

Request for Proposals

Imperial County Asthma Community Linkages Project

Purpose

The Imperial County Public Health Department, in collaboration with the Local Health Authority Commission (the Commission), is soliciting proposals from interested entities to implement or enhance projects or programs designed to reduce the burden of asthma and improve the health and quality of life of Imperial County low-income and Medi-Cal eligible residents that have the condition.

Approximately \$500,000.00 is available for funding per year for a maximum of 3 years, starting in calendar year 2017. A total of 2-3 awards will be granted with a maximum award amount of \$250,000.00 per year. The project term will initiate January 02, 2017, and will run for 2-3 years, contingent upon available funding and performance. The goal of the Imperial County Asthma Community Linkages Project is to increase prevention, education, and early intervention services through policy, systems and/or environmental change strategies and interventions to help improve health outcomes for low income and Medi-Cal-eligible individuals. This project is responsive to the Local Health Authority Commission's health status improvement priorities identified in its 2015-2018 Strategic Plan. The Imperial County Public Health Department and Local Health Authority Commission support project models that use evidence-based or best practice approaches to build linkages among those treating asthmatic children and adults and that are led by Imperial County healthcare provider practices, community clinics and hospitals, as well as, local government entities, tribes and community organizations that partner with local medical providers.

Background

The Imperial County Public Health Department is a county government agency overseen by the Imperial County Board of Supervisors. It has served Imperial County since 1907, and its mission is to protect and promote the health of our county through organized efforts to assess needs, develop policies, and assure the provision of services. The department's role is to protect the community from disease and injury, and to improve the overall health status of residents by preventing illness, disability, premature death, and promoting good health practices.

The Local Health Authority Commission was established in June 2014 by the County of Imperial to advise and ensure that eligible Imperial County residents are provided healthcare services pursuant to Chapter 7 of Part 3 of Division 9 of the Welfare and Institutions Code. The mission of the Commission is to work with key stakeholders to advocate for access to comprehensive health care services for Medi-Cal beneficiaries, to promote the long term viability of "safety net" providers, to increase prevention, education, and early intervention services, and to monitor and publicize the performance of Medi-Cal managed care plans.

Asthma is a serious chronic illness that poses a significant burden on children and adults. It is a long-term, inflammatory disorder of the airways that can be accompanied by breathing problems that range in severity. The most common asthma symptoms include coughing, wheezing, shortness of breath, chest tightness, and rapid breathing. Symptoms may change daily and could get worse when exercising, early in the morning, or at night. Some of the most common asthma triggers include tobacco smoke, outdoor air pollution, dust mites, cockroach allergen, pets, mold, and smoke from burning wood or grass.

Asthma deaths have decreased over the last two decades, but the prevalence of asthma has increased in the last 35 years. Asthma affects individuals of every race, sex, and age, but it is imperative to note that there are greater morbidity and mortality disparities among the low income and minority populations. Children, women, people living below the Federal Poverty Level, and employees with

certain exposures in the workplace are some of the groups with higher asthma rates. According to California Breathing, approximately 23,000 children and adults in Imperial County have been diagnosed with asthma. Rates of asthma emergency department visits are high in Imperial County (77.9%) compared to California (49.8%), and so are asthma hospitalization rates with 16.7% compared to 8.6% statewide. Research shows that asthma can be caused or triggered by environmental exposures. According to the California Health Interview Survey (CHIS), it is estimated that 1,800-3,600 adults in Imperial County have asthma caused by work. It is also important to highlight that although national guidelines recommend that asthma patients be given a written self-management plan by health care providers, 35.9% of patients don't receive one.

Although asthma cannot be cured, there are diagnosis and treatment guidelines that are intended to help people with asthma live healthier and more active lives. As part of this Request for Proposals (RFP), the Public Health Department and the Commission intend to raise awareness about asthma as a major health issue and support asthma management programs that implement policy, systems and/or environmental strategies and interventions to address the growing problem of asthma in Imperial County. Funded proposals will be required to implement a set of quality asthma standards that are consistent with the National Asthma Education and Prevention Program's (NAEPP) [Guidelines for the Diagnosis and Management of Asthma \(Expert Panel Report-3\)](#), the NAEPP's [Key Clinical Activities for Quality Asthma Care](#), and the [Chronic Care Model](#). Information on effective practice- and research-based asthma programs are available online and include, but are not limited to the following: [A Systems-Based Approach for Creating and Sustaining Effective Community-Based Asthma Programs](#); [An Investment in America's Health](#); [Best Practices Compendium in Childhood Asthma Care](#); and [Yes We Can Children's Asthma Program](#).

Timetable

| | |
|---|----------------------|
| • Release of RFP Guidelines | September 01, 2016 |
| • Applicant Assistance Workshop | September 15, 2016 |
| • Letter of Intent to Apply Deadline | October 13, 2016 |
| • Request for Proposal Deadline | October 27, 2016 |
| • Evaluation and Scoring of Proposals | November 03-10, 2016 |
| • Notice of Intent to Make an Award | November 17, 2016 |
| • Protest/Appeal Period | November 18-29, 2016 |
| • Award Announcements | December 05, 2016 |
| • Projected Date for Commencement of Agreements | January 2, 2017 |

Applicant Assistance Workshop

An Applicant Assistance Workshop is scheduled on September 15, 2016, at the Imperial County Public Health Department's Training Center from 4:30 p.m. to 6:00 p.m. The purpose of this workshop is for potential applicants to ask questions about the proposal process. Applicant Assistance Workshop attendance is not mandatory, but is strongly recommended. The intent is not to provide applicants with individual assistance in completing their specific proposal; instead, it is to provide clarity and factual information regarding the overall application process.

In order to ensure a more productive and effective process, applicants are encouraged to submit questions via email about this RFP, prior to the workshop, no later than 4:00 p.m. on September 12, 2016. There will also be an opportunity to ask additional questions at the workshop. All questions and answers addressed during the Applicant Assistance Workshop will be available on the Imperial County Public Health Department's website (www.icphd.org) no later than September 22, 2016.

Please email the questions to janetteangulo@co.imperial.ca.us with subject line Imperial County Asthma Community Linkages Project RFP.

Letter of Intent to Apply

Although a Letter of Intent to Apply (LOI) is not required, applicants are highly encouraged to submit a LOI by 4:00 p.m. on October 13, 2016. The LOI is not binding and does not enter into the review of

applications, but the information that it contains will be especially helpful to the Imperial County Public Health Department in planning for the review of applications and estimating the potential workload.

If submitting a LOI, it should be on the agency's letterhead, and on one page, include the following:

- Title of the RFP;
- Name and address of the organization that will contract with the Imperial County Public Health Department to complete the project;
- Email address and telephone number of the primary contact for the project; and
- Brief description of the agency's experience and ability to provide services in Imperial County

Please submit the LOI to:

**Imperial County Purchasing Department
Attn: Imperial County Asthma Community Linkages Project - Letter of Intent
1125 Main Street, El Centro, CA 92243**

Funding Award and Contract Term

The maximum amount available per RFP award is \$250,000.00 per calendar year. Proposals priced higher than that amount will not be considered. Project terms will range from 2-3 years, and will be effective January 02, 2017. Projects will terminate 2-3 years from the effective date, contingent upon available funding and performance.

Eligibility

Entities eligible to apply include Imperial County healthcare provider practices, community clinics, and hospitals, as well as local government entities, tribes and community organizations that partner with local healthcare providers, community clinics or hospitals. Applicants are required to coordinate/collaborate with California Health & Wellness, and are highly encouraged to coordinate/collaborate with Molina Healthcare.

General Requirements

Applicants must align activities with the [Healthy People 2020 goal for Respiratory Diseases](#) goal and objectives which promote "respiratory health through better prevention, detection, treatment, and education efforts" and the [Imperial County Accountable Community for Health's \(ICACH\)](#) strategic priorities. Local objectives need to be written in the Specific, Measurable, Achievable, Relevant, and Time-based (SMART) format. Outcome metrics should also be clearly identified. Example metrics may include, but are not limited to the following:

- Asthma patients receiving primary care follow-up within the timeframe documented on emergency department (ED)/hospital discharge Asthma Action Plan
- Patient/family and provider satisfaction of asthma care
- Asthma-related ED utilization over 12-month period
- Asthma-related hospitalizations over 12-month period
- Asthma disparity communities ED/hospital utilization due to asthma over 12-month period

Additional outcome metrics may be required during the project term to more effectively measure progress in reducing the burden of asthma in our community and to measure return on investment for sustainability of efforts.

All proposed projects must focus on asthma and incorporate the following components: data analytics and capacity, evidence-based policy, systems and/or environmental change strategies and interventions, strategic planning, a communication plan, and evaluation. Strategies proposed should lead to positive health outcomes, such as improved asthma diagnosis, treatment, asthma medication adherence, and quality of life; and reduced asthma-related emergency room visits, hospital readmission rates, and/or environmental triggers for asthma. Strategies must also be responsive to

need, community-centered, focused on collective impact, and clinically connected. Applicants are required to include metrics in their proposal, such as the ones identified above or as they relate to the following: students/families residing in asthma disparity communities who receive asthma education and school asthma strategy development with school nurse; number of school days missed due to asthma; patients who receive a written asthma action plan and are evaluated for environmental triggers; Community Health Workers/Promotoras demonstrating asthma competency based on adopted training needs; and disparity community families who receive a family assessment with navigation to community services/programs.

Preference will be given to applicants that demonstrate the use of effective evidence-based approaches and that submit proposals that address one or more of the following topic areas: 1) self-management education with an environmental focus and community resource linkage component; 2) case management programs that include home visiting and/or Community Health Worker strategies that help improve the linkage between acute care services and primary care with a priority target of ED discharge linkage to primary care; and/or 3) increased quality of care for child asthma through the adoption and implementation of NAEPP training for asthma care across safety net providers. Applicants who opt to create a system that engages asthma patients and caregivers in self-management education or case management should utilize evidence-based programs or models. Applicants are required to coordinate/collaborate with California Health & Wellness, and highly encouraged to coordinate/collaborate with Molina Healthcare.

Applicants should follow standards that are consistent with the National Asthma Education and Prevention Program's (NAEPP) [Guidelines for the Diagnosis and Management of Asthma \(Expert Panel Report-3\)](#), the NAEPP's [Key Clinical Activities for Quality Asthma Care](#), and the [Chronic Care Model](#). Through the Chronic Care Model, essential elements of a healthcare system that encourage high-quality chronic disease care are identified. Such elements include the community, health system, self-management support, delivery system design, decision support and clinical information systems. Links to asthma information, current asthma guidelines, interventions strategies, and other resources are listed below under the Useful Resources section of the RFP.

Additionally, and in order to be considered for funding, applicants must:

- Be a responsive applicant whose proposal complies with all of the requirements of this RFP;
- Have the ability to meet minimum contractual requirements and enter into a formal agreement with the County of Imperial;
- Demonstrate the ability to provide services to low income and Medi-Cal eligible individuals in Imperial County; and
- Demonstrate the ability to work with an array of clinical and community partners and key stakeholders.

Proposal Format and Submission Requirements

All proposals must be typed in English and are limited to 8 pages for the narrative section. This page limit does not include the checklist, cover sheet, table of contents, cost proposal, exhibits, or attachments. Use 12-point font, single spacing, 1-inch margins, include a page number at the bottom of the page, and double-side the paper. Elaborate artwork and expensive paper and binding are neither necessary nor desired. Please use either a staple or binder clip to secure each of the proposals. If you choose to recreate any of the exhibits on a word processor or typewriter, please ensure that you recreate the original format exactly and that no information is omitted. Include letters of support and other supporting documentation in the appendix. Use the headings listed below and in that order.

- Proposal Checklist (Exhibit A)
- Cover Sheet (Exhibit B)
- Table of Contents
- Problem/Needs Statement
- Agency Profile and Qualifications
- Personnel

- Project Description
- Evaluation Design, Implementation, Analysis and Dissemination Plan
- Budget Proposal (Exhibit C)
- Appendix

The proposal must be submitted in the name of the agency that will contract with the County of Imperial to complete the project. The proposal must be signed by your agency's authorized agent.

All proposals are due to the Imperial County Purchasing Department by 4:00 p.m. on October 27, 2016. Please submit 1 original plus 6 complete copies either by mail or hand delivery to:

**Imperial County Purchasing Department
Attn: Imperial County Asthma Community Linkages Project RFP
1125 Main Street
El Centro, CA 92243**

Faxes, emails, or other electronic submissions will not be accepted. Proposals must be mailed or hand delivered to the Imperial County Purchasing Department. Applicants submitting proposals by hand delivery shall be provided with a receipt of delivery, upon request. All proposals received will be stamped with date and time received. Proposals submitted to any other location will not be accepted. Postmarks will not be accepted as meeting the deadline requirement. It is the sole responsibility of the applicant to ensure that the proposal is complete at the time of submission. Any proposal not meeting these RFP requirements will be recorded as non-compliant.

Proposal Narrative

The applicant must prepare a proposal which includes the items specified in the sections below and in the order that they are presented. The applicant must demonstrate a thorough understanding of- and knowledge to meet the requirements and show how it will comply with all applicable specifications included in the RFP.

Entities that are currently providing services in Imperial County or have provided services in the county in the past should not assume that evaluators will know your agency's qualifications and experience. All proposal narratives should be concisely and clearly written and provide sufficient information about the breadth and depth of the experience and qualifications of your agency to determine your agency's capacity to successfully execute the proposal. Everything that is important to know about your agency should be included in the narrative.

Section 1: Problem/Needs Statement (10 points)

Describe the particular need for the proposed service or project, what it hopes to achieve, individuals who will be served, and other evidence of need for the proposed project. Describe current gaps in services that will be filled and barriers that will be overcome. Show how the project will help meet the overarching Healthy People 2020 Respiratory Diseases goal and asthma objectives and how it will align with the [ICACH](#) asthma strategic priorities.

Section 2: Agency Profile and Qualifications (10 points)

Briefly describe your agency and how long it has been established. Give examples and evidence of its prior successes and current projects which show that it can accomplish the goals and objectives of the project. Describe your agency's experience working with asthma projects or programs and with community organizations and health care providers. As part of the appendix, include letters of commitment from the organizations you intend to work with on this project. If you are currently providing asthma services, describe how the proposed project will differ from your currently funded project(s). Describe the office facilities and location which will be used to perform the work proposed.

Section 3: Personnel (10 points)

Identify all staff who will work on this project and any experience they have had with similar projects. Include their experience working with diverse communities. Name the person who will be primarily responsible for achieving the goals of the proposed project and discuss the person's experience in managing similar projects. In the appendix, include all staff job descriptions, a copy of the

organizational chart, and, as applicable, copies of employee or business permits or licenses needed for the applicant to perform the proposed services.

Section 4: Project Description (35 points)

Describe the local objectives and how they support the Healthy People 2020 Respiratory Diseases goal and asthma objectives and the ICACH asthma strategic priorities. Include your agency's plan to help reduce the burden of asthma among low income and Medi-Cal-eligible individuals, and how you will utilize current relationships and/or build or expand relationships in order to gain access to that population. Identify the program model and specific policy, systems and/or environmental change strategies that your agency will use to accomplish the work. Describe how your agency will support the implementation of shared asthma quality improvement standards, and outline the steps your agency will take to ensure that there is no duplication of services among agencies providing asthma programs in Imperial County. Identify any challenges or barriers that your agency may face in implementing the project activities or services and how you plan to address them. Describe the sites your agency proposes to work with. Also, include how your agency will ensure that activities or services are conducted and how they will be delivered to low income and Medi-Cal-eligible individuals. Applicants are encouraged to create a logic model.

Section 5: Evaluation Design, Implementation, Analysis and Dissemination Plan (25 points)

Applicants must develop and/or adopt an evaluation plan that outlines the rationale, general content, scope and sequence of evaluation strategies that will be conducted as part of the program. The plan must include a list of short-, intermediate- and long-term outcome indicators, as well as current and corresponding baseline data for each indicator. Applicants are required to coordinate/collaborate with California Health & Wellness, and are highly encouraged to coordinate/collaborate with Molina Healthcare to obtain needed baseline data and to work on project efforts. If no baseline data is available, the applicant must describe the methods that will be employed to measure the project's success. The description must include the following: who will establish the baseline data, and how and by what date it will be established. Proposals must also include how outcomes will be accomplished and measured. Include a description of the information you will collect to evaluate the project, how it will be collected, and how you will analyze the information. Describe who will be responsible for collecting and analyzing the information. Finally, proposals must include a description of dissemination strategies to make evaluation results accessible to the community and relevant to stakeholders.

Applicants will be required to link to an identified, electronic data sharing network to ensure that patients receive an asthma action plan and follow-up with linkage to care. Describe the applicant's current infrastructure, capacity, and agreements for collecting, analyzing, and sharing financial, community and population-level data across providers and organizations or the process that will be undertaken to develop a data-sharing plan or mechanism across a broad range of data, such as community health, clinical and cost data to support the Imperial County Asthma Community Linkages Project. Applicants are encouraged to create a logic model. Logic models can help identify what to measure as part of the evaluation and it can help make the connection between the policy, systems and/or environmental change that are planned and how they relate to the outcomes.

Section 6: Budget Proposal (10 points. Not part of the 8 page narrative limit)

Complete the required budget template (Exhibit C) showing the amount and purpose of requested funds. Although not required, include if there is any in-kind and cash match available to the agency to support this project. Provide a justification of all items for the budget and explain how the item serves the objectives of the project. Proposals will be evaluated, in part, on how well the proposal maximizes expenditures. The budget forms are not part of the 8 page narrative limit.

Useful Resources

1. [National Institutes of Health: Guidelines for Diagnosis and Management of Asthma](#)
2. [Healthy People 2020 – Respiratory Diseases](#)
3. [CDC Asthma Interventions](#)
4. [American Academy of Allergy Asthma and Immunology](#)
5. [Strategic Plan for Asthma in California](#)
6. [California Breathing](#)
7. [Healthy Border 2020: A Prevention and Health Promotion Initiative](#)
8. [Imperial County Accountable Communities for Health](#)

Funding Decision

The funding decision will be made by an Evaluation Committee appointed by the Local Health Authority Commission. Proposals will be scored according to the points awarded in each section of the application. A scoring matrix will be used to evaluate the proposals. All proposals will be reviewed by the Evaluation Committee and a maximum of 2-3 awards will be made based on the committee's recommendation. The notice of intent to make awards will be posted beginning at 8 a.m. on November 17, 2016, at <http://www.icphd.com/news-media/>. Notice of intent to make awards and denials of awards will be mailed to all applicants after the notice of intent to make awards has been posted.

Appeals or objections to a rejection or award under this process must be submitted in writing within 5 business days of the postmarked notice of award or rejection. Such an appeal or objection must be specific, identifying the nature of the protest or objection, and stating all of the facts that form the basis for the appeal. You must also specify the reason(s) for the appeal or objection citing law, rule, regulation or procedures upon which the appeal is based. Any appeal or objection must be forwarded to the Imperial County Purchasing Department by certified or registered mail or delivered in person, with the applicant obtaining a receipt of delivery.

Rejection of Proposals

The Imperial County Local Health Authority Commission reserves the right to reject any or all proposals received in response to this RFP, or to cancel this RFP if it is deemed to be in the best interest of the Imperial County Local Health Authority Commission to do so. Failure to submit a complete proposal that follows the proposal format requested will disqualify the proposal. Absolutely neither supplements nor late proposals will be accepted.

Proposal Scoring

Responsive proposals will be scored as noted below. Each proposal must contain all information requested in the RFP, as well as any other information the Evaluation Committee will need to effectively evaluate the proposal.

| CATEGORY | TOTAL POSSIBLE SCORE |
|---|----------------------|
| 1. Problem/Needs Statement | 10 points |
| 2. Agency Profile and Qualification | 10 points |
| 3. Personnel | 10 points |
| 4. Project Description | 35 points |
| 5. Evaluation Design, Implementation, Analysis and Dissemination Plan | 25 points |
| 6. Budget Proposal (calendar years 2017, 2018, and if applicable, 2019) | 10 points |
| Total Possible Points | 100 points |

Administrative Requirements

The County of Imperial reserves the right to accept or reject any or all proposals submitted, or to request clarification or additional information or an alternative presentation of data from any applicant, at the County's sole discretion. Further, while every effort has been made to ensure the information presented in the RFP is accurate and thorough, the County accepts no responsibility or liability for any unintentional errors or omissions in this document.

All proposals become the property of the County, and as such, become public record available for review by the public upon request. The Government Code Sections 6250 et. seq., the Public Records Act, define public records as any writing containing information relating to the conduct of the public's business. This applies to proposals submitted pursuant to this RFP. The Public Records Act provides that public records shall be disclosed upon written request, and that any citizen has the right to inspect any public records, unless the document is exempted from the disclosure requirements. The County cannot represent or guarantee that any information submitted in response to the RFP will be confidential. If the County receives a request for any document submitted in response to this RFP, it will not assert any privileges that may exist on behalf of the person or business submitting the proposal. Rather, the County will notify the party whose proposal is being requested; it is the sole responsibility of that party to assert any applicable privileges or reasons why the document should not be produced, and to obtain a court order prohibiting disclosure.

Successful and unsuccessful applicants will receive a written notification of their proposals acceptance or rejection. The written notification will be sent to the name and address of the authorized officer of the firm provided in the proposal cover letter. The timing of written notification to applicants shall be entirely at the County's sole discretion.

Compliance with Nondiscrimination Laws

The law requires that persons or organizations that receive public funds may not unlawfully discriminate against persons for certain reasons. You must complete the attached Statement of Nondiscrimination Compliance Form (Exhibit D). The Statement of Compliance must accompany the proposal to comply with Government Code Section 12990 and California Administrative Code, Title 11, Division 4, Chapter 5.

Proof of Nonprofit Status/Articles of Incorporation

Nonprofit organizations must provide documentation evidencing tax-exempt status from either the Internal Revenue Service or the Franchise Tax Board. Applicants who are corporations (profit or non-profit) must submit a copy of the organization's Articles of Incorporation and evidence of official action by its governing body to submit a proposal. If an organization is in the process of being incorporated by the California Secretary of State, a proposal may be submitted contingent upon providing proof of the incorporation process.

Insurance Requirements

Evidence must be provided of the applicant's ability to obtain coverage in the required amounts during each contract year. The applicant must provide evidence of the ability and intent to maintain the required coverage and to name the Imperial County Public Health Department, Imperial County Local Health Authority Commission, and the County of Imperial as additional insured. A standard certificate of insurance describing the current insurance coverage issued by a broker or agent must be presented prior to the commencement date of the contract. A letter from an insurance company or broker confirming the fact that coverage can begin on the projected start date of the project is adequate for the purpose of submitting a proposal.

Other Requirements

As needed or required, applicants must provide copies of all permits, employee licenses or business, state and/or clinic licenses needed for the prospective contractor to perform the proposed services.

Inquiries

For questions or further information, contact:

County of Imperial
Attn: Janette Angulo
Subject line: Imperial County Asthma Community Linkages Project RFP
janetteangulo@co.imperial.ca.us

PROPOSAL CHECKLIST

This checklist includes the items that must be submitted in the proposal and in the order outlined below. This checklist is to ensure that a complete proposal is submitted. Complete the checklist and submit it as the first item.

| |
|---|
| Proposal Checklist (Exhibit A) |
| Proposal Cover Sheet (Exhibit B) |
| Table of Contents |
| Proposal Narrative Section 1 - Problem/Needs Statement Section 2 - Agency Profile and Qualifications Section 3 - Personnel Section 4 - Project Description Section 5 - Evaluation Design, Implementation, Analysis and Dissemination Plan Section 6 - Budget Proposal (calendar year 2017, 2018, and if applicable, 2019) |
| Budget (Exhibit C) |

APPENDIX

| |
|---|
| Job Descriptions |
| Organizational Chart |
| Letters of Commitment |
| Statement of Non-discrimination Compliance (Exhibit D) |
| Proof of Non-profit Status |
| Smoke-Free Environment Statement (Exhibit E) |
| As applicable, copies of all permits, employee licenses or business, state and/or clinic licenses needed for the prospective contractor to perform the proposed services. |
| Additional documents (e.g. letters of support) |

PROPOSAL COVER SHEET

Name of Agency: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Executive Director: _____

Primary Contact: _____ Title: _____

Telephone: _____ Email: _____

Project Title: _____

Summary of Proposed Project:

Amount Requested: \$ _____ Duration of the Project: _____

Business Tax ID Number: _____

I certify that all statements in this exhibit are true. This certification constitutes a warranty, the falsity of which shall entitle the County of Imperial to pursue any remedy authorized by law which shall include the right, at the option of the County, of declaring any contract made as a result hereof to be void. I agree to provide the County with any other information the County determines is necessary for the accurate determination of the person or agency's qualification to provide services.

I certify that _____ will comply with all requirements specified in the RFP which are applicable to the services which we wish to provide. I agree to the right of the County to audit financial and other records of said name/agency: _____.

Name of Applicant or Authorized Agent (please print)

Signature of Applicant or Authorized Agent

Date

BUDGET PROPOSAL

Project Year: _____

Section 1: Expense Summary

| Expense Categories | Total of all Proposed Costs |
|--------------------|-----------------------------|
| Salary | |
| Fringe | |
| Operating | |
| Equipment | |
| Travel | |
| Indirect Costs | |
| Other (specify) | |
| | |
| | |
| | |
| TOTALS | \$ |

Section 2A: Budget Justification

Provide a justification of these expenses listed in Section 1. Use additional sheets if necessary.

| Salary and Fringe (List all positions to be funded through this project) | | | | |
|--|-----------|--------|--------|------------------|
| Title | % of Time | Salary | Fringe | Amount Requested |
| | | | | |
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| | | | | |
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| | | | | |

Section 2A: Budget Justification Continued

Provide a justification of these expenses listed in Section 1. Use additional sheets if necessary.

| Operating Expenses (Include a description of the types of supplies and equipment under \$500.) | | |
|---|----------------------|-------------------------|
| Item | Justification | Amount Requested |
| | | |
| | | |
| | | |

| Equipment Expenses (List equipment over \$500) | | |
|---|----------------------|-------------------------|
| Item | Justification | Amount Requested |
| | | |
| | | |

| Travel Expenses (Mileage, lodging, per diem, etc.) | | |
|---|----------------------|-------------------------|
| Item | Justification | Amount Requested |
| | | |
| | | |

| Indirect Expenses (Include the rate and justification of indirect expenses) | | |
|--|----------------------|-------------------------|
| Item | Justification | Amount Requested |
| | | |

| Other Expenses (Specify) | | |
|---------------------------------|----------------------|-------------------------|
| Item | Justification | Amount Requested |
| | | |
| | | |
| | | |

STATEMENT OF NONDISCRIMINATION COMPLIANCE

Prospective Contractor agrees that all persons employed by Prospective Contractor shall be treated equally by Prospective Contractor without regard to or because of race, color, religion, ancestry, national origin, handicap, gender, marital status, age, medical condition or sexual orientation and in compliance with all anti-discrimination laws of the United States of America and the State of California. Prospective Contractor agrees that it shall include in its written contracts with any subcontractors a pledge by the subcontractor that the subcontractor will not engage in any unlawful discrimination. Prospective Contractor shall, if requested to do so by the County of Imperial, certify that Prospective Contractor has not discriminated against applicants, employees or subcontractors because of their membership in a protected class during the performance of this Agreement. The County of Imperial hereby notifies Prospective Contractor that Government Code Section 12990 and California Administrative Code, Title II, Division 4, Chapter 5 apply to this Agreement and are incorporated herein by this reference with the same force and effect as if those laws were specifically set out herein and Prospective Contractor agrees to comply with said statute and regulation. "Prospective Contractor" hereby certifies, unless specifically exempted, compliance with Government Code Section 12990 and California Administrative Code, Title II, Division 4, Chapter 5, in matters relating to the development, implementation and maintenance of a nondiscrimination program.

I, _____, hereby swear that I am duly authorized to legally bind the Prospective Contractor to the above-described certification. I am fully aware that this certification executed on this _____ day of _____ in the year _____ in the County of Imperial is made under the penalty of perjury under the laws of the State of California.

Name of Authorized Agent (please print)

Title

Signature of Authorized Agent

Date

SMOKE-FREE ENVIRONMENT STATEMENT

As a material condition of the contract, the Prospective Contractor agrees that the Prospective Contractor and the Prospective Contractor’s employees, while receiving funding from the County of Imperial:

1. Shall not use/possess tobacco products while using the Prospective Contractor’s property e.g. vehicle, equipment;
2. Shall not sell, offer or provide tobacco products on Prospective Contractor’s premises;
3. The Prospective Contractor will participate in County of Imperial sponsored in-service trainings on tobacco education and cessation and will have tobacco education and cessation materials visibly available and accessible to clients participating in activities funded by the County of Imperial.
4. Prospective Contractor assures that the Prospective Contractor and its employees have no current business association or relationship with the tobacco industry; and
5. The County of Imperial may terminate for default or breach of this Contract and any other Contract the Prospective Contractor has with the County of Imperial, if the Prospective Contractor or Prospective Contractor’s employees, are determined by the contracting officer, not to be in compliance with the conditions set forth in this RFP.

I, _____, certify that I will comply with all requirements specified herein in recognition of individual rights to work in a safe, healthy and productive environment.

Name of Authorized Agent (please print)

Title

Signature of Authorized Agent

Date