

# REQUEST FOR PROPOSAL (RFP) 1006-24

## LANGUAGE ACCESS NEEDS ASSESSMENT, PLAN, AND LANGUAGE ACCESS SERVICES POLICY



**Coordinating Agency  
IMPERIAL COUNTY PUBLIC HEALTH DEPARTMENT**

**Released October 3, 2023**

### **DUE DATE AND SUBMISSION REQUIREMENTS:**

**One (1) original, one (1) electronic copy (i.e., flash drive), and  
three (3) complete copies must be delivered by**

**November 9, 2023, 4:00 Pacific Standard Time**

**Point of Contact:**

Rhoda Hoffman

Purchasing Agent

1125 W. Main Street

El Centro, CA 92243

(442) 265-1868

[rhodahoffman@co.imperial.ca.us](mailto:rhodahoffman@co.imperial.ca.us)

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**Background**

The County of Imperial encompasses approximately 4,600 square miles in the southeast corner of California. The County is bordered by San Diego County on the west, Riverside County on the north, as well as the State of Arizona on the east, and Mexico on the south. It is comprised of 7 incorporated cities and several unincorporated communities. According to the United States Census Bureau, Imperial County had an estimated population of close to 179,000 in 2022; however, this fluctuates daily by tens of thousands with the frequent cross border traffic at the three (3) international ports of entry in the County. Over 86% are Hispanic or Latino, 30% are foreign born persons, close to 75% of persons aged 5 years and older speak a language other than English at home, and over 9% of people aged 65 years and under have a disability.

**Purpose**

At this time, the County of Imperial’s Public Health Department (hereafter “ICPHD”) is soliciting proposals from qualified Applicants to provide services that will result in the development and completion of an ICPHD language access needs assessment process and corresponding report, as well as a language access plan and language access services policy companion document. The intent of the ICPHD is to improve its overall access to services and information for people whose primary language is not English and/or who have limited ability to write, read, speak, or understand English. Having a written language access plan at ICPHD is critical for both employees and service recipients to understand what communication resources are available and how to access them.

**Funding Award and Contract Term**

The maximum amount available for the RFP award is \$100,000.00. Proposals priced higher than that amount will not be considered. A total of one (1) award will be granted.

**Schedule of Events**

Release of RFP Guidelines.....	October 3, 2023
Deadline for County to Receive Written Questions.....	October 19, 2023
Written Responses to Questions will be Available.....	October 31, 2023
Letter of Intent to Apply Deadline.....	November 2, 2023
Deadline to Submit Proposals.....	November 9, 2023
Evaluation and scoring of proposals.....	November 10-22, 2023
Selection of Successful Proposer.....	December 6, 2023
Finalization of Agreement with Successful Proposer.....	December 20, 2023
Approval of Agreement by Board of Supervisors.....	January 11, 2023
Anticipated Date for Commencement of Agreement.....	January 18, 2024

## **Use of Funds**

Funds may be used for project staff salaries and benefits, Applicant fees, data collection and analysis, meetings, supplies, project-related travel, and other direct project expenses, including a limited amount of essential equipment for the project, and indirect expenses. Funds may not be used to subsidize individuals for the costs of healthcare, to support clinical trials, to construct or renovate facilities, or as a substitute for funds currently being used to support similar activities.

## **Letter of Intent to Apply**

Although a Letter of Intent (LOI) to apply is not required, Applicants are highly encouraged to submit a LOI by **4:00 p.m. Pacific Standard Time (PT) on Thursday, November 2, 2023**. The LOI is not binding and does not enter into the review of applications, but the information that contains will be helpful to the County of Imperial in planning for the review of applications and estimating the potential workload.

If submitting a LOI, it should be on the entity's letterhead, and no more than two (2) pages. Include the following on the LOI:

- Title of the RFP;
- Name and address of the entity that will contract with the County of Imperial to complete the project;
- Email address and telephone number of the primary contact person for the project; and
- Brief description of the entity's experience with similar projects.

## **Please submit the LOI to:**

Imperial County Purchasing Department  
Attn: Rhoda Hoffman  
RE: Language Access Plan and Policy  
1125 Main Street, El Centro, CA 92243

## **General Requirements**

Applicants submitting a proposal should include a combination of procedures, tools and methods that thoroughly state the interpretation of the work to be performed. Further, the proposal should, at a minimum, include detailed strategies and/or methodologies to address the requirements outlined in the Scope of Services and Deliverables section of the RFP. Additionally, and to be considered for funding, the Applicant must:

- Have experience in establishing and strengthening local equity infrastructure and equity-focused organizational capacity building activities, language access and cultural competency services.
- Have experience in conducting needs assessment, language access planning processes, and developing language access plans and policies.

- Have strong interpersonal, facilitation, and mediation skills.
- Have experience facilitating community meetings/forums with community partners to collect feedback and input on project work.
- Have experience in working with racially and ethnically diverse populations with low to moderate income.
- Be flexible in the approach to project development and implementation.
- Demonstrate an ability to meet internal and project deadlines, major milestones, and overall project schedules.
- Be an independent self-starter who is also comfortable taking direction and working as part of a team.
- Have the ability to effectively speak and write in English and Spanish to support documentation, communication, facilitation, mediation, and community engagement activities.
- Possess the appropriate license(s) and/or insurance to operate in California.
- Have the ability to begin project implementation within one (1) month of being awarded the funds.
- Be able to collaborate with ICPHD staff and external partners.
- Demonstrate the ability to provide a variety of virtual and in-person facilitation and activities in Imperial County, California.
- Provide examples of similar work, if requested.
- Have no record of unsatisfactory performance. Applicants who are or have been seriously deficient in contract performance, in the absence of circumstances properly beyond the control of the Applicant, shall be presumed to be unable to meet this requirement.

## **Scope of Services and Deliverables**

### **Task 1: Consultation and Collaboration**

Applicant shall provide ICPHD with high quality, professional consulting services to achieve the following:

- Overall coordination and project management of the different tasks and processes, including monitoring timelines and providing recommendations and updates to ICPHD staff.
- Collaborate with ICPHD staff and external stakeholders to ensure engagement, inclusion and participation in processes and deliverables.
- Applicant shall ensure the use of required/appropriate resources throughout the process, such as the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care by the US Department of Health and Human Services by the Office of Minority Health and the Department of Justice Language Access Plan.
- Coordinate and facilitate meetings, take meeting minutes, and prepare summaries of deliverables to distribute to ICPHD and stakeholders.

- Coordinate meetings and follow-up with ICPHD staff and stakeholders for pending items.
- Maintain original and electronic project files containing all document records, including but not limited to copies of agendas, minutes/notes/summaries, and any other project information. All files must be provided to ICPHD.

**Deliverables include, but are not limited to:** meeting agendas and minutes, summaries, handouts, project management files, etc.

### **Task 2: Language Access Needs Assessment**

Applicant shall complete a language access needs assessment for Imperial County with a completed documents and reports that will be used for Task 3.

Assessment shall, at a minimum:

- Determine needs of current and prospective community members whose preferred spoken and written language is a language other than English.
- Identify the types of language access services available to community members (e.g., in-person, interpretation, remote interpretation, American Sign Language, Spanish Sign Language, etc.)
- Create an inventory and describe how community members are informed of language access services availability (e.g., taglines, signage, messaging, etc.)
- Ensure that health equity focused work such as language access needs, cultural competence, etc., are addressed/included in the Department’s organizational structural assessment efforts.
- Identify training needs for ICPHD staff that will work on language access plan, cultural competency, and other related policies and processes.
- Evaluate existing health equity- and cultural competency-related plans, policies, and processes to determine where changes and enhancements should be made.

**Deliverables include but are not limited to:** Needs assessment report including key findings, recommendations, and next steps.

### **Task 3: Development of Documents**

Planning documents shall be developed using the ICPHD Language Access Needs Assessment and incorporated, as necessary, within the documents below. Applicant shall submit all documents in electronic format in a manner approved by ICPHD. Applicant shall develop and provide the following documents:

- **Language Access Plan:** Collaborate with ICPHD staff and stakeholders to develop a language access plan. The Language Access Plan is to ensure access to health –related

information and services for limited English Proficient Persons (LEP), as well as those who are deaf or hard of hearing and individuals with speech or cognitive disabilities. These services include, but are not limited to in-person interpretation, remote interpretation, dual language services, written translation, notices about the availability of language services, etc. Applicants shall create strategies for internal and external involvement to ensure engagement, input, and feedback for the Language Access Plan draft. The Language Access Plan will be integrated into the ICPHD's communication plan, workforce development and onboarding processes, and used to create and formalize a Language Access Services Policy and Language Access Services Policy Best Practices document that will be available to ICPHD and external stakeholders.

- **Language Access Services Policy:** In collaboration with ICPHD staff and stakeholders, create a Language Access Services Policy. Applicant shall ensure that elements/attachments to the policy will include but are not limited to the formalization of a roster that lists certified translators, certified interpreters, and dual-language employees. Other elements should include, but are not limited to processes for annual policy review, workforce development processes for training, onboarding, etc.
- **Community Engagement Activities:** Develop comprehensive community engagement activities that will allow stakeholders, community members and other partners to provide input and feedback on drafts of the Language Access Plan and Language Access Services Policy. Engagement strategies may include but are not limited to community-level forums and other mechanisms that will be used to ensure equitable access and opportunity to participate.

**Deliverables include, but are not limited to:** Language Access Plan, Language Access Policy, and Community Engagement Activities.

### **Proposal Format and Submission Requirements**

All proposals must be typed in English and are limited to 8-10 pages for the narrative section. This page limit does not include the checklist, coversheet, table of contents, budget, exhibits, or attachments. Use 12-point font, single spacing, 1-inch margins, include a page number at the bottom of the page, and double-side the paper. Elaborate artwork and expensive paper and binding are neither necessary nor desired. Please use either a staple or binder clip to secure each of the proposals. If you choose to recreate any of the required exhibits included in this RFP, please ensure that you recreate the original format exactly and that no information is omitted. Include any supporting documentation in the Appendix. Use the headings listed below and in that order.

- Proposal Checklist (Exhibit A)
- Proposal Cover Sheet (Exhibit B)

- Table of Contents
- Proposal Content
  - Section 1: Entity Profile and Qualifications
  - Section 2: Personnel
  - Section 3: Project Description and Scope of Work
  - Section 4: Evaluation Design, Implementation, Analysis and Dissemination Plan
- Budget Proposal Template (Section 5: Exhibit C)
- Appendix

The proposal must be submitted in the name of the entity that will contract with the Imperial County Public Health Department to complete the project. The proposal must be signed by your entity's authorized agent.

All proposals and supporting documents are due to the Imperial County Purchasing Department by **4:00 p.m. PT on November 9, 2023**. Please submit 1 original, 1 electronic copy (e.g., flash drive) plus three (3) complete copies either by mail or hand delivery to:

**Imperial County Purchasing Department  
Attn: Imperial County Public Health Department  
Attention: Rhoda Hoffman  
1125 Main Street  
El Centro, CA 92243**

All proposals received will be stamped with date and time received. Proposals submitted to any other location will not be accepted. Postmarks will not be accepted as meeting the deadline requirement. It is the sole responsibility of the Applicant to ensure that the proposal is complete at the time of submission. Any proposal not meeting these RFP requirements will be recorded as non-compliant.

**Proposal Content**

Applicants must prepare an effective, clear, and concise proposal. In order to be considered for selection, Applicants must meet the general requirements outlined above and submit a complete response to this RFP that includes the mandatory information and/or requirements of Sections 1-5 below and in that order. Failure to provide any of the information requested may cause the proposal to be rejected.

Applicants that are currently providing services in Imperial County or have provided services in the County in the past should not assume that evaluators will know your entity's qualifications and experience.

**Section 1: Entity Profile and Qualifications (10 points)**



Briefly describe your entity and how long it has been established. Give examples and evidence of its prior successes and current projects which show that it can accomplish what is being requested as part of this RFP. Describe your expertise and experience related to health equity and cultural competency focused work, work with Limited English Proficient persons (LEP), deaf or hard of hearing, individuals with speech or cognitive disabilities, organizational needs assessments, development of Language Access Plans, and Language Access Services policies and processes. Additionally, describe the following: ability to facilitate meetings involving participants who come from diverse backgrounds and disciplines; ability to be flexible in approach to project development and implementation; and ability to meet internal and project deadlines, major milestones, and overall project schedules.

### **Section 2: Personnel (10 points)**

Identify all staff who will work on this project and any experience they have had with similar projects. Include their experience working with diverse communities. Name the person who will be primarily responsible for achieving the goals of the proposed project and discuss the person's experience in managing similar projects. In the appendix, include all staff job descriptions, resumes, a copy of the organizational chart, and, as applicable, copies of employee or business permits or licenses needed for the applicant to perform the proposed services.

### **Section 3: Project Description and Scope of Work (45 points)**

The successful Applicant will provide services that will result in the development and completion of an Imperial County Language Access Needs Assessment process and corresponding report that will lead to the creation/development of a Language Access Plan, Language Access Policy and community engagement activities. The Applicant will work closely with the ICPHD staff, including those in the Health Equity and Workforce Development Programs, as well as with community members, as needed.

### **Section 4: Evaluation Design, Implementation, Analysis and Dissemination Plan (25 points)**

Applicants should exhibit comprehension of health equity principles and projects. Applicants shall develop and/or adopt an evaluation plan that outlines the rationale, general content, scope, and sequence of evaluation strategies that will be conducted as part of all the processes mentioned in Section 3. The plan must include comprehensive outcome indicators, as well as current and corresponding baseline data for each of the identified indicators. Applicants are required to coordinate/collaborate with ICPHD staff and external stakeholders, as needed. If no baseline data is available, Applicants must describe the methods that will be employed to measure the project's success. Proposals must also include how outcomes will be accomplished and measured. Describe who will be responsible for collecting and analyzing the information. Finally, proposals must include a description of dissemination strategies to make evaluation results available and accessible to the ICPHD staff, external stakeholders, LEP and others.

### **Section 5: Budget Proposal - Exhibit C (10 points. Not part of the 8-10-page narrative limit)**

Applicant shall complete the required budget template showing the amount and purpose of requested funds. Provide a detailed justification of all items for the budget and explain how the

line item serves the goals of the project. Proposals will be evaluated, in part, on how well the proposal maximizes expenditures. The budget forms are not part of the 10-page narrative limit.

### **Funding Decision**

The funding decision will be made by an Evaluation Committee appointed by the ICPHD. Proposals will be scored according to the points awarded in each section of the application. A scoring matrix will be used to evaluate the proposals. All proposals will be reviewed by the Evaluation Committee and a maximum of one (1) award will be made based on the Evaluation Committee’s recommendation. The notice of intent to make awards, when decided, will be posted at <https://purchasing.imperialcounty.org/rfqs-rfps/>. Notice of intent to make awards and denials of awards will be mailed to all applicants after the notice of intent to make an award has been posted.

Protests rules can be found in the Purchasing Departments Purchasing Policy. Appeals or objections must be specific, identifying the nature of the protest or objection, and stating all of the facts that form the basis for the appeal. The Applicant must also specify the reason(s) for the appeal or objection citing law, rule, regulation or procedures upon which the appeal is based. Any appeal or objection must be forwarded to the Imperial County Purchasing Department by certified or registered mail or delivered in person.

### **Rejection of Proposals**

The County of Imperial reserves the right to reject any or all proposals received in response to this RFP, or to cancel this RFP if it is deemed to be in the best interest of the County of Imperial to do so. Failure to submit a complete proposal that follows the proposal format requested will disqualify the proposal. Neither supplements nor late proposals will be accepted.

### **Proposal Scoring**

Responsive proposals will be scored as noted below. Each proposal must contain all information requested in the RFP, as well as any other information the Evaluation Committee will need to effectively evaluate the proposal.

<b>CATEGORY</b>	<b>TOTAL POSSIBLE SCORE</b>
1. Entity Profile and Qualifications	10 points
2. Personnel	10 points
3. Project Description and Scope of Work	45 points
4. Evaluation Design, Implementation, Analysis and Dissemination Plan	25 points
5. Budget Proposal	10 points
<b>Total Possible Points</b>	<b>100 points</b>

### **Administrative Requirements**

The County of Imperial reserves the right to accept or reject any or all proposals submitted, or to request clarification or additional information or an alternative presentation of data from any applicant, at the County's sole discretion. Further, while every effort has been made to ensure the information presented in the RFP is accurate and thorough, the County accepts no responsibility or liability for any unintentional errors or omissions in this document.

All proposals become the property of the County, and as such, become public record available for review by the public upon request. The Government Code Sections 6250 et. seq., the Public Records Act, defines public records as any writing containing information relating to the conduct of the public's business. This applies to proposals submitted pursuant to this RFP. The Public Records Act provides that public records shall be disclosed upon written request, and that any citizen has the right to inspect any public records, unless the document is exempted from the disclosure requirements. The County cannot represent or guarantee that any information submitted in response to the RFP will be confidential.

### **Compliance with Nondiscrimination Laws**

The law requires that persons or organizations that receive public funds may not unlawfully discriminate against persons for certain reasons. You must complete the attached Statement of Nondiscrimination Compliance Form (Exhibit E). The Statement of Compliance must accompany the proposal to comply with Government Code Section 12990 and California Administrative Code, Title 11, Division 4, Chapter 5.

### **Proof of Nonprofit Status/Articles of Incorporation**

Nonprofit organizations must provide documentation evidencing tax-exempt status from either the Internal Revenue Service or the Franchise Tax Board. Applicants who are corporations (profit or non-profit) must submit a copy of the organization's Articles of Incorporation and evidence of official action by its governing body to submit a proposal. If an organization is in the process of being incorporated by the California Secretary of State, a proposal may be submitted contingent upon providing proof of the incorporation process.

### **Contract Requirements**

It is recognized that the formal basis of any agreement between the County and the Applicant is a contract rather than a proposal. In submitting price quotes, Applicants must indicate that they are prepared to complete a contract containing all the information submitted in their price quote. The price quote will become part of the contract between the County and the successful Applicant. A sample of the County's standard contract is included as Attachment A.

### **Insurance Requirements**

Evidence must be provided of the Applicant's ability to obtain coverage in the required amounts during each contract year. The Applicant must provide evidence of the ability and intent to

maintain the required coverage and to name the County of Imperial and Imperial County Public Health Department as additional insured. A standard certificate of insurance describing the current insurance coverage issued by a broker or agent must be presented prior to the commencement date of the contract. A letter from an insurance company or broker confirming the fact that coverage can begin on the projected start date of the project is adequate for the purpose of submitting a proposal.

If awarded a contract, the Applicant shall maintain insurance coverage, including errors and omissions and worker's compensation, reflecting the minimum amounts and conditions specified by the County.

**Undue Influence**

The Applicant declares and warrants that no undue influence or pressure is used against or in concert with any officer or employee of the County in connection with the award or terms of the Agreement that will be executed as a result of this RFP, including any method of coercion, confidential financial arrangement, or financial inducement. No officer or employee of the County will receive compensation, directly or indirectly, from the Applicant, or from any officer, employee, or agent of the Applicant, in connection with the award of the Agreement of any work to be conducted as a result of the RFP. Violation of this Section shall be a material breach of the Agreement/Contract entitling the County to any and all remedies by law or in equity.

**Other Requirements**

As needed or required, applicants must provide copies of all permits, employee licenses or business, state and/or clinic licenses needed for the prospective contractor to perform the proposed services.

**Inquiries**

Questions and/or requests for information regarding this RFP will be responded to collectively and made available via an addendum issuance. All inquiries must be submitted in writing no later than 4:00 p.m. on November 9, 2023, to the contact person below.

No oral questions will be taken or responded to except for administrative clarifications.

**County of Imperial**

**Attn: Rhoda Hoffman**

**Subject line: Language Access Plan and Language Access Policy**

**[Rhodahoffman@co.imperial.ca.us](mailto:Rhodahoffman@co.imperial.ca.us)**

**PROPOSAL CHECKLIST**

This checklist includes the items that must be submitted in the grantees proposal and in the order outlined below. This checklist is to ensure that a complete proposal is submitted. Complete the checklist and submit it as part of the first item.

	Proposal Checklist (Exhibit A)
	Proposal Cover Sheet (Exhibit B)
	Table of Contents
	<p>Proposal Narrative</p> <ul style="list-style-type: none"> <li>Section 1- Entity Profile and Qualifications</li> <li>Section 2- Personnel</li> <li>Section 3- Project Understanding and Analysis of Effort, and Project Timeline</li> <li>Section 4- Evaluation Design, Implementation, Analysis and Dissemination Plan</li> </ul>
	Section 5 – Budget (Exhibit C)
	<p>Appendix</p> <ul style="list-style-type: none"> <li>Job Descriptions</li> <li>Organizational Chart</li> <li>Statement of Non-discrimination Compliance</li> <li>Proof of Non-profit Status</li> <li>Smoke-Free Environment Statement</li> <li>As applicable, copies of all permits, employee licenses or business, state and/or clinic licenses needed for the prospective contractor to perform the proposed services.</li> <li>Additional documents (e.g., Letters of Support)</li> </ul>

PROPOSAL COVER SHEET

Name of Applicant: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Executive Director: \_\_\_\_\_  
Primary Contact: \_\_\_\_\_ Title: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Project Title: Language Access Needs Assessment, Plan and Language Access Services Policy  
Brief overview of the project: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_  
Duration of the Project: \_\_\_\_\_ Expected Start Date: \_\_\_\_\_  
Business Tax ID Number: \_\_\_\_\_

I certify that all statements in this exhibit are true. This certification constitutes a warranty, the falsity of which shall entitle the County of Imperial to pursue any remedy authorized by law which shall include the right, at the option of the County, of declaring any contract made as a result hereof to be void. I agree to provide the County with any other information the County determines is necessary for the accurate determination of the person or Applicant's qualification to provide services.

I certify that \_\_\_\_\_ will comply with all requirements specified in the RFP which are applicable to the services which we wish to provide. I agree to the right of the County to audit financial and other records of said name/Applicant:

\_\_\_\_\_  
\_\_\_\_\_

Name of Applicant or Authorized Agent (please print)

\_\_\_\_\_  
Signature of Applicant or Authorized Agent

\_\_\_\_\_  
Date

**BUDGET PROPOSAL**

Project Term: \_\_\_\_\_

**Section 1: Expense Summary**

<b>Expense Categories</b>	<b>Total of all Proposed costs</b>
Salary	
Fringe	
Operating	
Equipment	
Travel	
Indirect Cost	
Other (Specify)	
<b>Overall Total</b>	<b>\$</b>

**Section 2: Budget Justification**

Provide a detailed justification of the expenses listed in Section 1.

**STATEMENT OF NONDISCRIMINATION COMPLIANCE**

Prospective Contractor agrees that all persons employed by Prospective Contractor shall be treated equally by Prospective Contractor without regard to or because of race, color, religion, ancestry, national origin, handicap, gender, marital status, age, medical condition or sexual orientation and in compliance with all anti-discrimination laws of the United States of America and the State of California. Prospective Contractor agrees that it shall include in its written contracts with any subcontractors a pledge by the subcontractor that the subcontractor will not engage in any unlawful discrimination. Prospective Contractor shall, if requested to do so by the County of Imperial, certify that Prospective Contractor has not discriminated against applicants, employees or subcontractors because of their membership in a protected class during the performance of this Agreement. The County of Imperial hereby notifies Prospective Contractor that Government Code Section 12990 and California Administrative Code, Title II, Division 4, Chapter 5 apply to this Agreement and are incorporated herein by this reference with the same force and effect as if those laws were specifically set out herein and Prospective Contractor agrees to comply with said statute and regulation. "Prospective Contractor" hereby certifies, unless specifically exempted, compliance with Government Code Section 12990 and California Administrative Code, Title II, Division 4, Chapter 5, in matters relating to the development, implementation and maintenance of a nondiscrimination program.

I, \_\_\_\_\_, hereby swear that I am duly authorized to legally bind the Prospective Contractor to the above-described certification. I am fully aware that this certification executed on this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ in the County of Imperial is made under the penalty of perjury under the laws of the State of California.

\_\_\_\_\_  
Name of Authorized Agent (please print)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of Authorized Agent

\_\_\_\_\_  
Date



**SMOKE-FREE ENVIRONMENT STATEMENT**

As a material condition of the contract, the Prospective Contractor agrees that the Prospective Contractor and the Prospective Contractor’s employees, while receiving funding from the County of Imperial:

1. Shall not use/possess tobacco products while using the Prospective Contractor’s property e.g. vehicle, equipment;
2. Shall not sell, offer or provide tobacco products on Prospective Contractor’s premises;
3. The Prospective Contractor will participate in County of Imperial sponsored in-service trainings on tobacco education and cessation and will have tobacco education and cessation materials visibly available and accessible to clients participating in activities funded by the County of Imperial.
4. Prospective Contractor assures that the Prospective Contractor and its employees have no current business association or relationship with the tobacco industry; and
5. The County of Imperial may terminate for default or breach of this Contract and any other Contract the Prospective Contractor has with the County of Imperial, if the Prospective Contractor or Prospective Contractor’s employees, are determined by the contracting officer, not to be in compliance with the conditions set forth in this RFP.

I, \_\_\_\_\_, certify that I will comply with all requirements specified herein in recognition of individual rights to work in a safe, healthy and productive environment.

\_\_\_\_\_  
Name of Authorized Agent (please print)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of Authorized Agent

\_\_\_\_\_  
Date