



Lake County Build a Generation

*Organizing Lake County to build a healthier
community for youth and families.*

LAKE COUNTY GOVERNMENT JOB DESCRIPTION: LAKE COUNTY BUILD A GENERATION

JOB TITLE:	Substance Abuse Prevention Manager
DEPARTMENT:	Lake County Build a Generation (LCBAG)
CLASSIFICATION:	Full-time (40 hours per week), eligible for benefits. Exempt
SUPERVISOR TITLE:	Resilient Lake County and Youth Master Plan Manager, Lake County Build Generation
SALARY:	\$41,000 to \$45,000, DOE

FUNCTION OR PURPOSE OF THIS POSITION:

The **Substance Abuse Prevention Manager** will oversee LCBAG's work to coordinate prevention efforts across the community by addressing risk and protective factors important in Lake County. This staff member will implement the [Communities That Care](#) model, in order to reduce youth substance use and overall substance abuse—and improve mental health—in Lake County. The **Substance Abuse Prevention Manager** will facilitate the Alcohol, Tobacco, and Other Drugs (ATOD) Coalition and will oversee a YMP Coordinator focused on Tobacco Prevention and Youth Leadership.

ABOUT LAKE COUNTY BUILD A GENERATION:

Lake County Build a Generation (LCBAG) is building a healthier community for youth and families. We are a project of the Lake County Public Health Agency, an EOE employer. Our staff members are passionate about youth, families, seniors, and the success of our community. For more information, please visit www.lcbag.org.

ESSENTIAL FUNCTIONS: The primary duties of this position are to perform office or non-manual work directly related to planning, organizing, implementing and managing LCBAG's Substance Abuse Prevention efforts, which includes without limitation the exercise of discretion and independent judgment with respect to the following essential and other important responsibilities and duties. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions of this position.



The **Substance Abuse Prevention Manager** will be responsible for implementing the CTC Workplan (attached) and for the accomplishment of the following deliverables (some of which he or she might work directly on and some of which he or she might oversee a coordinator's work on):

- Facilitate Lake County community members who have been identified as key stakeholders in this effort to reduce mental health and substance abuse issues in Lake County in the ATOD Coalition, using guidance outlined in the Communities that Care model.
- Collaborate with Lake County Public Health Agency and other community partners to implement the Public Health Improvement Plan as it pertains to Mental Health and Substance Abuse
- Coordinate with the Lake County Build a Generation Steering Committee to oversee progress on the [Youth Master Plan](#), including evaluation and content updates.
- Develop a youth coalition to work on policy change initiatives in Lake County related to substance abuse prevention and mental health.
- Hold regular meetings of the ATOD coalition, including any workgroups that emerge—at least one meeting or touch point per month.
- Work with the ATOD Coalition members to implement environmental substance abuse prevention and mental health strategies within the community, such as policy changes or social norms campaigns.
- Train community coalition members to expand community capacity and outreach.
- Work with the Assessment and Evaluation Coordinator to continuously evaluate youth substance abuse prevention and mental health strategies in the community and respond to community needs and concerns.
- Continually identify and recruit new ATOD coalition members to ensure the coalition has diverse and reflective representation.
- Attend regional and statewide trainings, as needed.
- Complete grant reporting, as needed
- Other duties as assigned by the Resilient Lake County and Youth Master Plan Manager

This position offers training opportunities and resources in order to develop the **Substance Abuse Prevention Manager's** expertise in coalition-building, facilitation, and best practices in education, encouragement, policy and infrastructure.

QUALIFICATIONS:

A strong candidate:

- Must have or be able to develop strong facilitative leadership skills.
- Must have strong written and verbal communication skills.
- Must have a strong ability to analyze and understand data.
- Must have or be able to develop a strong ability to facilitate groups toward shared goals, objectives, and actions. Prefer candidates with experience facilitating groups through prioritization and implementation of goals.

- Must be organized, flexible, able to work independently, and willing to do what is necessary to complete assigned duties.
- Must have a growth mindset.
- Must be collaborative and able to work with diverse community leaders and community members.
- A passion for making Lake County a healthier place for youth and families.
- Must be able to use standard office equipment.
- Must have strong computer skills, including but not limited to: an ability to use Microsoft Word and Excel, G Suite applications (Gmail, Google Calendar, Google Drive).

Candidates with the following skill sets are preferred, but we are also willing to train the right person in many of these skills:

- Strong supervisory skills and experience with hiring, supervision, and exit.
- Experience in, and an understanding of, Collective Impact.
- Experience with policy change, systems change, and environmental change.
- Experience in health prevention and promotion.
- Understanding/awareness of racial equity issues (developed either through personal experience or formal training).
- Ability to build on or develop trust and connections with members of the Lake County Latino/a community.
- Knowledge of the Lake County community.
- Bilingual in Spanish and English.
- Bicultural in both the white and the immigrant Latino/a community of Lake County.
- Experience in, and passion for, substance abuse prevention, especially for youth.

Travel: May require some travel for trainings. May require some occasional work at night and on the weekend. Must possess and maintain a valid Colorado Driver's License and the appropriate level of personal vehicle insurance.

Supervisory Responsibility: This position supervises a coordinator working on tobacco prevention and youth leadership.

Work Conditions: The majority of this person's duties are performed within an indoor environment. The incumbent may be exposed to some noise (electrical, mechanical or human) on an occasional basis, and other related hazards associated with an office environment.

Career Track: This position is funded through grants and fee-for-service work and dependent upon ongoing funding.

Closing Date & Start Date: This position is open until filled, but to be in the first round of applicants, please apply by May 24th. This position can begin starting June 1st.

To apply: To apply, please send a cover letter, resume, and list of three professional references (at least one of whom should be a former supervisor) to Noah Sosin, noah@lcbag.org.

STATEMENT OF WORK
To Original Contract Routing Number ** *** *****

These provisions are to be read and interpreted in conjunction with the provisions of the contract specified above.

I. Entity Name: Lake County Build a Generation
Term: July 1, 2018 - June 30, 2021

II. Project Description:

This project serves to implement the *Communities That Care* model, with fidelity, in order to identify evidence-based or evidence-informed youth substance abuse prevention strategies in communities across Colorado. Additionally, this funding supports communities to identify sustainable local or regional strategies and funding for the ongoing implementation of youth substance abuse prevention strategies within each locality.

III. Definitions:

1. **Behavioral health:** a continuum of services for individuals at risk of, or suffering from, mental, behavioral, or addictive disorders, and behavioral health, and as a discipline, refers to mental health, psychiatric, marriage and family counseling, and addictions treatment, and includes services provided by social workers, counselors, psychiatrists, psychologists, neurologists, and physicians, as well as nurse practitioners and physician assistants.
2. **CDE:** Colorado Department of Education
3. **CDHS:** Colorado Department of Human Services
4. **CDPHE:** Colorado Department of Public Health and Environment
5. **CMP:** Collaborative Management Programs funded by CDHS
6. **CTC or Communities That Care:** an evidence-based community engagement model identified as a promising program by the Blueprints for Healthy Youth Development evidence-based registry. Communities that Care includes 5 Phases of implementation:
 - Phase 1: Get Started
 - Phase 2: Get Involved
 - Phase 3: Develop Community Profile
 - Phase 4: Create a Plan
 - Phase 5: Implement and Evaluate
5. **DCJ:** Division of Criminal Justice
6. **DfC:** Drug Free Communities Grant recipients from the Office of National Drug Control and Policy
7. **HKCS:** Healthy Kids Colorado Survey
8. **LPHA:** Local Public Health Agency
9. **MCH:** Maternal Child Health
10. **OBH:** Office of Behavioral Health at the Colorado Department of Human Services
11. **Primary Prevention:** As defined by the Centers for Disease Control's Principles of Prevention Guide, primary prevention takes place BEFORE substance abuse initially occurs. It involves programs and strategies designed to reduce the factors that put people at risk for substance abuse or exposure. Or, they encourage the factors that protect or buffer people from substances.
12. **PYD:** Positive Youth Development is an approach that guides communities and organizations in the way that they organize services, opportunities and supports. In practice, this approach incorporates the development of skills, opportunities and authentic relationships into programs, practices and policies, so that young people reach their full potential.
13. **SB94:** Programs funded by CDHS authorized through Senate Bill 94.
14. **Socio-ecological model:** CDC uses a four-level social-ecological model to better understand violence and the effect of potential prevention strategies. This model considers the complex interplay between individual, relationship, community, and societal factors.
15. **State-funded prevention programs:** Examples of state-funded prevention programs include the Tony Grampas Youth Services projects, sexual violence prevention programs, communities funded by the Office of Suicide Prevention, LPHA Maternal Child Health, CDE grantees, collaborative management programs, community substance abuse treatment programs funded by OBH, Senate Bill 94 programs, Regional

Accountable Entities funded by Health Care Policy and Financing, and other Division of Criminal Justice programs.

- 16. **Substance abuse:** substance abuse among youth includes underage use of marijuana and alcohol and the misuse of prescription drugs/opioids. Additional substances may be included in the definition of substance abuse by a community if they have documented data of misuse or abuse among youth in their community, excluding tobacco.
- 17. **TGYS:** Tony Grampas Youth Services grants for primary prevention programs in communities.
- 18. **UCB:** University of Colorado at Boulder
- 19. **UCD:** University of Colorado at Denver

II. Work Plan:

Goal #1: Prevent substance abuse among youth within the community by addressing common risk factors and improving protective factors outlined in the CTC model across the socioecological model within Colorado.	
Objective #1: No later than June 30, 2021, maintain a fully-functioning key leader board and community board that implement the <i>Communities That Care</i> (CTC) model to identify youth substance abuse prevention evidence-based strategies that address identified risk or protective factors within the community.	
Primary Activity #1	The Contractor shall recruit, mobilize and build capacity among a group of stakeholders through steps of the <i>Communities That Care</i> model, using data and priorities identified by each individual community.
Sub-Activities #1	<ol style="list-style-type: none"> 1. The Contractor shall provide a full time <i>Communities That Care</i> facilitator. 2. The Contractor shall recruit key leaders and potential community board members to participate in the CTC project, using guidance outlined in the CTC model. 3. The Contractor shall recruit leaders of state-funded prevention and treatment projects to participate in the CTC project, as available within the communities. 4. The Contractor shall use group facilitation skills and tools provided by CTC to help guide the stakeholders engaged in the CTC process through the CTC process. 5. The Contractor shall revisit any milestones and benchmarks from Phases 1 and 2 needed to facilitate coalition progress in achieving milestones from Phases 3-5. 6. The Contractor shall hold regular meetings of the stakeholders engaged in the CTC process, a minimum of one (1) meeting of the stakeholders or a workgroup per month. 7. The Contractor shall complete the CTC Milestones & Benchmarks evaluation tool with the support of the stakeholders engaged in the CTC process. 8. The Contractor shall ensure preparation and follow-up for meetings of community stakeholders is completed. 9. The Contractor shall facilitate delegation of community prevention CTC project tasks, including but not limited to collecting, organizing, and analyzing data; community outreach and public relations; and CTC project meetings. 10. The Contractor shall train stakeholders engaged in the CTC stakeholder project to expand community outreach. 11. The Contractor shall ensure that language interpretation is provided at CTC project meetings, as needed.
Objective #2: No later than September 30, 2018 and September 30, 2020, incorporate newly released local risk and protective factor data into their local assessment and gap analysis of youth substance abuse prevention concerns within the community.	

<p>Primary Activity #1</p>	<p>The Contractor shall use local HKCS data and regional public data to identify gaps in prevention for youth substance use or abuse.</p>
<p>Sub-Activities #1</p>	<ol style="list-style-type: none"> 1. The Contractor shall report on data about substance abuse and mental health risk and protective factors in the community using a list provided by CDPHE of recommended indicators. 2. The Contractor shall coordinate data review with local public health staff creating the existing local community health assessment required in the Public Health Act of 2008, regarding youth substance abuse and mental health with stakeholders engaged in the CTC process. 3. The Contractor shall prepare for and lead the CTC workshops and other activities outlined in the relevant phases of the Milestones and Benchmarks with appropriate timing for effective community progress, 4. The Contractor shall complete additional assessments/data analysis to develop a clear picture of gaps and resources in youth substance abuse prevention within the community, specifically related to shared risk and protective factors that prevent substance use. 5. The Contractor shall identify existing prevention programs that can be leveraged to address the strategies selected at each of the socio-ecological model levels, including but not limited to other funded prevention programs from CDE, MCH, TGYS, CMPS, SB94, DfCs, OBH or DCJ. 6. The Contractor shall request data from relevant community stakeholders to further analyze gaps in local youth substance abuse prevention. 7. The Contractor shall review local or regional data released after the completion of the existing community health assessment to further monitor priority risk or protective factors related to youth substance use, abuse, and prevention. 8. The Contractor shall engage community members to assess risk and protective factors driving prioritized problems based on selected prevention priorities. 9. The Contractor shall analyze and summarize these assessment results in an updated community health assessment report using a CDPHE-approved template for the substance abuse-related risk, protective and outcome data. 10. The Contractor shall complete the relevant activities and sections of the CTC Milestones & Benchmarks evaluation tool for Phases 2-5, with the support of the workgroups, boards, and other stakeholders engaged in the CTC project and with guidance from the CTC Coach. 11. The Contractor shall re-administer relevant Milestones and Benchmarks, including relevant workshops for the boards, at a minimum of once every three years.
<p>Objective #3: No later than June 30, 2019, develop a community action plan to implement primary prevention strategies to reduce risk and promote protective factors addressing gaps in youth substance abuse prevention identified in the assessment using the CTC model.</p>	
<p>Primary Activity #1</p>	<p>The Contractor shall develop a community action plan to address gaps in youth substance abuse prevention identified in the assessment, to be implemented in years three through five of this Contract, using evidence-based or evidence-informed strategies from a list approved by CDPHE.</p>
<p>Sub-Activities #1</p>	<ol style="list-style-type: none"> 1. The Contractor shall build capacity among stakeholders engaged in the CTC project to address alcohol, prescription drug, and marijuana use/abuse among youth by providing a minimum of two (2) trainings designed for project members: substances and impacts of their use on young people and positive youth development principles and practices.

	<ol style="list-style-type: none"> 2. The Contractor shall use the results of the community resource assessment (in consultation with stakeholders engaged in the CTC project) to refine the geographic areas/community(ies) appropriate for intervention within the community action plan. 3. The Contractor shall prepare for and lead the CTC workgroups, community board, and key leader board through the workshops and milestones for Phases 4-5 with appropriate timing for effective community progress, with coaching from CDPHE. 4. The Contractor shall develop a process for setting prevention priorities based on updated assessment data from that community. 5. The Contractor shall identify and plan to implement (in consultation with stakeholders engaged in the Communities that Care project) a minimum of one (1) prevention strategy from both the societal and community levels of the socioecological model to implement to improve social norms, life skills and resilience, and community connectedness. These strategies may not be implemented during this funding cycle due to current initiatives or timelines within the community, but it is required to identify and plan to include community and societal level strategies. Strategies shall be selected from a menu of prevention strategies to be provided by CDPHE. 6. The Contractor shall include in the action plan activities that promote positive youth development (PYD) and/or social development strategy policies, principles, and/or practices throughout their community. 7. The Contractor shall identify (in consultation with stakeholders engaged in the CTC project) action steps to improve implementation of evidence-based prevention strategies from the menu of prevention strategies at the individual and relationship levels of the socioecological model, also known as Blueprints for Healthy Youth Development. 8. The Contractor shall use approved tools to conduct outcome-focused planning to illustrate and connect the problems the CTC Coalitions and other stakeholders will address, evidence-based strategies to address those problems, and anticipated outcomes. 9. The Contractor shall work with CTC project members, members of the larger community and CDPHE to develop a comprehensive community action plan, using evidence-based or evidence-informed strategies from the menu of prevention strategies to be provided by CDPHE. 10. The Contractor shall develop budgets for implementation of prevention strategies identified by the stakeholders engaged in the CTC project. 11. The Contractor shall identify process and outcome evaluation measures for each action step and strategy implemented within the community action plan in partnership with UCB. 12. The Contractor shall complete the relevant activities and sections of the CTC Milestones & Benchmarks evaluation tool for Phases 4-5, with the support of the workgroups, boards, and other stakeholders engaged in the CTC project and with guidance from the CTC Coach.
<p>Objective #4: No later than June 30, 2021, implement relevant action steps within the approved community action plan to implement substance abuse prevention strategies within the community.</p>	
<p>Primary Activity #1</p>	<p>The Contractor shall document the implementation of specific action steps and related evaluation measures from the community action plan, including successes and challenges the stakeholders engaged in the CTC project encountered while implementing substance abuse prevention strategies within the community.</p>

<p>Sub-Activities #1</p>	<ol style="list-style-type: none"> 1. The Contractor shall be aware of and involved in the implementation of any substance abuse prevention strategies within the community to avoid duplication. 2. The Contractor shall document successes or challenges encountered by community coalition members while implementing prevention strategies. 3. The Contractor shall track progress toward implementation of the steps outlined in the community prevention action plan. 4. The Contractor shall discuss edits and updates to prevention activities in the community action plan with the CDPHE contract monitor. 5. The Contractor shall complete the relevant sections of the CTC Milestones & Benchmarks evaluation tool for Phases 4 and 5, with the support of the coalition. 6. The Contractor shall utilize training and technical assistance from UCB to complete the evaluation portions of the community action plan and to support the collection and dissemination of relevant data.
<p>OPTIONAL Objective #5: No later than June 30, 2021, increase opportunities for youth to engage in prosocial activities within the community.</p>	
<p>Primary Activity #1</p>	<p>The Contractor shall increase opportunities for prosocial engagement for youth in the community through Positive Youth Development (PYD) trainings to local community members including, but not limited to, youth-serving professionals, caregivers, local business, law enforcement, and health care providers.</p>
<p>Sub-Activities #1</p>	<ol style="list-style-type: none"> 1. The Contractor shall attend a CDPHE in-person three day PYD training to be approved as a CDPHE certified PYD Trainer. 2. The Contractor shall adapt the CDPHE training to include local resources, organizations and relevant cultural adaptations to the area. 3. The Contractor shall work with local stakeholders to recruit community members to attend and participate in PYD trainings. 4. The Contractor shall leverage collaborative relationships with organizations to expand recruitment efforts in the identified geographic area for trainings and to host PYD trainings at other organization locations. 5. The Contractor shall request technical assistance from CDPHE staff to respond to difficult situations or questions that come up in PYD trainings. 6. The Contractor shall utilize surveys to evaluate the effectiveness of the training to increase knowledge of PYD, evaluate effectiveness of facilitator, and increase ability to utilize PYD in professional work. 7. The Contractor shall participate in quality improvement practices including, but not limited to, site visits, evaluation review, and sharing evaluation results with CDPHE. 8. The Contractor shall participate in Community of Practice meeting opportunities, where others also focused on PYD can work together to identify and leverage best practices, standards, and to support mastery of PYD training delivery. Activities include, but not limited to, participation in regular conference calls, reviewing relevant research, and completing tasks using the online PYD Canvas modules.
<p>OPTIONAL Objective #6: No later than June 30, 2021, increase meaningful and rewarding opportunities for youth to engage in and contribute to the Communities that Care Board activities.</p>	
<p>Primary Activity #1</p>	<p>The Contractor shall develop board capacity to implement Social Determinant Strategy and Positive Youth Development (PYD) through Positive Youth Development (PYD) trainings to board and community members.</p>
<p>Sub-Activities #1</p>	<ol style="list-style-type: none"> 1. The Contractor shall attend a CDPHE in-person three day PYD training to be approved as a CDPHE certified PYD Trainer.

	<ol style="list-style-type: none"> 2. The Contractor shall adapt the CDPHE training to include local resources, organizations and relevant cultural adaptations to the area. The Contractor shall work with local stakeholders to recruit community members to attend and participate in PYD trainings. 3. The Contractor shall leverage collaborative relationships with organizations to expand recruitment efforts in the identified geographic area for trainings and to host PYD trainings at other organization locations. 4. The Contractor shall request technical assistance from CDPHE staff to respond to difficult situations or questions that come up in PYD trainings. 5. The Contractor shall utilize surveys to evaluate the effectiveness of the training to increase knowledge of PYD, evaluate effectiveness of facilitator, and increase ability to utilize PYD in professional work. 6. The Contractor shall participate in Community of Practice, a collaborative framework to work together to identify and leverage best practices, standards, and to support mastery of PYD training delivery. Activities include, but not limited to, participation in regular conference calls, reviewing relevant research, and completing tasks using the online PYD Canvas modules.
<p>Standards and Requirements</p>	<ol style="list-style-type: none"> 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. 2. The Contractor shall participate in all required technical assistance meetings conducted by the CDPHE CTC team. 3. The Contractor shall collaborate with state- and/or federally-funded programs that exist within their community. 4. The Contractor shall facilitate and document the implementation of the five phases of the <i>Communities That Care</i> model with fidelity, providing justification for necessary adaptations. The five phases are described on the CTC website: http://www.communitiesthatcare.net/how-ctc-works/, incorporated and made part of this Contract by reference. 5. The Contractor shall ensure that the CTC Facilitator will demonstrate the skills identified in the CTC Facilitator job description provided by the University of Washington. 6. The Contractor shall send a second staff person to be cross-trained as a CTC Facilitator to support effective implementation and coalition management, when needed. 7. The Contractor shall adhere to all eCTC license agreement requirements. 8. The Contractor shall ensure all community facilitators using the eCTC system must successfully complete the Facilitator Training and content mastery assignment in advance of launching eCTC in their communities. <ol style="list-style-type: none"> a. To ensure high quality implementation of eCTC, this license assumes that community facilitators have successfully completed a Facilitator Training and content mastery assignment, and their communities are working with a certified CTC coach. 9. The Contractor will include CTC Facilitator staff on the monthly call for needed TA and coaching on upcoming CTC milestones and benchmarks. 10. The Contractor shall provide a list of schools in their community to the UCD HKCS team to encourage focused recruitment of those schools in the HKCS. 11. The Contractor shall act as a liaison linking UCD HKCS staff to schools for recruitment for survey administration. 12. The Contractor shall request technical assistance from UCB to interpret the results in the scaled risk and protective factor reports that use HKCS data.

	<ol style="list-style-type: none"> 13. The Contractor shall enter into a report sharing agreement with local schools to receive HKCS scaled risk and protective factor reports once every two years. 14. The Contractor shall assist in all data collection efforts from UCB, as requested. 15. CDPHE will provide a menu of approved primary prevention strategies across the socioecological model for implementation by communities. These strategies will be based on the best available research and evidence for the prevention of substance abuse. 16. The Contractor shall select strategies for implementation in the community prevention action plan from the menu of primary prevention strategies to be provided by CDPHE. The Contractor shall employ a minimum of two (2) strategies at the community and/or societal levels of the socioecological model. 17. The Contractor shall submit a submission proposal for any innovative strategies not currently on the menu of primary prevention strategies utilizing the approved CDPHE proposal template. The Contractor shall send the proposal via email to their assigned CTC Coach for review by the entire CTC team to ensure the innovative strategy is evidence-informed. 18. The Contractor shall use the CDPHE-approved template for the community action plan. 19. CDPHE will review any innovative strategy proposal submission within ten (10) business days of receipt and provide feedback and questions for further clarification. 20. CDPHE will review and provide feedback on community action plan within 15 business days. 21. The Contractor shall receive CDPHE approval for the community action plan prior to strategy implementation. 22. The Contractor shall review the community action plan with the Key Leader Board to highlight leveraged efforts and funding for selected strategies and to receive the KLBs advice and suggested changes prior to developing the community implementation and evaluation plan. 23. The Contractor shall invite UCB staff, the CTC Coach, and the a relevant subject matter expert to participate at least electronically in the implementation and evaluation planning meetings. 24. CDPHE will review and provide feedback on the draft community implementation and evaluation plan within 15 business days. 25. The Contractor shall receive CDPHE approval for the community implementation and evaluation plan prior to implementing activities and strategies. 26. The Contractor shall submit any edits to the community action plan to CDPHE for approval. 27. The Contractor shall comply with the National Standards for Culturally and Linguistically Appropriate Services in Health Care (CLAS Standards) website http://www.integration.samhsa.gov/EnhancedCLASStandardsBlueprint.pdf as they relate to health communications and is incorporated and made part of this Contract by reference. 28. The Contractor shall utilize current substance abuse social marketing campaign materials provided by CDPHE. 29. The Contractor shall not use CTC funds to purchase ad space for existing statewide social marketing campaigns. 30. The Contractor shall use only marijuana research or statements on the health effects outlined by the Retail Marijuana Public Health Advisory Committee. These approved health statements and factsheets are incorporated and made part of this Contract by reference and are available on the following website www.colorado.gov/marijuana. 31. The Contractor shall attend identified trainings, including grantee orientation, the <i>Communities That Care</i> model, effective facilitation strategies, positive youth development, accessing data resources, prevention-science, and others as identified. 32. The Contractor shall utilize the positive youth development rubrics (adult and youth version) to build capacity and evaluate effective youth involvement aligned with HB 13-1239 - Colorado Statewide Youth Development Plan and CO9to25's identified strategic efforts to achieve positive outcomes for all youth.
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33. The Contractor shall use annual facilitator feedback from the key leader and community board members as well as from the coach to identify opportunities for development and improve performance of the local facilitator.
34. The Contractor shall use the CDPHE-approved progress, annual and final report template, to be provided by CDPHE, which includes the following requirements:
 - a. Updates to the Milestones and Benchmarks process tracking document,
 - b. Updates on work to implement PYD within the community and/or community board.
 - c. Number and description of community partners engaged in the coalition and workgroups,
 - d. Evaluations of workshops, workgroups and coalition meetings,
 - e. Updates, progress, and outcome reporting on any prevention action plan steps and related evaluation activities within the community prevention action plan,
 - f. Opportunities and next steps for the program, and
 - g. document a minimum of one (1) documented success story from the project
35. The Contractor shall provide to CDPHE upon request written procedures related to gift card purchase and handling. At a minimum, the procedures must include the following:
 - a. How the gift card inventory is tracked and maintained
 - b. Gift card storage and safeguards against theft
 - c. The primary person responsible for securing and distribution gift cards,
 - d. A gift card distribution log that records each gift card number, dollar amount, and the printed name and signature of each gift card recipient.
36. The Contractor shall provide CDPHE with an updated staff roster of CTC Facilitators within two (2) weeks of any staffing change.
37. CDPHE will provide Healthy Kids Colorado Survey data at the regional level, where available. www.chd.dphe.state.co.us/topics.aspx?q=Adolescent_Health_Data. This information is incorporated and made part of this Contract by reference.
38. The formal agreement among CTC stakeholders can include a letter of agreement, MOU or other mutually acceptable instrument.

OPTIONAL FOR OBJECTIVE 5 AND/OR 6

1. The Contractor shall utilize current PYD materials provided by the Youth and Young Adult Section Manager and Retail Marijuana Education & Youth Prevention Coordinator at CDPHE.
2. The Contractor shall use only PYD research outlined by CDPHE. This document is incorporated and made part of this Contract by reference and is available on the following website <https://www.colorado.gov/pacific/cdphe/positive-youth-development>
3. The Contractor shall collaborate with organizations to best serve the community.
4. The Contractor shall not charge a fee for participation in PYD training.
5. The Contractor shall only utilize CDPHE evaluation surveys.
6. The Contractor shall follow the CDPHE progress report template, to be provided by CDPHE, which includes, but not limited to, the following requirements:
 - a. Number of trainings held,
 - b. Number of attendees, by sector and county
 - c. Evaluation results pre- and post-retrospective training to document increases in knowledge
7. The Contractor shall submit to CDPHE for approval any adaptations to training a minimum of two (2) weeks prior to implementation. All adaptations must be approved by CDPHE prior to implementation.
8. The Contractor shall submit all deliverables, unless otherwise stated, via email or file sharing service to the CDPHE Youth and Young Adult Section Manager and Retail Marijuana Education and Youth Prevention Coordinator.

Expected Results of Activity(s)	Reduce youth substance use and abuse through the implementation of the <i>Communities That Care</i> model and identified evidence-informed primary prevention strategies in communities across Colorado.	
Measurement of Expected Results	Final progress and outcome evaluation results, including: <ol style="list-style-type: none"> a. documented CTC Milestones & Benchmarks b. community action plan identifying how the community will address the priority risk and protective factors related to youth substance use. c. implementation of community action plan, including evaluation activities 	
		Completion Date
Deliverables	1. The Contractor shall receive monthly coaching, share updates, and request support prior to implementation of milestones via phone to the CTC Coach at CDPHE on the progress of the activities and deliverables in the statement of work.	No later than the first day of each month
	2. The Contractor shall submit a CDPHE approved quarterly progress reports (including Milestones and Benchmarks) via email to the CTC Coordinator.	No later than September 30, December 31, and March 31 of each year.
	3. The Contractor shall submit a draft community action plan via email to the CTC Coordinator for implementation from 2018 to 2021 that addresses the identified gaps found in the community health assessment.	No later than June 30, 2019
	4. The Contractor shall submit an annual report via email to the CTC Coordinator that provides an overview of all activities implemented in each fiscal year.	No later than June 30, 2019 and June 30, 2020
	5. The Contractor shall submit a final community action plan via email to the CTC Coordinator for implementation from 2018 to 2021 that addresses the identified gaps found in the community health assessment.	No later than August 30, 2019
	6. The Contractor shall submit a draft community implementation and evaluation plan via email to the CTC Coordinator for implementation from 2019 to 2021 that addresses the identified gaps found in the community health assessment.	No later than October 31, 2019
	7. The Contractor shall submit a final community implementation and evaluation plan via email to the CTC Coordinator for implementation from 2019 to 2021 that addresses the identified gaps found in the community health assessment.	No later than January 31, 2020
	8. The Contractor shall submit a final report via email to the CTC Coordinator that provides an overview of all activities implemented in the five years of funding.	No later than June 30, 2021

	<p>OPTIONAL The Contractor shall submit via email to the CDPHE Youth and Young Adult Section Manager and Retail Marijuana Education and Youth Prevention Coordinator all CDPHE pre- and post- retrospective survey results.</p>	<p>No later than thirty (30) business days after training</p>
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III. Monitoring:

CDPHE’s monitoring of this contract for compliance with performance requirements will be conducted throughout the contract period by the CTC Coordinator. Methods used will include a review of documentation determined by CDPHE to be reflective of performance to include progress reports and other fiscal and programmatic documentation as applicable. The Contractor’s performance will be evaluated at set intervals and communicated to the contractor. A Final Contractor Performance Evaluation will be conducted at the end of the life of the contract.

IV. 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 timeline for completion will be documented in writing and agreed to by both parties. If extenuating circumstances arise that requires an extension to the timeline, the Contractor must email a request to the CTC Coordinator and receive approval for a new due date. The State will oversee the completion/implementation of the action(s) to ensure timelines 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 contract.