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SEP 2 2008

LANCASTER COUNTY BOARD

SEP 19 2008

**GRANT CONTRACT**

LANCASTER COUNTY BOARD

THIS GRANT CONTRACT is made and entered into by and between the **CITY OF LINCOLN, NEBRASKA**, a municipal corporation, hereinafter referred to as "**Sponsor**", and **Lincoln Council on Alcoholism and Drugs, Inc.**, a non-profit corporation, hereinafter referred to as "**Grantee**".

**WITNESSETH:**

**WHEREAS**, the Sponsor is required or authorized to expend funds for the following services by the provisions of §13-604 R.R.S 1943; and

**WHEREAS**, the Sponsor has authority in the areas of recreation, health, and other community development activities; and

**WHEREAS**, the Grantee has established programs the purpose of which is to provide educational, recreational, social, health, spiritual, cultural, and care-giving activities for the benefit of the citizens of Lancaster County and specifically for the participants at Lincoln Council on Alcoholism and Drugs, Inc.

**NOW, THEREFORE**, in consideration of the mutual covenants herein contained, it is agreed as follows by the parties hereto:

**1. Purpose.** The purpose of this Grant Contract is to provide funding for the Substance Abuse Prevention Program, as described in Attachment "A", attached hereto and hereby incorporated by this reference.

**2. Scope of Services.** The Grantee agrees to perform the duties described in Attachment "B" attached hereto and incorporated by this reference.

**3. Project.** Grantee agrees that it shall expend the funds granted hereunder only for the purposes authorized in Paragraph 1 above.

**4. Grant.** In order to assist the Grantee in financing the cost of the project described in Paragraph 1 above for a period of twelve (12) months from September 1, 2008 to August 31, 2009, the Sponsor shall make a Grant in the amount of \$37,000.00, from the General Fund.

**5. Project Budget.** A project budget shall be prepared and maintained by Grantee. Grantee shall carry out the project and shall incur obligations against and make disbursements of funds provided hereunder by the Sponsor only in conformity with the project budget as approved by the Sponsor. Said project budget may be revised from time to time, but no budget or revision thereof shall be effective unless and until the same is approved by the Sponsor.

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**6. Account Procedures and Records.** (a) Grantee shall establish for the project one or more separate accounts which shall be approved by the Sponsor, or its designated representative. Said account or accounts shall be maintained within Grantee's existing accounting system or set up independently. Said accounts are referred to herein collectively as "Project Account."

(b) Grantee shall appropriately record in the Project Account, and deposit in a bank or other corporate fiduciary, all grant payments received from the Sponsor pursuant to this Contract.

(c) Grantee shall charge to the Project Account all eligible costs of the project in accordance with the project budget. Costs in excess of the latest approved budget or attributable to actions which have not received the required approval of the governing body of the Sponsor shall not be incurred, and Sponsor shall not be liable for any such unauthorized costs, directly or indirectly.

(d) All costs charged to the Project Account shall be supported by properly executed payroll, time records, invoices, contracts, or vouchers evidencing in proper detail the nature and propriety of the charges.

(e) Any check or order drawn by Grantee with respect to any item which is or will be chargeable against the Project Account will be drawn only in accordance with a properly signed voucher then on file in the office of Grantee, stating in proper detail the purpose for which such check or order is drawn. All checks, payroll, invoices, contracts, vouchers, orders, or other accounting documents pertaining in whole or in part to the project shall be clearly identified, readily accessible, and to the extent feasible, kept separate and apart from all other documents maintained by Grantee.

**7. Payment of Grant.** Payments made hereunder shall be handled as all other claims against the Sponsor. Grantee shall submit a claim or claims to the Sponsor in accordance with the provisions of the following reimbursement schedule or at such times as indicated therein: On or after September 1, 2008 = 1/4 of grant award; on or after December 1, 2008 = 1/4 of grant award; on or after March 1, 2009 = 1/4 of grant award; and on or after June 1, 2009 - 1/4 of grant award. Payment of each claim will be made by the Sponsor only after Project Monitor assures the Sponsor in writing that services rendered by Grantee prior to the date of making the claim were performed in accordance with the Grant Contract and completed in a timely manner.

**8. Audit and Inspection.** Grantee shall permit and shall require its agents and employees to permit the Sponsor or its authorized representative to inspect all work, materials, payroll, records of personnel, invoices of materials, and other relevant data and records; and to audit the books, records, and accounts of Grantee pertaining to the grant and project provided herein. Grantee shall submit two copies of its annual independent audit to the Sponsor or its designated representative within thirty (30) days of receipt of such audit.

**9. Project Monitor.** The project shall be monitored by the Sponsor through the Lincoln-Lancaster County Administrator of Human Services. The Sponsor

and its designated representative shall be provided such financial and program service reports as they shall deem necessary during the contract period. Based upon these reports and upon her observations of the operation of the project, the Lincoln-Lancaster County Administrator of Human Services shall submit reports required by Sponsor, containing her review of the progress of the project. In the event of noncompliance with this Agreement by Grantee, the Project Monitor shall report said noncompliance to the Joint Budget Committee and the City Council of the City of Lincoln for further action which may include termination of the agreement.

**10. Human Services Planning.** Grantee shall participate in any comprehensive, long-range human services planning process being conducted by the City of Lincoln and Lancaster County. Failure to comply with this requirement shall constitute a breach of this contract.

**11. Contract of Grantee.** Grantee shall not execute any contract or obligate itself in any other manner with any third party with respect to the project provided herein without the prior written concurrence of the Sponsor or its designated representative.

**12. Equal Employment Opportunity.** In connection with the carrying out of the project provided herein, Grantee shall not discriminate against any employee or applicant for employment because of race, color, religion, sex, disability, national origin, age, or marital status. In the employment of persons, Grantee shall comply with the provisions of Chapter 11.08 of the Lincoln Municipal Code and shall take affirmative action to ensure that applicants are employed and that employees are treated during employment without regard to their race, color, religion, sex, disability, national origin, age, or marital status.

**13. Hold Harmless and Insurance Requirements.** The Grantee shall indemnify and save harmless the Sponsor, its agents, employees and representatives from and against all losses, claims, damages, and expenses, including attorney's fees, arising out of or resulting from the performance of this contract that results in bodily injury, sickness, disease, death, or to injury to or destruction of tangible property, including the loss of use resulting therefrom, and is caused in whole or in part by the Grantee, its employees, agents or representatives, either directly or indirectly employed by them. This section will not require the Grantee to indemnify or hold harmless the Sponsor for any losses, claims, damages and expenses arising out of or resulting from the negligent or intentional acts of the Sponsor, its agents, or employees.

The Grantee shall carry insurance in the following kinds and minimum limits:

**A. Workers' Compensation Insurance and Employer's Liability Insurance**

Grantee shall purchase and maintain during the life of this contract the applicable

Workers' Compensation Insurance, fully insuring its employees as required by law. Said insurance shall be obtained from an insurance company which is authorized to do business in the State of Nebraska.

**B. General Liability Insurance**

The Contractor shall purchase and maintain during the life of this contract, General Liability Insurance, naming and protecting them and the Sponsor against claims for damages resulting from (1) bodily injury, including wrongful death, (2) personal injury liability and (3) property damage which may arise from operations under this contract whether such operations be by Grantee or any one directly or indirectly employed by them. The minimum acceptable limits of liability to be provided by such insurance shall be as follows:

- |     |                               |                             |
|-----|-------------------------------|-----------------------------|
| (1) | Bodily Injury/Property Damage | \$1,000,000 Each Occurrence |
|     |                               | \$2,000,000 Aggregate       |
| (2) | Personal Injury Damage        | \$1,000,000 Each Occurrence |

**C. Automotive Liability Insurance**

- |                                 |                                   |
|---------------------------------|-----------------------------------|
| Bodily Injury & Property Damage | \$1,000,000 Combined Single Limit |
|---------------------------------|-----------------------------------|

The Grantee shall not commence work under this contract until it has obtained all insurance required under this section and has provided the Sponsor with a Certificate of Insurance showing the specific limits of insurance required by this section and showing the City of Lincoln as an additional insured. Such certificate shall specifically state that insurance policies are to be endorsed to require the insurer to provide the City of Lincoln thirty (30) days notice of cancellation, non-renewal or any material reduction of insurance coverage.

**14. Prohibited Interests.** Neither Grantee nor any of its contractors or their subcontractors shall enter into any contract, subcontract, or arrangement in connection with the project provided herein, or any property included or planned to be included in the project in which any officer, agent, or employee of Grantee during his tenure or for one year thereafter has any financial interest, direct or indirect.

**15. Sponsor Not Obligated to Third Parties.** Sponsor shall not be obligated or liable hereunder to any party other than the Grantee.

**16. Breach or Default by Grantee.** In the event of any breach or default hereunder by Grantee during the term of the Grant Contract in performing the terms and conditions required hereunder, then and upon the happening of such event, Sponsor shall give written notice to Grantee of such breach or default, and Grantee

shall immediately surrender to Sponsor or its designated representative any balance remaining in the Project Account. Grantee shall be liable to Sponsor for immediate repayment of any unauthorized expenditure of funds from the Project Account.

**17. Severability.** If any portion of this Grant Contract is held invalid, the remainder hereof shall not be affected thereby if such remainder would then continue to conform to the terms and requirements of the applicable law.

**18. Term.** The term of this Grant Contract shall be for a period of twelve (12) months from and after September 1, 2008 through August 31, 2009. Any unencumbered balance remaining on Project Account upon termination shall be returned to Sponsor. This Grant Contract will be automatically renewed under the same terms and conditions, including compensation in the amount of \$37,000, for one additional period of twelve (12) months from September 1, 2009 to August 31, 2010, unless the Sponsor notifies the Grantee in writing no later than April 30, 2009 that the Grant will not be renewed. Payments during the additional period shall be made according to Paragraph 7 above, except that payments shall be made in accordance with the provisions of the following reimbursement schedule or at such times as indicated therein: On or after September 1, 2009 = ¼ of grant award; on or after December 1, 2009 = ¼ of grant award; on or after March 1, 2010 = ¼ of grant award; and on or after June 1, 2010 – ¼ of grant award.

EXECUTED by Grantee this 17<sup>th</sup> day of September, 2008.

LINCOLN COUNCIL ON ALCOHOLISM AND DRUGS, INC.  
A Nonprofit Corporation, Grantee.

ATTEST:

By: A. L. Logan

By: Karen Heusel

Title: Finance Manager

Title: Executive Director

EXECUTED by Sponsor this 17<sup>th</sup> day of September, 2008.

ATTEST:

CITY OF LINCOLN, NEBRASKA  
a municipal corporation, Sponsor

\_\_\_\_\_  
City Clerk

\_\_\_\_\_  
Mayor

Approved as to Form this 21<sup>st</sup> day  
of September, 2008.

[Signature]  
Chief Assistant City Attorney

# LINCOLN COUNCIL ON ALCOHOLISM AND DRUGS, INC.

Prepared for Joint Budget Committee

September 2008

Attachment A

## Program Description

The Lincoln Council on Alcoholism and Drugs has provided research based prevention and evaluation services throughout Lincoln and the surrounding area for over 45 years. In the past few years we entered a new phase of providing prevention programs and service to our community by collaborating with numerous other agencies, organizations, and many community members to build a prevention system that is truly responsive to the needs of the residents of Lincoln and Lancaster County. *LCAD prevention staff is providing leadership to community groups in four Lincoln neighborhoods and four rural Lancaster County communities.* Each group is addressing substance use and abuse issues at the neighborhood level. These groups include parents, educators, business partners, faith community, health care professionals, law enforcement and other interested persons to develop strategies and programs that will affect change in the substance use norms in their individual neighborhoods. *A Safe Home Network of parents is being established with nearly 2000 families currently participating with new members being added monthly.*

In addition, *a community-wide youth group has been organized that is taking a look at the issue of underage drinking as well as marijuana and tobacco use by youth.* This group is a safe place where youth can have open, honest discussions about the role alcohol, tobacco and other drugs (ATOD) play in society. It also gives them the opportunity to take action and be a part of positive change in our community. These youth are *developing awareness and education programs to present to the community at large and especially policy makers.* They also *coordinate programs that provide all youth the opportunity to engage in alternative activities that allow young people to have fun and socialize with each other without the presence of ATOD.*

The highly trained LCAD staff is involved in a number of *specific training opportunities* as they relate to the national effort to reduce substance abuse. We provide *staff support and technical assistance to the prevention leadership group* which is made up of representatives from each of the community groups including the youth group. We also have *liaisons to the various ethnic community and cultural centers in Lincoln* providing training and educational programs to members of the minority communities that are represented here.

LCAD offers *alcohol education classes in English, Spanish, and Vietnamese* by trained presenters. These classes satisfy the court requirements for individuals who are arrested for driving under the influence or other minor drug charges.

The overall mission of LCAD is to *promote healthy lifestyles free from the abuse of alcohol, tobacco and other drugs.* It is a broad mission and one that addresses the entire community. LCAD's prevention program fits well within this mission as the programs we offer and the community development that we are facilitating around the issue of substance abuse prevention relate directly to the mission.

**LINCOLN COUNCIL ON ALCOHOLISM AND DRUGS, INC.**  
**Prepared for Joint Budget Committee**  
**September 2008**  
**Attachment B**

Activities To Be Conducted

Each of the eight community groups and the youth group *all hold monthly meetings* for education and planning purposes. *Average attendance is 10-15 per community group with routinely 15-20 teens participating in the youth group.* Each group implements strategies to address the issue of substance use in their high school area and surrounding neighborhoods.

These include but are not limited to:

- \*Safe Homes Network of parents
- \*Fifth Quarter events after football and basketball games
- \*Normative Belief Campaigns
- \*Activities surrounding celebrating safely during prom and graduation season
- \*County-wide media campaign with a "call to action"
- \*Provide leadership to the prevention team of the Substance Abuse Action Coalition
- \*Coordinate data collection activities related to community groups
- \*Maintain information and referral service, audio visual library, and communication and media efforts for the general public.

*Each quarter at least one community-wide alternative activity for youth will be held.*

These events include but are not limited to:

- \*Four middle school dances and parties
- \*Skating party for elementary school children
- \*New Years Eve Bash
- \*Free Fest end of school celebration

Based on attendance in the past we estimate *reaching at least 3,500 youth* through these activities.

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
07/23/08

<b>PRODUCER</b> INSPRO Insurance 1919 S 40th St. Suite #104 P.O. Box 6847 Lincoln, NE 68506		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
<b>INSURED</b> Lincoln Council on Alcoholism & Drugs 914 "L" Street Lincoln, NE 68508		<b>INSURERS AFFORDING COVERAGE</b>	<b>NAIC #</b> 14184
		INSURER A: Acuity	
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	

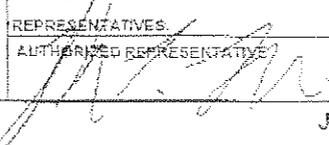
**COVERAGES**

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSURER ADD'L LTR	INSURED	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	F782406	11/07/07	11/07/08	EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (EA OCCUR/ACC) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/CP AGG \$
A		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	F782406	11/07/07	11/07/08	COMBINED SINGLE LIMIT (EA accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	F782406	11/07/07	11/07/08	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$100,000 E.L. DISEASE - EA EMPLOYEE \$100,000 E.L. DISEASE - POLICY LIMIT \$500,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS**

City of Lincoln/Lancaster County is listed as additional insured.

<b>CERTIFICATE HOLDER</b> City of Lincoln/Lancaster County 555 S. 10th St. Lincoln, NE 68508 475-2699	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE: 
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# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
11/28/2007

PRODUCER  
Union Agency, Inc.  
4719 Prescott Avenue  
P.O. Box 6205  
Lincoln, NE 68506

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED  
Lincoln Council On Alcoholism And Drugs, Inc.  
914 L Street  
Lincoln, NE 68508

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Scottsdale Insurance Company	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

## COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <b>Owners &amp; Contractors</b>  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	CLS1444457	11/7/2007	11/7/2008	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000	
		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$	
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC AGG \$	
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$	
		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS OTHER \$ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	
		OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  
10 DAYS NOTICE OF CANCELLATION FOR NON PAYMENT.

## CERTIFICATE HOLDER

City of Lincoln  
555 S. 10th  
Lincoln, NE 68508-

is named as additional insured

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

*Kenneth F. Bell*