



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

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: May 7, 2019

*** = Mandatory, information must be provided**

or Procurement Director Award ☐

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

The Arizona Department of Health Services

***Project Title/Description:**

Health Start. The document being amended is GTAW15*96.

***Purpose:**

Health Start provides community (lay) health workers to conduct outreach to and enroll high-risk pregnant women and families into the program. Families are followed until the program child turns two years of age. Under the supervision of a Public Health Nurse, the Community Health Workers provide basic prenatal, postpartum and parenting information and screen for alcohol, tobacco and other substance use, perinatal depression, relationship issues, child growth and development and home/environment safety hazards.

Amendment #3 extends the term of the grant for a final fifth year, to June 30, 2020 with no change in pricing.

***Procurement Method:**

This grant IGA is a non-procurement contract and not subject to Procurement rules.

***Program Goals/Predicted Outcomes:**

1) Increase prenatal care services to pregnant women; 2) Reduce the incidence of infants who at birth weigh less than one thousand five hundred grams (1,500 grams, 3 lbs 4 oz) and who require more than seventy-two hours of neonatal intensive care; 3) Reduce the incidence of children affected by childhood diseases; 4) Increase the number of children receiving age appropriate immunizations by two years of age; and 5) Increase awareness through education on the importance of good nutritional habits to improve the overall health of their children; the need for developmental assessments to promote the early identification of learning disabilities, physical handicaps or behavioral health needs; the benefits of preventative health care; and the need for screening examinations such as hearing and vision.

***Public Benefit:**

The program increases the number of high-risk pregnant women who have healthy pregnancies and babies. It is estimated that for every dollar spent on preventing poor pregnancy outcomes, \$5 is saved.

***Metrics Available to Measure Performance:**

1) Number of enrolled women that receive early and regular prenatal care; 2) number of low birth weight and very low birth weight infants born to enrolled clients; 3) gestational age of infants born to enrolled women; and 4) immunization status of enrolled children.

***Retroactive:**

No.

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 ☒ AmendmentDocument Type: GTAM Department Code: HD Grant Number (i.e., 15-123): 19-49Effective Date: upon signature Termination Date: 06/30/2020 Amendment Number: 03☐ Match Amount: \$ _____ ☒ Revenue Amount: \$ 215,885.00 (estimated)***All Funding Source(s) required:** Arizona State Lottery Funds (Proposition 203)***Match funding from General Fund?** ☐ Yes ☒ No If Yes \$ _____ % _____***Match funding from other sources?** ☐ Yes ☒ No If Yes \$ _____ % _____***Funding Source:** _____***If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?**N/AContact: Sharon GrantDepartment: HealthTelephone: 724-7842

Department Director Signature/Date: _____

Deputy County Administrator Signature/Date: _____

County Administrator Signature/Date: _____

(Required for Board Agenda/Addendum Items)



CONTRACT AMENDMENT

ARIZONA DEPARTMENT OF
HEALTH SERVICES
OFFICE OF PROCUREMENT
150 N. 18th Ave., Suite 260
Phoenix, Arizona 85007

CONTRACT No.: ADHS15-096694

AMENDMENT No.:3

PROCUREMENT OFFICER
**Felicia Marquez/
Jacqueline Ortega- Avila**

Health Start Program

Effective upon signature, it is mutually agreed that the Contract referenced is amended as follows:

1. Pursuant to the Special Terms and Conditions, **Provision Three (3), Contract Extensions Five (5)-Year Maximum**, the Contract is hereby extended through **June 30, 2020**, the Fifth and final year of the Contract.

REVIEWED BY:

[Signature]
Appointing Authority or Designee
Pima County Health Department

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

Contractor hereby acknowledges receipt and acceptance of above amendment and that a signed copy must be filed with the Procurement Office before the effective date.

The above referenced Contract Amendment is hereby executed this _____ day of _____, 20____ at Phoenix, Arizona.

Signature and Date

Authorized Signatory's Name and Title

Pima County Health Department

Contractor's Name

Procurement Officer Signature

APPROVED AS TO FORM:

[Signature]
Deputy County Attorney

ATTACHMENT F – Budget Worksheet

SOLICITATION NO. ADHS15-00004913

| | | | |
|-----------------------------------|-------------------------------------|----------------------|------------------|
| 6. Other Operating | | | |
| Pregnancy test kits (200 kits) | \$200 | | |
| Care Facts License (6) | \$1650 | | |
| Mailing billing | \$200 | | |
| Literature, DVDs | \$2,690 | | |
| Outreach/billing | \$1500 | | \$11,008 |
| Background check (1 position) | \$100 | | |
| Advertising for vacant position | \$300 | | |
| Desktop for 2 staff | \$2,400 | | |
| Data, phone line charges x3 lines | \$1,404 | | |
| Cellular Smart Phone | \$564 | | |
| | | TOTAL | \$11,008 |
| 7. Capital Outlay Expenses | | | |
| Item | Basis | | |
| | | | \$0 |
| | | TOTAL | \$0 |
| 8. Other | | | |
| Item | Basis | | |
| Item Indirect | Basis 20.53% of Salary and benefits | | \$33,657 |
| | | TOTAL | \$33,657 |
| | | **GRAND TOTAL | \$215,885 |