



JEFFERSON COUNTY PUBLIC HEALTH

615 Sheridan Street ♦ Port Townsend ♦ Washington ♦ 98368

www.jeffersoncountypublichealth.org

October 16, 2012

JEFFERSON COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA REQUEST

TO: Board of County Commissioners
Philip Morley, County Administrator

FROM: Jean Baldwin, Director

DATE: November 5, 2012

SUBJECT: Agenda Item – Consolidated Contract, Amendment #5 with the Department of Health; January 1, 2012 – December 31, 2014; add'l \$18,032 total \$748,733

STATEMENT OF ISSUE:

Jefferson County Public Health is requesting Board approval of the Consolidated Contract, Amendment #5 with the Department of Health; January 1, 2012 – December 31, 2014; add'l \$18,032 total \$748,733

ANALYSIS/STRATEGIC GOALS/PRO'S and CON'S:

This agreement with the Department of Health is a 5-year agreement containing both State & Federal Funds. This amendment adds \$18,032 in revenue to the existing contract. The affected programs are as follows:

- \$14,532; Family Planning; January 2012 – December 2012
This is a continuation of Family Planning services provided by Title X funding.
- \$-0-; Public Health Emergency Preparedness & Response; August 2012 – June 2013
This amendment reflects a change in reporting dates only.
- \$3,500; Recreational Shellfish Activities; January 2012 – June 30, 2012
These funds will help meet the increased demand for monitoring biotoxins. Due to the large geographic area beach closures, additional staff time was required for closure sign posting and outreach. This is the first year beaches have been closed due to Diarrhetic Shellfish Poisoning, which required even more staff time devoted to monitoring, additional sign posting and outreach.

FISCAL IMPACT/COST BENEFIT ANALYSIS:

This amendment is through the Department of Health and adds \$18,032 in revenue for a total of \$748,733 and represents State and Federal money.

COMMUNITY HEALTH
DEVELOPMENTAL DISABILITIES
MAIN: (360) 385-9400
FAX: (360) 385-9401

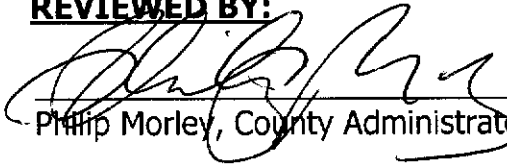
PUBLIC HEALTH
ALWAYS WORKING FOR A SAFER AND
HEALTHIER COMMUNITY

ENVIRONMENTAL HEALTH
WATER QUALITY
MAIN: (360) 385-9444
FAX: (360) 379-4487

RECOMMENDATION:

JCPH management request approval of the Consolidated Contract, Amendment #5 with the Department of Health; January 1, 2012 – December 31, 2014; add'l \$18,032 total \$748,733

REVIEWED BY:


Philip Morley, County Administrator

10/19/12
Date

JEFFERSON COUNTY PUBLIC HEALTH
2012 – 2014 CONSOLIDATED CONTRACT

CONTRACT NUMBER: C16887

AMENDMENT NUMBER: 5

PURPOSE OF CHANGE: To amend this contract between the DEPARTMENT OF HEALTH hereinafter referred to as "DOH", and JEFFERSON COUNTY PUBLIC HEALTH hereinafter referred to as "LHJ", pursuant to the Modifications/Waivers clause, and to make necessary changes within the scope of this contract and any subsequent amendments thereto.

IT IS MUTUALLY AGREED: That the contract is hereby amended as follows:

1. Exhibit A Statements of Work, attached and incorporated by this reference, are amended as follows:
 - Adds Statements of Work for the following programs:
 - Amends Statements of Work for the following programs:
 - Family Planning - Effective January 1, 2012
 - Public Health Emergency Preparedness & Response (PHEPR) - Effective August 10, 2012
 - Recreational Shellfish Activities - Effective January 1, 2012
 - Deletes Statements of Work for the following programs:
2. Exhibit B-5 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-4 Allocations as follows:
 - Increase of \$18,032 for a revised maximum consideration of \$748,733.
 - Decrease of _____ for a revised maximum consideration of _____.
 - No change in the maximum consideration of _____.
Exhibit B Allocations are attached only for informational purposes.

Unless designated otherwise herein, the effective date of this amendment is the date of execution.


ALL OTHER TERMS AND CONDITIONS of the original contract and any subsequent amendments remain in full force and effect.

IN WITNESS WHEREOF, the undersigned has affixed his/her signature in execution thereof.

JEFFERSON COUNTY PUBLIC HEALTH

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

Approved as to form only: ^{Date}


Jefferson Co. Prosecutor's Office

Date

APPROVED AS TO FORM ONLY
Assistant Attorney General

2012-2014 CONSOLIDATED CONTRACT
EXHIBIT A
STATEMENTS OF WORK
TABLE OF CONTENTS

DOH Program Name or Title: Family Planning - Effective January 1, 2012 3
DOH Program Name or Title: Public Health Emergency Preparedness & Response (PHEPR) – Effective August 10, 2012 14
DOH Program Name or Title: Recreational Shellfish Activities - Effective January 1, 2012 17

**Exhibit A
Statement of Work
Contract Term: 2012-2014**

DOH Program Name or Title: Family Planning - Effective January 1, 2012 Local Health Jurisdiction Name: Jefferson County Public Health Contract Number: C16887

SOW Type: Revision Revision # (for this SOW) 1

Period of Performance: January 1, 2012 through December 31, 2012

<input checked="" type="checkbox"/> Funding Source	<input checked="" type="checkbox"/> Federal Compliance (if applicable)	<input checked="" type="checkbox"/> Type of Payment
<input checked="" type="checkbox"/> Federal Subrecipient	<input type="checkbox"/> ARRA (Recovery Act)	<input checked="" type="checkbox"/> Reimbursement
<input checked="" type="checkbox"/> State	<input checked="" type="checkbox"/> FFATA (Transparency Act)	<input type="checkbox"/> Fixed Price
<input type="checkbox"/> Other		

Statement of Work Purpose: The purpose of this statement of work is to provide family planning and reproductive health services to Washington State residents. The LHI shall provide the goods and services as described in Exhibit A, Statement of Work and Title X Assurance of Compliance.

Revision Purpose: The purpose of this revision is to add new funding to support more work on existing tasks and change the DOH program contact..

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHI Use Only) Start Date End Date	Current Consideration	Change Increase (+)	Total Consideration
FPRH ST ADMIN-CONTRACTS (TX MATCH)	N/A	334.04.91	78352120	01/01/12 12/30/12	60,403	0	60,403
FFY12 FPRH TX ADMIN-CONTRACTS	93.217	333.93.21	78352221	01/01/12 12/30/12	29,730	14,532	44,262
TOTALS					90,133	14,532	104,665

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.0	FPRH State Funds (All funds within the 1. Task series are subject to the Special Funding Requirements. Any funds that have the designation of "placeholder" represent estimates that are likely to change.)		Submit: Reimbursement Workbook (a.k.a. R&E) that shows each state fund source	For the Period: 01/01/12 - 06/30/12 Due: 08/31/12 For the Period: 07/01/12 - 12/31/12 Due: 01/31/13	
1.1	Scope of Services The LHI must provide the following services to clients in accordance with all state, federal, and FPRH guidelines and as specified in this contract for: - medical - information and education - referrals - community education		Submit: Clinic Visit Records (CVRs) to Region X Family Planning Reporting System	Previous Month: Due: 15th of the month	
1.2	Medical Services / Community Education (FPRH Manual, Chapters 2, 5-6, Title X Guidelines ,6.8-6.10, 7.0-10.0)		Submit: General A19-1A	For the Period: 01/01/12 - 06/30/12	FPRH ST ADMIN-CONTRACTS (TX MATCH):

Task Number	Task/Activity/Description	*May Support PHP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<p>The LHI must provide medical, laboratory, and related services specified in the Title X Guidelines, the PPRH Manual, and state laws. The LHI must provide a broad range of acceptable and medically approved family planning methods and services either on-site or by referral. The LHI should make available to clients all methods of contraception approved by the Food and Drug Administration.</p> <p>The LHI must provide community education services based on the needs of the community.</p>			<p><u>Final Billing:</u> Due: 07/29/12</p> <p><u>For the Period:</u> 07/01/12 -- 12/31/12</p> <p><u>Final Billing:</u> Due: 01/31/13</p>	<p>\$30,962</p> <p>PPRH ST ADMIN- CONTRACTS (TX MATCH): \$29,441</p>
1.3	<p>Non-Title X Client Data The LHI must provide FPRH with client service data not included in the Title X project. The data must include:</p> <ol style="list-style-type: none"> 1. Unduplicated clients served by race/ethnicity, sex, and age. 2. Unduplicated clients served by federal poverty level, sex, and age. 3. Visit data by initial exams, annual exams, and other selected services. 4. Unduplicated clients by initial exams, annual exams, sex, and age. 5. Unduplicated female clients by primary contraceptive methods used after visit and age. 6. Unduplicated clients by primary source of payment. 7. Visits by category. 8. Unduplicated clients who had limited English proficiency skills. 9. Unduplicated clients who were uninsured. <p>The LHI must submit data in the same structure as on the report forms provided by FPRH. Other report formats FPRH will accept are:</p> <ol style="list-style-type: none"> 1. Raw data files submitted to the FPRH data analyst. 2. Visit records submitted through the Region X Family Planning Reporting System (Ahlers). 3. Aggregate data submitted to FPRH on reports generated from the LHI's in-house data system. 		<p>Submit: Client Data</p>	<p><u>Previous Quarter:</u> Due: 15th of the month</p> <p>Quarters are designated as: January-March April-June July-September October-December</p>	

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.4	<p>The LHI must also respond to requests from FPRH for data that FPRH must provide to the Legislature or the DOH.</p> <p>Surgical Services (FPRH Manual 3210)</p> <p>The LHI must provide surgical services as outlined below.</p> <p>The LHI must set aside a minimum of 5 percent of State medical funds to provide surgical services and/or other ambulatory procedures to eligible clients.</p> <p>The LHI's Title X project must comply with all federal regulations applying to pregnancy terminations and sterilization procedures, and with the FPRH Manual #3210.</p> <p>Exceptions may be applied for in writing for consideration on a case-by-case basis. The LHI must notify FPRH in writing within 30 days of implementation of this contract if all surgical services and/or ambulatory procedures cannot be provided. In this event, FPRH reserves the right to reallocate a portion of the funds for provision of surgical services to another program within the same geographic area.</p> <p>The LHI must inform all surgical service providers of applicable billing and reimbursement procedures.</p> <p>The LHI must obtain formal subcontracts and/or provider agreements when feasible. When surgical service providers are unwilling to sign a subcontract or provider agreement. Documentation of the refusal must be kept on file.</p> <p>Payment for surgical services under this contract constitutes full payment.</p> <p>The LHI shall not seek additional payment from the client, physician, hospital or other provider. Surgical procedure reimbursement rates are based on HRSA</p>		<p>Submit: Surgical A19-1A and Attachment A with fee for services and Health Insurance Claim Form for each client.</p>	<p>For the Period: 01/01/12 – 06/30/12</p> <p>Final Billing: Due: 07/29/12</p> <p>For the Period: 07/01/12 – 12/31/12</p> <p>Final Billing: Due: 01/31/13</p>	<p>Surgical: \$0</p> <p>Surgical: \$0</p>

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.5	<p>Equipment (FPRH Manual 4300, 4310, 45CFR74, Subpart C)</p> <p>The LHJ must use the following procedures when using federal funds to purchase equipment with a unit cost of \$5,000 or more:</p> <ul style="list-style-type: none"> • Itemize the equipment in the budget. • Receive approval from FPRH prior to purchase. <p>Approval of the budget will constitute prior approval for itemized items only.</p> <ul style="list-style-type: none"> • Maintain property records and perform bi-annual property inventories for property purchased, in whole or part, with state funds. 		<p>Submit: Annual Equipment Inventory</p>	<p>For the Period: 01/01/12 – 12/31/12 Due: 01/31/13</p>	
1.6	<p>Annual Plan (a.k.a. annual grant application) (FPRH Manual 3310)</p> <p>The LHJ must submit a grant application that is equivalent to an annual plan to FPRH. (FPRH will provide the application forms and instructions.)</p>		<p>Submit: FPRH 2013 Grant Application</p>	<p>For the Period: 01/01/13 – 12/31/13 Due: 07/08/12</p>	
2.0	<p>Federal Title X Funds (All funds within the 2. task series are subject to the Special Funding Requirements)</p> <p>In addition to adhering to the terms of Section 1.1, State Funded Services, LHJs must also comply with the Title X Program Guidelines for Project Grants for Family Planning Services. (2001)</p>		<p>Submit: Reimbursement Workbook (a.k.a. R&E) that shows each Federal funding source</p>	<p>For the Period: 01/01/12 – 06/30/12 Due: 08/31/12</p> <p>For the Period: 07/01/12 – 12/31/12 Due: 01/31/13</p>	
2.1	<p>Scope of Services (FPRH Manual 3320, Title X Guidelines 5.1, 6.1)</p> <p>The LHJ must participate in the Region X Infertility Prevention Project, or use other funds to provide the</p>		<p>Submit: General A19-1A Submit: Clinic Visit Records</p>	<p>For the Period: 01/01/12 - 12/31/12</p> <p>Final Billing: Due: 01/31/13</p>	<p>FFY12 FPRH TX ADMIN-CONTRACTS \$29,750 \$44,262</p>

Task Number	Task/Activity/Description	*May Support HIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<p>equivalent or higher level of screening, treatment, and education.</p> <p>The LHJ's Title X project must comply with all Client Visit Record (CVR) and data reporting requirements specified in the CVR Manual. Clinics which keep CVR information as computerized data must keep hard copy CVRs in the client's medical record, as specified; or, if the LHJ elects to keep this information solely as computerized data, the computer system must be subject to normal safety precautions against the loss of information. Data entry personnel are subject to the rules of confidentiality as specified in this Contract and the Title X Program Guidelines, and all information must be capable of being retrieved and audited by monitor visits.</p> <p>The LHJ must not provide abortion as a method of family planning. (42CFR59.5(5))</p> <p>The LHJ must inform staff that they may be subject to prosecution under Federal law if they coerce or endeavor to coerce any person to undergo abortion or sterilizations.</p> <p>The LHJ must have written policies regarding access to timely quality language assistance services to limited English proficient persons that are consistent with the Office of Civil Rights Policy Guidance on Prohibitions Against National Origin Discrimination As It Affects Persons with Limited English Proficiency.</p>		<p>(CVRs) to Region X Family Planning Reporting System</p>	<p>Previous month: Due: 15th of the month</p>	
2.2	<p>Federal Title X Family Planning Annual Report (FPAR) (FPRH Manual 3330, Title X Guidelines 6.2, 6.6)</p> <p>The LHJ must complete and submit the Federal Title X Family Planning Annual Report to FPRH on an annual basis. The LHJ must use the forms provided by FPRH.</p>		<p>Submit: Fiscal Data Client Data</p>	<p>For the Period: 01/01/12 - 12/31/12 Due: 02/03/13</p> <p>For the Period: 12/01/11 - 11/31/12 Due: 02/03/13</p>	

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
2.3	Staff Training (FPRH Manual 3600 and Title X guideline 6.2) The LHJ must provide staff training as specified in the FPRH Manual. Funds provided for this purpose are in addition to service funds and may not be used to supplant local service or other training funds. Any portion of said funds not expended per the FPRH Manual may be moved to Continuation (task 2.1) with approval from FPRH assigned Site Consultant by e-mail.		Submit: General A19-1A Submit: Training Report Form to be provided by FPRH	For the Period: 01/01/12 - 12/31/12 Final Billing: Due: 01/31/13 For the Period: 01/01/12 - 12/31/12 Final Billing: Due: 01/31/13	Training: \$0
2.4	Annual Plan (also known as annual grant application) (FPRH Manual 3100-3310, Title X Guidelines 6.2) The LHJ must submit a grant application which is equivalent to an annual plan to FPRH annually. FPRH will provide the application forms and instructions.		Submit: FPRH Grant Application	For the Period: 01/01/13 - 12/31/13 Due: 07/08/12	

***For Information Only:**

Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other revised Standards/Measures that may apply, can be found at: <http://www.doh.wa.gov/PublicHealthandHealthcareProviders/PublicHealthSystemResourcesandServices/PublicHealthImprovementPartnershipPHIPResourceCatalog/Standards.aspx>

Program Specific Requirements/Narrative

This section is for program specific information not included elsewhere.

Special Requirements:

Federal Funding Accountability and Transparency Act (FFATA)

This statement of work is supported by federal funds that require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how the federal funds are spent.

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Data Universal Numbering System (DUNS®) number.

Information about the LHJ and this statement of work will be made available on <http://USASpending.gov> by DOH as required by P.L. 109-282.

Assurances / Certifications
FORM E Assurances

Audits

The LHJ must make State financial and program audits or reviews conducted by other entities available to the DOH, FPRH or its designee.

Accessibility of Services
(FPRH Manual 5500, Title X Guidelines 6.4)

The LHJ must ensure that all services provided are accessible to target populations.

The community must be informed of available services by the LHJ.

Services must be provided solely on a voluntary basis. Acceptance of family planning services must not be a prerequisite to eligibility for, or receipt of, services in any non-family planning programs of the LHJ.

Services must be delivered without discrimination against people who have AIDS, are perceived to have AIDS, are related to or residing with someone with AIDS, have tested positive for the HIV antibody, or are perceived to be at high risk for contracting HIV.

Services should be available at times convenient to those seeking services.

Clients must be accepted upon referral from any source.

Adolescents and low-and marginal-income clients must receive priority in the provision of services.

Facilities must be geographically accessible to the populations served.

Clinic setting(s) must ensure respect for the privacy and the dignity of the individual.

Clinics must be handicapped-accessible in accordance with federal and state laws, policies, and procedures.

Facilities must meet applicable standards established by the Federal, State, and local governments. (e.g., local fire, building, and licensing codes)

The LHJ must have written plans and procedures for the management of emergencies.

Availability of Emergency Services
(FPRH Manual 6800)

The LHJ must have written plans and procedures management of on-site medical emergencies and emergencies requiring ambulance services and transport to a medical facility. The LHJ must inform clients of after-hours emergency procedures by means of the interview process, posters, or written instructions.

Billing Requirements

If family planning funds are awarded under this statement of work, the following will also apply:

The LHJ must bill Family Planning state funded eligible surgical services on a fee-for-service basis using the A-19-1A Surgical Summary Form accompanied by Attachment A (surgical summary form) for each client. Surgical procedure reimbursement rates are based on DSHS Medicaid approved reimbursement amounts.

Reimbursement report:

Enter revenue and corresponding expense (which are the same number) data by month for the Title X, State, and Other sections on the workbook. (Data included in this report needs to be supported by your accounting system)

Client Referral List
(FPRH Manual 6600)

The LHJ must maintain an updated list of public and private social and health care providers and agencies to use in providing referrals.

Definitions

“FPRH” means Family Planning, a unit in the Washington State Department of Health.

“State” means State funded services.

“Title X Project” means services funded by Title X federal funds plus grant generated income.

“Grant Generated Income” means all state dollars used in the Title X Project for clinical services, community education, training, and audits, and all client fees, insurance reimbursements, Take Charge reimbursements, other Medicaid reimbursements, and other sources of income generated through the provision of Title X Project-related services. Title X Project-related services do not include sterilizations, abortions, or any flat-rated services, (e.g., some STD, or HIV testing).

“Placeholder” is an estimated budget amount to provide enough contract authority to spend funds subject to Special Funding Requirements while the contract amendment is being processed to reflect actual amount awarded.

Financial Management

The LHJ must maintain a financial management system that is consistent with generally accepted accounting principles (GAAP) and meets the financial requirements outlined below and specified in federal and state laws.

In light of high client need, the LHJ agrees to maintain, to the best of its ability, its current level of revenue contributions, and will make best efforts to increase these contributions in the future.

LHJs using State medical funds in more than one clinic site must have a documented method of allocating funds to the sites.

The LHJ must maintain documentation of all revenues and expenditures.

The LHJ must revise the contract budget as outlined below:

- All changes in categories that exceed 10 percent of the category total require FPRH approval, a budget revision, a contract amendment and/or a letter of authority prior to the end of the contract.
- Budget changes in this contract may be made without DOH contracting officer’s approval, provided that DOH program staff and the LHJ approve a written Letter of Authority specifying the changes, AND, the total maximum consideration for the statement of work is not increased or decreased as a result of the change, and/or the change results in an offsetting transfer of funds between expenditure categories.

The LHJ must implement policies and procedures for charging, billing, and collecting fees for services provided.

The LHJ must establish fees for services based on the cost of the service provided (cost analysis). The LHJ must establish a discount schedule in accordance with Title X Guidelines and the FPRH Manual.

The LHJ must not deny services to potential clients who are unable to pay.

The LHJ must not charge clients with incomes at or below 100 percent of the most recent federal poverty level guidelines.

The LHI must assess and document each prospective client's eligibility for third party reimbursement.

Surgical services provided under this agreement must be billed at the provider's usual and customary fee. The LHI must inform all providers of the billing and reimbursement procedures.

In addition to complying with those terms defined in the "Treatment and Assets" clause of the General Terms and Conditions, the LHI must:

- Maintain property records and perform bi-annual property inventories for property purchased, in whole or part, with state or federal funds.
- Maintain property control systems to prevent loss, damage, or theft of equipment purchased with state funds.
- Use the following procedures when using state or federal funds to purchase equipment with a unit cost of \$5,000 or more:
 - Itemize the equipment in the LHI's budget.
 - Receive approval from FPRH prior to purchase.
 - Approval of the budget will constitute prior approval for itemized items only.
 - Include the equipment purchased with state or federal funds on the annual equipment inventory submitted to FPRH.

The LHI may submit monthly, quarterly, or biannually the A19-1A (invoice voucher) so long as it meets the submission deadline listed by each funding source in the tasks. Failure to do so may result in non-payment.

Funding availability is limited by the period listed by each funding category. In most cases funds cannot be carried over, therefore funds should be used in the designated period.

The State of Washington, the DOH, and FPRH assumes no liability for complications resulting from a procedure paid for by funds awarded under this statement of work and performed for a client by the LHI or other provider. FPRH has, however, established an emergency care fund to assist the LHI, and/or other providers in providing services to clients in need of emergency follow-up care. FPRH may reimburse the LHI for complications resulting from a specific procedure performed for a client of the LHI and paid for by project funds, subject to the following conditions:

- Sufficient emergency care funds are available.
- The client is eligible for state subsidized services. If more than six (6) months have elapsed since the last eligibility determination, the LHI must be re-determine client eligible to qualify for emergency care assistance.
- The need for follow-up care is identified and services are provided within the designated time period after the initial procedure is performed, as specified by the FPRH Manual.
- The clinician performing the procedure states to the LHI in writing that the complications were related to the specific procedure and not to pre-existing conditions.
- A written second medical opinion is provided in advance if additional treatment or surgery is required after initial treatment of the complication. The client must provide to the LHI a copy of the second opinion prior to additional treatment.

The LHI's medical advisory committee must approve the physician providing the written second opinion as specified above.

Medical Director
(FPRH Manual 6100)

The medical care component of the project must operate under written protocols that are signed by the medical director who has special training and/or experience in family planning.

Monitoring Visits

LHJs are on a three-year monitoring cycle.

Personnel Policies
(FPRH Manual 3580)

The LHJ must establish and maintain written personnel policies that comply with federal and state requirements.

Reports

(FPRH 3390; Title X Guidelines, 3.4)

The LHJ must submit all reports specified by the FPRH, using forms as indicated.

In accordance with the late report penalty policy issued by FPRH and subsequent revisions, when required reports or documents are submitted late, FPRH reserves the right to withhold payment until receipt of required report or document, and/or reduce the total amount awarded.

Restrictions on Funds

The LHJ must not use Federal Title X funds to provide or arrange for pregnancy terminations.

Review of Informational and Educational Materials

(Title X Guidelines 6.8)

The LHJ's Title X project must have a documented process for including community participation in the review and approval of informational and educational materials developed by, or made available under, the project. The review process must ensure that materials are suitable for the population or community for which they are intended, factually accurate, and appropriate for the purposes of Title X. The committee, which must consist of 5-9 members (Title X 6.8), may delegate responsibility for the review of factual, technical, and clinical accuracy to appropriate project staff.

The LHJ must comply with all federal Title X and Family Planning requirements, policies and regulations, as well as adhere to the requirements and provisions in the currently approved proposal submitted to FPRH for this statement of work period.

Special Funding Requirements

Payment for deliverables as specified herein is dependent on receipt of funding from the federal or state funding sources. In the event funding associated with the deliverables is not received DOH is under no obligation to make payments for the deliverables as specified. If funding is reduced or limited in any way after the effective date of this statement of work and prior to normal completion DOH may terminate task(s), remove funds, or reallocate funds at DOH's discretion under new funding limitations and conditions. DOH may make payments only upon the receipt of the funding. DOH will notify the LHJ within 7 working days upon notice by the funding source of funding availability.

Special References

See FP Manual, Chapter 1, Section 1500

See Form E, Projected Expenditures for Title X Project.

Staffing Requirements

(Title X 6.5, 6.8, 6.9)

The Project must be administered by a qualified program director.

Structure and Responsibilities of Policy Board

The LHJ must have a policy setting board (Board) with a membership that is broadly representative of the community.

The Board must:

- Operate under bylaws, or policies (as appropriate), that include a statement of the purpose of the program, a definition of the relationship between the Board and executive director/program coordinator, criteria and methods for selecting members and officers, and the frequency of meetings.
- Hold regularly scheduled meetings, at least annually. The LHJ must record and provide documentation upon request.

DOH Program Contact

~~Carole Stimmer~~ *Carol Oakes*

Department of Health

PO Box 47880

Olympia, WA 98504-7880

~~carole.stimmer@doh.wa.gov~~

~~(360) 236-3454~~

carol.oakes@doh.wa.gov

(360) 236-3588

Exhibit A
Statement of Work
Contract Term: 2012-2014

DOH Program Name or Title: Public Health Emergency Preparedness & Response (PHEPR) – Effective August 10, 2012

Local Health Jurisdiction Name: Jefferson County Public Health

Contract Number: C16887

SOW Type: Revision Revision # (for this SOW) 1

Period of Performance: August 10, 2012 through June 30, 2013

<input checked="" type="checkbox"/> Funding Source	<input checked="" type="checkbox"/> Federal Compliance (if applicable)	<input checked="" type="checkbox"/> Type of Payment
<input type="checkbox"/> Federal Subrecipient	<input type="checkbox"/> ARRA (Recovery Act)	<input checked="" type="checkbox"/> Reimbursement
<input type="checkbox"/> State	<input checked="" type="checkbox"/> FFATA (Transparency Act)	<input type="checkbox"/> Fixed Price
<input type="checkbox"/> Other		

Statement of Work Purpose: The purpose of this statement of work is to provide funding for Public Health Emergency Preparedness and Response activities for the period of August 10, 2012 through June 30, 2013.

Revision Purpose: The purpose of this revision is to change the deliverable due date for Task Number 8 various to April 15, 2013.

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only) Start Date End Date	Current Consideration	Change None	Total Consideration
FFY12 PHEPR LHJ FUNDING	93.069	333.93.06	18101272	08/10/12 06/30/13	35,408		35,408
TOTALS					35,408		35,408

FFY12 PHEPR LHJ FUNDING:

Task Number	Task/Activity Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.2.PI	Participate in healthcare coalition and other preparedness / mutual aid partnerships.		Submit progress report that includes meeting dates, attendees, discussion topics, and decisions made.	12/30/12 06/30/13	Reimbursement for costs, not to exceed total funding consideration amount.
1.4.SI	Work with Regional Learning Specialists (RLS) on providing preparedness and response training and educational opportunities to regional public health staff and partners as appropriate.		Submit training information to RLS. Regional training records submitted by Kitsap.	06/30/13	
3.1.P1, P2, SI	Task 1: Work with Regional Emergency Response Coordinator (RERC) on plan updates.		Submit all edits to RERC. Regional deliverable submitted by Kitsap County.	06/30/13	
3.2.P1, SI	Task 2: Report National Incident Management System (NIMS) compliance activities as an individual entity using the online reporting tool provided by the DOH.		Submit NIMS report using the online tool provided by DOI	06/30/13	

AMENDMENT #5

Task Number	Task/Activity Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
3.5.P1	Exercise new demobilization procedures and other gaps as applicable.		Submit after action report and corrective action plan.	06/30/13	
3.2.E2, E3	Participate in quarterly regional communications test		Submit test results to Kitsap County. Regional deliverable submitted by Kitsap County.	12/30/12 06/30/13	
4.1.E3 and 13.1.E1, E2, E3	Task 1: Be available 24/7 for urgent or emergency issues and participate in regular state-initiated testing.		Provide DOH with current agency emergency phone numbers.	06/30/13	
4.1.E3	Task 2: Maintain a data steward to ensure access to state 24/7 information resources.		Submit name of data steward	06/30/13	
4.1.E3 and 13.1.E1, E2, E3	Maintain local system to provide information and warnings to community and response partners.		Submit log of alerts and warnings.	12/30/12 06/30/13	
7.2.P1, E1 / 7.3.P1, P2, P3, P4, P5 / 7.4.P1, P2	Participate in regional meeting(s) with stakeholders in mass care operations, to include Department of Emergency Management (DEM) and Red Cross, to discuss public health's role in mass care.		Regional deliverable submitted by Kitsap County	06/30/13	
8. Various / 9.1.P3 / 9.2.S4 9.3.P1 / 9.6.P1, P2, S1	Task 1: Work with RERC on local Technical Assistance Review (TAR)		Regional deliverable submitted by Kitsap County	05-15-13 04-15-13	
			Submit all documents to be reviewed to the regional and/or state Strategic National Stockpile (SNS) coordinator		
			State DOH PHEPR program will provide feedback to each non-Cities Readiness Initiative (CRI) LHI.		
			Submit all edits to RERC.	06/30/13	
8. Various / 9.1.P3 / 9.2.S4 9.3.P1 / 9.6.P1, P2, S1	Task 2: Work with RERC on updates to regional emergency medical resources plan.		Regional deliverable submitted by Kitsap County.	06/30/13	
10.3.P2	Assist with development of regional at-risk resources/organization list.		Submit progress report that describes activities taken to assist with regional list.	06/30/13	
13.1.P6, E1, E2	Provide input on existing regional surveillance tools to Kitsap.		Submit progress report that includes jurisdictional participants, discussion topics, outcomes, and next steps.	12/30/12 06/30/13	

***For Information Only:**

Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other revised Standards/Measures that may apply, can be found at: <http://www.doh.wa.gov/PublicHealthandHealthcareProviders/PublicHealthSystemResourcesandServices/PublicHealthImprovementPartnershipPHIP/ResourceCatalog/Standards.aspx>

Program Specific Requirements/Narrative

Special Requirements:

Federal Funding Accountability and Transparency Act (FFATA)

This statement of work is supported by federal funds that require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how the federal funds are spent.

To comply with this act and be eligible to perform the activities in this statement of work, the LHI must have a Data Universal Numbering System (DUNS®) number.

Information about the LHI and this statement of work will be made available on <http://USASpending.gov> by DOH as required by P.L. 109-282.

DOH Program Contact:

Brad Halstead, Finance Analyst
Department of Health
PO Box 47890, Olympia, WA 98504-7890
brad.halstead@doh.wa.gov
PHEPR Deliverable Submission: concondeliverables@doh.wa.gov
360-236-4054

Exhibit A
Statement of Work
Contract Term: 2012-2014

DOH Program Name or Title: Recreational Shellfish Activities -

Effective January 1, 2012

Local Health Jurisdiction Name: Jefferson County Public Health

Contract Number: C16887

SOW Type: Revision Revision # (for this SOW) 1

Period of Performance: January 1, 2012 through June 30, 2013

Statement of Work Purpose: The purpose of this statement of work is to provide funds for shellfish harvesting safety.

Revision Purpose: The purpose of this revision is to add additional funds to meet an increased demand for monitoring biotoxins.

Funding Source <input type="checkbox"/> Federal <Select One> <input checked="" type="checkbox"/> State <input type="checkbox"/> Other	Federal Compliance (if applicable) <input type="checkbox"/> ARRA (Recovery Act) <input type="checkbox"/> FFATA (Transparency Act)	Type of Payment <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only) Start Date End Date	Current Consideration	Change Increase (+)	Total Consideration
Rec Shellfish / Biotoxin (PSAA)	N/A	334.04.93	26403600	01/01/12 06/30/13	5,100	3,500	8,600
TOTALS					5,100	3,500	8,600

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Biotoxin Monitoring <ul style="list-style-type: none"> Collect samples on schedule according to Department of Health (DOH) Biotoxin Monitoring Plan, coordinate deviations from the schedule with DOH, notify DOH in advance if samples cannot be collected. Post / remove recreational shellfish warning and / or classification signs on beaches and restock cages as needed. This may also include recruiting, training, and coordination of volunteers. 		Submit report on DOH approved format of activities for the year, including the number and names of beaches posted for classification.	Email Report to DOH by: 02/15/13	\$4,000 \$7,000
2	Outreach <ul style="list-style-type: none"> Staff educational booths at local events. Distribute safe shellfish harvesting information. 		Submit report including the number of events staff, and amount of educational materials distributed.	Email Report to DOH by: 02/15/13	\$1,400 \$1,600

***For Information Only:**

Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other revised Standards/Measures that may apply, can be found at: <http://www.doh.wa.gov/PublicHealthandHealthcareProviders/PublicHealthSystemResourcesandServices/PublicHealthImprovementPartnership111?ResourceCatalog/Standards.aspx>

Program Specific Requirements/Narrative

This section is for program specific information not included elsewhere.

Program Manual, Handbook, Policy References
Department of Health's Biotoxin Monitoring Plan

Special References (RCWs, WACs, etc)

Chapter 246-280 WAC

<http://www.doh.wa.gov/ehp/sf/recshell.htm>

<http://www.doh.wa.gov/ehp/sf/BiotoxinProgram.htm>

Special Instructions

Report for work done the previous year must be submitted via email to Greg Combs by February 15th each year.

The report format will be provided by DOH and may be modified throughout the contract period via email announcement.

DOH Program Contact (Name, Program Title, Mailing Address, Email Address, Phone & Fax Number)

Greg Combs, Office of Shellfish and Water Protection, PO Box 47824, Olympia WA 98504-7824; 360.236.3380; Greg.Combs@doh.wa.gov

Chart of Accounts Program Title	Amendment	CFDA*	Code*	Statement of Work		DOH Use Only		Amount	Funding		Chart of Accounts Total
				Start Date	End Date	Start Date	End Date		Period	Sub Total	
USDA WIC Breastfeeding	N/A	10.557	333.10.55	01/01/12	09/30/12	10/01/11	09/30/12	\$3,341			
USDA WIC Breastfeeding	Amend 1	10.557	333.10.55	01/01/12	09/30/12	10/01/11	09/30/12	(\$617)		\$2,724	
USDA WIC Breastfeeding	N/A	10.557	333.10.55	10/01/12	09/30/13	10/01/12	09/30/13	\$3,640		\$3,640	
USDA WIC Breastfeeding	N/A	10.557	333.10.55	10/01/13	12/31/13	10/01/13	12/31/13	\$917		\$917	\$7,281
USDA WIC Nutrition & Local Support	N/A	10.557	333.10.55	01/01/12	09/30/12	10/01/11	09/30/12	\$71,325			
USDA WIC Nutrition & Local Support	Amend 2	10.557	333.10.55	01/01/12	09/30/12	10/01/11	09/30/12	\$2,775		\$74,100	
USDA WIC Nutrition & Local Support	N/A	10.557	333.10.55	10/01/12	09/30/13	10/01/12	09/30/13	\$95,100			
USDA WIC Nutrition & Local Support	Amend 2	10.557	333.10.55	10/01/12	09/30/13	10/01/12	09/30/13	\$5,550		\$100,650	
USDA WIC Nutrition & Local Support	N/A	10.557	333.10.55	10/01/13	12/31/13	10/01/13	12/31/13	\$23,775			
USDA WIC Nutrition & Local Support	Amend 2	10.557	333.10.55	10/01/13	12/31/13	10/01/13	12/31/13	\$1,388		\$25,163	\$199,913
USDA FMAP Admin	Amend 3	10.572	333.10.57	01/01/12	09/30/12	10/01/11	09/30/12	\$140		\$140	\$140
Onsite Sewage Management - NIEP	Amend 1	66.123	333.66.12	01/17/12	10/15/13	07/01/11	01/31/17	\$130,000		\$130,000	\$130,000
Swimming Beach - NIEP	Amend 1	66.123	333.66.12	03/01/12	10/31/12	01/01/12	01/30/17	\$7,553		\$7,553	\$7,553
Drinking Water Group A - SS	N/A	66.468	333.66.46	01/01/12	12/31/12	07/01/11	06/30/13	\$2,250		\$2,250	\$2,250
Drinking Water Group A - TA	N/A	66.468	333.66.46	01/01/12	12/31/12	07/01/11	06/30/13	\$3,000		\$3,000	\$3,000
PHEPR LHJ Funding FFY11	N/A	93.069	333.93.06	01/01/12	08/09/12	08/10/11	08/09/12	\$17,704			
PHEPR LHJ Funding FFY11	Amend 2	93.069	333.93.06	01/01/12	08/09/12	08/10/11	08/09/12	\$6,581		\$24,285	
PHEPR LHJ Funding FFY12	Amend 4	93.069	333.93.06	08/10/12	06/30/13	07/01/12	06/30/13	\$35,408		\$35,408	\$59,693
PPRH TX Admin-Contracts FFY12	N/A	93.217	333.93.21	01/01/12	12/30/12	12/31/11	12/30/12	\$29,730			
PPRH TX Admin-Contracts FFY12	Amend 5	93.217	333.93.21	01/01/12	12/30/12	12/31/11	12/30/12	\$14,532		\$44,262	\$44,262
AFIX	N/A	93.268	333.93.26	01/01/12	12/31/12	01/01/12	12/31/12	\$5,847		\$5,847	\$5,847
317 Ops	N/A	93.268	333.93.26	01/01/12	12/31/12	01/01/12	12/31/12	\$1,470		\$1,470	\$1,470
WFC Ops	N/A	93.268	333.93.26	01/01/12	12/31/12	01/01/12	12/31/12	\$2,662		\$2,662	\$2,662
PHEPR HC Systems-Prep	Amend 1	93.889	333.93.88	01/01/12	06/30/12	07/01/11	06/30/12	\$3,353		\$3,353	\$3,353

Chart of Accounts Program Title	Amendment	CFDA*	BARS Revenue Code*	Statement of Work			DOH Use Only			Amount	Funding Period Sub Total	Chart of Accounts Total
				Start Date	End Date	Funding Period	Start Date	End Date	Funding Period			
MCHBG HCO ConCon Federal	Amend 2	93.994	333.93.99	01/01/12	09/30/12	10/01/10	09/30/12		\$9,663	\$9,663		
MCHBG HCO ConCon Federal	N/A	93.994	333.93.99	01/01/12	12/31/12	10/01/11	09/30/13		\$28,990			
MCHBG HCO ConCon Federal	Amend 2	93.994	333.93.99	01/01/12	12/31/12	10/01/11	09/30/13		\$700	\$29,690	\$39,353	
FRH St Admin-Contracts (TX Match)	N/A	N/A	334.04.91	01/01/12	12/30/12	12/31/11	12/30/12		\$60,403	\$60,403	\$60,403	
GFS Local Capacity	Amend 1	N/A	334.04.92	01/01/12	06/30/12	07/01/11	06/30/13		\$19,184	\$19,184		
GFS Local Capacity	Amend 1	N/A	334.04.92	07/01/12	12/31/12	07/01/11	06/30/13		\$19,184	\$19,184	\$38,368	
PS OSS LMP Implementation Cleaning	N/A	N/A	334.04.93	01/01/12	06/30/13	07/01/11	06/30/13		\$66,000	\$66,000	\$66,000	
Rec Shellfish/Biotoxin (PSAA)	N/A	N/A	334.04.93	01/01/12	06/30/13	07/01/11	06/30/13		\$5,100			
Rec Shellfish/Biotoxin (PSAA)	Amend 5	N/A	334.04.93	01/01/12	06/30/13	07/01/11	06/30/13		\$3,500	\$8,600	\$8,600	
Youth Tobacco Prevention	N/A	N/A	334.04.93	01/01/12	06/30/12	07/01/11	06/30/13		\$1,855	\$1,855		
Youth Tobacco Prevention	Amend 3	N/A	334.04.93	07/01/12	06/30/13	07/01/11	06/30/13		\$4,480	\$4,480	\$6,335	
Drinking Water Group A - SS State	N/A	N/A	334.04.98	01/01/12	12/31/12	07/01/11	06/30/13		\$2,250	\$2,250	\$2,250	
Blue Ribbon Local Health Funds	Amend 1	N/A	334.04.99	09/09/09	09/09/09	09/09/09	09/09/09		\$30,000			
Blue Ribbon Local Health Funds	Amend 3	N/A	334.04.99	09/09/09	09/09/09	09/09/09	09/09/09		\$30,000	\$60,000	\$60,000	
TOTAL									\$748,733	\$748,733		
Total consideration:									\$730,701		\$748,733	
									\$18,032			
GRAND TOTAL									\$748,733		\$506,777	
											\$241,956	

*Catalog of Federal Domestic Assistance
**Federal revenue codes begin with "333", State revenue codes begin with "334".