

**AGENDA REQUEST FORM**

**Agenda Item:** To consider and/or approve a Contract between Cleveland County Health Department and Sarah Hill to provide Cooking classes at The Well.

**Name of Person Submitting Request:** Melody Bays, Regional Director

**Address:** Cleveland County Health Department  
250 12<sup>th</sup> Ave. NE  
Norman, OK 73071

**Phone:** (405) 579-2261

**Date Requested:** 05/05/2026

**Description of Agenda Item including purpose for consideration by Board of County Commissioners (include type of Motion requested).**

To consider and/or approve a Contract between Cleveland County Health Department and Sarah Hill to provide cooking classes at The Well.

The Health Department will pay \$30 per hour at The Well. The contract is to be effective April 28, 2026 through June 30, 2026.

**Internal Use Only**

Received by: \_\_\_\_\_

Acknowledge: \_\_\_\_\_ (Chairman)

Date Assigned: \_\_\_\_\_

\_\_\_\_\_ (Member)

Applicant Notified: \_\_\_\_\_

\_\_\_\_\_ (Member)

Routine (Consent) Item: \_\_\_\_\_

Other Parties Notified: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(405) 800-4530

**CLEVELAND COUNTY HEALTH DEPARTMENT  
Independent Contractor Agreement FY 2026**

Hill.Sunny@gmail.com

This Independent Contractor Agreement ("Agreement") is entered into between the Cleveland County Health Department ("CCHD") and Sarah Hill ("Contractor"), for the purpose of Contractor providing professional services as described herein in order to support the mission of the Cleveland County Wellness Square to make Cleveland County the healthiest and happiest it can be through the provision of access, education, programs, events, and activities for all residents.

**I. Purpose**

The purpose of this Agreement is to provide instructor services at the Cleveland County Wellness Square, a community hub providing public health programming. The Well is a cooperative effort of the Cleveland County Health Department and Cleveland County.

**II. Term**

This Agreement is to be effective on April 28, 2026 through June 30, 2026, and may be renewed annually by mutual written approval by both parties. This Agreement shall not take effect until the CCHD receives copy containing original signatures of both parties and a purchase order has been issued.

**III. Termination**

This Agreement may be terminated by either party with thirty (30) days written notice. CCHD reserves the exclusive right to schedule or not schedule certain classes and/or programs in its sole discretion based on its overall programming needs and availability. Any written notice shall be mailed to the other party at the following addresses:

CCHD  
The Well  
210 S. James Garner  
Norman, OK 73069

Contractor:

Sarah Hill  
1521 Willow Creek Ct. Norman OK  
73071

Unavailability of Funding: In the event county, state, or federal funds used to support this Agreement become unavailable, either in full or in part, due to reductions in appropriations, the CCHD may terminate or reduce this Agreement upon notice in writing to the Contractor by Certified Mail. The CCHD shall be the final authority as to the availability of funds. The effective date of such contract termination or reduction shall be specified in the notice. In the event of a reduction, the Contractor may cancel this contract as of the effective date of the proposed reduction upon advance written notice to the CCHD.

**IV. Compensation**

In exchange for the services provided by Contractor to CCHD, CCHD shall pay Contractor \$30.00 per hour.



## **VI. Amendments**

Any modifications or amendments to this Agreement shall be in writing, dated and executed by both the Contractor and CCHD.

## **VII. Applicable Law and Venue**

This contract shall be governed in all respects by the laws of the State of Oklahoma. Any legal cause of action arising out the obligations in this Agreement shall be brought solely in the Oklahoma District Court of Cleveland County or the United States District Court for the Western District of Oklahoma.

## **VIII. Indemnity and Liability**

Contractor hereby acknowledges and agrees that it is responsible for any damage caused by Contractor to CCHD property and that it will indemnify and hold harmless the CCHD for any claim or cause of action brought against the CCHD arising out of any act or omission of Contractor or its agents arising out of the duties imposed by Contractor in this Agreement.

## **IX. CCHD Contact Person**

For the purposes of this Agreement, all contacts with The Well shall be directed to its representative, Tara McClain, at [tara.mcclain@health.ok.gov](mailto:tara.mcclain@health.ok.gov).

## **X. Contractor's Relation to CCHD**

Contractor is in all respects an Independent Contractor and is neither an agent nor an employee of the CCHD. Neither the Contractor nor any of its officers, employees, agents, or members shall have authority to bind the CCHD nor are they entitled to any of the benefits or workers compensation provided by the CCHD to its employees.

## **XI. Entire Agreement**

This Agreement represents all the terms and conditions agreed upon by the parties. No other understandings or representations, oral or otherwise, regarding the subject matter of this Agreement shall be deemed to exist or to bind any of the parties hereto.

## **XII. Failure to Comply Statement**

Contractor shall be subject to applicable state and federal laws, rules and regulations, and all amendments thereto. Contractor agrees that noncompliance may result in this Agreement being suspended or canceled in part or in whole.

## **XIII. Non-Collusion**

Contractor shall complete and return a non-collusion affidavit.

## **XIV. Tobacco Free Policy**

The Well is a tobacco-free facility. To the extent allowed by Oklahoma law, the Contractor providing services to the public on behalf of the CCHD shall follow the OSDH tobacco-free policy in performance of services for the CCHD.

**XV. Waiver of Breach**

No failure by the CCHD to enforce any provisions hereof after any event of default by the Contractor shall be deemed a waiver of the CCHD rights with regard to that event, or any subsequent event. Waiver shall not be construed to be a modification of the terms of the contract.

**XVI. Workers Compensation and Employer's Liability**

Contractor is required to comply with applicable federal and state workers compensation statutes. Contractor shall be responsible for maintaining insurability as required by state and federal ordinances, statutes, or regulations, including workers compensation, automobile insurance, or general liability, as applicable.

**XVII. Procurement Integrity**

By signing this Agreement, Contractor attests and assures it has made no payment or donation, either directly or indirectly, to any elected or appointed official, officer or employee of the State of Oklahoma or its political subdivisions, nor waived payment of any money or other thing of value due to Contractor in order to obtain this Agreement or other contracts. Nor has Contractor entered into this Agreement with this or any other state agency that would result in a substantial duplication of the services or duplication of the end product rendered by Contractor or its employees.

*[The rest of this page is intentionally left blank.]*

APPROVED this 28<sup>th</sup> day of April, 2026.

By: Cleveland County Health Department  
250 12<sup>th</sup> Ave.  
Norman, OK 73071



Melody Bays  
Administrator

Date: 4-28-26



Name: Sarah Hill  
Contractor

Date: 4/28/2026

APPROVED by the Board of County Commissioners this \_\_\_ day of \_\_\_\_\_, 2026.

\_\_\_\_\_  
Chairman Jacob McHughes

\_\_\_\_\_  
Vice-Chairman Rusty Grissom

\_\_\_\_\_  
Member Rod Cleveland

Attest:

\_\_\_\_\_  
Pam Howlett  
County Clerk

Deputy ; \_\_\_\_\_