

RESOLUTION ENTERING GRANT AGREEMENT WITH DELTA DENTAL FOUNDATION, ASHTABULA COUNTY COMMISSIONERS

WHEREAS, J. P. Ducro, Ashtabula County Commissioner, has prepared a grant application to Delta Dental and has received a Grant Agreement for an award to use for the RAM Clinic in 2025; to-wit:

Grant Period: 12 months beginning retroactive to 08/01/2024 and ending 07/31/2025

Grantor: Delta Dental Foundation, 4100 Okemos Road, Okemos, MI 48864

Purpose: To help fund the 2025 Ram Clinic through its fiscal agent Civic Development Corporation of Ashtabula County

Amount: \$5,000.00; and

WHEREAS, The Commissioners feel such services would be desirable and is necessary; now

THEREFORE, BE IT RESOLVED, By the Board of Commissioners of Ashtabula County, Ohio hereby accept the grant in accordance with a copy of said grant on file in this office.

BE IT FURTHER RESOLVED that the President of the Board, on behalf of the Board of Commissioners of Ashtabula County, is authorized to execute any and all necessary documents.

**ASHTABULA COUNTY COMMISSIONERS
CERTIFICATION PAGE**

Resolution No. 2024-504

November 05, 2024

**RESOLUTION ENTERING GRANT AGREEMENT WITH DELTA DENTAL
FOUNDATION, ASHTABULA COUNTY COMMISSIONERS**

Upon the motion of Casey R. Kozlowski, seconded by J.P. Ducro IV.

VOTE:

Kathryn L. Whittington

Aye

J.P. Ducro IV


Aye

Casey R. Kozlowski

Aye

CERTIFICATE OF CLERK

IT IS HEREBY CERTIFIED that the foregoing is a true and correct transcript of a resolution acted upon and duly passed by the Board of County Commissioners of Ashtabula County, Ohio, on the date noted above.



Crystal Sturgill, Clerk of the Board, *Acting*
Board of County Commissioners
Ashtabula County, Ohio



GRANT AGREEMENT

This Grant Agreement ("Agreement") is made as of 07-23-2024 ("the "Effective Date"), and entered by and between Delta Dental Fund dba Delta Dental Foundation, with its principal place of business at 4100 Okemos Road, Okemos, MI 48864 (hereinafter referred to as "Grantor"), and Ashtabula County with its principal place of business at 25 West Jefferson St, Jefferson, OH 44047 (hereinafter referred to as "Grantee") (collectively the "Parties").

WHEREAS, Grantee has submitted a proposal to Grantor received on 06-21-2024 (the "Proposal") to request financial contribution towards funding the Remote Area Medical (RAM) Clinic described therein (the "Project"); and

WHEREAS, Grantor agrees to make a grant to Grantee for \$5,000 as a financial contribution towards the Project, subject to the terms and conditions set forth herein (the "Grant").

NOW, THEREFORE, the Parties agree to as follows:

1. **Scope of Project.** Grantee shall perform the Project as set forth in the Proposal, a copy which is provided as Attachment A, and which is incorporated by reference herein. Any variations in the Project or the use of Grant funds from that described in the Proposal requires the advance express written approval of Grantor.

2. **Project Period.** The Project has been approved for a period of 12 months beginning 08-01-2024 and ending 07-31-2025 (the "Project Period").

Should Grantee desire to extend the duration of the Project Period, Grantee shall submit a written request to Grantor no later than sixty (60) days prior to the Project Period end date. If Grantor approves the extension, the Parties shall execute an amendment to this Agreement. An extension of the Project Period will not result in an increase in funding.

3. **Expenditures.** All expenditures of Grant funds by Grantee must be spent within the Project Period and must be consistent with the project budget as set forth in the Proposal (the "Project Budget") and as approved by Grantor, a copy of which is attached hereto as Attachment B.

Any deviation from the Project Budget, such as under-spending or overspending Grant funds requires prior written approval of Grantor and may require an amendment to this Agreement, at the discretion of Grantor. Deviations from the Project Budget are not authorized retroactively.

4. **Records and Reports.** Grantee agrees to keep a record of all receipts and expenditures relating to this Grant and to provide Grantor with any requested interim reports in addition to a final written report summarizing the Project ("General Grant Report") promptly, but no later than thirty (30) days following the end of the Project Period. A copy of the report is also available online at www.deltadental.foundation/general-grant-requests. Grantee report(s) should describe the progress in achieving the purposes of the Grant and include a detailed financial report and project status reports along with any other information reasonably requested by Grantor in a format acceptable to Grantor. If Grantee's organization obtains any audited financial statements covering any part of the Project Period of this Grant, please provide a copy to Grantor as well. Grantee is

4100 Okemos Road • Okemos, MI 48864 • 517-347-5333 • deltadental.foundation

A 501(c)(3) non-profit corporation affiliated with Delta Dental of Michigan, Ohio, Indiana, and North Carolina

required to keep the financial records with respect to this Grant, along with copies of any reports submitted to Grantor, for at least four (4) years following the end of the Project Period.

5. **Disbursement Schedule.** Grantor will disburse Grant funds according to the following schedule. Some disbursement dates may be contingent on receipt and approval of financial and project status reports.

Amount	On or About
\$5,000	August 2024

Grantor, in its sole discretion, reserves the right to alter the above disbursement schedule at any time and to impose such conditions upon disbursements as it may, in its discretion, deem necessary.

6. **Grantor Right to Review and Evaluate.** Grantor shall have the right to review and conduct an evaluation of the Project funded by this Grant, which may include one or more visits from Grantor personnel to observe the Project, discuss the Project with Grantee's personnel and review financial and other non-patient records and materials connected with the activities funded by this Grant. All financial and other non-patient records relating to the Project shall be made available at Grantee's regular place of business for inspection by Grantor, or its designated representative, at reasonable times with advance written notice to Grantee. In the event Grantor finds non-compliance by Grantee related to the Project, at the discretion of Grantor, Grantee will be given an opportunity to correct any non-compliance issues. If Grantee fails to correct identified non-compliance issues within an agreed upon timeframe, Grantor may terminate this Agreement as set forth in Section 13 of this Agreement.

7. **Title to Property Acquired with Grant Funds.** Title to all tangible personal property, fixtures or equipment purchased with Grantor funds ("Grant Funded Property"), shall be vested in Grantee. However, Grantor shall have a purchase money security interest in the Grant Funded Property until the General Grant Report has been accepted by Grantor. Grant Funded Property must be used for carrying out the Project as set forth in the Proposal.

8. **Intellectual Property.** Grantee owns any intellectual property it produces within the scope of this Grant. Grantee agrees that all original material produced pursuant to this Grant will be made available to Grantor under a perpetual, irrevocable, royalty-free, nonexclusive, worldwide license to Grantor. Grantee assumes the burden and expense of clearing all third-party rights associated with such material, including but not limited to copyrights, trademarks, and rights of privacy and publicity.

9. **Right to Return of Funds or Property.** Any Grantor funds not used by Grantee for the purposes of the Project as approved in the Project Budget remain the property of Grantor and shall be promptly returned to Grantor at the conclusion of the Project Period. Any Grantor funds misused by Grantee shall be repaid to Grantor. If Grantee fails to repay any portion of the Grant due, Grantor may take possession of the Grant Funded Property. Nothing contained in this paragraph shall limit or prevent Grantor from taking legal action to seek repayment of unexpended Grant funds or Grant funds which were not applied in accordance with the terms of this Agreement.

10. **Publicity.** Grantee agrees that Grantor may include information about the Grant award for the Project, including the name of the Grantee, a description of the Project and the amount of the Grant on Grantor's website and in reports, press releases, documents, presentations, studies, tax returns and other public disclosures. All materials, reports, press releases, documents, presentations, studies, etc., that are generated by the Grantee in connection with the Project shall need to be submitted to Grantor for review with a minimum of fifteen (15) business days prior to date of submission for publication and shall make reference to Delta Dental Foundation and include Grantor's name and logo as supplied by Grantor.

11. **Use of Project Results.** If Grantee desires to publish the results of this Project, Grantor shall have a minimum of fifteen (15) business days to review and comment upon the draft publication before submission for final publication. Grantor shall have a perpetual, irrevocable, royalty-free, nonexclusive, worldwide license to make, use, reproduce, distribute, display or make derivative works of all or any portion of the project results by any and all means and in any medium or format, now known or later developed.

12. **Releases.** Grantee agrees that he/she shall execute all of the necessary Authorization Waiver and Release form(s) provided by Grantor for any and all organizations or individuals whose images will be used as part of the Project.

13. **Termination.** Grantor may, in its sole discretion, immediately terminate this Agreement upon written notice to the Grantee. In the event this Agreement is terminated pursuant to this paragraph, Grantor shall have no obligation to make any contributions to the Grantee following the effective date of the termination.

14. **Compliance with Laws.** In carrying out the Project, Grantee will comply with all applicable laws, regulations and rules and will not infringe, misappropriate, or violate the intellectual property, privacy, or publicity rights of any third party.

15. **Indemnification.** To the maximum extent permitted by law, neither party shall have an obligation to the other party to indemnify, defend, or hold harmless the other party, its affiliates, officers, directors, or employees in regard to any claim or legal action arising under this Agreement. Each party to this Agreement must seek its own legal representative and bear its own costs, including judgements, in the litigation that may arise from performance of this Agreement.

16. **Authority and Validity.** Each individual executing this Agreement on behalf of Grantee warrants that he has full power and authority to execute this Agreement on behalf of such organization. Grantee further warrants that this Agreement constitutes the valid and binding obligation of Grantee, enforceable in accordance with its terms.

17. **Nondiscrimination.** Grantee affirms that Grantee will not discriminate on the basis of race, color, sex, religion, national origin, age, disability, sexual orientation, gender identity or veteran status either in its employment practices or in its policies and procedures concerning access to services.

18. **No Guarantee of Future Funding.** Allocation of this Grant does not imply any future funding commitment by Grantor.

19. **Entire Agreement.** This Grant Agreement and all attachments constitute the entire Agreement between the Parties regarding the Project and supersede all previous related understandings or written form and must be signed by an authorized representative of both Grantor and Grantee.

20. **Amendment.** Unless otherwise permitted herein, any alteration in the terms of this Agreement must be in written form and must be signed by an authorized representative of both Grantor and Grantee.

21. **Governing Law and Venue.** This Agreement shall be governed by and construed according to the laws of the State of Ohio without regard to its choice of law principles. The parties agree that venue and jurisdiction shall properly lie in the state or federal courts of Ashtabula County, Ohio.

22. **Assignment.** Grantee may not assign or delegate obligations under this Agreement, either in whole or in part, without Grantor's prior written consent.

23. **No Agency.** The Grantee is solely responsible for all activities supported by the Grant. Nothing in this Agreement creates a partnership, agency, joint venture, employment, or any other type of relationship. The Grantee shall not represent itself as an agent of Grantor for any purpose, and no authority to bind Grantor in any manner whatsoever.

24. **Survival.** Each party's obligations under Section 4. Records and Reports, Section 10. Publicity, Section 11. Use of Project Results, Section 12. Releases, and Section 15. Indemnification shall survive the expiration or termination of this Agreement and shall remain in full force and effect.

25. **Counterparts and Electronic Signatures.** Except as may be prohibited by applicable law or regulation, this Agreement and any amendment may be signed in counterparts, by facsimile, PDF, or other electronic means, each of which will be deemed an original and all of which when taken together will constitute one agreement.

IN WITNESS WHEREOF, the Parties hereto have executed this Agreement as of the day and year first written above.

Ashtabula County

By (signature):  Title: President
Print Name: Kathryn Whittington Date: 11-5-24

Delta Dental Fund dba Delta Dental Foundation

Signed by:
By (signature):  Title: Executive Director
Print Name: Holli Seabury Date: Nov 1, 2024 | 4:13 PM EDT

Approved as to Legal Form Only:

By: _____


Colleen M. O'Toole,
Ashtabula County Prosecutor

Application: CMG-0000001463

J.P. Ducro - jpducro@ashtabulacounty.us
Community Mini-Grants Program

Summary

ID: CMG-0000001463
Last submitted: Jun 21 2024 10:24 AM (EDT)

Community Mini-grants Program Application

Completed - Jun 21 2024

Community Mini-Grants Program Application Form

2024 Community Mini-Grants Program

The Delta Dental Foundation (DDF) was established in 1980 as a nonprofit, charitable organization and serves as the philanthropic arm of Delta Dental of Michigan, Ohio, and Indiana. Each year, the DDF provides financial support through its Community Mini-Grants Program to various community organizations and programs that promote or provide oral health care and initiatives in Michigan, Ohio and Indiana.

This year, the DDF will be providing grants to support programs that are designed to: increase dental access for underrepresented and high-risk populations; provide educational programming on the importance of oral health and how it relates to overall health; identify and reduce health disparities related to oral health; and diversify and strengthen the dental workforce.

In considering Community Mini-Grant requests, the DDF evaluates each application on its own merit. Careful consideration is given to each request, and requests are reviewed in terms of general eligibility and conformity with grant guidelines, funds available and the amount needed to achieve the desired results and program priorities. Also taken into consideration are: programs/activities in which the requesting organization is engaged; the number and type of constituencies served; services offered; accountability and fundraising practices; availability of other funding sources; and past successes.

If your organization is interested in receiving materials such as toothbrushes, floss, toothpaste or educational resources, please submit an [in-kind](#)

application in lieu of the mini-grant application.
<https://www.deltadental.foundation/in-kind-requests>. Please note: The DDF does not typically fund requests for the purchase of the items above.

Is your organization looking ONLY for funding to cover toothbrushes, toothpaste, floss and/or educational resources?

If yes, you will be redirected to our in-kind materials application where you can request those materials directly through the DDF.

No

Organization Information

Organization Name	Ashtabula County Commissioners
Tax ID	34-6000128
Tax Status	Exempt
Address	25 West Jefferson St.
City	Jefferson
State	Ohio
Zip Code	44047
Phone	440-576-3750
Email	jducro@ashtabulacounty.us
Website	www.ashtabulacounty.us

Is your organization a non-profit?

No

Organization Type

Select the option that best describes your organization:

Responses Selected:

Government

Organization Primary Contact Information

Pronoun(s)	He/Him
First Name	J.P.
Last Name	Ducro
Suffix	IV
Title	Commissioner
Mailing address	25 West Jefferson St.
City	Jefferson
State	Ohio
Zip code	44047
Phone	440-969-4914
Email	jpducro@ashtabulacounty.us

Applicant Contact Information

Responses Selected:

Same as Primary Contact

Project Information

Program/Project Title

Remote Area Medical (RAM) Clinic

Strategic Aim

Select the ONE strategic aim that best encompasses your program. (Check only one)

Responses Selected:

Access to Care

What age group does your program serve?

Select the option that best describes the age group your program serves.

Responses Selected:

All Ages

What population does your program serve?

Select your program's PRIMARY population of focus. (check only one)

Responses Selected:

Low-income

What is your secondary population of focus (if any)?

Select your program's secondary population of focus. (check only one, if any)

Responses Selected:

General Population

Race Served

If you have this data available, please indicate the racial and ethnic breakdown of the population you serve.

# Caucasian	89337
# Black/African American	3643
# Asian	419
# Native American/Alaskan Native	75
# Native Hawaiian/Pacific Islander	9
# Hispanic/Latino	4447
# Other	809

Known Poverty Level

If you have this data available, please enter the number of patients served below.

# Patients at or Below 100% of Federal Poverty Guideline	17898
# Patients at or Below 200% of Federal Poverty Guideline	14333

Known Insurance Status

If you have this data available, please enter the number of patients served below.

# None/Uninsured Patients	(No response)
# Medicaid/CHIP Patients	(No response)
# Medicare Patients	(No response)

Which state(s) does your program serve?

Select the state(s) which your program's funding will impact. (Check all that apply)

Responses Selected:

Ohio

Ohio County List

Select all that will be impacted by this funding request

Responses Selected:

Ashtabula

How many people does your organization serve annually?

Estimate the number of people you serve in all aspects of your organization (medical, dental, behavioral, dental, etc.).

450

How many people will this program serve?

Estimate the number of people who will participate in the specific program for which you're requesting funding.

450

TOTAL Cost of Program/Project

\$ 11775

Amount Requested from DDF

\$ 10000

Are you seeking other sponsors or funding?

Yes

If yes, please list:

We have many sponsors for the event as we seek in kind donations of food to feed the volunteers setting up for and working the clinic as well as donations of lodging accommodations to house the medical, dental, and vision professionals and students as well as the Core RAM Staff that come to put on the clinic for our community. Sponsors include local restaurants, caterers, hotels, and Air BnB and short-term lodging providers. In addition, local hospital systems, health departments, service organizations, media outlets, and community resources help sponsor by offering items such as time, resources, in-kind donations, and staffed vendor tables at the event. We also receive some monetary donations from the community that help offset additional costs for the clinic such as women's health exams and supplemental snacks or supplies.

Is your organization providing any funding for this program?

No

Program Start Date:

Mar 22 2025

Program End Date:

Leave blank if ongoing

Mar 24 2025

Provide a brief description of the program for which funds are requested.

The project is the Remote Area Medical (RAM) Clinic which provides free medical, dental, and vision care to the uninsured or underinsured. It not only serves veterans, children, and the homeless, but often working poor with no insurance or high deductible plans. Services include free dental cleanings, filling, and extractions, free prescription eye glasses, and various medical services including women's health. The 2025 clinic will be the sixth year and is held annually however it was interrupted for 2 years due to COVID. Ashtabula County hosted the first clinic in the state and has served over 4000 patients receiving almost \$3.5 million in care including 2581 dental extractions, 2122 fillings, and hundreds of teeth cleanings.

What is unique about your program and why should DDF fund it?

The Ashtabula RAM Clinic is the only clinic of its kind in the area. It provides service to anyone in need regardless of income or insurance. Many people have insurance but their deductibles or copays make the cost still unmanageable. In many cases, the clients at the clinic are the "working poor". About 10% of the patients are children and the clinic is held in the largest school district in the county in which 100% of the students qualify for free lunch. The dental component of the clinic is the driver. Last year, 40 individual service tents were set up taking up two gymnasiums in the school. Our Dental Lead coordinates close to 100 student and professional volunteers from the local, state, and out of state organizations and educational institutions to fill this aspect of the clinic. We even had volunteers from Canada this past year. Ashtabula County is considered a health care desert and there is only one dental facility in the area that takes Medicaid for insurance. Our committee members actually lobbied at the state level and were able to change state law to make it more practical and possible for out of state professionals to volunteer at clinics such as this, paving the way for other clinics to be held in Ohio and our clinic to grow and continue.

Describe follow-up activities or evaluation processes that are a part of this program.

How do you plan to track or measure the effectiveness of your program/organization?

Each year, we have a goal to grow the number of people served at our RAM Clinic and impact more members of our community. The next clinic will be our 6th. Every person that is served is a person that is likely to have not been able to access care for their condition without the help of the RAM Clinic. We seek feedback from patients leaving the clinic and have always received positive comments from patients and the community. I think the greatest measure for us are the hugs, tears, words, and notes of appreciation from people that have been served at the clinic.

How did you hear about this grant opportunity?

Our CEBCO insurance rep Wendy Dillingham emailed us information on the program.

Are you a 2023 recipient of a Community Mini-grant?

No

Budget Requirements/Requests

Completed - Jun 20 2024

Outline the budget requirements ONLY for the program your organization is requesting funding for. Make sure to provide as much detail as possible by separating out the line items appropriately.

[Delta Dental Budget Narrative](#)

Filename: Delta_Dental_Budget_Narrative.docx Size: 14.6 kB

Community Mini-grant reporting form

Incomplete

If you have not submitted a 2023 Community mini-grant reporting form, please include it with this application in order to be considered for a 2024 grant.

IRS Documentation

Completed - Jun 21 2024

IRS public charity classification, reason for non-private foundation status.

[exempt status](#)

Filename: exempt_status.pdf Size: 306.7 kB

Completed W-9

Completed - Jun 21 2024

Please attach a completed, signed W-9 for your organization. The form MUST be a 2018 version, no earlier versions will be accepted. The form version is indicated in the top left corner of the form.

[2024 W-9 Ashtabula County \(1\) 202401081042220425](#)

Filename: 2024_W-9_Ashabula_County_1_202401_u00k1f.pdf Size: 225.5 kB

Additional Documentation

Completed - Jun 20 2024

[Ashtabula one pager CHG](#)

Filename: Ashtabula_one_pager_CHG.xlsx Size: 117.2 kB

[RAM 2](#)

Filename: RAM_2.jpg Size: 204.1 kB

[RAM 4](#)

Filename: RAM_4.jpg Size: 464.6 kB

[RAM 1](#)

Filename: RAM_1.jpg Size: 395.4 kB

[RAM 3](#)

Filename: RAM_3.jpg Size: 340.9 kB

[RAM 7](#)

Filename: RAM_7.jpg Size: 200.5 kB

[RAM 6](#)

Filename: RAM_6.jpg Size: 454.5 kB

[RAM 5](#)

Filename: RAM_5.jpg Size: 485.1 kB

Use of Lakeside High School for Venue, Custodial and Food Service Staff,	
Water, Coffee, and supplies	\$6500
Security	\$1200
Cleaning of Housing Unit	\$ 125
Biohazard Waste Removal	\$ 700
Marketing	\$ 250
T-shirts for Volunteers (435)	<u>\$3000</u>
Total Clinic Budget	\$11,775

The event is held at a local high school (Lakeside High School/Ashtabula Area City Schools) where the clinic takes up the cafeteria, the auditorium, several class rooms, and 2 gymnasiums. Custodial, kitchen, and admin staff are present throughout the clinic. Beverages such as bottled water and coffee to keep volunteers hydrated and alert during the long day as well as table service and napkins for the volunteers use to eat the food that has been donated are supplemented by the school to make sure we have enough of those items beyond anything that has been donated. \$6559 was their costs incurred last year and they may work with us to reduce part of the costs as a charitable donation if necessary.

Security is required by RAM for any clinic to have a law enforcement officer on premises from the time of set up until tear down. Very valuable equipment is present and sometimes there are people present with addiction or mental health issues seeking services that can be more than the volunteers can handle. Therefore, security is required during the clinic for everyone's safety and protection. Off duty officers work for \$30 per hour and we have an officer on scene for a total of 40 hours over the 3 day period from set up to clinic tear down completion.

One housing unit for RAM Core Staff requires cleaning fee of \$125 even though the lodging is donated by the provider.

We need to pay for biohazard waste removal from a professional company to discard medical waste safely and properly. All buckets with fluid collected via suction during dental procedures is disposed of in this manner as well as any bloody gauze or other biohazard materials from the clinic.

Marketing - This is a county-wide event and we promote through printed flyers posted in local businesses and high traffic areas, dispersing flyers to students through the schools, and inserts in our local paper. We also leverage free radio PSA's and media opportunities as well as community speaking engagements where flyers are dispersed.

Social media is also used to promote the clinic primarily through Facebook. The marketing costs are primarily printing costs as much of the advertising is done through in kind donations with our local weekly paper who is a community partner.

T-Shirts - We have nearly 500 individual volunteers both locally and from other areas of Ohio and surrounding states that offer their time and talents free of charge to make this clinic possible. We feel it is important to have any volunteer easily identified while at the clinic both for the patients and the RAM team to know who they are working with and can go to for assistance. This also promotes camaraderie, enhances safety, and gives something to the volunteers who have been so gracious to help our community.

We have partnered with the a local non-profit, the Ashtabula County Civic Development Corporation (CDC) which has served as the fiscal agent on this project in past years. Donations for the event funnel through them to offset expenses and they handle the bookkeeping and issuing of checks to pay expenses. We would likely be making a donation check in the amount of this grant to them if permitted. That would be our preference administratively.

Please let us know if you have any further questions about the budget or the clinic that we can answer to be helpful.