



Utah Department of
Health & Human Services

**UTAH DEPARTMENT OF HEALTH & HUMAN SERVICES
CONTRACT AMENDMENT**

PO Box 144003, Salt Lake City, Utah 84114
288 North 1460 West, Salt Lake City, Utah 84116

2419504

Department Log Number

242700089

State Agreement ID

1. **CONTRACT NAME:** The name of this contract is San Juan County Health Department-- PDG B-5 Activity 6- 23-25 Amendment 2.
2. **CONTRACTING PARTIES:** This contract amendment is between the Utah Department of Health & Human Services (DEPARTMENT) and San Juan County (CONTRACTOR).

PAYMENT ADDRESS

San Juan County
735 S 200 W, Ste 2
Blanding, UT 84511

MAILING ADDRESS

San Juan County
735 S 200 W, Ste 2
Blanding, UT 84511

Vendor ID: 06866HL

Commodity Code: 99999

3. **PURPOSE OF CONTRACT AMENDMENT:** The purpose of this amendment is to change the contract termination date. The new termination date will be December 30, 2024.
4. **CHANGES TO CONTRACT:**
 1. The contract is being terminated by mutual agreement as of December 30, 2024, when Year 2 funding ends.
 2. Attachment B Scope of Work is being changed. Funding lines have been changed to reflect termination following Year 2, on December 30, 2024.

UEI: WCVABP2FEVA2

Indirect Cost Rate: 0.0 %

All other conditions and terms in the original contract and previous amendments remain the same.

5. **EFFECTIVE DATE OF AMENDMENT:** This amendment is effective 12/20/2024 .
 6. **DOCUMENTS INCORPORATED INTO THIS CONTRACT BY REFERENCE BUT NOT ATTACHED:**
 - A. All other governmental laws, regulations, or actions applicable to services provided herein.
 - B. All Assurances and all responses to bids as provided by the CONTRACTOR.
 7. This contract, its attachments, and all documents incorporated by reference constitute the entire agreement between the parties and supersedes all prior written or oral agreements between the parties relating to the subject matter of this contract.
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Contract with Utah Department of Health & Human Services and San Juan County , Log # 2419504

IN WITNESS WHEREOF, the parties enter into this agreement.

CONTRACTOR

Signature

Signed by: _____

Jamie Harvey
County Commission Chair

Date Signed: _____

ATTACHMENT B: SCOPE OF WORK

Article 1 DEFINITIONS

1.1 In this contract, the following definitions apply:

"ASQ" means the Ages and Stages Questionnaire, an early childhood screening and assessment tool.

"Brookes" means Paul H. Brookes Publishing Co, Inc. owner of online ASQ screening account.

"Care Coordination" means the deliberate organization of patient care activities between two or more participants (including the patient) involved in a patient's care to facilitate the appropriate delivery of care and other supportive services.

"Care Plan" means a child-centered record designed to facilitate communication among members of the care team, including the child, and primary care and service providers.

"CHW" means Community Health Worker who acts as a trusted bridge between their community and health care systems, social services, and state/local health departments.

"CY" means calendar year.

"Department" means the Utah Department of Health and Human Services, Office of Children with Special Health Care Needs, Integrated Services Program.

"ECU" means the Early Childhood Utah Advisory Council.

"EHR" means the electronic health record

"LHD" means Local Health Department, local level, public health services in Utah.

"Service Provider" means agencies that provide educational, social, and other non-primary care services.

"OEC" means Office of Early Childhood.

“Outreach” is the activity of providing services to those within the birth-8 population who might not otherwise have access to those services by meeting them at the location where they are.

“PAE” means Public Affairs and Education within the Department

“PDG” means Preschool Development Grant.

“Sub-recipient” means San Juan Local Health Department.

“UCCCN” means the Utah Children’s Care Coordination Network, a care coordination support, training, and information sharing network.

Article 2

Purpose

- 2.1 This contract between the Department and the Sub-recipient is intended to provide outreach, care coordination, and an expansion of services to ensure that children from birth through eight years old residing within the Sub-recipient’s geographic service delivery area are provided with necessary early childhood support.

Article 3

Population Served

- 3.1 The sub-recipient shall serve an expanded birth-8 population residing within their service delivery area.

Article 4

Sub-recipient Responsibilities

- 4.1 **Sub-recipient shall perform the following activities:**
- (1) hire or reassign staff necessary to complete the tasks outlined in this subsection;
 - (2) actively pursue birth through age eight services, supports, and specialists to increase awareness of available services within the sub-recipients service area and be familiar with neighboring area resources;
 - (3) provide outreach to local partner agencies and possible referral sources to disseminate information on expanded birth-8 services available within

sub-recipient's service area;

- (4) utilize CHW or other staff to reach, educate, and recruit children and families who may be un- or under-served in the sub-recipient's service area;
- (5) receive referrals from families, primary care and service providers, and in-house staff;
- (6) contact families to triage referral source concerns and family needs and concerns;
- (7) help families with urgent concerns that can be solved locally;
- (8) ensure that care coordination services are readily available at no cost for all families/children within the target population;
 - (A) where care coordination is not provided at the local health department level, referral is made by sub-recipient for family residing outside of service area, or
 - (B) when caseload exceeds capacity, sub-recipient shall refer families in need of these services to the Department's in-house care coordination team.
- (9) use identified strategies to increase the number of intakes from mothers/families/guardians referred to sub-recipient;
- (10) partner with families to create care plans to meet patient and family needs and document care plans in the sub-recipient's EHR;
- (11) set alerts within the EHR to follow-up with families on their care plans with frequency of follow-up being determined by:
 - (A) acuity of the child's physical and behavioral health;
 - (B) parent or guardian capacity to follow through;
 - (C) immediacy of need for supportive services; and
 - (D) parents desire to continue with care planning and coordination;
- (12) update care plans to include progress toward completing established goals, and set new goals with families;

- (13) in conjunction with family involvement and consent:
 - (A) refer to collaborating agencies, programs, in-home and virtual services, and appropriate resources; and
 - (B) investigate other supports, services, and specialists that may not be readily found or available in the family's community and make appropriate referrals; and
- (14) promote ASQ screenings for children within ASQ Screening age range:
 - (A) register as a program in the DHHS Enterprise account;
 - (B) educate families and promote ASQ screenings for children;
 - (C) ensure the data is entered into Department's Enterprise Brookes account;
 - (D) refer families to appropriate services, including early childhood care coordination, to address any concern areas or delays.

Article 5

Administrative and Other Requirements

- 5.1 **Outreach Materials.** Sub-recipient shall submit materials developed in support as a result of this contract, including but not limited to outreach materials and final reports, for pre-approval by the Department prior to use or publication. This includes all materials on which the DHHS logo will be used, as approval by the Department's Public Information Officer is required.
- 5.2 **Stakeholder Meetings.** Sub-recipient shall attend other early childhood stakeholder meetings, either those regularly scheduled or those scheduled specific to the work under this contract, as determined by the Department.
- 5.3 **Engagement with ECU.** Sub-recipient shall engage with the ECU Advisory Council, ECU Executive Committee, and its subcommittees as determined by the Department.
 - (a) The purpose of this work may include, but is not limited to, solicited feedback on this work, providing updates, and requesting outreach or other support from members.

(b) The Sub-recipient may be asked to prepare presentations for these meetings.

5.4 **Meetings and Convenings.** Sub-recipient shall attend meetings or convenings as requested by the Department, when related to the work of contractual activities.

5.5 **Reporting Requirements.** Sub-recipient shall participate in monthly progress meetings with the Department for the duration of the contract period.

(a) Sub-recipient shall submit progress reports to the Department on a quarterly basis.

(b) Report shall include a summary of activities performed in that reporting period, including but not limited to meetings for stakeholder input, engagement in technical assistance or information gathering, updates on data sources collected, and overall successes and challenges. This should be submitted on the template described in item 6.1(7).

(c) Sub-recipient shall provide ad hoc reporting information as requested by the Department when needed for federal reporting.

5.6 **Publications - Acknowledgement/Disclaimer:** Information made available to the public as a result of work performed under the federal award should include an acknowledgement and disclaimer: "This publication/project was made possible by grant number 90TP0000 from the United States Department of Health and Human Services. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the United State Department of Health and Human Services, Administration for Children and Families."

Article 6

Department Responsibilities

6.1 **Department shall**

(1) provide ongoing training in principles, tools and practices of care coordination, patient intake and appropriate referral, tracking and follow-up methods;

(2) schedule standing monthly coordination and training meetings with sub-recipient's care coordination staff;

(3) provide access to Department staff for ongoing project improvement, resolution of questions and concerns, clarification of policy and procedure, and training and

inservice for sub-recipient staff, upon request;

- (4) provide or secure timely feedback from relevant parties on draft strategy and other materials produced by the sub-recipient;
- (5) communicate technical assistance opportunities as well as forward any other materials provided by the funding source that would be informative for the sub-recipient relevant to their activities;
- (6) facilitate introductions or meetings when necessary to ensure appropriate stakeholders are engaged to inform work under this contract;
- (7) provide a report template or required reporting elements for the Sub-recipient to meet reporting requirements.

Article 7 Outcomes

7.1 **Outcome.** The desired outcome of the contract is to ensure young children are developing appropriately statewide through a seamless system of coordinated services and supports.

7.2 **Performance Metrics.**

- (1) The Sub-recipient shall measure or establish:
 - (A) baseline counts for number of children currently being served in the 0-8 population by the sub-recipient at initiation of contract;
 - (B) a baseline by end of year one that establishes the number of population served, upon which a projected increase percentage will be determined in each reporting area- outlined below, for subsequent years of the Grant;
 - (C) quarterly:
 - (i) the number of children in the 0-8 population served by the sub-recipient,
 - (ii) number of ASQ3 and ASQSE-2 screening evaluations performed;

- (iii) number of referrals made to other programs or agencies serving the 0-8 population; and
 - (iv) Narrative to describe diverse and expanded populations served and notable accomplishments and milestones achieved.
 - (D) yearly,
 - (i) the overall increase in children served in the 0-8 population from baseline (unduplicated count),
 - (ii) number of ASQ3 and ASQSE-2 screening evaluations performed;
 - (iii) number of referrals made to other programs or agencies serving the 0-8 population; and
 - (iv) Narrative to describe diverse and expanded populations served and notable accomplishments and milestones achieved.
- (2) Reporting. The Sub-recipient shall:
 - (A) submit quarterly reports no later than 10 days after the completion of each quarter via a reporting format provided by the Department; and
 - (B) submit annual reports by January 12th of each calendar year via a reporting format provided by the Department.

Article 8 Billing Requirements

- 8.1 **Maximum Contract Amount.** The maximum contract amount for allowable services provided by the Sub-recipient is \$60,000. Department may reduce or withhold payment if the Sub-recipient does not complete the required deliverables.
- 8.2 **Billing and Reimbursements.**
- (a) The Sub-recipient shall bill the Department for reimbursement under this contract on a monthly basis.

- (b) The Sub-recipient shall provide monthly contract billings, on the Department's required Monthly Expenditure Report, to the Department within twenty (20) calendar days following the end of the month for which the billing relates.
- (c) The Department agrees to provide the MER template to the Sub-recipient. If amendments are made to the MER template, the Department shall provide this updated template to the Sub-recipient within ten (10) days of changes made.
- (d) The Sub-recipient shall invoice for all expenditures through June 30 no later than July 10 of each year.
- (e) The Sub-recipient shall invoice for final expenditures under this agreement no later than 30 days after the expiration date of the agreement.
- (f) Any modifications to the budget require pre-approval by the Department. Modification requests shall be submitted no fewer than 10 business days prior to the proposed effective date.

8.3 **Funding Amount.** The total funding amount under this Contract as provided by the General Provisions is \$60,000. Annual budgets are as follows:

- (1) August 1, 2023 - December 30, 2023: \$30,000
- (2) December 31, 2023 - December 31, 2024: \$30,000

8.4 **Match Requirements.** The Sub-recipient shall provide a non-federal match in the form of cash or in-kind contributions equaling at least 30% of actual expenditures. This should be reported and certified along with submission of invoicing. Total match requirements: \$18,000. Annual match requirements are as follows:

- (1) August 1, 2023 - December 30, 2023: \$9,000
- (2) December 31, 2023 - December 31, 2024: \$9,000

8.5 **Future Funding.** This contract shall be amended annually upon availability of funding.