



COUNTY OF HUMBOLDT

AGENDA ITEM NO.  
C-22

For the meeting of: June 23, 2015

Date: April 22, 2015  
To: Board of Supervisors *SP for*  
From: Phillip R. Crandall, Director  
Department of Health and Human Services-Social Services  
Subject: Authorization for the Social Services Director to sign Agreements with Community Based Organizations for Participation with CalFresh Outreach and Support Activities

RECOMMENDATION(S):

That the Board of Supervisors:

- 1. Approves the attached form Agreement for Community Based Organizations participating with the Department of Health and Human Services (DHHS) for CalFresh Outreach and Support activities each to not exceed \$48,000 for fiscal year 2015-16;
- 2. Authorizes the Director of DHHS- Social Services to sign individual agreements for CalFresh Outreach and Support activities on behalf of the Board of Supervisors substantially in the form of the attached sample Agreement upon proof of insurance; and
- 3. Directs the Clerk of the Board to return a certified copy of the board order to the DHHS-Contract Unit.

SOURCE OF FUNDING:

Social Services Fund 1160

DISCUSSION:

Beginning in early 2012, the Board approved the execution of agreements related to California's Food

Prepared by Mandy Gentle-Martin

CAO Approval *Amy Olsen*

REVIEW:

Auditor *he*

County Counsel *SP*

Personnel

Risk Manager *DJ*

Other

TYPE OF ITEM:

- Consent
- Departmental
- Public Hearing
- Other

BOARD OF SUPERVISORS, COUNTY OF HUMBOLDT

Upon motion of Supervisor *Bass* Seconded by Supervisor *Sundberg*

Ayes *Sundberg, Fennell, Bohn, Bass*

Nays

Abstain

Absent *Lorelace*

PREVIOUS ACTION/REFERRAL:

Board Order No. C-13, C-6, C-31

and carried by those members present, the Board hereby approves the recommended action contained in this Board report.

Meeting of: 2/14/12, 7/09/13, 06/24/14

Dated: *June 23, 2015*

By:

*Kathy Hayes*  
Kathy Hayes, Clerk of the Board

Stamp program, now called CalFresh. On February 14, 2012 (item C-13), July 9, 2013 (item C-6) and again on June 24, 2014 (C-31) the Board approved CalFresh Outreach agreements with Community Based Organizations (CBOs) for amounts of \$48,000 or less. All agreements focused on CalFresh outreach activities and enrollment assistance. They also could incorporate nutrition education, food security, or activities related to wellness and obesity prevention. Approximately 30 to 40 contracts have been signed each fiscal year under this program. With approval of this form Agreement, DHHS will continue to partner with CBOs to expand and improve CalFresh Outreach, to increase application assistance in community settings, and to expand enrollment and retention support at the community level.

The California Department of Social Services (CDSS) administers all United States Department of Agriculture (USDA) Supplemental Nutrition Assistance Program (SNAP) funds. Focusing on the important role SNAP plays in access to nutrition and the relation of nutrition to overall wellness, CDSS renamed and re-branded food stamps as CalFresh in California. Beyond the name and image changes, CDSS also made significant program changes to increase CalFresh use by reducing enrollment and retention barriers. USDA and CDSS continue to encourage counties to work with community partners to help reach and inform community members who might be eligible for CalFresh benefits. Partnering with community based organizations is not only consistent with DHHS's general approach and strategic plan; it is key to DHHS's goal of providing integrated, place-based, and holistic services.

Program changes and the economic downturn have increased the number of Humboldt County residents eligible for nutrition assistance. These factors, internal changes, and outreach partnerships with community-based organizations have increased CalFresh enrollment within the County, State and nation. While enrollment has increased there is still room for improvement.

In addition to outreach, CDSS and DHHS are focused on two additional factors related to program success: enrollment support and retention. Approximately half of all applications are denied each month, largely due to missed interviews and missing verification documents. Similarly, each month a significant number of beneficiaries fall off the program and re-apply. With the Service Center and front lobby changes, DHHS is significantly improving its customer service internally. DHHS has engaged community partners to assist with application documentation support and assistance with retention to further improve customer service to our mutual clients.

Execution of this form Agreement will allow DHHS to continue to foster relationships with partners for outreach, and enrollment and retention support. Increasing CalFresh utilization by eligible households promotes a safe, healthy, economically vibrant community. Outreach and enrollment raises awareness of the nutrition benefits of the CalFresh program; promotes healthy food choices; reduces hunger in seniors and children; and helps to dispel program myths and misperceptions.

Therefore, DHHS recommends that the Board approves the attached form Agreement for Community Based Organizations participating with the Department of Health and Human Services (DHHS) for CalFresh Outreach and Support activities each to not exceed \$48,000 for fiscal year 2015-16 and authorizes the Director of DHHS-Social Services to sign individual agreements with Community Based Organizations for CalFresh Outreach and Support activities.

#### FINANCIAL IMPACT:

Funds have been appropriated by the State for this purpose and use in Humboldt County. If this allocation is not fully utilized it could reduce future fiscal year (FY) allocations and thus impact the ability of DHHS to reduce hunger in Humboldt County.

Each agreement shall not exceed \$48,000 and \$1,500,000.00 has been budgeted in the proposed fiscal year 2015-16 Budget in fund 1160, Budget Unit 511. There will be no impact to the County General Fund.

Approving the attached form Agreement supports the Board's Strategic Framework by creating opportunities for improved health, safety, and protecting vulnerable populations.

OTHER AGENCY INVOLVEMENT:

Community Based Organizations

ALTERNATIVES TO STAFF RECOMMENDATIONS:

The Board can choose not to approve the attached form Agreement for CalFresh Outreach and Support activities with Community Based Organizations. This is not recommended as the Department of Health and Human Services asserts this funding is important to the goal of increasing CalFresh participation and thereby improving the health and economic stability of children, families and other individuals in Humboldt County.

ATTACHMENTS:

Attachment 1: Form Agreement for CalFresh Outreach and Support activities with Community Based Organizations for fiscal year 2015-16

## AGREEMENT FOR SERVICES

This Agreement is made and entered into this \_\_\_\_\_ day of \_\_\_\_\_, 2015, by and between the County of Humboldt (COUNTY), a political subdivision of the State of California, and [insert name of CONTRACTOR] (hereinafter, CONTRACTOR) a [insert organizational status i.e. corporation, partnership, sole proprietor, Limited Liability Company].

### RECITALS

WHEREAS, through the Department of Health and Human Services (DHHS) desires to provide increased utilization of the CalFresh benefit by eligible households and thereby improve the health and economic stability of families and individuals in Humboldt County; and

WHEREAS, CONTRACTOR offers these services; and

WHEREAS, COUNTY wishes to obtain services from CONTRACTOR on behalf of itself and/or clients.

NOW, THEREFORE, the parties hereto mutually agree as follows:

1. SCOPE OF WORK

CONTRACTOR agrees to provide services described in Exhibit A, consisting of two (2) pages, which is attached hereto and incorporated by reference. Said exhibit describes the services to be performed by CONTRACTOR under this Agreement.

2. TERM

The term of this Agreement shall be from [Month/day/year] and shall continue through [Month/day/year], unless sooner terminated or modified as provided herein.

3. COMPENSATION

CONTRACTOR agrees that the total maximum compensation cap for services performed and costs incurred under this Agreement is [spell out dollar amount, e.g., Twenty-Five Thousand] Dollars (\$\_\_\_\_\_), as set forth in the Budget attached hereto as Exhibit B, consisting of four (4) pages, and incorporated by reference, and CONTRACTOR agrees to perform any services required by this Agreement for an amount not to exceed such maximum compensation cap. All costs incurred above the maximum compensation cap will be the responsibility of the CONTRACTOR. Under no circumstances shall the maximum compensation cap exceed the amount of Forty Eight Thousand Dollars (\$48,000).

4. PAYMENT

CONTRACTOR will submit an itemized invoice to the COUNTY monthly or no less than quarterly commencing upon final execution of Agreement by COUNTY. CONTRACTOR shall submit a final project report, including all expenditures within thirty (30) days of project completion or within thirty (30) days of termination of this Agreement.

The itemized invoices due to the COUNTY, shall itemize costs for activities that are consistent with the services provided by CONTRACTOR as of the invoice date, described in Exhibit A, attached hereto and incorporated by references. Payment for services performed will be made within thirty (30) days after receipt of the invoice. A sample itemized invoice form is attached hereto as page 4 of Exhibit B.

5. BOOK OF RECORD AND AUDIT PROVISIONS:

- A. CONTRACTOR agrees to coordinate with COUNTY in the performance of this Agreement, timely preparation and maintenance of accurate and complete financial and performance records for a minimum of five (5) years from the date of final payment under this Agreement or until all pending county, state, and federal audits are completed, whichever is later. The books and records shall be original entry books with a general ledger itemizing all debits and credits for the work. In addition CONTRACTOR shall maintain detailed payroll records. CONTRACTOR agrees to maintain such records locally and make them available for inspection by county, state and federal representatives, during normal business hours, upon five (5) working days notice.
- B. CONTRACTOR will permit county, state and/or federal government to audit all books, accounts or records relating to this Agreement for the purpose of compliance with applicable audit requirements relative to this Agreement. CONTRACTOR shall provide the county, state or federal governments with any relevant information required and shall permit access to its premises, during normal business hours, upon five (5) days notice.
- C. In the event of an audit exception or exceptions, the party responsible for not meeting the program requirement or requirements shall be responsible for the deficiency and for the cost of the audit. If CONTRACTOR is the party responsible for the deficiency, the cost of the audit and the deficiency shall be paid by CONTRACTOR within thirty (30) days of notice.
- D. CONTRACTOR'S rights and obligations under this provision shall continue after termination of the Agreement.

6. REPORTING:

CONTRACTOR agrees to provide COUNTY with any reports that may be required by county, State or Federal agencies for compliance with this Agreement.

7. MONITORING:

CONTRACTOR agrees to extend to DHHS Director or designees, the right to review and monitor records, programs or procedures, at any time, in regards to clients, as well as the overall operation of CONTRACTOR'S programs in order to ensure compliance with the terms and conditions of this Agreement.

8. RESTRICTIONS, LIMITATIONS OR CONDITIONS

This Agreement is subject to any additional restrictions, limitations, or conditions enacted by the federal and/or state governments that may affect the provisions, terms or funding of this Agreement.

9. INSURANCE

A. This contract/agreement shall not be executed by COUNTY and the CONTRACTOR is not entitled to any rights, unless certificates of insurances, or other sufficient proof that the following provisions have been complied with, and such certificate(s) are filed with the Clerk of the Humboldt County Board of Supervisors.

B. Without limiting CONTRACTOR'S indemnification provided herein, CONTRACTOR shall, and shall require any of its subcontractors to, take out and maintain, throughout the period of this Agreement, the following policies of insurance placed with insurers with a current A.M. Bests rating of no less than A:VII, or its equivalent, against injury/death to persons or damage to property which may arise from or in connection with the activities hereunder of CONTRACTOR, its agents, employees or subcontractors:

1. Comprehensive or Commercial General Liability Insurance at least as broad as Insurance Services Office Commercial General Liability coverage (occurrence form CG 0001), in an amount of One Million Dollars (\$1,000,000) per occurrence for any one incident, including, personal injury, death and property damage. If a general aggregate limit is used, either the general aggregate limit shall apply separately to this project or the general aggregate shall be twice the required occurrence limit.

2. Automobile/Motor liability Insurance with a limit of liability of not less than One Million Dollars (\$1,000,000) combined single limit coverage. Such insurance shall include coverage of all "owned", "hired", and "non owned" vehicles or coverage for "any auto".

3. Workers Compensation Insurance

Workers' Compensation and Employer's Liability insurance meeting statutory limits of the California Labor Code which policy shall contain or be endorsed to contain a waiver of subrogation against County, its officers, agents, and employees and provide for thirty (30) days prior written notice in the event of cancellation.

If Contractor has no employees, Contractor may sign and file the following certification in lieu of insurance:

*"I am aware of the provisions of the California Labor Code Section 3700 which requires every employer to be insured against liability for workers' compensation or to undertake self-insurance in accordance with the provisions of that code, and I will comply with provisions of that code before commencing with and during the performance of the work of this contract."*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

4. Insurance Notices:  
County of Humboldt  
Attn: Risk Management  
825 5<sup>th</sup> Street, Room 112  
Eureka, CA 95501

C. Special Insurance Requirements. Said policies shall unless otherwise specified herein be endorsed with, the following provisions:

1. The Comprehensive General Liability Policy shall provide that the COUNTY, its officers, officials, employees and volunteers, are covered as additional insured for liability arising out of the operations performed by or on behalf of CONTRACTOR. The coverage shall contain no special limitations on the scope of protection afforded to the COUNTY, its officers, officials, employees, and volunteers. Said policy shall also contain a provision stating that such coverage:

a. Includes contractual liability.

- b. Does not contain exclusions as to loss or damage to property caused by explosion or resulting from collapse of buildings or structures or damage to property underground, commonly referred to "XCU Hazards".
  - c. Is primary insurance as regards to County of Humboldt.
  - d. Does not contain a pro-rata, excess only, and/or escape clause.
  - e. Contains a cross liability, severability of interest or separation of insureds clause.
2. The policies shall not be canceled, non-renewed or materially reduced in coverage without thirty (30) days prior written notice being provided to COUNTY and in accordance with the Notice provisions set forth under Section 23. It is further understood that CONTRACTOR shall not terminate such coverage until it provides COUNTY with proof satisfactory to COUNTY that equal or better insurance has been secured and is in place.
  3. The inclusion of more than one insured shall not operate to impair the rights of one insured against another insured, and the coverage afforded shall apply as though separate policies had been issued to each insured, but the inclusion of more than one insured shall not operate to increase the limits of the insurer's liability.
  4. For claims related to this project, the CONTRACTOR'S insurance is primary coverage to the COUNTY, and any insurance or self-insurance programs maintained by the COUNTY are excess to CONTRACTOR'S insurance and will not be called upon to contribute with it.
  5. Any failure to comply with reporting or other provisions of the Parties, including breach of warranties, shall not affect coverage provided to COUNTY, its officers, officials, employees, and volunteers.
  6. CONTRACTOR shall furnish COUNTY with certificates and original endorsements effecting the required coverage prior to execution of this Agreement by COUNTY. The endorsements shall be on forms as approved by the COUNTY'S Risk Manager or COUNTY Counsel. Any deductible or self-insured retention over One Hundred Thousand Dollars (\$100,000) shall be disclosed to and approved by COUNTY. If CONTRACTOR does not keep all required policies in full force and effect, COUNTY may, in addition to other remedies under this Agreement, take out the necessary insurance, and CONTRACTOR agrees to pay the cost of said insurance. COUNTY is also hereby authorized with the discretion to deduct



the cost thereof from the monies owed to CONTRACTOR under this Agreement.

7. COUNTY is to be notified immediately if twenty five percent (25%) or more of any required insurance aggregate limit is encumbered and CONTRACTOR shall be required to purchase additional coverage to meet the aggregate limits set forth above.

10. HOLD HARMLESS/INDEMNIFICATION CLAUSE

- A. CONTRACTOR shall hold harmless, defend and indemnify the COUNTY and its officers, officials, employees, volunteers and elective and appointive boards from and against any and all liability loss, all claims, losses, damages, including damage expense, costs (including without limitation, costs and fees of litigation) of every nature arising out of or in connection with CONTRACTOR'S performance of work hereunder or its failure to comply with any of its obligations contained in the agreement, except such loss or damage which was caused by the sole negligence or willful misconduct of the COUNTY. This indemnification shall extend to claims, losses, damages, injury, and liability for injuries occurring after completion of CONTRACTOR'S services, as well as during the progress of rendering such services.
- B. Acceptance of insurance required by this Agreement does not relieve CONTRACTOR from liability under this indemnification clause. This indemnification clause shall apply to all damages or claims for damages suffered by CONTRACTOR'S operations regardless if any insurance is applicable or not.

11. RELATIONSHIP OF PARTIES

CONTRACTOR shall perform all work and services as described herein as an independent contractor. No person performing any of the work or services described herein shall be considered an officer, agent, servant, or employee of COUNTY, nor shall any such person be entitled to any benefits, including but not limited to Workers' Compensation Benefits, available or granted to employees of COUNTY. CONTRACTOR shall be solely responsible for the acts or omissions of its officers, agents, employees, and subcontractors. Nothing herein shall be construed as creating a partnership or joint venture between COUNTY and CONTRACTOR.

12. ASSIGNMENT

Neither party shall assign its obligations under this Agreement without the prior written consent of the other. Any assignment by CONTRACTOR in violation of this provision shall be void, and shall be cause for immediate termination of this Agreement.

13. SUBCONTRACTING

CONTRACTOR shall not subcontract any portion of the work required by this Agreement without prior written approval of COUNTY.

14. LICENSING

CONTRACTOR shall maintain the appropriate licenses throughout the life of this Agreement.

15. TITLE

It is understood that any and all documents, information, and reports concerning this project prepared by and/or submitted by CONTRACTOR shall be the property of COUNTY. CONTRACTOR may retain reproducible copies of drawings and copies of other documents. In the event of termination of this Agreement, for any reason whatsoever, CONTRACTOR shall promptly turn over all information, writing and documents to COUNTY without exception or reservation.

16. NONDISCRIMINATORY EMPLOYMENT

In connection with the execution of this Agreement, CONTRACTOR shall not discriminate against any employee or applicant for employment because of race, religion or religious creed, color, age (over 40), sex (including gender identity and expression, pregnancy, childbirth and related medical conditions), sexual orientation ( including heterosexuality, homosexuality and bisexuality), national origin, ancestry, marital status, medical condition (including cancer and genetic characteristics) mental or physical disability (including HIV status and AIDS), military service, or any other classifications protected by federal, state, or local laws or ordinances. This policy does not require the employment of unqualified persons.

CONTRACTOR further assures that it will abide by the provisions of Title VI and Title VII of the Civil Rights Act of 1974, Section 504 of the Rehabilitation Act of 1973, as amended, the Age Discrimination Act of 1975, the Welfare and Institutions Code Section 10000, CDSS MPP Division 21, and other applicable federal and state laws to ensure that employment practices are non-discriminatory. CONTRACTOR shall comply with United States Executive Order 11246, entitled "Equal Employment Opportunity." United States Executive Order 11375 and supplemented in 45 CFR, Part 60, amends this. Practices in hiring, compensation, benefits and firing are among the employment practices subject to this requirement.

17. NONDISCRIMINATORY DELIVERY OF SOCIAL SERVICES

CONTRACTOR agrees that it will comply with Title VI of the Civil Rights Act of 1964 as amended; Section 504 of the Rehabilitation Act of 1973 as amended; Title II of the Americans With Disabilities Act of 1990, as

amended; the Age Discrimination Act of 1972, as amended; the Food Stamp Act of 1977, as amended; California Civil Code, Section 51 et seq., as amended; California Government Code, Section 4450 et seq., as amended and other applicable federal and state laws and their implementing regulations, all as outlined in California DSS Manual Division 21. The CONTRACTOR agrees to ensure that the administration of public assistance and social services programs are nondiscriminatory, and that no person shall, because of race, religion or religious creed, color, age (over 40), sex (including gender identity and expression, pregnancy, childbirth and related medical conditions), sexual orientation (including heterosexuality, homosexuality and bisexuality), national origin, ancestry, marital status, medical condition (including cancer and genetic characteristics) mental or physical disability (including HIV status and AIDS), military service, or any other classifications protected by federal, state, or local laws or ordinances be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal or State financial assistance.

The COUNTY reserves the right to monitor the CONTRACTOR for compliance with the requirements of this paragraph and Division 21.

18. ENTIRETY OF CONTRACT

This Agreement shall constitute the entire Agreement between the parties relating to the subject matter of this Agreement, and shall supersede any previous agreements, promises, representation, understanding and negotiation, whether oral or written, concerning the same subject matter. Any and all acts which may have already been consummated pursuant to the terms which are embodied in this Agreement are hereby ratified.

19. AMENDMENT

No addition to, or alteration of, the terms of this Agreement shall be valid unless made in writing and signed by the parties hereto.

20. TERMINATION OR REDUCTION FOR LACK OF FUNDING

COUNTY'S obligations under this Agreement are contingent upon the availability of County, State and/or Federal funds. In the event such funding is terminated or reduced, COUNTY shall, at its sole discretion, determine whether this Agreement shall be terminated or COUNTY'S maximum obligation reduced. COUNTY shall provide CONTRACTOR seven (7) days written notice of its intent to terminate this Agreement or its intent to reduce its maximum obligation under this Agreement.

21. TERMINATION FOR CAUSE

If, in the opinion of COUNTY, CONTRACTOR fails to perform the services required under this Agreement within the time limits specified herein, or

otherwise fails to comply with the terms of this Agreement, or violates any ordinance, regulation, or other law which applies to its performance herein, COUNTY may terminate this Agreement immediately, upon notice. In such event, COUNTY shall pay to CONTRACTOR an equitable portion of the total remuneration as compensation for the portion of the work deemed acceptable by COUNTY, less the amount of any damages sustained by COUNTY as a result of CONTRACTOR'S breach of this Agreement. COUNTY shall be entitled to take possession of all studies, drawings, computations, specifications and reports insofar as they are complete and acceptable to COUNTY.

22. TERMINATION FOR CONVENIENCE

This agreement may be terminated by either party without cause as follows:

- A. At any time and for any reason, upon sixty (60) days written notice to COUNTY, CONTRACTOR may terminate this Agreement and receive payment only for those services provided as of the date when termination is effective.

Notice may be given by delivering a copy of said notice to COUNTY personally, or by mailing a copy of said notice to COUNTY. If mailed, notice shall be deemed received two days after deposit in the United States mail, postage prepaid, and addressed as set forth in Paragraph 23, Notices.

- B. At any time and for any reason, upon thirty (30) days written notice to CONTRACTOR, COUNTY may terminate this Agreement and pay only for those services rendered as of the date when termination is effective.

Notice may be given by delivering a copy of said notice to CONTRACTOR personally, or by mailing a copy of said notice to CONTRACTOR. If mailed, notice shall be deemed received two days after deposit in the United States mail, postage prepaid, and addressed as set forth in Paragraph 24, Notices.

23. NOTICES

Notices shall be given to COUNTY at the following address:

Attn: Director  
Humboldt County Department of Health and Human  
Services Social Services Branch  
929 Koster Street  
Eureka, CA 95501

Notices shall be given to CONTRACTOR at the following address:

Name  
Organization  
Street  
City, State, Zipcode

Notice shall be in writing and may be given by delivering a copy of said notice to CONTRACTOR or COUNTY personally, or by mailing a copy of said notice to CONTRACTOR or COUNTY. If mailed, notices shall be deemed received two (2) days after their deposit in the United States mail, postage prepaid and addressed as set forth above.

24. NUCLEAR FREE HUMBOLDT COUNTY ORDINANCE COMPLIANCE

CONTRACTOR certifies by its signature below that CONTRACTOR is not a Nuclear Weapons Contractor, in that CONTRACTOR is not knowingly or intentionally engaged in the research, development, production, or testing of nuclear warheads, nuclear weapon systems, or nuclear weapon components as defined by the Nuclear Free Humboldt County Ordinance. CONTRACTOR agrees to notify COUNTY immediately if it becomes a nuclear weapons contractor as defined above. COUNTY may immediately terminate this Agreement if it determines that the foregoing certification is false or if CONTRACTOR becomes a nuclear weapons contractor.

25. COMPLIANCE WITH APPLICABLE LAWS

CONTRACTOR shall comply with any and all applicable federal, state and local laws affecting the services covered by this Agreement, including, but not limited to, the Americans with Disabilities Act.

26. STANDARD OF PRACTICE

CONTRACTOR warrants that CONTRACTOR has the degree of learning and skill ordinarily possessed by reputable professionals practicing in similar localities in the same profession and under similar circumstances. CONTRACTOR'S duty is to exercise such care, skill and diligence as professionals engaged in the same profession ordinarily exercise under like circumstances.

27. JURISDICTION AND VENUE

This Agreement shall be construed in accordance with the laws of the State of California. Any dispute arising hereunder or relating to this Agreement shall be litigated in the State of California and venue shall lie in the County of Humboldt unless transferred by court order pursuant to Code of Civil Procedure Sections 394 and 395.

28. BINDING EFFECT

All provisions of this Agreement shall be fully binding upon, and inure to the benefit of, the parties and to each of their heirs, executors, administrators, successors and assigns.

29. SEVERABILITY

If any provision of this Agreement, or any portion thereof, is found by any court of competent jurisdiction to be unenforceable or invalid for any reason, such provision shall be severable and shall not in any way impair the enforceability of any other provision of this Agreement.

30. NO WAIVER

The waiver by either party of any breach or violation of any requirement of this Agreement shall not be deemed to be a waiver of any such breach in the future, or of the breach of any other requirement of this Agreement.

In no event shall any payment by COUNTY constitute a waiver of any breach of this Agreement or any default which may then exist on the part of the CONTRACTOR. Neither shall such payment impair or prejudice any remedy available to COUNTY with respect to the breach or default. COUNTY shall have the right to demand of the CONTRACTOR under this Agreement, which in the judgment of COUNTY were not expended in accordance with the terms of this Agreement. The CONTRACTOR shall promptly refund any such funds upon demand.

31. INTERPRETATIONS

As both parties jointly prepared this Agreement, the language in all parts of this Agreement shall be construed, in all cases, according to its fair meaning, and not for or against either party hereto.

32. ATTORNEYS' FEES

If either party shall commence any legal action or proceeding, including an action for declaratory relief, against the other by reason of the alleged failure of the other to perform or keep any provision of this Agreement to be performed or kept, the party prevailing in said action or proceeding shall be entitled to recover court costs and reasonable attorneys' fees (including reasonable value of services rendered by County Counsel) to be fixed by the court, and such recovery shall include court costs and attorneys' fees (including reasonable value of services rendered by County Counsel) on appeal, if any. As used herein, the party prevailing means the party who dismisses an action or proceeding in exchange for payment of substantially all sums allegedly due, performance of provisions allegedly breached, or other considerations substantially equal to the relief sought by said party, as well as the party in whose favor final judgment is rendered.

33. CONFIDENTIAL INFORMATION

In the performance of this Agreement, CONTRACTOR may receive confidential information. Said information may be confidential under the laws of California, including but not limited to Welfare and Institutions Code Sections 827, 10850; Division 19 California Department of Social Services Manual of Policies and Procedures, Confidentiality of Information; and/or the laws of the United States. CONTRACTOR shall comply with all laws regarding confidentiality and shall advise and require all subcontractors to comply with the laws of confidentiality.

34. MEDIA RELEASE

All press releases and informational material related to this Agreement shall receive approval from COUNTY prior to being released to the media (television, radio, newspapers, Internet). In addition, CONTRACTOR shall inform COUNTY of requests for interviews by media related to this Agreement prior to such interviews taking place. COUNTY reserves the right to have a representative present at such interviews. All notices required by this provision shall be given to the Director of the County Department of Health and Human Services or his designee.

35. REFERENCE TO LAWS AND RULES

In the event any law, regulation, or policy referred to in this Agreement is amended during the term hereof, the parties agree to comply with the amended provision as of the effective date of such amendment.

36. AUTHORITY TO EXECUTE:

Each person executing this Agreement represents and warrants that he or she is duly authorized and has legal authority to execute and deliver this Agreement. Each party represents and warrants to the other that the execution and delivery of this Agreement and the performance of such party's obligations hereunder have been duly authorized.

37. FAITH-BASED ORGANIZATIONS: (as applicable)

CONTRACTOR shall not engage in inherently religious activities (such as worship, religious instruction, or proselytization), or otherwise exert any religious influence whatsoever, as part of the programs or services funded under this Agreement. If CONTRACTOR conducts such activities, the activities must be offered separately, in time and location, from the programs or services funded under this Agreement, and participation must be voluntary with respect to any individual(s) who have been referred to CONTRACTOR by COUNTY under the terms of the Agreement.

38. LIMITED WAIVER OF TRIBAL SOVEREIGN IMMUNITY: (as applicable)

CONTRACTOR does not waive its sovereign immunity or consent to suit in any court except as expressly stated in this section and subject to the limitations and considerations stated in this section.

- A. Limited Waiver and Consent to Suit. CONTRACTOR waives its sovereign immunity and consents to suit as to "Covered Claims" as defined in Section (B)(1) below. CONTRACTOR's governing body has executed a formal Resolution of Limited Waiver of Sovereign Immunity which is attached hereto as Exhibit [ ].
- B. Conditions and Limitations. This waiver and consent is subject to the following conditions and limitations:
1. Covered Claims. This waiver and consent only applies to claims by COUNTY that CONTRACTOR has violated any provision of this AGREEMENT or that seeks to resolve a dispute concerning the interpretation, implementation or enforcement of this AGREEMENT. It does not include tort claims, claims for exemplary or punitive damages, or any other claims not sounding in contract.
  2. Covered Claimants. This waiver and consent only applies to COUNTY, and not to any other person, entity, including any commercial or governmental entity, or group.
  3. Covered Courts. This consent to suit only applies to the California State Courts in Humboldt County, and appropriate state appellate courts. CONTRACTOR does not consent to suit in any other court.
  4. Remedies. This waiver and consent is specifically limited to an award of monetary damages constituting a reimbursement of funds for obligations not performed by CONTRACTOR under the terms of this AGREEMENT, and/or specific performance to compel enforcement of this AGREEMENT. This waiver of immunity specifically does not allow for recovery of attorneys fees or other costs associated with litigation of Covered Claims.
  5. Duration. Notwithstanding any applicable statute of limitations or other law, this limited waiver shall be enforceable only for such period as this AGREEMENT remains in effect, and only as to claims arising during the effective period of this AGREEMENT, except that this limited waiver of sovereign immunity shall remain effective for any proceeding then pending and all appeals therefrom until the underlying legal claim or claims have been finally determined.



39. MEANINGFUL USE REGARDING FIXED ASSETS (as applicable)

All Grantors who acquire fixed assets pursuant to the terms of a DHHS agreement are responsible to ensure that the asset is used for a purpose consistent with the grant. DHHS must approve any changes in utilization of the asset. This term survives termination of the agreement.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the date and year first herein above written.

**COUNTY**

BY \_\_\_\_\_

*Social Services Branch Director  
Pursuant to the authority granted by the  
Board of Supervisors on DATE*

DATE \_\_\_\_\_

**CONTRACTOR**

BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

*TWO SIGNATURES ARE REQUIRED FOR CORPORATIONS:*

- (1) CHAIRPERSON OF THE BOARD, PRESIDENT, OR VICE PRESIDENT; AND*
- (2) SECRETARY, ASSISTANT SECRETARY, CHIEF FINANCIAL OFFICER OR TREASURER.*

## EXHIBIT A

### Scope of Work

#### NAME

CONTRACTOR, with CalFresh funding, will assist the Department of Health and Human Services (DHHS) increase utilization of the CalFresh benefit by eligible households and thereby improve the health and economic stability of families and individuals in Humboldt County.

#### CONTRACTOR MUST:

1. Provide a contact liaison to coordinate with the CalFresh program;
2. Provide outreach information to clients and participants in CONTRACTOR's programs and events;
3. Provide to DHHS reports on all CalFresh activities in the format requested by DHHS; a schedule of required reports and related due dates is attached hereto as Attachment 1 to Exhibit A and incorporated as part of this Agreement.
4. A copy of CONTRACTOR'S CalFresh program outreach proposal is attached hereto as Attachment 2 of Exhibit A and incorporated as part of this Agreement.
5. Provide the CalFresh Outreach access activities outlined in the proposal submitted to COUNTY and summarized below as those activities underlined and in bold:
  - a. Assist and facilitate CalFresh applications.
  - b. Assist and support CalFresh intake and enrollment processes.
  - c. Assist with CalFresh retention.
  - d. Educate community members about CalFresh and program changes, reduce stigma associated with use, and encourage CalFresh applications. This may include events and activities, such as cooking demonstrations and community garden programs, to educate participants.
  - e. Provide specialized services to reach populations with low utilization rates.
  - f. Provide healthy foods to participants in food and meal programs with nutrition information and guidance on healthy eating, accompanied by CalFresh outreach materials and enrollment support.
  - g. Encourage clients to engage in healthy eating and exercise and assist all clients wishing to apply for CalFresh with enrollment information.



## Outreach Contract Report Forms 2015-16

Cal Fresh Outreach partnership contracts are an opportunity for community-based organizations and the Humboldt County Department of Health and Human Services (DHHS) to work together to improve the health of our community. We would like to know more about your efforts and to hear about your successes, and of course, we must report to our funders. Please use the attached Quarterly Report Form and a Summary Report Form to tell DHHS about your project and to share your ideas for improvement.

### Due dates:

Quarterly reports are due one month after the end of each quarter. Quarterly reports will be based on DHHS fiscal year quarters. The table below shows each fiscal year quarter and the report due dates. Contractors must submit a quarterly report for each quarter in which the contract is active. **The Final Summary Report is due one month after completion of the contract term.** If the total agreement amount is \$10,000 or less you are only required to submit a Final Summary Report.

Quarter	Dates Included	Date Report Due to DHHS
1	July 1 through September 30	October 31
2	October 1 through December 31	January 31
3	January 1 through March 31	April 30
4	April 1 through June 30	July 31
Final Summary Report	Based on contract term	One month after term end

### Submission of reports:

All reports should be sent to **both** CalFresh Outreach and the DHHS Contract Unit at the following addresses:

[CalFreshOutreach@co.humboldt.ca.us](mailto:CalFreshOutreach@co.humboldt.ca.us)  
[DHHS-ContractUnit@co.humboldt.ca.us](mailto:DHHS-ContractUnit@co.humboldt.ca.us)

Or by mail to: Department of Health and Human Services  
Attention: Contract Unit  
507 F Street  
Eureka, CA 95501

### Need help?

If you are unsure about when your reports are due, please **refer to item 2 (Term) in your contract.** If you are still unsure or you would like help with anything else, please call Mandy Gentle-Martin at 707-268-2787.

In your narrative reports, please remember to talk about both processes and outcomes when possible.

Process evaluation attempts to answer these types of questions:

- Were the programs/services of the right quality and content?
- How many individuals participated in the program?
- Did the program reach the population that it was intended to reach?
- Are those who participated satisfied with the program?

Outcome evaluation focuses on answers to these types of questions:

- Did the program produce the changes intended? Unintended?
- At what level were changes sought and accomplished - short-term, intermediate or long term?
- How does the program compare to others in terms of effectiveness and efficiency?
- Was the value of the outcomes achieved worth the resources invested in the program?

**Humboldt County CalFresh Outreach Partnership**  
**Final Summary Report Form**  
Due one month after term end



**Organization Name:** \_\_\_\_\_ **Report Due Date:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Please attach a narrative report addressing the items outlined in section I below. If you also have a Quarterly Report due please include it with your Final Summary Report. Feel free to attach any other relevant materials or reports.

**I. NARRATIVE** (please attach a maximum of 4 pages, exclusive of attachments)

**A. Results/Outcomes**

- 1. Please describe the grant activities and events completed and total numbers served or reached.
- 2. What difference did this grant make in your community or neighborhood and for the population you are serving? Please discuss evidence of effect (e.g., satisfaction survey results, pre- and post-test results, community indicators, outcomes, etc.). *If you have evaluation materials that document outcomes and impacts of your work, feel free to attach them in lieu of answering this or other questions.*
- 3. Describe any unanticipated results, positive or negative, not already described above.

**B. Lessons Learned**

- 4. Describe what you learned based on the results/outcomes you reported in Section A above and what, if any, programmatic or organizational changes you will make based on your results/outcomes.
- 5. Describe the materials, messages, or tools you used, if and how you modified them to fit your audience, and how you would improve them further. Are there other tools you need?

**C. Future Plans**

- 6. If you will be continuing this program, what are the plans for sustaining or expanding the program?
- 7. If you have identified areas where increased collaboration between organizations or sectors would lead to increased positive outcomes for your constituents, briefly describe your ideas.

**D. Other Comments**

- Please share with us any other comments you would like to make, any recommendations you have for our contracting or reporting processes, and any thoughts on how DHHS can do a better job of helping you.

**II. QUARTERLY REPORTS**

- Ensure all quarterly reports have been submitted. Even if only one month of a quarter is included in your contract term, please submit a quarterly report if you had an active contract during the quarter.

**III. FINANCIAL REPORT**

- A final financial summary report is required. We do not have a fiscal report form but suggest using either your approved budget or the invoice template. Please show all expenditure information compared to your approved budget and explain any major variances. *Do not send receipts but do keep them for your records.*

# Humboldt County CalFresh Outreach Partners



## Quarterly Report Form

Organization Name: \_\_\_\_\_

**Please Circle Applicable Report Cycle:**

- Quarter 1 (July 1-Sept. 30 2015)
- Quarter 2 (Oct. 1- Dec. 31, 2015)
- Quarter 3 (Jan. 1 – March 31, 2016)
- Quarter 4 (April 1- June 30, 2016)

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Instructions:** we would like to know the number of CalFresh Outreach related messages you delivered and the activities you completed. Please enter the numbers of people you reached or served in the tables below.

**A. Media:**

Use this section to identify the number of messages you delivered through media, including newsletters websites and posters.

Number of messages delivered through media:	Total
1. Number of possible readers of print media or articles	
2. Number of possible viewers/listeners of non-print broadcast media	
3. Number of possible readers of newsletter articles, client mailers or flyers, or other agency publications	
4. Web content visits (specifically CalFresh)	

**B. Check the box if you used these materials this quarter:**

- Choose my Plate
- Rethink Your Drink
- Budget shopping materials
- Harvest of the Month

**C. Healthy Eating and CalFresh Messages:**

Use this section to tell us the number of people (by age group) that participated in your activities.  
**Note: do not include anything in Section C. that has been counted in section A. Media above or in Section D. Enrollment Activities and Support below.**

Number of participants or recipients of the following:	Total
5. Educational materials distributed or provided	
6. Educational activities, involvement, or demonstrations (gardening/ exercise/ cooking) provided	
7. Food distributed or meals provided	

**D. Enrollment Activities and Support:**

Use this section to tell us the number of people (by age group) that participated in your activities.

**Note: do not include anything in Section D. that has been counted in sections A. Media or C. Healthy Eating and CalFresh Messages located above.**

<b>Number of participants (by age):</b>	<b>Total</b>
8. CalFresh educational materials distributed, benefits/requirements presented/ provided	
9. Paper application provided/assisted	
10. C-4 Yourself application assisted	
11. DHHS visit assisted	
12. Web site or physical address provided	
13. Retention assisted (reports, re-certifications, etc.)	

**E. Narrative Report**

In a separate attachment, please provide a story or comment specifically related to at least one of the categories above related to your organization/project's Media Related Outreach, Healthy Eating and CalFresh Messages and/or Enrollment Activities and Support.

## EXHIBIT B

### Payment/Invoice Schedule

#### NAME

CONTRACTOR agrees that the total maximum compensation cap for services performed and costs incurred under this Agreement is [spell out dollar amount, e.g., Twenty-Five Thousand] Dollars (\$\_\_\_\_\_), and CONTRACTOR agrees to perform any services required by this Agreement for an amount not to exceed such maximum compensation cap.

All costs incurred above the maximum compensation cap will be the responsibility of the CONTRACTOR. Under no circumstances shall the maximum compensation cap exceed the amount of Forty Eight Thousand Dollars (\$48,000).

CONTRACTOR shall submit a final project report, including all expenditures within thirty (30) days of project completion or within thirty (30) days of termination of this Agreement.

CONTRACTOR will submit an itemized invoice to the COUNTY monthly or no less than quarterly, (See invoice schedule below) commencing upon final execution of Agreement by COUNTY.

CONTRACTOR will submit an itemized invoice, in the form of the Budget, attached hereto as page 4 of Exhibit B and incorporated as part of this Agreement.

The itemized invoices due to the COUNTY, shall itemize costs for activities that are consistent with the services provided by CONTRACTOR as of the invoice date, described in Exhibit A, attached hereto and incorporated by reference.

Payment for services performed will be made within thirty (30) days after receipt of the invoice.

Any shift of funds to or from the personnel category must be approved in writing by COUNTY. CONTRACTOR may shift up to 20% of budgeted amounts between all other budget categories without prior written approval by COUNTY.

All work completed and costs for CalFresh access activities in Exhibit A Scope of Work, consisting of two (2) pages, shall be entered and identified for the corresponding activities in Exhibit A that were performed by CONTRACTOR during the invoice period.

All identification and supporting documents shall be kept by the CONTRACTOR for a period of five (5) years and made available to Department of Health and Human Services (DHHS) staff for the purposes of audit upon request.

**Invoice Schedule:**

Itemized Invoices are due one month after completion of the contract term. Quarterly Invoices are due one month after the end of each quarter. This year, all quarterly invoices will be based on DHHS fiscal year quarters. Fiscal year is from July 1<sup>st</sup> through June 30<sup>th</sup>. The table below shows each fiscal year quarter and due dates. Contractors must submit quarterly invoices for each quarter in which the contract is active.

Quarter	Dates Included	Date Invoices Due to DHHS
1	July 1 through September 30	October 30
2	October 1 through December 31	January 31
3	January 1 through March 31	April 30
4	April 1 through June 30	July 31
Final invoice	Based on contract term	One month after term end



## EXHIBIT B

Budget  
NAME

<i>Descriptions</i>	<i>Amounts</i>
<b>A. Personnel Costs</b>	
Title: Salary Calculation: <i>[formula for salary calculations and any benefits should be clearly identified]</i> Duties Description:	
Title: Salary Calculation: Duties Description:	
<b>Total Personnel Costs:</b>	<b>0.00</b>
<b>B. Operational Costs</b>	
Title: Description:	
Title: Description:	
<b>Total Operational Costs:</b>	<b>0.00</b>
<b>C. Consumables/Supplies</b>	
Title: Description:	0.00
Title: Description:	0.00
Title: Description:	0.00
Title: Description:	0.00
<b>Total Consumable/Supplies:</b>	<b>0.00</b>
<b>D. Transportation/Travel</b>	
Title: Description:	0.00
Title: Description:	0.00
<b>Total Transportation/Travel:</b>	<b>0.00</b>
<b>E. Other Costs</b>	
Title: Description:	0.00
Title: Description:	0.00
<b>Total Other Costs:</b>	<b>0.00</b>
<b>Total :</b>	<b>0.00</b>

Any shift of funds to or from the personnel category must be approved in writing by COUNTY.  
CONTRACTOR may shift up to 20% of budgeted amounts between all other budget categories without prior written approval by COUNTY.

**EXHIBIT B**

**CalFresh Outreach - Invoice**

<b>CBO Name</b> <b>Coordinator/Contact</b> <b>Address</b> <b>Phone</b>
---

**Invoice Date:** 4/28/2015 **Invoice #** AB-\_\_\_\_\_0  
**Invoice Type:**  **Monthly**  **Quarterly** **Invoice Period:** July - Sept. 2015

Description	Cost	Total Amount Due
Personnel Costs (Wages and Benefits)	\$0.00	
Operational Costs (Rent, Utilities, Phones, etc.)	\$0.00	
Consumables/Supplies (Supplies and Consumables should be separate)	\$0.00	
Transportation/Travel (Local and out of county should be separate)	\$0.00	
Other (Indirect Costs, Contracts, etc.)	\$0.00	
		<b>\$0.00</b>

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the expenditures are in accordance with the approved Agreement cited for services provided under the provision of that agreement. Full justification and backup records for the expenditures are maintained in our office at the address indicated.

Signature and date: \_\_\_\_\_

Print Name and Title: \_\_\_\_\_

Send invoice to:

**COUNTY OF HUMBOLDT**  
 DHHS, Financial Service Division  
 507 F Street, CB Unit  
 Eureka Ca 95501  
 Attn: CalFresh Billing Coordinator



\_\_\_\_\_ Date

\_\_\_\_\_ Date

(707) 441-5428 • Fax: (707) 441-5590