




Fiscal Impact Form

Department: Ouray County Public Health Agency (OCPHA)	Date: 07-10-2017
Document Title (i.e. Resolution, Agreement, etc.): State Innovation Model (SIM) Mental Health Grant <u>Scope of Work Amendment</u>; Local Public Health Behavioral Health Promotion and Prevention of Behavioral Health Disorders Funding Opportunity; Grant Funding Change Letter already being routed for signatures at CDPHE	Year of commencement: 08/01/17 – 07/31/2018 (2nd year of a 3-year contract)

Source of Funding:


 General Fund Revenue
 R & B Fund Revenue
 EMS Fund Revenue
 Social Services Fund
 Public Health Fund
 Other (CDPHE)

If other, please indicate: \$71,861 for OCPHA, \$9,560 for 5 local public health agencies (LPHAs) (\$47,800) in West Central Public Health Partnership (WCPHP), for a total of \$119,661. These federal funds from the Center for Medicare and Medicaid Innovation (CMMI) are being allocated by the State Innovation Model office to the Colorado Department of Public Health & Environment, to allocate to LPHAs.

Reporting Requirements (if any): **Monthly invoicing and bi-monthly reports. Deliverables include: The Contractor shall provide a CDPHE-approved progress report, including documentation of participation in Mental Health First Aid trainings, key informant interviews, dissemination of stigma reduction materials, and summary findings from screening and referral survey data.**

Description/Purpose:
Colorado SIM has allocated \$3 million dollars over the next three years (2016-2019) to be distributed to LPHAs across the state to support activities that promote behavioral health and improve community based awareness, prevention and screening of behavioral health disorders. Building upon the work that LPHAs began through their prioritization process, this grant will improve the health of Coloradans by building capacity and support for the implementation of behavioral health promotion and the prevention of behavioral health disorders.

Submission/Review/Approval or Denial:

Department Head / Elected Official: <u>Elisabeth W. Lawaczeck</u>	Date: <u>07-10-2017</u>
County Attorney: _____	Date: _____
County Administrator: <u>Courne J Hunt</u>	Date: <u>7-10-2017</u>
Comments: _____	
Board of County Commissioners, Chair: _____	Date: _____
Approve <input type="checkbox"/>	Deny <input type="checkbox"/>

DEPARTMENT OR AGENCY NAME
**COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
HPCD-SIM**

DEPARTMENT OR AGENCY NUMBER
FAAA

TASK ORDER AMENDMENT ROUTING NUMBER
18-103247
To Original Task Order Routing Number
17-92582

TASK ORDER AMENDMENT #2

This Task Order Amendment is made this **10th** day of **July, 2017**, by and between the State of Colorado, acting by and through the **DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT**, whose address or principal place of business is **4300 Cherry Creek Drive South, Denver, Colorado 80246**, hereinafter referred to as the “State”; and, **BOARD OF COUNTY COMMISSIONERS OF OURAY COUNTY, (a political subdivision of the state of Colorado), 541 4th Street, Ouray, Colorado, 81427, for the use and benefit of the Ouray County Public Health Agency**, whose address or principal place of business is **302 2nd Street, Ouray, Colorado 84127**, hereinafter referred to as the “Contractor”.

FACTUAL RECITALS

The parties entered into a Master Contract dated **January 17, 2012**, with contract routing number **13 FAA 00039**.

Pursuant to the terms and conditions of the Master Contract the parties entered into a Task Order Contract dated **July 19, 2016**, with encumbrance number **CT FAAA FHLA 201700001338**, and task order contract routing number **17 FHLA 92582**, hereinafter referred to as the “**Original Task Order Contract**”, whereby the Contractor was to provide to the State the following:

This project serves to conduct outreach, engagement and community development of behavioral health care and reduction of the associated stigma of behavioral health help-seeking attitudes and behavior in the low socioeconomic status population of the West Central Public Health Partnership region, including the counties of Delta, Gunnison, Hinsdale, Montrose, Ouray and San Miguel

Changes were required to add the term dates of August 1, 2017 through July 31, 2018 to the Statement of Work.

The State hereby exercises a “no cost” change within the current term of the Original Task Order Contract.

NOW THEREFORE, in consideration of their mutual promises to each other, stated below, the parties hereto agree as follows:

1. Consideration for this Contract Amendment to the Original Task Order Contract consists of the payments and services that shall be made pursuant to this Contract Amendment, and promises and agreements herein set forth.
2. It is expressly agreed to by the parties that this Contract Amendment is supplemental to the Original Task Order Contract, contract routing number **17 FHLA 92582 as amended by** Contract Amendment 1, routing number **17 FHLA 96475 and** Grant Funding Change Letter 1 routing number **18 FHLA 100385, collectively** referred to herein as the Original Task Order Contract, which is by this reference incorporated herein. All terms, conditions, and provisions thereof, unless specifically modified herein, are to apply to this Contract Amendment as though they were expressly rewritten, incorporated, and included herein.

3. It is expressly agreed to by the parties that the Original Task Order Contract is and shall be modified, altered, and changed in the following respects only:
 - A. This Contract Amendment is issued pursuant to paragraph 5 of the Original Task Order Contract. This Contract Amendment is for the **current term** of **August 15, 2016**, through and including **January 31, 2019**. The revised **Specifications to the original Statement of Work** of the Original Task Order Contract is incorporated herein by this reference and identified as “**Revised Exhibit B.**”

The Original Task Order Contract is modified accordingly. All other terms and conditions of the Original Task Order Contract are reaffirmed.

4. The Effective Date of this Contract Amendment is **August 1, 2017**, or upon approval of the State Controller, or an authorized delegate thereof, whichever is later.
5. Except for the General Provisions and Special Provisions of the Original Task Order Contract, in the event of any conflict, inconsistency, variance, or contradiction between the terms and provisions of this Contract Amendment and any of the terms and provisions of the Original Task Order Contract, the terms and provisions of this Contract Amendment shall in all respects supersede, govern, and control. The Special Provisions shall always control over other provisions of the Original Task Order Contract or any subsequent amendments thereto. The representations in the Special Provisions to the Original Task Order Contract concerning the absence of personal interest of state of Colorado employees are presently reaffirmed.
6. FINANCIAL OBLIGATIONS OF THE STATE PAYABLE AFTER THE CURRENT FISCAL YEAR ARE CONTINGENT UPON FUNDS FOR THAT PURPOSE BEING APPROPRIATED, BUDGETED, AND OTHERWISE MADE AVAILABLE.

SIGNATURE PAGE

Contract Routing Number: 18 FHILA 103247

THE PARTIES HERETO HAVE EXECUTED THIS TASK ORDER AMENDMENT

Each person signing this Task Order Amendment represents and warrants that he or she is duly authorized to execute this Task Order Amendment and to bind the party authorizing his or her signature.

**CONTRACTOR
BOARD OF COUNTY COMMISSIONERS
OF OURAY COUNTY**

**for the use and benefit of the
Ouray County Public Health Agency**

(a political subdivision of the state of Colorado)

STATE OF COLORADO

John W. Hickenlooper, Governor

**Colorado Department of Public Health and
Environment**

Larry Wolk, MD, MSPH, Executive Director and
Chief Medical Officer

Print Name of Authorized Individual

Print Title of Authorized Individual

Signature of Authorized Individual

Date

By: _____
Lisa McGovern
Purchasing and Contracting Section Director, CDPHE

Date

PROGRAM APPROVAL

Colorado Department of Public Health and Environment

LEGAL REVIEW

Cynthia H. Coffman, Attorney General

By: _____
Signature of Authorized CDPHE Program Approver

By: _____
Signature – Senior Assistant Attorney General

Date

Date

In accordance with §24-30-202 C.R.S., this Task Order Amendment is not valid until signed and dated below by the State Controller or an authorized delegate.

STATE CONTROLLER

Robert Jaros, CPA, MBA, JD

By: _____
CDPHE Delegate

Effective Date: _____

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STATEMENT OF WORK
 To Original Contract Routing Number 17 FHLA 92582
 Contract Amendment #2 Routing Number 18 FHLA 103247

These provisions are to be read and interpreted in conjunction with the provisions of the contract specified above.

I. Entity Name: Ouray County Public Health Agency
Term: August 1, 2017-July 31, 2018

II. Project Description:

This project serves to conduct outreach, engagement and community development of behavioral health care and reduction of the associated stigma of behavioral health help-seeking attitudes and behavior in the low socioeconomic status population of the West Central Public Health Partnership region (Delta, Gunnison, Hinsdale, Montrose, Ouray and San Miguel counties). This project seeks to do so by educating the public about behavioral health and its association with different stages of life, and by maximizing access to behavioral health preventive services through assessment, partnerships, systems-building and community-clinical linkages.

III. Definitions:

1. **Behavioral health:** SIM defines behavioral health to be a continuum of services for individuals at risk of, or suffering from, mental, behavioral, or addictive disorders, and behavioral health, as a discipline, refers to mental health, psychiatric, marriage and family counseling, and addictions treatment, and includes services provided by social workers, counselors, psychiatrists, psychologists, neurologists, and physicians, as well as nurse practitioners and physician assistants.
2. **CDHS:** Colorado Department of Human Services
3. **CDPHE:** Colorado Department of Public Health and Environment
4. **CMH:** Center for Mental Health
5. **FQHC:** Federally Qualified Health Centers
6. **IGA:** intergovernmental agreement
7. **LPHA:** Local public health agency
8. **MHFA:** Mental Health First Aid
9. **Primary Care:** health care at a basic rather than specialized level for people making an initial approach for treatment.
10. **RCCO:** Regional Care Collaborative Organization
11. **SES:** socioeconomic status
12. **SIM:** State Innovation Model
13. **TCHN:** Tri County Health Network
14. **WCPHP:** West Central Public Health Partnership that comprises Delta, Gunnison, Hinsdale, Montrose, Ouray and San Miguel counties.

IV. Work Plan:

Goal #1: Improve behavioral health help-seeking attitudes and practices of the SES status population of the WCPHP region that is comprised of Delta, Gunnison, Hinsdale, Montrose, Ouray and San Miguel counties.	
Objective #1: No later than the expiration of the contract, provide a stigma reduction campaign on behavioral health issues to low SES populations to encourage behavioral healthcare seeking behavior in the WCPHP region.	
Primary Activity #1	The Contractor shall continue to implement the selected behavioral health stigma reduction campaign.

<p>Sub-Activities #1</p>	<ol style="list-style-type: none"> 1. The Contractor shall continue to implement the stigma reduction campaign as outlined in the implementation and dissemination plan, via public service announcements and other modes of delivery as determined most effective for the target audience and population by the Steering Committee. 2. The Contractor shall promote other behavioral health resources in tandem with the stigma reduction campaign such as the Colorado Crisis Services hotline, CDHS and the Midwestern Center for Mental Health by distributing a minimum of 900 informational cards and brochures to a minimum of 12 primary care practices. 3. The Contractor shall promote other behavioral health resources in tandem with the stigma reduction campaign such as the Colorado Crisis Services hotline, CDHS and the Midwestern Center for Mental Health by distributing a minimum of 75 informational cards and brochures to local public health agency clinical settings, including WIC, schools, social services offices, local law enforcement agencies, fire and emergency medical service agencies, and hospitals in the WCPHP region. 4. The Contractor shall promote other behavioral health resources in tandem with the stigma reduction campaign such as the Colorado Crisis Services hotline, CDHS and the Midwestern Center for Mental Health by distributing informational cards and brochures during two (2) community events in each county of the WCPHP region. 5. The Contractor shall host two (2) Mental Health First Aid trainings; one (1) youth class, and one (1) adult class. 6. The Contractor shall assist sub-contractors in scheduling Mental Health First Aid trainings and reaching target audiences during quarterly conference calls. 7. The Contractor shall continue to collaborate with local efforts that are offering similar educational campaigns to maximize resource use and impact, such as at schools, colleges and other community organizations. 8. The Contractor shall place a minimum of three (3) social media ads per quarter (12 ads total). 	
<p>Standards and Requirements</p>	<ol style="list-style-type: none"> 1. The Contractor shall attend the SIM-approved meeting to be held in Denver. 2. The Contractor shall participate in all technical assistance meetings conducted by the CDPHE SIM team. 3. The Contractor shall submit all deliverables by e-mail, unless otherwise stated, to CDPHE SIM Health Systems Specialist. 	
<p>Expected Results of Activity(s)</p>	<ol style="list-style-type: none"> 1. Decrease in behavioral health stigma among low SES populations in WCPHP region. 2. Increase in behavioral health screenings and referrals among low SES populations. 	
<p>Measurement of Expected Results</p>	<ol style="list-style-type: none"> 1. A final report including: <ol style="list-style-type: none"> 1. The reach and scope of the stigma reduction campaign 2. Number of Mental Health First Aid training participants 	
<p>Deliverables</p>	<table border="1" style="width: 100%;"> <tr> <td data-bbox="1255 1350 1503 1696"> <p>Completion Date</p> <p>No later than the last day of October, January, April, and July</p> </td> </tr> </table>	<p>Completion Date</p> <p>No later than the last day of October, January, April, and July</p>
<p>Completion Date</p> <p>No later than the last day of October, January, April, and July</p>		
<p>Goal #2: Improve access to behavioral health preventive services for low SES populations through assessment, partnerships, systems building and community-clinical linkages in the WCPHP region.</p>		

Objective #1: No later than the expiration date of this contract, collaborate with stakeholders including other SIM-funded organizations in the WCPHP region to assess the behavioral healthcare needs, including resources and gaps in services.		
Primary Activity #1	The Contractor shall finalize the community behavioral health resource and service gap assessment for all six counties in the WCPHP region.	
Sub-Activities #1	<ol style="list-style-type: none"> 1. The Contractor shall expand the behavioral health resource and service gap assessment plan with input from the Steering Committee and key informants. 2. The Contractor shall ensure at least one (1) key informant interview is conducted in each county of WCPHP region. 3. The Contractor shall continue developing relationships with health systems and other stakeholders who serve low-SES populations (e.g. RCCO, county social service directors, juvenile diversion staff, early childhood councils, private behavioral health service providers, community members and healthcare provider leaders at clinics who serve low SES populations such as Federally Qualified Health Centers (FQHCs) and Rural Health Clinics) through meetings to assess gaps and resources in serving behavioral health needs of low SES populations. 4. The Contractor shall collect and analyze baseline patient behavioral health screening and referral data through surveys. 	
Objective #2: No later than the expiration date of the contract, implement the plan to increase integration of behavioral health and primary care systems and services in the WCPHP region.		
Primary Activity #1	The Contractor shall assist primary care practices in the adoption of behavioral health integration.	
Sub-Activities #1	<ol style="list-style-type: none"> 1. The Contractor and subcontractors shall compile and disseminate a packet to at least two (2) primary care provider(s) per county in the WCPHP region with information including integration resources, tools, continuing education and funding opportunities. 2. The Contractor shall promote peer-to-peer services (e.g., PSYCHline and C-PACK) and tools for primary care practices to integrate behavioral health resources. 3. The Contractor and subcontractors shall assist primary care practices in creating linkages between practices, community resources and public health. 	
Standards and Requirements	<ol style="list-style-type: none"> 1. The Contractor shall attend the SIM-approved meeting to be held in Denver. 2. The Contractor shall participate in all technical assistance meetings conducted by the CDPHE SIM team. 3. The Contractor shall submit all deliverables by e-mail, unless otherwise stated, to CDPHE SIM Health Systems Specialist. 	
Expected Results of Activity(s)	<ol style="list-style-type: none"> 1. Improved understanding of resources and gaps in behavioral health and primary care system and service integration in WCPHP. 	
Measurement of Expected Results	<ol style="list-style-type: none"> 1. A final report, containing: <ol style="list-style-type: none"> a. packet of compiled resources for primary care; b. summary findings from gap assessment (key informant interviews, screening and referral survey data) 	
Deliverables	<ol style="list-style-type: none"> 1. The Contractor shall provide a CDPHE-approved progress report, including: <ol style="list-style-type: none"> a. documentation of key informant interview (e.g. number of interviews conducted, date of interview, type of informant, key findings) b. summary findings from screening and referral survey data 	Completion Date
		No later than the last day of October, January, April, and July

	2. The Contractor shall submit packet of resources for primary care providers to CDPHE SIM staff for approval before dissemination.	No later than April 30
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V. Monitoring:

CDPHE’s monitoring of this contract for compliance with performance requirements will be conducted throughout the contract period by CDPHE SIM Health Systems Specialist. Methods used will include a review of documentation determined by CDPHE to be reflective of performance to include progress reports and other fiscal and programmatic documentation as applicable. The Contractor’s performance will be evaluated at set intervals and communicated to the contractor. A Final Contractor Performance Evaluation will be conducted at the end of the life of the contract.

VI. Resolution of Non-Compliance:

The Contractor will be notified in writing within **15** calendar days of discovery of a compliance issue. Within **30** calendar days of discovery, the Contractor and the State will collaborate, when appropriate, to determine the action(s) necessary to rectify the compliance issue and determine when the action(s) must be completed. The action(s) and time line for completion will be documented in writing and agreed to by both parties. If extenuating circumstances arise that requires an extension to the time line, the Contractor must email a request to CDPHE SIM Health Systems Specialist and receive approval for a new due date. The State will oversee the completion/implementation of the action(s) to ensure time lines are met and the issue(s) is resolved. If the Contractor demonstrates inaction or disregard for the agreed upon compliance resolution plan, the State may exercise its rights under the provisions of this contract.