COUNTY OF SAN MATEO Departmental Correspondence

Date February 19, 2001 Hearing Date February 27, 2001

TO

FROM

Brian Zamora, Director of Public Health and Environmental Protection

SUBJECT Agreement with Health Plan of San Mateo for Increased Dental Services for Children in San Mateo County

RECOMMENDATION

Hønorable Board of Supervisors

- 1 Adopt a resolution authorizing the President of the Board to execute an agreement with the Health Plan of San Mateo (Plan) to provide increased dental services to San Mateo County children, and
- 2 Approve an amendment to the salary ordinance, adding one full-time, unclassified community worker, and
- 3 Approve an Appropriation Transfer Request (ATR) in the amount of \$185,013

Background

Your Board allocated \$50,000 to Health Services in FY 1999-00 to conduct a needs assessment of the status of children's dental health in San Mateo County A survey was conducted of County dental clinics and data were reviewed from a variety of sources (including the CHDP Program, the Brighter Bites Program and the Coastside Collaborative) The report <u>A</u> <u>Profile of Children's Oral Health in San Mateo County Phase I</u>, which was reviewed and accepted by you February 29, 2000, brought to light the prevalence of the problem 50% of the children participating in the CHDP and Brighter Bites programs have tooth decay, 53% of children in the county live in areas with non-fluoridated water, placing them at higher risk of dental disease. coastside access to oral health services is extremely limited, and the number of dentists serving Medi-Cal patients has declined 30% since1997-98

Discussion

The Health Plan of San Mateo (Plan) has expressed an interest in contributing funds to address these concerns Public Health submitted a proposal to the Plan, which has led to the attached Agreement The Agreement contains four (4) separate exhibits as follows

Exhibit A provides \$100,000 toward the development of a coastside dental clinic In FY 2000-01, \$66,667 is expected to be expended, the remaining \$33,333 will be expended in FY 2001-02. These funds will support the purchase of equipment and supplies and operating expenses of the coastside clinic. In addition to contributions from the Plan, the Coastside Collaborative has received grants totaling \$164,000 to help develop and finance a coastside dental clinic. The Collaborative will also work with Public Health to apply for Proposition 10 funding, bill Denti-Cal for services provided, continue to apply for grants, and conduct fund raising activities in order to support the clinic's sustainability. Public Health will also continue to seek ongoing support from the Health Plan of San Mateo Exhibit B provides \$75,000 for enhanced provider access (i.e. increased numbers of Medi-Cal and specialty dentists). In FY 2000-01, \$50,000 is expected to be expended, the remaining \$25,000 will be expended in 2001-02.

Exhibit C provides \$52,519 for an unclassified Community Worker to provide outreach and education on dental health to Spanish and English speaking families countywide In FY 2000-01, \$35,013 is expected to be expended, the remaining \$17,506 will be expended in FY 2001-02. If there is not a continuing source of funds for this position, it will be eliminated

Exhibit D provides 50,000 to increase application of sealants in the Brighter Bites Program In FY 2000-01, 33,333 is expected to be expended, the remaining 16,667 will be expended during FY 2001-02

The Plan has agreed to provide funds for all the new services associated with Exhibits A-D

The Health Services Manager for Child Health Services and the Children's Dental Health Coordinator of Public Health will assure that the scopes of work contained within the Agreement are completed

| Performance Indicator | Projected | Projected |
|--|-----------|-----------|
| | 2000-01 | 2001-02 |
| # of children's visits to the Coastside dental clinic * | 270 | 1875 |
| # of specialty providers on contract | 3 | 5 |
| # of new dentists serving Medi-Cal children | 3 | 5 |
| # of new residents receiving dental education from community worker | 100 | 300 |
| # of agencies receiving outreach and information by community worker | 10 | 20 |
| # of children who have sealants applied | 500 | 750 |
| % of children in CHDP screened with dental problems | 50% | 49% ** |

* The number of visits for 2001-02 is significantly higher than for 2000-01 because the clinic is not expected to open for services until April 2001

** The decrease is due to the combined impact of a broad based community education campaign for the prevention of dental disease and administration of sealants in the Brighter Bites Program, the coastside dental clinic and county dental clinics

Term and Fiscal Impact

The term of this Agreement is November 1, 2000 through October 31, 2001 The total amount of the agreement is \$277.519 The funds from this Agreement shall be used for the specific purposes outlined within the Agreement, and shall not exceed the limits identified for each of the four (4) Exhibits above In 2000-01. \$185.013 of the total contract is expected to be expended The balance of the contract, \$92,506, will be included in the revenues and expenditures for 2001-02 There is no net county cost for these expanded dental services

RECOMMENDED

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HEALTH SERVICES DEPARTMENT

COUNTY INMINAUSER BECEIVED

| REQL | 10 | - 0 | - | NO | |
|------|----|-----|---|----|--|
| REQU | 10 | :0 | | NU | |
| | | | | | |

COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST

DEPARTMENT

Public Health

| DAT | Е | |
|-----|---|--|
| | | |

1. REQUEST TRANSFER OF APPROPRIATIONS AS LISTED BELOW:

| | <u> </u> | DES | | |
|---------|--------------------|------------------|------------|-----------------|
| | FUND OR ORG | ACCOUNT | AMOUNT | DESCRIPTION |
| | 62410 | 2658 | \$ 185,013 | Revenue - HPSM |
| From | | | | |
| | | | | |
| | 62410 | 4100 | 25,880 | Salaries |
| | 62410 | 4300 | 9,133 | Benefits |
| То | 62410 | 5190 | 49,800 | Office Expenses |
| | 62410 | 5856 | 75,000 | Contracts |
| İ | 62410 | 6714 | 25,200 | Facility Cost |
| Justifi | cation (Attach Men | no if Necessary) | ! | <u></u> |
| | | | | |

2 Deard Action Required Remarks DEPARTMENT_HEAD BY □ Four-Fifths Vote Required

Board Action Not Required

DATE

DATE

DATE

| COUNTY | CONTROLLER | |
|--------|------------|--|
| BY | | |
| | | |

Disapprove

3 Approve as Requested Remarks

COUNTY MANAGER

DO NOT WRITE BELOW THIS LINE - FOR BOARD OF SUPERVISORS' USE ONLY

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA

RESOLUTION TRANSFERRING FUNDS

RESOLUTION NO.

Approve as Revised

RESOLVED, by the Board of Supervisors of the County of San Mateo, that

WHEREAS the Department hereinabove named in the Request for Appropriation Allotment or Transfer of Funds has requested the transfer of certain funds as described in said Request- and

WHEREAS, the County Controller has approved said Request as to accounting and available balances, and the County Manager has recommended the transfer of funds as set forth hereinabove:

NOW, THEREFORE IT IS HEREBY ORDERED AND DETERMINED that the recommendations of the County Manager be approved and that the transfer of funds as set forth in said Request be effected.

Regularly passed and adopted this _____ day of _____, 19____,

Ayes and in favor of said resolution:

Noes and against said resolution:

Supervisors: ____

Supervisors:

RESOLUTION NO

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA

* * * * * * * * *

RESOLUTION AUTHORIZING EXECUTION OF AN AGREEMENT WITH HEALTH PLAN OF SAN MATEO FOR INCREASED DENTAL SERVICES FOR CHILDREN AND APPROVING AMENDMENT TO THE SALARY ORDINANCE

RESOLVED, by the Board of Supervisors of the County of San Mateo, State of California, that,

WHEREAS, there has been presented to this Board of Supervisors for its consideration and acceptance an Agreement with the Health Plan of San Mateo, reference to which is hereby made for further particulars, whereby dental disease is the most prevalent health problem in low income children in San Mateo County, and whereby dental disease is nearly totally preventable, and whereby dental disease can severely interfere with eating, sleeping, speaking, learning and playing, and

WHEREAS, this Board has been presented with the Agreement and has examined and approved it as to both form and content and desires to enter into the Agreement

NOW, THEREFORE, IT IS HEREBY DETERMINED AND ORDERED that the President of the Board of Supervisors be, and is hereby, authorized and directed to 1) execute said Agreement with the Health Plan of San Mateo to increase dental services, 2) approve an amendment to the Salary Ordinance to add one full-time unclassified Community Worker, and 3) approve an Appropriation Transfer Request in the amount of \$185,013

ORDINANCE NO. BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA

* * * * *

AN ORDINANCE AMENDING FISCAL YEAR 2000-2001 SALARY ORDINANCE ADOPTED AUGUST 8, 2000

The Board of Supervisors of the County of San Mateo, State of California, ordains as

follows

SECTION 1. Part 12 of the Ordinance 03987 is amended as indicated.

ORGANIZATION 62000 PUBLIC HEALTH SERVICES

1 Item B183S, Community Worker - unclassified series, is increased by 1 position for a new total of 6 positions.

SECTION 2. This action is effective at the start of the first pay period beginning thirty days following adoption

SERVICES AGREEMENT WITH THE COUNTY OF SAN MATEO FOR DENTAL CARE SERVICES PROJECT

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THIS AGREEMENT, entered into this 1st of November, 2000, by and between the San Mateo Health Commission, an independent public agency established by the San Mateo County Board of Supervisors pursuant to Welfare and Institutions Code Section 14087.51, hereinafter called PLAN and the County of San Mateo, hereinafter called COUNTY.

WHEREAS, San Mateo County Ordinance Code Section 2380 authorizes PLAN to arrange for the provision of health care services to qualifying individuals who lack sufficient annual income to meet the cost of health care; and

WHEREAS, PLAN believes the provision of these services is in the best interest of its members.

NOW, THEREFORE, IT IS AGREED BETWEEN PLAN AND COUNTY AS FOLLOWS

1. <u>Definitions</u>

- a. Director ' means the Executive Director of PLAN or that officer s authorized representative.
- b. Contract Year' is a twelve (12) month period beginning the effective date of this Agreement.
- c. Department means the Department of Health Services, State of California.

2. <u>Exhibits</u>

The following exhibits are attached hereto and incorporated by this reference herein:

"A" - Coastside Dental Clinic

- "B" Enhanced Provider Access
- "C" Community Worker
- "D" Sealants

The COUNTY will perform the activities described in each of the exhibits. The conditions and terms for payment for performance of the activities are contained within the exhibit for each project.

3. <u>Compliance</u>

All services to be performed by COUNTY pursuant to this Agreement shall be performed in accordance with all applicable Federal, State, County and municipal laws, ordinances, regulations, and all rules, policies, and procedures of PLAN.

4. <u>Non-Discrimination</u>

No person shall, on the basis of race, color, national origin, ancestry, sex,
 pregnancy, childbirth or related medical condition, sexual orientation,
 marital status, religious creed, physical disability, including without limitation
 acquired immune deficiency syndrome or AIDS complex, medical condition,
 age, political affiliation or political activity, be excluded from participation
 in, be denied the benefits of, or be subjected to discrimination under this
 Agreement.

 COUNTY shall insure equal employment opportunity based on objective standards of recruitment, selection, promotion, classification, compensation, performance evaluations, and management relations, for all employees of COUNTY under this contract. COUNTY's personnel policies shall be made available to PLAN upon request.

5. <u>504 Compliance</u>

Section 504 of the Rehabilitation Act of 1973 as amended requires all benefits, aids and services be made available to handicapped persons on an equivalent with those received by non-handicapped persons. COUNTY shall agree to be in compliance with Section 504 requirements by (1) signing the Letter of Assurance, (Attachment I), attached and incorporated herein, or (2) by developing a plan for compliance to be submitted to the Director as soon as possible, but no later than ninety (90) days after execution of this Agreement.

6. <u>Right to Monitor and Audit</u>

- a. Reporting and Record Keeping: COUNTY shall comply with all program and fiscal reporting requirements set forth by appropriate Federal, State and local agencies, and as required the PLAN.
- b. COUNTY agrees to provide to PLAN, to any Federal or State department having monitoring or review authority, to PLAN's authorized representatives,

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and/or their appropriate audit agencies upon reasonable notice, access to and the right to examine all records and documents necessary to determine compliance with relevant Federal, State, and local statutes, rules and regulations, and this Agreement, and to evaluate the quality, appropriateness and timeliness of services performed.

c. COUNTY shall maintain and preserve all records relating to this Agreement in its possession and shall assure the maintenance of such records in the possession of any third party performing work related to this Agreement for a period of five (5) years from the termination date of this Agreement.

7. <u>Payments to COUNTY</u>

- It is mutually understood and agreed between the parties that this
 Agreement is valid and enforceable only if PLAN's contract with the State
 under Section 14087.5 of the Welfare and Institutions Code remains in
 effect.
- b In consideration of performance of services described in Exhibit A for the first contract year of this Agreement, PLAN shall pay to COUNTY a total amount not to exceed one hundred thousand dollars (\$100,000.00).

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- c. In consideration of performance of services described in Exhibit B for the first contract year of this Agreement, PLAN shall pay to COUNTY a total amount not to exceed seventy five thousand dollars (\$75,000.00).
- d. In consideration of performance of services described in Exhibit C for the first contract year of this Agreement, PLAN shall pay to COUNTY a total amount not to exceed fifty two thousand five hundred nineteen dollars (\$52,519.00).
- e. In consideration of performance of services described in Exhibit D for the first contract year of this Agreement, PLAN shall pay to COUNTY a total amount not to exceed fifty thousand dollars (\$50,000.00).

8. Effective Period and Right of Termination

- a. This Agreement is effective on a month-to-month basis commencing on the effective date of this Agreement. Upon thirty (30) days' prior written notice to the other party, either party may terminate this Agreement.
- b. This Agreement may be re-negotiated with the mutual consent of the parties prior to any expiration date as set forth above.

9. <u>Confidentiality and Access to Records</u>

- a. The COUNTY agrees that the use, acquisition, retention, and disposal of confidential information shall be protected from unauthorized disclosure as required by the PLAN including disclosure of information about the PLAN in cooperation with law enforcement agencies in the performance of their legal duties and to the extent required by law. COUNTY shall complete a Declaration of Confidentiality (Attachment II) to assure compliance with confidentiality requirements.
- b. The COUNTY agrees to make all of its books and records, pertaining to the goods and services furnished under the terms of the subcontract, available for inspection, examination or copying:
 - 1) By the Department and HHS.
 - At all reasonable times at the COUNTY S place of business or at such other mutually agreeable location in California.
 - In a form maintained in accordance with the general standards applicable to such book or record keeping.
 - For a term of at least five (5) years from the close of the Departmentsfiscal year in which the grant was in effect.

10. <u>Other Provisions</u>

- a. COUNTY agrees to comply with the non-discrimination provisions of Sections 4 and 5.
- b. COUNTY shall not assign or subcontract his or her rights and responsibilities pursuant to this contract to anyone without the written consent of PLAN. Any such assignment or subcontract in violation of this section shall automatically terminate this Agreement.
- Approval and consent by the Director will not be unreasonably withheld.
 Such notice of approval and consent will be deemed continuing unless the
 COUNTY is otherwise notified by the Director.
- d. Each and every one of the contract provisions of COUNTY shall be binding upon the assignee or sub-grantee This includes, but is not limited to all liability and insurance requirements.

COUNTY agrees to hold harmless the State and beneficiaries in the event the PLAN cannot or will not pay for services under this contract.

11. Alterations of Agreement and Merger

This Agreement is entire and contains all terms and conditions agreed between the parties. No alteration or variation of the terms and conditions shall be valid unless made in writing and signed by the parties hereto, and no oral understanding or agreement shall be binding on the parties hereto.

IN WITNESS WHEREOF, the parties hereto by their duly authorized representatives, have affixed their hands on the day and year first above written.

PLAN

Executive Director San Mateo Health Commission

| Date [.] | | | | |
|-------------------|--|--|--|--|
| | | | | |

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ATTEST.

_____Clerk

By_____ Signature

President, Board of Supervisors Name-Typed

Date:_____

ATTACHMENT I

Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, as Amended

The undersigned (hereinafter called the [Contractor(s)] hereby agrees that it will comply with Section 504 of the Rehabilitation Act of 1973, as amended, all requirements imposed by the applicable DHHS regulation, and all guidelines and interpretations issued pursuant thereto.

The Contractor(s) gives/give this assurance in consideration of and for the purpose of obtaining contracts after the date of this assurance. The Contractor(s) recognizes/recognize and agrees/ agree that contracts will be extended in reliance on the representations and agreements made in this assurance. This assurance is binding on the Contractor(s), its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this assurance on behalf of the Contractor(s).

The Contractor(s): (Check a or b)

- a. [] employs fewer than 15 persons.
- b. [x] employs 15 or more persons and, pursuant to Section 84.7 (a) of the regulation [45 C.F.R. 84.7(a)], has designated the following person(s) to coordinate its efforts to comply with the DHHS regulation.

Sally Brother Name of 504 Person - Type of Print

Name of Contractor(s) - Type or Print

Street Address or P.O. Box

City State Zipcode

I certify that the above information is complete and correct to the best of my knowledge.

<u>Jelly Brother Health Services Mensager I</u> Signature & Title of Authorized Official Movember 29, 2000 Date

*Exception: DHHS regulations state that:

If a recipient with fewer than 15 employees finds that, after consultation with a handicapped person seeking its services, there is no method of complying with (the facility accessibility regulations) ..other than making a significant alteration in its existing facilities, the recipient may, as an alternative, refer the handicapped person to other providers of those services that are accessible.

ATTACHMENT II

SAN MATEO HEALTH COMMISSION

Letter of Authorization Procedures Release/Access of DHS Computer Files for the Medi-Cal Program

DECLARATION OF CONFIDENTIALITY

As a condition of obtaining access to information concerning procedures or other data records utilized/maintained by the Department of Health Services, the San Mateo Health Commission, or the Health Plan of San Mateo, I, Sally Brother , agree not to divulge any information obtained in the course of my assignment to unauthorized persons, and I agree not to publish or otherwise make public any information regarding persons receiving Medi-Cal services such that the persons who receive such services are identifiable.

Access to such data shall be limited to Health Commission, Health Commission subcontractors who have signed and filed with the Department of Health Services a Declaration of Confidentiality, State and Federal personnel who require the information in the performance of their duties, and to such other as may be authorized by the Department of Health Services.

I recognize that unauthorized release of confidential information may make me subject to civil and criminal sanctions pursuant to the provisions of the Welfare and Institutions Code Section 14100.2.

Signed

Date

Exhibit A – Coastside Dental Clinic

Services

The Contractor agrees to perform services for the Health Plan of San Mateo as described in the Project Goals and Objectives section within the timeframes defined by the Scope of Work. Additionally, the Contractor will perform an evaluation of its activities as set forth in the Evaluation and Reporting Requirements section.

Project Goals and Objectives

Enhance access to dental care through the establishment of a Coastside dental clinic

Scope of Work

A scope of work and time frame is described in an attached document.

Additional Requirements

Prior to disbursement of the funds, Child Health Services will provide HPSM with documentation demonstrating the clinic has secured a lease for its facility, a license for its operation, and incorporation as a non-profit organization Also, Child Health Services will provide documentation describing clinic staff requirements and the plan to meet those requirements

Evaluation and Reporting Requirements

Child Health Services of the San Mateo Health Services Agency will file a progress report on the first six months of the project and a final report no later than eight months following receipt of total payment.

In the progress and final report, evaluate the process of opening of the clinic and describe the services available there. Provide a narrative description of achievements and milestones experienced in establishing the clinic. Also, provide quantitative and qualitative information on the clients served and the services they received.

In the progress and final reports, describe the actual progress compared to the proposed time line. Also, describe any meaningful delays or advances compared to the planned project timeframe

Report on how HPSM funds were expended to achieve the project objectives.

Completed reports will be mailed to Health Plan of San Mateo, Attn. Derik Aoki, 701 Gateway Blvd, Ste 400, South San Francisco, CA 94080

Payment to Contractor

Prior to release of funds. HPSM will require receipt of items described in the Additional Requirements section HPSM will have final authority as to determine the adequacy of the documentation to satisfy these requirements

HPSM's commitment to support establishment of the Coastside Clinic will not exceed \$100,000 (one-hundred thousand) The funds will be disbursed within 15 days of receipt of invoice from contractor

The financial resources provided by HPSM to the Coastside Clinic supports the activities to establish and operate the clinic including pursuit of other financial support and in-kind contributions

Payment will be sent to San Mateo County Health Services Agency, Public Health Division, Attn Mr Nester Mercado, 225 W 37th Avenue. San Mateo, CA 94403 unless indicated otherwise on the invoice sent to HPSM

COASTSIDE DENTAL CLINIC

Background

San Mateo County Public Health and the Coastside Dental Health Collaborative have been working together toward establishing a coastside dental clinic for the past six months A site has been found that is well suited to this purpose, as it was previously a dentist's office and it is located in Half Moon Bay in an area well known and easily accessible to coastside residents The Coastside Dental Health Collaborative is now pursuing non-profit status and has been investigating 501c3 requirements. The Coastside Collaborative has received funding of \$30,000 from the Catholic Healthcare West to help support a Project Manager position Public Health has a reserve of \$25,000 left over from the \$50,000 the Board of Supervisors awarded to conduct a needs assessment This will support payment of the rent for the first year The Collaborative also has applied to the California Wellness Foundation for \$119,000 to help fund the clinic's second year of operation. Public Health submitted a proposal to the Children and Families' First Commission in the amount of \$156,633 to support a half-time Administrative Coordinator, a full-time Patient Coordinator and capital expenditures ranging from \$15,000 for a dental billing system to \$200 for a refrigerator The Coastside Collaborative also plans to submit a proposal to the Peninsula Community Foundation, which has \$400,000 in grants to dispense and which has expressed interest in dental needs in the county

Until the Coastside Dental Collaborative achieves non-profit status, there will be shared administration of the clinic Public Health will pay for the rent for the first year and will provide consultation to the Collaborative through the Children's Dental Health Coordinator, the Health Services Manager and the Director, Public Health and Environmental Protection All staff in Child Health Services and Public Health Nutrition will help promote the clinic through their client and community contacts In particular, a new Public Health Nurse position to be assigned to work on the coast to provide linkages to resources for families with children aged 3-5 years who have specific health needs, can be of special help with clinic outreach When the Collaborative becomes a non-profit organization, Public Health would establish a contract with Collaborative to support funding of personnel and capital expenditures through funds received from the Health Plan of San Mateo The contract would be for one year As a CBO (community based organization), the Collaborative would set up a Board that would set policy, oversee finances of the clinic, and direct the Executive Directive Hopefully, other funds will be received from other sources mentioned above, which could be used to hire additional staff, increase days and/or hours of operation, and support the sustainability of the clinic beyond one or two years

As long as Public Health maintains a contract with the clinic, there will be requirements for careful data collection in order to describe numbers of children receiving services, types of services received, payments made to staff and for capital purchases It is expected that the Collaborative will participate on the Task Force that will identify the scope of practice and standardize the service delivery of county dental clinics This may support uniformity of the coastside clinic services with the county dental clinics services

REQUEST FOR FUNDING FROM HEALTH PLAN OF SAN MATEO

COASTSIDE CLINIC SCOPE OF WORK

Goal: Enhance access to dental care for children on the coast by establishment of a Coastside Dental Clinic.

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| 4 Assi necessa propert | 3. Sub Superv | 2 Neg | 1. Identify a location for1Siteclinic operationBay | | Program Objectives |
|--|--|---------------------------------------|--|-------------------------------------|--|
| 4 Assure that owner has made necessary repairs/improvements to property prior to moving in | 3. Submit lease agreement to Board of Supervisors for approval | 2 Negotiate terms of lease with owner | Site has been found in Half Moon 3ay | | Major Activities (list for each objective) |
| Week 4 5 | September | August/September 2000 | | | Activities Timeline (beginning date/ end date) |
| by Board Inspection of site indicates all needed work complete | Board Memo on file Lease signed | | Clinic location found | | Process Measures |
| | | | Clinic location found | change incı eased- decreased) | Outcome Indicators (with type of |

| Dental clinic opens on time Projected numbers of children are set ved and a broad range of services are provided | Contract on file | Contract negotiated within two weeks following award of funds from Health Plan of San Mateo to Public Health to Public Health | 1 Negotiate with Dental Health Collaborative priorities for use of funds, considering how other funds awarded have been applied Contract language shall specify the services the clinic shall provide, days and times of operation, expected numbers of clients to be reached, outreach and education activities, and the targeted date for opening | 3 Contract with Coastside Dental Health Collaborative (once they have attained 501c3 status) to provide dental services to children on the coast. |
|--|--|---|--|---|
| Public Health and the Coastside Dental Health Collaborative communicate information in a timely manner and can come to agreement on key decisions Coastside clinic services and protocols are similar to those of the county clinics | Minutes of incetings on file Sign in sheets verifying that Public Health regularly attends on file Collaborative is represented on Task Force | Mcetings held monthly Meeting frequency to be determined | Attend scheduled meetings of the Collaborative on a regular basis The Collaborative will be encouraged to take part in the County Clinics Task Force, which will identify the scope of practice and standardize service delivery for county clinics. | 2 Maintain ongoing communication with the Coastside Dental Health Collaborative |
| Outcome Indicators (with type of change increased decreased) | Process Measures | Activities Timeline (beginning date/ end date) | Major Activities (list for each objective) | Program Objectives |

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Exhibit B – Enhanced Provider Access

Services

The Contractor agrees to perform services for the Health Plan of San Mateo as described in the Project Goals and Objectives section within the timeframes defined by the Scope of Work. Additionally, the Contractor will perform an evaluation of its activities as set forth in the Evaluation and Reporting Requirements section.

Project Goals and Objectives

Increase access for children using county dental clinics to specialty dental services including, pulpotomies, extractions, braces, and service to very young children (age 3 and under) through volunteer and contracted providers.

- Convene a Provider Task Force to develop and implement a plan to increase the number of dental providers serving Healthy Families and Medi-Cal clients.
- Assure families are aware of their dental benefits and utilize them appropriately
- Contract with providers to enhance access to services needed by target population
 - Create a reimbursement incentive to encourage additional providers to deliver services through county clinic program or its referrals
- Refer county dental clients to specialty dental services as medically appropriate to the extent allowed by the funds.

Scope of Work

The scope of work and time frames are described in an attached document.

Additional Requirements

Describe contracting arrangements with providers and process used to compensate providers for their time or service.

Child Health Services will prepare a log of services performed and list of contracted specialty providers which reflects the compensation received by these providers as a result of the availability of HPSM funds

Evaluation and Reporting Requirements

Child Health Services of the San Mateo County Health Services Agency will file a progress report on the first six months of the project and a final report no later than eight months following receipt of total payment.

In the progress and final report, provide a narrative description of achievements and milestones, challenges or surprises encountered and their impact on achieving project objectives. Describe any adjustments that will be made to future efforts and activities based on the most recent experience.

Additionally, the final report should include both a process and outcome evaluation on each objective. Also, describe how the funding of this activity increased access to specialty providers/services (e g, number of providers participating, new providers participating, number of services received, types of services received, ease of accessing services) Additionally, report provide the information requested in the Additional Requirements section.

Describe the actual progress compared to the proposed time line. Describe any meaningful delays or advances compared to the planned project timeframe.

Report on how HPSM funds were expended to achieve the project objectives.

Completed reports will be mailed to Health Plan of San Mateo, Attn. Derik Aoki, 701 Gateway Blvd., Ste 400, South San Francisco, CA 94080

Payment to Contractor

The payment to the Contractor for the services described in this attachment is \$75,000

The Contractor will submit an invoice for one-half of the compensation amount at the time services begin to be delivered through contracts established through the RFA process. The remaining half of the payment will be mailed to the contractor (based on receipt of invoice for balance of funds) following the approval of the progress report, as described in the reporting requirements section of this attachment. Under no circumstances will HPSM's commitment for the activities described by this arrangement exceed \$75,000. Payment will be sent to San Mateo County Health Services Agency, Public Health Division, Attn Mr Nester Mercado, 225 W 37th Avenue, San Mateo, CA 94403 unless indicated otherwise on the invoice sent to HPSM.

The Health Plan of San Mateo reserves the right to renegotiate the scope of services and reimbursement under this agreement should the progress reports suggest the contractor's inability to complete the proposed activities within the proposed timeframe

Exhibit C – Community Worker

Services

The Contractor agrees to perform services for the Health Plan of San Mateo as described in the Project Goals and Objectives section within the timeframes defined by the Scope of Work. Additionally, the Contractor will perform an evaluation of its activities as set forth in the Evaluation and Reporting Requirements section.

Project Goals and Objectives

Enhance the capacity of the San Mateo County Health Services Agency's Dental Health Division through the funding of a Community Worker The Community Worker will assist in the implementation of the Brighter Bites program, provide bilingual English/Spanish dental health promotion presentations, and develop protocols for referral and support of children using dental clinics

The addition of the Community Worker will allow the Dental Health Coordinator to undertake additional activities to plan a media campaign on dental health, prepare a fluoridation presentation, and provide training to CHDP providers.

The Community Health Worker will:

- Provide education about children's dental health to at least 400 parents, care givers, and other residents
- Implement the Brighter Bites Program
- Provide support to implementation of sealant clinics

Scope of Work

A scope of work and time frames are described in an attached document.

Evaluation and Reporting Requirements

Child Health Services of the San Mateo County Health Service Agency will file a progress report on the first six months of the project and final report on no later than eight months following receipt of total payment.

In the progress and final report, provide a narrative description of achievements and milestones, quantitative information on the clients served, ability of community health worker to obtain participation by target population, challenges or surprises encountered and their impact on achieving project objectives Describe any adjustments that will be made to future efforts and activities based on the most recent experience.

In the progress and final reports, describe the actual progress compared to the proposed time line Also, describe any meaningful delays or advances compared to the planned project timeframe

Report on how HPSM funds were expended to achieve the project objectives.

Additionally, the final report should include both a process and outcome evaluation on each objective. This will require care documentation of presentation made, agencies contacted, children case managed, the number of children served, and a summary of the work done by both the Community Worker and activities achieved (i.e., media campaign on dental health, preparation of fluoridation presentation, and implementation of training for CHDP providers, etc.) due to the increased capacity of the Dental Health area.

Completed reports will be mailed to Health Plan of San Mateo, Attn. Derik Aoki, 701 Gateway Blvd, Ste 400, South San Francisco, CA 94080

Payment to Contractor

The payment to the Contractor for the services described in this attachment is \$52,519

The Contractor will submit an invoice for one-half of the compensation amount at the time work plan activities begin. HPSM will provide payment within 15 business days of receipt of the invoice Payment will be sent to San Mateo County Health Services Agency, Public Health Division, Attn: Mr Nester Mercado, 225 W 37th Avenue, San Mateo, CA 94403 unless indicated otherwise on the invoice sent to HPSM.

The remaining half of the payment will be mailed to the contractor following the approval of the progress report, as described in the reporting requirements section of this attachment. The Health Plan of San Mateo reserves the right to renegotiate the scope of services and reimbursement under this agreement should the progress report suggest the contractor's inability to complete the proposed activities within the proposed timeframe.

COMMUNITY WORKER

About three years ago, a half time Community Worker funded through the Child Health and Disability Prevention Program (CHDP) provided services to the Children's Dental Health Program. However, over time that position was converted 100% to the Childhood Lead Poisoning Prevention Program (CLPPP) within the Child Health Services Unit. This is largely the result of the position going where the money was, CLPPP funds were increasing and CHDP funds remained static while salaries increased. The loss of the Community Worker position from the dental program has made it more difficult for the Children's Dental Health Coordinator to manage the growing demands on the position, such as grant writing, providing support for the fluoridation question, responding to requests for trainings and community presentations and more In particular, the ability to provide presentations to Spanish speaking groups has been lost

Funding of a Spanish speaking Community Worker will greatly enrich Public Health's Children's Health Program First, the Community Worker can be trained to assume most, if not all, components of the Brighter Bites Program, freeing up time for the Children's Dental Health Coordinator to focus on other emerging activities Second, to conduct dental screenings and dental sealant clinics will require the work of several persons A Community Worker can be part of a team that includes the contract Dental Hygienist and the Dental Coordinator

REQUEST FOR FUNDING FROM HEALTH PLAN OF SAN MATEO COMMUNITY WORKER SCOPE OF WORK

and promotion, by funding a Spanish speaking Community Worker Goal: Enhance the capacity of the San Mateo County Children's Dental Health Program, particularly in the area of dental health educatio

| | | Activitics Timeline | Process Measures | Outcome Indicators |
|---------------------------|--------------------------------------|---------------------|-------------------|--------------------|
| Program Objectives | Major Activities | (beginning date/ | | (with type of |
| | (list for each objective) | end date) | | change increased |
| | | | | decreased) |
| 1 Hire a Community | 1 Review and revise, as needed, job | Week I | Job description | Position filled |
| Worker | description for this position | | on file | Increase two fold |
| | | | | in the number of |
| | 2 Work with personnel analyst to | Week 1 | Job | FTE working for |
| | prepare job announcement and to plan | | announcement on | the Children's |
| | recruitment | | file | Dental Health |
| | | | | Program |
| | 3 Screen and interview applicants | Week 3 4 | Applicant list, | |
| | | | applicant | |
| | 4 Check references and make position | Week 5 | questions, | |
| | offer | | scoring sheets on | |
| | | | file | |
| | 5 Orient new employce to position | Wccks 6 8 | Conditions of | |
| | | | employment | |
| | | | form completed | |
| | | | and signed | |
| | | | Orientation | |
| | | | schedule on file | |

| | summarized for | | | |
|-------------------------|---------------------------------|---------------------------------------|--|-------------------------|
| | Evaluations | Week 14 | b Prepare evaluation question to give at close of presentations | |
| ÷ | given | | - | |
| | presentation | | a count of persons | |
| | Sign in sheets on file for each | Week 14 | 5. Prepare sign in sheets to use when giving presentations as a means to obtain | |
| | | | Children's Dental Health Coordinator | |
| | presentations | | observation and "critique" from the | |
| | with dates of | | observe each of the lessons first Then | |
| | Log of agencies | | Program, etc.) Community Worker will | |
| | | | WIC dental clinics Headstart Pre 3 | |
| health | lesson | | schedule dates for delivering | |
| their child's dental | labeled per | Week 12 13 | 4 Prepare list of agencies to contact and | |
| make to improve | in box and | | | |
| | lesson plans, | Week 12 | 3 Train Community Worker to deliver | |
| persons reached | attached to | • • • • • • • • • • • • • • • • • • • | | |
| 100% of all | materials | | giving presentations | |
| indicate that 90 | educational | | _ | |
| Evaluations | List of | Week 11 | 2 Prepare and assemble needed | |
| | | | visits) | |
| | | | for the second s | |
| been reached | | | dental health (including diet Artshing | |
| parents/carc | | | Baby bottle tooth decay and general | parents, caregivers and |
| Icast 400 | | | regarding at least two subject areas | health to at least 400 |
| indicate that at | file | | Coordinator to develop lesson plans | about children's dental |
| Sign | Lesson plans on | Weeks 10 11 | 1 Work with Children's Dental Health | 2 Provide education |
| decreased) | | | (hist for each objective) | |
| | | (beginning date/ | Major Activities | Program Objectives |
| es Outcome Indicators | Process Measures | Activities Timeline | | |

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| | | and follow up and progressing toward total of progressing | | Program Objectives |
|--|--|---|---|--|
| | scheduling dental screenings and summarizing data about children served | trainings, giving classroom presentations, arranging for distribution of fluoride, tooth brushes, parental | 1 Receive training about Brighter Bites from the Children's Dental Health Coordinator Training shall include ordering supplies, delivering teacher | Major Activities (list for each objective) |
| | | | Week 7 11 | Activities Timeline (beginning date/ cnd date) |
| | | components | Training schedule on file, with notations of completion of | Process Measures |
| such as a community education campaign about children's dental health and a fluoridation education package for use with decision makers | Coordinator is freed up to take on additional projects | rrogram independently The Children's Dental Health | Community Worket is able to administer the Brighter Bites | Outcome Indicators (with type of change increased) decreased) |

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Exhibit D – Sealants

Services

The Contractor agrees to perform services for the Health Plan of San Mateo as described in the Project Goals and Objectives section within the timeframes defined by the Scope of Work. Additionally, the Contractor will perform an evaluation of its activities as set forth in the Evaluation section according to the Reporting Requirements

Project Goals and Objectives

Hire a contract dental hygienist dedicated to organize and oversee dental sealants administration to Brighter Bites Children.

Treat 750 children with dental sealants through outreach efforts of the Brighter Bites program

Scope of Work

The scope of work and time frames are described in an attached document

Evaluation and Reporting Requirements

Child Health Services of the San Mateo Health Service Agency will file a progress report on the first six months of the project and final report on no later than eight months following receipt of total payment

In the progress and final report, provide a narrative description of achievements and milestones, quantitative information on the clients served, challenges or surprises encountered and their impact on achieving project objectives Describe any adjustments that will be made to future efforts and activities based on the most recent experience

Additionally, the final report should include both a process and outcome evaluation on each objective This will include a description of the individuals served and the benefit they received, the factors contributing to the success of identification children needing sealants and their enrollment in treatment programs, and the effectiveness of the system to provide sealant treatments.

Describe the actual progress compared to the proposed time line. Describe any meaningful delays or advances compared to the planned project timeframe.

Report on how HPSM funds were expended to achieve the project objectives.

Completed reports will be mailed to[•] Health Plan of San Mateo, Attn Derik Aoki, 701 Gateway Blvd., Ste 400, South San Francisco, CA 94080

Payment to Contractor

The payment to the Contractor for the services described in this attachment is \$50,000.

The Contractor will submit an invoice for one-half of the compensation amount at the time work plan activities begin HPSM will provide payment within 15 business days of receipt of the invoice Payment will be sent to: San Mateo County Health Services Agency, Public Health Division, Attn Mr Nester Mercado, 225 W. 37th Avenue, San Mateo, CA 94403 unless indicated otherwise on the invoice sent to HPSM.

The remaining half of the payment will be mailed to the contractor following the approval of the progress report, as described in the reporting requirements section of this attachment. The Health Plan of San Mateo reserves the right to renegotiate the scope of services and reimbursement under this agreement should the progress report suggest the contractor's inability to complete the proposed activities within the proposed timeframe.

SEALANTS

Background

The Dental Coalition of San Mateo County has had many discussions about sealants over the past year There has not always been consensus about a sealants program for low income children served by Health Services. The State Dental Health Program that funds SB 111 has encouraged the addition of sealants as an important preventive component. This is one of the reasons for inclusion of an ambitious objective within our proposal to the Health Plan of San Mateo The target number to reach, 750 children, represents half the Healthy People 2000 goal of 50% of the population to receive sealants.

This goal may be unrealistic for us to reach because the sealant clinics need to be condensed within relatively few months For example, if the Health Plan approves funding very soon, we may be able to begin work on this goal in early October However, it will take some time to hire a contract dental hygienist and it may not be until November that the first clinics are scheduled This would leave about 9 months of the remainder of the school year to reach the target number of children. On the scope of work I indicate 10 months With nine months, the average number of children that should receive sealants per month is 83 December should probably be discounted, because of the holiday break, leaving 8 months in which to conduct the program and requiring approximately 94 children to be seen each month through June. When we have staff on board we will re-assess the feasibility of the target number Our focus will be on organizing the program and building a structure and broad timeline that can be applied in future years

We also believe this program will be strengthened if overseen by volunteer dentists, as has been done in previous years The Dental Hygienist will make every effort to secure dentists for this purpose

REQUEST FOR FUNDING FROM HEALTH PLAN OF SAN MATEO

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SEALANTS SCOPE OF WORK

Goal: Increase the number of children who receive sealants through the Brighter Bites Program.

| | | | 1 Hire a contract dental hygienist | Program Objectives |
|--|---|--|--|--|
| 4 Orient hygienist to Children's Dental Health Program | 3 Screen applications, interview and make selection | 2 Mail RFA to known Dental Hygienists and to local Hygienist and Dental Associations Advertise for position in local paper | 1 Prepare an RFA that includes specific details regarding the deliverables, including required data collection | Major Activities (list for each objective) |
| Weeks 6 8 | Week 4 5 | Week 2 3 | Week I | Activities Timeline (beginning date/ end date) |
| applicant on file Name and terms of negotiated contract with hygicarst on file | file List of applicants on file Scoring | Mailing list on file Copy of advertisement on | RFA on file | Process Measures |
| | | administration to Brighter Bites children | Contractor hired to organize and oversee dental scalants | Outcome Indicators (with type of change increased) decreased) |

| Outcome Indicators (with type of change increased deer eased) | 750 children who partrepate in the Brighter Bites Program have had sealants administered All schools in the Brighter Bites Program and Foothill College have partrepated | | | | | | |
|--|---|---|--|---|--|---|---|
| Process Measures | Plan in broad scale on file Draft schedule on file | Master list of scheduled clinics on file | Foothull communet on | file Protocol on file | Copics of forms on file | Matcrials on hand List on file for future use | coclosures on file enclosures on file Copy of letter with enclosures on file. |
| Activities Timeline (beginning date/ end date) | Wccks 10 11 Wcck 11 | Weck 12 | Wcck 13 | Week 14 | Wcck 14 | Wcck 14 | Week 14 |
| Major Activities (list for each objective) | Work with Childicn's Dental Health Coordinator and Community Worker to develop and implement a plan to provide dental scalants to the targeted number of children Invite Foothill College to participate in planning Negotiate number of children that Foothill might be able to serve Prepare a diaft schedule for working with all Brighter Bites schools to achieve the 750 level by y car's end Over a 12 month period, this requires giving scalants to an average of 63 children per month | 3 Contact schools to propose scheduled dates for sealant chines | 4 Prepare protocol for determining those clutdren who are candidates for scalants | 6 Prepare (revise) all necessary forms for use with schools, including parent consent forms, school's communent to participate, etc | 7 Prepare list of materials needed for scalant cluncs and purchase materials | 8. Prepare and mail letter to schools confirming dates for scalant clinics, procedures that will be followed, expectations for school staff, etc Include copies and explanations of forms that will be used | 9 Prepare and mail letter to Foothull College confirming dates for their involvement and including required forms |
| Program Objectives | 2 Admunster dental scalants to 750 children in the Brighter Bites Program | | | | | | |