DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

FULTON COUNTY

Winner 2000- 2008 Achievement of Excellence in Procurement Award
National Purchasing Institute

OUTSTANDING AGENCY ACCREDITATION ACHIEVEMENT AWARD NIGP

Jerome Noble, Director

REQUEST FOR QUOTE NUMBER: 09CT65904YA

WILL BE RECEIVED UNTIL **02/02/2009 @ 2:00p.m. EST.**

DESCRIPTION: The Center for Health and Rehabilitation (CHR) Program Evaluator for the Fulton County Department of Mental Health, Developmental Disabilities and Addictive Diseases

Effective September 1, 2008, the Department of Purchasing & Contract Compliance will only accept responses to quotes electronically using our on-line Vendor Self Service system at www.fultonvendorselfservice.co.ga.us. You must be a registered vendor in order to respond to quotes.

ANY QUESTIONS REGARDING PURCHASING PROCEDURES OR THE SPECIFICATIONS SHOULD BE ADDRESSED ONLY TO THE PURCHASING CONTACT PERSON LISTED BELOW. BIDDERS MAY NOT HAVE CONTACT WITH COUNTY OFFICERS, ELECTED OFFICIALS OR COUNTY EMPLOYEES REGARDING THIS BID PRIOR TO AWARD OF PURCHASE ORDER. VIOLATION OF THIS INSTRUCTION WILL RESULT IN YOUR BID BEING FOUND NON-RESPONSIVE.

CONTACT NAME:	E-Mail Address :	Telephone Number:
Carolyn Towns	carolyn.towns@fultoncountyga.gov	(404) 612 4208

All information requested on this sheet must be completed. Unless specifications indicate "NO SUBSTITUTE", items determined by Fulton County to be "EQUAL OR BETTER" will be given full consideration. All prices QUOTED must be "FOB DELIVERED" unless otherwise requested, and must be submitted in the format requested. The County reserves the right to cancel the solicitation and to reject any or all quotes in whole or in part and is not bound to accept any quote if rejection of that quote is determined to be contrary to the best interest of the County.

Company Name:

Company Address:

City	State	Zip Code

Telephone Number:	Fax Number:	E-Mail Address:

RESPONSES MUST BE SUBMITTED ON-LINE AT www.fultonvendorselfservice.co.ga.us BY THE TIME AND DATE INDICATED.

Person submitting QUOTE: (Please Print) **Date**

Title

***Signature of the person submitting QUOTE:**

***Person submitting this e-quote has binding authority to submit contracts on behalf of the responding company. By submitting a response, vendor agrees that their quote is an offer to sell. All bidders shall comply with all Fulton County purchasing laws, policies, and procedures, as well as relevant state and federal laws— including compliance with EEOC hiring guidelines and requirements under the Americans with Disabilities Act.**

REQUEST FOR QUOTE SPECIFICATIONS
Quote Number: 09CT65904YA
Opening Date: 02/02/2009 @ 2:00p.m. EST.

REQUEST FOR QUOTE
GENERAL TERMS AND CONDITIONS

The following provisions are hereby made a part of this Request for Quote. Any contract or purchase order awarded as the result of this request shall be governed by these General Terms and Conditions. By submission of your responses to this quote, vendor agrees to furnish the product(s) and/or service(s) pursuant to these conditions.

1. **GENERAL.** These provisions are standard for all County contracts. The County may delete or modify any of these standard provisions for a particular contract or purchase order by indicating a change in the special instructions or provisions. **Any vendor accepting a purchase order award as the result of this request agrees that the provisions included within this Request for Quote shall prevail over any conflicting provision within any standard form contract of the vendor.**

2. **SUBMISSION OF RESPONSES.** Responses must be submitted for quotes on-line via the Vendor Self Service system at www.fultonvendorselfservice.co.fulton.ga.us,. Response to quotes must be received no later than 2:00 p.m. on the date indicated.

3. **AMENDMENTS TO THE REQUEST FOR QUOTE.** Any amendment to pricing is valid only if in writing and issued by the County.

4. **NON-COLLUSION.** Bidder certifies that this bid is made without prior understanding, agreement or connection with any other corporation, firm or person submitting a bid for the same work, labor or service to be done or the supplies, materials or equipment to be furnished and is in all respects fair and without collusion or fraud. Bidder further understands collusive bidding is a violation of state and federal law and can result in fines, prison sentences and civil damage awards. Bidder agrees to abide by all conditions of this bid and certifies that person signing is authorized to sign this bid or proposal for the bidder.

5. **CONFLICT OF INTEREST.** Vendor states that no County officer or employee, nor any business entity in which they have an interest: a) Has an interest in the contract awarded; b) Has been employed or retained to solicit or aid in the procuring of the resulting contract; c) Will be employed in the performance of such contract without immediate disclosure of such fact to the County.

6. **BASIS OF AWARD.** The County shall award to the overall lowest responsible and responsive vendor complying with the provisions of the Request for Quote. The following criteria may be considered by the County in selecting the most advantageous quote: a) Ability to perform the service required within the specified time; b) Conformance to specification; c) The quality of performance in previous contracts; d) Financial ability to perform the contract; e) Item pricing; f) vendor references. The County reserves the right to cancel the solicitation and to reject any or all quotes in whole or in part and is not bound to accept any quote if rejection of that quote is determined to be contrary to the best interest of the County.

7. **SAMPLES.** Samples of items when required, must be furnished free of expense to the County and upon request, be returned to the Vendor at the Vendor's expense. Samples of selected items may be retained for comparison purposes.

8. **NEW.** All items bid must be new. Used, rebuilt and refurbished items will not be considered unless specifically authorized by Fulton County in the written specifications.

9. **BRAND NAME SPECIFICATIONS AND APPROVED EQUIVALENTS.** Unless otherwise specified, manufacturer's names, trade names, brand names, information and/or catalog numbers listed in the specifications are intended only to identify the quality and characteristics desired. They are not intended to limit competition. The Vendor may offer any equivalent product which meets or exceeds the specifications. If quotations are based on equivalent products, the quote must: a) Indicate the alternate manufacturer's name and catalog number; b) Include complete descriptive literature and/or specifications; c) Include proof that the proposed equivalent will meet the specifications. The County reserves the right to be the sole judge of what is equal and acceptable to meet its needs in all respects. If Bidder fails to name a substitute, goods identical to the published standard must be furnished.

10. **INDEMNIFICATION.** Contractor/Vendor hereby agrees to release, indemnify, defend and hold harmless the County, it's Commissioners, officers, employees, subcontractors, successors, assigns and agents from and against any and all losses (including death), claims, damages, liabilities, costs and

expenses (including but not limited to all actions, proceedings, or investigations in respect thereof and any outcome of any such action, proceeding, or investigation), caused by, relating to, based upon or arising out of any act or omission by contractor, it's directors, officers, employees, subcontractors, successors, assigns or agents, or otherwise in connection with it's acceptance, of the performance, or nonperformance, of it's obligations under this agreements.

11. **TAXES.** Fulton County is exempt from the State of Georgia sales tax and exemption certificate will be furnished upon request.

12. **DELIVERY.** All prices must be FOB Destination, unloaded inside and assembled unless otherwise indicated.

13. **RIGHTS AND REMEDIES OF COUNTY FOR DEFAULT.** If any item furnished by the Vendor fails to conform to specifications, or to the sample submitted by the Vendor, the County may reject it. Upon rejection, the Vendor must promptly reclaim and remove such item without expense to the County, and shall immediately replace all such rejected items with others conforming to such specification and samples. If the Vendor fails to do so, the County has the right to purchase in the open market a corresponding quantity of any such items and to deduct from any monies due the Vendor the difference between the prices named in the purchase order and the actual cost to the County. If the Vendor fails to make prompt delivery of any item, the County has the right to purchase such item in the open market and to deduct from any monies due the Vendor the difference between the prices named in the purchase order and the actual replacement cost to the County. The rights and remedies of the County identified above are in addition to any other rights and remedies provided by law or under the purchase order.

14. **INVOICES AND PAYMENT TERMS.** Invoices are to be mailed to the County department specified on the resulting purchase order or master agreement. All invoices must include the purchase order number or master agreement number. Failure to comply may result in delayed payments. The County payment terms are Net 30 days unless a cash discount is allowed for payment within not less than twenty (20) days. The payment term shall begin on the date the merchandise is inspected, delivered and accepted by the County and the correct invoice is received in the office specified on the purchase order.

15. **LEGAL REQUIREMENTS.** Federal, State, County and local ordinances, rules and regulations, and policies shall govern development, submittal and evaluation of quote and disputes about quotes. Lack of knowledge by any Vendor about applicable law is not a defense.

16. **ASSIGNMENT.** Any purchase order awarded shall not be assignable by the Vendor without the express written approval of the County, and shall not become an asset in any bankruptcy, receivership or guardianship proceedings.

17. **REJECTION OF BID.** Bids may be considered irregular and may be rejected if they show omissions, alternations of form, additions not called for, conditions, limitations, unauthorized alternate bids or other irregularities of any kind. The County reserves the right to waive minor technicalities or irregularities of bid.

18. **TERMINATION.** In the event any of the provisions of the purchase order are violated, the County may serve written notice of its intention to terminate the purchase order. Such notice will state the reason(s) for such intention, and unless within ten (10) days after serving notice upon the contractor, such violation has ceased and satisfactory arrangements for correction made, the purchase order shall, upon expiration of ten (10) days, be terminated. Further, the County reserves the right to terminate for its convenience any purchase order in whole or in part upon giving thirty (30) days prior written notice to the other party.

19. **DEBARMENT.** If a Bidder is presently debarred, suspended, proposed for debarment, declared ineligible, or otherwise excluded from doing business with any government agency which prohibits your firm from participating in any procurement, the Bidder must provide the County with that information as part of its response to this solicitation. Failure to fully and truthfully provide the information required, may result in the disqualification of your bid from consideration or termination of the purchase order, once awarded.

20. **RIGHT TO PROTEST.** Any actual or prospective Bidder who is aggrieved in connection with a solicitation or award of a contract/purchase order must submit its protest in writing to the Director of Purchasing & Contract Compliance, 130 Peachtree St. S.W., Suite 1168, Atlanta, GA 30303. A protest must be submitted to the Director of Purchasing & Contract Compliance in writing within 14 days after such aggrieved entity knows or should have known of the solicitation, the award of contract/purchase order to another or other acts giving rise to a protest. An oral protest or a protest to an official, employee, user department, or other person apart from the Director of Purchasing does not comply with Fulton County Code Section 2-324 and does not toll the protest time period.

SIGNATURE BELOW IS THAT OF A PERSON AUTHORIZED TO SIGN CONTRACTS FOR THE QUOTING COMPANY WHO HAS READ, UNDERSTANDS, AND AGREES TO COMPLY WITH THE ABOVE GENERAL TERMS AND CONDITIONS.

COMPANY: _____ **SIGNATURE:**_____

NAME: _____ **TITLE:** _____ **DATE:** _____

THIS SIGNED FORM MUST BE SUBMITTED WITH YOUR BID. FAILURE TO DO SO MAY RESULT IN YOUR BID BEING FOUND NON-RESPONSIVE.

REQUEST FOR QUOTE SPECIFICATIONS
Quote Number: 09CT65904YA
Opening Date: 02/02/2009 @ 2:00p.m. EST.

FULTON COUNTY DEPARTMENT OF MENTAL HEALTH, DEVELOPMENTAL DISABILITIES, AND ADDICTIVE DISEASES (MHDDAD) – The Center for Health and Rehabilitation PROGRAM EVALUATOR

1. DESCRIPTION

Fulton County Purchasing Department is soliciting quotes from qualified Vendors to provide Evaluator or evaluation team to evaluate the Center for Health and Rehabilitation for the Mental Health, Developmental Disabilities, and Addictive Diseases (MHDDAD) Department.

2. CONTACT PERSON

Please contact Carolyn Towns, Procurement Officer at (404) 612 4208 or by e-mail carolyn.towns@fulton countyga.gov with any procedural or technical questions. All questions should be submitted in writing to the Department of Purchasing & Contract Compliance contact person. Any responses made by the County will be provided in writing to all Quoters by addendum. **No verbal responses shall be authoritative.**

You must be registered in the County's AMS System in order for the Department of Purchasing & Contract Compliance to issue your company a Purchase Order or to receive payments. If you are not a registered vendor, you may access and complete the vendor application via the County's Vendor Registration website (www.fultonvendorselfservice.co.fulton.ga.us). You must provide a copy of your current Business License in order to complete the vendor registration process.

If your company is a registered vendor, you can respond to all quotes on line and in real time on this website.

3. PRODUCT/SERVICE SPECIFICATIONS

1. The Evaluator shall provide a comprehensive evaluation of the Center for Health and Rehabilitation Program using the Evaluation Logic Model which is most commonly used by research evaluators. **See Appendix "A" for a complete description of the services that are being requested.**
2. The Evaluator shall provide data collected, analyzed and managed and shall have a abilities to evaluate, demonstrate evidence-based outcomes as well as identify "best practices".
3. A detailed written report must be provided to MHDDAD by April 30, 2009. The report should include qualitative and quantitative data, reflective of goals and outcome objectives as stated in the program's plan. The evaluator will review first calendar quarter data (January – March 2009) and submit a written report to Program Manager by April 30th. At the end of each quarter in which data was collected a written preliminary report will be due by the 10th of the next month.

Example of report schedule	Due Date
Review data for January – March and Quarterly Report	April 30, 2009
Review data for April – June and Quarterly Report	July 10, 2009
Review data for July – September and Quarterly Report	October 10, 2009
Review data for October – December Quarterly Report	January 10, 2010

4. PRICING SHEETS

Show information and prices in the format requested. Prices are to be quoted F.O.B. Destination, and shall include all costs chargeable to the contractor in executing the purchase order. Unless otherwise provided in the purchase order. Fulton County shall have no liability for any cost not included in the price. The Contractor shall provide Fulton County the benefit through a reduction in price of any decrease in the Contractor's costs by reason of any tax exemption based upon Fulton County's status as a Tax-Exempt Entity.

1.	Review data for January – March and Quarterly Report	Unit Price $_____
2.	Review data for April -June and Quarterly Report	Unit Price $_____
3.	Review data for July -September and Quarterly Report	Unit Price $_____
4.	Review data for October –December and Quarterly Report	Unit Price $_____
5.	Final Report	Unit Price $_____

5. SPECIAL CONDITIONS/INSTRUCTIONS

The successful contractor must be able to produce documentation to show the validity of findings.

Quoter must provide the name and address of Evaluator that will perform the evaluations for your firm along with quote.

Name
_____

Street Address
_____

City, State, Zip
_____

Telephone Number
_____

Billing Instructions:

Upon notification of results to Fulton County, Vendor agrees to provide an invoice of all activity performed.

Please mail all invoices to the address listed below:
Fulton County MHDDAD Department
Attn: Kevin Larry, Program Manager
265 Boulevard, NE
Atlanta, GA 30312

6. INSURANCE & RISK MANAGEMENT PROVISIONS

Insurance and Risk Management Provisions
Consulting Services

It is Fulton County Government's practice to obtain Certificates of Insurance from our Contractors and Vendors. Insurance must be written by a licensed agent in a company licensed to write insurance in the State of Georgia, with an A.M. Best rating of at least A- VI, subject to final approval by Fulton County. Respondents shall submit with the bid/proposal evidence of insurability satisfactory to Fulton County Government as to form and content. Either of the following forms of evidence is acceptable:

- A letter from an insurance carrier stating that upon your firm/company being the successful Bidder/Respondent that a Certificate of Insurance shall be issued in compliance with the Insurance and Risk Management Provisions outlined below.
- A Certificate of Insurance complying with the Insurance and Risk Management Provisions outlined below (Request for Bid/Proposal number and Scope of Services must appear on the Certificate of Insurance).
- A combination of specific policies written with an umbrella policy covering liabilities in excess of the required limits is acceptable to achieve the applicable insurance coverage levels.

Upon award, the Contractor/Vendor must maintain at their expense, insurance with policy limits equal to or greater than the limits described below. Proof of insurance must be provided to Fulton County Government prior to the start of any activities/services as described in the bid document(s). Any and all Insurance Coverage(s) and Bonds required under the terms and conditions of the contract shall be maintained during the entire length of the contract, including any extensions or renewals thereto, and until all work has been completed to the satisfaction of Fulton County Government.

Accordingly the Respondent shall provide a certificate evidencing the following:

1. WORKERS COMPENSATION/EMPLOYER'S LIABILITY INSURANCE – STATUTORY (In compliance with the Georgia Workers Compensation Acts and any other State or Federal Acts or Provisions in which jurisdiction may be granted)

Employer's Liability Insurance	BY ACCIDENT	EACH ACCIDENT	$1,000,000
Employer's Liability Insurance	BY DISEASE	POLICY LIMIT	$1,000,000
Employer's Liability Insurance	BY DISEASE	EACH EMPLOYEE	$1,000,000

2. COMMERCIAL GENERAL LIABILITY INSURANCE (Including contractual Liability Insurance)

Bodily Injury and Property Damage Liability	Each Occurrence	$1,000,000
(Other than Products/Completed Operations)General Aggregate		$2,000,000
Products\Completed Operation	Aggregate Limit	$2,000,000
Personal and Advertising Injury	Limits	$1,000,000
Fire Damage	Limits	$100,000

3. BUSINESS AUTOMOBILE LIABILITY INSURANCE

Combined Single Limits Each Occurrence $1,000,000
(Including operation of non-owned, owned, and hired automobiles).

4. UMBRELLA LIABILITY
(In excess of above noted coverages) Each Occurrence $5,000,000

5. PROFESSIONAL LIABILITY Per Claim/Aggregate $5,000,000
(To be provided when the Contract includes specified Professional Services, and will be written with all Environmental/Pollution exclusions deleted).
Extended Reporting Period 3-5 Years

6. FIDELITY BOND and CRIME
(Employee Dishonesty) (Theft) Each Occurrence $ 100,000
Above to include 3rd Party Coverage

Certificates of Insurance

Certificates shall state that the policy or policies shall not expire, be cancelled or altered without at least sixty (60) days prior written notice to Fulton County Government. Policies and Certificates of Insurance are to list Fulton County Government as an Additional Insured (except for Workers' Compensation) and shall conform to all terms and conditions (including coverage of the indemnification and hold harmless agreement) contained in the Insurance and Risk Management Provisions. The General Liability Additional Insured language should apply to on-going and completed-operations, using ISO form CG 2010 (11/85 version) or equivalent.

The Contractor agrees to name the Owner and all other parties required of the Contractor/Vendor shall be included as insureds on the CGL, using ISO Additional Insured Endorsement forms CG 2010 11/85 or its equivalent coverage to the additional insureds. This insurance for the additional insureds shall be as broad as the coverage provided for the named insured Subcontractor. It shall apply as Primary Insurance before any other insurance or self-insurance, including any deductible, non-contributory, and Waiver of Subrogation provided to the Additional Insureds.

Additional Insured under the General Liability, Auto Liability, Umbrella Policies (with exception of Workers Compensation and Professional Liability), with no Cross Suits exclusion.

If Fulton County Government shall so request, the Respondent, Contractor or Vendor will furnish the County for its inspection and approval such policies of insurance with all endorsements, or confirmed specimens thereof certified by the insurance company to be true and correct copies.

Such certificates and notices **must** identify the "Certificate Holder" as follows:

Fulton County Government – Department of Purchasing & Contract Compliance
130 Peachtree Street, S.W.
Suite 1168
Atlanta, Georgia 30303-3459

Certificates **must** list Project Name (where applicable).

Important: It is understood that **Insurance in no way Limits the Liability of the Contractor/Vendor.**

USE OF PREMISES

Contractor/Vendor shall confine its apparatus, the storage of materials and the operations of its workers to limits/requirements indicated by law, ordinance, permits and any restrictions of Fulton County Government and shall not unreasonably encumber the premises with its materials.

PROTECTION OF PROPERTY

Contractor/Vendor will adequately protect its own work from damage, will protect Fulton County Government's property from damage or loss and will take all necessary precautions during the progress of the work to protect all persons and the property of others from damage or loss.

Contractor/Vendor shall take all necessary precautions for the safety of employees of the work and shall comply with all applicable provisions of the Federal, State and local safety laws and building codes to prevent accidents or injury to persons on, about, or adjacent to the premises where work is being performed.

Contractor/Vendor shall erect and properly maintain at all times as required by the conditions and progress of the work, all necessary safeguards for the protection of its employees, Fulton County Government employees and the public and shall post all applicable signage and other warning devices t protect against potential hazards for the work being performed.

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

To the fullest extent of the Law, Contractor/Vendor hereby agrees to release, indemnify, defend and hold harmless Fulton County, its Commissioners, officers, employees, subcontractors, successors, assigns and agents, from and against any and all losses (including death), claims, damages, liabilities, costs and expenses (including but not limited to all actions, proceedings, or investigations in respect thereof and any costs of judgments, settlements, court costs, attorney's fees or expenses, regardless of the outcome of any such action, proceeding, or investigation), caused by, relating to, based upon or arising out of any act or omission by Contractor/Vendor, its directors, officers, employees, subcontractors, successors, assigns or agents, or otherwise in connection (directly or indirectly) with its acceptance, or the performance, or nonperformance, of its obligations under these agreements. Such obligations shall not be construed to negate, abridge or otherwise reduce any other rights or obligations of indemnity which would otherwise exist as to any party or person as set forth in this paragraph.

Contractor/Vendor's obligation to protect, defend, indemnify and hold harmless, as set forth hereinabove, shall also include, but is not limited to, any matter arising out of any actual or alleged infringement of any patent, trademark, copyright, or service mark, or other actual or alleged unfair competition disparagement of product or service, or other tort or any type whatsoever, or any actual or alleged violation of trade regulations.

Contractor/Vendor further agrees to protect, defend, indemnify and hold harmless Fulton County, its Commissioners, officers, employees, subcontractors, successors, assigns and agents from and against any and all claims or liability for compensation under the Worker's Compensation Act, Disability Benefits Act, or any other employee benefits act arising out of injuries sustained by any employees of Contractor/Vendor. These indemnities shall not be limited by reason of the listing of any insurance coverage.

If the bid/quotation involves construction services Contractor/Vendor will be responsible fully for any and all damage to the work during the course of construction, until the point of Final acceptance by Fulton County.

FULTON COUNTY ACKNOWLEDGES THAT ALL PROVISIONS OF THIS INDEMNITY AGREEMENT MAY NOT BE APPLICABLE TO THE CONTRACTOR/VENDOR'S BUSINESS. TO THE EXTENT THAT CONTRACTOR/VENDOR MAY DEMONSTRATE SUCH NONAPPLICABILITY, FULTON COUNTY MAY NEGOTIATE AMENDMENTS TO THIS AGREEMENT AS THE CIRCUMSTANCES DICTATE.

CONTRACTOR/VENDOR ACKNOWLEDGES HAVING READ, UNDERSTANDING, AND AGREEING TO COMPLY WITH THIS INDEMNIFICATION AND HOLD HARMLESS AGREEMENT, AND THE REPRESENTATIVE OF THE CONTRACTOR/VENDOR IDENTIFIED BELOW IS AUTHORIZED TO SIGN CONTRACTS ON BEHALF OF THE RESPONDING CONTRACTOR/VENDOR.
COMPANY: _____ SIGNATURE: _____
NAME: _____TITLE: _____DATE: _____

APPENDIX A

The Center for Health and Rehabilitation

The Center for Health and Rehabilitation is a curriculum-based prevention and health promotion program that uses the Matrix Model which is an evidence-based program. Fulton County, Center for Health and Rehabilitation services adults between the ages of 18 and beyond. Participants are identified through a screening process which is done by a Behavioral Health Assistant, who will go to various shelters, and mental health facilities located in Fulton County. The program was established to promote healthy decision-making skills that eventually lead to informed choices and decisions surrounding drug and alcohol use.

Where will these services be performed?

Services will be conducted at The Center for Health and Rehabilitation, which is located at 265 Boulevard NE, Atlanta, GA 30312.

Goals of the Center for Health and Rehabilitation Program

The external evaluator will provide a comprehensive evaluation to assess the overall impact of the program on adult homeless male substance abusers on decision making skills related to drug and alcohol use, program implementation, and program effectiveness, Specifically, evaluation will assess

- **Cognitive and behavioral impact –** how has program participation changed prior knowledge, specifically the processes and outcomes related to making decisions about drug and alcohol use and how this reflected in behavioral measures.
- **Process Evaluation –** has the program been implemented as proposed?
- **Operational effectiveness –** have there been significant changes and challenges in implementation of the program.

Outcome Evaluation

If the Center for Health and Rehabilitation program has been successful in developing healthy decision-making skills essential for breaking the cycle of addiction which leads to crime, poor health, and incarceration, then the adults after exposure to the program versus before exposure will (while holding demographic variables and contaminating variables constant):

Cognitive impact

(1) Show an increase in their knowledge on the post test versus the pre test to questions related to decisions about drug and alcohol use.
(2) Demonstrate that they can accurately list the pros and cons of engaging in substance abuse.
(3) Have more cons versus pros related to drug and alcohol use after exposure to the program.
(4) Indicate the appropriate behavioral intentions and positive attitudes toward engaging in educational/career pursuit after exposure to the program.
(5) Have identified mentor/individuals who they could turn to when challenged with a decision related to drugs and alcohol use.
(6) Teacher and program evaluation will be positive.

Behavioral impact

(7) Improvement in Health (Mind & Body)
(8) Improvement in drug screens (negative urine drug screens)
(9) Attending NA and/or AA meetings and has a sponsor.

SCOPE and DELIVERABLES

The Center for Health and Rehabilitation evaluation will be performed at various shelters and mental health facilities located in Fulton County were program is implemented. The primary responsibilities and duties are:

- Designing assessment and other evaluation tools;
- Collecting original data from the different program implementation sites via visits, phone calls, e-mails or other electronic means;
- Collecting, coding, and analyzing data to identify and assess program fidelity and it's impact on participants; and
- Disseminating via mid-project and final reports the impact of program implementation, overall and as function of type of site, staff, demographic variables of participants, and curriculum used.

Evaluation Logic Model

The program evaluation for The Center for Health and Rehabilitation will consist of an evaluation of the program fidelity, process and outcomes. Although there are different types of evaluation models, the model being requested to evaluate the Center for Health and Rehabilitation program is the Evaluation Logic Model which is most commonly used by research evaluators.

Materials

Successful candidate(s) will develop an evaluation tool to assess the dependent variables such as survey questions and archival records.

Procedure

The Center for Health and Rehabilitation staff will meet with the project/research director and team to facilitate retrieving archived data. Data analyses and report preparation will be conducted by the project director and staff.

Analyses

Data of all the Fulton County sites will be analyzed and recommendations will be based on results for the analyses for best practices overall with individual site specifications.

Project Evaluation Period

The project will not exceed 12 months from date of award.

Project Schedule	**Due Date**
Review data for January – March and Quarterly Report	April 30, 2009

Review data for April – June and Quarterly Report	July 10, 2009
Review data for July – September and Quarterly Report	October 10, 2009
Review data for October – December Quarterly Report	January 10, 2010
Final Report	March 10, 2010