staff member.

C. Identify infrastructure or capacity building, which will be needed to provide the proposed program, including agreements and partnerships with other departments and agencies, additional resources, and training and technical assistance.

None

D. Identify barriers to providing the proposed program and plans for addressing these barriers.

There is a shortage of NTI trained staff to implement trainings. Pima will work closely with Maricopa County and First things first to find possible solutions to this problem.

E. Describe how collaboration will be approached and the steps that will be taken to promote collaboration with the Maricopa County Department of Public Health CCHC program, and describe how collaborations will align with the continuum in the Standards of Practice and Scope of Work.

As the technical assistance provider for Arizona, PCHD will work closely with Maricopa County Health Department to assure that the CCHC and HHS training is standard statewide. In addition to trainings, Pima will meet with Maricopa County at least quarterly to plan and implement the annual CCHC Symposium and develop a training plan. Pima will develop and implement, in coordination with Maricopa, a meeting schedule to discuss training topics, needs, etc. Activities align with scope of work by assuring that CCHC's in Arizona receive adequate training and preparation to fulfill their role.

Attachment D - Implementation Plan

The purpose of the Implementation Plan is to identify and define the activities, tasks, and timelines for implementation of the proposed program to ensure effective implementation. The Implementation Plan demonstrates the day-to-day activities and operations of the proposed program that align to and fulfill the strategy Standards of Practice and/or Scope of Work. If the proposed program will be implemented for the first time, the implementation plan should include the additional activities required for start-up and the anticipated timelines for the onset of service delivery to the target population.

All applicable activities and timelines for the following components must be addressed in the plan. Note: the date the task will be completed should include a level of specificity that demonstrates when and how often the activity will take place (e.g. weekly, bi-monthly, quarterly, etc.) Terms such as ongoing, continuous or until met are not acceptable.

Implementation Plan July 1, 2018 – June 30, 2019

I. Organizational Infrastructure - including but not limited to the following activities. Add additional rows as needed.				
Activity <i>a major unit of work for strategy implementation</i>	Task(s) <i>set of specific steps or actions to complete the activity</i>	Person(s)/Roles Responsible	Timeframe Task(s) Will Be Completed <i>A date, range of dates or frequency (daily, weekly, monthly, quarterly, annually)</i>	Supporting Documentation
<i>Local Policy and Procedure Manual for Pima County</i>	<i>Determine what processes, etc. related to this grant need a policy/procedure</i> <i>Work with department personnel to develop policies and procedures</i>	<i>PHN-Lead CCHC Program Mgr, Sr</i>	<i>By 12/1/2018</i>	<i>Completed Manual</i>
<i>Cultural Competency Training</i>	<i>Research available trainings</i> <i>Assign staff to attend</i>	<i>PHN-Lead CCHC Program Mgr, Sr</i>	<i>1 time per year</i>	<i>Certificate of attendance</i>

<p>II. Outreach and Marketing to the target population and geographic area (including but not limited to the following activities)</p> <ul style="list-style-type: none"> o The development and approval of collateral materials - brochures, flyers etc. (refer to FTF Branding Guide, http://www.firstthingsfirst.org/grants/grantee-resources) o Media and news releases (refer to FTF Branding Guide, same link) o Plan and implementation of targeted outreach activities o Coordination and alignment with partners of outreach to target population to be served 				
Activity <i>a major unit of work for strategy implementation</i>	Task(s) <i>set of specific steps or actions to complete the activity</i>	Person(s)/Roles Responsible	Timeframe Task(s) Will Be Completed <i>A date, range of dates or frequency (daily, weekly, monthly, quarterly, annually)</i>	Supporting Documentation
<i>Advertising</i>	<i>Create flyer(s) to be sent out to all First Things First participants to solicit early care & education providers to begin the process of earning the recognition of being a Child Care Health & Safety Specialist</i>	<i>Carol Baker, RN PHN-Lead CCHC</i>	<i>As scheduled</i>	<i>Included in the quarterly narrative reports</i>
<p>III. Service/Program Delivery (including but not limited to the following activities)</p> <ul style="list-style-type: none"> o When services/programming will occur (Frequency/duration) o Implementation of intake, enrollment and referral processes, as applicable o Implementation of ongoing program elements and activities required in the Standards of Practice and/or Scope of Work (how often and when they are to occur) - e.g., core model elements, screenings, assessments, surveys, etc. o Determination and processes for ending the service - e.g., completion or discontinuation of services as determined by type of strategy and target population 				
Activity <i>a major unit of work for strategy implementation</i>	Task(s) <i>set of specific steps or actions to complete the activity</i>	Person(s)/Roles Responsible	Timeframe Task(s) Will Be Completed <i>A date, range of dates or frequency (daily, weekly, monthly, quarterly, annually)</i>	Supporting Documentation
<i>Training-CCHC</i>	<i>Conduct one (1) CCHC training series facilitated by a graduate of the National Training Institute for Child Care Health Consultants (NTI-CCHC) utilizing the curriculum of NTI</i>	<i>Carol Baker, RN PHN-Lead CCHC</i>	<i>As scheduled</i>	<i>Summary of training reports to be uploaded with the quarterly narratives</i>

<i>Training-HSS</i>	<i>Conduct two (2) Health & Safety Specialist trainings for early care & education providers per year</i>	<i>Carol Baker, RN PHN-Lead CCHC</i>	<i>As scheduled</i>	<i>Included in the quarterly narrative reports</i>
<i>Training-Quarterly Update Meetings</i>	<i>Coordinate and arrange topics and speakers for quarterly CCHC update meetings on issues impacting health and safety in child care centers with one meeting as a symposium.</i>	<i>Carol Baker, RN PHN-Lead CCHC</i>	<i>As scheduled</i>	<i>Included in the quarterly narrative reports</i>

IV. Coordination and Collaboration (including but not limited to the following activities)

- Describe the process for and implementation of collaboration efforts:
 - Within your organization, across unit/team coordination, as applicable
 - With external partners including other organizations that are a part of the early childhood system (FTF grant partners, FTF Regional Partnership Councils, and FTF regional grant partner meetings, non-profits, community or county-based alliances, coalitions, initiatives, state or tribal government entities, national model organizations, professional entities, faith communities, etc.),
 - With sub-grant partners, consultants, volunteers, etc.

Activity <i>a major unit of work for strategy implementation</i>	Task(s) <i>set of specific steps or actions to complete the activity</i>	Person(s)/Roles Responsible	Timeframe Task(s) Will Be Completed <i>A date, range of dates or frequency (daily, weekly, monthly, quarterly, annually)</i>	Supporting Documentation
<i>Training-CCHC</i>	<i>Collaborate with Maricopa County to update NTI training plans and standardize trainings across the state</i>	<i>Carol Baker, RN PHN-Lead CCHC</i>	<i>As scheduled</i>	<i>Included in the quarterly narrative reports</i>
<i>Training-HSS</i>	<i>Collaborate with Maricopa County to update HSS training plans and standardize trainings across the state</i>	<i>Carol Baker, RN PHN-Lead CCHC</i>	<i>As scheduled</i>	<i>Included in the quarterly narrative reports</i>

<i>Training-Quarterly Update Meetings</i>	<i>Collaborate with Maricopa County to Arrange topics and speakers for quarterly meetings and symposium</i>	<i>Carol Baker, RN PHN-Lead CCHC</i>	<i>As scheduled</i>	<i>Included in the quarterly narrative reports</i>
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V. Continuous Quality Improvement (CQI)

- Staff supervision including program directors/managers, supervisors, line staff, and administrative staff (e.g. individual supervision, team meetings, staffing, chart reviews, observation and shadowing, etc.)
- Review of program implementation and current CQI methods (e.g., data collection, surveys, participant feedback, etc.) to inform ongoing work
- Ongoing review and updating of program policies and procedures

Activity <i>a major unit of work for strategy implementation</i>	Task(s) <i>set of specific steps or actions to complete the activity</i>	Person(s)/Roles Responsible	Timeframe Task(s) Will Be Completed <i>A date, range of dates or frequency (daily, weekly, monthly, quarterly, annually)</i>	Supporting Documentation
<i>Performance Management</i>	<i>Staff receive annual performance appraisals and performance plans</i>	<i>Program Manager Lead CCHC – TA Coordinator</i>	<i>Annually</i>	<i>Completed plans and appraisals</i>
<i>Participant Feedback and Surveys</i>	<i>Develop tools to collect participant feedback from trainings Develop, implement and evaluate an annual survey for trainers and program participants</i>	<i>Program Manager Lead CCHC – TA Coordinator</i>	<i>Tools (feedback and survey) developed or revised by 9/1/2018 Survey conducted and analyzed by the end of the FY</i>	<i>Completed tools Results of survey</i>

VI. Data Collection, Reporting and Evaluation

- Ongoing data entry
- Reporting and submission of data and narrative reports to FTF, State and National Offices
- External evaluation, if applicable

Activity <i>a major unit of work for strategy implementation</i>	Task(s) <i>set of specific steps or actions to complete the activity</i>	Person(s)/Roles Responsible	Timeframe Task(s) Will Be Completed <i>A date, range of dates or frequency (daily, weekly, monthly, quarterly, annually)</i>	Supporting Documentation
<i>Data Entry</i>	<i>CCHC staff collect and enter required data within 5 days of the activity into PGMS (as appropriate)</i>	<i>All CCHC Staff</i>	<i>On-Going</i>	<i>PGMS</i>
<i>Quarterly Reports</i>	<i>Lead CCHC collects data from PGMS to write and submit quarterly narrative report</i>	<i>Lead CCHC</i>	<i>Quarterly</i>	<i>Quarterly Report</i>
VII. Financial Oversight and Management <ul style="list-style-type: none"> o Review of budget o Reimbursements o Modifications 				
Activity <i>a major unit of work for strategy implementation</i>	Task(s) <i>set of specific steps or actions to complete the activity</i>	Person(s)/Roles Responsible	Timeframe Task(s) Will Be Completed <i>A date, range of dates or frequency (daily, weekly, monthly, quarterly, annually)</i>	Supporting Documentation

<i>Budget Management: Program Management</i>	<ol style="list-style-type: none"> 1. <i>Oversee budgets & procurement of program supplies</i> 2. <i>Oversee compliance with contract and implementation plan requirements</i> 3. <i>Prepare quarterly reports of CCHC activities for submission in the Partner Grants Management System (PGMS)</i> 4. <i>Preparation and submission of invoices for payment</i> 5. <i>Monitoring of program revenues and expenses</i> 	<i>Program Manager, SR</i> <i>Program Manager, Sr & Lead CCHC</i> <i>Lead CCHC</i> <i>Pima County Grants Management</i> <i>Pima County Grants Management</i>	<i>Ongoing</i> <i>Ongoing</i> <i>October 20, 2018</i> <i>January 20, 2019</i> <i>April 20, 2019</i> <i>July 20, 2019</i> <i>Monthly</i> <i>Monthly</i>	<i>Reports submitted in PGMS</i> <i>Reports submitted in PGMS</i> <i>Reports submitted in PGMS</i> <i>Expenditure reports and invoices</i> <i>Pima County Financial Mgmt System</i>
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VIII. Other

Include any additional components and activities associated with the proposed program not listed above.

Activity <i>a major unit of work for strategy implementation</i>	Task(s) <i>set of specific steps or actions to complete the activity</i>	Person(s)/Roles Responsible	Timeframe Task(s) Will Be Completed <i>A date, range of dates or frequency (daily, weekly, monthly, quarterly, annually)</i>	Supporting Documentation

Attachment E - Line-Item Budget and Budget Narrative

FY19 Line-Item Budget

Budget period: July 1, 2018 – June 30, 2019

Budget Category	Line Item Description	Requested Funds	Total Cost
PERSONNEL SERVICES		Personnel Services Sub Total	\$31,086
Salaries	.50 CCHC Lead/Trainer	\$31,086	
EMPLOYEE RELATED EXPENSES		Employee Related Expenses Sub Total	\$8,914
Fringe Benefits or Other ERE	.50 CCHC Lead/Trainer	\$8,914	
PROFESSIONAL AND OUTSIDE SERVICES		Professional & Outside Services Sub Total	\$
Contracted Services			
TRAVEL		Travel Sub Total	\$1,167
In-State Travel	In-State Travel	\$1,167	
Out-of-State Travel			
AID TO ORGANIZATIONS OR INDIVIDUALS		Aid to Organizations or Individuals Sub Total	\$
Subgrants or Subcontracts to organizations/agencies/entities			
OTHER OPERATING EXPENSES		Other Operating Expenses Sub Total	\$7,038
• Telephones/Communications Services			
• Internet Access			\$200
• General Office Supplies	General office supplies for .50 FTE		
• Food			
• Rent/Occupancy			\$200
• Evaluation (non-contracted & non-personnel expenses)	Snack items for HHS Trainings held 2X year and other professional development trainings 12Xyr		
• Utilities			
• Furniture			
• Postage			
• Software (including IT supplies)			
• Dues/Subscriptions	Handouts, flyers, Brochures, training materials, etc.		\$500
• Advertising			
• Printing/Copying			
• Equipment Maintenance	Annual Symposium for CCHC's conducted by PCHD		\$5,000
• Professional Development (Staff Training, Conferences, Workshops, Training Fees for Staff)			
• Insurance	Brochures, pamphlets, and other materials for trainings		\$1,138
• Program Materials			
• Program Supplies			
• Scholarships			
• Program Incentives			
CAPITAL EQUIPMENT		Capital Equipment Sub Total	\$
Equipment \$5,000 or greater in value			
NON-CAPITAL EQUIPMENT		Non-Capital Sub Total	\$
Equipment \$4,999 or less in value			
Subtotal Direct Program Costs:			\$48,205
ADMINISTRATIVE/INDIRECT COSTS		Total Admin/Indirect	\$4,820
Indirect/Admin Costs			\$4,820
Total			\$53,025

Authorized Signature

Date 7.25.18

FY19 Budget Narrative

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

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

Description	Number	Unit	Rate	Total
1 Supervising RN- C. Baker (.50 FTE)	1040	Hour	\$29.89	\$31,086
Personnel Salary Total				\$31,086

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

Description	Number	Unit	Rate	Total
1 Supervising RN CCHC (.50 FTE) C. Baker	\$17,828	Dollars	Actual Cost	\$8,914
ERE and Fringe Benefit				\$8,914

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

Professional/Outside Services Total	\$ 0.00
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Travel: *Separate in-state and out-of-state travel. Include a detailed breakdown of hotel, transportation, meal costs, etc. Indicate the location(s) of travel, the justification for travel, how many employees will attend and how the estimates have been determined. Applicants **must** use the State of Arizona Travel Policy and rates limitations for mileage, lodging, and meals (<https://gao.az.gov/travel/welcome-gao-travel>) for both in-state and out-of-state travel.*

Description	Number	Unit	Rate	Total
In-State Travel & Training to Phoenix				
Meetings, trainings and annual symposium	8	240 miles	1920 x \$.445	\$855
	8	Days (1 employee)	8 x \$39	\$312

Sub-Total Local and Training travel	\$1,167
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Aid to Organizations or Individuals: *In the event that this application represents collaboration and you will be utilizing subcontractors (including subgrantees) to perform various components of the program, include a list of subcontractors, programmatic work each subcontractor will perform, and how costs for each subcontractor are determined.*

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

General Office Supplies & Equipment

Description	Number	Unit	Rate	Total
Office Supplies Binders, paper/colored paper for teaching Projects, administrative requirements, Desk supplies i.e., paper clips, staples, pens, Pencils, post-its, folders, envelopes, calendars, Computer media, etc.	.50 staff	Annual Supply	\$200	\$200
Food Water and snacks for HHS trainings and other professional development trainings	12	Monthly	\$16.66	\$200
Printing for handouts, flyers, Brochures, training materials, etc.	1	Annual Supply	Varies	\$500
Program Materials -Brochures, CD's, Pamphlets, Materials for trainings, materials for centers (sleep sacks...)		Annually	Varies per item purchased	\$1,138
Professional Development Annual Symposium for CCHC's conducted by PCHD (Conference Facility and ancillary supplies and services)	1	Ea	Annually	\$5,000
Sub-total General Office Supplies & Equipment				\$7,038.00

Capital Equipment: If allowable within the scope of the grant - For items that are tangible, non-expendable, and movable having a useful life of more than one year and a value of \$5,000 or greater, explain each item to be purchased, how the costs were determined and justify the need for the items based on the scope of work and the benefit to the program. All purchases should be made through competitive bid or using established competitive purchasing procedures.

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

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

The standard PCHD indirect cost rate is 20.53% of personnel and ERE to support: overall management, costs of financial, accounting, auditing, contracting or general legal services; costs of internal evaluation; overall liability insurance that protects the agency/organization(s) responsible for operating a program, other than insurance costs solely attributable to the program. Administrative costs also include that portion of salaries and benefits of the program's director and other administrative staff not attributable to the time spent in support of a specific program. Since FTF caps indirect costs at 10% of direct cost, 10% of direct is included here.

Description	Number	Calculation	Rate	Total
Administrative/Indirect	\$48,205	10% of direct costs	10%	\$4,820.00
Administrative/Indirect Cost Total				\$4,820.00

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

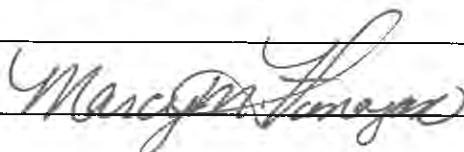
Applicants must list either Option A or Option B and provide proper justification for expenses included:

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

OR

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

Authorized Signature



Date 7.25.18

Annex F - Fiscal Information

Funding Sources and Financial Controls

A. **Funding Sources.** In the following table, identify other funding/resources (including federal, state, local and private funding) that the agency/organization will leverage to achieve the objectives of the proposed program. First Things First (FTF) funding can be used to enhance or expand the program funded by these additional funds, but FTF funding cannot supplant or be used to replace any existing state or federal funding for early childhood development and health programs.

Type of Funding (federal, state, local, private) and Agency/Organization Received From:	Brief Description of How the Funding Helps Achieve the Program Objectives	Amount
Total:		

B. **Financial Controls.**

Grantees will be expected to follow generally accepted accounting principles and be consistent with policies, regulations, and procedures that apply uniformly to all costs charged and expended by their agency/organization - across all funding sources.

Describe the financial controls and accountability measures the agency/organization will employ for the use of FTF funding for the proposed program.

Fiscal Internal Control – Each Finance employee has well defined, standardized, performance expectations, with their documented performance rated against these criteria at least annually. Through supervisory monitoring, individualized intervention (if needed) is provided regularly by the direct supervisor, to assure work meets or exceeds standards. Staff are provided training on various systems used to fulfill accounting responsibilities, such as AMS and ADP, exporter, etc. Additionally, Pima County provides centralized Finance Administrative Procedures, followed by staff, with well-defined segregation of duty, fiscal authority and accountability. Finally, Grant Management Supervisors are well versed in each contract their staff supports, as well as the governing regulations. Fiscal centralization has increased efficiency and standardization of processes for the financial internal controls, and effective partnerships remain in place to ensure regular, effective communication with the grants' programmatic staff. To improve internal control, Pima County implemented (July 2011) a new Enterprise Resource Program (ERP) called Advantage (AMS). This system, implemented across functional areas, has added workflow controls, standardization

and transparency.

Authorized Signature _____ Date _____

Attachment G - Program Evaluation Information

Program Evaluation

An evaluation study is a project that is conducted in order to answer questions about the services you provide. There are several types of evaluations that can be conducted, including the following that are most relevant in relation to program implementation:

- **Process/implementation evaluation:** Determines whether program activities have been implemented as intended. **This type of evaluation examines if the program is implemented with fidelity.**
- **Outcome/effectiveness evaluation:** Measures program effects in the target population by assessing the progress in the outcomes or outcome objectives, which the program is supposed to achieve. **This type of evaluation examines if the program is achieving these intended outcome(s).**

Refer to the *Types of Evaluation* brochure created by the Centers for Disease Control and Prevention (CDC) for additional information on program evaluations:

<https://www.cdc.gov/std/Program/pupestd/Types%20of%20Evaluation.pdf>

The following questions are about whether your organization has or is planning to conduct an evaluation study (with or without funding from First Things First).

A. Has an evaluation study been conducted on your program? (e.g., process evaluation, outcome or impact evaluation study)? Yes No

If Yes, include:

- One (1) copy of the evaluation report (if available) with your agreement.
- A brief synopsis of the study's specific aims and results:

B. Are you planning on having an evaluation study conducted on the program proposed in this agreement? Yes No

If YES, please go to C. If No, stop here.

C. Will FTF funds be utilized to conduct the evaluation study?

Yes (Yes, funds are budgeted in the line-item budget and budget narrative for an evaluation study.)

No (No, we will be using other sources of funding for an evaluation study)

If YES, provide detailed responses to each of the following items: * ** If No, stop here.

1. Purpose, Intended Outcomes, and Research Questions

2. Methodology and Design

3. Proposed Timeline and Party Responsible (e.g., external vendor/contractor or grant partner program staff) to carry out the work

4. Intended Use of Findings and Dissemination Plan

* If FTF funds are being requested for an evaluation study, the study will need approval by FTF's Research and Evaluation team prior to implementation. Specifically, the applicant will be required to provide FTF with a detailed summary of the work proposed (Refer to the Ownership of Intellectual Property section under the Grant Terms and Conditions in this RFGA.) In those instances when the evaluation proposal is in its preliminary stages and therefore

lacks sufficient detail at the time of submission (e.g., Applicant is planning to get a vendor to determine the method and design etc.), the grant partner will be required to submit a detailed study proposal when it becomes available. This study proposal is subject to approval by FTF's Research and Evaluation division.

**** If the data collection requirements or proposed evaluation will include data from a tribal community (e.g., data gathering in tribal lands), appropriate tribal approvals must be in place prior to commencing data collection. In instances when tribal data approvals are necessary, FTF's Research and Evaluation and Tribal Affairs divisions will work with the grant partner to secure approvals from the tribe(s). (Refer to the Tribal Data Policy and the Ownership of Intellectual Property sections under the Grant Terms and Conditions in this RFGA).**

In instances when data gathering occurs in tribal lands, the applicant shall address how they will ensure a culturally appropriate methodology (e.g., in- person interviews), and culturally responsive interaction with participants and other stakeholders.

Exhibit A – Overview of First Things First and Scope of Work

First Things First is one of the critical partners in creating a family-centered, comprehensive, collaborative and high-quality early childhood system that supports the development, health and early education of all Arizona's children birth to age five. First Things First partners with families and communities to help kids have the positive, nurturing experiences they need to arrive at school ready to succeed.

First Things First is designed to meet the diverse needs of children and families in Arizona communities. The statewide First Things First Board and Regional Partnership Councils in local communities across the state share the responsibility of ensuring that early childhood funds are spent on strategies that will result in improved development, health and education outcomes for young children.

Local Regional Partnership Councils are comprised of community volunteers, with each member representing a specific segment of the community that has a role in ensuring that Arizona's children grow up to be ready for school and set for life: parents, leaders of faith communities, tribal representatives, educators, health professionals, business leaders and philanthropists.

First Things First Strategic Direction

First Things First's commitment to young children means more than only funding programs and services. It means having a shared vision about what being prepared for kindergarten actually means. The strategic direction approved by the First Things First Board identifies twelve priority system roles to be addressed by First Things First and are the following:

1. **Early Care and Education System Development and Implementation** –comprehensive early care and education system that is aligned both across the spectrum of settings and with the full continuum of the educational system.
2. **Quality Early Care and Education Standards, Curriculum and Assessment** – quality standards for early childhood care and education programs, curricula and assessments.
3. **Quality, Access and Affordability of Regulated Early Care and Education Settings** – increase availability of access to high quality, regulated, culturally responsive, affordable early care and education programs.
4. **Access to Quality Health Care Coverage and Services** – increase access to high quality health care services and affordable health care coverage for children and their families.
5. **Early Screening and Intervention** – increase awareness of and access to a continuum of information, support and services for families and their children who have/are at risk of having developmental, physical and/or mental health issues.
6. **Information and Education for Families** – dissemination of high quality, diverse, and relevant information and education on the importance of the early years, child development, health, early education and related resources for families, providers, partners, and the public.
7. **Supports and Services for Families** – development, enhancement and sustainability of a variety of high quality, culturally responsive and affordable services, supports and community resources for young children and their families.
8. **Professional Development System and Recruitment and Retention of Professionals in the Early Childhood System** – development and enhancement of an early childhood professional development system that addresses availability, accessibility, affordability, quality and articulation; and recruitment, adequate compensation and retention of high quality, culturally diverse early childhood providers.
9. **Early Childhood System Leadership** – high quality, child and family centered, coordinated, integrated and comprehensive early childhood system that includes clearly defined roles and responsibilities.
10. **Coordinated Use of Early Childhood System Data and Evaluation** – define and carry out roles related to collecting, analyzing and reporting data; and utilize data to design, develop, plan and evaluate the early childhood system; and provide leadership in the evaluation of the early childhood system and collaborate with partners to utilize the results to foster continuous improvement of the system.
11. **Building Public Awareness and Support** – increase public awareness of and support for early childhood development, health and early education among partners, public officials, policymakers and the public.
12. **Early Childhood System Funding** – secure, coordinate and advocate for resources required to develop and sustain the early childhood system.

The strategies funded by First Things First work collectively to develop a comprehensive system across the state and regionally to address the priority system roles, specific goals associated with them and system measures of success which are indicators designed to guide and measure progress in building an effective early childhood system in Arizona. Taken collectively, they provide a comprehensive picture of how our state is preparing its youngest children for success in kindergarten and beyond. The First Things First Board and Regional Partnership Councils determine the priority system roles, goals and strategies to be funded across the state and throughout the regions assessing the challenges and building on the resources and assets in place.

Measures of Success

- #/% children demonstrating school readiness at kindergarten entry in the development domains of social-emotional, language and literacy, cognitive and motor and physical.
- #/% of children enrolled in an early care and education program with a Quality First rating of 3-5 stars.
- # of Institutes of higher education with degree requirements and pathways aligned with Arizona's Workforce Knowledge and Competencies that support the movement from high school career and technical education program to an Associate Degree and completion of a Bachelor's Degree.
- #/% of early childhood teachers and administrators, separately, with college degree(s) and/or relevant experience.
- # of programs offering professional development across the state to the early childhood workforce that are aligned with the Workforce Knowledge and Competencies.
- #/% of professionals participating in professional development across the state.
- #/% of children with health coverage.
- #/% of children receiving at least six well child visits within the first 15 months of life.
- #/% of children age 19-35 months who are immunized.
- #/% of children age 5 with untreated tooth decay.
- #/% of children age 9 months to 5 years who received a standardized screening for developmental or behavioral problems.
- % of families who report they are competent and confident about their ability to support their child's safety, health literacy and well-being.

Scope of Work

Statement of Need

Early care and education providers are entrusted with young children for hours every day. While providing early education services, they must also keep children safe and protected from injuries and potentially serious infectious diseases. Child care staff also work with parents to promote good social, emotional and physical health for children—all generally without the benefit of medical expertise. According to the American Academy of Pediatrics, “following health and safety best practices is an important way to provide quality early care and education for young children.” Unfortunately, in many circumstances, center staff may have to call multiple resources to answer health-related questions, if they can find assistance at all.

Research has shown that many health and safety related issues such as immunization compliance, adherence to medication administration protocols, diapering and hand washing and development of emergency plans directly impact the quality of early care and education programs. Caring For Our Children, the national health and safety performance standards developed by the National Resource Center for Health and Safety in Childcare in partnership with other leading children’s health organizations recommends (Standard 1.6.0.1) that an early care and education facility “partner with a child care health consultant (CCHC) who is a licensed health professional with education and experience in child and community health, child care and preferably with specialized training in child care health consultation.”

Child Care Health Consultation has been shown to promote healthy and safe environments for children in child care and encourage early care and education settings (centers and family child care homes) to implement the highest standards of health and safety on behalf of the children in their care. Child Care Health Consultation has been shown to be an essential element in achieving high-quality early care and education programs and in maintaining the quality gains made over time.

Description of Strategy

Training and preparation for the role of a Child Care Health Consultant are useful and beneficial in improving the health and safety of children in early care and education environments. Access to ongoing training and Technical Assistance for Child Care Health Consultants has demonstrated positive gains for CCHCs, such as increased knowledge in the role of the CCHC, the scope of practice, health related policies, and national health and safety standards (Crowley, A.A., & Kulikowich, J.M. (2009).

The Technical Assistance (TA) grant partner is responsible for the following:

- Overseeing and implementing training for Child Care Health Consultants. This includes training for newly hired Child Care Health Consultants as well as ongoing training and TA for Child Care Health Consultants. The training for newly hired CCHCs is based on the National Training Institute for Child Care Health Consultation and the TA grant partner is responsible for updating and revising training modules as changes are made to the Caring for our Children Standards. The TA grant partner must provide one CCHC training per year for newly hired CCHCs.

- Providing two Health and Safety Specialist trainings per year to early care and education providers. For the Health and Safety Specialist training, one training is to be provided in Pima County and the second training provided in Western Arizona. The HSS trainings are to reach a minimum of 30 early care and education staff.
- Collaborating with Maricopa County Department of Public Health on the preparation, facilitation and implementation of all CCHC training and professional development provided during the CCHC quarterly update meetings (3 per year), and the annual CCHC Symposium.
- Data for technical assistance provided must be reported in the Quarterly Narrative Report, which should include training for new Child Care Health Consultants (CCHCs), training for Health and Safety Specialists (HSS), professional development opportunities, and the annual symposium.
- Updating and revising the Arizona Health and Safety Policy Manual and the CCHC Handbook in collaboration with the FTF CCHC Program Specialist.
- Responsible for reporting scheduled CCHC training and HSS training to the First Things First CCHC Program Specialist.
- Participation in Quality First Academy professional development opportunities related to Quality First technical assistants.

First Things First serves as the administrative home for the CCHC strategy. The FTF CCHC Program Specialist has the responsibility for oversight and management of the CCHC grant partners. As the Administrative Home, FTF does not provide direct service(s) and is responsible for the following:

- Fiscal and contract oversight and overall fiscal contract management:
 - This includes but is not limited to adherence to the Standards of Practice by grant partners, personnel qualifications, monitoring invoices, budget modifications and staff change forms.
- Coordination of data reporting using the database developed by FTF:
 - This includes coordinating database use, and responding to database questions.
 - Disseminate quarterly data reports to TA grant partners on services provided by CCHCs.
- Coordinate professional development and training through leveraging the existing professional development system and this includes the CCHC training, and the Health and Safety Specialist (HSS) training with the Technical Assistant (TA) grant partners.
 - In partnership with the TA grant partners determine the frequency, methods and sequence of training and professional development opportunities.

- Establish a coordinated plan for training and professional development with TA grant partners, for example, development and implementation of a Community of Practice for CCHCs.

Applicable Priority System Roles and Goals

Grant partners implementing this strategy will work collectively with First Things First to address the priority system roles and goals below:

Priority System Roles

1. **Early Care and Education System Development and Implementation** – comprehensive early care and education system that is aligned both across the spectrum of settings and with the full continuum of the educational system.
2. **Quality, Access and Affordability of Regulated Early Care and Education Setting** – increase availability of and access to high quality, regulated, culturally responsive, affordable early care and education programs.

Goals

- To identify and align early care and education programs and services to ensure a comprehensive early childhood system with coordinated and efficient use of resources.
- To increase the number of Arizona children birth through five with access to and participation in quality early care and education.

Applicable Measures of Success

Grant partners implementing this strategy will work collectively with First Things First to address the measures of success below:

- #/% of children enrolled in an early care and education program with a Quality First rating of 3-5 stars.

Target Population and Geographic Area to Serve

The target population includes newly hired Child Care Health Consultants throughout Arizona requiring training and certification prior to providing CCHC services. The TA grant partner may also provide the CCHC training for health assistants or nurses in early care and education programs. In addition, early care and education programs throughout Arizona are the identified population for the Health and Safety Specialist training.

Units of Service and FTF Data Requirements

First Things First (FTF) requires grant partners to submit program service data on a regular basis. This includes Unit(s) of Service information and ongoing program implementation data (quarterly quantitative report and narrative report). Beginning in State Fiscal Year (SFY) 2019, and for specific strategies, FTF will begin to gather participant-level demographic information and programmatic outcome data to inform FTF's reach and strategy impact.

Units of Service

A **Unit of Service** is FTF's designated indicator of performance specific to each FTF strategy. It is composed of a unit of measure and a number. A Unit of Service can be a target population and/or

a service or product that a grant partner is expected to serve during the year as part of their contract. In an FTF contract, the following types of Service Units are considered:

- 1. *Target Service Unit(s): The Regional Partnership Council targets a population and/or a service or product to be served or delivered during a state fiscal year (SFY) based on the total funds available (i.e., the grant award amount) for that strategy.***

Child Care Health Consultation Technical Assistance

- Conduct one CCHC training per fiscal year for newly hired CCHCs in the state and coordinate the training with Maricopa County Department of Public Health.
- Conduct two Health and Safety Specialist trainings for early care and education providers per year.

- 2. *Contracted Service Unit(s) (CSU):***

- i. Once the grant has been awarded and the grant partner signs the contract, the proposed service unit number(s) becomes the Contracted Service Unit (CSU) number for each strategy.
- ii. As part of quarterly data submission grant partner submits data on actual **services provided** during the SFY (Actual Service Unit(s)). This data is used to monitor progress on meeting the CSU.

FTF Data Requirements

The CCHC grant partner must upload their Quarterly Narrative Report to the Partner Grant Management System (PGMS) by the 20th of each Quarter.

Exhibit B - Links to Guidance Materials

Guidance Materials

The following documents can be accessed on the First Things First website, <http://www.firstthingsfirst.org/grants/strategy-toolkit/health> by selecting the "View" button next to the Child Care Health Consultation strategy. If there is difficulty in accessing any of the documents, email the name of the document and the Agreement number to grants@azftf.gov for assistance.

A. Standards of Practice

- **Child Care Health Consultation Standards of Practice**

B. Additional Document(s) Required for the Strategy

- **Mandated Reporting Policy**

C. Contracted Service Unit (CSU) Guidance Document(s)

- **Child Care Health Consultation CSU Guidance Document**

Exhibit C

Data Security, Submission and Suppression Guidelines and Requirements for Collaborators

Background

The purpose of the Arizona Early Childhood Development and Health Board (First Things First - FTF) is to aid in the creation of a system that offers opportunities and support for families and communities in the development of all children, so they can grow up healthy and ready to succeed. Our work is accountable and transparent to decision-makers and the citizens of Arizona. Collaboration and direct funding of grantees to undertake work on behalf of the children and families of Arizona is fundamental to the purpose and mission of FTF. Submission and reporting of data related to funded work is an important part of ensuring accountability and maximum positive impact for young children.

Scope

This Data Security, Submission and Suppression Guidelines and Requirements for Collaborators pertains to data collected by or shared with a grantee, governmental entity, or vendor (“collaborator”) while assisting with an FTF needs and assets report, conducting an FTF-funded program or service, or performing research services on behalf of FTF.

Data Security Policy

Collaborators must ensure that the data is maintained in a secure manner. Collaborator data is likely to contain highly sensitive information on individuals, their education and their health. Therefore, all collaborators must have a data security policy in force that identifies how the organization ensures that data is protected in all its forms, during all phases of its life cycle, from inappropriate access, use, modification, disclosure, or destruction. FTF has the right to review and request changes to a collaborator’s policy. All collaborators subject to HIPAA, FERPA, tribal law, or other data regulation are required to comply with those laws.

Data Classification

FTF classifies data by three levels:

- **Public data**
- **Limited distribution data**
- **Confidential data**

Public data is data that is readily available in the public sphere, such as websites, publications, or other widely used sources. Public data includes both data published by FTF (e.g., needs and assets reports and impact reports) and data that has been officially released by an organization and is able to be located and verified by any interested party utilizing the complete citation (e.g., census data). Public data also includes aggregated data, except where the aggregated data constitutes limited distribution data.

Limited distribution data is aggregated data that does not identify individuals, but which may be of sufficiently small cell size that its dissemination poses a reasonable risk to the anonymity of any individual. Limited distribution data may be subject to HIPAA, FERPA, tribal law, or other data regulation.

Confidential data is non-public data that identifies individuals or is governed by agreements or laws that limit its viewing, analysis, or dissemination. Confidential data may also include confidential business information. Confidential data may be subject to HIPAA, FERPA, tribal law, or other data regulation.

Data Submission to FTF

FTF wants to ensure that resources allocated have maximum impact for the benefit of children and families. To ensure this accountability, FTF has established data reporting requirements for collaborators. All collaborators will regularly submit reports as identified in their contract with FTF.

Collaborators Conducting an FTF-Funded Program or Service

Collaborators may submit **public data** and **limited distribution data** to FTF through the FTF Partner Grant Management System (PGMS). Subsequent to the award of a contract, FTF will provide the collaborator with general training on login and navigation within PGMS. With this login, the collaborator will be able to manage its contract information. FTF will also provide additional training on strategy-specific data submission requirements. Because PGMS is located in a secure extranet environment, collaborators using PGMS for data submission are not required to undertake additional security measures related to their data submission above those identified in the general and strategy-specific data submission orientations (password and login security, guidelines for upload of narrative and other reports).

Collaborators submitting **public data**, **limited distribution data** and/or **confidential data** may submit their data, with an agreement between the collaborator and FTF, through an established secure web service or FTP (File Transfer Protocol) site via the internet, rather than a PGMS web-based entry form. Collaborators that submit data through the secure web service must submit data within the established data structures and format, follow all login procedures, submit a formal data change request form if needed, and ensure that confidential data may not be intercepted or viewed at any time by parties other than the collaborator and FTF. Additionally, collaborators must ensure that throughout the reporting and submission process that the data is secured and that any confidential data is encrypted and/or de-identified.

Collaborators Assisting with a Needs and Assets Report or Performing Research Services on Behalf of FTF

Collaborators usually submit their data to FTF through an established secure web service or FTP (File Transfer Protocol) site. Collaborators must follow the more specific data submission requirements in their contracts with FTF. To the extent a contract does not provide more specific submission requirements, collaborators must seek and receive approval of their data submission method from FTF.

All Collaborators

All collaborators must be prepared for FTF review of client-level data (e.g., child-level, professional-level, or early care and education provider-level) during on-site visits. Additionally, FTF data reporting requirements may include submission of client-level data. Collaborators agree to allow FTF to access such data. Should

the data be subject to HIPAA, collaborators agree to enter into FTF's HIPAA Business Associate or Data Use Agreement as appropriate.

Beneficiary Permission for FTF Review

When a collaborator plans to obtain first-hand data from an individual, such as when conducting a program, providing a service, or conducting in-person research, the collaborator must inform the individual of FTF's reporting requirements. For instance, if the collaborator uses an enrollment form, the form should include the following statement: "I grant permission to [collaborator's name] to release my background, service, and impact related information to the Arizona Early Childhood Development and Health Board, also known as First Things First, which is funding this program or service." The collaborator represents to FTF that prior to entering into the Agreement for FTF funding it has appropriately enquired and satisfied itself that it has the ability and authority comply with the requirements of this section.

Data Suppression Guidelines for Publications

Confidential and limited distribution data must not appear in publications. When a publication includes aggregate data, any limited distributed data must be suppressed. The statistical cutoff procedures help ensure that aggregated data does not put at risk the anonymity of any individual. FTF's intent is to avoid the possibility of inadvertently reporting personally identifiable information.

For data related to social service and early education programming, limited distribution data refers to counts of fewer than ten, excluding counts of zero (i.e., all counts of one through nine). Examples of social service and early education programming include the number of children served in TANF, AzMerit scores, and the number of children served with an IEP.

For data related to health or developmental delay, limited distribution data refers to counts of fewer than six, excluding counts of zero (i.e., all counts of one through five). Examples of health or developmental delay include the number of children without health insurance and the number of newborns admitted to an ICU.

Third-Party Sharing

Collaborators must not share collected data with individuals or parties other than FTF or the collaborator's contractor approved by FTF (see Collaborator Contractors section) or use the collected data for a non-FTF purpose without the prior written consent of FTF, except as follows. A collaborator that is an affiliate of an evidence-based model may share data with the organization that oversees the model as required by that organization. A collaborator providing a program or service under a grant from an entity other than FTF, such as the federal government, may share data with the other funding entity directly tied to that funding grant. Notwithstanding the foregoing, no data collected from tribal lands may be shared or used with any third-party without the appropriate tribal approvals and no data may be shared or used in violation of law.

Collaborator Contractors

All collaborators must contractually require any contractor used by them to assist with the collection, maintenance, submission, analysis or publication of data to comply with these Data Security, Submission and Suppression Guidelines and Requirements for Collaborators. In addition, collaborators must obtain advance written approval from FTF before using a contractor for any of these purposes.

Tribal Data

FTF recognizes Arizona tribes as sovereign nations that have the right to regulate research and data collection on their tribal lands. To this end, FTF is committed to obtaining all appropriate tribal approvals for data collection, analysis and reporting. Accordingly, collaborators must only collect, use and share data from tribal land with appropriate tribal approvals, which approval may require participation in cultural education and community orientation classes, and in accordance, as applicable, with FTF's Tribal Data Policy.

In the case of collaborators conducting an FTF-funded program or service, collaborators are responsible for obtaining the appropriate tribal approvals unless FTF notifies a collaborator in writing that FTF has already obtained the approvals. FTF Regional Directors and Tribal Affairs staff can provide support to collaborators in identifying and navigating each tribe's process and protocols.

In the case of collaborators assisting with a needs and assets report or performing research services on behalf of FTF, FTF staff will take the lead in securing appropriate tribal approvals for data collection. Collaborators need to assist FTF in this process as requested by FTF, which includes providing information and documentation requested by a tribe. Collaborators must not begin collecting data before necessary tribal approvals are obtained.

Compliance

The collaborator acknowledges that failure to comply with any requirement of these Data Security, Submission and Suppression Guidelines and Requirements for Collaborators constitutes a material breach of the Agreement.

FTF's own Data Security Policy & Procedures and Tribal Data Policy may be viewed on the FTF website at <http://www.firstthingsfirst.org/grants/grantee-resources>.

Revised December 2017