

STATEMENT OF WORK

I. Entity Name: Fremont County Public Health Agency

II. Project Description:

This project supports two complementary public health initiatives that work together to improve the health, safety, and well-being of Colorado children and families.

First, this project advances the Child Fatality Prevention Act (Article 20.5 of Title 25, Colorado Revised Statutes), a statewide, multi-agency effort to prevent child deaths. Pursuant to C.R.S. § 25-20.5-404-405, local public health agencies, or agencies designated by local public health agencies, must establish and coordinate multidisciplinary, local child fatality prevention review teams (local teams). These teams systematically examine child deaths to better understand how and why they occur. Using a public health approach, the review process identifies trends and patterns, recommends actions, and implements strategies that can reduce the risk of future fatalities. This work benefits Colorado by helping communities understand the causes of child deaths, identifying effective prevention services, uncovering service gaps, and recommending changes to laws, policies, and systems that promote safe and healthy development for all children.

Second, the project strengthens Colorado's Maternal and Child Health (MCH) Program, which develops, implements, and evaluates evidence-based local action plans to improve outcomes for women, children, youth, and families. The MCH program includes upstream, population health strategies that improve the lives of the maternal child health population. Every five years, Colorado's MCH Program conducts a state-level needs assessment of the health and well-being of women, children, youth and families to guide state and local public health work and to meet Title V MCH Block Grant requirements. The goal of the assessment is to gather information to understand what issues are facing this population and then to identify seven to ten specific priorities that can be positively impacted by public health work during the next five years. State and local MCH staff use the selected MCH priorities to focus efforts, align resources, and to positively impact the lives of Colorado women or reproductive age (15-44), children and youth including those with special health care needs, and their families.

Together, these initiatives use evidence-based strategies, community partnerships, and systems-level change to prevent child fatalities, address gaps in health and well-being, and create stronger, healthier futures for Colorado's children and families.

III. Definitions:

1. **CDPHE** – Colorado Department of Public Health and Environment
 2. **CHAPS** – Colorado Health Assessment and Planning System
 3. **CFPS** – Child Fatality Prevention System
 4. **CRS** – Case Reporting System
 5. **CYSHCN** – Children and Youth with Special Health Care Needs
 6. **MOVEit**– software used for secure file transfer of death/birth certificates
 7. **MCH** – Maternal and Child Health
 8. **SUID** – Sudden Unexpected Infant Death
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IV. Work Plan

Goal #1: To cultivate an environment where all individuals, families, and communities can thrive.

Objective #1 (CFPS Objective): No later than the expiration date of this contract, improve a comprehensive understanding of the circumstances of individual child deaths in Colorado and support equitable strategies at the individual, community, and societal levels to prevent future deaths.

Primary Activity #1: The Contractor shall conduct individual, case-specific, multidisciplinary reviews of all child fatalities assigned to the local team based on coroner jurisdiction.

Sub-Activity #1:

1. The Contractor shall access the Death Certificate via the MOVEit website on a weekly basis to obtain death certificates for each child fatality case assigned to the local team.
 2. The Contractor shall obtain case records from the coroner's office, law enforcement agencies, county department of human services, hospitals, and other agencies for each child fatality assigned to the local team.
 3. The Contractor shall abstract critical data from case records and enter the data into the National Center for Fatality Review and Prevention's CRS for each child fatality assigned to the local team.
 4. The Contractor shall develop case summaries for the purpose of completing the "Narrative" section of the National Center for Fatality Review and Prevention's CRS for each child fatality assigned to the local team.
 5. The Contractor shall facilitate local team meetings with multidisciplinary local team members to conduct individual, case-specific reviews of child fatalities for the purpose of discussing and identifying equitable prevention recommendations in the "List any recommendations and/or initiatives that could be implemented to prevent deaths from similar causes or circumstances in the future" section of the National Center for Fatality Review and Prevention's CRS.
 6. No later than two (2) months after reviewing a child fatality, the Contractor shall complete data entry for all sections of the National Center for Fatality Review and Prevention's CRS, including "Data entry completed for this case".
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Primary Activity #2: The Contractor shall promote evidence-based injury and violence prevention strategies that advance health equity.

Sub-Activity #2:

1. The Contractor shall apply a public health approach to identify trends and patterns of child fatalities using state and local team data reports.
2. The Contractor shall identify structural inequities that lead to systemic, avoidable, and unjust health disparities for certain groups of children.
3. The Contractor shall apply a public health approach to identify equitable prevention strategies to implement at the local level.

4. The Contractor shall apply a public health approach to identify equitable systems improvements to implement at the local level.
5. The Contractor shall implement evidence-based, equitable child fatality prevention strategies at the local level.
6. The Contractor shall implement evidence-based, equitable system improvements at the local level.
7. The Contractor shall vote on state-level prevention recommendations for the CFPS annual legislative report.

Primary Activity #3: The Contractor shall participate in training opportunities.

Sub-Activity #3:

1. The Contractor shall attend CDPHE-approved local team trainings.
 2. The Contractor shall attend CDPHE-approved web-based trainings.
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Primary Activity #4: The Contractor shall evaluate the Colorado CFPS.

Sub-Activity #4:

1. The Contractor shall complete the CFPS Local Team Survey.
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Objective #2 (MCH Objective): No later than the expiration date of this contract, improve the health and well-being of mothers and children by employing primary prevention and early intervention public health strategies.

Primary Activity #5: The Contractor shall implement evidence-based strategies to improve MCH, including CYSHCN.

Sub-Activity #5:

1. The Contractor shall complete the electronic provided MCH Planning Form, including identification of one (1) or more selected priority(ies) to be implemented, which may include CHAPS.
 2. The Contractor shall implement an approved local plan submitted within the agency's MCH Planning Form.
 3. The Contractor shall complete the electronic provided MCH Annual Reporting Form.
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Primary Activity #6: The Contractor shall either:

- a. Participate in the Mid-Year check-in call or;
 - b. Complete an electronic MCH Mid-Year check-in form.
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Standards and Requirements

1. The content of electronic documents located on CDPHE and non-CDPHE websites and information contained on CDPHE and non-CDPHE websites may be updated periodically during the contract term. The contractor shall monitor documents and website content for updates and comply with all updates.

CFPS Program References and Standards

Legal & Review Compliance:

2. The Contractor shall comply with the Child Fatality Prevention Act C.R.S. 25-20.5-404-409. This document is incorporated and made part of this contract by reference and is available on the following website <https://drive.google.com/file/d/1LNR0Msg6-XqbqH9aUXIUddu63oBGVjwn/view?usp=sharing>
3. Reviewable child fatalities include but are limited to, one or more of the following causes: child maltreatment (abuse and neglect), drowning/water related, fire, homicide, motor vehicle incidents, sudden unexpected infant death (SUID), suicide, undetermined causes, and unintentional injury.

Process Protocol Adherence (CFPS Operations Manual):

4. The Contractor shall adhere to processes and policies outlined in the Colorado Child Fatality Prevention System (CFPS) An Introduction to the System to conduct individual, case-specific review of fatality data.
5. The Contractor shall adhere to processes and policies outlined in the Colorado Child Fatality Prevention System (CFPS) An Introduction to the System to enter information regarding the child fatality into the National Center for Fatality Review and Prevention's CRS.
6. The Contractor shall adhere to processes and policies outlined in the Colorado Child Fatality Prevention System (CFPS) An Introduction to the System to identify equitable prevention recommendations.
7. The Colorado Child Fatality Prevention System (CFPS) An Introduction to the System is incorporated and made part of this contract by reference and is available on the following website <https://drive.google.com/file/d/1Oa2gQM6YHDIHxJDo7ObsRxt5xfB0Mkz9/view?usp=sharing>

Data Systems & Access:

8. CDPHE will provide the local team coordinator login credentials to the National Center for Fatality Review and Prevention's CRS. This website content is incorporated and made part of this contract by reference and is accessible at <https://data.ncfrp.org/Account/Login?ReturnUrl=%2FSectionTINC%2FEdit%2F395632>
9. CDPHE will provide the local team coordinator login credentials to the MOVEit website.
10. CDPHE will send death certificates to the Contractor for deaths assigned to their county that require a review. Death certificates will be deposited into the Contractor's assigned MOVEit folder on a weekly basis. This website content is incorporated and made part of this contract by reference and is accessible at <https://oitftapp01.state.co.us/>
11. The Contractor is able to access analyzed and aggregated child fatality data online via the CFPS Data Dashboard. This information is incorporated and made part of this contract by reference and is accessible at <https://cdphe.colorado.gov/prevention-and-wellness/maternal-and-child-health/child-fatality-prevention-system>
12. The Contractor may submit individualized data requests to the CFPS State Support team. This information is incorporated and made part of this contract by reference and is accessible via the following email address cdphe_prevent_childfatality@state.co.us

Data Usage & Prevention Strategy:

13. The Contractor shall use state/local team data to guide analyzed, aggregated child fatality data to the Contractor in the following ways: Local team data reports.

14. The Contractor shall provide information on local level prevention strategies and system improvements.
15. CDPHE will provide resources for evidence-based, equitable injury and violence prevention strategies via the '*Resources for LPHA Child Fatality Review Teams*' on the CFPS website. This information is incorporated and made part of this contract by reference and is accessible at <https://cdphe.colorado.gov/prevention-and-wellness/maternal-and-child-health/child-fatality-prevention-system>
16. The Contractor shall use information from the CFPS website on acceptable and approved uses of funding for child fatality, injury, and violence prevention strategies when implementing local prevention strategies. This information is incorporated and made part of this contract by reference and is accessible at <http://www.cochildfatalityprevention.com/>

Monitoring & Support:

17. CDPHE will conduct quality assurance checks on the data entered into the National Center for Fatality Review and Prevention's CRS for child fatalities reviewed by the Contractor.
18. The Contractor shall request technical assistance and training from the CFPS State Support Team at CDPHE by emailing the appropriate CFPS State Support Team member.
19. CDPHE will provide the Contractor with training opportunities.
20. CDPHE will support Contractor state-level meetings to discuss and vote on prevention recommendations for the annual CFPS legislative report.

MCH Program References and Standards

21. The Contractor will adhere to the MCH Guidelines for LPHA's receiving funds under \$55,000, and information on the MCH website, www.mchcolorado.org, and is incorporated and made part of this contract by reference.
22. CDPHE will provide the electronic program templates for the implementation of work represented in this contract.
23. **CYSHCN Requirement:** The Contractor shall specifically address the unique needs of the CYSHCN population with focused strategies and or activities. The Contractor can opt to meet CYSHCN requirements via information and referral and select additional CYSHCN strategies.
24. The expected results will be measured based on selections made to the electronic MCH Annual Report and Planning Form. All listed expected results may not apply.

Expected Results of Activity(s)

CFPS Expected Results

1. Improved understanding of child fatality data in Colorado including circumstances, risk and protective factors, trends, inequities, and patterns surrounding child deaths.
2. Identification of evidence-based, equitable prevention recommendations to prevent future child fatalities from occurring in Colorado.
3. Implemented and evaluated equitable child fatality prevention strategies at the state and local levels.

MCH Expected Results

4. Maintain or increase the health status and needs of the maternal and child population within the Contractor's jurisdiction.

Measurement of Expected Results

CFPS Measurement of Expected Results

1. Sections A-O of the National Center for Fatality Review and Prevention's CRS will be completed for 100% of child fatalities that occurred in Colorado and meets CFPS' review criteria within the local team's jurisdiction.
2. Increased number of equitable prevention strategies implemented at the state and local levels as documented in the CFPS annual report, the CFPS Local Team Survey, and through prevention stories.

MCH Measurement of Expected Results

3. Completion of the electronic Mid-Year Check-in Call or Form.
 4. Completion of the electronic MCH Annual Reporting Form.
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Deliverables

Description	Completion Date
CFPS Deliverables	
1. The Contractor shall submit all information resulting from child fatality case reviews into the National Center for Fatality Review and Prevention's CRS for each child fatality case assigned by the CFPS State Support Team at CDPHE.	No later than 11/30, annually
2. The Contractor shall submit the CDPHE-approved annual progress report to the CFPS State Support Team at CDPHE, which is reflective of the previous contract period.	No later than 8/15, annually
3. The Contractor shall submit the online CFPS Local Team Survey administered by the CFPS State Support Team at CDPHE.	No later than 6/30, annually
MCH Deliverables	
4. The Contractor shall submit the electronic MCH Annual Reporting Form for the previous contract period	No later than August 15
5. The Contractor shall submit a Mid-Year check-in electronic form.	No later than June 15
6. The Contractor shall submit the electronic MCH Annual Planning Form for the next contract period.	No later than June 15

V. Budget

CFPS	
Quarter	Total Payment
July 1 through September 30 to be paid after September 30	\$ 1,125.00
October 1 through December 31 to be paid after December 31	\$ 1,125.00
January 1 through March 31 to be paid after March 31	\$ 1,125.00
April 1 through June 30 to be paid after June 30	\$ 1,125.00
Total	\$ 4,500.00

MCH	
Quarter	Total Payment
July 1 through September 30 to be paid after September 30	\$ 11,665.50
Total	\$ 11,665.50

VI. Additional Provisions:

The following terms and conditions are in addition to the standard purchase order terms and conditions and are to be read and interpreted in conjunction with the provisions of the purchase order. Wherever used in the following provisions, "Contractor" and "Vendor" shall have the same meaning. Contractor and/or Vendor – any party to which a Purchase Order is issued.

A. Additional Provisions – Invoicing

To receive compensation under this Contract, the Contractor shall submit an annual electronic progress report as stipulated in Deliverable Number Two (2) of the Statement of Work. This progress report shall document the Contractor's progress toward completion of the activities in accordance with the Statement of Work. Payment under this Contract shall be made to the Contractor by the State in four (4) payments in accordance with the budget included in this Contract. The final payment shall be made only after CFPS staff have reviewed and approved the progress report submitted by the Contractor for the fourth quarter.

The Contractor shall not use federal funds to satisfy federal cost sharing and matching requirements unless approved in writing by the appropriate federal agency.

Entire Agreement

These Provisions together with the Purchase Order constitute the entire agreement between the parties, and supersedes all prior proposals, agreements or other communications between the parties.

VII. Monitoring:

CDPHE's monitoring of the purchase order for compliance with performance requirements will be conducted throughout the purchase order period by the Child Fatality Prevention System State Support Team and the Maternal Child Health Contract Manager and Administrative Liaison, as is relevant. Methods used will include: review of documentation determined by CDPHE to be reflective of performance to include progress reports, data entered into the National Center for Fatality Review and Prevention's CRS, and other fiscal and programmatic documentation as applicable. The Contractor's performance will be evaluated at set intervals and communicated to the Contractor.

VIII. Resolution of Non-Compliance:

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

IX. Attestation

The Contractor agrees to perform services in accordance with the terms and conditions of the Statement of Work and Budget.

Debbie Bell, BOCC Chairman
Contractor Name (Print) and Title

Debbie Bell
Contractor Signature

8-6-26 Date