



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

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: October 5, 2021

\* = Mandatory, information must be provided

or Procurement Director Award: ☐

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

Early Childhood Development and Health Board (First Things First)

**\*Project Title/Description:**

The Child Care Health Consultation program provides training to child care providers in Pima County). This grant was accepted as GTAW19\*004.

**\*Purpose:**

Health and safety consultation services to child care centers and child care homes in Pima County.

Amendment #4 adds \$309,765 in federal funding to service 107 additional centers or homes.

**\*Procurement Method:**

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

**\*Program Goals/Predicted Outcomes:**

This program creates healthier and safer environments for out of home child care, for both typically developing young children and children with special health care needs. Areas of focus include SIDS risk reduction, prevention and control of communicable diseases, immunization, medication administration, oral health promotion, building and physical premises safety and injury prevention, child abuse/neglect identification and prevention, nutrition and physical activity interventions to reduce obesity in young children, sensory and developmental screening, and referrals for families without access to health care or in need of other health-related services.

**\*Public Benefit:**

More than 45,000 children ages 0-5 in Pima County regularly 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 their physical, cognitive and social-emotional development. This contract supports Pima County Public Health Nurses and a Dietitian specifically prepared as Child Care Health Consultants to provide information, training, and technical assistance to guide child care programs in creating healthy and safe environments, as well as preparing child care staff to provide hearing, vision, and developmental screening for the children in their care. With healthy young children in quality child care, parents miss less work or school and children enter the school system ready to learn.

**\*Metrics Available to Measure Performance:**

1. Numbers of child care visits, trainings and participant numbers; 2. Changes in knowledge, behavior and status for health and safety-related topics (such as injury prevention, communicable disease, physical activity, and nutrition) are measured every 90 days throughout the consultation process; 3. Annual evaluations of health and safety criteria are observed by outside evaluators hired by First Things First; 4. Annual use of the California Childcare Health Program Health and Safety Checklist as required by First Things First; and 5. Annual Immunization Data Reports submitted by licensed child care programs to Pima County Health Department's Vaccine Preventable Disease program. Performance measurements are used to refocus consultation or select additional consultation strategies.

**\*Retroactive:**

Yes, by a couple of days. Amendment is effective October 1, 2021 but was not received until Sept. 2. For a couple of days retroactive, it didn't seem worth asking for this item to be put on the Addendum of the previous meeting.

*ALL approval 9/20/21 DS*

THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (\*) fields

**Contract / Award Information**

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e., 15-123): \_\_\_\_\_  
Commencement Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_ Prior Contract Number (Synergen/CMS): \_\_\_\_\_  
☐ Expense Amount \$ \_\_\_\_\_ \* ☐ Revenue Amount: \$ \_\_\_\_\_

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

Funding from General Fund? ☐ 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 22-10.

**Amendment / Revised Award Information**

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

Amendment No.: \_\_\_\_\_ AMS Version No.: \_\_\_\_\_

Commencement Date: \_\_\_\_\_ New Termination Date: \_\_\_\_\_

Prior Contract No. (Synergen/CMS): \_\_\_\_\_

☐ Expense ☐ 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: HD Department Code: GTAM Grant Number (i.e., 15-123): 22\*022

Commencement Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_ Amendment Number: 04

☐ Match Amount: \$ \_\_\_\_\_ ☐ Revenue Amount: \$ 309,765.00

**\*All Funding Source(s) required:** This amendment is funded by the U.S. Dept. of Health & Human Services. However, the remainder of funding for this grant comes from the 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)?**  
Through First Things First

Contact: Sharon Grant


Department: Health

Telephone: 724-7842

Department Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Deputy County Administrator Signature: \_\_\_\_\_ Date: 20 Sep 2021

County Administrator Signature: C. B. [Signature] Date: 9/20/21


 <b>FIRST THINGS FIRST</b>	<b>GRANT AMENDMENT #4</b>	Early Childhood Health and Development Board (First Things First) 4000 North Central Avenue, Suite 800 Phoenix, AZ 85012 (602) 771-5100
	GRA-STATE-19-0973-01-Y4 Statewide QF Child Care Health Consultation	

**GRANTEE:**  
**Pima County Health Deartment**

**PURPOSE OF AMENDMENT:**  
 The parties amend the Grant Agreement as follows:

1. Description of Services – With funding provided through the federal Child Care and Development Fund (CCDF) and the Arizona Department of Health Services (ADES), the purpose of this Amendment is to expand the number of providers participating in Quality First and receiving Child Care Health Consultation services as a result of participation in Quality First. The expansion of Quality First participation is to include additional child care and preschool providers statewide during the term of this Amendment, including all of the providers on the current 2021 waitlist.
2. Manner of Financing – The award is increased by \$309,765 and allows for the recruitment of up to 107 Centers and/or Homes. The revised award amount is \$780,165
3. Contracted Service Units:  
 Lead Strategy: QF Child Care Health Consultation  
 Number of center based providers served: 152 (Pima North: 104 Centers, Pima South: 40 Centers, Tohono O’odham: 8 Centers)  
 Number of home based providers served: 58 (Pima North: 23 Homes, Pima South: 35 Homes)  
 Number of Non-QF Centers: 0                      Number of Non-QF Homes: 0  
 Qualtiy First Exapnsion: 107 Centers and/or Homes
4. For auditing purposes, we are required to supply the following information related to the Child Care and Development Block Grant funding:  
 Federal Award ID Number – 2101AZCDC6  
 CFDA # - 93.575  
 Total Federal Amount Awarded - \$309,765
5. All other terms and conditions remain unchanged and are according to the original award documents, clarification documents and renewal submission document

**Please see following page for signatures.**

 <b>FIRST THINGS FIRST</b>	<b>Grant Amendment #4</b>	<b>Early Childhood Development and Health Board</b> <b>(First Things First)</b> 4000 North Central Avenue, Suite 800 Phoenix, Arizona 85012 <b>(602) 771-5100</b>
	<b>GRA-STATE-19-0973-01-Y4</b> <b>Statewide</b> <b>QF Child Care Health Consultation</b>	
<b>Approved by Grantee:</b>  _____ <b>Signature</b>  <u>Sharon Bronson</u> <b>Name</b>  <u>Chair, Board of Supervisors</u> <b>Title</b>  _____ <b>Date</b>		<b>Approved by First Things First and executed effective October 1, 2021 once signed and dated below:</b>  _____ <b>Josh Allen</b> <b>CFO/COO</b>  _____ <b>Date</b>

**PIMA COUNTY**

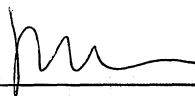
\_\_\_\_\_  
 Clerk, Board of Supervisors .

**APPROVED AS TO FORM**

  
 \_\_\_\_\_

Deputy County Attorney

**APPROVED AS TO CONTENT**

  
 \_\_\_\_\_

Health Department Representative

## Line-Item Budget and Budget Narrative

### Federal Child Care and Development Fund SFY22 Line-Item Budget

Budget period: October 1, 2021 – June 30, 2022

Budget Category	Line Item Description	Requested Funds	Total Cost
<b>PERSONNEL SERVICES</b>		<b>Personnel Services Sub Total</b>	<b>\$168,542</b>
Salaries	1 Program Coordinator-CCHC; 1 PHN-CCHC; 1 Sr Health Educator-CCHC		
<b>EMPLOYEE RELATED EXPENSES</b>		<b>Employee Related Expenses Sub Total</b>	<b>\$55,619</b>
Fringe Benefits or Other ERE	1 Program Coordinator-CCHC; 1 PHN-CCHC; 1 Sr Health Educator-CCHC		
<b>PROFESSIONAL AND OUTSIDE SERVICES</b>		<b>Professional &amp; Outside Services Sub Total</b>	<b>\$0</b>
Contracted Services			
<b>TRAVEL</b>		<b>Travel Sub Total</b>	<b>\$3,775</b>
In-State Travel			
Out-of-State Travel			
<b>AID TO ORGANIZATIONS OR INDIVIDUALS</b>		<b>Aid to Organizations or Individuals Sub Total</b>	<b>\$</b>
Subgrants or Subcontracts to organizations/agencies/entities			
<b>OTHER OPERATING EXPENSES</b>		<b>Other Operating Expenses Sub Total</b>	<b>\$53,669</b>
• Telephones/Communications Services	Cell Phone		\$1,800
• Internet Access	Mi-Fi		\$1,800
• Computers	Purchase 3 computers for new staff		\$9,000
• General Office Supplies	Office Supplies		\$2,000
• Food			
• Rent/Occupancy			
• Utilities			
• Furniture			
• Postage	Program Postage		\$3,600
• Software (including IT supplies)	Professional Memberships/books		\$6,000
• Dues/Subscriptions			
• Advertising			
• Printing/Copying	Program Printing		\$3,000
• Equipment Maintenance			
• Professional Development (Staff Training, Conferences, Workshops, Training Fees for Staff)	3 staff x \$3,000 each		\$9,000
• Books, videos, & other training mat	3 staff x \$2,000 each		\$6,000
• Program Materials	Materials for training		\$3,000
• Program Supplies	Supplies Program Implementation		\$5,469
• Scholarships			
• Program Incentives	Incentives for Child Care Programs		\$3,000
<b>NON-CAPITAL EQUIPMENT</b>		<b>Non-Capital Sub Total</b>	<b>\$</b>
Equipment \$4,999 or less in value			
<b>Subtotal Direct Program Costs:</b>			<b>\$</b>
<b>ADMINISTRATIVE/INDIRECT COSTS</b>		<b>Total Admin/Indirect</b>	<b>\$28,160</b>
Indirect/Admin Costs	10% of Direct Costs	\$	\$28,160
<b>Total</b>		<b>\$</b>	<b>\$309,765</b>

Authorized Signature \_\_\_\_\_



Date \_\_\_\_\_

9/10/21

## **Federal Child Care and Development Fund SFY22 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 CCHC-Program Coordinator-Vacant (1 FTE)	2080	Hour	\$23.30	\$48,464
1 CCHC-Sr. Health Educator-Vacant (1 FTE)	2080	Hour	\$18.73	\$38,958
1 CCHC RN-Vacant (1 FTE)	2080	Hour	\$39.00	\$81,120
<b>Personnel Salary Total</b>				<b>\$168,542</b>

**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 CCHC-Program Coordinator (1 FTE)	2080	Hour	33% of salary	\$15,993
1 CCHC-Sr. Health Educator-Vacant (1 FTE)	2080	Hour	33% of salary	\$12,856
1 CCHC RN-Vacant (1 FTE)	2080	Hour	33% of salary	\$26,770
<b>ERE and Fringe Benefit Total</b>				<b>\$55,619</b>

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

N/A

**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 on rates limitations for mileage, lodging, and meals (<https://qao.az.gov/travel/welcome-qao-travel>) for both in-state and out-of-state travel.

Description	Number	Unit	Rate	Total
Local Mileage (Reimbursement)	7000	Miles	\$.445	\$3,115
Motor Pool	12	Daily charge	\$55	\$660
<b>Local and Training Travel Total</b>				<b>\$3,775</b>

**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.

N/A

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

<b>Telephones, Computers &amp; Communications Services</b>				
Description	Number	Unit	Rate	Total
Computers	3	each	\$3,000	\$9,000
Internet Access-3 Mi-Fi	3	Monthly Service	\$50	\$1,800
Cell Phone Service 3 staff	3	Monthly Service	\$50	\$1,800
Postage & Freight	12	Monthly Service	\$300	\$3,600
Printing	1	Annual	Varies	\$3,000
<b>Sub-total Communications</b>				<b>\$19,200</b>
<b>General Office Supplies &amp; Equipment</b>				
Description	Number	Unit	Rate	Total
General Office Supplies	1	Annual Supply	\$2,000	\$2,000
Books, Videos & Other Training Materials	3	Annual Staff Allowance	\$2,000	\$6,000
Dues/Subscriptions/Memberships	3	Annually	\$2,000	\$6,000
Program Supplies	1	Annually	\$5,469	\$5,469
Program Materials	1	Annually	\$3,000	\$3,000
Professional Development: Misc throughout the year	3	Annually	\$3,000	\$9,000
Incentives for Child Care Programs and Outreach	1	Annually	\$3,000	\$3,000
<b>Sub-total for General Office Supplies &amp; Equipment</b>				<b>\$34,469</b>
<b>Grand Total for Other Operating Expenses</b>				<b>\$53,669</b>

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

N/A

**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.

Description	Number	Calculation	Rate	Total
Administrative/Indirect	\$281,605	10% of direct costs	10%	\$28,160
<b>Administrative/Indirect Cost Total</b>				<b>\$28,160</b>

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.

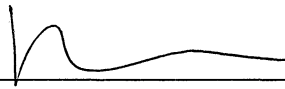
**Applicants must list either Option A or Option B and provide proper justification for expenses included:**

**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 \_\_\_\_\_

9/10/21



# FIRST THINGS FIRST

## Program Personnel Table

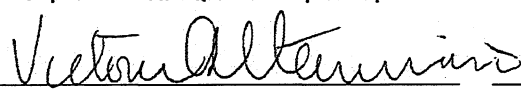
Key Personnel - those individuals directly responsible for program implementation/services and are fully or partially funded through the proposed program.				
Name/ Position Title	Background/Expertise* Must include qualifications that align with the Standards of Practice (SOP)	Key Roles and Responsibilities	Meets the SOP Staffing Qualifications Yes/No**	FTEs funded through the program
VACANT Program Coordinator- CCHC		Provides assessment, consultation, referral and training to Quality First-enrolled programs. Provides program support, monitoring and leadership to the CCHC team.		1
VACANT RN-CCHC		Provides assessment, consultation, referral and training to Quality First-enrolled programs with a focus on Health and Health related issues.		1
VACANT SR HEALTH EDUCATOR- CCHC		Provides assessment, consultation, referral and training to Quality First-enrolled programs.		1
Additional Personnel - those individuals partially funded through the proposed program but who do not directly implement or have direct program oversight of the program.				
Program Total:				3

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

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

Victoria Altamirano, Sr Program Manager

Name/Title

 9/8/21