

Memorandum of Understanding

Between

Utah State University

Preschool Development Grant Activity #5 (PDGA5) Project

and

San Juan County Health Department (SJCHD)

This Memorandum of Understanding (MOU) sets for the terms and understanding between Preschool Development Grant Activity #5 (PDGA5) Project at Utah State University (USU) and the San Juan County Health Department (SJCHD) to complete activities related to the Preschool Development Grant Activity #5.

Definitions

“**Program**” means (SJCHD)

“**PDGA5**” means Preschool Development Grant Activity #5

“**DHHS**” means the Department of Health and Human Services

“**ECCE**” means Early Childhood Care and Education, birth to 8 population

“**IRB**” means Institutional Review Board, through DHHS, Utah State University, or other relevant systems, such as through local tribal governments and organization.

“**USU**” means Utah State University

“**MOU**” means Memorandum of Understanding

Background

This MOU:

- Covers work to be completed under PDG5 support of program quality improvement. This MOU describes how the partners will work together to implement culturally diverse, high-quality early childhood programming, and improve access for underserved populations in San Juan County.
- Identifies data that will be collected, and the ownership of all data collected under the agreement.
- Ensures that parties to the Memoranda will have review and comment authority as co-authors of any document.

SJCHD has been evaluated based upon the following criteria:

(A) provides services connected/related to the ECCE system in Utah such through their programs such as:

- Parents as teachers/Home Visiting Nurse,
- Women, Infants, & Children WIC,
- Developmental Screening, and
- Children with Special Healthcare Needs)
- Other suitable projects/programs that SJCHD might think suitable.

(B) ability to address issues identified by community partners and families; and

(C) willing and able to provide information related to the performance metrics identified in the DHHS contract with USU

Also, it's acknowledged that the PDGA5 team has encouraged and supported SJCHD to complete a community engagement readiness assessment checklist provided by the DHHS Office of Health Equity.

Purpose

This MOU will outline the program-specific vision of culturally responsive practices. It outlines targeted outcomes, as well as a summary of program-specific targets to guide the work. This includes gathering and analyzing program information that aligns with program-specific target outcomes including relevant performance metrics.

The above goals will be accomplished by undertaking the following activities:

- Identification and development of resources to improve community participation into SJCHD programs, including:
 - Developing strategies and materials (flyers, social media participation, networking) to promote the programs.
 - Disseminating information about the programs as we get connected with other programs outside the Health Department.
 - Creating effective-culturally appropriate “incentives” might help reduce some participation barriers.
 - Developing and implementing outreach, enrollment, and evidence-based practices ensuring inclusion of all children.
 - Identifying Children with Special Health and Healthcare Needs
- Provision of professional development and technical assistance on trainings in topics such as:
 - Community-tailored/-engaged marketing (e.g., social media, grassroots, participatory, action-oriented, integrated with community action cycles and health assessments)
 - Motivational Interviewing (especially when tailored to rural, frontier, native, and underrepresented)

- Resilience (addressing burnout, trauma, caregivers, etc; across individual- and collective-oriented cultures). Dialectical behavior therapy (DBT) for non-therapists as one example of resiliency training that helps staff better help their clients (e.g., WIC, CSHCN) and community (via Health Promotion etc.)
- Community action cycles and community health assessments (especially when tailored to rural, frontier, native, and underrepresented; e.g., integrate with [The Beauty Way](#))
- Integration across these training topics so that we have a longitudinal, iterative, cross-cutting process for staff capacity building.
- Strengthening systems needs for data sharing, analysis, use, monitoring, quality improvement, accountability, effective governance, communication, and decision-making.
- Development of evaluation approaches considering strengths and needs related to programs and training topics requested by SJCHD.
- Enhancement of program standards, curriculum, coaching, and assessment of child outcomes across programs.
- Provision of professional development and technical assistance on reviewing and adapting current curriculums tools, forms, and assessments, to be responsive to local contexts, cultures, and program settings, including:
 - Reviewing and offering potential culturally responsive options/suggestions for current program curriculums SJCHD and PDGA5 think important.
 - Ex. Family Spirit Home Visiting Program (for the Parent as teacher program?) <https://cih.jhu.edu/programs/family-spirit-home-visiting-program/> The ***Family Spirit Program*** is an evidence-based and culturally tailored home visiting intervention delivered by Native American paraprofessionals as an Indigenous solution to supporting caregivers during pregnancy and early childhood.
 - Educating and developing preventive work considering cultural factors that includes life skills, Nutrition classes, and other activities partnering with High school, 4H, and other pertinent agencies.
 - Developing and implementing equitable and culturally responsible practices for all children, families, and providers, including children who are dual or multi-language learners and their families, dual or multi-lingual providers, and individuals from historically marginalized communities.
 - improving developmental, social-emotional, and other learning opportunities for children birth to eight.
- Implementation of the ACT curriculum <https://cehs.usu.edu/scce/services/act-guide/> noting that these activities will not be part of the budget included into this MOU.
- Collaborative actions with San Juan County programs and community stakeholders might help to improve participation outcomes. For example, expanding information about your programs in collaboration with other programs and coalitions such as Medicaid, Medicare, CHIP, Food stamps/SNAP, Food Bank, LDS Church, ECCE, etc.

- Any other support/action/activities that SJCHD and PDGA5 might think relevant as work progress. For example, it will be expected to develop a culturally sensitive toolbox based on lessons learned at the end of the project.

Outreach Materials

Materials developed as outreach materials shall be submitted for pre-approval by DHHS prior to use. This includes all materials on which the DHHS logo will be used, as approval by the Department's Public Information Officer is required.

Intellectual Property Rights

Intellectual property rights will be shared equally between SJCHD and PDGA5 so they will need both acceptance for any use or dissemination of any material or product developed through this MOU collaborative effort.

Human Subjects Protections

If needed, research and evaluation activities will be reviewed by the DHHS IRB, Utah State University IRB and the IRB of each tribal group that will have participants in grant activities, or other relevant ethics committees, to ensure justice, beneficence, and respect for persons engaged in research activities carried out as a part of this collaborative effort.

Outcomes

The overall goal for these collaborative efforts is to develop and implement culturally responsive practices with a focus on culturally diverse children, families, and providers in San Juan County. Programs' understanding of culturally responsive practices and strategies for interacting with and learning from a diverse set of families is an important part of building trust with historically marginalized community members. These interactions are foundational in families' choices to engage in each service. Thus, it is critical to develop and implement culturally appropriate programming to invite families to engage in services, benefit from services while involved with programming, and minimize potential harms associated with services that do not align with families' cultural values.

(1) Specific outcomes for this agreement are as follows:

- (A) to improve culturally responsive ECCE services in San Juan County; and
- (B) to improve family and parent engagement in ECCE services in San Juan County.

Performance Metrics

Measurement tools will be adapted as appropriate for the context and can be modified by mutual agreement. Each partner program will cooperate in providing information relevant to the following specific outcomes:

[Only include only metrics related to PDG5 target outcomes, and any other program specific outcomes]

(1) Culturally responsive services

a. **Providers and Teachers Cultural Sensitivity with Families**

- i. *Population*: Providers/Teachers employed by the program
- ii. *Measurement Tool*: Teacher/provider Multicultural Attitude Survey
- iii. *Collected by*: (Partner)
- iv. *Owned by*: (Partner)
- v. *Timeline*: By the end of engagement (12-month period)
- vi. *Target*: At least 25% of providers at partner programs will report each year improved cultural sensitivity and receptivity.

(2) Family and parent engagement in ECCE services

a. **Parent Satisfaction with Culturally Responsive Practices**

- i. *Population*: Families participating in services provided
- ii. *Measurement Tool*: Standard of Quality for Family Strengthening and Support participant survey
- iii. *Collected by*: (Partner)
- iv. *Owned by*: (Partner)
- v. *Timeline*: Beginning (Month range) and end (month range) of MOU agreement
- vi. *Target*: Satisfaction will improve at least one scale anchor (for example, from Neutral to Agree) and 50% or more of families will agree or strongly agree with statements related to positive programming diversity, equity, and inclusive practices

b. **Parent and Family Engagement**

- i. *Population*: Program participants
- ii. *Measurement Tool*: Enrollment data from the partner program
- iii. *Collected by*: (Partner)
- iv. *Owned by*: (Partner)
- v. *Timeline*: Beginning (Month range) and end (month range) of MOU agreement
- vi. *Target*: The number of families engaged in partner program services will match the organizational capacity of the individual program, and participant racial and ethnic demographics will reflect demographics for San Juan County.

Dissemination

The USU PDG5 team will develop individualized summaries for each partner program, including the applicable specific performance metrics.

Parties to the Memoranda will have review and comment authority as co-authors of any document.

Outline any specific dissemination plans and work collaboratively to develop pertinent information.

Reporting

PDGA5 will evaluate effectiveness and adherence to the agreement and data will be collected at the beginning, middle, and end of the project life cycle. Analysis and interpretation of the data will be completed in a collaborative manner.

Funding

As PDGA5 available funding allows, this MOU support the following funds for use in the following ways:

Year 1.

<u>Personnel</u>	Base Salary	Benefits	Total
Community Health Professional	\$ 60,500	\$ 26,625	\$ 87,125
<u>Travel</u>			
Local travel			\$ 8,112
<u>Other</u>			
Health Department Equipment			\$ 8,000
Health Department Curriculum			\$ 10,000
Training and outreaching materials			\$ 6,000
<u>Health Department Trainings</u>			
Food and space			\$ 3,750
Translator			\$ 3,750
Child care			\$ 3,750
Incentives			\$ 3,750
(ACT curriculum) https://cehs.usu.edu/scce/services/act-guide/			

Total			\$ 134,237

Year 2.

<u>Personnel</u>	Base Salary	Benefits	Total
Community Health Professional	\$ 60,500	\$ 26,625	\$ 87,125
<u>Travel</u>			
Local travel			\$ 6000
<u>Other</u>			
Health Department Curriculum			\$ 4,000
Training and outreaching materials			\$ 4,000
<u>Health Department Trainings</u>			
Food and space			\$ 3,000
Translator			\$ 3,000
Child care			\$ 3,000
Incentives			\$ 3,000
(ACT curriculum) https://cehs.usu.edu/scce/services/act-guide/			
Total			\$ 113,125

All invoices should be sent directly to the USU Controller's Office for review. Also, SJCHD is committed to help with some available fundings for the training, as a partner committed to have long partnership and self-sustainable program actions.

Operationalization

- Dr. Eduardo Ortiz, from PDGA5 and Brittney Carlson will have at least biweekly meetings with CHWs to coordinate project activities and progress. At least 8 meetings per year will be in person.
- CHW will be USU employees, and they will have specific job descriptions that will not interfere with or overlap with their SJCHD work if it will be the case.

Duration

This MOU is at-will and may be modified by mutual consent of authorized officials from PDGA5 and SJCHD. This MOU shall become effective upon signature by the authorized officials and will remain in effect until modified or terminated by any one of the partners by mutual consent. In the absence of mutual agreement by the authorized officials from PDGA5 and SJCHD this MOU shall end on December 31, 2025.

Contact Information

Partner name:
 Partner representative:
 Position:
 Address:
 Telephone:
 E-mail:

Partner name:
 Partner representative:
 Position:
 Address:
 Telephone:
 E-mail:

(Partner signature)
 (Partner name, organization, position)
 Date: XX/XX/XXXX

(Partner signature)
 (Partner name, organization, position)
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