



GRANT AGREEMENT AND CONDITIONS

This grant from the California HealthCare Foundation (CHCF), a California nonprofit public benefit corporation, is for the purposes described below and is subject to the Grantee's acceptance of the conditions specified below. This Agreement will be effective when signed by a properly authorized representative of the Grantee organization and returned to CHCF: by mail at 1438 Webster Street, Suite 400, Oakland, CA 94612; by fax at (510) 587-0113; or by email to the CHCF staff assigned to this grant.

Grant Number: 19288
Grantee: County of San Luis Obispo
Award Amount: \$60,000 (fixed amount)
Period of Grant: November 6, 2015 through June 30, 2017

Project: *Reducing Opioid-Related Morbidity and Mortality: Support for Regional Safe Prescribing Coalitions*

Project Director: Star Graber

Phone: 805-781-4753 **Email:** sgraber@co.slo.ca.us

Purpose:

To decrease the negative impact of the opioid epidemic on cost and outcomes through support of up to ten regional coalitions, focused on (1) safe prescribing practices, (2) expanding access to medication-assisted addiction treatment, and (3) increasing the availability of naloxone.

CHCF Staff Assigned to this Grant: Kelly Pfeifer, Director, High-Value Care

Report Schedule:*

Date Due	Type of Report	Report Description
November 6, 2015	Signed Agreement	
November 30, 2015	Milestone	Attend in person meeting (Nov 17, 2015)
June 30, 2016	Progress Report	
October 15, 2016	Milestone	Attend Sept 2016 in person meeting (specific date and location TBD)
October 15, 2016	Invoice	Invoice for \$25,000
December 31, 2016	Progress Report	
June 30, 2017	Milestone	Attend May 2017 in person meeting (specific date and location TBD)
June 30, 2017	Final Deliverable	Final Narrative Report
June 30, 2017	Invoice	Invoice for \$5,000

* It is the Grantee's responsibility to submit deliverables and reports on time and to alert CHCF if problems arise that impact the grant reporting schedule.

Please include the Grant Number on your Invoices. Invoice templates can be downloaded from CHCF's Web site (www.chcf.org/grants/grantee-resources). Guidelines for writing Progress Reports, Final Narrative Reports, Evaluation Reports, and reports and manuscripts for potential CHCF publication can also be downloaded from this same section of our Web site.

Payment Schedule:

Grant payments are made within 30 days of receipt and approval of the corresponding Contingency as detailed below:

Amount	Contingency	Contingency Due Date
\$30,000	Signed Agreement	November 6, 2015
\$25,000	Invoice	October 15, 2016
\$5,000	Final Deliverable & Invoice	June 30, 2017

Purpose/Scope of Work:

The objective of this project is to decrease the negative impact of the opioid epidemic on cost and outcomes through support of up to ten regional coalitions, focused on (1) safe prescribing practices, (2) expanding access to medication-assisted addiction treatment, and (3) increasing the availability of naloxone.

The coalition will identify and implement collective actions to reduce the opioid overuse epidemic through at least one intervention in each of the following federal priority areas:

1. Supporting safe prescribing practices: Examples include implementing common prescribing guidelines for emergency departments and primary care practices; routinely utilizing CURES (the California prescription database); creating access to non-opioid alternatives for chronic pain management; or improving information exchange between emergency departments, health plans, and prescribers through real-time data exchange.
2. Expanding access to medication-assisted addiction treatment: Examples include expanding the number of licensed physicians accepting referrals for buprenorphine treatment; starting buprenorphine induction clinics; and developing workshops, mentoring, or Project ECHO mentoring structures for physicians who are licensed but not yet prescribing buprenorphine.
3. Increasing naloxone access: Examples include implementing naloxone distribution at substance abuse programs, primary care clinics, or community pharmacies, or promoting co-prescribing of naloxone for patients receiving chronic opioids.

During the grant period, each coalition will identify SMART (specific, measurable, actionable, relevant, and time-bound) goals related to the chosen interventions and will share challenges and successes with other regions through in-person and virtual meetings.

Additional details of the scope of work can be found in the Grantee's proposal submitted in response to CHCF's Regional Opioid Safety Coalitions request for applications due on October 11, 2015.

The components of this collaborative program are:

The coalition will commit to take advantage of the following opportunities:

1. Send 5-10 coalition members to the three in-person convenings, including the project lead and project champion
2. The project lead will meet regularly with the coach, to ensure development of SMART goals and metrics, actionable workplans, and to manage barriers.
3. The coalition will identify a communications point-person to work with CHCF and/or communications consultants, to develop an effective communications plan
4. The clinical champion will meet regularly with the physician mentor, to identify and resolve barriers, and learn from best practices from other counties. The mentor may bring in other experts as needed as guest speakers, or for phone consultation.

5. The coalition members will attend periodic webinars, to share best practices and lessons learned from other counties.

The coalition will set up a system to gather and regularly report data showing baseline, and impact of the intervention over time. Data will be available from CDPH and CURES, and the coalition may develop its own local data tied to metrics. Examples could include opioid-related emergency visits, hospitalizations, and deaths (compared to regional and state data), as well as de-identified prescription data (total volume of prescriptions, rate of patients receiving prescriptions from multiple providers, and buprenorphine prescribing data).

The coalition will send progress reports, outlining the following, using the CHCF template:

1. Progress on each of the three priority areas (Safe prescribing, medication assisted treatment, and naloxone). Describe activity(ies) in each area, and what has been accomplished to date.
2. Progress on measures, including data
3. Documentation of coalition and task force meetings (when, and who attended)
4. How the funding was spent (at a high level)
5. Barriers and Lessons learned
6. Screen shots from externally facing websites, if any.
7. Communications update (e.g. any communications campaigns conducted? How have you used the communications technical assistance?)
8. Was Live Stories used to publically share data and coalition activities? If so, send links.

Type of Organization* (Check one)

<input type="checkbox"/>	Private Foundation		
<input type="checkbox"/>	501(c)3 organization		
<input checked="" type="checkbox"/>	Other nonprofit organization	TYPE:	<u>Gov't/County</u>

GRANT CONDITIONS

1. Political Activities

Grant funds may not be used for any of the following purposes: to carry out propaganda, or otherwise attempt to influence legislation; to influence the outcome of any specific public election or to carry on directly or indirectly any voter registration drive; to make any grants that do not comply with the rules for individual grants and organizational grants in Section 4945 of the Internal Revenue Code; or to undertake any activity for a non-charitable purpose.

2. IRS Determination

The Grantee shall provide immediate written notification to CHCF of any changes in the Grantee Institution’s tax status as defined by the Internal Revenue Code.

3. Reporting

For Reports that may be required as a condition of this grant (see “Report Schedule” on page 2 of this agreement for the specific requirements of this grant), the Grantee should follow CHCF’s guidelines and forms available on its Web site (www.chcf.org/grants/grantee-resources). These reports include Interim and Final Financial Reports, Progress Reports, Final Reports, Evaluation Reports, and reports and manuscripts for potential CHCF publication. If the Grantee is unable to download these guidelines and forms, the Grantee may contact the CHCF staff assigned to this grant and request for these materials to be mailed.

4. Expenditure of Funds

This grant is fixed fee (refer to “Payment Schedule” on page 2 of this agreement). Permission to make any major changes in grant purpose, scope of work, implementation strategy, key personnel, or timetable must be requested in writing, and CHCF’s approval obtained before such changes are implemented.

In the event of termination, grant funds for deliverables not received by CHCF are to be returned to CHCF within 60 days of the date of termination.

5. Payments

All payments under this grant will be made in accordance with the specific requirements described under the “Payment Schedule”. Reference page 2 of this agreement.

6. Financial Records

The Grantee is expected to maintain complete books and records of revenues and expenditures for the project, which should be made available for inspection at reasonable times if deemed necessary by CHCF. CHCF, at its expense, will periodically audit a selected number of its grants. If this grant is selected, the Grantee will be expected to provide all necessary assistance in connection with such audit. Records must be kept for at least three (3) years after completion of the grant.

7. Indemnification

The Grantee agrees to indemnify, defend and hold harmless CHCF from and against any and all claims, demands, losses, costs, expenses, obligations, liabilities, damages, recoveries, and deficiencies, including interest and penalties, and reasonable attorneys’ fees and costs, that CHCF may incur or suffer and that result from, or are related to, any breach or failure of Grantee to perform any representations, warranties and agreements contained in this Agreement.

CHCF agrees to indemnify Grantee against conclusions derived from information provided by Grantee.

8. Confidentiality.

Grantee acknowledges that in the execution of the Scope of Work under this Agreement, the Grantee could have access to information which is confidential to, or a trade secret of, CHCF. Grantee agrees not to disclose any such information, regardless of the form or format in which, or means by which, Grantee becomes aware of such information, to any third party without the specific written authorization of CHCF. For the purposes of this Agreement, trade secrets and confidential information shall not include information which is in the public domain or which has been obtained by Grantee from sources other than CHCF.

During the term of this Agreement, and for a period of two (2) years thereafter, Grantee agrees that it will not use any trade secrets or confidential information acquired in performing the terms of this Agreement in any manner without the prior written authorization of CHCF.

Grantee agrees to take whatever measures are reasonably necessary, by notice, agreement or otherwise, to ensure that any employee of Grantee, used by Grantee to perform the Services for CHCF, shall be personally bound to maintain the confidentiality of any and all information acquired in the course of providing services to CHCF.

9. Ownership

Deliverables resulting from work conducted under this Agreement shall be the sole property of CHCF. Such deliverables are described in the "Report Schedule" (reference page 2 of this Agreement).

10. Acknowledgment and Publicity

The California HealthCare Foundation may periodically issue a general press release announcing funded projects, or include this grant in a published list of grants awarded by CHCF. If CHCF chooses to publish material(s) resulting from the work completed under this Agreement, either in print or electronically, appropriate acknowledgment of the Grantee will be included. CHCF's Publishing and Communications Department will oversee the dissemination of such materials and any resulting publicity activities, and the Grantee will be sent copies of the final publications.

If the Grantee wishes to issue a press release regarding this grant, CHCF requires review and final sign-off of the text by its Publishing and Communications Department. Any publication produced by the Grantee that refers or results from this agreement should include an acknowledgment of CHCF that reads: *Supported by the California HealthCare Foundation, based in Oakland, California.*

11. Grant Termination

CHCF, at its sole option, may terminate the grant at any time if, in CHCF's judgment, the grantee becomes unable to carry out the purposes of the grant, ceases to be an appropriate means

of accomplishing the purposes of the grant, or fails to comply with any of the conditions of the grant award.

12. Limitation

It is expressly understood that CHCF has no obligation to provide other or additional support for this or any other project or purposes.

Acceptance of Terms and Conditions. This document is to be signed by an official authorized to sign for your organization and by the project director,* signifying that your organization agrees to comply with all the terms and conditions of the grant specified above. If the project director is authorized to sign for the institution, the same person may sign in both capacities.

The above terms and conditions of the grant are hereby accepted and agreed to as of the date specified:

For: County of San Luis Obispo
Grantee Institution

APPROVED AS TO FORM
AND LEGAL EFFECT
Rita L. Neal, County Counsel
By: [Signature] 11/12/15
Deputy County Counsel Date

By: _____
Signature of Authorized Official

[Signature]
Signature of Project Director

Name

STARLENE GRABER
Name

Title

DIVISION MANAGER
Title

Date

11/12/15
Date

*The project director is the individual directly responsible for developing the proposed activity, its implementation, and day-to-day direct supervision of the project.