

**AMENDMENT TO AGREEMENT  
BETWEEN THE COUNTY OF SAN MATEO AND ONE EAST PALO ALTO**

THIS AMENDMENT TO THE AGREEMENT, entered into this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by and between the COUNTY OF SAN MATEO, hereinafter called "County," and ONE EAST PALO ALTO, hereinafter called "Contractor";

WITNESSETH:

WHEREAS, pursuant to Government Code, Section 31000, County may contract with independent contractors for the furnishing of such services to or for County or any Department thereof;

WHEREAS, the parties entered into an Agreement on December 4, 2018, for alcohol and other drug (AOD) prevention services for the term July 1, 2018 through June 30, 2020, in an amount not to exceed \$202,200; and

WHEREAS, on December 10, 2019, the Chief of San Mateo County Health approved an amendment to add a cost of living adjustment in FY 2019-20, increasing the maximum amount by \$3,984 to a new maximum of \$206,184, with no change to the agreement term; and

WHEREAS, the parties wish to amend the agreement for AOD Prevention services in East Palo Alto continuing to reduce access to and availability of alcohol and other drugs, extending the term through June 30, 2021 to align with the Request for Proposal cycle for these services, increasing the amount by \$155,584 to an amount not to exceed \$361,768.

**NOW, THEREFORE, IT IS HEREBY AGREED BY THE PARTIES HERETO AS FOLLOWS:**

1. Section 3. Payments of the agreement is amended to read as follows:

In consideration of the services provided by Contractor in accordance with all terms, conditions and specifications set forth herein and in Exhibit "A2," County shall make payment to Contractor based on the rates and in the manner specified in Exhibit "B2." The County reserves the right to withhold payment if the County determines that the quantity or quality of the work performed is unacceptable. In no event shall the County's total fiscal obligation under this Agreement exceed THREE HUNDRED SIXTY-ONE THOUSAND SEVEN HUNDRED SIXTY-EIGHT DOLLARS (\$361,768).

2. Exhibit A1 is hereby deleted and replaced with Exhibit A2 attached hereto.
3. Exhibit B1 is hereby deleted and replaced with Exhibit B2 attached hereto.
4. All other terms and conditions of the agreement dated December 4, 2018, between the County and Contractor shall remain in full force and effect.

\*\*\* SIGNATURE PAGE TO FOLLOW \*\*\*

IN WITNESS WHEREOF, the parties hereto, by their duly authorized representatives, have affixed their hands.

COUNTY OF SAN MATEO

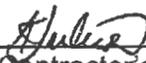
By: \_\_\_\_\_  
President, Board of Supervisors  
San Mateo County

Date: \_\_\_\_\_

ATTEST:

By: \_\_\_\_\_  
Clerk of Said Board

ONE EAST PALO ALTO

 \_\_\_\_\_  
Contractor's Signature

Date: 07/16/2020 \_\_\_\_\_

EXHIBIT A2 – SERVICES  
ONE EAST PALO ALTO  
FY 2018 – 2021

Behavioral Health and Recovery Services (BHRS) provides a continuum of comprehensive services to meet the complex needs of our clients and is designed to promote healthy behavior and lifestyles (a primary driver of positive health outcomes). A full range of high quality services is necessary to meet the varied needs of the diverse population residing in San Mateo County. As financing, program structure and redesign changes occur, the services within this agreement may fluctuate or be further clarified.

In consideration of the payments set forth in Exhibit B2, Contractor shall provide the following services:

I. DESCRIPTION OF SERVICES TO BE PERFORMED BY CONTRACTOR

In providing its operations, Contractor will maintain compliance with the requirements listed and referred to in the San Mateo County Behavioral Health and Recovery Services (BHRS) Alcohol and Other Drug Services (AOD) Policy and Procedure Manual. In doing so, Contractor will follow, and assure that the Community-Based Partnership follows federal, state, and local requirements, including general administrative, fiscal, and reporting responsibilities. These requirements and responsibilities are set forth in the AOD Policy and Procedure Manual located at <http://smchealth.org/bhrs/aod/handbook>, and is incorporated by reference herein.

A. Prevention Education and Collaboration

Contractor is responsible for participating in county-wide efforts to reduce the impact of alcohol and other drugs through prevention education, collaboration with partners (residents, community organizations, government, health providers, law enforcement, businesses, faith leaders, etc.). Contractor shall advocate for policies and/or research of policies, and continued capacity building through professional development.

Contractor shall provide prevention activities for the following topics: alcohol, marijuana, opioids, and overarching prevention efforts. Each topic shall include one (1) or more of the following: community education, merchant education, media, policy advocacy, parent engagement, youth leadership engagement, and social determinants of health.

1. Community Education

- a. Attend national, state and local conferences/trainings to learn evidence-based best practices for ATOD education.

- b. Develop alcohol education curriculum template.
  - c. Update template education presentation/curriculum as needed.
  - d. Conduct outreach to at least thirty (30) organizations/groups including but not limited to PTAs, Board of Education, neighborhood associations, youth leadership groups, student body associations, Boys and Girls Clubs, churches, community-based organizations, and YMCAs to conduct ATOD education presentations.
  - e. Conduct twenty-six (26) ATOD prevention education presentations.
2. Merchant Education
- a. Develop or adapt sting survey protocol to assess youth access rates to alcohol.
  - b. Partner with law enforcement agencies to conduct youth access stings surveys.
  - c. Develop or adapt educational materials to needs of local jurisdiction around alcohol education.
  - d. Disseminate merchant education packets to at least twenty (20) retailers.
3. Media Education – Implement media education campaign to complement community education messages.
4. Policy Advocacy
- a. Meet with at least five (5) local policymakers to educate about the impacts of cannabis and alcohol and gauge interest in policy options.
  - b. Develop AOD prevention policy templates and provide to policymakers as requested.
  - c. Research policy advocacy initiatives implemented in states and local jurisdictions to minimize the impact of AOD. (cannabis, alcohol)
  - d. Coordinate community input into local policy processes.

- e. Provide information and technical assistance to policy makers as needed.
5. Overarching Activities
- a. Recruit community members to participate in a countywide AOD prevention collaborative. Until the full launch of the countywide collaborative, meet with community members monthly to oversee the AOD prevention work in the East Palo Alto and Belle Haven areas. Staff of contract agency do not qualify for this activity. Community members will engage in AOD prevention activities.
  - b. Conduct at least monthly meetings with the youth program participants to provide them with the knowledge and skills to address ATOD and implement ATOD prevention program planning. Youth in the program will engage in AOD-prevention related activity to demonstrate the knowledge and skills they gained from the program. Activities can include community presentations, PSAs, letters to the editor, presentation at a city council meeting, school board advocacy, etc.
  - c. Meet with AOD contract monitor in person or by phone at least monthly to provide updates and seek assistance.
  - d. Input data into statewide database by the fifth (5<sup>th</sup>) of each month.
  - e. Conduct administrative functions which will be measured through the annual site visit.
  - f. Attend monthly countywide meetings to coordinate AOD prevention strategies.
6. Evaluation Activities. If needed by the County, conduct a community opinion survey. The tool will be developed in collaboration with the County.
7. Contractor shall complete monthly and annual deliverables as described in Attachment A2.

## II ADMINISTRATIVE REQUIREMENTS

### A. Quality Management and Compliance

1. Critical Incident Reporting

Contractor is required to submit Critical Incident reports to BHRS Quality Management (via fax # 650-525-1762) when there are unusual events, accidents, errors, violence or significant injuries requiring medical treatment for clients, staff or members of the community. (Policy #93-11 and 45 C.F.R. § 164, subpart C, in compliance with 45 C.F.R. § 164.316.)

The incident reports are confidential however discussion may occur with the Contractor regarding future prevention efforts to reduce the likelihood of recurrence. Contractor is required to participate in all activities related to the resolution of critical incidents.

2. California Department of Health Care Services

Contractor providing state funded health services may not employ any persons deemed an Ineligible Person by the California Department of Health Care Services (DHCS) in the provision of services for the County through this Agreement. Any employee(s) of Contractor determined to be an Ineligible Person will be removed from responsibility for, or involvement with County clients or operations. An "Ineligible Person" is an individual who has been (1) convicted of a crime involving fraud or abuse of the Medi-Cal program, or (2) suspended from the federal Medicare program for any reason. Ineligibility may be verified by checking: <http://files.medi-cal.ca.gov/pubsdoco/SandILanding.asp>. Once there, scroll down to the bottom of the page and click on Medi-Cal Suspended and Ineligible Provider List (Excel format). The list is in Alphabetical order. Search by the individual's last name.

3. Fingerprint Compliance

Contractor certifies that its employees, trainees, and/or its subcontractors, assignees, volunteers, and any other persons who provide services under this agreement, who have direct contact with any client will be fingerprinted in order to determine whether they have a criminal history which would compromise the safety of individuals with whom Contractor's employees, trainees, and/or its subcontractors, assignees, or volunteers have contact. Contractor shall have a screening process in place to ensure that employees who have positive fingerprints shall:

- a. Adhere to CCR Title 9 Section 13060 (Code of Conduct) when providing services to individuals with whom they have contact as a part of their employment with the Contractor; or

- b. Obtain a waiver from Community Care Licensing allowing the employee to provide services to individuals with whom they have contact as part of their employment with the Contractor.

A certificate of fingerprinting certification is attached hereto and incorporated by reference herein as Attachment E.

B. Cultural Competency

Implementations of these guidelines are based on the National Culturally and Linguistically Accessible Services (CLAS) Standards issued by the Department of Health and Human Services. For more information about these standards, please contact the Health Equity Initiatives Manager (HEIM) at [ode@smcgov.org](mailto:ode@smcgov.org).

1. Contractor will submit an annual cultural competence plan that details on-going and future efforts to address the diverse needs of clients, families and the workforce. This plan will be submitted to the BHRS Analyst/Program Manager and the Health Equity Initiatives Manager (HEIM) by September 30<sup>th</sup> of the fiscal year.

The annual cultural competence plan will include, but is not limited to the following:

- a. Implementation of policies and practices that are related to promoting diversity and cultural competence, such as ongoing organizational assessments on disparities and needs, client's rights to receive language assistance.
- b. Contractor forum for discussing relevant and appropriate cultural competence-related issues (such as a cultural competence committee, grievance, or conflict resolution committee).
- c. Ongoing collection of client cultural demographic information, including race, ethnicity, primary language, gender and sexual orientation in health records to improve service provision and help in planning and implementing CLAS standards.
- d. Staffing objectives that reflect the cultural and linguistic diversity of the clients. (Contractor will recruit, hire and retain clinical staff members who can provide services in a culturally and linguistically appropriate manner.)

- e. Contractor will ensure that all program staff receive at least 8 hours of external training per year (i.e. sponsored by BHRS or other agencies) on how to provide culturally and linguistically appropriate services including the CLAS and use of interpreters.
2. Contractor will actively participate in at least one cultural competence effort within BHRS and/or to send a representative to attend the Cultural Competence Council (CCC) for the term of the Agreement. Participation in the CCC allows for the dissemination of CLAS as well as ongoing collaborations with diverse stakeholders. Contractor shall submit to BHRS Office of Diversity and Equity (ODE) by March 31st, a list of staff who have participated in these efforts. For more information about the CCC, and other cultural competence efforts within BHRS, contact HEIM.
3. Contractor will establish the appropriate infrastructure to provide services in County identified threshold languages. Currently the threshold languages are: Spanish, Tagalog and Chinese (Mandarin and Cantonese). If Contractor is unable to provide services in those languages, Contractor is expected to contact Access Call Center or their BHRS Analyst/Program Manager for consultation. If additional language resources are needed, please contact HEIM.
4. Contractor will translate relevant and appropriate behavioral health-related materials (such as forms, signage, etc.) in County identified threshold languages in a culturally and linguistically appropriate manner. BHRS strongly encourages its contractors to use BHRS-sponsored forms in an effort to create uniformity within the system of care. Contractor shall submit to HEIM by March 31st, copies of Contractor's health-related materials in English and as translated.
5. Should Contractor be unable to comply with the cultural competence requirements, Contractor will meet with the BHRS Analyst/Program Manager and HEIM at [ode@smcgov.org](mailto:ode@smcgov.org) to plan for appropriate technical assistance.

### III. GOALS AND OBJECTIVES

Contractor shall ensure that the following outcome objectives are pursued throughout the term of this Agreement:

Prevention Education and Collaboration

Goal: Increase training attendees knowledge of alcohol and other drug health impacts.

Objective: Eighty-four percent (84%) of training evaluations will show an increase in knowledge on the health impacts of alcohol, tobacco, and other drugs.

\*\*\* END OF EXHIBIT A2 \*\*\*

EXHIBIT B2 – PAYMENTS AND RATES  
ONE EAST PALO ALTO  
FY 2018 – 2021

In consideration of the services provided by Contractor in Exhibit A2, County shall pay Contractor based on the following fee schedule:

I. PAYMENTS

In full consideration of the services provided by Contractor under this Agreement and subject to the provisions of Paragraph 3 of this Agreement, County shall pay Contractor in the manner described below:

A. Maximum Obligation

The maximum amount that County shall be obligated to pay for all services provided under this Agreement shall not exceed the amount stated in Paragraph 3 of this Agreement. Furthermore, County shall not pay or be obligated to pay more than the amounts listed below for each component of service required under this Agreement.

In any event, the maximum amount County shall be obligated to pay for all services rendered under this contract shall not exceed THREE HUNDRED SIXTY-ONE THOUSAND SEVEN HUNDRED SIXTY-EIGHT DOLLARS (\$361,768).

B. Prevention Education and Collaboration

The total amount County shall be obligated to pay for Prevention Education and Collaboration services shall not exceed THREE HUNDRED SIXTY-ONE THOUSAND SEVEN HUNDRED SIXTY-EIGHT DOLLARS (\$361,768). Contractor shall be reimbursed based upon completion of activities as described in Attachment B2 – Deliverables Payment.

1. For the term July 1, 2018 through June 30, 2019, Contractor shall be paid up to ONE HUNDRED TWO THOUSAND SIX HUNDRED DOLLARS (\$102,600), based upon completion of activities.
2. For the term July 1, 2019 through June 30, 2020, Contractor shall be paid up to ONE HUNDRED TWENTY-FIVE THOUSAND FOUR HUNDRED TWENTY-FOUR DOLLARS (\$125,424), based upon completion of activities.
3. For the term July 1, 2020 through June 30, 2021, Contractor shall be paid up to ONE HUNDRED THIRTY-THREE THOUSAND

SEVEN HUNDRED FORTY-FOUR DOLLARS (\$133,744), based upon completion of activities.

4. Performance Requirements

Contractor will invoice for completed activities based on Price per Event costs outlined in Attachment B2 – Deliverables Payment. Adequate supporting documents will be submitted as stipulated in the Documents column of Attachment A2 – Deliverable Options. County and Contractor agree, in the event that Contractor fails to complete the deliverables as described in Attachment B2 – Deliverables Payment to the satisfaction of the County, Contractor shall invoice monthly for deliverables completed during the previous month.

5. Funding is contingent upon availability of funds for AOD prevention and upon Contractor's satisfactory progress on the contracted service deliverables as described in the approved Work Plan.

a. Contractor will provide the deliverables described in the approved Work Plan in the Major Activities column, and by the date listed in the Completion Date column.

b. Contractor will review the Major Activities/deliverables completed in the Work Plan with the BHRS AOD Analyst on a quarterly basis. Any incomplete Major Activities may result in a corrective action plan, or may result in the delay or withholding of future payments

c. If it is determined that the Contractor has not met the Major Activities deliverables by the required Completion Dates, County may issue a corrective action plan for unmet deliverables. Failure to adhere to the corrective action plan may result in the delay or withholding of future payments, or Contractor reimbursing the County for the contract value of any and all unmet Major Activity deliverables.

C. Contractor will be responsible for all expenses incurred during the performance of services rendered under this Agreement.

D. Modifications to the allocations in Paragraph A of this Exhibit B2 may be approved by the Chief of San Mateo County Health or designee, subject to the maximum amount set forth in Paragraph 3 of this Agreement.

E. The Chief of San Mateo County Health or designee is authorized to execute contract amendments which modify the County's maximum fiscal obligation

by no more than \$25,000 (in aggregate), and/or modify the contract term and/or services so long as the modified term or services is/are within the current or revised fiscal provisions.

- F. In the event that funds provided under this Agreement are expended prior to the end of the contract period, Contractor shall provide ongoing services under the terms of this Agreement through the end of the contract period without further payment from County.
- G. In the event this Agreement is terminated prior to June 30, 2021, Contractor shall be paid on a prorated basis for only that portion of the contract term during which Contractor provided services pursuant to this Agreement. Such billing shall be subject to the approval of the Chief of San Mateo County Health or designee.
- H. Monthly Invoice and Payment

Contractor shall invoice the County on or before the tenth (10th) working day of each month prior to the service month. Payment by County to Contractor shall be monthly. Invoices that are received after the tenth (10th) working day of the month are considered to be late submissions and may be subject to a delay in payment. County reserves the right to deny payment of invoices if Contractor does not meet contract deliverables including CalOMS Pv data submission requirements. Invoices and reports are to be sent to:

County of San Mateo  
Behavioral Health and Recovery Services  
BHRS – AOD Program Analyst  
310 Harbor Blvd., Bldg. E  
Belmont, CA 94002

- I. County anticipates revenues from various sources to be used to fund services provided by Contractor through this Agreement. Should actual revenues be less than the amounts anticipated for any period of this Agreement, the maximum payment obligation and/or payment obligations for specific services may be reduced at the discretion of the Chief of San Mateo County Health or designee.
- J. County May Withhold

Contractor shall provide all pertinent documentation requested by County. The County may withhold payment for any and all services for which the required documentation is not provided, or if the documentation provided does not meet professional standards as determined by the Quality Improvement Manager of San Mateo County BHRS. Contractor shall meet

at least quarterly with the BHRs AOD Analyst, to review the Work Plan, documentation, and billing reports and to take appropriate corrective action, as needed, to resolve any discrepancies.

K. Inadequate Performance

If County or Contractor finds that performance is inadequate, at the County's discretion, a meeting may be called to discuss the causes for the performance problem, to review documentation, billing and/or other reports, and to take appropriate corrective action, as needed, to resolve any identified discrepancies. This Agreement may be renegotiated, allowed to continue to end of term, or terminated pursuant to Paragraph 5 of this Agreement. Any unspent monies due to performance failure may reduce the following year's agreement, if any.

L. Invoice Certification and Program Integrity

Anytime Contractor submits an invoice to the County for reimbursement for services provided under Exhibit A2 of this Agreement, Contractor shall certify by signature that the invoice is true and accurate by stating the invoice is submitted under the penalty of perjury under the laws of the State of California.

The invoice must include the following language and signature line at the bottom of the form(s) and/or cover letter used to report the invoice.

"Under the penalty of perjury under the laws of the State of California, I hereby certify that this invoice for services complies with all terms and conditions referenced in the Agreement with San Mateo County.

Executed at \_\_\_\_\_ California, on \_\_\_\_\_ 20\_\_

Signed \_\_\_\_\_ Title \_\_\_\_\_

Agency \_\_\_\_\_"

\*\*\* END OF EXHIBIT B2 \*\*\*

**ATTACHMENT A2 – DELIVERABLE DOCUMENTATION  
ONE EAST PALO ALTO  
FY 2018 – 2021**

<b>A. Community Education</b>	<b>Documentation Required</b>
<p>1. Attend local, regional, state and national conferences/trainings to learn evidence-based best practices for ATOD community education. Trainings attended should be approved by contract monitor. Policy trainings cannot be claimed if included in ATOD-specific trainings claimed by contractor.</p> <p>Who should attend:</p> <ul style="list-style-type: none"> <li>• Program coordinator</li> <li>• Program director</li> <li>• Someone who will be directly involved in program delivery</li> <li>• Maximum 2 attendees per training</li> </ul>	<p>Submit at least 2 of the following for each participant:</p> <ul style="list-style-type: none"> <li>• Certificate(s) of completion</li> <li>• Training agenda</li> <li>• Training slides</li> <li>• Registration confirmation</li> </ul>
<p>2. Develop alcohol education curriculum template</p>	<ul style="list-style-type: none"> <li>• Copy of template</li> </ul>
<p>3. Work with community partners to update education curricula.</p>	<ul style="list-style-type: none"> <li>• Copy of curricula submitted</li> </ul>
<p>4. Community presentations. At least 50% of the presentations will be completed by the end of December. Thereafter, contractor must complete at least 25% of the presentations within each of the remaining 2 quarters.</p>	<ul style="list-style-type: none"> <li>• Sign in sheets that show date, location, topic, at least 12 participants in each presentation</li> </ul>
<p>5. Conduct outreach to at least 30 organizations/groups including but not limited to PTAs, Board of Education, neighborhood associations, youth leadership groups, student body associations, Boys and Girls Club, churches, community-based organizations, and YMCA to conduct education presentation.</p>	<ul style="list-style-type: none"> <li>• Outreach plan with list of organizations, dates, and outcomes of outreach</li> </ul>
<b>B. Merchant Education</b>	<b>Documentation Required</b>
<p>6. Develop or adapt existing alcohol sting survey protocol to assess youth access rates to alcohol.</p>	<ul style="list-style-type: none"> <li>• Sting survey protocol</li> </ul>
<p>7. Partner with law enforcement agencies to conduct youth access sting surveys.</p>	<ul style="list-style-type: none"> <li>• Results of sting survey</li> <li>• Press release about sting survey</li> </ul>

8. Develop or adapt merchant education materials to needs of local jurisdiction(s).	<ul style="list-style-type: none"> <li>• Merchant education packet</li> </ul>
9. Disseminate alcohol merchant education packets to 75 alcohol retailers.	<ul style="list-style-type: none"> <li>• List of all merchants receiving education packets</li> </ul>
<b>C. Media Education</b>	<b>Documentation Required</b>
10. Post two social media messages per month. At least 50% of the posts will be completed by the end of December 2018. Thereafter, contractor must complete at least 25% of the posts within each of the remaining 2 quarters. Any uncompleted posts will not be allowed to be made up.	<ul style="list-style-type: none"> <li>• Copy of social media post, including platform used and date posted</li> </ul>
11. Respond to at least two social media posts per month. At least 50% of the posts will be completed by the end of December 2018. Thereafter, contractor must complete at least 25% of the posts within each of the remaining 2 quarters. Any uncompleted posts will not be allowed to be made up.	<ul style="list-style-type: none"> <li>• Copy of post, including platform and date posted</li> </ul>
<b>D. Policy Advocacy</b>	<b>Documentation Required</b>
12. Meet with at least 5 local policymakers to educate about the impacts of marijuana or alcohol and to gauge interest in considering policy options.	<ul style="list-style-type: none"> <li>• List of policymakers with dates and outcomes of meetings</li> <li>• Meeting notes</li> </ul>
13. Develop a prevention policy template for alcohol and marijuana.	<ul style="list-style-type: none"> <li>• AOD policy template developed</li> </ul>
14. As requested, provide policy templates to local policymakers more information about ATOD policies.	<ul style="list-style-type: none"> <li>• Documentation of communication with policy makers requesting policy templates</li> </ul>
15. Coordinate community input into local policy processes related to AOD issues.	<ul style="list-style-type: none"> <li>• Documentation of coordination activities (meeting/training notes, meeting outlines, pictures from events)</li> </ul>
16. Provide information and technical assistance as needed on AOD policy issues.	<ul style="list-style-type: none"> <li>• List of policymakers receiving technical assistance, dates and topics covered</li> <li>• Notes from TA session as applicable</li> </ul>
<b>E. Overarching</b>	<b>Documentation Required</b>
17. Recruit community members to participate in a countywide AOD prevention collaborative. Until the full launch of the countywide collaborative, meet with community members to oversee the AOD prevention work in the Central CSA. Staff of contract agency do not qualify for this activity.	<p>Submit all:</p> <ul style="list-style-type: none"> <li>• List of community members recruited for prevention collaborative.</li> <li>• Agenda for meetings conducted/attended</li> <li>• Sign-in sheets for meetings conducted/attended</li> </ul> <p>Supporting community member</p>

<p>Years 2&amp;3: \$100 per community member who attends EPA Coalition meeting, or \$200 for community member who attends AOD countywide coalition meeting.</p>	<ul style="list-style-type: none"> <li>• Driving log/tracking sheet</li> <li>• Date(s) of meetings with community member and brief description of meeting</li> </ul>
<p>18.Coalition members will engage in AOD-prevention related activity to demonstrate the knowledge and skills they gained from the program. Activities can include community presentations, PSAs, letters to the editor, presentation at a city council meeting, school board advocacy, etc.</p>	<ul style="list-style-type: none"> <li>• Copies of letters written</li> <li>• Materials developed</li> <li>• Pictures from presentations to policymakers</li> </ul>
<p>19.Conduct at least monthly meetings with youth program participants to provide them with the knowledge and skills to address alcohol and other drugs and implement AOD prevention program planning.</p>	<p>Submit all:</p> <ul style="list-style-type: none"> <li>• Meeting agenda with dates, topics and meeting outcomes</li> <li>• Evaluation tool(s) used</li> <li>• Evaluation report</li> </ul>
<p>20.Each youth in the program will engage in an AOD-prevention-related activity to demonstrate the knowledge and skills they gained from the program. Activities can include community presentations, PSAs, letters to the editor, presentation at a city council meeting, school board advocacy, etc.</p>	<ul style="list-style-type: none"> <li>• Documentation of activity conducted by program participants</li> </ul>
<p>21.Meet with AOD contract monitor in person or by phone monthly to provide updates or seek assistance</p>	<ul style="list-style-type: none"> <li>• Appointment schedule-calendar with date and time</li> <li>• Meeting notes</li> </ul>
<p>22.Input into statewide database by the 5th of the month</p> <ul style="list-style-type: none"> <li>• Detailed</li> <li>• Clear</li> <li>• Specific</li> <li>• Relevant</li> </ul>	<ul style="list-style-type: none"> <li>• Submission confirmation-with screen shot or document (dated )</li> </ul>
<p>23.Administrative functions which will be measured through the annual site visit: Option 1: Completion of site visit requirements with no corrective action plans (CAP) will pay full \$5,000; Option 2: If CAPs are needed, CAPs will be submitted within 30 days of receipt of site visit outcomes (pays \$2,500); AND completion of CAP</p>	<ul style="list-style-type: none"> <li>• Copy of completed site visit report</li> <li>• Evidence of completion of CAPs, if appropriate</li> </ul>

activities within 60 days (or within timeline negotiated with contract monitor) pays \$2,500.	
24. Attend monthly countywide meetings to coordinate AOD prevention strategies.	<ul style="list-style-type: none"> <li>• Meeting agenda</li> </ul>
25. NEW ADMIN DEL YR 2: Submission of updated Cultural Humility Plan - Deadline of Sept 30th, 2019	<ul style="list-style-type: none"> <li>• Copy of plan</li> </ul>
26. NEW ADMIN DEL YR 2: Submission of end of year report - Deadline of July 30	<ul style="list-style-type: none"> <li>• Copy of report</li> </ul>
27. NEW ADMIN DEL YR 2: Negotiable deliverables (ie: extra presentations, development of flyers, meetings with community members for a specific goal)	<ul style="list-style-type: none"> <li>• As agreed upon with contract monitor</li> </ul>
<b>F. Evaluation Activities</b>	<b>Documentation Required</b>
28. If needed by the County, conduct a community opinion survey. Tool will be developed in collaboration with the County.	<ul style="list-style-type: none"> <li>• Surveys collected</li> </ul>
29. NEW ADMIN DEL YR 2: Collection of evaluation surveys for community education presentations	<ul style="list-style-type: none"> <li>• Surveys collected</li> </ul>
30. NEW ADMIN DEL YR 2: Communication & TA partnering with county evaluator	<ul style="list-style-type: none"> <li>• List of meeting date(s) and duration of meeting</li> </ul>

**ATTACHMENT B2 - DELIVERABLES PAYMENT  
ONE EAST PALO ALTO  
FY 2018 - 2021**

ACTIVITY	NUMBER YEAR 1	PRICE PER EVENT YEAR 1	TOTAL YEAR 1	NUMBER YEAR 2	PRICE PER EVENT YEAR 2	TOTAL YEAR 2	NUMBER YEAR 3	PRICE PER EVENT YEAR 3	TOTAL YEAR 3	TOTAL
<b>COMMUNITY EDUCATION</b>										
1. Attend local, state, and national conferences/trainings to learn evidence-based best practices for ATOD education (4 cannabis, 4 alcohol, 4 opioids, 4 alcohol policy, 4 cannabis policy). Activities funded by DFC and other BHRS-related funding cannot be claimed for this activity.	10	\$500 attend \$2,000 present	\$5,000	10	\$520 attend \$2,080 present	\$5,200	10	\$520 attend \$2,080 present	\$5,200	\$15,400
2. Develop alcohol education curriculum template	1	\$1,000	\$1,000	0	\$1,040	\$0	0		\$0	\$1,000
3. Work with community partners to update education curricula (1 cannabis, 1 opioids)	2	\$500	\$1,000	10	\$208	\$2,080	10	\$208	\$2,080	\$5,160
4. Conduct community presentations. (10 cannabis, 10 alcohol, 6 opioids). Presentations conducted at coalition meetings cannot be claimed for this activity.	13	\$500	\$6,500	35	\$520	\$18,200	35	\$520	\$18,200	\$42,900
5. Conduct outreach to at least 30 organizations/groups including but not limited to PTAs, Board of Education, neighborhood associations, youth leadership groups, student body associations, Boys and Girls Clubs, churches, community-based organizations, and YMCAs to conduct ATOD education presentations	1	\$2,000	\$2,000	1	\$2,080	\$2,080	1	\$2,080	\$2,080	\$6,160
<b>MERCHANT EDUCATION</b>										
6. Develop or adapt existing alcohol sting survey protocol to assess youth access rates to alcohol.	1	\$500	\$500	0	\$520	\$0	0		\$0	\$500
7. Partner with law enforcement agencies to conduct youth access sting surveys.	1	\$3,000 per sting survey round	\$3,000	0	\$3,120 per sting survey round	\$0	0		\$0	\$3,000
8. Develop or adapt merchant education materials to needs of local jurisdiction(s).	1	\$1,000	\$1,000	0	\$1,040	\$0	0		\$0	\$1,000

9. Disseminate alcohol merchant education packets to 20 alcohol retailers.	1	\$5,000 for 200	\$500	0	\$5,000 for 200	\$0	0	\$0	\$500	
MEDIA EDUCATION										
10. Post two messages per month on social media platform	24	\$200 social media \$1,000 other media	\$4,800	48	\$208 social media \$1,040 other media	\$9,984	48	\$208	\$9,984	\$24,768
11. Respond to two media story/post with prevention message per month	24	\$200 social media	\$4,800	48	\$208 social media	\$9,984	48	\$208	\$9,984	\$24,768
POLICY ADVOCACY										
12. Meet with at least 5 local policymakers to educate about the impacts of cannabis or alcohol and to gauge interest in considering policy options.	5	\$500 per individual meeting	\$2,500	5	\$520 per individual meeting	\$2,600	5	\$520	\$2,600	\$7,700
13. Develop a prevention policy template for alcohol and cannabis	2	\$1,000	\$2,000	0	\$1,040	\$0	0	\$0	\$2,000	
14. As requested, provide policy templates to local policymakers.	5	\$500 per request	\$2,500	5	\$520 per request	\$2,600	5	\$520	\$2,600	\$7,700
15. Coordinate community input into local policy processes	1	\$5,000	\$5,000	1	\$5,200	\$5,200	1	\$5,200	\$5,200	\$15,400
16. Provide information and technical assistance as needed.	5	\$500 per TA	\$2,500	5	\$520 per TA	\$2,600	5	\$520 per TA	\$2,600	\$7,700
OVERARCHING ACTIVITIES										
17. Hallmark event	0		0	1	\$5,200	\$5,200	1	\$5,200	\$5,200	\$10,400
Recruit community members to participate in a countywide AOD prevention collaborative. Until the full launch of the countywide collaborative, meet with community members to oversee the AOD prevention work in the EPA area;	120	\$100 per community member recruited to attend per meeting	\$12,000				40	\$208	\$8,320	\$20,320
\$100 per community member who attends EPA Coalition meeting OR				36	\$104 per community member recruited to attend per meeting	\$3,744	36	\$104	\$3,744	\$7,488
\$200 for each community member to attend county AOD coalition meeting. Can be used to stipend community member.				24	\$208	\$4,992	24	\$208	\$4,992	\$9,984

18. Coalition members will engage in AOD-prevention related activity to demonstrate the knowledge and skills they gained from the program. Activities can include community presentations, PSAs, letters to the editor, presentation at a city council meeting, school board advocacy, etc. Activities conducted with funding from DFC or other BHRS programs cannot be claimed for this activity.	12	\$500	\$6,000	12	\$520	\$6,240	12	\$520	\$6,240	\$18,480
19. Conduct at least monthly meetings with the youth program participants to provide them with the knowledge and skills to address ATOD and implement ATOD prevention program planning. Pre/post evaluation of program will be conducted. Meetings with youth funded through DFC or other BHRS funded programs cannot be claimed for this activity.	24	\$500	\$12,000	24	\$520	\$12,480	24	\$520	\$12,480	\$36,960
20. Youth in the program will engage in AOD-prevention related activity to demonstrate the knowledge and skills they gained from the program. Activities can include community presentations, PSAs, letters to the editor, presentation at a city council meeting, school board advocacy, etc. Meetings with youth funded through DFC or other BHRS funded programs cannot be claimed for this activity.	24	\$500	\$12,000	24	\$520	\$12,480	24	\$520	\$12,480	\$36,960
21. Meet with AOD contract monitor in person or by phone at least monthly to provide updates and seek assistance.	12	\$100	\$1,200	12	\$104	\$1,248	12	\$104	\$1,248	\$3,696
22. Input into statewide database by the 5th of the month.	12	\$200	\$2,400	12	\$208	\$2,496	12	\$208	\$2,496	\$7,392

23. Administrative functions which will be measured through the annual site visit: Option 1: Completion of site visit requirements with no corrective action plans (CAP) will pay full \$5,000; Option 2: If CAPs are needed, CAPs will be submitted within 30 days of receipt of site visit outcomes (pays \$2,500); AND completion of CAP activities within 60 days (or within timeline negotiated with contract monitor) pays \$2,500.	1	\$5,000	\$5,000	1	\$5,200	\$5,200	1	\$5,200	\$5,200	\$15,400
24. Attend monthly countywide meetings to coordinate AOD prevention strategies	12	\$200	\$2,400	12	\$208	\$2,496	12	\$208	\$2,496	\$7,392
25. NEW ADMIN DEL YR 2: Submission of updated Cultural Humility Plan - Deadline of Sept 30th, 2019	0		\$0	1	\$520	\$520	1	\$520	\$520	\$1,040
26. NEW ADMIN DEL YR 2: Submission of end of year report - Deadline of July 30, 2020	0		\$0	1	\$520	\$520	1	\$520	\$520	\$1,040
27. NEW ADMIN DEL YR 2: Negotiable deliverables (ie: extra presentations, development of flyers, meetings with community members for a specific goal)	0		\$0	1	\$5,200	\$5,200	1	\$5,200	\$5,200	\$10,400
EVALUATION ACTIVITES										
28. If needed by the AOD, conduct a community AOD opinion survey. Tool will be developed in collaboration with the County.	1	\$5,000	\$5,000	0	\$5,200	\$0	0	\$5,200	\$0	\$5,000
29. NEW ADMIN DEL YR 2: Collection of evaluation surveys for community education presentations	0		\$0	1	\$1,040	\$1,040	1	\$1,040	\$1,040	\$2,080
30. NEW ADMIN DEL YR 2: Communication & TA partnering with county evaluator	0		\$0	5	\$208	\$1,040	5	\$208	\$1,040	\$2,080
<b>TOTAL</b>			<b>\$102,600</b>			<b>\$125,424</b>			<b>\$133,744</b>	<b>\$361,768</b>